# 2012 PATH ANNUAL REPORT PROVIDER GUIDE

Prepared for:

Substance Abuse and Mental Health Services Administration
Center for Mental Health Services
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# Introduction

To comply with federal requirements, provider organizations that receive funds under the Projects for Assistance in Transition from Homelessness (PATH) program must report data that relate to the implementation of the program (see "Reporting Burden", page 19, for statutory requirements). Please read the following instructions carefully. There are no changes to the 2012 PATH Annual Report.

Each of the PATH-funded provider organizations, hereinafter referred to as PATH Providers, must complete a web-based PATH Annual Report. PATH Providers that cannot access the web should inform their State PATH Contact (SPC) and request assistance in entering the data.

Some states provide funds to political subdivisions, such as counties or other local entities that contract with local agencies to provide PATH services. In these cases, states are encouraged to report data from each local agency but may elect to report data from the political subdivision. In order to avoid duplication, states must **not** report from both the subdivision and local agency.

**The reporting website will open on *August 22, 2012* and close on *October 31, 2012*. Reporting is opening earlier this year because the current report form is expiring on October 31, 2012.**

*Providers that collect data for the period of January 1-December 31 are asked to submit data collected from January 1, 2012 through September 30, 2012 for this year's report in order to meet the October 31, 2012 deadline. These modified reporting dates apply **only** to providers with January 1-December 31 data collection periods. All other providers should report their full year of data.*

## *Process for Submitting Data*

The SPC is the primary resource for guidance regarding PATH data and the process for submitting the PATH Annual Report. The process description is below:

1. PATH Providers obtain identification numbers (IDs) and passwords from SPCs.

2. PATH Providers navigate to the "Data" tab (http://pathprogram.samhsa.gov/Path/ProgramInformation.aspx) on the PATH website and click the "PATH Reporting" button (this button does not appear until reporting opens). PATH Providers enter data into the web-based form, validate the data, and print a copy of the PATH Annual Report. Note: If a PATH Provider cannot access the web, the PATH Provider sends the data to the SPC who completes these steps.

3. The SPC verifies that the PATH Annual Reports are accurate.

## *Reminders*

**Table C: Community Mental Health Services (Table C, Item Cd):**  This table should include the number of individuals enrolled in PATH receiving community mental health services paid for by PATH funds **AND** the number of individuals enrolled in PATH successfully linked to other mental health services as a result of the PATH program.  This reminder **does not** apply to any other service in Table C, and also **does not** apply unless the consumer or the service provider confirms consumer receipt of services either verbally or in writing.

**Table C: Services Provided and Table D: Demographics:**  Report service and demographic data on individuals enrolled in PATH only.  Therefore, the number of individuals reported in Table C questions must be equal to or less than that reported in Table B, Item B3 (persons served by PATH─individuals enrolled in PATH).  Also, the sum of persons reported in Table D questions must equal the number of persons reported in Table B, Item B3.  There is one exception.  For Item D8 (length of time living outdoors or in short-term shelter at first contact), the sum of all the entries must equal D7a (housing status at first contact outdoors) plus D7b (housing status at first contact short-term shelter), because this question only asks about individuals who are literally homeless.

**Ensure the Accuracy of the Agency's Name**:  It is not possible to change the name of the PATH Provider agency on the online PATH Annual Report.  If the PATH Provider name needs to change, the SPC must contact the Homeless and Housing Resource Network.

**Data Checks:**  The Homeless and Housing Resource Network conducts data checks and requests explanations for data that appear to be unusual.  The purpose of this process is to ensure the accuracy of the data. Information about these data checks is available on page 20 of this document.

### *Due Date*

Submit fiscal year (FY) 2011 PATH Annual Reports between **August 22, 2012 and October 31, 2012**.  Please note that SPCs may change the deadline for their states.  If the state has a different reporting deadline, SPCs will inform their PATH Providers.  PATH Providers who cannot submit their PATH Annual Report before the deadline should immediately contact their SPCs.

*Please note that providers who collect data for the period of January 1-December 31 are asked to submit data collected from January 1, 2012 through September 30, 2012 for this year's report in order to meet the October 31, 2012 deadline.  These modified reporting dates apply __only__ to providers with January 1-December 31 data collection periods.  All other providers should report their full year of data.*

# Guide to the Online PATH Annual Report

## *Entering Data and Navigating the PATH Annual Report Form*

- Do not leave fields blank. Enter a zero when necessary.

- In Table A, round figures to the nearest dollar.  The form does not allow dollar signs and commas when entering numeric values.

- After answering each question, press the [TAB] key or use the mouse to move to the next question.  To go back to a previous question use [SHIFT][TAB] or the mouse.  Do not press [ENTER] to move from question to question.  Pressing [ENTER] will cause the form to move to the next table.

- To scroll up and down the form, use the mouse to click on the up and down arrows on the right side of the computer screen or use the [PAGE UP] or [PAGE DOWN] keys.  Click the icons at the top right of the form to navigate to Provider Information, Tables A, B, C, or D. In addition, this guide is available by clicking on "Instructions."

- To correct errors, place the cursor on the item for correction and make the changes.

- To save entered data and/or at the end of each table, click "Save/Update Data and Move to the Next Table."  Providers can partially enter data into the PATH Annual Report and can exit the PATH Annual Report and re-enter later for completion as long as the data is saved.

- Data MUST be validated in order to complete the PATH Annual Report.  See "Understanding and Correcting Data Errors" on page 7 for more information about validation errors.

- Once the PATH Annual Report is validated, it is no longer accessible for viewing or updating. Providers must notify the SPC to re-open the PATH Annual Report.  Once re-opened the PATH Annual Report must be validated again, regardless of whether there are any changes.

## *Printing the Completed PATH Annual Report Form*

- Enter all requested data.

- Complete the validation process by clicking on "I am finished. Validate my entries." Correct any validation errors and then repeat the validation process (see "Understanding and Correcting Data Errors," page 7, for more information).

- If there are no errors, a "Validation Confirmation" screen will appear.  Click on "Save and Continue" to move to the next screen.  Print the Summary Report by selecting "File" and then "Print" on the browser screen menu or click on the "Print" icon from the browser.  Hints on printing problems:
    1. Make sure the printer is ONLINE.

2. If the printer is online and not printing, reset the printer.
3. If the printer is on a network, check with the network administrator to make sure the computer has access to print to that printer.

- After printing the PATH Annual Report, close the window by clicking on the little "x" in the right hand corner of the screen. The form will return to the "Validate Entries" screen.

## *Understanding and Correcting Data Errors*

The online PATH Annual Report will not validate if there are mathematical errors or missing answers. For each validation error, the rule number followed by a numeric explanation of the error will appear in a pop-up box. The letter in the equation indicates the table where the error is, followed by the item number. Click on the appropriate table on the form and make the necessary corrections. Print the "Error Check" window for easy reference. Changes **must be saved before proceeding** to validate the entries again or the errors will remain.

Use the "Description of Possible Errors" document to assist in identifying errors and making appropriate revisions. This document is available while filling out the PATH Annual Report by clicking "Instructions" at the top of the page. Direct questions regarding the data and/or revisions to the SPC.

On certain items in Table B, if there is a significant change in the data from FY 2010 to FY 2011, a pop-up window will appear for that item. The system will ask for verification of the entry to be sure it is accurate. If it is accurate, enter an explanation in the comments box at the end of the table. For example, if the number of persons enrolled in FY 2011 (Item B2b) is 50 percent less than the number reported in FY 2010, a message will appear asking for verification of the entry for B2b. If the entry is accurate, enter the explanation of the difference between FY 2010 and FY 2011 in the text box at the bottom of the page. If the entry is inaccurate, correct the entry before saving.

## *Editing/Adding Data after Validating the PATH Annual Report*

It is important that data is accurate and final before submission. Revisions to the data on the web are possible until the PATH Provider validates the data. After the PATH Provider validates the data, the survey locks out the PATH Provider and **no** additional changes are possible. If changes are necessary, contact the SPC and request that the PATH Annual Report be re-opened. Once the SPC re-opens the PATH Annual Report, the PATH Provider can make changes. The PATH Provider will need to validate the PATH Annual Report after changes are complete.

## *General Definitions and Clarifications*

Uniformity of definitions is essential in developing and reporting reliable information on services and programs. A list of definitions for PATH-funded services is in the "Definitions" section beginning on page 21 of this document. These definitions should be available for reference

when completing Table C and are accessible while completing the PATH Annual Report by clicking HELP.  Contact the SPC with additional questions regarding these definitions.

**Tables B, C, and D: Persons Included in Unduplicated Counts**:

1. Individuals included in the PATH Annual Report are those who received a PATH-funded service between the first date of the reporting period and the last date of the reporting period.  This includes individuals who may no longer receive services from the PATH Provider or may have been included in previous PATH Annual Reports.
(The reporting period is the 12-month period for which providers submit data.  The SPC determines the reporting dates.  Providers should contact their SPC with questions regarding the reporting period.  *For this year only, providers who collect data from January 1-December 31 should report data for the 9-month period of January 1, 2012-September 30, 2012.  All other providers should report data for the full 12-month reporting period.)*

2. For PATH Providers working with homeless or at-risk families, **count only those family members who receive services related to their own serious mental illness** as individuals enrolled in PATH.

3. All PATH Providers are encouraged to include actual counts of persons throughout the PATH Annual Report.  In some instances, a PATH Provider may only be able to provide an estimate of these numbers.  Providers should note estimates; explanations of estimation methodology of the reported data are encouraged and should be added in the comments box or the comments section after the PATH Provider validates the PATH Annual Report.

## *Where to Go with Questions*

- Throughout the PATH Annual Report, access instructions and definitions by clicking HELP.  If the pop-up HELP window is not visible, it may be behind the PATH Annual Report window.  If the HELP window is still not visible, ensure that the pop-up blocker is not enabled.  Additionally, a list of all definitions is available in the "Definitions" section of this document beginning on page 21.

- PATH Providers should contact their SPC with questions regarding the PATH Annual Report. Direct questions not resolved by the SPC to the Homeless and Housing Resource Network at (617) 467-6014 or path@samhsa.hhs.gov.  Copy the SPC on e-mails sent to the Homeless and Housing Resource Network.

# Table-by-Table Instructions

## Contact Information

The opening table of the PATH Annual Report gathers information about the reporting dates and contact information for the person responsible for completing the PATH Annual Report, should any follow-up questions arise. This person may or may not be the principal PATH contact person for the PATH Provider agency.

**For FY Beginning:** Enter the first date of the reporting period. If the PATH Provider submitted the PATH Annual Report in the previous year, this field automatically populates with the date used in the last PATH Annual Report. Ensure that the date is the start date for the 2012 PATH Annual Report data. **Providers must notify the SPC if there is a change in reporting dates.**

**For FY Ending:** Enter the last date of the reporting period. If the PATH Provider submitted a PATH Annual Report in the previous year, this field automatically populates with the date used in the last PATH Annual Report. Ensure that the date is the end date for the 2012 PATH Annual Report data. **Providers must notify the SPC if there is a change in reporting dates**

**Contact Person:** Enter the name of the contact person if there are questions regarding the reported PATH data. This person may or may not be the principal PATH contact for the PATH Provider agency or local entity.

**E-mail/Phone/Fax:** Enter the appropriate information for the contact person.

## Table A: Budget Information

This table collects budget and staffing information for the PATH Annual Report. PATH Providers should report actual budget values, not estimates, if at all possible. **Contact the SPC for help determining how to report the budget and before reporting estimated numbers.**

A1. **Total annual dollar amount for services dedicated to persons who are homeless and have serious mental illnesses (includes PATH, matching, and non-PATH funds):** Enter total dollar amount for services dedicated **only to persons who are homeless and have serious mental illnesses** in the reporting fiscal year. This amount should be the sum of federal PATH funds (Item A2), matching PATH funds (Item A3), and any other non-PATH funds. This amount must be greater than zero. **Round to the nearest dollar**.

A2. **Federal PATH funds received from the state:** Enter amount of federal PATH funds received from the state. Be sure to enter only the funds received during the reporting fiscal year. Do not include matching funds, non-PATH funds, or PATH funds carried over from a previous reporting year. This amount must be greater than zero. **Round to the nearest dollar.**

*Data Check: Is the value 50 percent less or 100 percent more than reported in 2011? (A2current−A2previous)/A2previous*

**A3. Matching funds from state, local, or other resources to support the provision of PATH services:** Enter amount of matching PATH funds received or provided during the reporting fiscal year. **Round to the nearest dollar**.
*Data Check: Is the value 50 percent less or 100 percent more than reported in 2011? (A3current−A3previous)/A3previous*

**A4. Indicate the number of staff persons supported by PATH federal and matching funds:** This number includes anyone whose salary includes PATH federal or match funds. This amount must be a whole number.

**A5. Indicate the full time equivalent (FTE) of staff positions supported by PATH federal and matching funds:** Calculate the FTE for each of the federal and/or match PATH-supported staff reported in Item A4**. The total number of FTEs should not exceed the number of staff reported in Item A4 and may be a whole number or a decimal (please round to the nearest 10$^{th}$, e.g., 0.1).** The number of FTEs cannot be zero if the number of federal and/or match PATH-supported staff is greater than zero. To check for accuracy, multiply these FTEs by the average annual wage of the federally supported positions and ensure that it is not more than the federal award.

The term FTE in the context of the PATH Annual Report represents the staff time required to provide and document services funded by PATH federal and matching funds. One FTE represents 40 hours of work per week for 1 year. One-half FTE represents 20 hours of work per week for 1 year. Include both positions fully funded by PATH federal and matching funds and the PATH-funded fraction(s) of any position(s) partially funded by PATH federal and matching funds in the count of total FTEs. **Include positions currently occupied as well as those that are vacant**. Determining the answer to Item A5 is a two-step process:

**Step One**: Determine the FTE for each PATH-funded staff member as follows:
- Ascertain the number of hours per week performing PATH-funded work.
- Divide the number of hours per week performing PATH-funded work by 40, and round to the nearest 10$^{th}$.

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

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

**Step Two:** Once the FTE for each staff member is determined, add up all the FTEs and enter the total in response to Item A5.

**Example A:**  The two staff members in the two examples of Step One who perform PATH-funded tasks have FTEs of 0.2 and 0.3, respectively.  Adding 0.2 and 0.3 equals 0.5.  Record 0.5 for Item A5.

**Example B:**  An organization supports 10 staff members with PATH funds.  The 10 staff members have FTEs of 0.5, 0.2, 0.7, 1.0, 1.0, 0.3, 0.5, 0.6, 1.0, and 0.1, or a combined total of 5.9 FTEs.  Record 5.9 for Item A5.

A6.  **Indicate the type of organization in which the PATH program operates:**  This question asks about the primary purpose of the <u>organization, not the program</u>.  For example, if an organization primarily provides community mental health services, they are probably a community mental health center.  If "other," enter an explanation as to the function of the organization.  Please be sure that the PATH-funded organization does not fit into any of the categories listed in a–h before selecting "other."

## *Table B: Persons Served*

It is essential that PATH Providers include accurate information on the number of persons receiving services.  The annual reporting information should be an **unduplicated count** of persons served/individuals enrolled in PATH within each reporting category.  A person may be counted in more than one category.  Some duplication may occur, especially in services such as outreach where identifying individuals may not be possible, when individuals receive services from more than one PATH Provider, or when individuals relocate from one geographic area to another.

**PATH Providers will report on the total number of individuals enrolled in PATH, regardless of whether federal or match funds provided the services.  PATH Providers should NOT calculate the percentage of persons served with federal PATH funds.**  This change will capture the full effect of the PATH program and reduce reporting burden.

B1.  **Persons who are experiencing homelessness and serious mental illness served by <u>federal and matching</u> PATH funds <u>and</u> other sources:**  Enter the total number of individuals who are PATH eligible and received services from the program, regardless of funding source.  For the definition of "eligibility," see "Definitions" beginning on page 21.

Note:  Individuals enrolled in PATH who are eligible for reporting in this category must be experiencing homelessness or risk of homelessness and severe mental illness simultaneously; it is *not* a sum of all persons experiencing homelessness added to all persons experiencing mental illness.

B2a.  **Persons served by PATH federal and matching funds—Outreach:**  Enter the total number of persons contacted through outreach.  This figure should include all persons contacted through outreach, regardless of enrollment, eligibility, relocation, or refusal of services.  The definition of outreach is as follows:

Outreach is the process of bringing individuals who do not access traditional services into treatment. Effective outreach utilizes strategies aimed at engaging persons into the needed array of services, including identification of individuals in need, screening, development of rapport, offering support while assisting with immediate and basic needs, and referral to appropriate resources. Outreach results in increased access to and utilization of community services by people who are experiencing homelessness and mental illness.

- Active outreach is face-to-face interaction with individuals who are literally homeless on the streets, in shelters, under bridges, and in other non-traditional settings. In active outreach, workers seek out individuals who are homeless.

- Outreach may include methods such as distribution of flyers and other written information, public service announcements, and other indirect methods.

- Outreach may also include "inreach," defined as when placement of outreach staff is in a service site frequented by individuals who are homeless, such as a shelter or community resource center, and direct, face-to-face interactions occur at that site. In this form of outreach, individuals who are experiencing homelessness seek out outreach workers.

*Data Check: Are 0 persons outreached? (B2a=0)*

**B2b.** **Number of outreach contacts who became enrolled in PATH during the year:** Enter the number of persons contacted through outreach who were enrolled in PATH. Item B2b must be less than or equal to item B2a.
*Data Check: Are 100 percent of persons outreached enrolled? (B2a=B2b)*

**B2c.** **Number of outreach contacts who did not become enrolled in PATH during the year:** Enter the number of persons contacted through outreach who were not enrolled in PATH. Item B2c (persons not enrolled) equals Item B2a (persons served) minus Item B2b (persons enrolled).

**B2d.** **Number of outreach contacts (in Item B2c above) not enrolled because they were ineligible:** Enter the number of outreach contacts from Item B2c contacted but not enrolled due to ineligibility. Reasons for ineligibility may include no serious mental illness or not homeless or not at risk of homelessness. For the definition of "eligibility," see "Definitions" beginning on page 21. Item B2d must be less than or equal to Item B2c.
*Data Check: Is the percentage of eligible homeless persons who enrolled in services less than 44 percent? B2b/(B2a−B2d)*

**B3.** **Persons served by PATH federal and matching funds—Individuals enrolled in PATH:** Enter the number of persons enrolled in PATH during the program year. Item B3 includes the number of individuals enrolled through outreach (B2b), individuals enrolled in ways other than outreach (such as walk-ins and referrals), and individuals enrolled in the previous year and still receiving services in FY 2011. Persons included in B3 are the only persons included throughout the rest of the PATH Annual Report.

*Data Check:* *Is the value 50 percent less or 100 percent more than reported in 2011?*
*(B3current−B3previous)/B3previous*

*Data Check:* *Is the federal cost of enrolling a person experiencing homelessness with*
*serious mental illness in services greater than $802? (A2/B3)*

**B4.  Total number of persons receiving any PATH federal or matching supported services
during the year:**  Enter the total number of persons served by the program.  Item B4 (total
number of persons receiving any services) equals Item B2c (outreach contacts not enrolled)
and Item B3 (individuals enrolled in PATH).

## *Table C: Services Provided*

Table C, *Services Provided*, collects information on the funding of services and the number of
persons who receive the service.  Definitions of services are available in the "Definitions"
section beginning on page 21.  These definitions are available by clicking HELP on the reporting
form.

**Funding:**  Indicate whether the service is 100 percent PATH-funded, partially PATH-funded,
service provided but not PATH-funded, or service not provided.  Consult the SPC with
questions about how to report the funding of services.

**Number of individuals enrolled in PATH:**  This section reports on individuals enrolled in
PATH only, so the number indicated **cannot exceed** the number reported in Item B3.  If the
service is 100 percent PATH-funded or partially PATH-funded, enter the number of
individuals who received the service.  If the service provision took place but was not PATH-
funded, or not provided, enter zero for individuals served (see reminder on page 4 for more
information).  For the community mental health services (Cd) question, PATH Providers may
enter a number of persons when selecting "Service provided but not PATH-funded," but if
entering a number greater than zero it will default to "Partially PATH-funded."  The reason
for the default is due to the use of staff time to connect people to the community mental
health services.

**Notes:**

**Community Mental Health Services (Item Cd):**  The number of individuals enrolled in PATH
receiving community mental health services should include the number of individuals
enrolled in PATH receiving community mental health services paid for by PATH **AND** the
number of individuals enrolled in PATH successfully linked to other mental health services
as a result of the PATH program.  This criterion **does not** apply to any other service
specification in Table C.  It also **does not** apply unless the consumer or the provider confirms
that the client is receiving the services either verbally or in writing.

When deciding whether to report community mental health services as 100 percent PATH-
funded or partially PATH-funded, examine the funding of that PATH worker.  If the PATH
worker's time on this activity is 100 percent PATH-funded, then the service is 100 percent

PATH-funded. If the PATH worker's time on this activity is not 100 percent PATH-funded, then it is partially PATH-funded. PATH Providers may select "Service provided but not PATH-funded" and enter the number of persons, but the answer will default to "Partially PATH-funded."

When determining the number of PATH individuals enrolled in PATH to report as receiving community mental health services, please refer to the following guidance:

- *Active Assistance and Confirmation*: A PATH worker helps an individual enrolled in PATH identify a mental health provider, coordinates an intake appointment, and is involved in assuring that the intake results in successful acceptance into mental health services. The PATH worker may confirm successful acceptance by attending the intake meeting in person or following up with the individual after the intake. In this instance, this consumer *would* count in Table C, Item Cd1. PATH Providers must ensure that documentation is placed in the case file notes. The expectation is that this information will come directly from consumers through the worker's follow-up contacts with them. Formal documentation from the mental health service provider is *not* required.

- *Unsuccessful Active Assistance and Coordination*: Regardless of the level of involvement of the PATH Provider, unsuccessful referrals or attempts to engage a consumer in mental health services are *not* counted under Table C, Item Cd1.

- *Simple Referral*: A PATH worker informs a PATH-enrolled consumer of the availability of a mental health service, but is not actively involved in ensuring that the service sees the consumer. This assistance would *not* count under Table C, Item Cd1.

*Data Check*: Is the percentage of enrolled persons who receive community mental health services less than 37 percent? (Cd1/B3)

*Data Check*: Are community mental health services not offered? (Cd=service not provided)

**Staff Training (Item Cf):** Staff training does not require the provider to indicate the number of individuals receiving the services. It only requires the provider to indicate how the service was funded. If the PATH staff provides the training and their salary is fully or partially PATH-funded, their time on this activity counts, even if the training costs were not.

## Table C: Voluntary Outcome Measures

**Voluntary Outcome Measures (Items Ck1−Ck5)**: Beginning in 2009, the PATH Annual Report includes five voluntary outcome measures. These measures, developed in collaboration with a workgroup of SPCs, are in response to a Congressional reporting environment that holds programs to a high standard of outcome data collection and reporting.

Reporting on these outcomes in 2012 is voluntary. PATH Providers that opt not to report these outcomes are still in full compliance with the PATH data-reporting requirement.

PATH Providers that collect this information are highly encouraged to report it in the 2012 PATH Annual Report.

The voluntary outcome measures are:
1. Housing (transitional, supportive, or permanent)
2. Income Benefits
3. Earned Income (employment)
4. Medical Insurance Program (Medicaid, Medicare, and/or state/local plans)
5. Primary Medical Care

Determination of definitions of these outcomes is at the state level.

**Calculating and reporting the voluntary outcome measures:**
The voluntary measures are split into two reporting categories:
- The number of unduplicated individuals enrolled in PATH who received an *assisted referral* for the service.
- The number of unduplicated individuals enrolled in PATH known to have *attained* the service.

Individuals enrolled in PATH may count as both an assisted referral and attainment if they meet the criteria for both categories. PATH Providers will enter the counts of unduplicated individuals enrolled in PATH into the 2012 PATH Annual Report and percentages will automatically calculate using the total number of individuals enrolled in PATH (Table B, Item B3) as the denominator.

There are two important definitions for calculating and reporting voluntary outcome measures:

**Assisted Referral:** A referral that results in the completion and filing of a consumer's application for a service. An assisted referral would include the following activities conducted by the program on behalf of or in conjunction with the consumer (if some, but not all, of these activities occurred, it does not count as a complete assisted referral):
- Assisting the consumer in obtaining the application, <u>AND</u>
- Assisting the consumer in obtaining the appropriate supporting documentation, <u>AND</u>
- Assisting the consumer with completion of the application, <u>AND</u>
- Assisting the consumer in filing the application with the appropriate agency or organization (business if employment)

- <u>OR</u> Referral to a program that specializes in assisting consumers with an application process and who can provide certification that the individual successfully filed the application.

**Attainment:** The PATH Provider confirms that the individuals attained the indicated service through self-report or confirmation by other providers. Count individuals as attaining a service when they *begin receiving the service*. Do not count the individuals as attaining a service when the application process for a service is complete. PATH Providers are <u>not</u> required to obtain written documentation from another provider to confirm attainment.

**Report Placement:** Enter the number of individuals enrolled in PATH for the voluntary outcomes into the following PATH Annual Report boxes:

Ck1. Housing (transitional, supportive, or permanent):
- Box Ck1a: The number of unduplicated individuals enrolled in PATH who received an assisted referral for housing (transitional, supportive, or permanent).
- Box Ck1b: The number of unduplicated individuals enrolled in PATH who attained housing (transitional, supportive, or permanent).

Ck2. Income Benefits:
- Box Ck2a: The number of unduplicated individuals enrolled in PATH who received an assisted referral for income benefits.
- Box Ck2b: The number of unduplicated individuals enrolled in PATH who attained income benefits.

Ck3. Earned Income (employment):
- Box Ck3a: The number of unduplicated individuals enrolled in PATH who received an assisted referral for employment services.
- Box Ck3b: The number of unduplicated individuals enrolled in PATH who attained employment.

Ck4. Medical Insurance Program:
- Box Ck4a: The number of unduplicated individuals enrolled in PATH who received an assisted referral for medical insurance.
- Box Ck4b: The number of unduplicated individuals enrolled in PATH who attained medical insurance.

Ck5. Medical Services:
- Box Ck5a: The number of unduplicated individuals enrolled in PATH who received an assisted referral for primary medical services.
- Box Ck5b: The number of unduplicated individuals enrolled in PATH who attained primary medical services.

**Calculating the number of individuals enrolled in PATH for the voluntary outcome measures:**

1. Identify all individuals enrolled in PATH who meet the criteria for the outcome (i.e., records show that the individual received some kind of assisted referral).
2. Of those individuals enrolled in PATH who received some kind of assisted referral, filter out all individuals who meet the criteria but whose response values are not applicable to the outcome (if calculating the number of individuals enrolled in PATH for the housing outcome, filter out all individuals who received assisted referrals for services other than housing).
3. Count the number of unique IDs of the remaining individuals enrolled in PATH (this count will result in the number of individuals enrolled in PATH).
4. Report the number of individuals enrolled in PATH in the appropriate voluntary outcome reporting box.

**Note:** Only count individuals one time in each category.

## *Table D: Demographics*

Table D collects demographic information for individuals enrolled in PATH. Therefore, the sum of individuals enrolled in PATH reported in Items D1–D7 should be the same as the number recorded in Item B3, displayed at the top of "Table D."

There is one exception. Item D8 requests information only about those individuals enrolled in PATH who are literally homeless, which includes only those living outdoors (Item D7a) or in short-term shelter (Item D7b) at first contact. Therefore, Item D8 equals Item D7a plus Item D7b.

PATH Providers should include all demographic information available on each individual enrolled in PATH. Some demographic information (e.g., age) may change during the year. When available, information should reflect the status of individual at first contact. For individuals enrolled in PATH who leave and re-enter the service system, use their demographic data upon re-entry and only count them one time.

It is important not to have a significant number of unknowns in this section. Carefully evaluate any "unknown" entries in this section before submitting the data. Additionally, report the actual number of persons, not estimates, in this table, if at all possible.

The definitions of some of the demographic questions, such as what the different housing status categories mean, are by each state. Contact the SPC with any questions about these items.

**D1. Age:** This number is the age at first contact and does not need to change if the age category changes.

Note: The PATH eligibility criteria state that individuals must have a severe mental illness to receive PATH-funded services. The PATH program does not provide a national definition of serious mental illness but in most states an individual must be at least 18 years old to receive a serious mental illness diagnosis. Individuals under the age of 18 can be diagnosed with a serious emotional disturbance rather than a serious mental illness. While the PATH Annual Report does allow for the reporting of persons under the age of 18, PATH Providers are encouraged to examine whether these individuals meet the eligibility criteria for PATH. For example, if a program serves a family where the mother or father is experiencing serious mental illness, count only the mother or father. Please see the definition of "youth" in the "Definitions" section of this document beginning on page 21 for additional information.
***Data Check:*** *Are persons less than 13 years old or 13–17 years old included in the report? (D1a or D1b>0)*

**D2. Gender:** Self-report is the basis for this question's response. For example, if a person is biologically male, but identifies as female, include the person as female.

**D3. Race/Ethnicity:** Self-report is the basis for this question's response. If consumers state that they are "Hispanic" and "White," include them in "Two or more races." If consumers state that they are "Hispanic," count them only under "Hispanic."

**D4. Principal Mental Illness Diagnosis:** Official documentation or self-report is the basis for this question's response. An unlicensed PATH Provider should not choose a category without documentation or written or verbal confirmation from the consumer.

**D5. Co-Occurring Substance Use Disorders**: Official documentation or written or verbal self-report is the basis for this question's response. Include the individual under "Unknown substance use disorder" for unconfirmed substance use or lack of substance use.

**D6. Veteran Status:** Written or verbal self-report is the basis for this question's response. Indicate as "Unknown" if the question not asked.

**D7. Housing Status (at First Contact):** Written or verbal self-report at first contact is the basis for this question's response. This answer does not change.

**D8. Length of Time Living Outdoors or in Short-Term Shelter at First Contact:** Written or verbal self-report at first contact is the basis for this question's response. This answer does not change.

Please note that Item D8 requests information only about those individuals enrolled in PATH who are literally homeless, which includes only those living outdoors (Item D7a) or in short-term shelter (Item D7b) at first contact. Therefore, Item D8 equals Item D7a and Item D7b.

# Additional Information

## *Reporting Burden*

*For SPCs*:  The reporting burden is 26 hours per annual response, including the time for becoming familiar with the form and reporting requirements, sending ID numbers and passwords to local PATH Providers, obtaining data from local PATH Providers, reviewing the data for accuracy, and revising the data in response to federal review.

*For Local PATH Providers Using the Web Report:*  The reporting burden is 31 hours per annual response, including time for becoming familiar with the form and reporting requirements, obtaining consumer and activity data, aggregating the data, recording the data onto preliminary forms, recording the data onto the official form, reviewing the data for accuracy, submitting the data, and revising the data in response to state review.

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

SAMHSA Reports Clearance Officer
Paperwork Reduction Project (0930-0205)
2nd Floor, 1 Choke Cherry Road
Rockville, MD 20857

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

## *Background*

The PATH program provides funds to each state; the District of Columbia; Puerto Rico; and the U.S. Territories of the Northern Mariana Islands, Guam, American Samoa, and the U.S. Virgin Islands to support services for individuals with serious mental illnesses, as well as individuals with serious mental illnesses and substance use disorders, who are homeless or at risk of becoming homeless.  Public Law 101-645, 42 U.S.C. 290cc-21, section 521 et seq. of the Public Health Service Act authorizes the PATH program.

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

> (1) "securing a record and a description of the purposes for which amounts received under Section 521 were expended during the preceding fiscal year and of the recipients of such amounts; and

(2) determining whether such amounts were expended in accordance with the provisions of this part."

## Use of Reporting Information

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

The analysis of PATH data can help identify many features of the program. Among these items are the following:
- The types of services offered by PATH Providers
- The number and characteristics of the persons receiving services from PATH Providers
- The contribution of PATH funds toward the support of services provided to persons who are homeless and have serious mental illnesses

## Data Checks

The Homeless and Housing Resource Network reviews the PATH Annual Reports for a variety of "flags." Below are some possible flags. Please note that flags do not necessarily indicate an error but do indicate data that are unusual for a "typical" PATH program. Also, note that these may or may not be the flags used in 2012.

If the PATH Annual Report flags any of these items, the recommendation is to provide a short explanation for why the data is correct in the text box on Table B. If the explanation does not fit in the text box, send it to the SPC (please indicate the provider ID and copy path@samhsa.hhs.gov on the e-mail). If there is no explanation provided, the Homeless and Housing Resource Network will work with the SPC to obtain an explanation at a later date.

- Federal dollars decreased by 50 percent or increased by 100 percent
  *(A2current−A2previous)/A2previous*

- Match dollars decreased by 50 percent or increased by 100 percent
  *(A3current−A3previous)/A3previous*

- Zero individuals outreached *B2a=0*

- One hundred percent of persons outreached enrolled *B2b=B2a*

- Percentage of eligible persons experiencing homelessness who enrolled in services is less than 44 percent* *B2b/(B2a−B2d)*

- The number of individuals enrolled in PATH decreased by 50 percent or increased by 100 percent *(B3current−B3previous)/B3previous*

- Average federal cost of enrolling a person experiencing homelessness with serious mental illness in services is greater than $802* *(A2/B3)*

- Percentage of enrolled persons who receive community mental health services is less than 37 percent* *(Cd1/B3)* **OR** community mental health services are not offered *(Cd=service not provided)*

- Persons under the age of 18 enrolled *(D1a or D1b is greater than 0)*

*Targets derived from the Government Performance and Results Act measures for PATH. If interested in learning more about the targets, download the 2011 Congressional Justification (PATH addressed beginning on page 71-76).

## *Definitions*

*The following definitions are from preexisting documents and have not been altered.*

**Alcohol or Drug Treatment Services:** Preventive, diagnostic, and other outpatient treatment services as well as support for people who have a psychological and/or physical dependence on one or more addictive substances, and a co-occurring mental illness. *Services Definitions (AWG 2005)*

**Assisted Referral:** A referral that results in the completion and filing of a consumer's application for a service. An assisted referral would include the following activities being conducted by the program on behalf of or in conjunction with the consumer (if some, but not all, of these activities were conducted it does not count as a complete assisted referral):
- Assisting the consumer in obtaining the application, AND
- Assisting the consumer in obtaining the appropriate supporting documentation, AND
- Assisting the consumer with completion of the application, AND
- Assisting the consumer in filing the application with the appropriate agency or organization (business if employment)

- OR Referral to a program that specializes in assisting consumers with an application process and who can provide certification that the application has been successfully filed by the consumer.

*PATH Annual Report Instructions 2009 (PATH TA Center, 2009)*

**Attainment:** The PATH Provider confirms that the client attained the indicated service through client self-report or confirmation by other providers. A client is counted as attaining a service when they begin receiving the service. The client is not counted as attaining a service when the application process for a service is complete. PATH Providers are not required to obtain written documentation from another provider to confirm attainment. *PATH Annual Report Instructions 2009 (PATH TA Center, 2009)*

**Case Management Services:** Services that develop case plans for delivering community services to PATH-eligible recipients. The case plans should be developed in partnership with

people who receive PATH services to coordinate evaluation, treatment, housing, and/or care of individuals, tailored to individual needs and preferences. Case managers assist the individual in accessing needed services, coordinate the delivery of services in accordance with the case plan, and follow up and monitor progress. Activities may include financial planning, access to entitlement assistance, representative payee services, etc. *Services Definitions (AWG 2005)*

**Community Mental Health Services:** Community-based supports designed to stabilize and provide ongoing supports and services for individuals with mental illnesses/co-occurring disorders or dual diagnoses. This general category **does not include** case management, alcohol or drug treatment, and/or habilitation and rehabilitation, since they are defined separately in this document. *Services Definitions (AWG 2005)*

**Co-Occurring Substance Use Disorders:** Individuals experiencing substance use disorders *only* are not eligible for PATH services. However, PATH Providers are expected to serve individuals with co-occurring substance use disorders and provide documentation of this in the PATH Annual Report. The designation of a co-occurring disorder would occur when the worker, and in some cases the consumer, believes that the consumer is in a period of active use that affects his/her functioning *or* recovery from substance use and continues to require support. This definition does not require the consumer to be in treatment. Providers are encouraged to engage in a dialogue with the consumer to gain consensus on this determination. *Services Definitions (AWG 2005)*

**Costs Associated With Matching Eligible Homeless Individuals With Appropriate Housing Situations:** Expenditures made on behalf of individuals enrolled in PATH to meet the costs, other than security deposits and one-time rental payments, of establishing a household. These may include items such as rental application fees, furniture and furnishings, and moving expenses. These may also include reasonable expenditures to satisfy outstanding consumer debts identified in rental application credit checks that otherwise preclude successfully securing immediately available housing. *Services Definitions (AWG 2005)*

**Earned Income:** See *Employment.*

**Eligibility:** Once an individual is determined to meet the homeless or at risk of homelessness criteria *and* the mental health or co-occurring criteria, they are determined to be PATH eligible. *National Definitions (AWG, 2009)*

**Employment:** Employment is any instance where services are performed that is subject to the will and control of an employer and for which wages are received by the worker. This definition of employment is not limited to full, part, or seasonal employment; a minimum number of hours worked per week; or the availability of benefits. *Services Definitions (AWG 2005)*

**Employment Services:** Services designed to assist consumers with obtaining employment. Services may include, but are not limited to, application completion, resume development, interview training, and providing access to job listings. *Services Definitions (AWG 2005)*

**Enrollment:** PATH enrollment implies that there is the intent to provide services for an individual other than those provided in the outreach setting. The term enrolled means that there is a mutual intent for the services to begin. PATH enrollment is when:
1) The individual has been determined to be PATH eligible,
2) The individual and the PATH Provider have reached a point of engagement where there is a mutual agreement that "services" will be provided, and
3) The PATH Provider has started an individual file or record for the individual that includes, at a minimum:
   a. Basic demographic information needed for reporting,
   b. Documentation by the Provider of the determination of PATH eligibility,
   c. Documentation by the Provider of the mutual agreement for the provision of services, and
   d. Documentation of services provided.

Although the goal of the PATH program is to assist individuals in accessing mental health services and housing, services that begin the PATH-enrolled relationship can be any service, assistance, or provision of resources that the individual is willing to accept or any mutual work that the individual identifies as important. PATH does not require that a service plan be developed unless case management services are part of the services provided to the individual. PATH Providers are expected to document all services and the outcomes in an individual file. *National Definitions (AWG, 2009)*

**Exemplary Practices**: Activities that are evidence-based, are considered promising practices, are unique or creative responses to specific conditions are successful in bridging gaps or meeting unmet need, or any other exemplary set of actions that can be identified and observed. States are encouraged to point out exemplary practices that the site visit teams might miss without guidance.

**Habilitation and Rehabilitation Services:** Community-based treatment and education services designed to promote maximum functioning, a sense of well-being, and a personally satisfying level of independence for individuals who are homeless and have mental illnesses/co-occurring disorders. *Services Definitions (AWG 2005)*

**Homeless Individual:** According to the Public Health Services Act [42 USCS § 254b] the definition of a homeless individual [Section 330 of the Act], is an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations and an individual who is a resident in transitional housing. *Public Health Services Act (2009)*

**Housing Services:** Specialized services designed to increase access to and maintenance of stable housing for individuals enrolled in PATH who have significant or unusual barriers to housing. For each, enter the number of individuals enrolled in PATH who benefited from or received the service. These services are distinct from and not part of PATH-funded case management, supportive and supervisory services in residential settings, or housing assistance referral activities. *Services Definitions (AWG 2005)*

**Imminent Risk:** Definitions of imminent risk for homelessness commonly include one or more of the following criteria: doubled-up living arrangement where the individual's name is not on the lease, living in a condemned building without a place to move, arrears in rent/utility payments, having received an eviction notice without a place to move, living in temporary or transitional housing that carries time limits, being discharged from a health care or criminal justice institution without a place to live. In addition to the criteria above, persons who live in substandard conditions are, by definition *at risk* of homelessness, due to local code enforcement, police action, voluntary action by the person, or inducements by service providers to go to alternatives like short-term shelters whose residents are considered to be homeless. There is not a recommended time frame for imminence, as individual state eviction laws vary in time and process. *National Definitions (AWG, 2009)*

**Improving the Coordination of Housing Services:** The process of systematically analyzing interagency interactions among housing service providers, developing relevant information, and informing appropriate authorities of viable alternatives for selection of the most effective combination of available resources to best meet the residential needs of the target population. *Services Definitions (AWG 2005)*

**Income Benefits:** Income supports that are not earned income (wages), non-cash benefits (food stamps/Supplemental Nutrition Assistance Program [SNAP], etc.), or temporary financial assistance (security deposits, rental assistance, utility or energy assistance). Income supports are financial supports that can be used at the consumer's discretion and are not limited to specific uses. Examples include Social Security Income (SSI), Social Security Disability Income (SSDI), Temporary Assistance for Needy Families (TANF), and pensions. *Services Definitions (AWG 2005)*

**Literal Homelessness:** Per the PATH legislation, "an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations and an individual who is a resident in transitional housing." *National Definitions (AWG, 2009)*

**Mainstream Services:** Programs and resources that are available to consumers with an understanding that they will be able to remain available to the consumer after their transition out of homelessness. The PATH program encourages a focus on sustainable mental health services and housing. Other mainstream services of importance are services that provide health care, employment/vocational training, community connection, support, and resources for daily needs. *Services Definitions (AWG 2005)*

**Medical Insurance Program**: A program designed to provide medical insurance and/or medical co-pay assistance. *Services Definitions (AWG 2005)*

**Minor Renovation, Expansion, and Repair of Housing:** Services or resources provided to make essential repairs to a housing unit in order to provide or improve access to the unit and/or eliminate health or safety hazards. *Services Definitions (AWG 2005)*

**One-Time Rental Payments to Prevent Eviction:**  One-time rental payments are made for individuals enrolled in PATH who cannot afford to make the payments themselves, who are at risk of eviction without assistance, and who qualify for this service on the basis of income or need. *Services Definitions (AWG 2005)*

**Outreach Services:**  The process of bringing individuals who do not access traditional services into treatment.  Effective outreach utilizes strategies aimed at engaging persons into the needed array of services, including identification of individuals in need, screening, development of rapport, offering support while assisting with immediate and basic needs, and referral to appropriate resources.  Outreach results in increased access to and utilization of community services by people who are experiencing homelessness and mental illness.

- Active outreach is defined as face-to-face interaction with literally homeless people in streets, shelters, under bridges, and in other non-traditional settings.  In active outreach, workers seek out homeless individuals.

- Outreach may include methods such as distribution of flyers and other written information, public service announcements, and other indirect methods.

- Outreach may also include "inreach," defined as when outreach staff are placed in a service site frequented by homeless people, such as a shelter or community resource center, and direct, face-to-face interactions occur at that site.  In this form of outreach, homeless individuals seek out outreach workers.

*Services Definitions (AWG 2005)*

**Planning of Housing:**  Activities related to the analysis and formulation of a detailed set of action steps, timelines, and resources necessary to create or expand housing for the target population. *Services Definitions (AWG 2005)*

**Primary Medical Care**:  Medical care that is overseen by a licensed medical primary care provider. *Services Definitions (AWG 2005)*

**Referrals for Primary Health Services, Job Training, Educational Services, and Relevant Housing Services:**  Services intended to link persons to primary health care, job training, income supports, education, housing, and other needed services not directly provided by the PATH program or individual PATH Providers. *Services Definitions (AWG 2005)*

**Serious Mental Illness:**  PATH Providers may determine individuals as meeting the serious mental illness criteria if there is an informed presumption that the individual:
- is experiencing or displaying symptoms of mental illness and is experiencing difficulty in functioning as a result of these symptoms that indicates severity, and
- has shared or has a known history of engagement with mental health services OR has symptoms and functioning that indicates there is a history of or expected tenure of significant mental health concerns, and

- is of appropriate age to be diagnosed with a serious mental illness, where transition-age youth may be eligible. This determination should reflect and be consistent with the state's definition of serious mental illness.

*National Definitions (AWG, 2009)*

**Screening and Diagnostic Treatment Services:** A continuum of assessment services that ranges from brief eligibility screening to comprehensive clinical assessment. *Services Definitions (AWG 2005)*

**Security Deposits:** Provision of funds for individuals enrolled in PATH who are in the process of acquiring rental housing but who do not have the assets to pay the first and last month's rent or other security deposits required to move in. *Services Definitions (AWG 2005)*

**Staff Training:** Materials, packages, or programs designed to increase the knowledge or skills of individuals who work in shelters, mental health clinics, substance use programs, and other sites regarding the needs of the target population, job-related responsibilities, and service delivery strategies to promote effective services and best practices. *Services Definitions (AWG 2005)*

**Supportive and Supervisory Services in Residential Settings:** Services provided in residential settings that are designed to support individuals during their transition into mainstream services. *Services Definitions (AWG 2005)*

**Technical Assistance in Applying for Housing Assistance:** Targeted training, guidance, information sharing, and assistance to, or on behalf of, individuals enrolled in PATH who encounter complex access issues related to housing. *Services Definitions (AWG 2005)*

**Transition to Mainstream Services**: Individuals enrolled in PATH make a formal change to housing and services funded through programs such as Section 8, Medicaid, public health, mental health/substance abuse, Block Grant, etc. *Voluntary Performance Goals (VPG) Draft Implementation Guidelines (AWG 2003)*

**Youth:** Transition-age youth who are homeless or at risk of homelessness, have a serious mental illness, and who are otherwise considered adults (e.g. emancipated youth), may be PATH enrolled. Youth who are still eligible for other protective or human services may be served by PATH in the outreach setting, and when appropriate enrolled, for the sole purpose of engaging the human services agencies, mental health services, or the education system to serve them. The goal of PATH enrollment is to advocate for the youth in accessing the services available to them and prevent them from falling through the cracks. Serving youth who are minors solely in PATH without the purpose of rapidly, safely, and effectively connecting them to the mainstream child services system is not recommended for PATH programs. *National Definitions (AWG, 2009)*

## *Homeless Management Information Systems (HMIS) and PATH*

PATH and homeless service providers funded through the U.S. Department of Housing and Urban Development's (HUD) Continuum of Care have been advocating for the alignment of reporting requirements for their respective programs. SAMHSA and HUD have been conducting an assessment and evaluation of the commonalities between PATH and the Supportive Housing Program (SHP) funded through HUD's Continuum of Care. The assessment reviewed data collection needs, reporting requirements, and the investigation of the broader use of the Homeless Management Information Systems (HMIS) for PATH data collection and reporting. At the same time, SAMHSA began a process to revise PATH data collection and make reporting more responsive to Congressional needs for outcome measures and program evaluation.

The voluntary outcome measures in Table C (Items Ck1–Ck5) are a first step towards improving reporting for PATH Providers. To support SAMHSA's efforts, HUD has integrated a number of elements in the revised HMIS Data and Technical Standards to specifically accommodate PATH program data collection and reporting needs. This alignment provides an opportunity for PATH Providers who have access to or who are already required to use the local Continuum of Care (CoC) HMIS for other programs to collect, manage, and report their PATH data through the HMIS. Using HMIS can decrease PATH Provider staff burden by eliminating one source of duplicated data collection and management.

PATH Providers, unless required under a non-PATH funding stream, are not required to participate in the local HMIS. PATH Providers are encouraged to contact their local CoC to investigate the opportunities in participating in the HMIS and the CoC. PATH Providers can obtain CoC contact information at www.hudhre.info/index.cfm?do=viewCocContacts.

(Chart A on page 28 of this guide outlines the HMIS data elements that are directly applicable to PATH Provider data collection and reporting requirements.)

## Chart A: PATH HMIS Universal Data Elements (PATH UDEs)

*The following chart is from a pre-existing document that reflects HUD HMIS standard terminology and has not been altered.*

| Client Name: Current | Response Categories | Rationale | Definitions/Instructions |
|---|---|---|---|
| - First Name | | Client full name should be collected to support the unique identification of each person served. | Programs should seek to obtain legal names only and avoid aliases or nicknames. |
| - Last Name | | | |
| - Middle Name | | | |
| - Suffix | | | |
| **Social Security Number** | | | |
| - Social Security Number | | Three Reasons for collection: <br> -Needed for de-duplication <br> -Can be used as a unique identifier <br> -SSN is needed to increase use of mainstream programs by persons who are homeless. | Record the 9 digit Social Security Number |
| - SSN Data Quality Code | • Full SSN Reported <br> • Partial SSN Reported <br> • Don't Know or Don't Have SSN <br> • Refused | The SSN Data Quality Code is required as a companion element to the SSN to identify instances where the entire SSN cannot be collected and for assessing data quality. | When a full SSN is not collected, the known digits should be placed within a 9-digit placeholder as they would appear in the SSN itself: ___-__-1234 |
| **Date of Birth** | | | |
| -Date of Birth | | The Date of Birth is used to calculate the age of persons served at program entry or at any point in receiving services. It will also support the unique identification of each person served. | Collect the month, day, and year of birth from every client served. |
| - Date of Birth Type | • Full DOB Reported <br> • Approximate or Partial DOB Reported <br> • Don't Know <br> • Refused | The Date of Birth Type is required as a companion element to the DOB to identify instances where the entire DOB cannot be collected and for assessing data quality | When a full DOB is not collected, then known elements should be placed within the date format as appropriate. Approximate dates must allow calculation of a person's age within one year of their actual age. |

| **Ethnicity and Race** | | | |
|---|---|---|---|
| - Race | • American Indian or Alaska Native<br>• Asian<br>• Black or African American<br>• Native Hawaiian or Other Pacific Islander<br>• White<br>• Don't Know<br>• Refused | In accordance with Federal Register (62 FR 58782) the Office of Management and Budget (OMB), require the standardized collection of race information by all Federal agencies. | -**American Indian or Alaska Native** (a person having origins in any of the original peoples of North and South America, including Central American, and who maintain tribal affiliation or community attachment).<br>-**Asian** (a person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.)<br>-**Black or African American** (a person having origins in any of the black racial groups of Africa. Terms such as "Haitian" can be used in addition to "Black or African American".)<br>-**Native Hawaiian or Other Pacific Islander** (a person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.)<br>-**White** (a person having origins in any of the original peoples of Europe, the Middle East or North Africa.) |
| - Ethnicity | • Non-Hispanic/Non-Latino<br>• Hispanic/Latino<br>• Don't Know<br>• Refused | Ethnicity is to count the number of persons who identify themselves as Hispanic or Latino. | Ethnicity is client self-identified; staff observations should not be used. The definition of Hispanic or Latino is a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture, regardless of race. |
| **Gender** | | | |
| - Gender | • Female<br>• Male<br>• Transgendered Male to Female<br>• Transgendered Female to Male<br>• Other<br>• Don't Know<br>• Refused | To create separate counts of men, women, and transgendered clients served. | Based on client's self-perceived gender identify. Transgender is identification with, or presentation as, a gender that is different from the gender at birth. |
| **Veteran Status** | | | |
| - Veteran Status | • Yes<br>• No<br>• Don't Know<br>• Refused | To determine the number of homeless veterans | This data element is best obtained by asking if the person served in the U.S. Military or Armed Forces. Persons who served in National Guard are included as veterans if they were called up for active duty. |

| Disabling Condition | | | |
|---|---|---|---|
| - Disabling Condition | • Yes<br>• No<br>• Don't Know<br>• Refused | Needed to identify Chronic Homeless, special considerations for sheltering, and, in some cases, program eligibility. | Data should be collected any time AFTER the client has been admitted to the program (unless disability is a program eligibility criteria). See Section 223 of the Social Security Act and Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act for definitions on disability. |
| **Residence Prior to Program Entry** | | | |
| - Type of Residence | • Emergency Shelter, including hotel or motel paid for with emergency shelter voucher<br>• Transitional housing for homeless persons (including homeless youth)<br>• Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)<br>• Psychiatric hospital or other psychiatric facility<br>• Substance abuse treatment facility or detox center<br>• Hospital (non-psychiatric)<br>• Jail, prison or juvenile detention facility<br>• Rental by client, no housing subsidy<br>• Owned by client, no housing subsidy<br>• Staying or living in a family member's room, apartment or house<br>• Staying or living in a friend's room, apartment or house | To identify the type of residence and length of stay at that residence just prior to (i.e., the night before) program admission. | Residence is a place not a situation. If a client was receiving a subsidy in the prior residence, then responses should reflect that subsidy rather than just the residence type ("Rental by client, with other (non-VASH) housing subsidy" vs. "Rental by client, no housing subsidy"). |

| | | | |
|---|---|---|---|
| | • Hotel or motel paid for without emergency shelter voucher<br>• Foster care home or foster care | | |
| - Length of Stay in Previous Place | • One week or less<br>• More than one week, but less than one month<br>• One to three months<br>• More than three months, but less than one year<br>• One year or longer<br>• Don't Know<br>• Refused | | This data element does not preclude the collection of residential history information beyond the residence experienced the night prior to program admission. |
| **Zip code of Last Permanent Address** | | | |
| - Zip code | | To identify the former geographic location of persons experiencing homelessness or current geographic location of person who are at risk of homelessness. | Enter the 5 digit area code of the apartment, room, or house where the client last lived for 90 days or more. This data element is best collected by asking the city/state of the apartment, room, or house where the client last lived for at least 3 months. Best practices include collecting city/state information at intake and the data used by data entry staff to find and enter the 5-digit zip code. At-a-glance documents that list the most commonly occurring zip codes that incorporate business rules for primary zip code in cities/towns with multiple zip codes are effective resources to expedite zip code identification and entry. HPRP, prevention programs, and PATH activities conducted while the client is in transitional or permanent housing situations should record the zip code of the apartment, room, or house where the client is currently living. |
| - Zip code Data Quality Code | • Full or Partial Zip Code Reported<br>• Don't Know<br>• Refused | The Zip code Data Quality Code is required as a companion element to the Zip code to identify instances where the entire Zip code cannot be collected and for assessing data quality. | |

| Housing Status | | | |
|---|---|---|---|
| - Housing Status | • Literally homeless<br>• Housed and at imminent risk of losing housing<br>• Housed and at-risk of losing housing<br>• Stably housed<br>• Don't Know<br>• Refused | To identify clients who, at program entry and exit, are literally homeless; housed, but at imminent risk of losing their housing; housed, but at-risk of losing their housing; or in a stable housing situation. Allows for the separation of housed vs. non-housed populations. | This data element is not intended to be used for program eligibility determination purposes, as program eligibility may vary by program and/or funding source. |
| **Program Entry Date** | | | |
| - Program Entry Date | | To determine the start of a client's period of program involvement with a program. Need for reporting purposes for all programs and to measure lengths of stay for residential programs and lengths of service for non-residential programs. | Record the month, day, and year of the first day of service or program entry. |
| **Program Exit Date** | | | |
| - Program Exit Date | | To determine the end of a client's period of program involvement with a program. Need for reporting purposes for all programs and to measure lengths of stay for residential programs and lengths of service for non-residential programs. | Record the month, day, and year of the first day of service or program exit |
| Computer Generated UDEs | | | |
| **Personal Identification Number** | | | |
| - Personal Identification Number | | Every client receiving services is assigned a Personal Identification Number (PIN), which is a permanent and unique number generated by the HMIS application. | Should be assigned by the HMIS application and be a randomly assigned, computer generated number. Cannot contain personally identifying information. |

| **Household Identification Number** | | | |
|---|---|---|---|
| - Household Identification Number | | To count the number of households served in a program and to distinguish household membership characteristics. | A household is a single individual or a group of persons who together apply to a program for services. A unique ID number is assigned to each household served and members of the household are associated with the unique ID. This ID can be a randomly assigned, computer generated number. |
| PATH HMIS Program-Specific Data Elements (PATH-PDEs) | | | |
| **Income and Sources** | | | |
| Financial Resources: Income received from any source in past 30 days? | • Yes<br>• No<br>• Don't Know<br>• Refused | Income and sources are important to:<br>-understand service needs of clients<br>-determine access to all eligible income sources<br>-describe characteristics of homeless population | Enter whether or not the client has received income from any source in the past 30 days. |
| **Source and Amount of Income** | | | |
| -Source of Income | • Earned Income (i.e., employment income)<br>• Unemployment Insurance<br>• Supplemental Security Income(SSI)<br>• Social Security Disability Income (SSDI)<br>• Veteran's disability payment<br>• Private disability insurance<br>• Worker's Compensation<br>• Temporary Assistance for Needy Families (TANF) (or other local name)<br>• General Assistance (GA)(or other local name)<br>• Retirement income from Social Security<br>• Veteran's pension<br>• Pension from a former job | | Enter to source of any income the client has received in the past 30 days. |

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| | • Child support<br>• Alimony or other spousal support<br>• Other source | | |
| -Receiving Income Source | • Yes<br>• No | To clearly delineate between income sources received and not received. | All income sources must be marked with a Yes or No |
| -Amount from Source | | To document the amount of each income source. | Income sources not received should be documented as $0. |
| -Total Monthly Income | | To understand the ongoing income resources available to the client. | This is a summation of the dollar amounts of income sources indicated "Yes" (Received). |
| **Non-Cash Benefits** | | | |
| Non-Cash Benefits received from any source in past 30 days? | • Yes<br>• No<br>• Don't Know<br>• Refused | Income and sources are important to:<br>-understand client's access to mainstream benefits<br>-ascertain the complete economic circumstances of the client | Enter whether or not the client has received non-cash benefits from any source in the past 30 days. |

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| -Source of Non-Cash Benefit | • Supplemental Nutrition Assistance Program (SNAP) (formerly known as Food Stamps)<br>• MEDICAID health insurance program (or local name)<br>• MEDICARE health insurance program (or local name)<br>• State Children's Health Insurance Program (or local name)<br>• Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)<br>• Veteran's Administration (VA) Medical Services<br>• TANF Child Care services (or use local name)<br>• TANF Transportation services (or use local name)<br>• Other TANF-funded services (or use local name)<br>• Other source | | Enter to source of any Non-Cash Benefit the client has received in the past 30 days. |
| -Receiving Non-Cash Benefit | • Yes<br>• No | To clearly delineate between Non-Cash Benefits received and not received. | All Non-Cash Benefits must be marked with a Yes or No |

| **Mental Health** | | | |
|---|---|---|---|
| Mental Health problem | • Yes<br>• No<br>• Don't Know<br>• Refused | To identify and count the number of persons with mental health problems served and assess the need for treatment | Unless a requirement for program eligibility, ask this question AFTER the client has been admitted to the program. Mental health problems may include serious depression, serious anxiety, hallucinations, violent behavior or thoughts of suicide. |
| (If client has mental health problem) Expected to be of long-continued duration and substantially impairs ability to live independently | • Yes<br>• No<br>• Don't Know<br>• Refused | To identify potential of disability | |
| (If client has mental health problem) Currently receiving services or treatment for this condition, or received services/ treatment prior to exiting the program? | • Yes<br>• No<br>• Don't Know<br>• Refused | To determine the need for services and treatment | |
| **Substance Abuse** | | | |
| Substance Abuse problem | • No<br>• Alcohol abuse<br>• Drug abuse<br>• Both alcohol and drug abuse<br>• Don't Know<br>• Refused | To identify and count the number of persons with substance abuse problems served and assess the need for treatment | Unless a requirement for program eligibility, ask this question AFTER the client has been admitted to the program. |
| (If client has substance abuse problem) Expected to be of long-continued duration and substantially impairs ability to live independently | • Yes<br>• No<br>• Don't Know<br>• Refused | To identify potential of disability | |

| (If client has substance abuse problem) Currently receiving services or treatment for this condition, or received services/ treatment prior to exiting the program? | • Yes<br>• No<br>• Don't Know<br>• Refused | To determine the need for services and treatment | |
|---|---|---|---|
| **Destination** | | | |
| Destination Type | • Emergency Shelter, including hotel or motel paid for with emergency shelter voucher<br>• Transitional housing for homeless persons (including homeless youth)<br>• Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)<br>• Psychiatric hospital or other psychiatric facility<br>• Substance abuse treatment facility or detox center<br>• Hospital (non-psychiatric)<br>• Jail, prison or juvenile detention facility<br>• Rental by client, no housing subsidy<br>• Owned by client, no housing subsidy<br>• Staying or living in a family member's room, apartment or house<br>• staying or living in a friend's room, apartment or | To determine program exit outcome measures | Choose the response that best describes where the client will be staying after program exit. Destination is a place, not a situation. If residence has a subsidy, choose the response that best describes both the residence type and subsidy (i.e., "Rental by client, no housing subsidy" vs. "Rental by client, with housing subsidy"). |

| | | | |
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| | house<br>• Hotel or motel paid for without emergency shelter voucher<br>• Foster care home or foster care group home<br>• Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside); inclusive of "non-housing service site (outreach programs only)"<br>• Other<br>• Safe Haven<br>• Rental by client, with VASH housing subsidy<br>• Rental by client, with other (non-VASH) housing subsidy<br>• Owned by client, with housing subsidy<br>• Don't Know<br>• Refused | | |
| **Date of Contact (required for SHP Street Outreach Programs)** | | | |
| Date of Contact | | To record and count the number of contacts with homeless persons by street outreach programs. | Contact is defined as an interaction between the outreach worker and the client. Because multiple contacts can occur within a single day, a time stamp is also required |

| Location of Contact | • Place not meant for habitation (e.g., vehicle, abandoned building, bus/train/subway station/airport or anywhere outside that is not a Homeless Connect-type event)<br>• Service setting, non-residential (e.g., Homeless Connect-type event, drop in center, day services center, soup kitchen, etc.)<br>• Service setting, residential (e.g., emergency, transitional, or permanent housing; treatment facility, including health, mental health, or substance abuse clinic or hospital; jail, prison, or juvenile detention facility; family or friend's room, apartment, condo, or house; foster care or group home) | To understand the setting and concentration of effort by the outreach program to locate, identify, and engage persons experiencing homelessness. | |
| **Date of Engagement (required for SHP Street Outreach Programs)** | | | |
| Date of Engagement | | To count the number of homeless persons engaged by street outreach programs. | An engagement is defined as an interactive client relationship that results in a deliberate client assessment. For PATH programs, Date of Engagement most closely aligns with the definition of "Engagement" and should be considered synonymous with the HUD definition of Engagement. |
| **Financial Assistance Provided (required for HPRP[1] programs)** | | | |

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[1] The Homeless Prevention and Rapid Re-Housing Program (HPRP)," under Title XII of the American Recovery and Reinvestment Act of 2009, designated $1.5 billion for communities to provide financial assistance and services to either prevent individuals and families from becoming homeless or help those who are experiencing homelessness to be quickly re-housed and stabilized. Providers awarded HPRP funding must use the HMIS in their Continuum of Care.

| | | | |
|---|---|---|---|
| Start date of financial assistance | | To determine length of financial assistance provided during the program. | |
| End date of financial assistance | | To determine length of financial assistance provided during the program. | |
| Financial Assistance Type | • Rental Assistance<br>• Security Deposits<br>• Utility Deposits<br>• Utility Payments<br>• Moving cost assistance<br>• Motel & hotel vouchers | To record the type of financial assistance provided to the client during the program. | Analysis is ongoing for additional applicability to PATH programs. |
| Financial Assistance Amount | | To record the amount of financial assistance provided to the client during the program. | Enter a dollar amount, rounded to the next highest dollar. |
| **Housing Relocation and Stabilization Services Provided (required for HPRP programs)** | | | |
| Start date of service | | To determine length of services provided during the program. | |
| End date of service | | To determine length of services provided during the program. | |
| Type(s) of Service | • Case Management<br>• Outreach and Engagement<br>• Housing search and placement<br>• Legal Services<br>• Credit Repair | To record the type of housing relocation and stabilization services provided to the client during the program. | Analysis is ongoing for additional applicability to PATH programs. |
| **Employment** | | | |
| Employed | • Yes<br>• No<br>• Don't Know<br>• Refused | To assess client's employment status | |
| [If unemployed] Is client looking for work?<br>[If employed] Is client looking for additional employment or increased | • Yes<br>• No<br>• Don't Know<br>• Refused | To assess the client's need for employment services | |

| hours at their current job? | | | |
|---|---|---|---|
| **Services Provided** | | | |
| Date of Service | | To identify and count the number of services provided within a program year. | |
| Type(s) of Service | • Food<br>• Housing Placement<br>• Material Goods<br>• Temporary housing and other financial aid<br>• Transportation<br>• Consumer assistance and protection<br>• Criminal justice/ legal services<br>• Education<br>• HIV/AIDS-related services<br>• Mental health care/counseling<br>• Other health care<br>• Substance abuse services<br>• Employment<br>• Case/care management<br>• Day care<br>• Personal enrichment<br>• Referral to other service(s)<br>• Outreach | To document and report the range of service types provided within a program year. | |

## Chart B: Voluntary Outcome Measure Calculation

*The following chart is from a pre-existing document that reflects HUD HMIS standard terminology and has not been altered.*

| Survey Question ID | Voluntary Outcome Measure | Data Elements Needed | Calculation | Applicable Response Categories |
|---|---|---|---|---|
| Ck1a | Housing: Referral | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Services Provided: Assisted Referral<br>• Referral Service Type | Count the unduplicated [Client unique ID]<br>IF<br>[Services Provided: Assisted Referral] is equal to "yes"<br>AND IF<br>[Assisted Referral: Referral Service Type] is equal to:<br><br>Transitional housing for homeless persons OR<br>Permanent housing<br>OR<br>Room, apartment or house that you rent<br>OR<br>Apartment or House that you own<br>OR<br>Foster care home or foster care group home | • Transitional housing for homeless persons (including homeless youth)<br>• Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)<br>• Room, apartment or house that you rent<br>• Apartment or House that you own<br>• Foster care home or foster care group home |
| Ck1b | Housing: Attained | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Destination (at program exit) | Count the unduplicated [Client unique ID]<br>IF<br>[Destination] at program exit is equal to:<br><br>Transitional housing for homeless persons | • Transitional housing for homeless persons (including homeless youth)<br>• Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)<br>• Room, apartment or house that you rent<br>• Apartment or House that you own<br>• Foster care home or foster care group home |

| | | | OR<br>Permanent housing<br>OR<br>Room, apartment or house that you rent<br>OR<br>Apartment or House that you own<br>OR<br>Foster care home or foster care group home | |
|---|---|---|---|---|
| Ck2a | Income Benefits: Referral | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Services Provided: Assisted Referral<br>• Referral Service Type | Count the unduplicated [Client unique ID]<br>IF<br>[Services Provided: Assisted Referral] is equal to "yes"<br>AND IF<br>[Assisted Referral: Referral Service Type] is equal to:<br><br>Unemployment Insurance<br>OR<br>Social Security Income (SSI)<br>OR<br>Social Security Disability Income (SSDI)<br>OR<br>Veteran's Disability payment<br>OR<br>Private Disability Insurance<br>OR<br>Worker's compensation<br>OR<br>Temporary Assistance for Needy Families (TANF)<br>OR | • Unemployment Insurance<br>• Social Security Income (SSI)<br>• Social Security Disability Income (SSDI)<br>• Veteran's Disability payment<br>• Private Disability Insurance<br>• Worker's compensation<br>• Temporary Assistance for Needy Families (TANF)<br>• General Assistance<br>• Retirement income from Social Security<br>• Veteran's Pension<br>• Pension from a former job<br>• Child Support<br>• Alimony or other spousal support<br>• Other source (not Earned Income, i.e. employment income) |

| | | | | | |
|---|---|---|---|---|---|
| | | | | General Assistance<br>OR<br>Retirement income from Social Security<br>OR<br>Veteran's Pension<br>OR<br>Pension from a former job<br>OR<br>Child Support<br>OR<br>Alimony or other spousal support<br>OR<br>Other source (not Earned Income, i.e. employment income) | |
| Ck2b | Income Benefits: Attained | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Income and Sources (at program exit | Count the unduplicated [Client unique ID]<br>IF<br>[Income Source] is equal to:<br><br>Unemployment Insurance<br>OR<br>Social Security Income (SSI)<br>OR<br>Social Security Disability Income (SSDI)<br>OR<br>Veteran's Disability payment<br>OR<br>Private Disability Insurance<br>OR<br>Worker's compensation<br>OR<br>Temporary Assistance for Needy Families (TANF) | • Unemployment Insurance<br>• Social Security Income (SSI)<br>• Social Security Disability Income (SSDI)<br>• Veteran's Disability payment<br>• Private Disability Insurance<br>• Worker's compensation<br>• Temporary Assistance for Needy Families (TANF)<br>• General Assistance<br>• Retirement income from Social Security<br>• Veteran's Pension<br>• Pension from a former job<br>• Child Support<br>• Alimony or other spousal support<br>• Other source (not Earned Income, i.e. employment income) | |

| | | | | |
|---|---|---|---|---|
| | | | OR<br>General Assistance<br>OR<br>Retirement income from Social Security<br>OR<br>Veteran's Pension<br>OR<br>Pension from a former job<br>OR<br>Child Support<br>OR<br>Alimony or other spousal support<br>OR<br>Other source (not Earned Income, i.e. employment income) | |
| Ck3a | Earned Income: Referral | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Services Provided: Assisted Referral<br>• Referral Service Type | Count the unduplicated [Client unique ID]<br>IF<br>[Services Provided: Assisted Referral] is equal to "yes"<br>AND IF<br>[Assisted Referral: Referral Service Type] is equal to:<br><br>Job Training<br>OR<br>Employment Services<br>OR<br>Employment Opportunities | • Employment<br>• Job Training<br>• Employment Services<br>• Employment Opportunities |
| Ck3b | Earned Income: Attained | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Income and Sources (at | Count the unduplicated [Client unique ID]<br>IF<br>[Income: Source] is equal to: | • Earned Income (i.e., employment income) |

| | | | Earned Income (i.e., employment income) | |
|---|---|---|---|---|
| Ck4a | Medical Insurance: Referral | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Services Provided: Assisted Referral<br>• Referral Service Type | Count the unduplicated [Client unique ID]<br>IF<br>[Services Provided: Assisted Referral] is equal to "yes"<br>AND IF<br>[Assisted Referral: Referral Service Type] is equal to:<br><br>Medicaid health insurance program<br>OR<br>Medicare health insurance program<br>OR<br>State Children's health insurance program<br>OR<br>Veteran's Administration (VA) medical services | • Medicaid health insurance program<br>• Medicare health insurance program<br>• State Children's health insurance program<br>• Veteran's Administration (VA) medical services |
| Ck4b | Medical Insurance: Attained | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Non-cash Benefits (at program exit) | Count the unduplicated [Client unique ID]<br>IF<br>[Non-Cash Benefits] is equal to:<br><br>Medicaid health insurance program<br>OR<br>Medicare health insurance program<br>OR<br>State Children's health insurance program | • Medicaid health insurance program<br>• Medicare health insurance program<br>• State Children's health insurance program<br>• Veteran's Administration (VA) medical services |

| | | | | OR<br>Veteran's Administration (VA)<br>medical services | |
|---|---|---|---|---|---|
| Ck5a | Medical Care: Referral | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Services Provided: Assisted Referral<br>• Referral Service Type | Count the unduplicated [Client unique ID]<br>IF<br>[Services Provided: Assisted Referral] is equal to "yes"<br>AND IF<br>[Assisted Referral: Referral Service Type] is equal to:<br><br>General Medical Care<br>OR<br>Health Screening/Diagnostic Services | • General Medical Care<br>• Health Screening/Diagnostic Services |
| Ck5b | Medical Care: Attained | • Client unique ID (for de-duplication and counting)<br>• Program Entry and Exit Dates<br>• Services Provided | Count the unduplicated [Client unique ID]<br>IF<br>[Services Provided] is equal to:<br><br>General Medical Care<br>OR<br>Health Screening/ Diagnostic Services | • General Medical Care<br>• Health Screening/Diagnostic Services |