HMIS – Programming Specifications
PATH Annual Report

PATH Annual Report
October 1, 2021

Contents

Revision History

Date	Version	Description
April 2017	1	Initial release of programming specifications.
August 2017	2	Updated document to comply with 2017 HMIS Data Standards. Clarification in the Introduction on the report date range requirements. Clarification in the Introduction on [date] table for Determining Which Clients to Include. Revised programming instructions for Q16. Clarified programming instructions for Q18 to state that individuals who received a referral multiple times should only be counted one time for that type of referral. Updated Data Standard Fields and Responses for Q26 and Q27. Updated instructions for Q22.
September 2017	2.1	Changed language in Q11 from "total enrollments" to "total new clients contacted".
November 2017	2.2	Changed instructions for Q16.
January 2018	2.3	Changed instructions for Q27 and Q27 (bullet #5) to remove references to rows 42 and 49.
July 2018	2.4	Add guidance related to generation of PATH Annual Report in CSV export.
December 2018	3	Updated document to comply with HMIS Data Standards and updated to reflect SAMHSA's Revised PATH Annual Report Manual. Revised CSV Export Instructions. Q12a and Q12b: Revised. Q18: Added additional referral options; re-ordered options to align with PATH Annual Report Manual. Q19-26: Realigned table to accommodate removed questions and response options. Q27: Housing Outcomes – NEW question and new CSV Table. Q28h: re-ordered temporary options to align with PATH Annual Report Manual. Q28i: NEW. Q28j: addition of "unknown".
January 2019	3.1	Removed questions 25 (PATH-funded mental health services) and 26 (PATH-funded substance use services) from prior version and re-numbered subsequent questions. Updates throughout the document to remove references to the two deleted questions. Added instruction to 12b to define universe of clients. Q26h – Question name revised. New wording: "Living Situation *at Project Start*" Added additional programming instructions for 26i. Length of stay in prior living situation (emergency shelter or place not meant for human habitation only).

September 2019	3.2	Revised programming instructions for universe for Q12b.
		Updated Q26h to accommodate FY2020 Data Standards updates.
		Updated Q25 to accommodate FY2020 Data Standards updates.
July 2020	3.3	Added instructions for Q26a (rows 2-10) and Q26d-26g (rows 31 – 52)
September 2020	3.4	Q13: Renumber to Q13a
		Q13b: NEW PATH status of "Unable to Locate Client"
		Q25: Update response options for Exit Destination
		Q26: Update response options for Prior Living Situation
		Q26K: NEW demographic question on history of domestic violence
		Change the "/" mark in New/Active and Active/Enrolled universe descriptions to "&" for clarification purposes. No change to logic or definition of these universes.
		Add CSV file naming convention
October 2020	3.4	Added clarifying instructions (bullet 8) for Q26f
		(note: version number intentionally kept the same)
September 2021	3.5	Updated document throughout to align with FY 2022 HMIS Data Standards.
		Additional clarify added to instructions for Q12a and 12b.
		Change "Mental Health Problem" to "Mental Health Disorder" and "Substance Abuse" to "Substance Use Disorder" throughout document.
		Change Ethnicity and Race options in Q26 table.
		Update Q26a Gender programming instructions to account for new response options and logic.
		Corrected line numbers in Q26 table.

Introduction

This *Programming Specification* document complies with the PATH Annual Report Manual and the FY 2022 HMIS Data Standards. This version of the PATH Annual Report is due to be available in HMIS systems by October 1, 2021. PATH grantees will be required to use this version of the report for any FY 2022 reporting, including quarterly reporting that occurred prior to October 1, 2021.

This report must be able to be generated using a date range of the grantee's choosing, even if it pre-dates October 1, 2021.

The specifications for each question are broken up into the following components:

1. **Report Table** – the full table from the Report Document template.

2. Data Standards and Field Reference Table.

   a. **Project Types** – project types (as listed in the HMIS Data Dictionary) required to complete each question. This is, in essence, a 'translation' of the Program Applicability from the terms used in the Report, to the program types that the HMIS Data Standards require HMIS systems to store. Questions can be left blank or omitted entirely if they are not applicable to a particular project.

b. **HMIS Standard Reporting Terminology Glossary** - When appropriate, global definitions will be referenced to assist in programming using the most current version of the Glossary available on the HUD Exchange.

3. **Programming Instructions** - these are the steps to be taken to generate accurate report counts. They include the variables used, logic to select applicable client records, and the detail for how to populate each count within the question.

Selecting Relevant Client Project Stay Records for the Report Operating Year

- Date Range – a period to be identified by the end user and differing among each state and territory. Each state or territory's State PATH Contact (SPC) sets the date range for the reporting period. Users must be able to enter the dates according to their individual state requirements. At minimum, the user will generate a report for a yearlong period. (Some states or territories also require quarterly submissions of the Annual Report, known as Progress Reports. Progress Reports can be submitted as either 'Cumulative Progress Reports' which include all data for a reporting period, or they can be 'Discrete Progress Report', which contains data for discrete periods that do not overlap. Grantees cannot use the 'Discrete Progress Reports' to populate the Annual Report.)

- When a Continuum of Care serves clients across multiple states, the geocode for the client (Data Standard 3.16 [Client Location]) can be used to filter clients based on the state in which the client resides.

CSV Export

To facilitate accurate HMIS data submission in PDX, SAMHSA is requiring a CSV format specific to this report. This format is similar to the APR and CAPER CSV files for Sage. The export must be a single .zip file containing only the five files listed below. The file names are not case-sensitive. Within each file, there must be exactly the number of rows and columns corresponding to the table shell for the relevant question. Be sure to include a comma for every cell in the table, even if it is blank, to make sure every row has the same number of fields. The row and column header text is not important; PDX will map each value during the import based exclusively on its row and column position. However, it is important that row and column headers be double-quoted like any string commonly found in a CSV file.

File Number	File Name	Rows	Columns	
1	Q8-Q16.csv	11	2	View table shell
2	Q17.csv	14	2	View table shell
3	Q18.csv	12	3	View table shell
4	Q19-Q24.csv	31	4	View table shell
5	Q25.csv	43	2	View table shell
6	Q26.csv	95	3	View table shell

Sample file – Q8-Q16.csv

```
"Persons served during this reporting period:","Count"
"8. Number of persons contacted by PATH-funded staff this reporting period",423
"9. Number of new persons contacted this reporting period in a PATH Street Outreach project",353
"10. Number of new persons contacted this reporting period in a PATH Services Only project",0
"11. Total number of new persons contacted this reporting period (#9 + #10 = total new clients contacted)",353
"12a. Instances of contact this reporting period prior to date of enrollment",299
"12b. Total instances of contact during the reporting period",57
"13a. Number of new persons contacted this reporting period who could not be enrolled because of ineligibility for PATH", 2
"13b. Number of new persons contacted this reporting period who count not be enrolled because provider was unable to locate the client", 4
"14. Number of new persons contacted this reporting period who became enrolled in PATH",238
"15. Number with active, enrolled PATH status at any point during the reporting period",242
"16. Number of active, enrolled PATH clients receiving community mental health services through any funding source at any point during the reporting period",102
```

Sample file fragment – Q25.csv

This sample illustrates how to handle subtitles with no counts in the table shell, along with subtotals.

```
"Destination at Exit","Count"
"Temporary Destinations",
"Emergency shelter, including hotel or motel paid for with emergency shelter voucher",1
"Moved from one HOPWA funded project to HOPWA TH",6
"Transitional housing for homeless persons",2
"Staying or living with family, temporary tenure (e.g. room, apartment or house)",5
"Staying or living with friends, temporary tenure (e.g. room apartment or house)",7
"Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)",1
"Safe Haven",6
"Hotel or motel paid for without emergency shelter voucher",7
"Subtotal",35
"Institutional Situation",
(remaining rows clipped)
```

Sample file fragment – Q26.csv

This sample fragment illustrates placeholder commas for cells that are blank in the table shell.

```
,,"Of those with an active enrolled PATH status during this reporting period how many individuals are in each of the following categories?"
"26a. Gender","Female",94
,"Male",202
,"Trans Female (MTF or Male to Female)",1
,"Trans Male (FTM or Female to Male)",0
,"Gender Non-Conforming (i.e. not exclusively male or female)",0
,"Client doesn't know",0
,"Client refused",0
,"Data not collected",0
,"TOTAL",297
```

Program and Project Type Applicability

The [federal partner funding source] equals response number 21 HHS: PATH-Street Outreach & Supportive Services only.

Each question on the Report has been identified as being applicable to particular project types. Questions which do not apply to a particular project type may not be visible to users in a reporting portal; the HMIS-generated Report may omit or leave blank questions that do not apply.

- A PATH-funded organization may have one or more projects in the HMIS, which are reported on one PATH annual report. If the organization uses both project types 4 and 6, the PATH Annual Report should be programmed to run across both project types on one report to de-duplicate individuals served by both project types.

- Project Type 4 – Street Outreach: PATH-Funded street outreach projects focus on people who reside in a place not meant for human habitation (e.g. streets, abandoned buildings, etc.).

- Project Type 6 – Services Only: PATH-Funded services only projects focus on people who reside in a place meant for human habitation, or who are at risk of homelessness (emergency shelters, Safe Havens, etc.).

All questions in the report apply to both project types except Q9 and Q10. Q9 reports only on project type 4 (street outreach). Q10 reports only on project 6 (services only).

Questions about PATH budgets (Q1 – Q7) are not extracted from an HMIS, so no programming instructions are being provided.

Determining Which Clients to Include

Unless otherwise specified, "all person counts" are the unduplicated count of clients within each row of a particular question. This report utilizes the HMIS Standard Reporting Terminology Glossary along with PATH-specific logic to define the universe of clients to be included in each report question. There are three universes used in the report: Active, New & Active, and Active & Enrolled. Each universe is defined here; each question refers to one of the three universes.

Unless otherwise specified, use data from each client's latest project stay (the stay with the latest [project start date]) during the reporting date range. Apply the logic below to this project stay to further determine the relevant clients.

1. Active: This Report uses Active Client - Method 2 (Active Clients by Date of Service) from the HMIS Reporting Glossary to determine which clients to include in the reporting universe. These criteria apply to all of the dates for the purposes of determining an active client. The table below lists the date fields to use.

    [date] >= [report start date]
    And [date] <= [report end date]

And [date] >= [project start date]
And ([date] <=[project exit date] or [project exit date] is null)

Where [date] is any of the following:

Field	Data Standards	Additional qualifications
[current living situation]	4.12	Requires that [current living situation] is identifying contacts with the client, not a case worker or housing specialist. If an HMIS is designed to capture other types of contacts, only count contacts with the client.
[date of engagement]	4.13	Where there is not a contact on the [date of engagement] count the date of engagement as a contact.
[PATH status - date of status determination]	P3	Use this date if there is not already a [contact] on the date and [client became enrolled in PATH] = 1 ("yes").
[services provided – PATH funded]	P1	Use this date if there is not already a [contact] on the date.

2. New & Active: New & Active clients are those identified in the Active universe but only those with [project start date] (3.10) during the reporting period should be included. Clients should be counted regardless of PATH enrollment.

("Active" as defined in #1)
And [project start date] >= [report start date]
And [project start date] <= [report end date]

3. Active & Enrolled: Active & Enrolled clients are those identified in the Active universe but only those with a [PATH status] (P3) of "enrolled" (1) prior to or on the end of the reporting period.

("Active" as defined in #1)
And [PATH status - client became enrolled in PATH] = 1
And [PATH status - date of status determination] <= [report end date]
And [PATH status - date of status determination] >= [project start date]
And ([PATH status - date of status determination] <= [project exit date] or [project exit date] is null)

Determining Age-Related Variables

Per the HMIS Reporting Glossary, Age is a global variable determined from a client's [date of birth]. These reporting specifications comply with the recommended methods of determining age per the Glossary.

Relevant HMIS Data Standard Fields

The HMIS Data Standards that are used in the calculation of the report are listed here along with the applicable questions.

Number	Name	Relevant Data	Question
3.03	Date of Birth	mm/dd/yyyy	26b
	DOB Data Quality	1, 2, 8, 9, 99	26b
3.04	Race	1, 2, 3, 4, 5, 8, 9, 99	26c
3.05	Ethnicity	0, 1, 8, 9, 99	26d
3.06	Gender	0, 1, 4, 5, 6, 8, 9, 99	26a
3.07	Veteran Status	0, 1, 8, 9, 99	26e
3.08	Disabling Condition	1	26j
3.917	Living Situation	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 14, 15, 16, 18, 19, 20, 21, 25, 28, 29, 31, 32, 33, 34, 35, 36, 99	26h
	Length of stay in prior living situation	2, 3, 4, 5, 8, 9, 10, 11, 99	26i
	Approximate date homelessness started	mm/dd/yyyy	26j
	Number of times the client has been on the streets, in ES, or SH in the past three years including today	1, 2, 3, 4, 8, 9, 99	26j
	Total number of months homeless on the street, in ES, or SH in the past three years	101, 102-112, 113, 8, 9, 99	26j
3.10	Project Start Date	mm/dd/yyyy	All
3.11	Project Exit Date	mm/dd/yyyy	All
3.12	Destination	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 99	25
4.02	Income and Sources – Information Date	mm/dd/yyyy	19
	Income and Sources – Income from any source	0, 1, 8, 9, 99	19
	Income and Sources – SSI	0, 1	20
	Income and Sources – SSDI	0, 1	20
4.03	Non-cash Benefits – Information Date	mm/dd/yyyy	21
	Non-cash benefits from any source	0, 1, 8, 9, 99	21
4.04	Health Insurance – Information Date	mm/dd/yyyy	22
	Covered by health insurance	0, 1, 8, 9, 99	22
	Medicaid	0, 1	23
	Medicare	0, 1	23
	State Children's Health Insurance Program	0, 1	24
	Veteran's Administration (VA) Medical Services	0, 1	24

Number	Name	Relevant Data	Question
	Employer – Provided Health Insurance	0, 1	24
	Health insurance obtained through COBRA	0, 1	24
	Private Pay Health Insurance	0, 1	24
	State Health Insurance for Adults	0, 1	24
	Indian Health Services Program	0, 1	24
	Other	0, 1	24
4.05	Physical Disability	1	26j
	Physical Disability – Indefinite duration	1	26j
4.06	Developmental Disability	1	26j
4.07	Chronic health condition	1	26j
	Chronic health condition – indefinite duration	1	26j
4.08	HIV/AIDS	1	26j
4.09	Mental Health Disorder	1	16, 26j
	Mental Health Disorder – indefinite duration	1	26j
4.10	Substance Use Disorder	1, 2, 3	26f, 26j
	Substance Use Disorder – indefinite duration	1	26j
4.11	Domestic Violence	0, 1, 8, 9, 99	26k
4.12	Current Living Situation [Date of Contact]	mm/dd/yyyy	8-15
P1	Services Provided – PATH Funded – Date of Service	mm/dd/yyyy	17
	Services Provided – PATH Funded – Type of Service	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 14	17
4.13	Date of Engagement	mm/dd/yyyy	8-14
P2	Referrals Provided – PATH – Date of referral	mm/dd/yyyy	18
	Referrals Provided – PATH – Type of Referral	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	18
	Referrals Provided – PATH – Outcome	1	18
P3	PATH Status - Date of Status Determination	mm/dd/yyyy	12 – 26
	PATH Status - Client Became Enrolled in PATH	0, 1	12 – 26
	PATH Status – Reason not enrolled	1, 2, 3	13a, 13b
P4	Connection with SOAR	0, 1, 8, 9, 99	26g

Report Details Q8 – Q16

Q8 – Q16: Report Table

	A	B	C	D
1	Persons served during this reporting period:	Count	Universe	Project Type
2	8. Number of persons contacted by PATH-funded staff this reporting period		Active	4, 6
3	9. Number of new persons contacted this reporting period in a PATH Street Outreach project		New & Active	4
4	10. Number of new persons contacted this reporting period in a PATH Services Only project		New & Active	6
5	11. Total number of new persons contacted this reporting period (#9 + #10 = total new clients contacted)		New & Active	4, 6
6	12a. Instances of contact this reporting period prior to date of enrollment		Active & Enrolled	4, 6
7	12b. Total instances of contact during the reporting period		Active & Enrolled	4, 6
8	13a. Number of new persons contacted this reporting period who could not be enrolled because of ineligibility for PATH		New & Active	4, 6
9	13b. Number of new persons contacted this reporting period who could not be enrolled because provider was unable to locate the client		New & Active	4,6
10	14. Number of new persons contacted this reporting period who became enrolled in PATH		New & Active	4, 6
11	15. Number with active, enrolled PATH status at any point during the reporting period		Active & Enrolled	4, 6
12	16. Number of active, enrolled PATH clients receiving community mental health services through any funding source at any point during the reporting period		Active & Enrolled	4, 6

Introduction

Count people according to the universe and project type as shown in the report table.

Instructions

1. Do not output columns C and D.
2. Column B Rows 2, 3, 4, 5 and 10: Count people according to the universe and project type as shown in the report table.
3. Column B Row 6: Count the number of contacts between first [contact] and the [date of enrollment].
   a. Start with the universe of active clients.
   b. Of those project stays, further restrict the universe to only stays that have a [PATH status – date of status determination] dated during the reporting period where [client became enrolled in PATH] equals 1. Note that this may result in more than one project stay for some clients who were present at a project more than once in the report date range.
   c. Using data from all of those project stays, count the total number of contacts that occurred >= [project start date] and <= [date of enrollment].
   d. A person may have more than one contact on a given date and each contact should be included in the count.
   e. Use any of the records in Determining Which Clients to include – 1. Active as a "contact" with the client. This includes a normal [current living situation] (4.12) record as well as other date fields described in that section. For example, a worker meets with a client, formally engages the client, and enrolls them:
      i. [current living situation] on 6/1/2021
      ii. [date of engagement] on 6/1/2021
      iii. [PATH status - date of status determination] on 6/1/2021
      These three records count as three contacts.
4. Column B Row 7: Count the number of contacts between [report start date] and [report end date].
   a. Start with the universe of active clients.
   b. Of those project stays, further restrict the universe to only stays that have a [PATH status – date of status determination] dated during the reporting period where [client became enrolled in PATH] equals 1. Note that this may result in more than one project stay for some clients who were present at a project more than once in the report date range.
   c. Using data from all of those project stays, count the total number of contacts that occurred >= [report start date] and <= [report end date].
   d. A person may have more than one contact on a given date and each contact should be included in the count.
   e. Use any of the records in Determining Which Clients to include – 1. Active as a "contact" with the client. This includes a normal [contact] (4.12) record as well as other date fields described in that section. As explained in 3e. above, each different record counts as a separate contact even if they are on the same date.
5. Column B Row 8: Of the total new persons contacted (Column B Row 5) count the clients that have a [PATH status – date of status determination] dated during the reporting period where [client became enrolled in PATH] equals 0 and [reason not enrolled] equals 1.
6. Column B Row 9: Of the total new persons contacted (Column B Row 5) count the clients that have a [PATH status – date of status determination] dated during the reporting period where [client became enrolled in PATH] equals 0 and [reason not enrolled] equals 3.
7. Column B Row 10: Of the total new persons contacted (Column B Row 5) count the clients that have a [PATH status – date of status determination] dated during the reporting period where [client became enrolled in PATH] equals 1.

8. Column B Row 12: Of the Active & Enrolled clients (Column B Row 10), count those where A or B (or both) are true:
    a. Have [services provided-PATH funded] = 4 (community mental health) with [date of service] <= [report end date]
    b. OR ([referrals provided - PATH] equals 1 (community mental health) AND [referral made/outcome] equals 1 (attained) AND [date of referral] <= [report end date])

Report Details Q17: Services Provided

Q17: Report Table

Blank	A	B	C	D
1	Type of Service	Number of people receiving service	Universe	Project Type
2	17a. Reengagement		Active & Enrolled	4, 6
3	17b. Screening		Active & Enrolled	4, 6
4	17c. Clinical Assessment		Active & Enrolled	4, 6
5	17d. Habilitation/rehabilitation		Active & Enrolled	4, 6
6	17e. Community mental health		Active & Enrolled	4, 6
7	17f. Substance use treatment		Active & Enrolled	4, 6
8	17g. Case management		Active & Enrolled	4, 6
9	17h. Residential supportive services		Active & Enrolled	4, 6
10	17i. Housing minor renovation		Active & Enrolled	4, 6
11	17j. Housing moving assistance		Active & Enrolled	4, 6
12	17k. Housing eligibility determination		Active & Enrolled	4, 6
13	17l. Security deposits		Active & Enrolled	4, 6
14	17m. One-time rent for eviction prevention		Active & Enrolled	4, 6

Introduction

Report the number of Active & Enrolled clients (Q15) that received each service during the reporting period.

Instructions

1. Do not output columns C and D.
2. Individuals who received more than one type of service (e.g. screening and case management) should be reported once in all service categories that apply.
3. Individuals who received one service multiple times should only be counted one time for that type of service.
4. Column A Rows 2 – 14: Each row represents a different [services provided – PATH funded] (P1) – Type of Service as follows:
    a. *Reengagement* = where type of service equals 1
    b. *Screening* = where type of service equals 2
    c. *Clinical assessment* = where type of service equals 14
    d. *Habilitation/rehabilitation* = where type of service equals 3
    e. *Community mental health* = where type of service equals 4
    f. *Substance use treatment* = where type of service equals 5

g. *Case management* = where type of service equals 6
h. *Residential supportive services* = where type of service equals 7
i. *Housing minor renovation* = where type of service equals 8
j. *Housing moving assistance* = where type of service equals 9
k. *Housing eligibility determination* = where type of service equals 10
l. *Security deposits* = where type of service equals 11
m. *One-time rent for eviction prevention* = where type of service equals 12

Report Details Q18: Referrals Provided

Q18: Report Table

Blank	A	B	C	D	E
1	Type of Referral	Number receiving each referral	Number who attained the service from the referral	Universe	Project Type
2	Community mental health			Active & Enrolled	4, 6
3	Substance use treatment			Active & Enrolled	4, 6
4	Primary health/dental care			Active & Enrolled	4, 6
5	Job training			Active & Enrolled	4, 6
6	Educational services			Active & Enrolled	4, 6
7	Housing Services			Active & Enrolled	4, 6
8	Temporary housing			Active & Enrolled	4, 6
9	Permanent housing			Active & Enrolled	4, 6
10	Income assistance			Active & Enrolled	4, 6
11	Employment assistance			Active & Enrolled	4, 6
12	Medical Insurance			Active & Enrolled	4, 6

Introduction

Report the number of Active & Enrolled (Q15) clients provided with referrals by referral type during the reporting period. Report the number of Active & Enrolled clients that attained services from referrals during the reporting period.

Instructions

1. Do not output columns D and E.
2. Individuals who received more than one type of referral (e.g. employment assistance and community mental health) should be reported once in all categories that apply.
3. Individuals who received a referral multiple times should only be counted one time for that type of referral.
4. Column A Rows 2 – 12: each row represents a different [referrals provided – PATH] (P2) Type of Referral as follows:
   a. *Community mental health* = where type of referral equals 1.
   b. *Substance use treatment* = where type of referral equals 2.
   c. *Primary health/dental care* = where type of referral equals 3.
   d. *Job training* = where type of referral equals 4.
   e. *Educational services* = where type of referral equals 5.
   f. *Housing Services* = where type of referral equals 6.
   g. *Temporary housing* = where type of referral equals 11.

h. *Permanent housing* = where type of referral equals 7.
   i. *Income assistance* = where type of referral equals 8.
   j. *Employment assistance* = where type of referral equals 9.
   k. *Medical insurance* = where type of referral equals 10.
5. Column B Rows 2 – 12: Each row is an unduplicated count of people who received each referral.
6. Column C Rows 2 – 12: Each row is an unduplicated count of people who attained each referral. Column C should be less than or equal to the count in column B.

Report Details Q19 – Q24: Outcomes

Q19 – Q24: Report Table

Blank	A	B	C	D	E
1	Outcomes	At PATH project Start	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)	Data Standard Fields and Responses
2	19. Income from any source				4.2 Income and Sources Field 2
3	Yes				1
4	No				0
5	Client doesn't know				8
6	Client refused				9
7	Data not collected				99
8	Total	=sum(b3:b7)	=sum(c3:c7)	=sum(d3:d7)	
9	20. SSI/SSDI				4.2 Income and Sources Fields 5 and 6
10	Yes				1
11	No				0
12	21. Non-cash benefits from any source				4.3 Non-Cash Benefits Field 2
13	Yes				1
14	No				0
15	Client doesn't know				8
16	Client refused				9
17	Data not collected				99
18	Total	=sum(b13:b17)	=sum(c13:c17)	=sum(d13:d17)	
19	22. Covered by health insurance				4.4 Health Insurance Field 2
20	Yes				1
21	No				0
22	Client doesn't know				8
23	Client refused				9

Blank	A	B	C	D	E
1	Outcomes	At PATH project Start	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)	Data Standard Fields and Responses
24	Data not collected				99
25	Total	=sum(b20:b24)	=sum(c20:c24)	=sum(d20:d24)	
26	23. Medicaid/Medicare				4.4 Health Insurance Fields 3 and 4
27	Yes				1
28	No				0
29	24. All other health insurance				4.4 Health Insurance Fields 5, 6, 7, 8, 9, 10, 11, 12
30	Yes				1
31	No				0

Introduction

An unduplicated count of Active & Enrolled clients at project start and at exit (leavers) or at report end (stayers).

Universe

At project start (column B) – Active & Enrolled. At project exit (column C) – leavers/enrolled. At report end (column D) – stayers/enrolled.

Instructions

1. Do not output column E.
2. Column B is an unduplicated count of **Active & Enrolled** clients at data collection stage 1.
3. Column C is an unduplicated count of **leavers/enrolled** clients at data collection stage 3.
4. Column D is an unduplicated count of **stayers/enrolled** clients at data collection 1 OR 2, whichever is later.
5. Column B, rows 8, 18, and 25 are totals and each should equal Q15.
    a. Columns C and D, rows 8, 18, and 25 are totals and should equal Q15 when column C and D are summed.
6. Rows 2, 9, 12, 19, 26, and 29 are header rows. There are no calculations in these rows but should appear in the output.
7. Rows 10 and 11: SSI/SSDI
    a. If [SSI] equals 1 AND/OR [SSDI] equals 1, count the client once as yes.
    b. Count of clients as NO where [SSI] <> 1 AND [SSDI] <> 1.
8. Rows 27 and 28: Medicaid/Medicare:
    a. If [Medicaid] equals 1 AND/OR [Medicare] equals 1, count the client once as yes.
    b. Count of clients as NO where [Medicaid] <> 1 AND [Medicare] <> 1.
9. Rows 30 and 31: Other Health Insurance *(Exclude* [Medicaid] *and* [Medicare] *from this calculation):*
    a. If any one form of health insurance equals 1 AND/OR another form of health insurance equals 1, count the client once as yes.
    b. Count of clients as NO where all other forms of health insurance <> 1.

Report Details Q25. Housing Outcomes

Q25: Report Table

Blank	A	B	C
1	25. Destination at Exit	count	3.12 Exit Destination
2	Temporary Destinations		
3	Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home Shelter		1
4	Moved from one HOPWA funded project to HOPWA TH		27
5	Transitional housing for homeless persons		2
6	Staying or living with family, temporary tenure (e.g. room, apartment, or house)		12
7	Staying or living with friends, temporary tenure (e.g. room, apartment, or house)		13
8	Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)		16
9	Safe Haven		18
10	Hotel or motel paid for without emergency shelter voucher		14
11	Host Home (non-crisis)		32
12	Subtotal	Sum (B3:B10)	
13	Institutional Situation		
14	Foster care home or foster care group home		15
15	Psychiatric hospital or other psychiatric facility		4
16	Substance abuse treatment facility or detox center		5
17	Hospital or other residential non-psychiatric medical facility		6
18	Jail, prison, or juvenile detention facility		7
19	Long-term care facility or nursing home		25
20	Subtotal	Sum (B13:B18)	
21	Permanent Destinations		
22	Moved from one HOPWA funded project to HOPWA PH		26
23	Owned by client, no ongoing housing subsidy		11
24	Owned by client, with ongoing housing subsidy		21
25	Permanent housing (other than RRH) for formerly homeless persons		3
26	Rental by client, no ongoing housing subsidy		10
27	Rental by client, with RRH or equivalent subsidy		31

Blank	A	B	C
28	Rental by client, with VASH housing subsidy		19
29	Rental by client, with GPD TIP housing subsidy		28
30	Rental by client, with other ongoing housing subsidy		20
31	Rental by client with HCV voucher (tenant or project based)		33
32	Rental by client in a public housing unit		34
33	Residential project or halfway house with no homeless criteria		29
34	Staying or living with family, permanent tenure		22
35	Staying or living with friends, permanent tenure		23
36	Subtotal	Sum (B21:B31)	
37	Other Destinations		
38	Deceased		24
39	Other		17
40	No exit interview completed		30
41	Client doesn't know		8
42	Client refused		9
43	Data not collected		99
44	Subtotal	Sum (B34: B:40)	
45	PATH-enrolled clients still active as of report end date (stayers)		
46	Total		

Introduction

An unduplicated count of Active & Enrolled clients at project start and at exit (leavers) or at report end (stayers).

Universe

Leavers /enrolled and stayers/enrolled

Instructions

1. Rows 2, 13, 21, and 37 are header rows. There are no calculations in these rows, but they should appear in the output.
2. In rows 2 through 44, report each leaver in the universe according to their [destination] as indicated in column C.
3. In row 45, report the total number of stayers in the universe of clients.
4. In row 46, report the total number of leavers + stayers in the universe of clients.

Report Details Q26: Demographics

Q26: Report Table

Blank	A	B	C	D	E
1			Of those with an active, enrolled PATH status during this reporting period, how many individuals are in each of the following categories?	Data Standard Fields	Data Standards Responses
2	26a. Gender	Female		3.06 Gender	0
3		Male			1
4		No Single Gender			0,1 0,1,4 0,1,4,5 0,1,5 0,4 0,4,5 1,4 1,4,5 4 4,5
5		Questioning			0,1,4,5,6 0,1,4,6 0,1,5,6 0,1,6 0,4,5,6 0,4,6 0,5,6 0,6 1,4,5,6 1,4,6 1,5,6 1,6 4,5,6 4,6 5,6 6
6		Transgender			0,5

					1,5 5
7		Client doesn't know			8
8		Client refused			9
9		Data not collected			99
10		Total	=sum(c2:c9)		
11	26b. Age	17 and under		3.03 Date of Birth	Refer to HMIS Reporting Glossary for Age calculation
12		18 – 23			
13		24 – 30			
14		31 – 40			
15		41 – 50			
16		51 – 61			
17		62 and over			
18		Client doesn't know			
19		Client refused			
20		Data not collected			
21		Total	=sum(c11:c20)		
22	26c. Race (Note: An individual who identifies as multiracial should be counted in all applicable categories. This demographic element will not sum to total persons enrolled)	American Indian, Alaska Native, or Indigenous		3.04 Race	1
23		Asian or Asian American			2
24		Black, African American, or African			3
25		Native Hawaiian or Pacific Islander			4
26		White			5
27		Client doesn't know			8
28		Client refused			9
29		Data not collected			99
30		Total			
31	26d. Ethnicity	Non-Hispanic/Non-Latin(a)(o)(x)		3.05 Ethnicity	0
32		Hispanic/Latin(a)(o)(x)			1
33		Client doesn't know			8
34		Client refused			9

35		Data not collected			99
36		Total	=sum(c31:c35)		
37	26e. Veteran Status (adults only)	Veteran		3.07 Veteran Status	1
38		Non-veteran			0
39		Client doesn't know			8
40		Client refused			9
41		Data not collected			99
42		Total	=sum(c37:c41)		
43	26f. Co-occurring disorder	Co-occurring substance use disorder		4.10 Substance Use Disorder	1, 2 or 3
44		No co-occurring substance use disorder			0
45		Unknown			8, 9 or 99
46		Total	=sum(c43:c45)		
47	26g. SOAR connection	Yes		P4.1 Connection with SOAR	1
48		No			0
49		Client doesn't know			8
50		Client refused			9
51		Data not collected			99
52		Total	=sum(c47:c51)		
53	26h. Prior Living Situation	Literally Homeless		3.917 Living Situation Field 1	Header
54		Place not meant for habitation (e.g., a vehicle, an abandoned building, a bus/train/subway station, airport, or anywhere outside)			16
55		Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home Shelter			1
56		Safe Haven			18
57		Institutional Situation			Header
58		Foster care home or foster care group home			15

59		Hospital or other residential non-psychiatric medical facility		6
60		Jail, prison, or juvenile detention facility		7
61		Long-term care facility or nursing home		25
62		Substance abuse treatment facility or detox center		5
63		Psychiatric hospital or other psychiatric facility		4
64		Transitional and Permanent Housing Situation		Header
65		Hotel or motel paid for without emergency shelter voucher		14
66		Owned by client, no ongoing housing subsidy		11
67		Owned by client, with ongoing housing subsidy		21
68		Permanent housing (other than RRH) for formerly homeless persons		3
69		Rental by client, no ongoing housing subsidy		10
70		Rental by client, with VASH subsidy		19
71		Rental by client, with GPD TIP subsidy		28
72		Rental by client with RRH or equivalent subsidy		31
73		Rental by client with other ongoing housing subsidy		20
74		Rental by client, with HCV voucher (tenant or project based)		33
75		Rental by client in a public housing unit		34
76		Residential project or halfway house with no homeless criteria		29
77		Staying or living in a family member's room, apartment, or house		35
78		Staying or living in a friend's room, apartment, or house		36
79		Transitional housing for homeless persons (including homeless youth)		2
80		Host Home (non-crisis)		32
81		Client doesn't know		8
82		Client refused		9
83		Data not collected		99

84		Total	=sum(c54:c80)		
85	26i. Length of stay in prior living situation (emergency shelter or place not meant for human habitation only)	One night or less		See instructions.	10
86		Two to six nights			11
87		One week or more, but less than one month			2
88		One month or more, but less than 90 days			3
89		90 days or more, but less than one year			4
90		One year or longer			5
91		Client doesn't know			8
92		Client refused			9
93		Data not collected			99
94		Total	=sum(c82:c90)		
95	26j. Chronically homeless (at project start)	Yes		See instructions.	See instructions.
96		No			
97		Unknown			
98		Total	=sum(c92:c94)		
99	26k. Domestic Violence History (adults only)	Yes		4.11 Domestic Violence	1
100		No			0
101		Client doesn't know			8
102		Client refused			9
103		Data Not Collected			99
104		Total	=sum(c100:c104)		

Introduction

An unduplicated count of Active & Enrolled clients (Q15).

Universe

Active & Enrolled

HMIS Reporting Glossary Reference

Age
CH at project start

Instructions

1. Do not output columns D and E.
2. Column C rows 53, 58, and 64 are header rows. There are no calculations in these rows but should appear in the output.
3. Column C rows 2 – 10 (Gender): Use column E to determine on which row to report a client. Because [gender] is a multi-response field, clients are reported according to sets of selected responses. These sets are shown in column E must exactly match those selected for the client record, for example:
   a. Row 3 reports clients with *only* "male" indicated in their data with no other gender responses.
   b. Row 6 reports clients with *only* the combinations (0,5), (1,5), or simply 5.
4. Column C rows 11 – 21 (Age): Report the distinct counts of clients by age bracket.
5. Column C rows 22 – 30 (Race): An individual with multiple races identified should be counted in all applicable categories.
6. Column C rows 31 – 36 (Ethnicity): Report the distinct counts clients by data element response.
7. Column C rows 37 – 42 (Veteran Status): Filter for clients with Age >= 18
8. Column C rows 43 – 46: NOTE: the term "Co-occurring disorder" in this report does not use data in [mental health disorder] (4.09). The universe of clients for this question are those who are Enrolled in PATH as indicated in [PATH status] (P3.2.1 = 1), which implies that the client has a mental health disorder regardless of what is indicated in HMIS in element 4.09. Thus, it is sufficient to report PATH-enrolled clients only according to [substance use disorder] (4.10).
9. Column C rows 53 – 84 (Prior Living Situation): Report the distinct counts clients by data element response.
10. Column C rows 85 – 94 (Length of stay in prior living situation): Filter for clients with [living situation] = 1 or 16, then count clients according to [length of stay in living situation].
11. Column C rows 95 – 98 (Chronically homeless): Refer to page 10 of the HMIS Reporting Glossary under "CH at project start" to determine the values below:
    a. *Yes* = count of clients where [chronically homeless at project start] is true.
    b. *No* = count of clients where [chronically homeless at project start] is false. This DOES NOT include clients with missing data required for the calculation.
    c. *Unknown* = count of clients where [chronically homeless at project start] cannot be determined because some data is missing. This cell will include any clients for whom "CH at project start" cannot be determined as "Yes" or "No" per the guidance in the HMIS Reporting Glossary.
12. Column C rows 99 – 104 (Domestic Violence): Filter for clients with Age >= 18
13. For sections 26f (Co-occurring disorder), 26g (SOAR connection), and 26k (Domestic Violence), use the most recent data available for each relevant enrollment, regardless of collection stage, where the [information date] is:
    a. >= [project start date]
    b. <= [project exit date]
    c. <= [report end date]