This shortcut assists MFSC and B-b Funding Service Coordinators Grantees to identify:

- Relevant data elements to collect;
- Questions for gathering information for the data element; and
- Possible response options.

Participant Description

Data Element	Question	Response Options	Manual Page[1]
Person Identifier (Participant-ID)	What is the Participant's Person Identifier?	Number	20
Household Identifier	What is the Participant's Household Identifier?	Alpha-Numeric Identifier	21
Data Collection Date	What is the Data Collection Date?	Select Date from Calendar Dropdown	22
Age	How old are you?	Number	23
Gender Code	With what gender do you identify?	1 = Male. 2 = Female. 3 = Transgendered Male to Female. 4 = Transgendered Female to Male. 5 = Other. 88 = Individual refused. 99 = Individual does not know.	24
Ethnicity Code	Are you Hispanic/Latino?	1 = Hispanic/Latino. 2 = Not Hispanic/Latino. 88 = Individual refused. 99 = Individual does not know	25

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[1] Manual Page refers to the page number of the HUD Data Integrity Reference Manual

Data Element	Question	Response Options	Manual Page[1]
Race Code	What is your race? Do you identify as more than one race? If yes, with what races do you identify?	1 = American Indian or Alaska Native. 2 = Asian. 3 = Black or African American. 4 = Native Hawaiian or Other Pacific Islander. 5 = White. 88 = Individual refused. 99 = Individual does not know.	26
Head of Household Code	Are you the head of your household for HUD grant purposes?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know.	27
Veteran Status Code	Are you a veteran? Did you have an honorable discharge? If no, what kind? Do you have your DD214?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know.	28
Service Start Date	When did Participant begin receiving services?	Select Date from Calendar Dropdown	29
Service End Date	When did Participant stop receiving services?	Select Date from Calendar Dropdown	31

Participant Employment

Data Element	Question	Response Options	Manual Page
Employment Status Code	Did you work for pay during the prior four (4) weeks, even if it was only for a few hours?	1 = Employed. 2 = Not employed at any time in the last month and actively seeking work. 3 = Not employed at any time in the last month and not actively seeking work. 88 = Individual refused. 99 = Individual does not know.	35
Employment Type Status Code	Were you scheduled to work or did you work more than 35 hours in the prior four (4) weeks?	1 = Full-time worker employed in the last month. 2 = Part-time worker employed in the last month. 88 = Individual refused. 99 = Individual does not know. N/A	36
Entered Employment Date	What date did you most recently begin working at your current place of employment?	Date is entered into calendar	37
Monthly Paid Earnings Amount	How much money did you earn before taxes or other deductions from all employment for the prior four (4) weeks?	Dollar amount in whole dollars N/A	42

Participant Financial

Data Element	Question	Response Options	Manual Page
Earned Income Tax Credit Recipient Code	Did you receive an Earned Income Tax Credit for the most recent tax year?	1 = Individual reported receipt of the EITC in most recent tax year. 2 = Individual reported no receipt of the EITC in most recent tax year. 88 = Individual refused. 99 = Individual does not know. N/A	51
Financial Account Creation Code	Do you have a checking or savings account, IDA account, or FSS escrow account?	1 = Individual has a checking or savings account. 2 = Individual has an IDA. 3 = The individual has an FSS escrow account. 88 = Individual refused. 99 = Individual does not know. N/A	53
Supplemental Security Income (SSI) Code	Do you receive Supplemental Security Income?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	54
Social Security Disability Insurance (SSDI) Code	Do you receive Social Security Disability Insurance?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	55

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Data Element	Question	Response Options	Manual Page
Household Annual Gross Income Amount	What is your household's estimated annual income before taxes or other deductions?	Dollar amount in whole dollars N/A	56
Tax Preparation Service Code	Did the Participant receive tax preparation services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	58
Legal Assistance Service Code	Did the Participant receive legal assistance services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	59
Legal Assistance Type Service Code	If the Participant received legal assistance, what type of legal assistance did Participant receive?	1 = Will preparation, advanced directives, end of life decisions 2 = ID theft and credit issues 3 = Foreclosure prevention 4 = Eviction prevention 5 = Custody, divorce and child support 6 = Fair housing assistance 7 = Assistance to victims of domestic violence 8 = Expunging criminal records 9 = Other N/A	60

Data Element	Question	Response Options	Manual Page
Financial Education Service Code	Did the Participant receive financial education services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	61
Household Housing Cost Amount	What are your average monthly household costs including rent, mortgage, utilities, fees, and property taxes?	Dollar amount in whole dollars N/A	62
Household Transportation Cost Amount	What are your household's average monthly transportation costs including car payments, insurance, gas, repairs, parking, and public transportation?	Dollar amount in whole dollars N/A	63
Financial Account Creation Service Code	Did Participant receive services to create a financial account?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	64

Participant Education

Data Element	Question	Response Options	Manual Page
Highest Education Level Code	What is the highest grade level or educational degree that you completed?	0 = No schooling completed, Nursery school, or Kindergarten. 1-11 = Grade 1 through 11. 12 = 12th grade, no diploma. 13 = High school diploma. 14 = GED or alternative credential. 15 = Less than 1 year of college credit. 16 = 1 or more years of college credit, no degree. 17 = Associate's degree. 18 = Bachelor's degree. 19 = Master's degree. 20 = Professional degree (e.g., MD, DDS, DVM, LLB, JD). 21 = Doctorate degree 88 = Individual refused. 99 = Individual does not know. N/A	67
ESL Class Service Code	Did the Participant receive English as a second language instruction?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	71

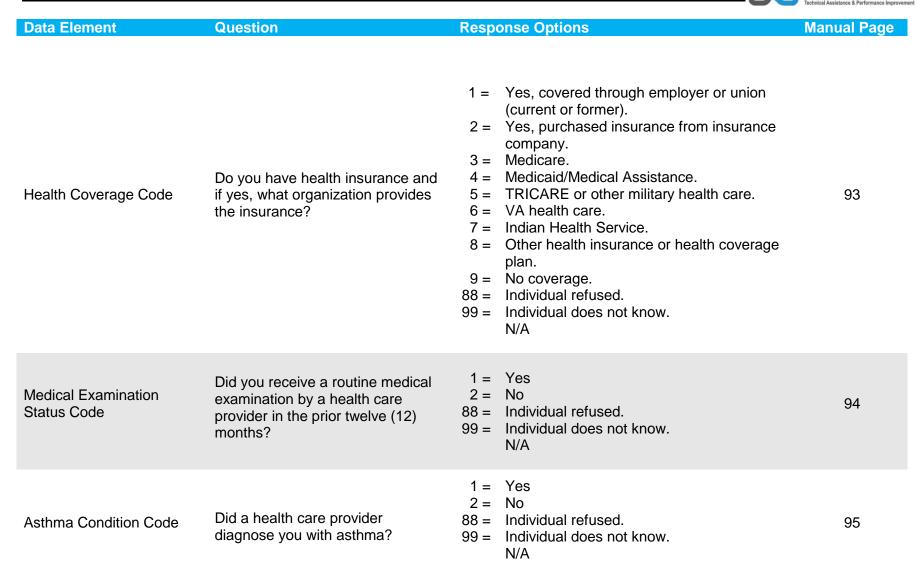| Data Element	Question	Response Options	Manual Page
Conflict Resolution Service Code	Did the Participant receive conflict resolution services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	72
Housing Retention Service Code	Did the Participant receive housing retention assistance services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	73
Household Skills/Life Skills Service Code	Did the Participant receive household or life skills training and education?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	74
Service Coordination Service Code	Did the Participant receive service coordination assistance?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	78

Participant Health

Data Element	Question	Response Options	Manual Page
Disability Status Code	Did a physician, Medicaid, or other authority determine you are disabled?	1 = Yes, individual indicates a disability as defined in ADA. 2 = No, individual indicates no disability as defined by ADA. 88 = Individual refused. 99 = Individual does not know. N/A	84
Disability Category Code	What types of disabilities do you have?	1 = Impairment is primarily physical, including mobility and sensory impairments. 2 = Impairment is primarily mental, including cognitive and learning impairments. 3 = Impairment is both physical and mental. 88 = Individual refused. 99 = Individual does not know. N/A	85
Supplemental Nutrition Assistance Program (SNAP) Code	Do you receive Supplemental Nutrition Assistance Program benefits?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	87
Temporary Assistance to Needy Family (TANF) Code	Do you receive Temporary Assistance to Needy Family benefits?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	88

Data Element	Question	Response Options	Manual Page
Substance Abuse Treatment Code	Are you currently being treated for substance abuse or have you been treated for substance abuse in the last twelve (12) months?	1 = The individual is being treated for substance abuse or dependence. 2 = The individual is not being treated for substance abuse or dependence, but did receive treatment in past 12 months. 3 = The individual was not treated for substance abuse or dependence in past 12 months, but did receive such treatment over a year ago. 4 = The individual never received treatment for substance abuse or dependence. 88 = Individual refused. 99 = Individual does not know. N/A	89
Activities of Daily Living (ADL) Count	How many activities of daily living are you unable to perform?	Number N/A	90
Instrumental Activities of Daily Living (IADL) Count	How many instrumental activities of daily living are you unable to perform?	Number N/A	91
Primary Health Care Provider Code	Have you completed an appointment with a doctor, nurse practitioner or physician's assistant in the prior three (3) years?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	92

Data Element	Question	Response Options	Manual Page
Health Coverage Code	Do you have health insurance and if yes, what organization provides the insurance?	1 = Yes, covered through employer or union (current or former). 2 = Yes, purchased insurance from insurance company. 3 = Medicare. 4 = Medicaid/Medical Assistance. 5 = TRICARE or other military health care. 6 = VA health care. 7 = Indian Health Service. 8 = Other health insurance or health coverage plan. 9 = No coverage. 88 = Individual refused. 99 = Individual does not know. N/A	93
Medical Examination Status Code	Did you receive a routine medical examination by a health care provider in the prior twelve (12) months?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	94
Asthma Condition Code	Did a health care provider diagnose you with asthma?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	95

Data Element	Question	Response Options	Manual Page
Asthma-related Emergency Room Visit Code	Did you visit the emergency room or were you hospitalized for an asthma-related condition in the prior twelve (12) months?	1 = Yes 2 = No 88 = Individual refused. 99 = Individual does not know. N/A	96
Food and Nutrition Service Code	Did the Participant receive food and nutrition services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	98
Translation/Interpretation Service Code	Did Participant receive translation or interpretation services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	99
HIV/AIDS Service Code	Did the Participant receive HIV/AIDS health and counseling services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	100
Adult Personal Assistance Service Code	Did Participant receive ADL or IADL services from a non-residential facility?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	101

Data Element	Question	Response Options	Manual Page
Medical Care Service Code	Did the referred Participant receive medical or health care services?	1 = Received service directly through the grant. 2 = Did not receive service. N/A	102
Mental Health Service Code	Did the Participant receive mental health services?	1 = Received service directly through the grant. 2 = Did not receive service. N/A	103
Substance Abuse Service Code	Did Participant receive substance abuse services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	104
Disability Requires Assistance Code	Are you disabled and do you require activities of daily living services?	1 = The disabled individual requires services to manage home activities. 2 = The disabled individual does not require services for home management. 3 = The disabled individual was not assessed for this criteria 88 = Individual refused. 99 = Individual does not know. N/A	105

Participant Housing

Data Element	Question	Response Options	Manual Page
Residence Census Tract	What is the address where you live?	Census Tract Number N/A	110
Hard to House Code	Is the Participant a high risk to house?	1 = Head of household has lived in public housing for more than 10 years. 2 = Head of household does not have a high-school diploma or GED. 3 = Three or more minors in the household. 4 = One or more household members has a criminal record. 5 = The head of household is not disabled, but one or more other household members is disabled. 6 = The head of household is a single, elderly adult who is the primary caregiver for one or more children. 88 = Individual refused. 99 = Individual does not know. N/A	111
Returning Citizen/Ex-Offender Code	Do you have an active criminal record or were you charged with committing a crime in the prior twelve (12) months?	1 = Individual is currently a subject involved in the CJS. 2 = The individual is not currently subject to any phase of the CJS, but has been in the previous 12 months. 3 = The individual is not currently subject to any phase of the CJS, and has not been in the previous 12 months. 88 = Individual refused. 99 = Individual does not know. N/A	112

Data Element	Question	Response Options	Manual Page
Housing Status Code	What type of residence do you live in and how is it paid for?	1 = Identifies as a public housing resident. 2 = Receives a tenant-based rental voucher. 3 = Receives a project-based rental voucher. 4 = Privately subsidized housing. 5 = Unsubsidized (market rate) housing. 6 = Owns a home. 7 = Homeless. 8 = Refused. 99 = Does not know. N/A	113
Intermediate Housing Status Code	Did you retain your housing and what method did you utilize?	1 = Avoided eviction from rental property. 2 = Obtained a Home Equity Conversion Mortgage (HECM). 3 = Prevented or resolved a mortgage default. 88 = Individual refused. 99 = Individual does not know. N/A	119
Needs Assessment Service Code	Did the Participant receive a housing and supportive services assessment?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	120

Data Element	Question	Response Options	Manual Page
Independent Living Service Code	Did Participant receive services to enable them to remain in their home?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	125
Transportation Assistance Service Code	Did Participant receive transportation services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	126
Years in Subsidized Housing Number	How many years did you spend in subsidized housing?	Number of years N/A	127
Opportunity Area Census Tract	Does the Participant live in an opportunity area according to the community's FHEA?	1 = Yes 2 = No N/A	128
Pre-Housing Counseling Service Code	Did Participant receive pre-housing counseling services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	129
Post-Housing Counseling Service Code	Did the Participant receive post-housing counseling services?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	130

Data Element	Question	Response Options	Manual Page
Fair Housing and Civil Rights Assistance Service Code	Did Participant receive services that promote fair housing?	1 = Received service directly through the grant. 2 = Received service through grant-facilitated referral. 3 = Both 1 and 2. N/A	131