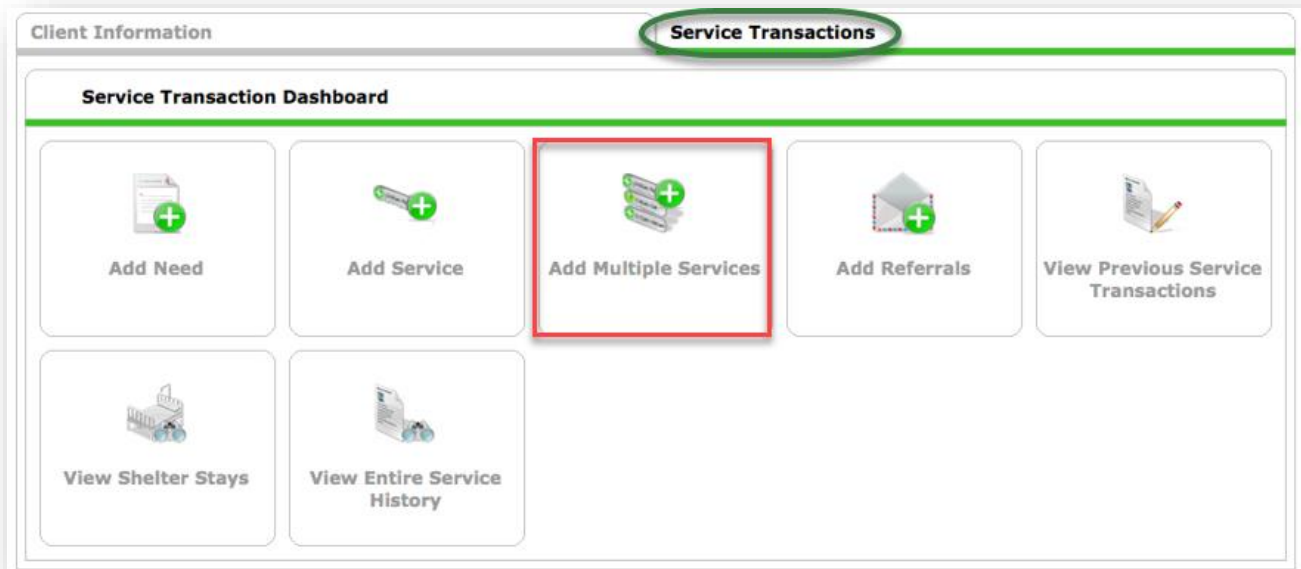


# Moving On Assistance Workflow

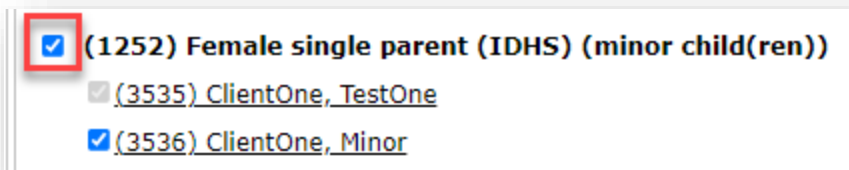
Moving On assistance are activities that support clients who voluntarily transition from **Permanent Supportive Housing (PSH)** projects to other affordable permanent housing, as they no longer need or want intensive supportive services but continue to need housing assistance. In accordance with FY2022 HMIS Data Standards effective 10/1/2021, PSH providers are tasked with recording information about Moving On assistance activities for clients. To ensure projects are capturing all necessary information, the Moving On Assistance data fields have been added to the **Service Transaction** record in HMIS for **PSH projects and must be documented at every occurrence when Moving On assistance is provided.**

This document provides further guidance on entering Moving On Service Transactions. Apply the HMIS [Standard Workflow \(PDF\)](#) data entry procedures prior to adding Moving On Services. Services are to be recorded after an Entry into a PSH program has been created, and before the client Exits from the program. **Services will be applied to all household members who are benefiting from the service.**

1. Log into HMIS, go to the **Head of Household's** client record and follow the HMIS Standard Workflow.
2. Click on the **Service Transactions** tab and select **Add Multiple Services** from the dashboard.



3. **Household Members** – Include all household members receiving the Moving On service.



4. **Service Provider** - Select the PSH program providing Moving On assistance using the  or  functions. The Service Provider should be the same as the PSH Entry/Exit Provider.

- a. **Start Date/End Date** – Record the date the service was provided. The End Date may be the same as the Start Date.
- b. **Service Type** –Select the appropriate response for the Moving On service provided from the drop-down pick list.

5. **Moving On Assistance** –Select the Moving On service provided from the drop-down pick list. The **Service Transaction Term** must correspond with the appropriate **HMIS Data Standard Term**.

The screenshot shows a web form with the following fields and values:

- Service Provider\***: DuPagePads - Olympus Place (PSH) (6713)
- Start Date\***: 03/25/2022 11:17:39 AM
- End Date**: 03/25/2022 11:17:39 AM
- Service List**:
  - Number of Services\***: 1
  - Service Type\***: Moving Expense Assistance (BH-3800.5150)
  - Service Transaction Term**: (empty)
  - Moving On Assistance**: (highlighted with a red circle)
  - Service Transaction Term**: Financial assistance for Moving On (e.g., security deposit, moving expenses) (highlighted with a red box)
  - HMIS Data Standard Term**: (empty)
  - Need Information**: (empty)
  - Need Status\***: Closed
- Buttons**: Search, My Provider, Clear, Remove, Clear, Add Another, Remove All, Clear All, Save & Exit, Cancel

Use the **Moving On Assistance Provided** table below to select the appropriate corresponding term.

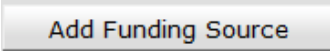
### Moving On Assistance Provided


HMIS Data Standard Term	Service Transaction Term	Service Code
Subsidized housing application assistance	Benefits Assistance	FT-1000
Financial Assistance for Moving On (e.g., security deposit, moving expenses)	Rental Deposit Assistance	BH-3800-7250
	Moving Assistance	BH-5000 and related
Non-financial assistance for Moving On (e.g., housing navigation, transition support)	Housing Search and Information	BH-3900 and related
	Case/Care Management	PH-1000
Housing referral/placement	Supportive Housing Placement/Referral	BH-8500 and related

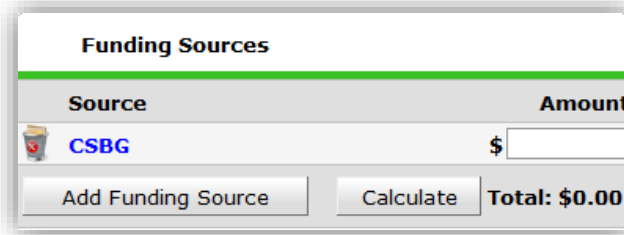
**6. Service Costs** – To be completed for financial transactions. (Optional)


- a. **Number of Units** - If applicable, enter a numerical value of how much is being provided. Examples may include: 2 gas cards, 1 month of rent, 1 hour of Case Management, etc.
- b. **Unit Type** - Select the appropriate type from the provided pick list, if applicable. Examples may include hours, gift cards, vouchers, months, etc.
- c. **Cost per Unit** - The value of each unit. For example, monthly rent or utility amount.
- d. **Total Cost of Units** - Total amount of assistance.

**7. Apply Funds for Service** (Optional)

a. **Funding Sources** - If applicable,  to designate the grant(s) that is paying for this service.

b.  **Add the Funding Source**, enter the total **Amount** per Funding Source.



Source	Amount
 CSBG	\$ <input type="text"/>

**Total: \$0.00**

c. **Support Documentation** – Upload supporting documents, if applicable.

**8. Follow Up Information** – complete if applicable.

**9. Need Information**

- a. **Need Status** – Select the **Closed** status from the drop-down pick list.
- b. **Save & Exit** or select **Add Another** to add another Moving On service for this household.