ServicePoint 5.14 – Coordinated Entry Program Enrollment and Data Management in HMIS

Introduction

This document is a supplement to the Standard Data Entry Workflow. Users must have working knowledge of the Standard Operating Procedures. The following information is intended to help guide a trained HMIS user on completing the Coordinated Entry data entry in HMIS.

Prior to completing data entry

- Ensure that clients comprehend their rights and have signed consent form.
- Use Enter Data As Mode (EDA) to 'DuPage CoC Coordinated Entry & Referral'
- The client has the right to refuse to answer any question, and this should be reflected as such in their assessment.

Mode: Enter Data As

Before completing any client data entry in HMIS, select, '**DuPage CoC Coordinated Entry & Referral**' using 'Mode: Enter Data As' appearing in the upper right-hand corner.
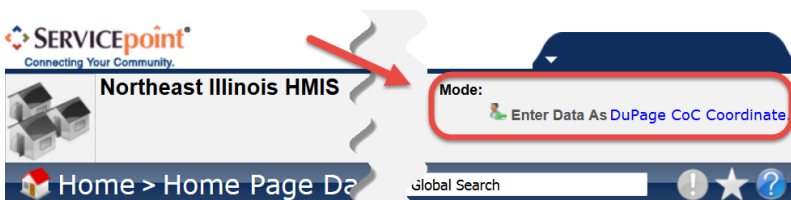
Enter Data As mode will allow you to share and view data with other users with access to Coordinated Entry.

ClientPoint

1. Search (3) for the client record in **ClientPoint** using either the client Id or partial first (1) and last names (2), reviewing all search results for identifying information that matches that of the client's.

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2. If no match is found, proceed to *Add New Client With This Information*.

If the client is refusing to share their data, do not complete any HMIS data entry and contact the HMIS Help Desk, HMIS@dupageco.org, for further assistance.

Client Profile

Client Information			Service Transactions	
Summary	Client Profile	ROI	Entry / Exit	Case Managers

Add the verified legal name, social security number (SSN), SSN data quality, and U.S. Military Veteran details for the client. If the client goes by another name other than the legal name, enter it into the Alias field.

Client Information			Service Transactions	
Summary	Client Profile	ROI	Entry / Exit	Case Managers

Release of Information

	Provider	Permission	Start Date	End Date	
	DuPage CoC Coordinated Entry & Referral	Yes	02/26/2016	02/26/2017	②
① Add Release of Information			Showing 1-1 of 1		

Release of Information

1. Add a **Release of Information** (ROI) for, DuPage CoC Coordinated Entry &Referral
2. Upload and attach a copy of the authorization to the Release of Information record.

Program Entry

Client Information			Service Transactions	
Summary	Client Profile	ROI	Entry / Exit	Case Managers

Reminder: Household members must be established on Households tab before creating Entry / Exits

Entry / Exit

	Program	Type	Entry Date	Exit Date	Interims	Follow Ups	Client Count	
	DuPage CoC Coordinated Entry & Referral (7593)	HUD	02/26/2016				②	
① Add Entry / Exit			Showing 1-1 of 1					

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1. ✏️ Add a Program Entry through the **Entry/Exit** tab, <u>for the Head of Household only</u>. Complete <u>all</u> available assessments.

2. 📎 Eligibility documentation may be uploaded and attached to the DuPage CoC Coordinated Entry & Referral provider.

DuPage CoC Coordinated Entry Assessment

1. Is there a valid consent on file to share information with the participating agencies? Yes/No. *The consent should be recorded on the ROI tab with the consent form attached. If no ROI is present or it is expired, a referral to a vacancy cannot be made.*

2. Date of Birth and Date of Birth Type. If the client does not know their date of birth or refuses to provide one, assess the client's approximate age and use the month 01 and day 01 with the calculated year of birth (01/01/****), otherwise record the full date of birth. Relationship to Head of Household. Persons enrolled in Coordinated Entry should always be the Head of Household (the eligible client).

3. Gender. Select one or more genders that the client identifies with. Use Ctrl select to select more than one option.

4. Primary Language Spoken. Select the primary language spoken from the list.

5. Enter the number of adults (18 years or older) and total number of children (under the age of 18) in household.

6. Any household member a US Veteran. Yes/No.

7. Total Household Income. Enter the total household's monthly gross income.

8. Contact Information. Contact information is required so that they may be contacted by a resource provider at a later date. If contact information is not available, please provide a note explaining how the provider should proceed in connecting with the client. Contact information may include a person who can relay a message to the client as well.
   a. Enter at least 1 best method of contact (phone/email)
   b. Safe to leave message – select from drop down Yes/No
   c. Best Time to Contact – select from drop-down

9. Victim/survivor of Domestic Violence. Yes/No.
   a. If Yes, when experience occurred
   b. If Yes, are you currently fleeing

10. Living Situation
    a. Client Location. These should all be DuPage IL-514. IF the client is not located in DuPage, they should be referred to their community's Coordinated Entry.
    b. The following set of questions use conditional logic. Additional questions will appear depending on your responses provided.
        i. Residence Prior to Project Entry. Where did they sleep the night before they entered Coordinated Entry?

        ii. Length of Stay in Previous Place. How long were they in this location?

        iii. On the night before did you stay on the streets, ES, SH. This field only appears if their stay in the previous place is less than 7 nights (temporary or permanent housing locations) or 90 nights (institutional setting)

        iv. Approximate data this episode of homelessness started. Work with the client to identify the last time they had a place to sleep that was not a place not meant for human habitation, a shelter, or hotel paid for by another agency. Then, assess for approximately how long they stayed in this location   If the location was temporary or permanent housing and their stay was less than 7 days, or the location was an institutional setting and their stay was less than 90 days, repeat the process, otherwise this is the date that this episode of homelessness began.

    c. Number of times the client has been on the streets, in ES, or SH in the past 3 years. Assess for breaks in homelessness that the client had in the past 3 years. A break is if they stayed in a location that was either in temporary or permanent housing and their stay was 7 days or longer, or the location was an institutional setting and their stay was 90 days or longer. How many of these breaks did they have where they returned to an emergency shelter, Safe Haven, or place not meant for human habitation?

    d. Total number of months homeless on the street, in ES, or SH in the past three years. Using the information assessed above, how many total months were they in an Emergency shelter, Safe Haven or staying in a place not meant for human habitation? Remember, a partial month stay=1 month.

    e. Where are you sleeping tonight? Enter the location that they plan on using for tonight.

11. Current Living Situation. Record where the client is living at the time of the assessment. Provide additional details if the client is unsheltered, such as the physical location where they are staying or a description of their car to assist in locating the client if needed.

12. Does the client have a disabling condition? Yes/No

13. Select HUD Verification to complete a response for each Disability Type in the Disabilities sub-assessment.

    a. If a client is marked as having a disability type, complete all additional questions.

14. Is anyone pregnant. Yes/No.

15. Complete the appropriate VI-SPDAT tool and only 1 VI-SPDAT tool -

    a. Tools by household type –

        i. Adult Only households complete the VI-SPDAT

        ii. Households with an adult or parenting youth and children under 18 years of age complete the VI-FSPDAT

        iii. Unaccompanied youth households (persons under 25 years of age without any dependents) – TAY-VI-SPDAT

    b. Start Date. Date Assessment was completed.

      c. Provide a response for every question

16. Total Score. Enter the total VI-SPDAT score in the designated text box, and only in that assigned text box.
17. Do you agree with the housing placement selected for the client? Yes/No.
      a. Why or why not? Provide a detailed response explaining your answer above.
18. Share an apartment? Select if the client is willing to share an apartment with someone else.
19. Share a bedroom? Select if the client is willing to share a bedroom with someone else.
20. Coordinated Entry Assessment. Complete this sub-assessment each time a Coordinated Entry Assessment is conducted.
      a. Date of Assessment. This should reflect the date the assessment was completed.
      b. Assessment Location. Choose your organization from the list provided.
      c. Assessment Type. Select how the assessment was completed.
      d. Assessment Level. This assessment is a 'Housing Needs Assessment'.
      e. Prioritization List Status. If the client is being entered into the Coordinated Entry project, then the response should be that they were added to the Prioritization List. Refer to the policy to identify who is eligible to be added to the list.
      f. Assessor Name. Enter the name of the person who conducted the assessment.
      g. Assessment Project Type. Select the type of project the person conducting the assessment is from.
      h. End Date. Should match the Start Date.

Case Manager

Client Information			Service Transactions	
Summary	Client Profile	ROI	Entry / Exit	Case Managers

Assign a Case Manager who is/will be working with the client on the **Case Manager** tab, and update accordingly.

Case Plans

Client Information			Service Transactions		
Summary	Client Profile	ROI	Entry / Exit	Case Managers	Case Plans

Case Plans will be utilized to share additional information as it relates to Coordinated Entry and must only contain information that is covered by the client consent.

1. Add a Goal for Housing Stability, if one does not already exist.
2. Case Manager – leave at 'Select'
3. Overall Status will be set to In Progress
4. Select [Add Goal]
5. Select [Add Case Note]

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6. Case Manager – this picklist pulls from the Case Manager assignment on the Case Manager tab. If your name does not appear in this picklist, you must add your name and agency to the Note text box.
7. Note – add a brief description related to the Coordinated Entry activity that is covered by the client consent form. If your name does not appear in the Case Manager picklist, add both your name and agency to the end of the note.

Client Updates

All client updates are to be documented in an Interim Review. At minimum, an Annual type Interim Review shall be completed between 335-365 days from the client's program Entry Date.

Review all assessment questions for updates needed. Common questions that require updates include –

1. Contact Information
2. Prioritization List Status

Referrals

When a program identifies or anticipates a bed vacancy, a referral request should be submitted to the HMIS Help Desk, https://nilhmis.cayzu.com. The request should include:

1. Name of the program that the referral is for
2. Total number of vacancies
3. Maximum household size for the available unit(s)
4. Household Type, if applicable: Adult Only, Adult Child, Youth Only, Veteran Only, etc.

Making the Referral

The HMIS System Administrator or designated person will pull the Coordinated Entry Prioritization and By Name List report and will provide the requested referrals in accordance with the DuPage County Coordinated Entry System Standards & Policy. They will then record the referral through an Entry/Exit Interim Update, as shown earlier, and will record the referral information in the Housing Referral Tracking and the Coordinated Entry Event sub-assessments as shown below.

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1. Select 'Add' to add a Housing Referral Tracking record
2. Choose the Referral Source
3. Select the Provider the referral is being assigned to

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4. 'Add' a Coordinated Entry Event
5. The Date of Event should match the Start Date. End Date can remain null.
6. Choose the appropriate Event type from the List. Currently, our community is only tracking Transitional and Permanent Housing referral events through Coordinated Entry.
7. 'Lookup' the provider this referral is being made to.

Receiving the Referral

The program receiving the referral will review the available information in HMIS using Enter Data As (EDA) to the Coordinated Entry Project and will connect with the active programs and to the client to coordinate services. When a determination has been made, record the outcome of the referral through an Entry/Exit Interim Update, as shown earlier. Both the Housing Referral Tracking and the Coordinated Entry Event sub-assessments will require an update to reflect what happened. Be sure to review and update the additional assessment questions to help ensure we have the most current and accurate information.

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1. Select the pencil icon to edit the active Housing Referral Tracking record.
2. Select the Referral Outcome

   If the client is not being housed, complete:

   a. A to select the reason why
   b. B to provide additional details regarding the primary reason why

   If the client is being housed, complete

   c. C to reflect the date that the housing was offered to the client
   d. D to record the date that the client accepted the housing
   e. E to record the date the client moved into housing. *This is different from the "Housing Move-in Date" field that is required for all PH projects.

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3. Select the pencil icon to edit the active Coordinated Entry Event.
4. Select the Referral Result from the list.
5. Add the date of the Result

Program Exit

1. A provider may exit a client if they are housing the client.

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2. System Administrators will exit a client if the client has been inactive in HMIS for 60-days or longer (No active entries, case notes, or services).
3. System Administrators will exit a client if there have been 3 separate referrals for housing where the provider could not locate the client.

Exit Date = Last day of program participation

On the **Entry / Exit** Tab, add a **Program Exit**, completing the responses for **Reason for Leaving** and **Exit Destination.** Update all available assessments.