

HMIS Data Collection Template – “Living Situation” Data Collection Form for all Project Types EXCEPT Street Outreach, Emergency Shelter, and Safe Havens¹

This form will allow all Transitional Housing, any form of Permanent Housing including Permanent Supportive Housing and Rapid Re-Housing, Services Only, Other, Day Shelter, Homelessness Prevention, and Coordinated Assessment (Coordinated Entry) projects to track the required HMIS Living Situation data element. This information should be gathered at entry for all household members—each adult and child. A separate form should be included for each household member. Use additional forms as needed. Projects may use any available HMIS records to assist the client in recalling where he or she was staying, but completing this form does not require backup documentation to verify a client’s responses. If a project requires documentation for eligibility purposes, additional documentation tools and guidance are anticipated to be forthcoming.

PROJECT ENTRY DATE (e.g., 08/24/2014)

The Project Entry Date will serve as the information date for all data elements collected on this form; all data must be accurate as of this date, regardless of the date collected.

		/			/				
Month			Day			Year			

CLIENT (name or other identifier)

¹ A [separate form](#) is provided for Emergency Shelter, Safe Haven, and Street Outreach projects.

1. TYPE OF PRIOR LIVING SITUATION

What was the situation the client was living in immediately prior to project entry?

Adult members of the same household may have different prior living situations

Literally Homeless Situations

- 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
- Safe Haven
- Interim Housing*

Institutional Situations

- Foster care home or foster care group home
- Hospital or other residential non-psychiatric medical facility
- Jail, prison, or juvenile detention facility
- Long-term care facility or nursing home
- Psychiatric hospital or other psychiatric facility
- Substance abuse treatment facility or detox center

Transitional & Permanent Housing Situations

- Hotel or motel paid for without emergency shelter voucher
 - Owned by client, no ongoing housing subsidy
 - Owned by client, with ongoing housing subsidy
 - Permanent housing for formerly homeless persons (such as CoC project; HUD legacy programs; or HOPWA PH) Proceed to Question 3
 - Rental by client, no ongoing subsidy
 - Rental by client, with VASH subsidy
 - Rental by client, with GPD TIP subsidy
 - Rental by client, with other ongoing housing subsidy
 - Residential project or halfway house with no homeless criteria
 - Staying or living in a family member's room, apartment, or house
 - Staying or living in a friend's room, apartment, or house
 - Transitional housing for homeless persons (including homeless youth)
- Other**
- Client doesn't know
 - Client refused

2. LENGTH OF STAY IN PRIOR LIVING SITUATION

How long was the client staying in that place?

- 1 night or less
- 2 to 6 nights
- 1 week+, but less than 1 month
- 1 mo+, but less than 90 days
- 90 days, but less than 1 year
- 1 year or longer
- Client doesn't know
- Client refused

Proceed to Question 3

- 1 night or less
- 2 to 6 nights
- 1 week+, but less than 1 month
- 1 mo+, but less than 90 days
- 90 days, but less than 1 year
- 1 year or longer
- Client doesn't know
- Client refused

Proceed to Question 3

STOP
You have completed this form

- 1 night or less
- 2 to 6 nights
- 1 week, but less than 1 month
- 1 month, but less than 90 days
- 90 days, but less than 1 year
- 1 year or longer
- Client doesn't know
- Client refused

STOP
You have completed this form

*Interim housing is not a type of housing but rather a housing situation for a client that meets the following criteria:

1. Must have been chronically homeless at entry to interim housing,
2. Must have applied for permanent housing, accepted, and have a unit/voucher for perm. hsg. reserved for them,
3. Must have been prevented from immediately accessing permanent housing unit or using a voucher in a permanent housing unit (e.g. apartment getting painted, old tenant moving out, has a voucher but is looking for the unit, etc.), and

4. Client and transitional housing project must have determined that transitional housing is an acceptable option until permanent housing unit is ready for occupancy.

3. DATE THE CLIENT STARTED BEING HOMELESS ON THE STREETS,** IN SHELTER, OR IN SAFE HAVEN THIS TIME

Determine the date of the last time the client had a place to sleep that was not on the streets, in an emergency shelter, or in a safe haven. As the client looks back, there may be breaks in their stay on the streets, shelters, or safe havens. The breaks are allowed to be included in the look back period to calculate the start date only if:

- The client moved continuously between the streets, shelters, or safe havens. The date would go back as far as the first time they stayed in one of those places; OR
- The break in their time on the streets, shelters, or safe havens was less than 7 nights. A break is considered 6 or less consecutive nights not residing in a place not meant for human habitation, in shelter or in a safe haven. The look back time would not be broken by a stay less than 7 consecutive nights; OR
- The break in their time on the streets, ES, or SH was less than 90 days in any of the places listed under the header “institutional situations” on the previous page. The look back time would include all of those days (up to 89 days) when looking back for the start date.

If this is the client’s first day on the streets, shelters, or safe havens, enter today’s date.

When did the client start staying on the streets, in emergency shelters, or in safe havens this time?

		/			/				
Month		Day		Year					

*** “The streets” is being used as short-hand for any place unfit for human habitation (a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground).*

4. NUMBER OF TIMES THE CLIENT HAS BEEN HOMLESS ON THE STREETS, IN SHELTER, OR IN SAFE HAVEN IN THE PAST THREE YEARS

A break in homelessness separating the occasions means at least 7 consecutive nights of not living on the street, in an emergency shelter, or Safe Haven or at least 90 days in any of the places listed under the header “institutional situations” on the previous page.

How many times has the client been homeless on the streets, in shelter, or in safe havens in the past three years, including this time?

<input type="checkbox"/> One time (this time)	<input type="checkbox"/> Four or more times
<input type="checkbox"/> Two times	<input type="checkbox"/> Client doesn't know
<input type="checkbox"/> Three times	<input type="checkbox"/> Client refused

5. TOTAL NUMBER OF MONTHS THE CLIENT HAS BEEN HOMLESS ON THE STREETS, IN SHELTER, OR IN SAFE HAVEN IN THE PAST THREE YEARS

Record the total number of months for all the different times the client has spent homeless on the streets, in shelter, or in safe havens in the past three years.

For example: If the client has been on the streets, ES, or SH since January 15 and it is now March 1, the cumulative total would be 1.5 months (January = 15 days and February = 1 month). If they were also homeless for a month back in October, the cumulative total would then be 2.5 months. Responses may be rounded to the next-nearest month, so you would choose “3 months.”

How many months, in total, has the client has been homeless on the street, in an emergency shelter, or Safe Haven over the past three years?

One month or less (you may also choose this if this is the first time the client has been homeless)

Between 2 and 12 months → **Enter the total number of months:** _____

More than 12 months

Client doesn't know

Client refused