PATH Program HMIS MANUAL

A Guide for HMIS Users and System Administrators

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Introduction

The *PATH (Projects for Assistance in Transition from Homelessness) Program HMIS Manual* is intended to support data collection and reporting efforts of Homeless Management Information System (HMIS) Lead Agencies, State PATH Contacts and PATH Program grantees. PATH Program participation in HMIS provides for client care coordination and the generation of the PATH Annual Report, in addition to other benefits to clients and PATH Program grantees. This manual provides information on HMIS project setup and data collection guidance specific to the PATH Program.

The guidance provided in this document aligns with requirements around using HMIS as stated by the Substance Abuse and Mental Health Services Administration (SAMHSA) and refers to the data elements required for PATH to enter in an HMIS as established in the 2017 HMIS Data Standards Version 1.2. This document is not intended to replace the HMIS Data Dictionary or the HMIS Data Manual, but to complement them and relate PATH Program-specific requirements. This document is not a replacement for any specific program guidance, requirements, regulations, notices, and training materials on the PATH Program. This manual only addresses the use of HMIS for the PATH Program.

For additional assistance, please refer to the following guidance about the PATH Program and its requirements that can be found on the PATH Program page:

- PATH Annual Report Manual
- PATH HMIS Participation Guidance
- State PATH Contact HMIS Self-Assessment
- PATH Data Exchange (PDX)

To ask a question about any PATH Program HMIS requirement, go to the Ask A Question section of the HUD Exchange. Please be sure to select "HMIS" for your question under "My Question is Related To." Federal HMIS and PATH Program staff are working together to answer questions submitted on Ask A Question related to PATH and HMIS. If you encounter a PATH related question that is specific to the PATH Data Exchange (PDX), then go to the Ask A Question section of the HUD Exchange. Please be sure to select "PDX" for your question under "My Question is Related To."

HMIS Related Documents

There are a variety of documents that comprise the suite of HMIS Data Standard resources. **All HMIS Data Standard related documents updated and released in the fall of 2017 are labeled 2017 Version 1.2 to support version control at all levels of use.** Each of the documents has a specific purpose and intended audience. The HMIS Lead designated by each CoC should be familiar with all of the documents and collectively use them as their HMIS reference materials along with specific materials provided by the software vendor. A full listing of the HMIS Lead for each CoC can be found on the HUD Exchange.

HMIS Data Standard Documents

The Data Standard Dictionary and Manual contain the core foundations for the data contained within an HMIS. The PATH HMIS Manual builds upon information in the Data Dictionary to provide further information for an HMIS Lead on the elements required by PATH projects for set up in the HMIS.

Manual Name & Link	Intended Audience	Contents
HMIS Data Standards Dictionary	HMIS Vendors & HMIS Lead Agencies	The dictionary provides the detailed information required for system programming on all HMIS elements and responses required to be included in HMIS software. It delineates data collection requirements, system logic, and contains the XML and CSV tables and numbers. The dictionary also includes critical information about data collection stages, federal partner data collection required elements, and metadata data elements.
HMIS Data Standards Manual	HMIS Lead Agencies & HMIS Users	The manual provides a review of all of the Universal Data Elements, Program Specific Data Elements, and Project Descriptor Data Elements. It contains information on data collection requirements, instructions for data collection, and descriptions that the HMIS User will find as a reference.
HMIS Standard Reporting Terminology Glossary	HMIS Lead Agencies	The HMIS Standards Reporting Terminology Glossary is the standard report document for HMIS implementations. The glossary is designed to provide HMIS and their programmers a foundation for HMIS-required reports.

Definition of Terms

PATH providers conducting street outreach may encounter challenges related to HMIS data collection due to factors such as the infrequency of contacts or the length of time it takes to collect accurate information from a client, among others. The data collection process is designed to support PATH projects as they connect to individuals and families that are experiencing homelessness, and as relationships are built between the street outreach worker and the client. A number of key terms specific to the PATH Program are defined below:

- **Project Start Date:** Is the date of first contact between the PATH-funded worker and the client.
- **Contact:** An interaction between a PATH-funded worker(s) and an individual who is potentially PATH eligible or enrolled in PATH. Contacts may range from a brief conversation between the PATH-funded worker and the client about the client's well-being or needs, to a referral to service. A contact must always include the presence of the client—the facilitation of a referral between a PATH-funded worker and another case manager or service provider without the involvement of the client would not be considered a contact. A contact may occur in a street outreach setting or in a service setting such as an emergency shelter or drop-in center.
- **Engagement**: The point at which an interactive client relationship results in a deliberate client assessment or the beginning of a case plan. Engagement is a one-time event, may occur on or after the project start date, and must occur prior to PATH enrollment and project exit. Clients cannot be enrolled in PATH without being engaged. Although some interactions with a client may result in a positive outcome such as assisting a client to access a shelter bed, without a deliberate client assessment or the beginning of a case plan, those interactions are not considered to be an engagement. The assessment does not have to be of a clinical nature, and neither HUD nor SAMHSA have established minimum criteria for what the assessment must include, other than the client deliberately engaging with the worker(s) to resolve the housing crisis.
- **Enrollment**: The point at which the PATH-funded worker can determine if a person is eligible for the PATH Program. Only persons eligible for PATH can receive a PATH-funded service or referral. Additionally, the 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. HMIS Data Element P3 (formerly 4.20- PATH Status) provides additional information regarding PATH enrollment.
- **Project Exit**: SAMHSA has not established a policy regarding the specific amount of time that must pass from the date of last contact in order for the client to be considered exited from the PATH project. However, your local State PATH Contact (SPC) should set a local benchmark for this. Please contact your SPC directly for information on local standards for project entry.

Project Exit: No Contact with Client

Each State PATH Contact is encouraged to set a standard length of time that must pass without a client contact before the client is exited from the PATH project. In general, the period of time that passes from the date of last contact until project exit should be between 30 days and 90 days (or other length of time as established by the State PATH Contact). Reengagement may happen within this timeframe, but cannot occur after project exit has occurred. In this case the Exit date will be dated as the date of last contact.

- **Reengagement:** The process of reestablishing interaction with PATH-enrolled individuals who are disconnected from PATH services in order to reconnect the client to services based on the previously developed case management or goal plan. Reengagement must occur after enrollment and prior to project exit. Please see Page 19 of attachment A for more details on re-engagement.

- **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. Referrals are only reported for PATH-funded referrals provided to a PATH-enrolled individual. Referrals are not services, if the PATH provider does not actually deliver the PATH-funded service it should be entered as a referral not a service.

- **Services:** A specific PATH-funded assessment, benefit, or form of assistance provided to a PATH-enrolled individual. PATH-funded services may include screening, clinical assessment, community-based mental health services, substance use treatment, and housing assistance. Services are only reported for PATH-funded services provided to a PATH-enrolled individual. Descriptions of PATH-funded services may be found in the PATH Annual Report Manual. Services are not the same as referrals, so if the PATH provider does not actually deliver the PATH-funded service it should be entered in HMIS as a referral, not a service.

Additional terms related to the PATH Program workflow, referrals, and services may be found in the PATH Annual Report Manual.

HMIS Project Setup

It is important to be sure that communities understand the difference between a **program** and a **project** because they have distinct meanings in this context. A program is the source of funding that the organization is receiving to run its project (e.g., PATH Program funding for ABC Street Outreach project). **A project** refers to a distinct unit of an organization, which may or may not be funded by HUD or the federal partners, that provides services and/or lodging. For data collection purposes, HUD and its federal partners refer to categories of funding within a program as **components**.

Identify Projects for HMIS Participation

Identify all the **projects** within the HMIS implementation that receive PATH funding. Each state or territory's State PATH Contact can provide specific information about PATH projects in each jurisdiction.

Identify Project Funding Components

Identify the **component** for each project funded by the PATH grantee (the state or territory). The PATH Program includes two components:

- The **Street Outreach** component of PATH is used by PATH projects that provide outreach and engagement to those living in places **not meant** for human habitation. These PATH activities are designed to meet the immediate needs of unsheltered homeless persons by connecting them with emergency shelter, housing, and/or critical health services. Examples of persons who are living in places **not meant** for human habitation are those who sleep on the streets, under bridges, in camps, camp grounds, abandoned buildings, structure meant for animals, vehicles, and public places.

- The **Supportive Services** component is used by PATH projects to provide outreach and engagement to those living in places **meant** for human habitation. This includes both persons who are residing in shelter, and those doubled up in housing or at-risk of homelessness.

Note: A single PATH project in a local community may be funded to do both Street Outreach and Supportive Services. Nationally, the majority of PATH projects provide both Street Outreach and Supportive Services and will need to have two distinct projects setup in HMIS. SAMHSA intends the PATH Program to be primarily used to provide outreach to the most vulnerable clients, including those who are least likely to seek out and engage in projects on their own.

PATH Project Descriptor Data Elements

For projects new to HMIS, the HMIS Lead will need to follow the usual project setup procedures that are required for HMIS. Existing projects in HMIS should be checked to make sure they meet the requirements outlined in this manual. All projects with existing HMIS records should be checked for accuracy and consistency with the 2017 HMIS Data Standards Version 1.2 and this guidance. This must include setup of the following Project Descriptor Data Elements (PDDE):

- **Organization Identifiers (2.1)** – The name of the agency or organization receiving PATH funding that is operating the project must be entered or identified with the PATH specific project. An identification number will be generated by the HMIS. There should be a single record in HMIS for each agency or organization, regardless of how many projects they operate.

- **Project Identifiers (2.2)** – The name of the project receiving PATH funding must be entered or identified with the PATH specific project. An identification number will be generated by the HMIS. HMIS administrators should note that often the name of the project on the grant agreement is not the same as the name the project is called by the organization and/or the common name in the community and often not the same name as is used on the Housing Inventory Chart (HIC). System administrators should maintain mapping information to correlate grant names, HIC names, and common names with the project identifiers either within the HMIS itself or separately. Projects that are operating more than one component serving two different populations may not be set up in the HMIS as a single project. For example, if your project is funded by both PATH and ESG, each project must be set up separately. Projects in HMIS implementations which cross state boundaries must be set up as separate projects in order to support proper PATH state reporting.

- **Operating Start Date**: Beginning in October 2017, the Operating Start Date of a project must be completed in the HMIS on all projects. The Operating Start Date of the project is defined as the first day the project provided services and/or housing. Thus, this date must be no later than the date the first client served in the project was entered into the project. For projects which began operating prior to October 1, 2012, the operating start date may be estimated if not known.
- **Operating End Date**: An Operating End Date must be entered when a project closes. The Operating End Date must be the last day on which the last client received housing/services. The Operating End Date should be left empty if the project is still in operation (refer to the specific HMIS instructions on project close out in an HMIS).

Multi-State HMIS Implementation

The PATH Program funds states and territories which then distribute the funding to projects throughout their jurisdiction that operate PATH. If an HMIS implementation includes more than one state in its implementation (which is the exception), then two separate projects must be established in the HMIS (one for each state or territory) in order to support proper PATH reporting.

- **Continuum of Care (CoC) Code (2.3)** – Each CoC is associated with a geographic area and has a code assigned by HUD. Select the CoC Code based on the location in which the project operates. A project with multiple CoC jurisdictions within its service area should list all applicable CoC.

- **Project Type (2.4)** – Select the correct project type for each project. Each project in an HMIS must be set up for the correct project type. Although a single project may be funded to provide both Street Outreach and Supportive Services components, for reporting purposes no single project within an HMIS may have two project types. Therefore, no agency that receives an award consisting of multiple components may have both components set up in the HMIS as the same project. As mentioned earlier, a single PATH project that has both Street Outreach and Supportive Services component must have two distinct projects setup in HMIS.

  The PATH Program Components (Street Outreach and Supportive Services) by themselves cannot be used for HMIS Project Typing. In order to correctly type a project in an HMIS the HMIS Lead must consult the State PATH Contact and the PATH provider to determine if the project serves persons who reside in a place **not meant** for human habitation or persons who reside in a place **meant** for human habitation.

- **Continuum Project** should be answered 'Yes' for all projects funded under programs listed below. Appropriate project types will be critical to the CoC ability to produce HUD System Performance Measures. PATH project types should be set up as follows:

PATH Program Component	Population of Focus	HMIS Project Type
Street Outreach	Persons who reside in a place **not meant** for human habitation (e.g. streets, abandoned buildings, etc.)	Street Outreach
Supportive Services	Persons who reside in a place **meant** for human habitation, or who are at risk of homelessness	Supportive Services

Understanding and Identifying PATH Project Type:

PATH projects are not typed within an HMIS by where the client is contacted by the project, but rather by the client's primary place of residence at the point of first contact (which is the same as project start). For example, a street outreach project focuses on outreaching to persons experiencing homelessness who are living on the streets and will collect and enter data under the Street Outreach PATH Program Component. While the PATH-funded worker may find it helpful to contact these clients in places where it is easier to find the client, like health clinics, drop-in centers, or shelter lobbies, the client should still be entered into the Street Outreach project because the client lives on the street.

PATH projects should use available data to determine the client's primary place of residence when selecting PATH Project Type in HMIS. In some instances, a client may be contacted in a project or living situation that is the not representative of their place of residence. To aid in the proper identification of a client's primary place of residence and assure that the client is entered into the correct PATH Program and corresponding HMIS project type, use the below guidance:

Identify Client Primary Place of Residence

HUD has provided guidance on the question of "reside" that directs the worker at first contact (Project Start) to determine the client's primary place of residence by using the following:

- Where did you stay last night?
  - If the client responds with an answer consistent with a place **not meant** for human habitation, then enter the client in the Street Outreach project.
  - If the client responds with an answer consistent with a place **meant** for human habitation, including emergency shelters, then enter the client in the Supportive Services project.
  - If the client does not provide an answer, wait until you can get an answer, and enter the client in HMIS at that point.

- If the client does not provide an answer to "Where did you stay last night?", and you never encounter the client again, you should enter them into the Supportive Service Only project. This will keep the client from being counted in the HUD System Performance Measure 7A.

Project types such as winter shelter, temporary shelter, night-by-night shelter (with no guaranteed bed), mobile outreach, mobile health clinic, homeless hotline, 211, and coordinated entry projects do not clearly equate to a client's primary place of residence and should prompt the question, "Where did you stay last night?"

If the PATH project initially enters a client in a project type based on the identification of client's primary place of residence, but later learns additional information about the client's primary place of residence that indicates that another PATH HMIS Project Type more appropriately represents that client's living situation, the PATH project is not required to exit the client from the project or otherwise alter the client's record in HMIS.

When Supportive Services Only is selected as a PATH Project Type, the response to the dependent field "Affiliated with a residential project" should be "no," unless the project is funded as a Street Outreach component and is operating within an emergency shelter. Then the affiliation would be "yes" and the shelter(s) the project operates with would be listed.

- **Method for Tracking Emergency Shelter Utilization (2.5) –** This element is not relevant since the PATH Program does not fund emergency shelter projects.

- **Federal Partner Funding Sources (2.6)** – Projects funded in whole or in part by PATH funds are to be identified as **HHS: PATH – Street Outreach & Supportive Services Only**. The grant identifier for a PATH project may be the grant number or any other identification system the local HMIS system elects to use. There are no requirements by PATH for this to be the state grant number received from SAMHSA or the local grant number received from the State.

- **Bed and Unit Inventory Information (2.7)** – This element is not relevant since the PATH Program does not fund housing projects.

- **Additional Project Information (2.8)** – This element records location data required by each project entering data into HMIS, as well as any continuum projects not participating in HMIS. This information is relevant for HIC and AHAR reporting purposes.

PATH Data Collection Requirements

All PATH projects are required to collect all of the Universal Data Elements and the relevant Program-Specific Data Elements. The Program-Specific Data Elements to be collected by each PATH project are as shown below:

Element Number	HMIS Program Specific Data Element	Street Outreach	Services Only
4.2	Income and Sources	x	x
4.3	Non-Cash Benefits	x	x
4.4	Health Insurance	x	x
4.5	Physical Disability	x	x
4.6	Developmental Disability	x	x
4.7	Chronic Health Condition	x	x
4.8	HIV/AIDS	Δ	Δ
4.9	Mental Health Problem	x	x
4.10	Substance Abuse	x	x
4.12	Contact	x	x
4.13	Date of Engagement	x	x
P1	Services Provided – PATH Funded	x	x
P2	Referrals Provided - PATH	x	x
P3	PATH Status	x	x
P4	Connection with SOAR	x	x

X = data collection required
Δ = data collection is not required but encouraged

SAMHSA has recently updated several key terms and definitions related to services and referrals. An overview of these changes is listed below. In 2017, the HMIS Data Standards made significant changes to 4.5, 4.6, 4.7, 4.9 and 4.10 by removing conditional questions regarding service, severity and documentation.

Data Element P1 Services Provided- PATH Funded

The HMIS data element P1 Services Provided–PATH Funded is used to determine the PATH-funded services that are provided to a client during project enrollment, following project enrollment and prior to project exit. The PATH Annual Report only requires that you collect one response for each service provided, however PATH providers may choose to collect multiple instances of each service. PATH providers are not required, but encouraged to record each instance of PATH-funded services provided to PATH-enrolled clients, this is allowable as long as it does not create duplicative service data in the PATH Annual Report (The HMIS Data Dictionary and the PATH Annual Report Programming Specifications direct HMIS solutions to allow multiple service occurrences without affecting the PATH Annual Report).

PATH-Funded Service	Definition
Re-engagement	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 are standalone services with distinct definitions.*
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.
Housing moving assistance	Funds 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	The process of 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.

Data Element P2 Referrals Provided- PATH

The HMIS data element P2 Referrals Provided–PATH is used to determine the referrals that are provided to a client during project enrollment. A referral has been attained once the PATH-enrolled client begins receiving services as the result of PATH assistance. PATH providers are not required, but encouraged to record each instance of PATH-funded referrals provided to PATH-enrolled clients. This transactional approach to data collection is allowable as long as it does not create duplicative referral data in the PATH Annual Report (The HMIS Data Dictionary and the PATH Annual Report Programming Specifications direct HMIS solutions to allow multiple referral occurrences without affecting the PATH Annual Report).

A PATH referral is recorded each time a referral is made. If a PATH-funded worker makes three referrals for the same service between project start and exit, then all three referrals should be recorded. Each referral should be marked as "Attained," "Not attained" or "Unknown" as of project exit.

- "Attained" means the client was connected and received the service (if the referral is for housing, it is not attained until the housing placement starts).
- "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.
- "Unknown" means the status of the client's connection or receipt of service is unknown to the provider entering the data.

PATH Referral	Definition
Community mental health	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	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	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	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.
Educational services	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.

PATH Referral	Definition
Housing services	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.
Permanent housing	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.
Temporary housing	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.
Income assistance	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.
Employment assistance	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.
Medical insurance	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.

Only PATH-funded services and referrals are required to be collected in HMIS. Many PATH projects and HMIS Lead Agencies, however, may find value in collecting the services and referrals provided to a client prior to enrollment or funded by a source other than PATH, for local reporting needs. The HMIS implementation may be configured to allow these services and referrals to be collected. However, any service or referral provided to a client prior to enrollment, or provided to the client post enrollment that are not PATH-funded, must be excluded from the PATH Annual Report.

PATH Services and Referrals are provided to enrolled clients only. The only service that should be provided before enrollment is outreach, which is recorded as “contact.” PATH providers may provide referrals without enrolling someone in PATH and record that referral in HMIS. However, a referral to a PATH-funded service may not be provided until the person is enrolled in PATH. For example, a PATH provider can provide referrals such as a referral to another project the client may be eligible for, to the local soup kitchen, and the day shelter, however, a PATH provider cannot provide a PATH referral (where the PATH-funded worker plays an active part in making the referral) to someone who is not enrolled in the PATH project.

Additional information on the rationale, collection point, subjects, and instructions for each element can be found in the HMIS Data Standards Manual.

Special Data Collection Instructions

HMIS System Administrators and HMIS users should be aware of several special data collection issues that apply to PATH-funded projects.

- **Data Collection Challenges**: A street outreach project is likely to encounter difficulty engaging persons experiencing homelessness. Street Outreach projects may record a project start with limited information about the client and improve on the accuracy and completeness of client data over time by editing data in an HMIS as they engage the client. The initial entry may be as basic as the project start date, an alias or other "made-up" name (e.g., Redhat Tenthstreetbridge) that would be identifiable for retrieval by the PATH-funded worker in the system. Over time, the data must be edited for accuracy (e.g., replacing "Redhat" with "Robert") as the worker learns that detail.

- **De-Duplication of Client Records:** It is possible in a street outreach setting that a single client may be contacted by multiple street outreach workers over a period of time in different locations. Local protocols should be established to determine how coordination among PATH projects and other street outreach projects effectively manage the identification and data collection of clients. In smaller CoC, it may be possible to coordinate street outreach efforts and reduce duplication of client records through case conferences or other efforts to coordinate outreach services. In all CoC, client search functionality may be made available in HMIS so that street outreach workers can perform queries or client searches by "made-up" name or alias, or other informal identifier shared with street outreach workers in order to manage the identification of clients. The use of temporary "made-up" names should not be an excuse for excessive de-identified clients or poor data quality. PATH projects and local HMIS leadership should work together to minimize the use of "made-up" names and attain high data quality.

- **Contacts**: All PATH Program components must record every contact made with each client in the HMIS. In 2017, Contact was changes to include a new conditional data element "Staying on Street, ES or SH". For PATH, a contact is defined as an interaction between a PATH-funded worker or workers and an individual who is potentially PATH eligible or enrolled in PATH. Contacts may include activities such as a conversation between the PATH-funded worker and the client about the client's well-being or needs, an office visit to discuss their housing plan, or a referral to another community service. A contact must be recorded anytime a client is met, including during "in-reach" or when the client is contacted in another service setting. Contacts must also be recorded if an engagement date or project start date is recorded on the same day. PATH providers should refer to the PATH Annual Report Manual for PATH reporting guidance and to review the PATH definition of a contact. PATH providers that communicate with other service providers on behalf of their client (3rd Party Contact) would not record a contact because the interaction is not between the PATH-funded worker and the client. These 3rd party contacts may be recorded as a PATH-funded service or referral depending on the nature of the contact (remember that PATH-funded referrals and services are only for enrolled clients).

- **Engagements**: Per the HMIS Data Standards and by agreement across all federal partners, an engagement date is the date on which an interactive client relationship results in a deliberate client assessment or the beginning of a case plan. The date of engagement should be entered into HMIS at the point that the client has been engaged by the PATH-funded worker. This date may be on or after the project start date and must be prior to date of enrollment and project exit. If the client exits without becoming engaged, the engagement date should be left blank. The date of engagement will also be recorded as a contact with the same date.

- **Data Quality**: Reporting on data quality for all PATH Program components is limited to clients with a date of engagement. Therefore, it is important that PATH-funded workers record the engagement date and also review all of the Universal Data Elements and applicable Program Specific Data Elements for completeness and accuracy. The Date of Engagement is the point at which data quality begins to be measured for the PATH Program, therefore all Universal Data Elements should be entered into HMIS at or before the Date of Engagement. PATH grantees are encouraged to work collaboratively with their HMIS Lead Organizations to understand and comply with local data quality requirements and expectations.

- **Enrollments:** An enrollment date is the date when 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. The date of PATH enrollment should be entered into the HMIS at the point that the client has become enrolled, using the PATH Status element (P3). It may be on or after the project start date or engagement date and prior to project exit. If the client exits without becoming enrolled, the PATH Status element (P3) needs to be completed, indicating that the client was not enrolled and the reason the client was not enrolled. If the client was contacted on the date that PATH Status was determined, a contact must also be entered for that date.

SAMHSA GPRA-MA Measure

The Government Performance and Results Act- Modernization Act (GPRA-MA) has set the threshold of outreached, eligible clients that become enrolled in the PATH Program at 58% for FY2017. That means that of all persons contacted by the PATH Program, 58% of those who are determined to be eligible will ultimately become enrolled by agreeing to participate in services.

- **Project Exit:** Project exit represents the end of a client's participation with a project. For non-residential projects, project exit will be the last day a service was provided. For PATH projects, the exit date should coincide with the date that the client is no longer considered to be participating in the project. This standard should be applied consistently across all PATH projects. Reasons to exit a client include:
    - The client has entered another project type (e.g., TH, PSH) or otherwise found housing;
    - The client is engaged with another outreach worker or project;
    - The client is deceased; or

- The outreach worker has been unable to locate the client for an extended period of time and there are no recorded contacts (length of time defined by the State PATH Contact, typically 30-90 days). Once this period of time is defined for the State or Territory, the date of last contact becomes the exit date for the PATH project, not 30-90 days (or other length of time defined by the State PATH Contact) following date of last contact, which may result in artificially inflated lengths of enrollment.

  - If this situation arises, and the client is to be exited from the project due to a lack of regular contact the project exit (3.12) should be listed as "No Exit Interview Completed."

  - The possibility that the client may not be seen again is not a reason to exit a client from a project, and project exit should only be recorded once project participation has ended, or after the locally-determined period of time has passed without a contact with the client.

SAMHSA Automatic Exit Policy

SAMHSA has set a policy regarding PATH data collection and the use of an automatic exit function. This policy is a collaboration between SAMHSA and HUD and attempts to balance the data collection guidance of SAMHSA with the data quality framework of HUD.

PATH providers should work with their State PATH Contact to understand the specific Automatic Exit policy for the state where PATH-funded services are provided (a current list of State PATH Contacts can be accessed here). Each State PATH Contact has been empowered by SAMHSA to set the statewide policy on Automatic Exit; however, the policy should be no more than 90 days to be consistent with HMIS and CoC policies and best practices.

SAMHSA has defined Automatic Exit as:

Automatic Exit: The maximum amount of time that is allowed to pass without contact with the client before the client is exited from the PATH project—not to exceed 90 days. PATH clients can be disconnected from services for various reasons and various lengths of time.

Disconnection for some length of time is a normal part of the client relationship, but disconnection for longer periods of time indicates that the client needs to be exited from the project. This decision point is intended to allow the State PATH Contact to set the amount of time that must pass without client contact, up to 90 days, before the client is exited from the project.

SAMHSA has decided that in the event that an automatic exit is used for a client record that the exit date should be set as the date of last contact.

This data collection policy will affect the HMIS Data Quality Framework measure of data entry timeliness. Both SAMHSA and HUD understand this impact and encourage the CoC to analyze this portion of the HMIS Data Quality Framework in light of this policy. SAMHSA intends for the PATH Program providers across the country to work diligently so that no client exits the project with an automatic exit, a marker of disconnection from service. While auto-exits are not entirely avoidable due to the transient nature of some PATH clients, SAMHSA recommends sparing use of the automatic exit.

In the cases where an Automatic Exit is used by a PATH provider, the exit will appear to be entered more than 11+ days on the data quality framework (Q6). This is an accurate representation of how the data was collected, and both HUD and SAMHSA understand the impact on timeliness.

Q6. Timeliness

Time for Record Entry	Number of Project Entry Records	Number of Project Exit Records
0 days		
1-3 days		
4-6 days		
7-10 days		
11+ days		

Data Collection for Household Members: HMIS Universal Data Elements and PATH Program Specific Data Elements are required to be collected for heads of households. Most PATH Program Specific Data Elements (PSDE) are required to be collected for both head of households and adults in the household. In some instances, PATH-funded workers may contact households with more than one individual. PATH-funded workers should be aware of which data elements are required for heads of households only and which data elements are required to be collected for all adults.

Documenting Chronic Homelessness: The Defining Chronically Homeless Final Rule specifies that a written observation by an outreach worker of the conditions where the individual was living may serve as evidence that the individual lives in a place not meant for human habitation, a safe haven, or an emergency shelter, for the time which the observation was made. Additionally, third-party documentation of a single contact with a homeless service provider on a single day within one month is sufficient to consider an individual as homeless and living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter for an entire calendar month (e.g., an encounter on May 5 counts for May 1 – May 31), unless there is evidence that there have been at least 7 consecutive nights not living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter during that month. Specific documentation of chronic homelessness may be necessary to both prioritize clients for housing and to document eligibility for certain permanent housing resources. If necessary, PATH-funded workers are expected to provide evidence of a client's chronic homeless status through participation in the CoC. As such, PATH-funded workers should coordinate closely with their CoC and participate in the local coordinated entry system to ensure that clients have access to the appropriate permanent housing resources.

PATH Reporting Notes:

- The PATH Annual Report does not require the name of PATH enrollees or contacts; however, the name of PATH clients will be necessary for the HMIS to determine an accurate count of client contacts and enrollees through a de-duplication process within HMIS.

- The PATH Annual Report does not report each service that is provided to the client, but rather if each service category is provided or not. PATH providers may wish to collect every instance of service, which is allowable as long as the PATH report does not return duplicative service data.

- The PATH Annual Report details clients with co-occurring substance use and mental health disorders. The 2017 HMIS Data Standards Version 1.2 collect data, that when combined, can determine whether or not a client has a co-occurring substance use and mental health disorder.

- The PATH Annual Report requires that clients receiving services be enrolled in PATH and that services reported upon are PATH-funded (4.14 A Services Provided – PATH Funded).

- The PATH Annual Report requires that clients receiving assisted referrals be enrolled in PATH (4.16 A Referrals Provided – PATH).

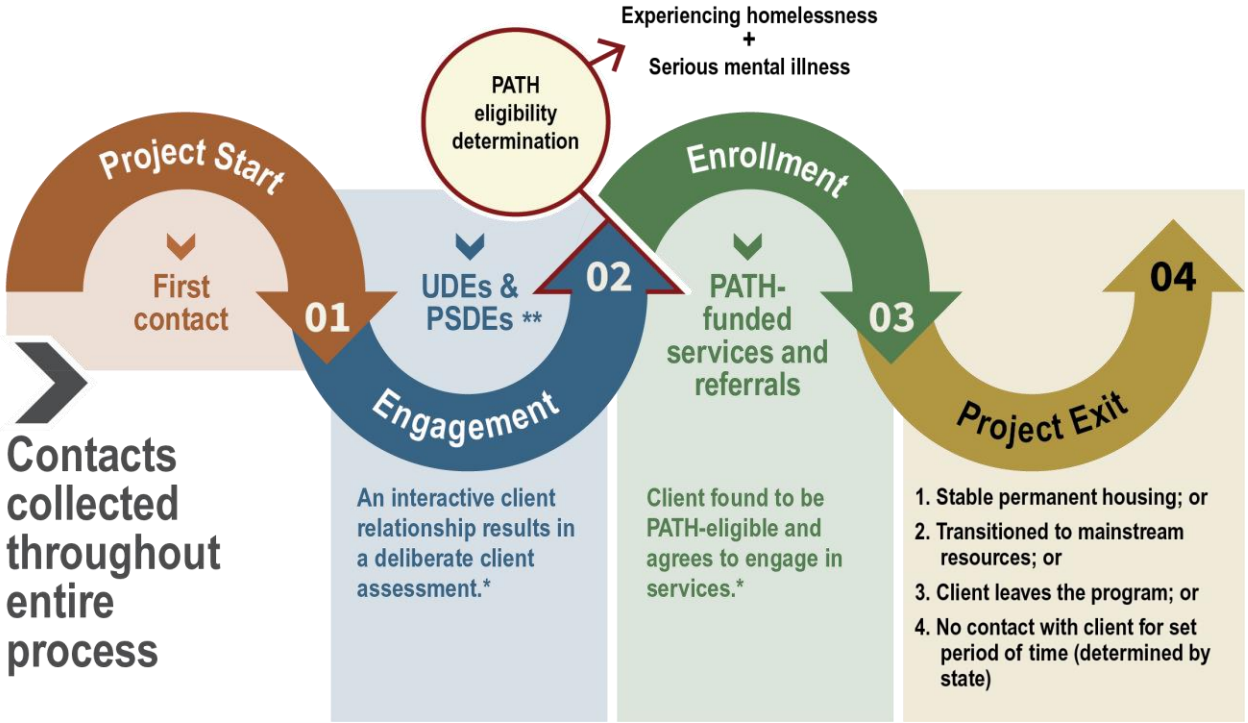
- Both a Street Outreach and Supportive Services Only project setup should be identical. All Universal Data Elements and Program Specific Data Elements are the same.

- Some State PATH Contacts may require additional quarterly reports for the PATH Program, but these quarterly reports cannot be combined to populate the PATH Annual Report.

PATH Data Collection Workflow

PATH data collection workflow is designed to support the interactions and development of relationships with clients over time. As such, HMIS data quality does not begin until the date of engagement, or the point at which an interactive client relationship results in a deliberate client assessment. The date of enrollment may be on or after the project start date and on or after the date of engagement.

It is possible that project start, engagement, enrollment, and project exit may all occur during a single contact at a single point in time. However, it is much more likely that project start will be followed by multiple contacts prior to date of engagement. The chart below illustrates the necessary sequence of data collection, which may happen in a day, or over a number of days, weeks, or even months, depending on the client's willingness to engage with the PATH project, eligibility for PATH-funded services and referrals, and continued connection to the project. SAMHSA has created a video that details the PATH data collection workflow located here.



The only data that must be captured prior to Date of Engagement is: Project start Date, Contact Date (all contacts from Project start/First Contact to Date of Engagement) and some form of name/alias that allows the street outreach project to identify the client in HMIS. Any data collection beyond that, whether it be "data not collected" or "refused" or a default category that details the data has not yet been collected is a local community decision and not a HUD requirement.

Universal Data Elements	At Project	By Date of	At Date of	At Project
3.1 Name	X			
3.2 Social Security Number		X		
3.3 Date of Birth		X		
3.4 Race		X		
3.5 Ethnicity		X		
3.6 Gender		X		
3.7 Veteran Status		X		
3.8 Disabling Condition		X		
3.10 Project Start Date	X			
3.11 Project Exit Date				X
3.12 Destination				X
3.15 Relationship to Head of Household	X			
3.16 Client Location	X			
3.917 Living Situation	X	X		
3.917A Living Situation		X		
3.917B Living Situation		X		

Common Data Elements	At Project	By Date of	At Date of	At Project
4.2 Income and Sources		X		
4.3 Non-Cash Benefits		X		
4.4 Health Insurance		X		
4.5 Physical Disability		X		
4.6 Developmental Disability		X		
4.7 Chronic Health Condition		X		
4.8 HIV/AIDS		X		
4.9 Mental Health Problem		X		
4.10 Substance Abuse		X		
4.12 Contact	X	X	X	X
4.13 Date of Engagement		X		
P1 Services Provided: PATH Funded		X	X	X
P2 Referrals Provided: PATH		X	X	X
P3 PATH Status			X	
P4 Connection with SOAR		X	X	X

HUD System Performance Measures

Data collected for PATH projects in HMIS affects the HUD System Performance Measures that are reported for the entire CoC. Below is a brief explanation of the HUD System Performance Measures that affect Street Outreach and Supportive Services Only projects.

- Measure 7a: Successful Placement from Street Outreach
- Client Universe: Persons In Street Outreach Projects that exited from Street Outreach during the reporting period.

Measure 7a evaluates how successful street outreach projects are at helping people move off the "street" and towards permanent housing, recognizing this process may be direct or may involve other temporary situations along the way. This is important because we know that people living on the street and other places not meant for human habitation are at an increased risk of death.

Measure 7a does not require a Date of Engagement for a client record to be included in the performance measure, only a project exit. Additionally, while data quality is only measured following the Date of Engagement, System Performance Measure 7a measures placement from street outreach beginning at the first contact/project start. This means that HMIS leadership and PATH providers need to work together to assure that street outreach data is of high quality at the time the HUD System Performance Measures are calculated regardless of the Date of Engagement.

Attachment A: State PATH Contact HMIS Data Collection Decision Tool

Introduction:

This tool was developed by the Department of Housing and Urban Development (HUD) and the Substance Abuse Mental Health Services Administration (SAMHSA) to assist State PATH Contacts (SPC) to set Homeless Management Information System (HMIS) data collection policy for their PATH-funded providers and to coordinate with local Continuum of Care (CoC), HMIS leadership and other local data committees in coordinating street outreach data collection (including PATH). The tool is broken down into two sections 1. SPC Decision Points 2. SPC & CoC Data Collection Coordination.

Section 1: SPC Decision Points

There are a number of instances within the HMIS data collection process for SAMSHA's PATH Program that are not formally defined by HUD or SAMHSA. Without clear and uniform decisions from each State PATH Contact regarding how the PATH providers enter this data into HMIS, there will be wide variation in how this information is both collected and reported to SAMHSA. Therefore, SAMHSA requests that each SPC review and act on the decision points that are listed below. The SPC decision points should be shared with all PATH providers.

Definitions:

1. **Reside:** The PATH HMIS Program Manual (December 2016), changed how to determine which project a client is entered into by requiring PATH providers to ask clients "Where did you stay last night?". That guidance also stated if a client does not know where they stayed last night that the PATH provider is to delay data entry into HMIS until an answer to that question can be ascertained. This decision point is intended to allow the SPC to set the amount of time that a PATH provider is allowed to determine which project the PATH client is to be entered in.

   Sample SPC Policy: PATH providers have a maximum of 7 days to identify a response to the question "Where did you stay last night?" After which time the PATH Provider is to enter the client into the most appropriate project based on the knowledge gained to date.

2. **Re-engagement Minimum:** The minimum amount of time that must pass from date of last contact before the service of Re-engagement can be provided. PATH clients can be disconnected from services for various reasons and for various lengths of time. Some length of time is a normal part of the client relationship while longer periods of time is not normal and requires effort to reconnect the client to PATH-funded services. This decision point is intended to allow the SPC to set the minimum amount of time that must pass without client contact before the service of Re-engagement can be provided.

   Sample SPC Policy: To be considered re-engaged, PATH clients must have not received a contact, service or referral with the local PATH project for a minimum of 15 days.

3. **Automatic Exit:** The maximum amount of time that is allowed to pass without contact with the client before the client is exited from the PATH project. PATH clients can be disconnected from services for various reasons and various lengths of time. Some length of time is a normal part of the client relationship while an extensive length of time is not normal and the client needs to be

exited from the project. This decision point is intended to allow the SPC to set the amount of time that must pass without client contact before the client is exited from the project.

Sample SPC Policy: PATH clients who have not been contacted by a PATH project for 90 days will be automatically exited in HMIS from the PATH project.

4. **After-care Exit:** The maximum amount of time that is allowed to pass after the client has transitioned to stable permanent housing or mainstream resources. After-care allows PATH providers to maintain the client relationship and assure the client remains stable for a set period of time. This decision point is intended to allow the SPC to set the amount of time that a PATH provider is allowed to provide After-care.

   Sample SPC Policy: PATH providers may continue to work with clients who have been placed into permanent housing or referred to mainstream resources for a maximum of 90 days. After 90 days, clients must be exited from the PATH project in HMIS.

SPC Decision Point	Notes	SPC Decision
Generally Reside	☐ Must occur prior to "Project start" ☐ Could occur after "Date of First Contact" if the client is unsure of where they stayed last night	
Re-engagement Minimum	☐ Cannot be a greater period of time that "Automatic Exit" ☐ Must occur after "Date of Enrollment" ☐ Must occur before "Project Exit"	
Automatic Exit	☐ "Project Exit" must occur after "Date of First Contact/Project start" ☐ "Automatic Exit" must occur after a lag in contact" ☐ "Automatic Exit" will be set as the date of last "Contact"	
After-care Exit	☐ "Project Exit" must occur after "Date of Enrollment"	

Section 2: SPC & CoC Data Collection Coordination

In addition to the SPC decision points in Section 1, there are also several HMIS related data collection coordination efforts that SAMHSA encourages SPC to undertake. The items listed below are not discrete decisions that SPC must make; rather, these are areas where it will greatly benefit the SPC to coordinate and work with the local Continuum of Care (CoC) and HMIS leadership to come to a collective decision in these areas. These items are not PATH-specific and have broad implications for other street outreach, and in some cases other homeless assistance projects.

Definitions:

1. **Street Outreach Data Collection Policies and Procedures**: The CoC and HMIS defined policies and procedures that govern the data collection of street outreach projects, including PATH.
2. **Record Building Protocols**: The CoC and HMIS defined protocols and processes that allow for the creation of client records in HMIS as the street outreach data collection evolves.
3. **Service and Referral Data Collection:** The discussion with CoC and HMIS to determine how services and referrals are collected and reported in the local HMIS. The discussion will determine if you can collect multiple services and referrals and those services and referrals provided prior to PATH enrollment.
4. **PATH and Other Street Outreach Data Collection Coordination:** The coordination of street outreach data collection among PATH, RHY, VA, CoC, ESG, local, state and private funded street outreach projects.
5. **PATH and Other Street Outreach Coordinated Entry System Coordination**: The coordination of street outreach provider's involvement in the local Coordinated Entry System.
6. **Data Quality Standard(s):** The data quality thresholds set for the PATH Program (both Street Outreach and Supportive Service Only) by the CoC and HMIS.

SPC & CoC Coordination	Notes &Questions	SPC & CoC Decision
Street Outreach Data Collection Policies and Procedures	☐ Are there street outreach data collection policies and procedures? ☐ If there are street outreach data collection policies and procedures do they meet the PATH data collection workflow and guidance in the PATH HMIS Program Manual Version 5?	
Record Building Protocols	☐ Are there protocols on how to capture client de-identified data in HMIS prior to "Date of Engagement"? ☐ Do PATH outreach workers coordinate when there is de-identified clients to assure there are not two de-identified "Red HatLady" records? ☐ Is there a process to remediate known duplicated, de-identified client records? ☐ Can only occur prior to "Date or Engagement"	

SPC & CoC Coordination	Notes &Questions	SPC & CoC Decision
Service & Referral Data Collection	☐ Can the local HMIS collect multiple instances of services and referrals and not duplicate those on the PATH Annual Report? ☐ Can the local HMIS collect services and referrals prior to "Date of Enrollment" and not include those in the PATH Annual Report?	
PATH and Other Street Outreach Data Collection Coordination	☐ Are there multiple street outreach projects in your community? ☐ If so, how many and what is there population of focus? ☐ Is there a coordinated effort for these street outreach projects? ☐ Are there protocols in place for street outreach projects that work with the same client to coordinate data entry?	
PATH and Other Street Outreach Coordinated Entry System Coordination	☐ Are PATH street outreach workers an access and/or assessment point for the local CoC Coordinated Entry Process? ☐ If so, are there written policies regarding a standardized Coordinated Entry Process? ☐ How can the PATH street outreach workers be involved in the CoC Coordinated Entry Process?	
Data Quality Standard(s)	☐ What are the local data quality standards for street outreach projects (completeness, accuracy, timeliness)? ☐ Are there standards reports that can be run for PATH data quality? ☐ Can the HMIS report on the SPC decision points (Generally Reside, Re-engagement Minimum, Automatic Exit and After-care Exit"?	