ClientTrack HMIS
Data Entry Guide:

PATH Programs

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About this guide

Information in this guide is taken directly from PATH Program HMIS Manual released by the U.S. Department of Housing and Urban Development (HUD). MDHA Staff has added screenshots of ClientTrack HMIS and guidance specific to our HMIS data entry for the program-specific data elements required by SAMHSA for PATH programs (see table below from the PATH Program HMIS Manual).

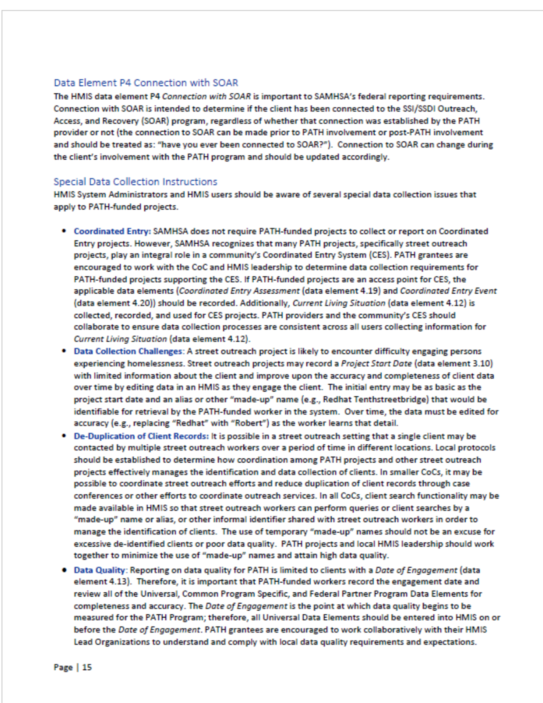
Element Number	HMIS Program Specific Data Element	Street Outreach	Services Only
4.12	Current Living Situation	x	x
4.13	Date of Engagement	x	x
P1	Services Provided – PATH Funded	x	x
P2	Referrals Provided - PATH	x	x
P3	PATH Status	x	x
P4	Connection with SOAR	x	x

x = data collection required
o = data collection is not required but encouraged

Guidance for additional 4.0 series data elements can be found in the HMIS Data Standards Manual.

All guidance added by MDHA is listed on a page with the Homeless Collaborative logo (shown below). Please refer to the full PATH Program HMIS Manual for information on additional data elements, reporting, etc.

Ex: Guidance from the PATH Program HMIS Manual



Data Element P4 Connection with SOAR

The HMIS data element P4 *Connection with SOAR* is important to SAMHSA's federal reporting requirements. Connection with SOAR is intended to determine if the client has been connected to the SSI/SSDI Outreach, Access, and Recovery (SOAR) program, regardless of whether that connection was established by the PATH provider or not (the connection to SOAR can be made prior to PATH involvement or post-PATH involvement and should be treated as: "have you ever been connected to SOAR?"). Connection to SOAR can change during the client's involvement with the PATH program and should be updated accordingly.

Special Data Collection Instructions

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

- **Coordinated Entry:** SAMHSA does not require PATH-funded projects to collect or report on Coordinated Entry projects. However, SAMHSA recognizes that many PATH projects, specifically street outreach projects, play an integral role in a community's Coordinated Entry System (CES). PATH grantees are encouraged to work with the CoC and HMIS leadership to determine data collection requirements for PATH-funded projects supporting the CES. If PATH-funded projects are an access point for CES, the applicable data elements (*Coordinated Entry Assessment* (data element 4.19) and *Coordinated Entry Event* (data element 4.20)) should be recorded. Additionally, *Current Living Situation* (data element 4.12) is collected, recorded, and used for CES projects. PATH providers and the community's CES should collaborate to ensure data collection processes are consistent across all users collecting information for *Current Living Situation* (data element 4.12).
- **Data Collection Challenges**: A street outreach project is likely to encounter difficulty engaging persons experiencing homelessness. Street outreach projects may record a *Project Start Date* (data element 3.10) with limited information about the client and improve upon the accuracy and completeness of client data over time by editing data in an HMIS as they engage the client. The initial entry may be as basic as the project start date and an alias or other "made-up" name (e.g., Redhat Tenthstreetbridge) that would be identifiable for retrieval by the PATH-funded worker in the system. Over time, the data must be edited for accuracy (e.g., replacing "Redhat" with "Robert") as the worker learns that detail.
- **De-Duplication of Client Records:** It is possible in a street outreach setting that a single client may be contacted by multiple street outreach workers over a period of time in different locations. Local protocols should be established to determine how coordination among PATH projects and other street outreach projects effectively manages the identification and data collection of clients. In smaller CoCs, it may be possible to coordinate street outreach efforts and reduce duplication of client records through case conferences or other efforts to coordinate outreach services. In all CoCs, client search functionality may be made available in HMIS so that street outreach workers can perform queries or client searches by a "made-up" name or alias, or other informal identifier shared with street outreach workers in order to manage the identification of clients. The use of temporary "made-up" names should not be an excuse for excessive de-identified clients or poor data quality. PATH projects and local HMIS leadership should work together to minimize the use of "made-up" names and attain high data quality.
- **Data Quality**: Reporting on data quality for PATH is limited to clients with a *Date of Engagement* (data element 4.13). Therefore, it is important that PATH-funded workers record the engagement date and review all of the Universal, Common Program Specific, and Federal Partner Program Data Elements for completeness and accuracy. The *Date of Engagement* is the point at which data quality begins to be measured for the PATH Program; therefore, all Universal Data Elements should be entered into HMIS on or before the *Date of Engagement*. PATH grantees are encouraged to work collaboratively with their HMIS Lead Organizations to understand and comply with local data quality requirements and expectations.

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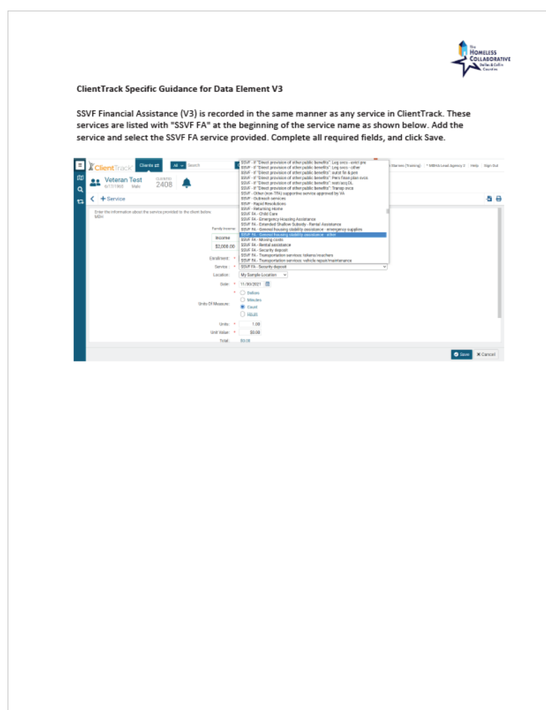
Ex: ClientTrack Guidance from MDHA



ClientTrack Specific Guidance for Data Element V3

SSVF Financial Assistance (V3) is recorded in the same manner as any service in ClientTrack. These services are listed with "SSVF FA" at the beginning of the service name as shown below. Add the service and select the SSVF FA service provided. Complete all required fields, and click Save.

SAMHSA Virtual Data Collection Guidance During Emergencies, Disasters, and Pandemics

SAMHSA recognizes that data collection for the PATH program is challenging specifically during the COVID-19 pandemic. Given the need to provide PATH services during emergencies, disasters, or pandemics, SAMHSA is clarifying the data collection requirements for the PATH program. PATH programs may use these exemptions only when there is a Presidential declaration of emergency, disaster, or pandemic.

SAMHSA encourages PATH-funded programs to provide services during emergencies, disasters, or pandemics virtually and may provide these services via telephone, web-based meeting platforms, and/or tele-medicine models. SAMHSA is also permitting PATH providers to collect and report these virtual contacts and PATH services data into HMIS during emergencies, disasters, and pandemics.

SAMHSA does not encourage virtual service and data collection where in-person service and data collection is safe and appropriate. SAMHSA prefers in-person methodology to create meaningful connection with clients to help prevent and end homelessness.

Data Element 4.12 Current Living Situation

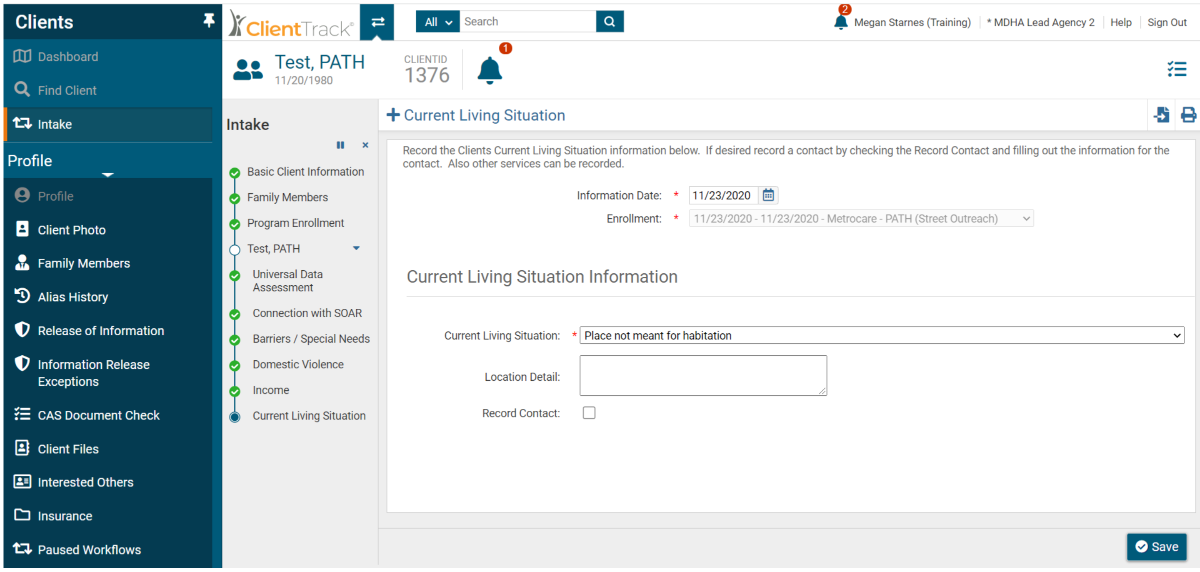
The HMIS "Contact" data element was updated in the FY2020 HMIS Data Standards to **4.12 Current Living Situation**. Current Living Situation is a more robust way of detailing the data collection of contacts. Every time the PATH provider contacts a client, they will answer certain components of the Current Living Situation data element. While the components of the data element were modified under Current Living Situation, the PATH data collection methodology remains unchanged (collect Current Living Situation at project start and at every contact throughout the PATH program data collection process, even after a client has a Date of Engagement recorded).

Current Living Situation has several dependent questions, but PATH providers are required only to record the following at each instance of contact:

- Information Date
- Current Living Situation (although the data element has other options from which to choose, select from the options below):
    - Place not meant for habitation (e.g. a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)
    - Emergency shelter, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter
    - Safe Haven
    - Other
    - Worker Unable to determine

ClientTrack Specific Guidance for Data Element 4.12

Current Living Situation is recorded inside of the workflow in ClientTrack.



It is also possible to record a Current Living Situation outside of the workflow by choosing "Current Living Situation" from the menu on the left.

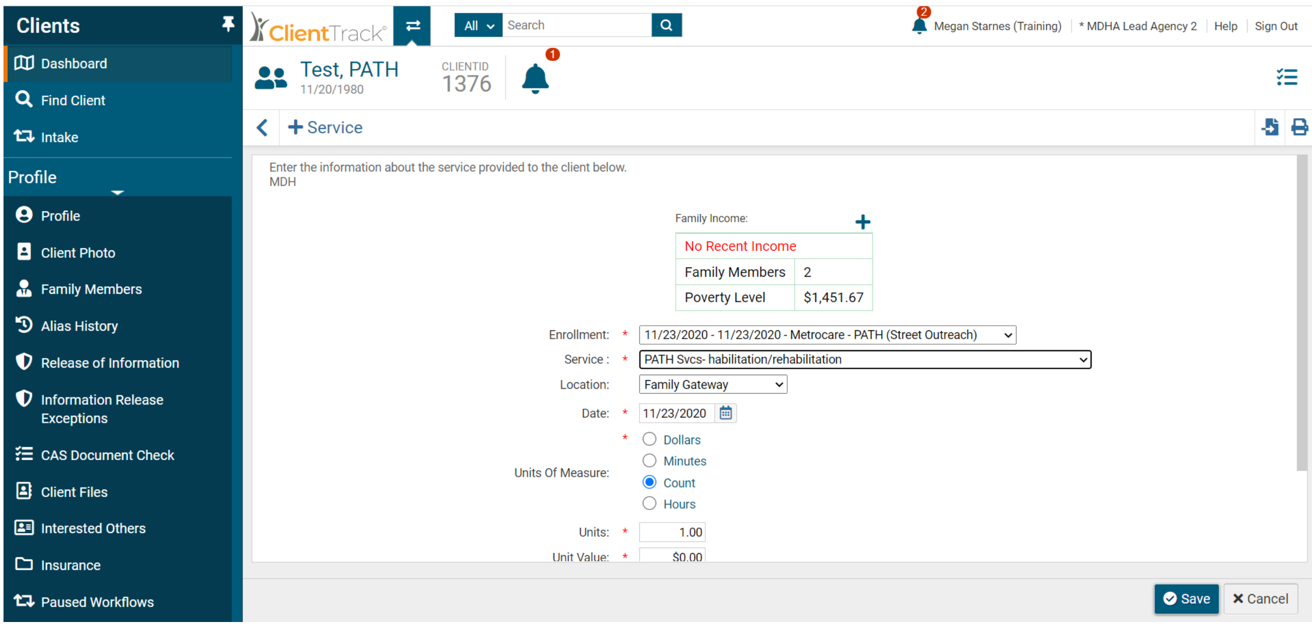
Data Element P1 Services Provided- PATH Funded

The HMIS data element **P1 Services Provided–PATH Funded** is used to determine the PATH-funded services that are provided to a client during and throughout project enrollment and prior to project exit. The PATH Annual Report only requires that you collect one response for each service provided; however, State PATH Contacts (SPCs) may choose to require that their providers collect multiple instances of each service. Regardless, each instance of each type of service provided will only appear once for each unique client receiving the service in the PATH Annual Report. PATH providers are not required to record each instance of PATH-funded services provided to PATH-enrolled clients, but this may be useful in local analysis and planning. The HMIS Data Dictionary and the PATH Annual Report Programming Specifications direct HMIS solutions to allow multiple service occurrences without affecting the PATH Annual Report.

PATH-Funded Service	Definition
Re-engagement	The process of engaging with PATH-enrolled individuals who are disconnected from PATH services.
Screening	An in-person process during which a preliminary evaluation is made to determine a person's needs and how they can be addressed through the PATH Program.
Clinical assessment	A clinical determination of psychosocial needs and concerns.
Habilitation/rehabilitation	Services that help a PATH client learn or improve the skills needed to function in a variety of activities of daily living.
Community mental health	A range of mental health and/or co-occurring services and activities provided in non-institutional settings to facilitate an individual's recovery. *Note: This category does not include case management, alcohol or drug treatment, habilitation, or rehabilitation, as they are standalone services with distinct definitions.*
Substance use treatment	Preventive, diagnostic, and other services and supports provided for people who have a psychological and/or physical dependence on one or more substances.
Case management	A collaboration between a service recipient and provider in which advocacy, communication, and resource management are used to design and implement a wellness plan specific to a PATH-enrolled individual's recovery needs.
Residential supportive services	Services that help PATH-enrolled individuals practice the skills necessary to maintain residence in the least restrictive community-based setting possible.
Housing minor renovation	Services, resources, or small repairs that ensure a housing unit is physically accessible and/or that health or safety hazards have been mitigated or eliminated.
Housing moving assistance	Funds and other resources provided on behalf of a PATH- enrolled individual to help establish that individual's household. *Note: This excludes security deposits and one-time rental payments, which have specific definitions.*
Housing eligibility determination	The process of determining whether an individual meets financial and other requirements to enter public or subsidized housing.
Security deposits	Funds provided on behalf of a PATH-enrolled individual to pay up to two months' rent or other security deposits in order to secure housing.
One-time rent for eviction prevention	One-time payment on behalf of PATH-enrolled individuals who are at risk of eviction without financial assistance.

ClientTrack Specific Guidance for Data Element P1

PATH-funded services are recorded in the same manner as any service in ClientTrack. These services are listed with "PATH" at the beginning of the service name as shown below. Add the service and select the PATH service provided. Complete all required fields, and click Save.



Data Element P2 Referrals Provided- PATH

The HMIS data element P2 Referrals Provided–PATH is used to determine the referrals that are made on behalf of a client during project enrollment. A referral has been attained once the PATH-enrolled client begins receiving services as the result of PATH referral. PATH providers are not required to record each instance of PATH-funded referrals made on behalf of PATH-enrolled clients, but this may be useful in local analysis and planning. It is up to the discretion of each SPC whether all referrals need to be collected in HMIS. If it is determined that all referrals are collected in HMIS, if a PATH-funded worker makes three referrals for the same service for the same PATH-enrolled client between project start and exit, all three referrals should be recorded. Each referral should be marked as "Attained", "Not Attained", or "Unknown" as of project exit. The HMIS Data Dictionary and the PATH Annual Report Programming Specifications direct HMIS solutions to allow multiple referral occurrences without affecting the PATH Annual Report.

- "**Attained**" means the client was connected to and received the service (if the referral is for housing, it is not attained until the housing placement starts).
- "**Not attained**" means the client was referred to, but may not have ever been connected with, the service or did not actually receive the service.
- "**Unknown**" means the status of the client's connection or receipt of service is unknown to the provider entering the data.

Only PATH-funded services and referrals are required to be collected in HMIS. However, many PATH projects and Continuums of Care (CoCs) may find value in collecting the services and referrals provided to a client prior to enrollment or funded by a source other than PATH for local reporting and analysis needs. The HMIS implementation may be configured to allow these services and referrals to be collected. However, any service or referral provided to a client prior to enrollment or provided to the client post enrollment that are not PATH-funded must be excluded from the PATH Annual Report. If the PATH Annual Report is capturing these services or referrals, contact your HMIS vendor to discuss.

PATH Services and Referrals are provided to enrolled clients only. The only service that should be provided before enrollment is outreach, which is recorded as a "contact" with *Current Living Situation* (data element 4.12). PATH providers may provide referrals without enrolling someone in PATH and record that referral in HMIS. However, a PATH-funded referral may not be provided until the person is enrolled in PATH. For example, a PATH provider can provide referrals such as a referral to another project the client may be eligible for, to the local soup kitchen, or the day shelter; however, a PATH provider cannot provide a PATH referral (where the PATH-funded worker plays an active part in making the referral) to someone who is not enrolled in the PATH project.

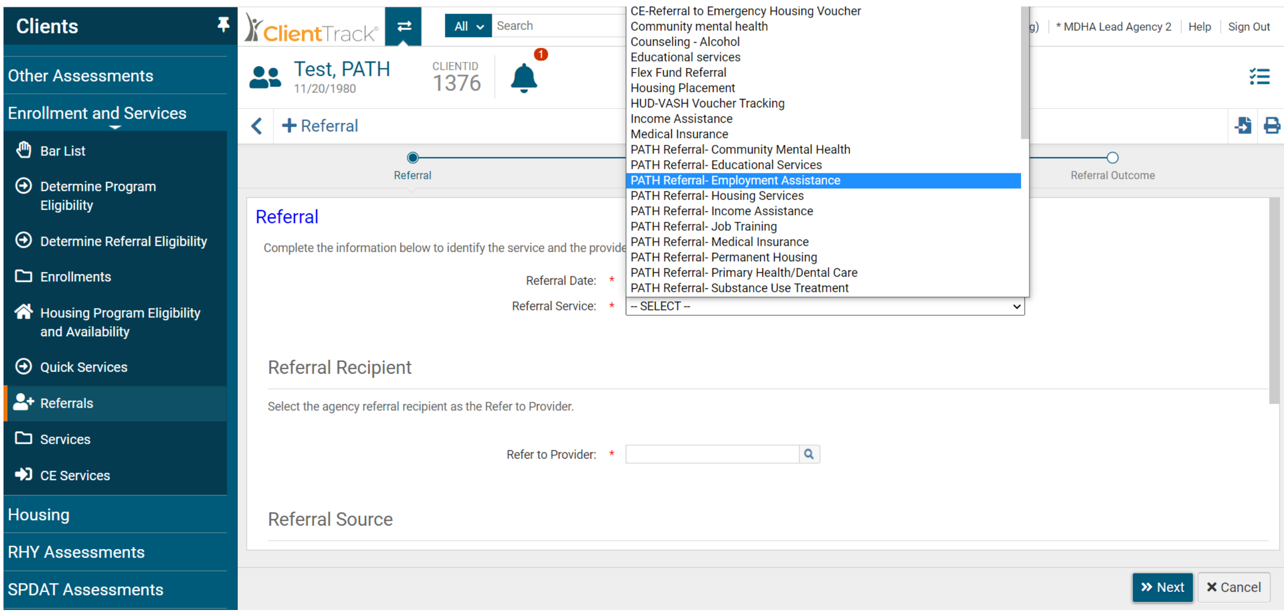
Additional information on the rationale, collection point, subjects, and instructions for each element can be found in the HMIS Data Standards Manual.

PATH Referral	Definition
Community mental health	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that stabilizes, supports, or treats people for mental health disorders or co-occurring mental health and substance use disorders.
Substance use treatment	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers preventive, diagnostic, and other services and supports for individuals who have psychological and/or physical problems with use of one or more substances.
Primary health/dental care	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers physical and/or dental health care services.
Job training	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that helps prepare an individual to gain and maintain the skills necessary for paid or volunteer work.
Educational services	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers academic instruction and training.
Housing services	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers assistance with attaining and sustaining living accommodations.
Permanent housing	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers residence in a stable setting where length of stay is determined by the individual or family without time limitations, as long as they meet the basic requirements of tenancy.
Temporary housing	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers shelter in a time-limited setting.
Income assistance	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers benefits that provide financial support.
Employment assistance	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers assistance designed to lead to compensated work.
Medical insurance	Active and direct PATH staff support on behalf of or in conjunction with a PATH-enrolled individual to connect to an appropriate agency, organization, or service that offers coverage that provides payment for wellness or other services needed as a result of sickness, injury, or disability.

ClientTrack Specific Guidance for Data Element P2

PATH referrals are recorded from the Clients Workspace in ClientTrack. After navigating to your client's Dashboard, in the menu on the left, click Enrollment & Services, then click Referrals.

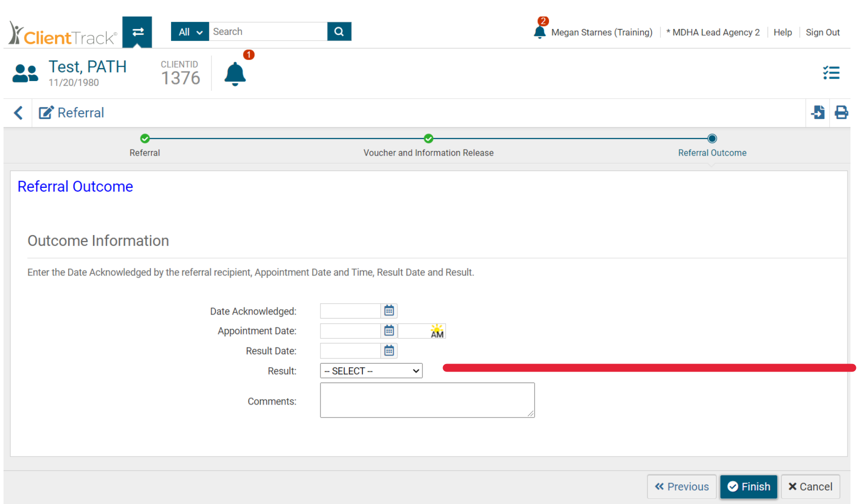
PATH referrals are listed with "PATH Referral" at the beginning of the name. Choose the type of referral provided in the Referral Service drop down. Then complete the remained required fields.



If no voucher is being associated with this referral, click next on the Voucher and Information Release page, leaving all other fields blank. If an Information Release Start Date is required, record the date the referral was provided in this field.

On the Referral Outcome page, if no outcome is being recorded at the time of referral, click Save (or Finish). If an outcome is being recorded at this time, continue to the next step below.

To record a Referral Outcome, navigate back to the client's referral page and click the action arrow next to the referral in question. Select Referral Outcome. On the Referral Outcome page, record all fields. A "Result" in ClientTrack is mapped to the PATH HMIS Referral Outcomes as follows.



A. **Service Provided - Attained**
B. **Reservation Made - Not Attained**
C. **Enrolled Into Project - Attained**
D. **Information Only - Unknown**
E. **Rejected - Not Attained**
F. **Now Show - Not Attained**

Data Element P3 PATH Status

The HMIS data element P3 *PATH Status* is used to determine whether a client is eligible for the PATH program. Clients that reach enrollment should have one of the following PATH Status options recorded:

- Client became enrolled in PATH
- Client was found ineligible for PATH
- Client was not enrolled for other reason(s)
- Unable to locate client

If a client becomes enrolled in PATH, then an enrollment date is collected to identify the date when a PATH-eligible individual and a PATH provider have mutually and formally agreed to engage in services and the provider has initiated an individual file or record for that individual. The date of PATH enrollment should be entered into the HMIS at the point that the client has become enrolled. It may be on or after the *Project Start Date* (data element 3.10) or *Date of Engagement* (data element 4.13) and prior to *Project Exit Date* (data element 3.11).

If the client exits the project without becoming enrolled, the PATH Status element still needs to be completed, indicating that the client was not enrolled and the reason the client was not enrolled. If the client was contacted on the date that PATH Status was determined, a contact, recorded as a *Current Living Situation* (data element 4.12) must also be entered for that date.

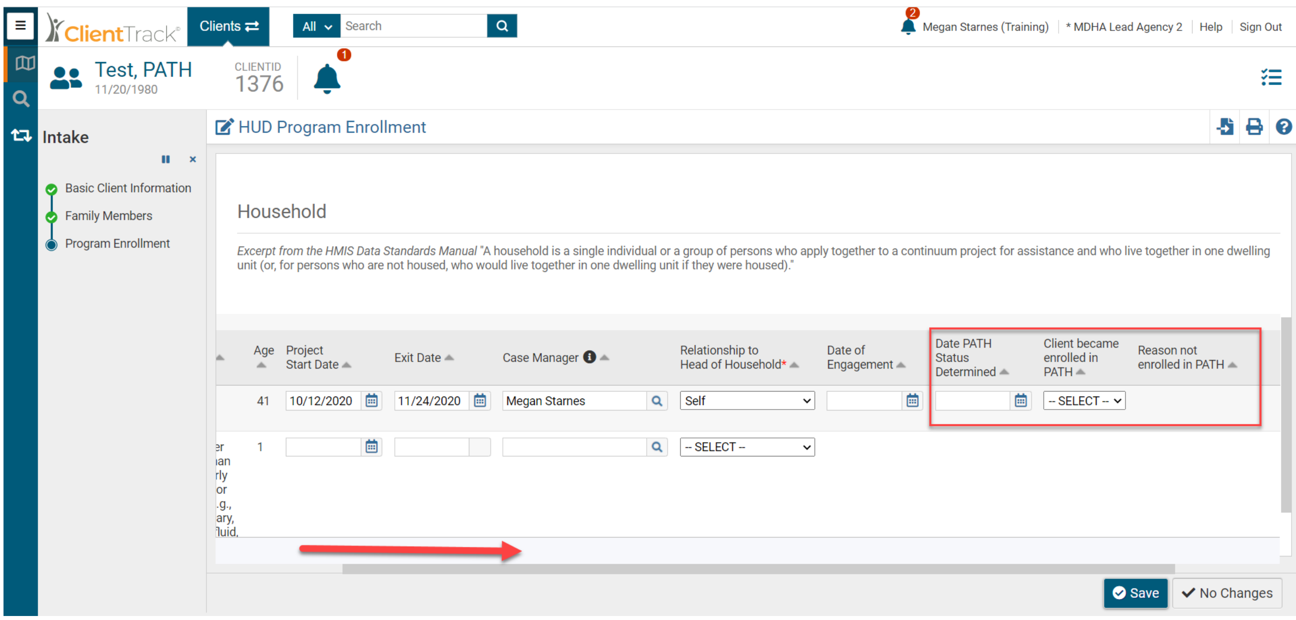
The option "Unable to Locate Client" for Reason Not Enrolled can be used to account for the clients who are not enrolled in the PATH program because they are unable to be located.

ClientTrack Specific Guidance for Data Element P3

PATH Status is recorded on the HUD Program Enrollment page of an Entry or Update Assessment workflow in ClientTrack. If the client's PATH Status changes during program enrollment, and Update Assessment should be performed to record the change.

Enter the Date PATH Status Determined and record the client's PATH Status under the drop down for "Client became enrolled in PATH". If the client is NOT enrolled in path, record the Reason note enrolled in PATH as well.

Click Save (or Save and Close) to continue to the next page of the workflow.



Note that you may need to use the gray scroll bar to scroll to the right and see these additional PATH fields.

Data Element P4 Connection with SOAR

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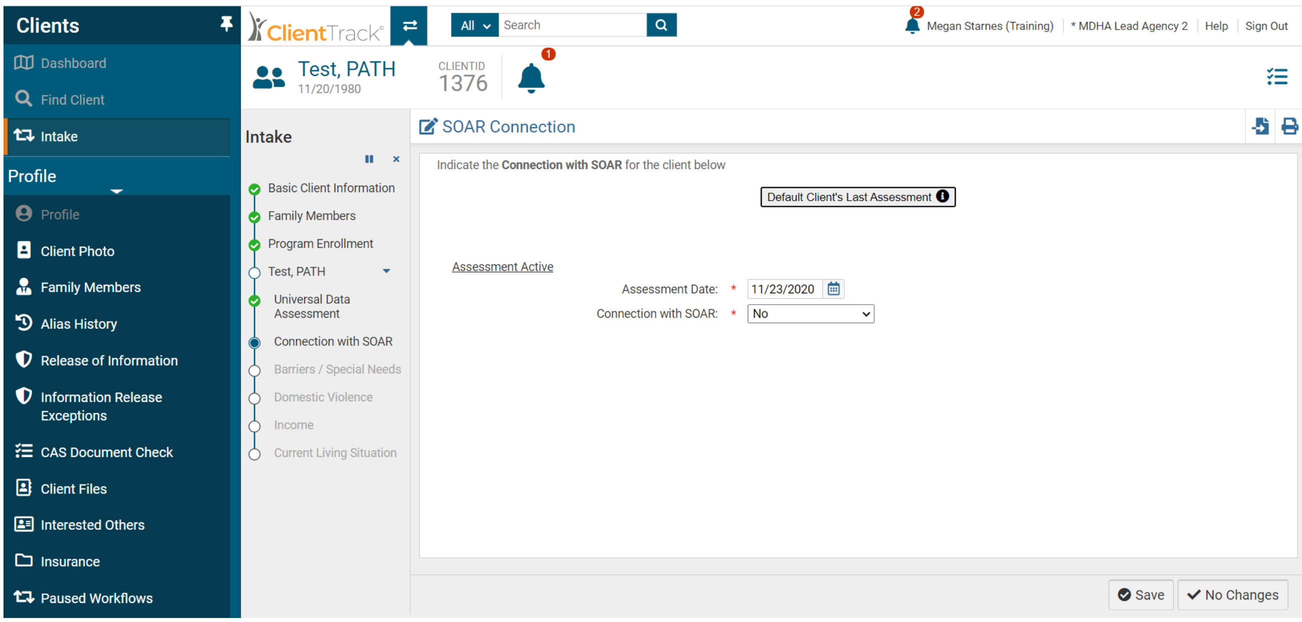
ClientTrack Specific Guidance for Data Element P4

Connection to SOAR is recorded on its own page of the workflow in ClientTrack.

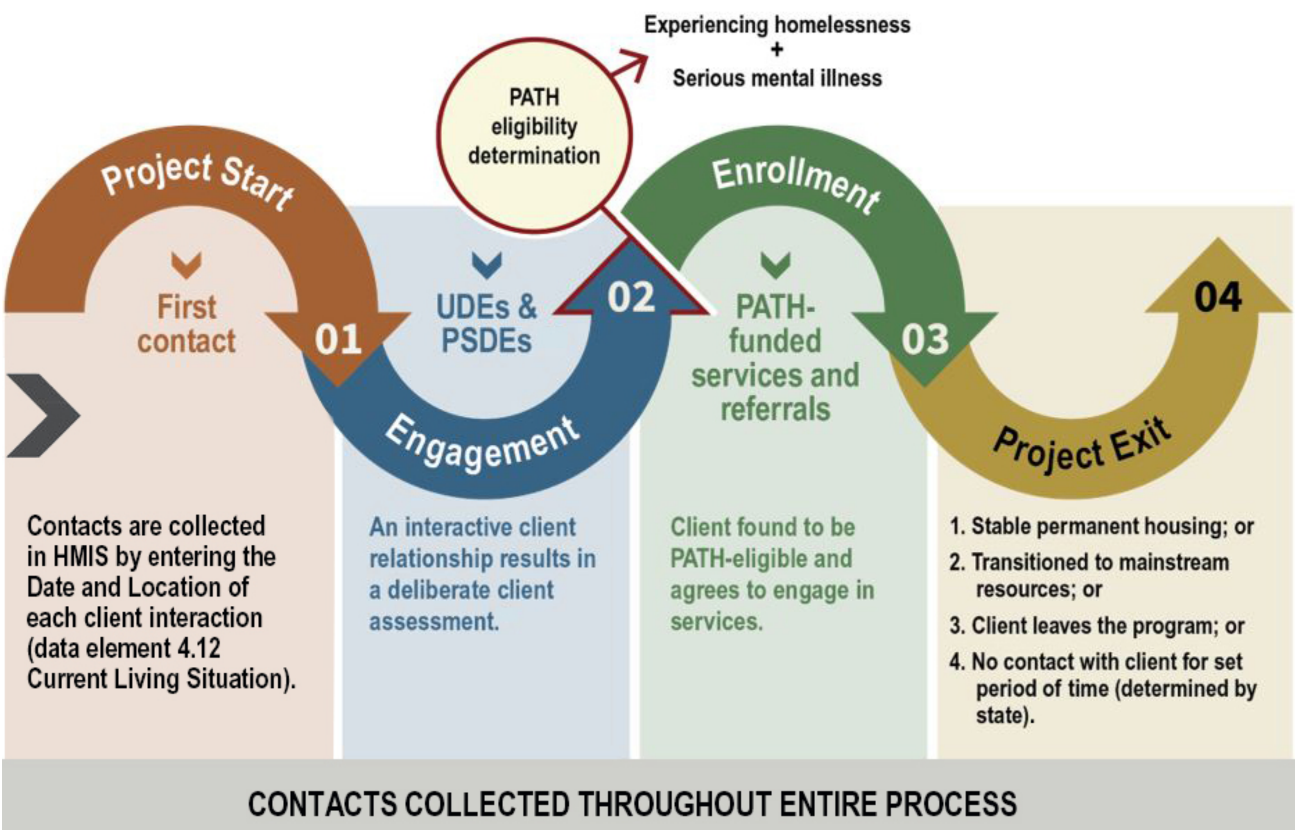
Confirm the Assessment Date and enter the client's Connection to SOAR using the drop down list. Record any additional required fields that populate, then click Save (or Save and Close) to continue to the next page of the workflow.



PATH Data Collection Workflow

PATH data collection workflow is designed to support the interactions and development of relationships with clients over time. As such, HMIS data quality does not begin until the *Date of Engagement* (data element 4.13), defined as the point at which an interactive client relationship results in a deliberate client assessment. The date of enrollment may be on or after the *Project Start Date* (data element 3.10) and on or after the *Date of Engagement*.

It is possible that project start, engagement, enrollment, and project exit may all occur during a single contact at a single point in time. However, it is much more likely that *Project Start Date* will be followed by multiple contacts, recorded using *Current Living Situation*, prior to *Date of Engagement*. The chart below illustrates the necessary sequence of data collection, which may happen in a day, or over a number of days, weeks, or even months, depending on the client's willingness to engage with the PATH project, eligibility for PATH-funded services and referrals, and continued connection to the project.



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

Universal Data Elements	At Project Start	By Date of Engagement	At Date of Enrollment	At Project Exit
3.01 Name	X			
3.02 Social Security Number		X		
3.03 Date of Birth		X		
3.04 Race		X		
3.05 Ethnicity		X		
3.06 Gender		X		
3.07 Veteran Status		X		
3.08 Disabling Condition		X		
3.10 Project Start Date	X			
3.11 Project Exit Date				X
3.12 Destination				X
3.15 Relationship to Head of Household	X	X	X	X
3.16 Client Location	X	X	X	X
3.917 Living Situation	X	X	X	X

Common Program Specific Data Elements	At Project start	By Date of Engagement	At Date of Enrollment	At Project Exit
4.02 Income and Sources		X		
4.03 Non-Cash Benefits		X		
4.04 Health Insurance		X		
4.05 Physical Disability		X		
4.06 Developmental Disability		X		
4.07 Chronic Health Condition		X		
4.08 HIV/AIDS		X		
4.09 Mental Health Disorder		X		
4.10 Substance Use Disorder		X		
4.11 Domestic Violence		X		
4.12 Current Living Situation	X	X	X	X
4.13 Date of Engagement		X		

Federal Partner Program Data Elements	At Project start	By Date of Engagement	At Date of Enrollment	At Project Exit
P1 Services Provided - PATH Funded			X	X
P2 Referrals Provided - PATH			X	X
P3 PATH Status			X	
P4 Connection with SOAR	X	X	X	X

Automatic Exit and Data Quality

SAMHSA has set a policy regarding PATH data collection and the use of an automatic exit function. PATH clients can be disconnected from services for various reasons and various lengths of time. The policy is intended to allow the SPC to set the amount of time that must pass without client contact before the client is exited from the program. This policy is a collaboration between SAMHSA and HUD and attempts to balance the data collection guidance of SAMHSA with the data quality framework of HUD (see the State PATH Contact HMIS Data Collection Decision Tool). Check with your HMIS Lead to determine if the HMIS software has automatic exit functionality.

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

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

Q6. Timeliness

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

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

Resources

PATH Program HMIS Manual FY 2022: https://files.hudexchange.info/resources/documents/PATH-Program-HMIS-Manual.pdf