**HUD CoC Program Specific Data Elements Form for HMIS: All Clients** *(Collect information about all household members)*

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| **HMIS Tips:*** *EDA to the project provider.*
* *Before updating your Program Specific assessment in HMIS, make sure to complete the questions on the appropriate MN Core assessment, as it contains the universal and common data elements for HMIS projects. The questions on your Program Specific Assessment have been chosen by your funder and are required in addition to the universal and common data elements.*
* *If information is missing, follow-up with the client or staff person responsible for gathering information to complete the missing information. DO NOT enter “Client doesn’t know” or “Client prefers not to answer” unless the client does not know or prefers not to answer.*
* *You only need to collect data about the required household members. Who the data is collected about is in parentheses after the question. For example, “(Head of Household).”*
* *In Community Services, a  (green checkmark) indicates a household member’s record has been updated.*
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Program Entry (in HMIS: use Entry/Exit Tab)

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| 1. Provider: 2. Type: HUD 3. Project Start Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (Month/Day/Year) |

**Translation Assistance Needed?** *(Head of Household) (Complete for clients in all CoC funded projects)*

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| --- | --- | --- | --- | --- |
| * Yes
 | * No
 | * Client doesn’t know
 | * Client prefers not to answer
 | * Data not collected
 |

***If yes*, Preferred Language?**

* Acholi
* American Sign Language
* Amharic
* Arabic
* Black American Sign Language
* Bosnian
* Chuukese
* Farsi
* French
* Hmong
* Juba Arabic
* Karen
* Kurmanji
* Laotian
* Marathi
* Moroccan Arabic
* Nepali
* Ojibwe
* Oromo
* Punjabi
* Russian
* Somali
* Spanish
* Spanish Creole
* Sudanese Arabic
* Swahili
* Tigrigna
* Twi
* Ukrainian
* Urdu
* Vietnamese
* ***Different Preferred Language***
* Client doesn't know
* Client prefers not to answer
* Data not collected

**If Different Preferred Language, please specify:**

**Sexual Orientation** *(All Adults and Head of Household)* (*Complete for clients in permanent supportive housing (PSH) projects only)*

* Heterosexual
* Gay
* Lesbian
* Bisexual
* Questioning/Unsure
* Other
* Client doesn’t know
* Client prefers not to answer
* Data not collected

Updates (in HMIS: Entry/Exit Tab: Interims)

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| **Data Collection Instructions:*** *Complete required updates annually, within 30 days of the client’s Entry anniversary.*
 | **HMIS Tips:*** *EDA to project provider.*
* *Click on the “Interims” icon next to the correct entry in the Entry/Exit tab.*
* *Select* ***Update*** *or* ***Annual Assessment*** *for Interim Review Type and enter the date of the review.*
* *Check all household members to be updated.*
* *After completing the first Interim Review Data window, Save & Continue to Update Assessment and answer required questions for each member. A  (green checkmark) indicates a household member’s record has been updated.*
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**Sexual Orientation** *(All Adults and Head of Household)* (*Complete for clients in permanent supportive housing (PSH) projects only)*

* Heterosexual
* Gay
* Lesbian
* Bisexual
* Questioning/Unsure
* Other
* Client doesn’t know
* Client prefers not to answer
* Data not collected

Moving On Assistance Provided - Services *(Head of Household)* (*Complete for clients in permanent supportive housing (PSH) projects only)*

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| **HMIS Tips:*** *Click on the* ***Service Transactions*** *tab and use “Add Service” button to add a service.*
* ***Start Date*** *and* ***End Date*** *can be the same date.*
* *In addition to selecting a* ***Service Type****, a value* ***must*** *be selected in the* ***Moving On Assistance*** *drop-down.*
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| --- | --- | --- | --- | --- |
| **Service Provided (write in name from list)** | **Start date** | **End date** |  | **Moving On Assistance** |
|   | / / | / / |  | Subsidized housing application assistance |
|   | / / | / / |  | Financial assistance for Moving On (e.g., security deposit, moving expenses) |
|   | / / | / / |  | Non-financial assistance for Moving On (e.g., housing navigation, transition support) |
|   | / / | / / |  | Housing referral/placement |
|   | / / | / / |  | Other (please specify) |

Program Exit (in HMIS: use Entry/Exit Tab)

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| **HMIS Tips:*** *Complete Exit from the head of household’s record*
* *EDA to project provider. No need to backdate.*
* *Entry/Exit Tab: click pencil next to exit date. Continue to the Exit Assessment.*
* *If some household members are staying, uncheck the boxes next to their names.*
* *After completing the first Exit Data window, Save & Continue to Exit Assessment and answer required questions for each member. A  (green checkmark) indicates a household member’s record has been updated.*
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*Required for all Clients. If information is not the same for all household members, note in margins or use Exit form for Singles*

**1.** **Exit Date:** \_\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_\_\_