

2016 PATH ANNUAL REPORT MANUAL



Prepared for:

Substance Abuse and Mental Health Services Administration

Center for Mental Health Services

Homeless Programs Branch

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SAMHSA's Homeless and Housing Resource Network

Table of Contents

Introduction.....	3
Background	3
Use of Report Information	3
Homeless Management Information Systems (HMIS) and PATH.....	4
Notes on Changes from Previous Report	4
Process for Obtaining and Submitting Data.....	5
PATH Annual Report Form.....	8
Contact Information	8
Opening the Annual Report.....	8
Reporting Period	8
Budget Information Section	9
Explanatory Notes	9
Persons Served During This Reporting Period	11
Explanatory Notes	11
Services Provided.....	13
Explanatory Notes	14
Referrals Provided.....	14
Explanatory Notes	14
Outcomes.....	15
Explanatory Notes	16
Demographics	17
Explanatory Notes	20
Reporting Burden.....	21
Data Checks/PDX Warnings.....	21
Definitions.....	22
General Terms	22
Services	23
Referrals	24
Chart A: Related HMIS Data Elements	26

Introduction

Background

The Projects for Assistance in Transition from Homelessness (PATH) program provides funds to each state, the District of Columbia, Puerto Rico, and the U.S. Territories of the Northern Mariana Islands, Guam, American Samoa, and the U.S. Virgin Islands to support services for individuals with a serious mental illness, as well as individuals with a serious mental illness and substance use disorder, who are experiencing homelessness or at risk of homelessness. Public Law 101-645, 42 U.S.C. 290cc-21, section 521 et seq. of the Public Health Service Act authorizes the PATH program.

Among the statutory requirements for state participation in the PATH program is the provision of annual reports. Section 528(a) of the Public Health Service Act specifies that the Secretary may not make payments to states under the program unless each state agrees that it will provide, on an annual basis, a report containing information to be necessary for:

- (1) “Securing a record and a description of the purposes for which amounts received under Section 521 were expended during the preceding fiscal year and of the recipients of such amounts; and
- (2) Determining whether such amounts were expended in accordance with the provisions of this part.”

To comply with federal requirements, provider organizations that receive funds under the program must report data relating to the implementation of the program. Each of the PATH-funded provider organizations, hereafter referred to as PATH providers, must report annual data using the PATH Data Exchange (PDX) online system.

Use of Report Information

The reporting of this information is a crucial component of the implementation and operation of the PATH program. Project officers within the Center for Mental Health Services, Homeless Programs Branch of the Substance Abuse and Mental Health Services Administration (SAMHSA) utilize the data to describe and evaluate the PATH program on a national basis and for essential program planning purposes. The data is also critical to maintaining program accountability and to assist in program monitoring.

The analysis of PATH data can help identify many features of the program. Among these items are the following:

- The types of services offered by PATH providers
- The number and characteristics of persons receiving services from PATH providers
- The contribution of PATH funds toward the support of services provided to persons who are experiencing homelessness and have a serious mental illness

Homeless Management Information Systems (HMIS) and PATH

The PATH program is a critical part of a community's system of care for individuals who experience homelessness or are at risk of homelessness, often providing people who are unsheltered a first step into a larger system of services and supports. Participation in Homeless Management Information Systems (HMIS) provides a platform for coordinating care and improving access to mainstream programs and housing resources. Given that one of the goals of the PATH program is linking clients to resources in the community, effective PATH provider participation in the community's HMIS will allow for more effective and streamlined referrals and easier tracking of clients' current needs.

SAMHSA expects states not already using HMIS to transition PATH providers to collecting data in their local HMIS by the end of their state FY 2016, with the aim of 100 percent participation by October 2016.

In June 2016, the U.S. Department of Housing and Urban Development (HUD) released an update to the [2014 HMIS Data Standards](#) which includes updates to PATH-specific data elements.

Chart A (beginning on page 26) outlines the current HMIS Universal Data Elements and PATH Program Specific Data Elements that are directly applicable to PATH provider data collection and reporting requirements.

Notes on Changes from Previous Report

1. Format

To create a PATH report that is easier to read and questions that are easier to understand, language has been made more concise and questions have been renumbered.

2. Homeless Management Information Systems (HMIS) data integration

SAMHSA and HUD have worked to align the PATH data elements with the 2014 HMIS Data Standards.

3. Staff training

An element has been added to the Budget section to collect information about the number of trainings provided by PATH-funded staff.

4. Number of persons served this reporting period

To decrease reporting burden and improve data quality, several revisions were made to the collection of information about persons contacted and persons enrolled. Data elements were updated to more clearly describe the data to be reported and reduce confusion and potential for misinterpretation. Information about persons contacted has been divided into two elements to collect specific information about the number of persons contacted under each HMIS project type for PATH (Street Outreach and Services Only).

5. Services provided

To improve data quality, several service category labels have been updated to more accurately reflect the type of service to be reported. The “Screening and Assessment” category has also been divided into two separate categories to capture specific information about screenings and clinical assessments provided by PATH staff. The “Total number of times this service was provided” column has been removed to reduce reporting burden.

6. Referrals provided

To improve data quality, several referral category labels have been updated to more accurately reflect the type of referral to be reported. The “Total number of times this type of referral was provided” column has been removed to reduce reporting burden.

7. Outcomes

Elements collecting information regarding PATH program outcomes have been added. The PATH program’s transition to using local HMIS to collect PATH client data allows data on client outcomes related to the PATH program to be more easily collected and reported.

8. Demographics

Response categories for demographic data elements have been updated to fully align with the 2014 HMIS Data Standards. An element to gather information about PATH clients’ connection to the SSI/SSDI Outreach, Access, and Recovery program (SOAR) has also been added.

To decrease reporting burden and improve the outreach and engagement process, demographic information for “Persons contacted” is no longer required for the PATH Annual Report. Providers are encouraged to gather information and build client records as early in the engagement process as possible. All demographic information should be collected by the point of PATH enrollment.

9. Definitions

Definitions for PATH terms have been updated to streamline definitions and increase reliability of data reporting.

Process for Obtaining and Submitting Data

PATH providers should generate a PATH data report from their local HMIS. The funding/budget data required for the PATH Annual Report must be collected separately.

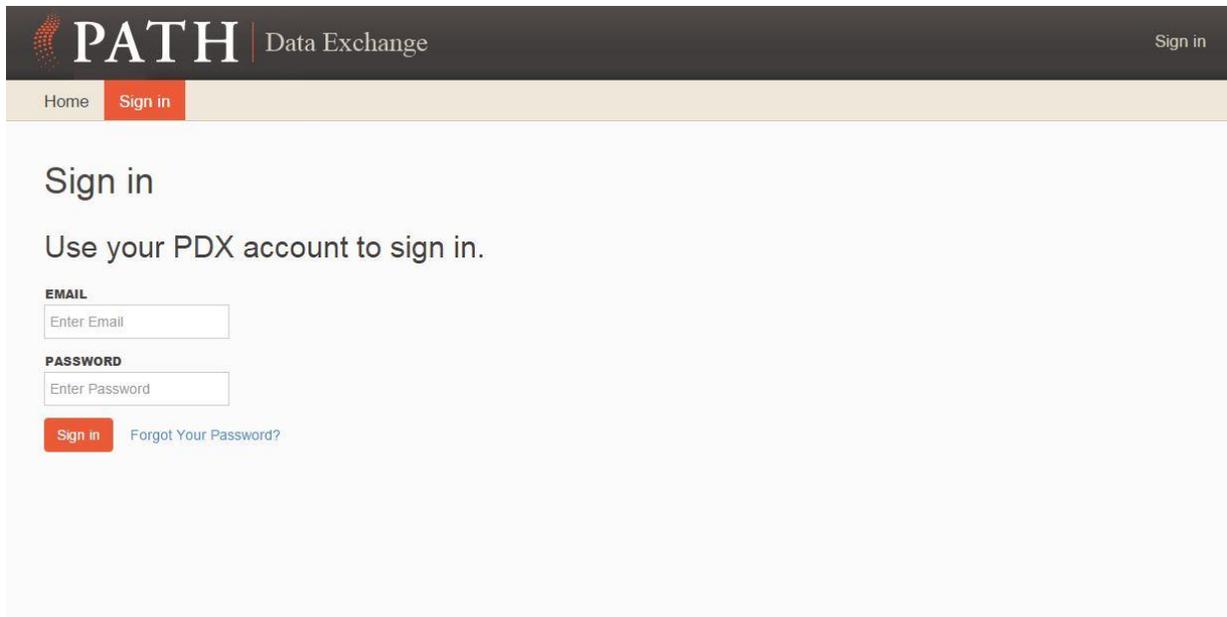
The State PATH Contact (SPC) is the primary resource for guidance regarding PATH data and the process for submitting data for the PATH Annual Report. The details of the process will vary depending on the particular HMIS solution. The following is a brief high-level process description:

1. PATH providers generate a PATH data report from their local HMIS. This may be done by the providers themselves or through the local HMIS system administrator. Please note that the reporting period is the 12-month period for which providers submit data. The

SPC determines the reporting dates. Providers should contact their SPC with questions regarding the reporting dates for their state/territory.

2. PATH providers log into the PATH Data Exchange (PDX) at www.pathpdx.org. Once logged into the system, select “Open Annual Report” to begin the current year’s report.
 - a. An individual at the PATH provider level can request a PDX account from another PDX user at their agency or from the SPC.
 - b. SPCs can create PDX user accounts for users at any PATH provider agency in the state/territory, and can create accounts for additional users at the state level. SPCs who do not have a PDX user account should e-mail path@samhsa.hhs.gov to request an account.
3. The system will automatically save data that is entered and users can log off and return to complete the report at a later date.
4. The SPC will review each provider’s data and approve reports in PDX. Reports requiring corrections can be re-opened by SPCs and returned to providers for revisions. Providers must then review the data in HMIS, re-enter the data in PDX, and resubmit the report for the SPC’s review and approval.

Note: PDX User Guides for both PATH providers and SPCs can be downloaded from the [PDX Resources](#) page. These guides describe how to add new PDX users and how to complete and submit the PATH Annual Report.



The screenshot shows the top navigation bar of the PATH Data Exchange website. The logo 'PATH Data Exchange' is on the left, and a 'Sign in' link is on the right. Below the navigation bar is a secondary bar with 'Home' and 'Sign in' links. The main content area is titled 'Sign in' and contains the instruction 'Use your PDX account to sign in.' There are two input fields: 'EMAIL' with a placeholder 'Enter Email' and 'PASSWORD' with a placeholder 'Enter Password'. Below the password field is a red 'Sign in' button and a blue link for 'Forgot Your Password?'.

PATH Data Collection Process

Step 1	2	3	4	5	6
PATH provider enters client data into the local Homeless Management Information System (HMIS).	PATH provider generates PATH Annual Report data from HMIS (12 months of data).	PATH provider inputs provider-level data into the PATH Data Exchange (PDX) during the PATH annual reporting period.	PDX runs two tests as data is entered: <ul style="list-style-type: none"> • Validation tests ensure that the data entered aligns with the logic of the data elements. Reports cannot be submitted with validation errors. • “Warnings” identify atypical data. Providers must enter a comment in PDX to explain the atypical data. 	When all data fields are complete and validation errors and warnings are cleared, PATH provider submits the report in PDX.	State PATH Contact reviews all PATH provider reports; if errors are identified, State PATH Contact can re-open the provider’s report and request that the provider review the data in HMIS and make changes as needed.
7	8	9	10	11	
When the reports are finalized, State PATH Contact approves the reports in PDX.	Data from “Warnings” in PDX is reviewed by SAMHSA and contract staff. State PATH Contacts are contacted to obtain additional explanations and information as needed.	Data is finalized and data tables reflecting state-level and national PATH data are developed.	SAMHSA reports to Congress on national PATH data measures.	PATH receives funding from Congress to continue providing PATH services.	

PATH Annual Report Form

Contact Information

At the beginning of each reporting period, new and returning users should ensure that their contact information is up-to-date in PDX. To update existing information, follow the steps below:

1. Log in to the PDX website at www.pathpdx.org using your e-mail address and password.
2. Click on the “Users” tab, identify your name on the list, and click on the link on your first or last name. This will open your Contact Details page.
3. Make any necessary changes and click “Save” at the bottom of the screen.
4. If you have forgotten your PDX password, click on the “Forgot Your Password?” link on the PDX sign-in page. The system will prompt you to enter your e-mail address and will send a link to reset your password. If you do not receive the e-mail, check your junk mail folder. For additional assistance, please e-mail path@samhsa.hhs.gov and copy your State PATH Contact on the correspondence.

Opening the Annual Report

Open the report by selecting the blue hyperlink labeled “Open [year] Report” on the home tab in PDX (e.g., Open 2016 Report).

Reporting Period

The first item on the PATH Annual Report gathers information about the provider’s reporting dates. States set reporting period dates for their PATH providers. Contact your State PATH Contact if you have questions regarding your agency’s reporting dates.

For FY Beginning: Enter the first date of the reporting period. If the PATH provider submitted the PATH Annual Report in the previous year, this field automatically populates with the date used in the last PATH Annual Report. Ensure that this date is the start date for the PATH Annual Report reporting period. **Providers must notify their SPC if there is a change in reporting dates.**

For FY Ending: Enter the last date of the reporting period. If the PATH provider submitted a PATH Annual Report in the previous year, this field automatically populates with the date used in the last PATH Annual Report. Ensure that this date is the end date for the PATH Annual Report reporting period. **Providers must notify their SPC if there is a change in reporting dates.**

Note: Providers whose PATH contracts began or ended midway through the reporting period should adjust the report start and/or end dates to reflect the correct time period during which

PATH services were provided. The PDX system will require that a comment is entered to explain why the reporting dates differ from the default dates set by the SPC.

Budget Information Section

This section collects budget and staffing information for the PATH Annual Report. PATH providers must report actual budget values. Please contact your State PATH Contact for help with determining how to report funding information.

Budget Information (not collected in HMIS)
1. Federal PATH funds received this reporting year
2. Matching funds from state, local, or other sources used in support of PATH received this year
3. Total funds dedicated this year, agency wide, to persons who have serious mental illness and are experiencing homelessness or are at risk of homelessness (include PATH, matching, and non-PATH funds)
4. Number of staff supported by PATH and matching funds
5. Full-time equivalent (FTE) of staff supported by PATH and matching funds
6. Number of trainings provided by PATH-funded staff this reporting year
7. Type of organization in which your PATH program operates (select one)
7a. Community mental health center
7b. Consumer-run mental health agency
7c. Other mental health agency
7d. Social service agency
7e. Health Care for the Homeless/other health agency
7f. Substance use treatment agency
7g. Shelter or other temporary housing resource
7h. Other housing agency
7i. Other (please specify)

Explanatory Notes

1. Federal PATH funds received this reporting year: Enter the amount of federal PATH funds received from the state. Enter only the funds received during the reporting fiscal year. Do not include matching funds, non-PATH funds, or PATH funds from a previous reporting year. This amount must be greater than zero. Numbers should be rounded up to the nearest dollar.

2. Matching funds from state, local, or other sources used in support of PATH received this year: Enter the amount of matching PATH funds received or provided during the reporting fiscal year. Numbers should be rounded up to the nearest dollar. Per the PATH legislation, matching funds “may be in cash or in kind, fairly evaluated, including plant, equipment, or services. Amounts provided by the Federal Government, or services assisted or subsidized to any significant extent by the Federal Government, shall not be included in determining the amount of such non-Federal contributions.”

3. Total funds dedicated this year, agency wide, to persons who have serious mental illness and are experiencing homelessness or at risk of homelessness (include PATH, matching, and non-PATH funds): Enter the total dollar amount for services dedicated in the reporting fiscal year specifically to persons who are experiencing homelessness and have a serious mental illness. This amount should be the sum of federal PATH funds (#1), matching PATH funds (#2), and any other non-PATH funds dedicated to this population. This amount must be greater than zero. Numbers should be rounded up to the nearest dollar.

4. Number of staff supported by PATH funds and matching funds: Count any staff whose salary includes PATH federal or matching funds. This must be a whole number.

5. Full-time equivalent (FTE) of staff supported by PATH and matching funds: Calculate the FTE for each of the federal and/or matching PATH-supported staff reported in #4. **The total number of FTEs should not exceed the number of staff reported in #4 and may be a whole number or a decimal (please round to the nearest 10th, e.g., 0.1).** The number of FTEs cannot be zero if the number of PATH-supported staff is greater than zero.

The term FTE in the context of the PATH Annual Report represents the staff time required to provide and document services funded by PATH federal and matching funds. One FTE represents 40 hours of work per week for one year. One-half FTE represents 20 hours of work per week for one year. Include positions that are fully funded by PATH federal and matching funds and the PATH-funded fraction(s) of any position(s) partially funded by PATH federal and matching funds. Include positions that were occupied at any point during the reporting period. Determining the answer to #5 is a two-step process:

Step One: Determine the number of hours per week that a staff member spends performing PATH-funded work. Divide this number by 40 and round to the nearest 10th.

Example A: A staff member works 8 hours per week on PATH-funded tasks. The total hours of 8 divided by 40 is 0.2 FTE.

Example B: A staff member works 12.5 hours per week on PATH-funded tasks. The total hours of 12.5 divided by 40 is 0.3125. This staff member’s FTE (rounded) is 0.3.

Step Two: Once the FTE for each staff member is determined, sum the FTEs and enter the total in #5.

Example A: The two staff members in the examples above have FTEs of 0.2 and 0.3, respectively. Adding 0.2 and 0.3 equals 0.5. Record 0.5 for #5.

6. Number of trainings provided by PATH-funded staff this reporting year: Record the total number of trainings that PATH-funded staff members have provided to individuals at other

social service agencies. Note: This is a record of trainings *provided by* PATH-funded staff, and not a record of trainings that PATH-funded staff have attended. PATH providers are not required to provide this service to their communities. However, if PATH funds are used to provide this service, then the collection and reporting of this data is required.

7. Type of organization in which your PATH program operates: Select the option that best matches the primary purpose of the organization within which PATH operates. If the organization’s purpose does not match any of the options, select “Other” and enter a description of the organization type.

Persons Served During This Reporting Period

Number of unduplicated persons served during this reporting period
8. Number of persons contacted by PATH-funded staff this reporting period
9. Number of persons contacted this reporting period in a PATH Street Outreach project
10. Number of persons contacted this reporting period in a PATH Services Only project
11. Total number of persons contacted this reporting period (#9+#10)
12. Instances of contact, from first contact until the date of enrollment, for all active clients who became enrolled this reporting period
13. Number of persons contacted this reporting period who could not be enrolled because of ineligibility for PATH
14. Number of persons contacted this reporting period who became enrolled in PATH
15. Number with active, enrolled PATH status at any point during reporting period
16. Number of active, enrolled PATH clients receiving community mental health services through any funding source at any point during the reporting period

Explanatory Notes

All information reported should be based on persons served through both PATH federal and PATH matching funds. It is essential that PATH providers include accurate information on the number of persons receiving services. By utilizing HMIS data for reporting, it is expected that the annual reporting information will be an **unduplicated count** of persons for each element. A person may be counted in more than one element.

8. Number of persons contacted by PATH-funded staff this reporting period: This is the total count of individuals, regardless of PATH eligibility or enrollment, who were contacted by PATH-funded staff during this reporting period.

9. Number of persons contacted this reporting period in a PATH Street Outreach project:

Record all persons contacted this reporting period who are in a PATH Street Outreach project and did not have a PATH-enrolled status at the start of the reporting period. Persons should be counted regardless of PATH eligibility, enrollment, relocation, or decision to decline PATH services.

10. Number of persons contacted this reporting period in a PATH Services Only project:

Record all persons contacted this reporting period who are in a PATH Services Only project and did not have a PATH-enrolled status at the start of the reporting period. Persons should be counted regardless of PATH eligibility, enrollment, relocation, or decision to decline PATH services.

11. Total number of persons contacted this reporting period (#9+#10): This is the sum of all persons contacted this reporting period who did not have a PATH-enrolled status at the start of the reporting period (#9+#10).

PDX warning: A warning will appear in PDX if the data indicates zero persons contacted.
#11=0

12. Instances of contact, from first contact until the date of enrollment, for all active clients who became enrolled this reporting period: Record the total instances of contact that occurred from first contact until the date of enrollment for all active clients who became enrolled in PATH this reporting period. Note: All instances of contact with each PATH-enrolled individual should be counted and then summed for all individuals who became enrolled in PATH this reporting period.

13. Number of persons contacted this reporting period who could not be enrolled because of ineligibility for PATH: Of the total number of persons contacted (recorded in #11), record the number of persons who were not enrolled in PATH because of ineligibility for PATH (i.e., individual does not have a serious mental illness and/or is not experiencing homelessness or at risk of homelessness).

14. Number contacted who became enrolled in PATH: Of the total number of persons contacted this reporting period (recorded in #11), record the number of persons who became enrolled in PATH.

PDX warnings: A warning will appear in PDX if the data indicates that the percentage of eligible persons contacted who became enrolled in PATH is less than 46 percent. This percentage is based on PATH GPRA measure 3.4.17. PDX warning thresholds are set at 80 percent of the GPRA measure target. Thresholds may change as a result of GPRA target changes. *#14/(#11-#13)<0.46*

A warning will also appear if the data indicates that 100 percent of persons contacted became enrolled in PATH. *#11=#14*

15. Number with active, enrolled PATH status at any point during reporting period:

Record the total number of PATH-enrolled individuals who had an active record at any point during this reporting period. This includes individuals who were contacted/enrolled in a previous reporting period and continued to receive PATH services during this reporting period (i.e.,

“stayers” with at least one instance of contact or service), as well as those who were contacted and became enrolled during this reporting period.

PDX warning: A warning will appear in PDX if the data indicates that the number of persons enrolled has decreased by more than 50 percent since the previous year or increased by more than 100 percent since the previous year. $([#15 \text{ current year}] - [# \text{ enrolled in previous year}]) / [# \text{ enrolled in previous year}] = < -0.5 \text{ or } > 1.0$

16. Number of active, enrolled PATH clients receiving community mental health services through any funding source at any point during the reporting period: Of the number of PATH-enrolled individuals (recorded in #15), record the number who received community mental health services through any funding source at any point during the reporting period.

PDX warning: A warning will appear in PDX if the data indicates that the percentage of PATH-enrolled individuals who received community mental health services is less than 53 percent. This percentage is based on PATH GPRA measure 3.4.15. PDX warning thresholds are set at 80 percent of the GPRA measure target. Thresholds may change as a result of GPRA target changes. $\#16/\#15 < 0.53$

Services Provided

<p>17. Services Provided (unduplicated count of PATH-enrolled individuals only) Of those with an active, enrolled PATH status during this reporting period, which PATH-funded services did they receive?</p>
17a. <u>Reengagement</u>
17b. <u>Screening</u>
17c. <u>Clinical assessment</u>
17d. <u>Habilitation/rehabilitation</u>
17e. <u>Community mental health</u>
17f. <u>Substance use treatment</u>
17g. <u>Case management</u>
17h. <u>Residential supportive services</u>
17i. <u>Housing minor renovation</u>
17j. <u>Housing moving assistance</u>
17k. <u>Housing eligibility determination</u>
17l. <u>Security deposits</u>
17m. <u>One-time rent for eviction prevention</u>

Explanatory Notes

17. Services Provided (unduplicated count of PATH-enrolled individuals only): This table reports the unduplicated total number of enrolled PATH clients who received each PATH service during the reporting period. Individuals who received more than one type of service (e.g., clinical assessment and case management) should be recorded once in all service categories that apply.

Note: The “Reengagement” category on this table records the number of persons who received PATH outreach services after PATH enrollment (e.g., an individual who is enrolled in PATH became disconnected from PATH services and the PATH outreach worker contacted them through outreach during the period when the individual’s enrolled PATH record was still active).

Referrals Provided

18. Referrals Provided (unduplicated count of PATH-enrolled individuals only) Of those with an active, enrolled PATH status during this reporting period, which referrals did they receive? <i>Note: Referrals provided prior to PATH enrollment should not be counted here.</i>	18a. <u>Number receiving each referral</u>	18b. <u>Number who attained the service from the referral</u>
<u>Community mental health</u>	18a1.	18b1.
<u>Substance use treatment</u>	18a2.	18b2.
<u>Primary health/dental care</u>	18a3.	18b3.
<u>Temporary housing</u>	18a4.	18b4.
<u>Permanent housing</u>	18a5.	18b5.
<u>Income assistance</u>	18a6.	18b6.
<u>Employment assistance</u>	18a7.	18b7.
<u>Medical insurance</u>	18a8.	18b8.

Explanatory Notes

18a. Number of persons receiving each referral: For each referral category, record the number of PATH-enrolled individuals who received at least one referral. Individuals who received more than one type of referral (e.g., community mental health and substance use treatment) should be recorded once in each of the referral categories that apply.

18b. Number who attained the service from the referral: For each referral category, record the number of PATH-enrolled individuals reported in #18a who attained the service as a result of

the referral. Individuals who attained more than one type of service as a result of the referral should be recorded once in each of the referral categories that apply.

Outcomes

Outcomes (unduplicated count of PATH-enrolled individuals only) Of those with an active, enrolled PATH status during this reporting period, how many were receiving the items below at PATH project entry and at PATH project exit or at the end of the reporting period?	At PATH project entry	At PATH project exit (for clients who were exited from PATH this year – leavers)	At report end date (for clients who were still active in PATH as of report end date – stayers)
19. Income from any source			
Yes	19a1.	19a2.	19a3.
No	19b1.	19b2.	19b3.
Client doesn't know	19c1.	19c2.	19c3.
Client refused	19d1.	19d2.	19d3.
Data not collected	19e1.	19e2.	19e3.
Total	19f1.	19f2.	
20. SSI/SSDI			
Yes	20a1.	20a2.	20a3.
No	20b1.	20b2.	20b3.
21. Non-cash benefits from any source			
Yes	21a1.	21a2.	21a3.
No	21b1.	21b2.	21b3.
Client doesn't know	21c1.	21c2.	21c3.
Client refused	21d1.	21d2.	21d3.
Data not collected	21e1.	21e2.	21e3.
Total	21f1.	21f2.	
22. Section 8, public housing, or other ongoing rental assistance			
Yes	22a1.	22a2.	22a3.
No	22b1.	22b2.	22b3.

23. Covered by health insurance			
Yes	23a1.	23a2.	23a3.
No	23b1.	23b2.	23b3.
Client doesn't know	23c1.	23c2.	23c3.
Client refused	23d1.	23d2.	23d3.
Data not collected	23e1.	23e2.	23e3.
Total	23f1.	23f2.	
24. Medicaid/Medicare			
Yes	24a1.	24a2.	24a3.
No	24b1.	24b2.	24b3.
25. All other health insurance			
Yes	25a1.	25a2.	25a3.
No	25b1.	25b2.	25b3.
26. Mental health services			
Yes	26a1.	26a2.	26a3.
No	26b1.	26b2.	26b3.
Client doesn't know	26c1.	26c2.	26c3.
Client refused	26d1.	26d2.	26d3.
Data not collected	26e1.	26e2.	26e3.
Total	26f1.	26f2.	
27. Substance use services			
Yes	27a1.	27a2.	27a3.
No	27b1.	27b2.	27b3.
Client doesn't know	27c1.	27c2.	27c3.
Client refused	27d1.	27d2.	27d3.
Data not collected	27e1.	27e2.	27e3.
Total	27f1.	27f2.	

Explanatory Notes

For each category, record the status of PATH-enrolled individuals receiving each of the benefits/services at PATH project entry (response column 1). In response column 2, record the status at PATH project exit, only for PATH clients who were exited from the PATH project during the reporting period (i.e., leavers). In response column 3, record the status as of the end of the reporting period, only for PATH clients who were still active in the PATH project as of the end of the reporting period (i.e., stayers).

Each of the categories and response selections fully align with the 2014 HMIS Data Standards.

Demographics

Demographics		Of those with an active, enrolled PATH status during this reporting period, how many individuals are in each of the following categories?
28a. Gender	Female	28a1.
	Male	28a2.
	Transgender male to female	28a3.
	Transgender female to male	28a4.
	Doesn't identify as male, female, or transgender	28a5.
	Client doesn't know	28a6.
	Client refused	28a7.
	Data not collected	28a8.
	Total	28a9.
28b. Age	17 and under	28b1.
	18-23	28b2.
	24-30	28b3.
	31-40	28b4.
	41-50	28b5.
	51-61	28b6.
	62 and over	28b7.
	Client doesn't know	28b8.
	Client refused	28b9.

	Data not collected	28b10.
	Total	28b11.
28c. Race <i>(Note: An individual who identifies as multiracial should be counted in all applicable categories. This demographic element will not sum to total persons enrolled.)</i>	American Indian or Alaska Native	28c1.
	Asian	28c2.
	Black or African American	28c3.
	Native Hawaiian or Other Pacific Islander	28c4.
	White	28c5.
	Client doesn't know	28c6.
	Client refused	28c7.
	Data not collected	28c8.
	Total	28c9.
28d. Ethnicity	Non-Hispanic/Non-Latino	28d1.
	Hispanic/Latino	28d2.
	Client doesn't know	28d3.
	Client refused	28d4.
	Data not collected	28d5.
	Total	28d6.
28e. Veteran status	Veteran	28e1.
	Non-veteran	28e2.
	Client doesn't know	28e3.
	Client refused	28e4.
	Data not collected	28e5.
	Total	28e6.
28f. Co-occurring disorder	Co-occurring substance use disorder	28f1.
	No co-occurring substance use disorder	28f2.
	Unknown	28f3.
	Total	28f4.
	Yes	28g1.

28g. SOAR connection	No	28g2.
	Client doesn't know	28g3.
	Client refused	28g4.
	Data not collected	28g5.
	Total	28g6.
28h. Living situation	Literally Homeless	
	Place not meant for habitation (e.g., a vehicle, an abandoned building, a bus/train/subway station, airport, or anywhere outside)	28h1.
	Emergency shelter, including hotel or motel paid for with emergency shelter voucher	28h2.
	Safe Haven	28h3.
	Interim Housing	28h4.
	Institutional Situation	
	Foster care home or foster care group home	28h5.
	Hospital or other residential non-psychiatric medical facility	28h6.
	Jail, prison, or juvenile detention facility	28h7.
	Long-term care facility or nursing home	28h8.
	Psychiatric hospital or other psychiatric facility	28h9.
	Substance abuse treatment facility or detox center	28h10.
	Transitional and Permanent Housing Situation	
	Hotel or motel paid for without emergency shelter voucher	28h11.
	Owned by client, no ongoing housing subsidy	28h12.
Owned by client, with ongoing housing subsidy	28h13.	
Permanent housing for formerly homeless persons (such as CoC project, HUD legacy programs, or HOPWA PH)	28h14.	
Rental by client, no ongoing housing subsidy	28h15.	

	Rental by client, with VASH subsidy	28h16.
	Rental by client, with GPD TIP subsidy	28h17.
	Rental by client, with other ongoing housing subsidy	28h18.
	Residential project or halfway house with no homeless criteria	28h19.
	Staying or living in a family member's room, apartment, or house	28h20.
	Staying or living in a friend's room, apartment, or house	28h21.
	Transitional housing for homeless persons (including homeless youth)	28h22.
	Client doesn't know	28h23.
	Client refused	28h24.
	Data not collected	28h25.
	Total	28h26.
28i. Chronically homeless	Yes	28j1.
	No	28j2.
	Total	28j3.

Explanatory Notes

For each demographic element (e.g., gender, age, race), record the number of PATH-enrolled individuals who identify with each response category. The total of each demographic element must sum to the total number of active, PATH-enrolled individuals (#15) except for 28c. Race.

28c. Race: Individuals who identify as multiracial are counted in all applicable categories. As a result, the total of this demographic element may exceed the total number of active, PATH-enrolled individuals (#15).

28g. SOAR connection: Indicate how many active, enrolled PATH clients received SOAR services, regardless of whether or not PATH was involved in providing these services or making this connection.

This data element is intended to determine the extent to which PATH is connected to SOAR and is not intended to limit PATH to only utilizing the SOAR model. Data about overall client connection to SSI/SSDI benefits, regardless of the model used, is collected in #20 in the “Outcomes” section.

28i. Chronically homeless: An individual’s chronic homelessness status is determined based on information entered in HMIS. HUD has defined chronic homelessness as an individual or family with a disabling condition who has been continuously homeless for a year or more or has had at

least four episodes of homelessness in the past three years. Please review detailed instructions on the [HUD Exchange](#) for more information regarding the definition of chronic homelessness.

PDX warnings: A warning will appear in PDX if the data indicates that the number of PATH-enrolled individuals who are 17 years old or younger is greater than zero. #28b1>0

Warnings will also appear if the sum of “Client doesn’t know,” “Client refused,” and “Data not collected” categories in each element (“Unknown” category for #28f) is greater than 10 percent of the total number of persons enrolled in PATH.

All demographic elements and response categories align with the 2014 HMIS Data Standards.

Reporting Burden

For SPCs: The reporting burden is 20 hours per annual response, including the time for becoming familiar with the form and reporting requirements, supporting PATH providers in understanding and reporting data, reviewing the data for accuracy, and coordinating data revisions in response to federal review.

For local PATH providers: The reporting burden is 20 hours per annual response, including time for becoming familiar with the form and reporting requirements, initiating and monitoring the process of extracting local HMIS data and entering data into the PATH Data Exchange, reviewing the data for accuracy, submitting the data, and responding to requests for data clarification.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

SAMHSA Reports Clearance Officer
Paperwork Reduction Project (0930-0205)
5600 Fishers Lane
Rockville, MD 20852

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0930-0205.

Data Checks/PDX Warnings

The PATH Data Exchange (PDX) system is set to flag a “Warning” if the data entered is unusual for a typical PATH program or significantly below a target measure. The warning does not necessarily indicate an error, but is intended to bring the unusual data to the provider and State PATH Contact’s attention. PDX requires providers to enter a comment to explain the atypical data, which will then clear the warning.

Each year, SAMHSA’s Homeless and Housing Resource Network (HHRN) reviews PATH Annual Report data for errors and reviews the comments associated with PDX warnings. SAMHSA reviews these data check measures each year and may include additional measures to assist in evaluating the PATH program. A list of current data checks is listed below. These are also included in the “Explanatory Notes” sections of the data elements to which they apply.

- Zero individuals contacted $\#11 = 0$
- One hundred percent of persons contacted through outreach became enrolled in PATH $\#11 = \#14$
- Percentage of eligible persons contacted who became enrolled in PATH is less than 46 percent* $\#14/(\#11-\#13) < 0.46$
- Number of persons enrolled has decreased by more than 50 percent since the previous year or increased by more than 100 percent since the previous year. $([\#15 \text{ current year}] - [\# \text{ enrolled in previous year}]) / [\# \text{ enrolled in previous year}] = < -0.5 \text{ or } > 1.0$
- Percentage of PATH-enrolled individuals who received community mental health services is less than 53 percent* $\#16/\#15 < 0.53$
- Number of PATH-enrolled individuals who are 17 years old or younger is greater than zero $\#28b1 > 0$
- Sum of “Client doesn’t know,” “Client refused,” and “Data not collected” categories for each demographic data element (“Unknown” category for #28f) is greater than 10 percent of the total number of persons enrolled in PATH (#15)

* Targets derived from the Government Performance and Results Act (GPRA) measures for PATH.

Definitions

General Terms

Outreach: The process of identifying and engaging with individuals who are potentially PATH eligible.

Contact: An interaction between a PATH-funded worker or workers and an individual who is potentially PATH eligible or enrolled in PATH.

Date of engagement: Per the 2014 HMIS Data Standards Manual, date of engagement is defined as the date on which an interactive client relationship results in a deliberate client assessment or beginning of a case plan. For PATH projects, the date of engagement must occur on or before the date of enrollment.

PATH eligible: Per the authorizing legislation,¹ PATH eligible means that an individual has a serious mental illness, or serious mental illness and substance use disorder, and is experiencing homelessness or is at imminent risk of becoming homeless.

PATH enrolled: A PATH-eligible individual and a PATH provider have mutually and formally agreed to engage in services and the provider has initiated an individual file or record for that individual.

Staff training: Professional development programs and materials that emphasize best practices and effective service delivery for workers who address the needs of people experiencing homelessness.

Services

Reengagement: The process of engaging with PATH-enrolled individuals who are disconnected from PATH services.

Screening: An in-person process during which a preliminary evaluation is made to determine a person's needs and how they can be addressed through the PATH program.

Clinical assessment: A clinical determination of psychosocial needs and concerns.

Habilitation/rehabilitation: Services that help a PATH client learn or improve the skills needed to function in a variety of activities of daily living.

Community mental health: A range of mental health and/or co-occurring services and activities provided in non-institutional settings to facilitate an individual's recovery. *Note: This category does not include case management, alcohol or drug treatment, habilitation, or rehabilitation, as they have definitions elsewhere in this document.*

Substance use treatment: Preventive, diagnostic, and other services and supports provided for people who have a psychological and/or physical dependence on one or more substances.

Case management: A collaboration between a service recipient and provider in which advocacy, communication, and resource management are used to design and implement a wellness plan specific to a PATH-enrolled individual's recovery needs.

Residential supportive services: Services that help PATH-enrolled individuals practice the skills necessary to maintain residence in the least restrictive community-based setting possible.

Housing minor renovation: Services, resources, or small repairs that ensure a housing unit is physically accessible and/or that health or safety hazards have been mitigated or eliminated.

¹ Public Health Service Act, Title V, Part C, Section 521, as amended, 42 U.S.C 290cc-21 et seq; Stewart B. McKinney Homeless Assistance Amendments Act of 1990, Public Law 101-645.

Housing moving assistance: Monies and other resources provided on behalf of a PATH-enrolled individual to help establish that individual's household. *Note: This excludes security deposits and one-time rental payments, which have specific definitions.*

Housing eligibility determination: Determining whether an individual meets financial and other requirements to enter into public or subsidized housing.

Security deposits: Funds provided on behalf of a PATH-enrolled individual to pay up to two months' rent or other security deposits in order to secure housing.

One-time rent for eviction prevention: One-time payment on behalf of PATH-enrolled individuals who are at risk of eviction without financial assistance.

Referrals

Referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service.

Attained referral: A PATH-enrolled client begins receiving services as the result of PATH assistance.

Community mental health referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that stabilizes, supports, or treats people for mental health disorders or co-occurring mental health and substance use disorders.

Substance use treatment referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers preventive, diagnostic, and other services and supports for individuals who have psychological and/or physical problems with use of one or more substances.

Primary health/dental care referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers physical and/or dental health care services.

Job training referral:* Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that helps prepare an individual to gain and maintain the skills necessary for paid or volunteer work.

Employment assistance referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers assistance designed to lead to compensated work.

Educational services referral:* Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers academic instruction and training.

Income assistance referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers benefits that provide financial support.

Medical insurance referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers coverage that provides payment for wellness or other services needed as a result of sickness, injury, or disability.

Housing services referral:* Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers assistance with attaining and sustaining living accommodations.

Temporary housing referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers shelter in a time-limited setting.

Permanent housing referral: Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers residence in a stable setting where length of stay is determined by the individual or family without time limitations, as long as they meet the basic requirements of tenancy.

*Collection of this data is not required for the PATH Annual Report.

Chart A: Related HMIS Data Elements²

Universal Data Elements (UDEs)			
Element	Response Categories	Rationale	Instructions
Client Name			
First Name	(text)	The first, middle, last names, and suffix should be collected to support the unique identification of each person served.	Projects should obtain and enter the full names and avoid aliases or nicknames.
Last Name	(text)		
Middle Name	(text)		
Suffix	(text)		
Name Data Quality	<ul style="list-style-type: none"> • Full name reported • Partial, street name, or code name reported • Client doesn't know • Client refused 		
Social Security Number			
Social Security Number (SSN)	(9 character text field)	Collecting clients' SSNs assists in producing an accurate, unduplicated local count of persons experiencing homelessness. SSN is also a required	In one field, record the nine-digit SSN. In another field, select the appropriate SSN Data Quality indicator. If a partial social security number is obtained, an 'x' may be entered as a placeholder for any missing digit.

² Elements shown here are up-to-date as of the development of this manual. For updates, please check <https://www.hudexchange.info/hmis/>.

SSN Data Quality	<ul style="list-style-type: none"> • Full SSN reported • Approximate or partial SSN reported • Client doesn't know • Client refused 	data element for many mainstream services and programs.	
Date of Birth			
Date of Birth (DOB)	(date)	The date of birth is used to calculate the age of persons served at time of project entry or at any point during project enrollment. It also supports the unique identification of each person served.	Collect the month, day, and year of birth from every client served.
Date of Birth Type	<ul style="list-style-type: none"> • Full DOB Reported • Approximate or partial DOB reported • Client doesn't know • Client refused 		

Ethnicity and Race			
Race	<ul style="list-style-type: none"> • American Indian or Alaska Native • Asian • Black or African American • Native Hawaiian or Other Pacific Islander • White • Client doesn't know • Client refused 	<p>Race is used to count the number of persons who identify themselves within one or more of five different racial categories. In the October 30, 1997 issue of the Federal Register (62 FR 58782), the Office of Management and Budget (OMB) published “Standards for Maintaining, Collecting, and Presenting Federal Data on Race and Ethnicity.”</p> <p>All existing recordkeeping and report requirements must be in compliance with these Standards as of January 1, 2003. These data standards follow the OMB guidelines.</p>	<p>In separate data fields, collect the self-identified race(s) of each client served. Allow clients to identify as many racial categories as apply (up to five). Staff observations should not be used to collect information on race.</p> <p>American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment.</p> <p>Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.</p> <p>Black or African American: A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" can be used in addition to "Black or African American."</p> <p>Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.</p> <p>White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.</p> <p>“Client doesn’t know” or “Client refused” should only be selected when a client does not know or refuses to identify his/her race(s) from among the five listed races. Neither “Client</p>

			doesn't know" nor "Client refused" should be used in conjunction with any other response.
Ethnicity	<ul style="list-style-type: none"> • Non-Hispanic/Non-Latino • Hispanic/Latino • Client doesn't know • Client refused 	Ethnicity is used to count the number of persons who do and do not identify themselves as Hispanic or Latino.	<p>Collect the self-identified ethnicity of each client served. Staff observations should not be used to collect information on ethnicity.</p> <p>The definition of Hispanic or Latino ethnicity is a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture of origin, regardless of race.</p>
Gender			
Gender	<ul style="list-style-type: none"> • Female • Male • Transgender male to female • Transgender female to male • Other • Client doesn't know • Client refused 	Gender is used to count the number of men, women, transgender, and other gender clients.	<p>Record the self-reported gender of each client served. Staff observations should not be used to collect information on gender.</p> <p>Transgender is defined as persons with a gender identity that is different from the sex assigned to them at birth. "Other" may include intersex individuals or persons who prefer not to identify a specific gender.</p>

Veteran Status			
Veteran Status	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 	<p>Veteran Status is used to count the number of clients who are veterans of the United States armed forces.</p>	<p>Record whether or not the client is a veteran. Asking additional questions may result in more accurate information as some clients may not be aware that they are considered veterans. Examples include: "Have you ever been on active duty in the military?"</p> <p>Respond "Yes" to Veteran Status if the person is someone who has served on active duty in the armed forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.</p>
Disabling Condition			
Disabling Condition	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 	<p>Disabling condition is used to count the number of clients who have a disabling condition at project entry. This data element is used with other information to identify whether a client meets the criteria for chronic homelessness.</p>	<p>Record whether the client has a disabling condition based on one or more of the following:</p> <ul style="list-style-type: none"> -A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that: (1) is expected to be long-continuing or of indefinite duration; (2) substantially impedes the individual's ability to live independently; and (3) could be improved by the provision of more suitable housing conditions. -A developmental disability, as defined in section 102 of the Developmental Disabilities

			Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or -The disease of acquired immunodeficiency syndrome (AIDS) or any condition arising from the etiologic agency for acquired immunodeficiency syndrome (HIV).
Living Situation (Street Outreach PATH Projects)			
Type of Residence	<ul style="list-style-type: none"> • Place not meant for habitation (e.g., a vehicle, an abandoned building, a bus/train/subway station, airport, or anywhere outside) • Emergency shelter, including hotel or motel paid for with emergency shelter voucher • Safe Haven • Interim Housing • Foster care home or foster care group home • Hospital or other residential non-psychiatric medical facility • Jail, prison, or juvenile detention facility • Long-term care facility or nursing home • Psychiatric hospital or other psychiatric facility • Substance abuse treatment facility or detox center • Hotel or motel paid for without emergency shelter voucher • Owned by client, no ongoing housing subsidy 	This element is used to identify the type of living situation and length of stay in that situation just prior to entry into a Street Outreach, Emergency Shelter (ES), or Safe Haven (SH) project for all adults and heads of households.	HUD strongly encourages HMIS users to just ask the client for the information and record their answer. Attempting to tie each individual's response with definitions or documentation requirement is not the intent of this question. Reference the 2014 HMIS Data Standards for specific data collection instructions.

	<ul style="list-style-type: none"> • Owned by client, with ongoing housing subsidy • Permanent housing for formerly homeless persons (such as CoC project, HUD legacy programs, or HOPWA PH) • Rental by client, no ongoing housing subsidy • Rental by client, with VASH subsidy • Rental by client, with GPD TIP subsidy • Rental by client, with other ongoing housing subsidy • Residential project or halfway house with no homeless criteria • Staying or living in a family member's room, apartment, or house • Staying or living in a friend's room, apartment, or house • Transitional housing for homeless persons (including homeless youth) • Client doesn't know • Client refused • Data not collected 		
<p>Length of Stay in Prior Living Situation</p>	<ul style="list-style-type: none"> • One night or less • Two to six nights • One week or more, but less than one month • One month or more, but less than 90 days 		

	<ul style="list-style-type: none"> • 90 days or more, but less than one year • One year or longer • Client doesn't know • Client refused • Data not collected 		
Approximate date started	(Date) [date field]		
Total <u>number of times homeless</u> on the street, in ES, or SH in past three years	<ul style="list-style-type: none"> • One time • Two times • Three times • Four or more times • Client doesn't know • Client refused • Data not collected 		
Total <u>number of months homeless</u> on the street, in ES, or SH in the past three years	<ul style="list-style-type: none"> • One month (this is the first month) • Integer 2-12 • More than 12 months • Client doesn't know • Client refused • Data not collected 		
Prior Living Situation (Services Only PATH Projects)			
Type of Residence – Literally Homeless	<ul style="list-style-type: none"> • Place not meant for habitation (e.g., a vehicle, an abandoned building, a bus/train/subway station, airport, or anywhere outside) • Emergency shelter, including hotel or motel paid for with emergency shelter voucher • Safe Haven 	This element is used to identify the type of living situation and length of stay in that situation just prior to project entry for all adults and heads of households entering any of the following HMIS project types: Transitional Housing, any form of Permanent Housing including Permanent Supportive Housing and Rapid Re-Housing, Service Only, Other,	<p>HUD strongly encourages HMIS users to just ask the client for the information and record their answer. Attempting to tie each individual's response with definitions or documentation requirement is not the attempt of this question.</p> <p>The responses are designed to flow from the client's last living situation. For projects that do not provide lodging, the 'last' living situation</p>

	<ul style="list-style-type: none"> • Interim Housing <p><i>If the client's living situation made them homeless then determine chronic homelessness by documenting the approximate start date of their homelessness, the number of times they were homeless in the past three years and the total number of months homeless in the past three years.</i></p>	Day Shelter, Homelessness Prevention, and Coordinated Assessment (Coordinated Entry).	will be the same as the current living situation. For projects that do provide lodging, this will be the client's living situation prior to moving in to the project-provided residence. Reference the 2014 HMIS Data Standards for specific data collection instructions.
Type of Residence – Institutional Situation	<ul style="list-style-type: none"> • Foster care home or foster care group home • Hospital or other residential non-psychiatric medical facility • Jail, prison, or juvenile detention facility • Long-term care facility or nursing home • Psychiatric hospital or other psychiatric facility • Substance abuse treatment facility or detox center 		
Did you stay less than 90 days?	<ul style="list-style-type: none"> • Yes • No 		
If yes, indicate how long they stayed. If no, then no further information collected for this element.	<ul style="list-style-type: none"> • One night or less • Two to six nights • One week or more, but less than one month • One month or more, but less than 90 days <p><i>If the client's living situation made them homeless then determine</i></p>		

	<p><i>chronic homelessness by documenting the approximate start date of their homelessness, the number of times they were homeless in the past three years and the total number of months homeless in the past three years.</i></p>		
<p>Type of Residence – Housing Situation</p>	<ul style="list-style-type: none"> • Hotel or motel paid for without emergency shelter voucher • Owned by client, no ongoing housing subsidy • Owned by client, with ongoing housing subsidy • Permanent housing for formerly homeless persons (such as CoC project, HUD legacy programs, or HOPWA PH) • Rental by client, no ongoing housing subsidy • Rental by client, with VASH subsidy • Rental by client, with GPD TIP subsidy • Rental by client, with other ongoing housing subsidy • Residential project or halfway house with no homeless criteria • Staying or living in a family member’s room, apartment, or house • Staying or living in a friend’s room, apartment, or house 		

	<ul style="list-style-type: none"> • Transitional housing for homeless persons (including homeless youth) 		
Did you stay less than 7 nights?	<ul style="list-style-type: none"> • Yes • No 		
<p>If yes, indicate how long they stayed.</p> <p>If no, then no further information collected for this element.</p>	<ul style="list-style-type: none"> • One night or less • Two to six nights <p><i>If the client's living situation made them homeless then determine chronic homelessness by documenting the approximate start date of their homelessness, the number of times they were homeless in the past three years and the total number of months homeless in the past three years.</i></p>		
Type of Residence	<ul style="list-style-type: none"> • Client doesn't know • Client refused • Data not collected 		
Project Entry Date			
Project Entry Date	(date)	<p>To determine the start of a client's period of participation with a project. All projects need this data element for reporting; residential continuum projects need it to measure lengths of stay, and services-only continuum projects need it to determine the amount of time spent participating in the project.</p>	<p>Project staff record the month, day, and year of project entry. The project entry date indicates a client is now being assisted by the project.</p> <ul style="list-style-type: none"> • For residential projects, with the exception of Permanent Housing-Rapid Re-Housing (PH-RRH) projects, this should be the first date of occupancy in the project. • For PH-RRH projects and non-residential projects this should be the date on which the client began receiving services from the

			<p>project or would otherwise be considered by the project funder to be a project participant for reporting purposes.</p> <ul style="list-style-type: none"> • For Street Outreach projects this should be the date of first contact with the client. <p>If there is a gap in occupancy (except for gaps allowed in Permanent Supportive Housing projects and Emergency Shelters using a night-by-night method), clients should be exited from the project; a return to the project should be recorded as a new residential/service record with a new project entry date.</p>
Project Exit Date			
Project Exit Date	(date)	To determine the end of a client's period of participation with a project. All projects need this data element for reporting; residential continuum projects need it to measure lengths of stay, and service-only continuum projects need it to determine the amount of time spent participating in the project.	<p>Record the month, day, and year of the last day of occupancy or service. For residential projects this date would represent the last day of continuous stay in the project before the client transfers to another residential project or otherwise stops residing in the project. For example, if a person checked into an overnight shelter on January 30, 2014, stayed overnight and left in the morning, the exit date for that shelter stay would be January 31, 2014.</p> <p>For non-residential projects the exit date may represent the last day a service was provided or the last date of a period of ongoing service. The exit date should coincide with the date the client is no longer considered a project participant. Projects must have a clear and consistently applied procedure for determining when a client who is receiving supportive services is no longer considered a client. For example, if a person has been receiving weekly counseling as</p>

			part of an ongoing treatment project and either formally terminates their involvement or fails to return for counseling, the last date of service is the date of the last counseling session. If a client uses a service for just one day (i.e., starts and stops before midnight of same day), then the Project Exit Date may be the same as the Project Entry Date.
Destination			
Destination Type	<ul style="list-style-type: none"> • Deceased • Emergency shelter, including hotel or motel paid for with emergency shelter voucher • Foster care home or foster care group home • Hospital or other residential non-psychiatric medical facility • Hotel or motel paid for without emergency shelter voucher • Jail, prison or juvenile detention facility • Long-term care facility or nursing home • Moved from one HOPWA funded project to HOPWA PH • Moved from one HOPWA funded project to HOPWA TH • Owned by client, no ongoing housing subsidy • Owned by client, with ongoing housing subsidy • Permanent housing for formerly homeless persons (such as: CoC 	To identify where a client will stay after exiting a project for purposes of tracking and outcome measurement.	Select the response category that best describes where the client will be living after the date on which they exit the project. For non-lodging projects, this may be the same as the place where the client was living during project participation.

	<p>project; or HUD legacy programs; or HOPWA PH)</p> <ul style="list-style-type: none"> • Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) • Psychiatric hospital or other psychiatric facility • Rental by client, no ongoing housing subsidy • Rental by client, with VASH housing subsidy • Rental by client, with GPD TIP housing subsidy • Rental by client, with other ongoing housing subsidy • Residential project or halfway house with no homeless criteria • Safe Haven • Staying or living with family, permanent tenure • Staying or living with family, temporary tenure (e.g., room, apartment or house) • Staying or living with friends, permanent tenure • Staying or living with friends, temporary tenure (e.g., room apartment or house) • Substance abuse treatment facility or detox center • Transitional housing for homeless persons (including homeless youth) 		
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	<ul style="list-style-type: none"> • Other (specify) • No exit interview completed • Client doesn't know • Client refused 		
Personal ID			
Personal ID	No specified format	To obtain an unduplicated count of persons served within a CoC. Every client entered into an HMIS is assigned a Personal ID, which is a permanent and unique number generated by the HMIS application.	Before creating a client record in HMIS, users must first search the HMIS application for an existing record for that client. If an existing record is found, enrollment and service data should be added to that record. If there is no existing record, a new record must be created; the HMIS application will generate a Personal ID for the new client record at the time it is added to the HMIS.
Household ID			
Household ID	No specified format	To count the number of households served in a project.	A household ID will be assigned to each household at project entry and applies, for the duration of the project stay, to all members of the household served. The Household ID is automatically generated by the HMIS application.
Relationship to Head of Household			
Relationship to Head of Household	<ul style="list-style-type: none"> • Self (head of household) • Head of household's child • Head of household's spouse or partner • Head of household's other relation member (other relation to head of household) • Other: non-relation member 	Identification of the heads of household for each household recorded in HMIS facilitates the identification, tracking, and enumeration of households served by projects. In addition, specifying the relationship of household members to the head of household facilitates reporting on household composition.	The term "Head of Household" is not intended to mean the leader of the house; it is intended to identify one client to whom all other household members can be associated. There cannot be more than one head of household for any given project entry. Identify the head of household and the relationship of all other household members to the head of household for each household at project entry. If the head of

			household leaves the project while other household members remain, another member of the household currently participating in the project should be designated as the head of household and the other members' relationship to head of household should be revised to reflect each individual's relationship to the newly designated head of household in the event that it differs from the relationship to whoever was previously identified as the head of household.
Client Location			
Information Date	(date)	The client location (HUD-assigned CoC Code) is used to link project client data to the relevant CoC and is necessary for projects that operate across multiple CoCs for data export purposes and to ensure accurate counts of persons who are served within a CoC.	Select or enter the COC code assigned to the geographic area where the head of household is staying at the time of project entry. If a client changes residence during the course of a project stay and moves into a different CoC then the CoC number must be updated; the Information Date for the update should be the effective date of the move.
HUD-assigned CoC code	Response categories must correlate to the responses provided to Project Descriptor Data Element 2.3 Continuum of Care Code.		
Program Specific Data Elements Required for the PATH Program			
Housing Status			
Homeless and At-Risk of Homelessness Status	<ul style="list-style-type: none"> • Category 1 – Homeless • Category 2 – At imminent risk of losing housing • Category 3 – Homeless only under federal statutes • Category 4 – Fleeing domestic violence 	To identify the housing status and risk for homelessness for persons just prior to project entry, including whether persons are experiencing homelessness, housed and at risk of experiencing homelessness, or in a stable housing situation. This data element allows projects to identify	For each client, determine the appropriate Housing Status according to the definitions provided in the HMIS Data Standards Manual and related conditions just prior to project entry as determined in accordance with the verification and documentation procedures established under the applicable program rules. A client must be coded to a single <i>homeless and</i>

	<ul style="list-style-type: none"> • Stably housed • Client doesn't know • Client refused 	persons according to homeless and at risk criteria established by HUD.	<i>at risk of homelessness status</i> response category. In addition, in cases where an individual or family meets the definition of homelessness under Category 1 or 2 or meets the at risk definition AND is fleeing domestic violence, they should only be coded to Category 1, 2, or At Risk. Category 4 should only be used when the household does NOT meet any other category but is homeless because of domestic violence.
Income and Sources			
Information Date	(date)	Income and sources of income are important for determining service needs of people at the time of project entry, determining whether they are accessing all income sources for which they are eligible, describing the characteristics of the population experiencing homelessness, and allow analysis of changes in the composition of income between entry and exit from the project and annual changes prior to project exit. Increase in income is a key performance measure of most federal partner programs.	Data on Income and Sources collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collected at project entry and exit are to be dated the same date as the date of project entry and the date of project exit. An annual assessment is required for all persons residing in the project one year or more. Income and sources must be recorded in the HMIS as an Annual Assessment even if there is no change in either the income or sources. When a client has income, but does not know the exact amount, a "Yes" response should be recorded for both the overall income question and the specific source, and the income amount should be estimated. Income received by or on behalf of a minor child should be recorded as part of household income under the Head of Household, unless the
Income from any Source	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused <i>(If yes, indicate all sources and dollar amounts for the sources that apply)</i>		
Earned income (i.e., employment income)	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)		
Unemployment insurance	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)		
Supplemental Security Income (SSI)	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)		

Social Security Disability Income (SSDI)	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)	<p>federal funder in the HMIS Program Specific Manual instructs otherwise.</p> <p>Income should be recorded at the client-level for heads of household and adult household members. Projects may choose to collect this information for all household members including minor children, as long as this does not interfere with accurate reporting per funder requirements. Projects collecting data through client interviews should ask clients whether they receive income from each of the sources listed rather than asking them to state the sources of income they receive.</p> <p>Updates are required for persons aging into adulthood.</p> <p>Income data should be recorded only for sources of income that are current as of the information date (i.e., have not been specifically terminated). As an example, if a client's employment has been terminated and the client has not yet secured additional employment, the response for Earned income would be "No." As a further example, if a client's most recent paycheck was 2 weeks ago from a job in which the client was working full time for \$15.00/hour, but the client is currently working 20 hours per week for \$12.00 an hour, record the income from the job the client has at the time data are collected (i.e., 20 hours at \$12.00 an hour).</p>
VA Service-Connected Disability Compensation	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)	
VA Non-Service-Connected Disability Pension	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)	
Private disability insurance	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)	
Worker's compensation	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)	
Temporary Assistance for Needy Families (TANF) (or use local name)	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)	
General Assistance (GA) (or use local name)	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)	

Retirement Income from Social Security	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)		<p>Income and Source are intended to identify regular, recurrent earned income and cash benefits. Services and/or gifts such as phone cards and vouchers that are provided by a project to clients during enrollment are fundamentally different and are not considered income.</p> <p>Income data may be entered in HMIS consistent with guidelines for calculating household income provided by a projects funder, if such guidelines exist. For example, for eligibility purposes, both CoC and ESG-funded projects are instructed to exclude income from the employment of a minor child from calculations of household income. The same is true for SSVF. In the absence of income calculation guidelines provided by a funder, as a general rule, any income associated with a minor used for household expenses and support should be included in the head of households Income and Sources data. Where the income is not relevant for household expenses, it could reasonably be excluded from entry.</p> <p>Income received for a minor (e.g. SSI) should be recorded as part of the household income under the Head of Household.</p> <p>Student financial aid is not to be considered income unless the financial aid includes a cash stipend.</p> <p>Recording income in an HMIS is not the same as performing an income evaluation for purposes of project eligibility determination or a rent calculation for the purpose of determining</p>
Pension or retirement income from a former job	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)		
Child support	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)		
Alimony or other spousal support	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount)		
Other source	<ul style="list-style-type: none"> • No • Yes (if yes, monthly amount) (if other source) Specify source		
Total Monthly Income	(currency)		

			<p>rental subsidy (24 CFR 5.609 and 24 CFR 5.611(a). Data recorded in HMIS also does not replace required income verification documentation that may be required by a funder.</p> <p>Lump sum amounts received by a family, such as inheritances, insurance settlements, or proceeds from sale of property, or back pay from Social Security are considered assets, not income and are not recorded in HMIS.</p>
Non-Cash Benefits			
Information Date	(date)	<p>Non-cash benefits are important to determine whether clients are accessing all mainstream program benefits for which they may be eligible and to develop a more complete picture of their economic circumstances.</p>	<p>Data on Non-Cash Benefits collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit information are to be dated the same date as the date of project entry and the date of project exit.</p> <p>An annual assessment is required for all persons residing in the project one year or more. Non-Cash Benefits must be recorded in the HMIS as an Annual Assessment even if there is no change in the benefits.</p> <p>Record whether or not the client is receiving each of the listed benefits. A “Yes” response should be recorded only for current benefits. As an example, if a client received food stamps on the first of the month and expects to receive food stamps again on the first of the next month, record “Yes” for Supplemental Nutritional Assistance Program (SNAP). If a client received</p>
Non-Cash benefits from any source	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(if yes, indicate all sources that apply)</i>			
Supplemental Nutrition Assistance Program (SNAP)	<ul style="list-style-type: none"> • No • Yes 		
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	<ul style="list-style-type: none"> • No • Yes 		

TANF Child Care services (or use local name)	<ul style="list-style-type: none"> • No • Yes 		<p>food stamps on the first of the month but is not eligible to receive food stamps on the first of next month, then the client would not be considered to be currently receiving food stamps and “No” should be recorded for Supplemental Nutritional Assistance Program (SNAP). Clients may identify multiple sources of non-cash benefits. Benefits received by a minor child should be assigned to the head of household. In the event that a minor child enters or leaves the household and the non-cash benefits received by the household change as a result, an update to the head of household’s record should be entered to reflect that change.</p> <p>Updates are required for persons aging into adulthood.</p> <p>To reduce data collection and reporting burden, if a client reports receiving no non-cash benefit from any source, no additional data collection is required. If Non-cash benefit from any source is “Yes,” however, project staff should ask clients to respond with a “Yes” or “No” for each of the listed benefits.</p> <p>Non-cash benefits received for the household (such as SNAP/Food Stamps) should be recorded under the non-cash benefits of the head of household.</p>
TANF transportation services (or use local name)	<ul style="list-style-type: none"> • No • Yes 		
Other TANF-funded services (or use local name)	<ul style="list-style-type: none"> • No • Yes 		
Section 8, public housing, or other ongoing rental assistance	<ul style="list-style-type: none"> • No • Yes 		
Other source	<ul style="list-style-type: none"> • No • Yes 		
Temporary rental assistance	<ul style="list-style-type: none"> • No • Yes 		
(if other source) Specify source	(text)		
Health Insurance			
Information Date	(date)	Health insurance information is important to determine whether clients currently have health insurance coverage and are accessing all mainstream project	Data on Health Insurance collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit
Covered by Health Insurance	<ul style="list-style-type: none"> • No • Yes 		

	<ul style="list-style-type: none"> • Client doesn't know • Client refused 	<p>medical assistance benefits for which they may be eligible, and to ascertain a more complete picture of their economic circumstances.</p>	<p>information are to be dated the same date as the date of project entry and the date of project exit.</p> <p>An annual assessment is required for all persons residing in the project one year or more. Health Insurance must be recorded in the HMIS as an Annual Assessment even if there is no change.</p> <p>Updates are required for persons aging into adulthood.</p>
<i>(If yes, indicate all sources that apply)</i>			
Medicaid	<ul style="list-style-type: none"> • No • Yes 		
Medicare	<ul style="list-style-type: none"> • No • Yes 		
State Children's Health Insurance Program (or use local name)	<ul style="list-style-type: none"> • No • Yes 		
Veteran's Administration Medical Services	<ul style="list-style-type: none"> • No • Yes 		
Employer-Provided Health Insurance	<ul style="list-style-type: none"> • No • Yes 		
Health insurance obtained through COBRA	<ul style="list-style-type: none"> • No • Yes 		
Private Pay Health Insurance	<ul style="list-style-type: none"> • No • Yes 		
State Health Insurance for Adults (or use local name)	<ul style="list-style-type: none"> • No • Yes 		

Indian Health Services Program	<ul style="list-style-type: none"> • No • Yes 		
Other	<ul style="list-style-type: none"> • No • Yes 		
Physical Disability			
Information Date	(date)	To count the number of physically disabled persons served, determine eligibility for disability benefits, and assess the need for services.	<p>Data on Physical Disability collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit information are to be dated the same date as the date of project entry and the date of project exit. Data should be reviewed and updated as necessary any time the information has been known to change.</p> <p>In separate fields, determine (1) if the client has a physical disability, (2) if the disability is expected to be of long-continued and indefinite duration and impairs the client's ability to live independently, (3) if there is documentation of the disability on file, and (4) if the client is currently receiving services or treatment for this disability or received services or treatment prior to exiting the project.</p>
Physical Disability	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(if yes for physical disability)</i> Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(if yes for physical disability)</i> Documentation of the disability and severity on file	<ul style="list-style-type: none"> • No • Yes 		
<i>(if yes for physical disability)</i> Currently receiving services/treatment for this disability	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		

Developmental Disability			
Information Date	(date)	To count the number of developmentally disabled persons served, determine eligibility for disability benefits, and assess the need for services.	Data on Developmental Disability collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit information are to be dated the same date as the date of project entry and the date of project exit. Data should be reviewed and updated as necessary any time the information has been known to change. In separate fields, determine (1) if the client has a developmental disability, (2) if the disability is expected to substantially impair the client's ability to live independently, (3) if there is documentation of the disability on file, and (4) if the client is currently receiving services or treatment for this disability or received services or treatment prior to exiting the project.
Developmental Disability	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(if yes for developmental disability)</i> Expected to substantially impair ability to live independently	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(if yes for developmental disability)</i> Documentation of the disability and severity on file	<ul style="list-style-type: none"> • No • Yes 		
<i>(if yes for developmental disability)</i> Currently receiving services/treatment for this disability	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
Chronic Health Condition			
Information Date	(date)		

Chronic Health Condition	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 	To count the number of persons served with severe health conditions and assess their need for healthcare and other medical services.	Data on Chronic Health Condition collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit information are to be dated the same date as the date of project entry and the date of project exit. Data should be reviewed and updated as necessary any time the information has been known to change. In separate fields, determine (1) if the client has a chronic health condition, (2) if the condition is expected to be of long-continued and indefinite duration and impairs the client's ability to live independently, (3) if there is documentation of the condition on file, and (4) if the client is currently receiving services or treatment for this condition or received services or treatment prior to exiting the project.
<i>(if yes for chronic health condition)</i> Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(if yes for chronic health condition)</i> Documentation of the disability and severity on file	<ul style="list-style-type: none"> • No • Yes 		
<i>(if yes for chronic health condition)</i> Currently receiving services/treatment for this disability	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
HIV/AIDS (optional for PATH)			
Information Date	(date)	To count the number of persons served who have been diagnosed with AIDS or have tested positive for HIV and assess their need for services.	Data on HIV/AIDS collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit information are to be dated the same date as the date of project entry and the date of project exit. Data should be
HIV/AIDS	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		

<p><i>(if yes for HIV/AIDS)</i></p> <p>Expected to substantially impair ability to live independently</p>	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		<p>reviewed and updated as necessary any time the information has been known to change.</p> <p>In separate fields, determine (1) if the client has HIV/AIDS, (2) if the disability is expected to substantially impair the client's ability to live independently, (3) if there is documentation of the disability on file, and (4) if the client is currently receiving services or treatment for this condition or received services or treatment prior to exiting the project.</p>
<p><i>(if yes for HIV/AIDS)</i></p> <p>Documentation of the disability and severity on file</p>	<ul style="list-style-type: none"> • No • Yes 		
<p><i>(if yes for HIV/AIDS)</i></p> <p>Currently receiving services/treatment for this condition</p>	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
Mental Health Problem			
<p>Information Date</p>	<p>(date)</p>	<p>To count the number of persons with mental health problems served and to assess the need for treatment.</p>	<p>Data on Mental Health Problem collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit information are to be dated the same date as the date of project entry and the date of project exit. Data should be reviewed and updated as necessary any time the information has been known to change.</p> <p>In separate fields, determine (1) if the client has a mental health problem, (2) if the problem is expected to be of long-continued and indefinite</p>
<p>Mental Health Problem</p>	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<p><i>(if yes for mental health problem)</i></p> <p>Expected to be of long-continued and indefinite duration and substantially</p>	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		

impairs ability to live independently			<p>duration <i>and</i> substantially impedes a client's ability to live independently, (3) if there is documentation of the problem on file, and (4) if the client is currently receiving services or treatment for the problem or received services or treatment prior to exiting the project.</p> <p>Identify how the mental health problem was confirmed, whether the mental health problem qualifies as a serious mental illness (SMI) and, if so, how SMI was confirmed.</p>
<i>(if yes for mental health problem)</i> Documentation of the disability and severity on file	<ul style="list-style-type: none"> • No • Yes 		
<i>(if yes for mental health problem)</i> Currently receiving services/treatment for this condition	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(Required for PATH only)</i> <i>(if yes for mental health problem)</i> How confirmed	<ul style="list-style-type: none"> • Unconfirmed; presumptive or self-report • Confirmed through assessment and clinical evaluation • Confirmed by prior evaluation or clinical records 		
<i>(Required for PATH only)</i> <i>(if yes for mental health problem)</i> Serious mental illness (SMI) and, if SMI, how confirmed	<ul style="list-style-type: none"> • No • Unconfirmed; presumptive or self-report • Confirmed through assessment and clinical evaluation • Confirmed by prior evaluation or clinical records • Client doesn't know • Client refused 		
Substance Abuse			

Information Date	(date)	To count the number of persons served with substance abuse problems and to assess the need for treatment.	<p>Data on Substance Abuse collected at project entry and project exit are to reflect the information as of the date of entry and exit. Data collections for project entry and exit information are to be dated the same date as the date of project entry and the date of project exit. Data should be reviewed and updated as necessary any time the information has been known to change.</p> <p>In separate fields, determine (1) if the client has an alcohol or drug abuse problem or both, (2) if the problem is expected to be of long-continued and indefinite duration <i>and</i> substantially impedes the client's ability to live independently, (3) if there is documentation of the problem on file, and (4) if the client is currently receiving services or treatment for the condition or received services or treatment prior to exiting the project.</p> <p>Identify how the substance abuse problem was confirmed.</p>
Physical Disability	<ul style="list-style-type: none"> • No • Alcohol abuse • Drug abuse • Both alcohol and drug abuse • Client doesn't know • Client refused 		
<i>(if alcohol abuse, drug abuse, or both for substance abuse problem)</i> Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		
<i>(if alcohol abuse, drug abuse, or both for substance abuse problem)</i> Documentation of the disability and severity on file	<ul style="list-style-type: none"> • No • Yes 		
<i>(if alcohol abuse, drug abuse, or both for substance abuse problem)</i>	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 		

Currently receiving services/treatment for this condition			
<i>(Required for PATH only)</i> <i>(if alcohol abuse, drug abuse, or both for substance abuse problem)</i> How confirmed	<ul style="list-style-type: none"> • Unconfirmed; presumptive or self-report • Confirmed through assessment and clinical evaluation • Confirmed by prior evaluation or clinical records 		
Contact			
Date of Contact	(date)	To record and count the number of contacts with homeless persons by street outreach and other service projects and to provide information on the number of contacts required to engage the client.	Record the date and location of each contact with a client. To record a contact in HMIS requires that a client record be established in the HMIS. Refer to guidance in HMIS Program Manuals (PATH, ESG, or RHY) for more details. This data element is required for all Street Outreach Projects.
Location of Contact	<ul style="list-style-type: none"> • Place not meant for habitation • Service setting, non-residential • Service setting, residential 		
Date of Engagement			
Date of Engagement	(date)	To count the number of homeless persons engaged by street outreach projects and night-by-night shelters.	Record the date a client became engaged. Only one date of engagement is allowed between project entry and project exit.
Services Provided: PATH funded			
Date of Service	(date)	To determine the services which PATH funded that were provided to clients during project participation.	Services should be recorded for the individual client to whom they were provided; a service that benefits the whole household may be recorded solely for the head of household. For
Type of PATH Funded Service Provided	<ul style="list-style-type: none"> • Reengagement • Screening • Clinical assessment • Habilitation/rehabilitation 		

	<ul style="list-style-type: none"> • Community mental health • Substance use treatment • Case management • Residential supportive services • Housing minor renovation • Housing moving assistance • Housing eligibility determination • Security deposits • One-time rent for eviction prevention 		each service provided, projects should record the service date and service type.
Referrals Provided: PATH			
Date of Referral	(date)	To record the number of referrals provided to clients during program participation.	<p>The referrals to be recorded in HMIS are those which the project made for the benefit of the client being referred. In separate fields record the date of referral, the type of referral, and outcome for each referral.</p> <p>A PATH referral is recorded each time a referral is made. If a worker makes three referrals for the same service between project entry and exit then all three referrals should be recorded.</p> <p>“Attained” means the client was connected and received the service.</p> <p>“Not attained” means the client was referred to, but may not have ever been connected with, the service or did not actually receive the service.</p> <p>“Unknown” means the status of the client’s connection or receipt of service is unknown to the provider entering the data.</p>
Type of Referral	<ul style="list-style-type: none"> • Community mental health • Substance use treatment • Primary health/dental care • Job training (optional) • Educational services (optional) • Housing services (optional) • Temporary housing • Permanent housing • Income assistance • Employment assistance • Medical insurance 		
<i>(if any referral made – for each)</i> Select outcome for each	<ul style="list-style-type: none"> • Attained • Not attained • Unknown 		
PATH Status			

Date of Status Determination	(date)	To determine the enrollment status for each PATH client in order to count the number of enrolled clients.	A PATH enrollment occurs at the point when a client has formally consented to participate in services provided by the PATH project. PATH projects must report on the number of clients enrolled during each operating year. The date of enrollment may be on or after the project entry date and on or after the date of engagement. A worker may enroll a client in PATH if the following has occurred: 1. The worker determined the client to be PATH eligible (homeless or at imminent risk of homelessness and seriously mentally ill (SMI). 2. The worker recorded at least one contact with the client which could be the contact at project entry. [4.12 Contact] 3. The worker has established a date of engagement with the client which is on or after the date of project entry. [4.13 Date of Engagement] 4. The worker has opened an individual file on the client and the client has agreed to PATH enrollment.
Client Became Enrolled in PATH	<ul style="list-style-type: none"> • No • Yes 		
(if no) Reason Not Enrolled	<ul style="list-style-type: none"> • Client was found ineligible for PATH • Client was not enrolled for other reason(s) 		
Connection with SOAR			
Connection with SOAR	<ul style="list-style-type: none"> • No • Yes • Client doesn't know • Client refused 	To identify persons who are connected to the SOAR (SSI/SSDI Outreach, Access, and Recovery) program.	Choose one response category to indicate whether the client has been connected to the SOAR program.