# HHS PATH Exit Assessment

This form is to be used by PATH users to record Exit data elements for input into HMIS and follows the ServicePoint workflow for ease of input.   All information on this assessment must be entered within 2 days of client Exit.

**Project:** _____   **Date:** _____

**Client Name:** _____

**Reason for Leaving:**
- ○ Completed program
- ○ Criminal activity/violence
- ○ Death
- ○ Disagreement with rules/persons
- ○ Left for housing opp. before completing program
- ○ Needs could not be met
- ○ Non-compliance with program
- ○ Non-payment of rent
- ○ Other: _____
- ○ Reached maximum time allowed
- ○ Unknown/Disappeared

**Destination:**
- ○ Deceased
- ○ Emergency shelter, including hotel or motel paid for with emergency shelter voucher
- ○ Foster care home or foster care group home
- ○ Hospital or other residential non-psychiatric medical facility
- ○ Hotel or motel paid for without emergency shelter voucher
- ○ Jail, prison or juvenile detention facility
- ○ Long-term care facility or nursing home
- ○ Moved from one HOPWA funded project to HOPWA PH
- ○ Moved from one HOPWA funded project to HOPWA TH
- ○ Owned by client, no ongoing housing subsidy
- ○ Owned by client, with ongoing housing subsidy
- ○ Permanent housing (other than RRH) for formerly homeless persons
- ○ Place not meant for habitation
- ○ Psychiatric hospital or other psychiatric facility
- ○ Rental by client, no ongoing housing subsidy
- ○ Rental by client, with VASH subsidy
- ○ Rental by client, with GPD TIP subsidy
- ○ Rental by client, with VASH subsidy
- ○ Rental by client, with RRH or equivalent subsidy
- ○ Rental by client, with GPD TIP subsidy
- ○ Rental by client, with other ongoing subsidy
- ○ Residential project or halfway house with no homeless criteria
- ○ Safe Haven
- ○ Staying or living with family, permanent tenure
- ○ Staying or living with family, temporary tenure
- ○ Staying or living with friends, permanent tenure
- ○ Staying or living with friends, temporary tenure
- ○ Substance abuse treatment facility or detox center
- ○ Transitional housing for homeless persons (including homeless youth)
- ○ Other: _____
- ○ No exit interview completed
- ○ Client doesn't know
- ○ Client refused
- ○ Data not collected

*(**Date of Engagement is the date on which an interactive client relationship results in a deliberate client assessment**)*

**Date of Engagement:** _____   **Date of PATH Status Determination:** _____

**Client Became Enrolled in PATH:**   ○ Yes   ○ No

If no, reason not enrolled:   ○ Client was found ineligible for PATH
○ Client was not enrolled for other reason(s)

**Connection with SOAR:**   ○ Yes   ○ No   ○ Client doesn't know   ○ Client refused   ○ Data not collected   ○ Data