# **SP 5**

# ServicePoint 5 Training Manual



Connecting your community.



Joshuah Cohen The Planning Council SP 5

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# Logging In and Learning the Dashboard

ServicePoint title screen. This is where the User will enter their Username and password. If the User forgets, or enters an incorrect password 3 times, contact the system administrator. The User will have to change their password every 45 days. The User's password must have at least 8 characters and include at least 2 numbers/symbols. asdfkjhh – Not valid asdflkjh13 – Valid asdfjh#2 - Valid

	<u></u>
The Planning Council - Shelter Link II	
User Name	
Password	
Login	
Forgot your username or password? Contact your agency administrator	
System use requires your compliance	
with the terms and conditions @1999-2012 Bowman Systems L.L.C.	
All Rights Reserved	
	<u>▼</u>

Once the User has logged in to the system the User will be brought to the Dashboard.

SERVICE point' Connecting Your Community.     The Planning Count The Planning Count June 23, 29 12	ncil - Shelter Link II il		Josh Cohen System Admin II Mode: 📓 Shadow & Back Date & ART: Unread Messages	
📌 Home > Home Pag	je Dashboard			Type here for Global Search 📩 🛧 🥜
Last Viewed Favorites	System News (7)	Agency News (0)	💋 Counts Report	<b>a</b>
Home	Date Headline		Clients With An Entry But No Exit:	
ClientPoint	10/01/2009 Joshuah Cohen		-	
ResourcePoint	07/31/2007 Back Date Corrections		2621	
ActivityPoint	07/31/2007 Pat Vedomske			
SkanPoint	07/31/2007 HUD defines a chronically homeless person			
Reports	07/31/2007 HUD Considers Food Stamps to be an Income Source			
▶ Admin	11/14/2006 Client Privacy Statement for HMIS			
Logout	Add System News	View All		Refresh
	🖌 ART Report			
	Please select an ART report to show Edit Reporting Options	Viev Entire Report		
	Customize Home Page Dashboard		]	
Legal Notices				

On the center of the screen is the System News, Counts Report, and ART Report. System News could be updated by the System Administrator. Currently there are the contact information for the administrators and other useful information. The Counts Report is modified by the User to track information about their programs. The ART Report is a report customized by the System Administrator.

e Dashboard			-	Type here for Global S	earch 🖌 🕜
System News (7)	Agency News (0)		🖉 Counts Report		
Data Haad ine			Sinnte With An Enter Dut	No Exit:	
10/01/2009 Joshuah Cohen					
07/31/2007 Back Date Corre	ections		262	1	
07/31/2007 Pat Vedomske					
07/31/2007 HUD defines a	chronically homeless person				
07/31/2007 HUD Considers	Food Stamps to be an Income S	ource			
11/14/2006 Client Privacy S	tatement for HMIS				
Add System News		View All			Refresh
/ ART Report		<b>a</b>			
Please select an ART report to s	show				
Edit Reporting					
Options		View Entire Report			
Customize Home Page Da	ishboard				

To modify the Counts Report, click on the Pencil next to the name. *Here* is the first screen the User will have to work with once the Pencil is clicked.

op-Left	Top-Right	Bottom-Left	Bottom-Right			
-	Oliverte With An Entry Dut No	Exit 💙				
Report Name	Clients With An Entry But No	Exit				
Description		Lists all dients that have an Entry/Exit record for the specified providers with an entry date in the specified date range but no exit date				
Filters						
Filters elect Dates	Start Date	End Date				
	Start Date 01 / 01 / 2012	End Date 12 / 31 /	2012			

Here the User can select the type of information that they wish to collect. Depending on the report, the User will have a list of filters that can be applied. Start and End dates are the most common the User will see. Set the date range that is required for the report.

Next is the information on the left side of the Dashboard.

Last Viewed

ClientPoint ResourcePoint

**Activity**Point

SkanPoint • Reports

Admin

Logout

Home

Favorites

The Planning Co The Planning Cou June 28, 29 12	ouncil - Shelter Link II ncil			Mode: 🕺 Shadow 4 Back Date 8 ART: Unread Messages	
Home > Home P	age Dashboard			Type here for Global Search	$= \star$
st Viewed Favorites	System News (7)	Agency News (0)	🖊 Counts Report		<b>1</b>
ome	Date Headline		Clients With An Entry But No Exit:		
ientPoint	10/01/2009 Joshuah Cohen		onene marin Endy bacho Exit		
esourcePoint	07/31/2007 Back Date Correction	15	2621		
tivityPoint	07/31/2007 Pat Vedomske				
anPoint	07/31/2007 HUD defines a chron	ically homeless person			
ports	07/31/2007 HUD Considers Food	Stamps to be an Income Source			
min	11/14/2006 Client Privacy Staten				
gout					
	Add System News	View All			Refrest
	ART Report		3		
	Please select an ART report to show				
	Edit Reporting Options	View Entire Repo	t		

1

Home – Takes the User back to the Dashboard.

ClientPoint – Where client information is inputted.

ResourcePoint – Where the User can search other providers and gather information about those agencies.

ActivityPoint – Used to assign clients to Provider activities.

SkanPoint – Allows the User to assign a single service to multiple clients, using a client list.

Reports – Contains basic reports that can be run by the User, also allows access to ART, if the User has a license.

🎽 Admin – Administrators Only.

Logout – Lets the User log out of ServicePoint.

# Creating a Client

ClientPoint is where the bulk of the User's time will be spent, updating and creating client records.

The Planning Cour					Mode: 🕺 Shadow 🥔 Back Date 🐁 ART: Unread Messages
ClientPoint > Clie	nt Search				Type here for Global Search
Home					
ClientPoint		0	Please Search the System be	fore adding a New Client.	
ResourcePoint	1	First Middle	e Last	Suffix	
ActivityPoint	Name				
kanPoint	Alias				
eports	Social Security Number	· · · · · · · · · · · · · · · · · · ·			
dmin	Social Security Humber Data	-Select-			
gout	Quality Exact Match				
	Search ACTIVE Clients	۲			
	Search INACTIVE / DELETED Clients	0			
	Search ALL Clients	0			
	Search Clear Ado	d New Client With This Informatic	on		
	Client Number				
	Enter or scan a Client ID number t Client ID #	to go directly to that Client's profi Submit	ile.		
Legal Notices					

Client Search allows the User to input basic information to locate or create a client's record.

		🚺 Please	e Search the System before	adding a New Clien
	First	Middle	Last	Suffix
Name				
Alias				
Social Security Number				
Social Security Number Data Quality	-Select- 💌			
Exact Match				
Search ACTIVE Clients	۲			
Search INACTIVE / DELETED Clients	0			
Search ALL Clients	0			

Name – First, Middle Initial, Last, and Suffix. Middle Initial and Suffix are optional.

		🚺 Pleas	e Search the Sy	stem before adding a New Cli
	First	Middle	Last	Suffix
Name				
Alias		_		
Social Security Number		1		
Social Security Number Data Quality	-Select-			
Exact Match				
Search ACTIVE Clients	۲			
Search INACTIVE / DELETED Clients	0			
Search ALL Clients	0			

Alias is optional.

#### **Social Security Number**

Data Source: Interview or self-administered form.

*When Data are Collected:* Upon initial program entry or as soon as possible thereafter. *Subjects:* All clients.

*Definitions and Instructions:* In one field, record the nine-digit Social Security Number.

In another field, record the appropriate SSN type (data quality code).

Required Response Categories:

*Social Security Number* \_\_\_\_\_- \_ \_\_\_\_ (123-45-6789)

Social Security Number Type

1 = Full SSN Reported 123-45-6789

2 = Partial SSN Reported 123-4\_-\_\_

8 = Don't Know or Don't have SSN

9 = Refused

*Special Issues:* Under federal law (5 U.S.C. Section 552a), a government agency cannot deny shelter or services to clients who refuse to provide their SSN, unless the requirement was in effect before 1975 or SSN is a statutory requirement for receiving services from the program. No HUD-administered McKinney-Vento Act program qualifies under this exception.

Next, select Search. If no client shows up, click Add New Client With This Information.

Client ID allows the User to enter the client's ID number for quick reference.

Client	Client Number						
Enter or scar	n a Client ID number to go	directly to that	Client's profile.				
Client ID #		Submit	]				

Client Results will populate after the User clicks Search on the Client Search. Select the Pencil  $\swarrow$  next to the client the User would wish to use. Verify that the name is spelled correctly and that both the SSN and Date of Birth match.

-	lien	nt Results							
	ID	Name 🔺		Social Security Number	Date of Birth	Alias	Gender	Banned	Household Count
/ :	¢ 117	.798 client, fak	e	456	02/11/1985		Male		1 🔍
1	🌻 136	657 <mark>client, fak</mark>	e	111-22-2333	01/12/1985		Female		1 🔍
	166	616 Client, Fal	<e< th=""><th></th><th>10/10/1955</th><th></th><th>Female</th><th></th><th>1 🔍</th></e<>		10/10/1955		Female		1 🔍
/	<b>ę</b> 92	Client, Fal	<e< th=""><th>123-45-6789</th><th>01/01/1959</th><th></th><th>Female</th><th></th><th>2 🔍</th></e<>	123-45-6789	01/01/1959		Female		2 🔍
/	🏚 117	.799 <mark>client, fa</mark> k	e1		04/29/2004		Female		2 🔍
/	175	560 Client, fak	eyest		05/01/2012		Female		1 🔍
				Showing	1-6 of 6				

Once the client is located, or has been added as a new client, the User will move to the Client Profile.

The Client Profile is only used to update certain information about the client. Go to page 28 for Editing a client record.

	formation: Ex	kpirea		-5	witch to Another Ho	usehold Member	- 💙 Submit		
lient Informati	ion				Service Transac	ctions			
Summary	Client Pro	ofile Households	ROI	Entry / Exit	Case Managers	Case Plans	SSOM	Activities	Assessments
💋 Client	t Record						Issue IE	Card	
Name	C	lient, Fake							
Alias Social Security 123-45-6789									P
SSN Data	SSN Data Quality Full SSN Reported (HUD)								
Age	53	3						Cr	hange Clear
📝 Client	t Demograp	hics							
Date of B	irth	01/01/1959							
Date of B	irth Type								
Gender		Female							
Primary F	Race	American Indian o	Alaska Native	(HUD)					
Secondar any)	ry Race (if								
Ethnicity		Non-Hispanic/Non-	Latino (HUD)						

# Creating a Household

Here the User will need to create a Household.

First, click on the Households tab.

	Expired	-Switch to Another Household Member- 🔽 Submit
ent Information		Service Transactions
Summary Client	Profile Households ROI Entry / E	Exit Case Managers Case Plans SSOM Activities Assessments
🥖 Client Record		Issue ID Card
Name	Client, Fake	
Alias		
Social Security	123-45-6789	
SSN Data Quality	Full SSN Reported (HUD)	
Age	53	Change Clear
🧪 Client Demogr	aphics	Û
Date of Birth	01/01/1959	
Date of Birth Type		
Gender	Female	
Primary Race	American Indian or Alaska Native (HUD)	
Secondary Race (i any)	f	

Next, click on Start New Household. (Note: If the client's information is present the User just verifies that the information is correct.)

(92) Client, Release of	Fake Information: <mark>Expired</mark>					
Client Informa	ation				Service Transa	ctions
Summary	Client Profile	Households	ROI	Entry / Exit	Case Managers	Case Plar
			🚺 This	Client is not current	ly a member of any	y Househol
) Pre	vious Households		🚺 This	Client is not current	ly a member of any	y Househol

Enter the Household Type.

Now enter the Name and SSN for the next client in the household - child or spouse. Then search and add if needed. When the last client is entered, click Continue at the bottom right corner.

ld New Household				
Household Type	2			
Household Type *	-Select-			
Client Search				
	() Please	e Search the System be	efore adding a New Client.	Hide Advanced Search
	First	Middle	Last	Suffix
Name			Client	
Alias				
Social Security Number				
Social Security Number Data Quality	-Select-	*		
Exact Match				
Search Cle	ar Add New	Client With This Inform	ation	
Client Number				
nter or Scan a Client ID	to add that Client to t	this Household.		
lient ID #		Submit		
		_		

Sele	cted Clients		snowing	10010			
ID	Name	Social Security Number	Date of Birth	Alias	Gender	Banned	Househol Count
92	Client, Fake	123-45-6789	01/01/1959		Female		o 🔍
11799	client, fake1		04/29/2004		Female		1 🔍
17560	Client, fakeyest		05/01/2012		Female		o 🔍
			Showing	1-3 of 3			
					Continue		Cancel

Review the clients to make sure all the household clients are there. Here the User will enter the client's Relationship to the Head of the Household and the date they entered the household.

3	(7544) Female Single Pa	arent			Save	Save	e & Exit	Exit			
	Household Type *	Female	Single Parer	nt 💌							
	Income	ume US\$2,444.00 Q									
	Client Count	з									
	Household Members										
	Name	Age		Relationship to Head of Household	Joined Household *		Previous Associations	Household Count			
	(11799) client, fake1	8	No 💌	-Select-	08 / 09 / 2012	23, 25	o 🔍	2 🔍			
	(92) Client, Fake	53	No 🚩	-Select-	08 / 09 / 2012	23, 23	o 🔍	1 🔍			
Þ	(17560) Client, fakeyest	0	No 🚩	-Select-	08 / 09 / 2012	13, 23	o 🔍	1 🔍			
A	dd/Delete Household Memb	ers				Н	ousehold Histor	y Report			
•	Previous Household M		;								
	Household Members		🥖 Clier	nt Record			Issue ID Ca	ırd 🚹			
<ul> <li></li> </ul>	Household Members (11799) client, fake1 Age: 8		/ Clier Name	nt Record			Issue ID Ca	ird 🚹			

First, select the Relationship to the Head of the Household. The Head of Household is Self.

Then, update the Joined Household. This date could be when they entered the household or the date in which the client(s) entered the program.

Finally, click Save & Exit.

Hou	sehold Information -	(7544	) Female	Single Parent						
5	(7544) Female Single Pa	rent				Save	9	Save	& Exit	Exit
	Household Type *	Female	Single Pare	nt 💌						
	Income	US\$2,4	44.00 🔍							
	Client Count 3									
	Household Members									
ī	Name	Age	Head of Household	Relationship to Head of Household	Joi	ned Household '			Previous Associations	Household Count
٢	(11799) client, fake1	8	No 💌	Daughter 🗸	07	/01 /2012	23,	27	o 🔍	2 🔍
٢	(92) Client, Fake	53	No 💌	Self	07	/01 /2012	23,	2	o 🔍	1 🔍
٢	(17560) Client, fakeyest	0	No 💌	Son	07	/01 /2012	23,	27	o 🔍	1 🔍
A	dd/Delete Household Membe	ers						Ho	ousehold Histor	ry Report
	Previous Household M	lembers								
	Individual Client Assess	ment								
	Household Members		🧪 Clie	nt Record					Issue ID Ca	ard 🔒 🚹
$\checkmark$	(11799) client, fake1 Age: 8		Name	client, fake1						
$\checkmark$	(92) Client, Fake Age: 53		Alias	Cocurity						

### Creating a Release of Information (ROI)

Next the User will enter data for the ROI. This is the form provided during initial training. This allows (or denies) the client's information to be shared with other agencies. If the User is not sharing the client's data with other agencies (due to HIPAA or other), then this section can be skipped.

Click the tab that says ROI.

Release of Information: I	Expired -S	-Switch to Another Household Member- 💌 Submit					
ent Information		Service Transactions					
Summary Client P	rofile Households ROI Entry / Exit	Case Managers Case Plans SSOM Activities Assessments					
/ Client Record		Issue ID Card					
Name	Client, Fake						
Alias							
Social Security	123-45-6789						
SSN Data Quality	Full SSN Reported (HUD)						
Age	53	Change Clear					
🥖 Client Demogra	phics	Û					
Date of Birth	01/01/1959						
Date of Birth Type							
Gender	Female						
Primary Race	American Indian or Alaska Native (HUD)						
Secondary Race (if any)							
Ethnicity	Non-Hispanic/Non-Latino (HUD)						

#### Click Add Release of Information.

🥡 (92) Client, Fake						
Release of Information: None	-Switch to Another Household Member- 💟 Submit					
Client Information	Ŷ	Service Transact	ions			
Summary Client Profile Households ROI	Entry / Exit	Case Managers	Case Plans SSOM	Activities	Assessmen	
Release of Information						
Provider	Ρ	ermission	Start Date	End Date		
Add Release of Information		No matches.				
					Exit	

Be sure to click the Check box next to the household to include all household members.

Select whether the Release is Granted.

Input the start date – the day the release was signed.

Enter the end date – 3 years after the start date.

Select the Documentation type, likely Signed Statement from Client.

elease of Inform	nation	2								
Release of Information - (92) Client, Fake										
Household Mei	nbers									
Note: To include Household members for this Release of Information, click the box beside each name. Only members from the SAME Household may be selected.										
<ul> <li>✓ (7 i44) Female Single Parent</li> <li>✓ 11799) client, fake1</li> <li>✓ 92) Client, Fake</li> <li>✓ 17560) Client, fakeyest</li> </ul>										
Release of Info	rmation Data									
Provider *	The Planning Council (1) Search My Provider Clear									
Release Granted	Yes									
Start Date *	07 /01 /2012 🔊 💐									
End Date *	07 /01 /2015 🔊 🥸									
Documentation	Signed Statement from Client									
Witness										
	Save Release of Information Canc	el								

Then Click Save Release of Information.

# Creating an Entry

Next is the Entry/Exit. This is where the User will enter the bulk of the demographic information about the client.

Click the tab that says Entry/Exit.

Release of Information:	Expired	-Sw	-Switch to Another Household Member- 💌 Submit				
ient Information			Service Transacti	ions			
Summary Client I	Profile Households ROI	Entry / Exit	ase Managers	Case Plans	SSOM	Activities	Assessments
🖉 Client Record					Issue ID	Card	
Name	Client, Fake						
Alias							P
· · ·	123-45-6789						
SSN Data Quality	Full SSN Reported (HUD)						
Age	53					Ci	hange Clear
🧪 Client Demogra	aphics						
Date of Birth	01/01/1959						
Date of Birth Type							
Gender	Female						
Primary Race	American Indian or Alaska Native (HUI	)					
Secondary Race (if any)							
Ethnicity	Non-Hispanic/Non-Latino (HUD)						

#### Click Add Entry/Exit.

Client - (9	92) Client, Fak	e							ſu	
🧃 (92) Client, F Release of Ir	ake nformation: Ends 07	7/01/2015				-Sw	itch to Anoth	er Household Membe	r- 💙 Submit	
Client Informati	on				Service Transactions					
Summary	Client Profile	Households	ROI	Entry / Exit	Case Managers	Case Plans	SSOM	Activities	Assessments	
Entry /	Exit	() Reminder:	Household me	mbers must be establi	shed on Households	tab before creat	ing Entry / Ex	its		
Program					Туре	Entr	y Date	Exit Date	Client Count	
Add Entry	/ Exit				No matches.					
									Exit	

The User needs to make sure they check all the household members that will be entering.

Next, chose the Provider. This is the program for which the client is entering.

Select the Type – HUD is the answer used in all but special occasions. Basic is used for Homeless Prevention Programs, in regards to FUP, View, Foster Care and other funding sources. Basic is also used for denials that must be tracked in HMIS. PATH is used for the PATH program only.

Enter the Entry Date, the date the client is entering the program, or when the client filled out an intake form.

Click Save & Continue.

Entry Data - (92) Clier	t, Fake	×						
Household Members								
Note: To include Household members for this Entry / Exit, click the box beside each name. Only members from the SAME Household may be selected. (175 44) Female Single Parent (11799) client, fake1 (22) Client, Fake (17560) Client, fakeyest Entry Data - (92) Client, Fake								
Provider*	The Planning Council (1) Search My Provider Clear							
Type *	HUD							
Entry Date *	07 /01 / <mark>2012 🧃 🎝 🦓</mark> 2 💌 : 39 💌 : 25 💌 PM 💌							
	Choose Date							
	Save & Continue	cel						

The User needs to make sure they know which assessment they are in; there are different ones to choose from. Start with the Non-Confidential then move to the Confidential and, if there is another, then move on to that one.

Scroll down, verify that the client that is highlighted on the left. This is the client that the User is currently working on. All demographic data should be for this client only.

Non-Confidential	Confidential	
Household Data Sharing	3	6
ient: (92) Client, Fake		Add Household Data
Non-Confidential		Entry Date: 07/01/2012 02:39:25 PM 🧯
Date of Birth		
	Household Data Sharing ient: (92) Client, Fake Non-Confidential Date of Birth Date of Birth Type Primary Race Becondary Race (if any)	Household Data Sharing ient: (92) Client, Fake Non-Confidential Date of Birth 01/01/1959 20 20 G Date of Birth Type Select- Primary Race American Indian or Alaska Native (HUD) V G Secondary Race (if any) -Select-

Enter the demographic data for the client. Below are the questions and appropriate answers that should be used.

#### Date of Birth

*Rationale:* The date of birth can be used to calculate the age of persons served at time of program entry or at any point in receiving services. It will also support the unique identification of each person served. *Data Source:* Client interview or self-administered form.

When Data are Collected: Upon initial program entry or as soon as possible thereafter.

Subjects: All clients.

*Definitions and Instructions:* Collect the month, day, and year of birth for every person served. If a client cannot remember the year of birth, ask the person's age and calculate the approximate year of birth. If a client cannot remember the month or day of birth, record an approximate date of "01" for month and "01" for day. CoCs that already have a policy of entering another approximate date may continue this policy. Approximate dates for month and day will allow calculation of a person's age within one year of their actual age. In another field, record the appropriate date of birth type (data quality code). *Required Response Categories:* 

3.3 Date of Birth Response Categories Examples

Date of Birth \_\_\_\_/\_\_\_/\_\_\_\_ (Month) (Day) (Year) (08/31/1965) Date of Birth Type 1 = Full DOB Reported 2 = Approximate or Partial DOB Reported 8 = Don't Know

- 9 = Refused

#### Race

*Rationale:* Race is used to count the number of homeless persons who identify themselves within five different racial categories. In the October 30, 1997 issue of the Federal Register (62 FR 58782), the

Office of Management and Budget (OMB) published "Standards for Maintaining, Collecting, and Presenting Federal Data on Race and Ethnicity." All existing federal recordkeeping and report requirements must be in compliance with these Standards as of January 1, 2003. The data standards in this Notice follow the OMB guidelines and can be used to complete HUD form 27061. *Data Source:* Client interview or self-administered form.

When Data are Collected: Upon initial program entry or as soon as possible thereafter. Subjects: All clients.

*Definitions and Instructions:* In separate data fields, collect the self-identified race of each client served. Allow clients to identify multiple racial categories. Staff observations should not be used to collect information on race. Definitions of each of the race categories are as follows:

1 = American Indian or Alaska Native *is a person having origins in any of the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment.* 

2 = Asian is a person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

3 = Black or African American *is a person having origins in any of the black racial groups of Africa. Terms such as "Haitian" can be used in addition to "Black or African American."* 

4 = Native Hawaiian or Other Pacific Islander is a person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

5 = White is a person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Required Response Categories:

Race

1 = American Indian or Alaska Native

2 = Asian

3 = Black or African American

4 = Native Hawaiian or Other Pacific Islander

5 = White

8 = Don't Know

9 = Refused

*Changes from Previous Notice:* Race and Ethnicity were previously combined as a single data element with a two-part question. They are now two distinct data elements. The responses "Don't Know" and "Refused" have been added as response categories for the *Race* data element.

#### Ethnicity

*Rationale:* Ethnicity is used to count the number of homeless persons who identify themselves as Hispanic or Latino.

Data Source: Client interview or self-administered form.

*When Data are Collected:* Upon initial program entry or as soon as possible thereafter. *Subjects:* All clients.

*Definitions and Instructions:* Collect the self-identified Hispanic or Latino ethnicity of each client served. Staff observations should not be used to determine ethnicity. The definition of Hispanic or Latino ethnicity is a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture of origin, regardless of race.

Required Response Categories:

#### Ethnicity

0 = Non-Hispanic/Non-Latino

1 = Hispanic/Latino

8 = Don't Know

9 = Refused

*Changes from Previous Notice:* Race and Ethnicity were previously combined as a single data element with a two-part question. They are now two distinct data elements.

#### Gender

*Rationale:* To create separate counts of homeless men, women and transgendered clients served. *Data Source:* Client interview or self-administered form.

*When Data are Collected:* Upon initial program entry or as soon as possible thereafter. *Subjects:* All clients.

*Definitions and Instructions:* Record the reported gender of each client served. Gender should be assigned based on the client's self-perceived gender identity. Transgender is defined as identification with, or presentation as, a gender that is different from the gender at birth.

Required Response Categories:

#### Gender

- 0 = Female
- 1 = Male
- 2 = Transgendered Male to Female
- 3 = Transgendered Female to Male
- 4 = Other
- 8 = Don't Know

9 = Refused

*Changes from Previous Notice:* Transgendered has been added as an official response category for the gender data element. Staff observations should not be used as the sole source of information on gender. Staff should ask for the client's self-perceived gender identity.

#### **Veteran Status**

*Rationale:* To determine the number of homeless veterans.

*Data Source:* Client interview or self-administered form.

When Data are Collected: Upon initial program entry or as soon as possible thereafter.

Subjects: All adults served.

*Definitions and Instructions:* A veteran is someone who has served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

Required Response Categories:

#### Veteran Status

- 0 = No
- 1 = Yes
- 8 = Don't Know
- 9 = Refused

#### **Disabling Condition**

*Rationale:* Disability condition is needed to help identify clients that meet HUD's definition of chronically homeless and, depending on the source of program funds, may be required to establish client eligibility to be served by the program.

Data Source: Client interview, self-administered form, or assessment. Where disability is required to determine program eligibility, the data source is the evidence required by the funding source. When Data are Collected: At any time **after** the client has been admitted into the program (unless a disabling condition is required for determining the client's eligibility for the program). Subjects: All clients served.

*Definitions and Instructions:* For this data element, a disabling condition means: (1) a disability as defined in Section 223 of the Social Security Act; (2) a physical, mental, or emotional impairment which is (a) expected to be of long-continued and indefinite duration, (b) substantially impedes an individual's ability to live independently, and (c) of such a nature that such ability could be improved by more suitable housing conditions; (3) a developmental disability as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act; (4) the disease of acquired immunodeficiency syndrome or any conditions arising from the etiological agency for acquired immunodeficiency syndrome; or (5) a diagnosable substance abuse disorder. *Required Response Categories:* 

#### Disabling Condition

0 = No

1 = Yes

8 = Don't Know

9 = Refused

*Special Issues:* For residential homeless assistance programs, client intake as part of the program admission process must be separated from the collection of disability information in order to comply with Fair Housing laws and practices, unless this information is required to determine program eligibility or is needed to determine whether applicants need units with special features or if they have special needs related to communication.

It is possible to derive client responses to the *Disabling Condition* guestion from certain program-specific data elements if the HMIS software can automatically map those responses to the Disabling Condition data element. For example, if a client responds affirmatively to having a physical disability (Data Element 4.3), a developmental disability (Data Element 4.4), HIV/AIDS (Data Element 4.6), or a substance abuse problem (Data Element 4.8), then the response to Disabling Condition is "Yes." If a client affirms that they have a mental health problem (Data Element 4.7) and they also affirm that the problem is expected to be of long duration and substantially impairs their ability to live independently, then the response to Disabling Condition is "Yes." An affirmative response to Chronic Health Condition (Data Element 4.5) does not provide enough information to assess whether the response to disabling condition is "Yes." Additional assessment is needed to determine whether the condition substantially impedes a client's ability to live independently and could be improved by more suitable housing conditions. It is important to note that a "no" to any of the questions in 4.3, 4.4, 4.6, 4.7, or 4.8 does not automatically preclude a client from being disabled under the SSA definition. However, a "no" response may require additional assessment to determine whether a physical, emotional or mental impairment is present, whether the condition is expected to last for a long duration, and whether it significantly impedes the client's ability to live independently.

Operators of CoC Programs should be especially sensitive to collecting information on disabling condition from clients under the age of 18. In households composed of adults and children, the disabling status of children should be reported by an adult in the household.

*Changes from Previous Notice:* Under the previous notice, collection of this information was limited to all adults served.

#### **Residence Prior to Program Entry**

*Rationale:* To identify the type of residence and length of stay at that residence just prior to (i.e., the night before) program admission.

Data Source: Interview or self-administered form.

When Data are Collected: At any time **after** the client has been admitted into the program (unless a residence just prior to program admission is required for determining the client's eligibility for the program).

Subjects: All adults served and unaccompanied youth served.

*Definitions and Instructions:* Record the type of living arrangement of the client the night before their entry into the program. For rental by client and owned by client, select the response that includes the type of housing subsidy, if any, the client received. A housing subsidy may be tenant-, project- or sponsor-based and provides ongoing assistance to reduce rent burden. This includes either a housing subsidy provided through the Veterans Affairs Supportive Housing (VASH) program or other housing subsidy. Other housing subsidies may include a HUD-funded subsidy (e.g., public housing, Housing Choice Voucher or "Section 8") or other housing subsidy (e.g., state rental assistance voucher). *Required Response Categories:* 

#### **Residence Prior to Program Entry**

1 = Emergency shelter, including hotel or motel paid for with emergency shelter voucher

- 2 = Transitional housing for homeless persons (including homeless youth)
- 3 = Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)
- 4 = Psychiatric hospital or other psychiatric facility
- 5 = Substance abuse treatment facility or detox center
- 6 = Hospital (non-psychiatric)
- 7 = Jail, prison or juvenile detention facility
- 12 = Staying or living in a family member's room, apartment or house
- 13 = Staying or living in a friend's room, apartment or house
- 14 = Hotel or motel paid for without emergency shelter voucher
- 15 = Foster care home or foster care group home
- 16 = Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway

station/airport or anywhere outside); inclusive of "non-housing service site (outreach programs only)"

- 17 = Other
- 18 = Safe Haven
- 19 = Rental by client, with VASH housing subsidy
- 20 = Rental by client, with other (non-VASH) ongoing housing subsidy
- 21 = Owned by client, with ongoing housing subsidy:
- 22 = Rental by client, no ongoing housing subsidy
- 23 = Owned by client, no ongoing housing subsidy
- 8 = Don't Know

9 = Refused

#### Length of Stay in Previous Place

- 1 = One week or less
- 2 = More than one week, but less than one month
- 3 = One to three months
- 4 = More than three months, but less than one year

5 = One year or longer

#### 8 = Don't Know

9 = Refused

*Special Issues:* This standard does not preclude the collection of residential history information beyond the residence experienced the night prior to program admission. This data element must be recorded in a transactional field each time a client enters a program.

Communities may decide whether to include additional response values as long as they can be mapped to the categories included here, including the "other" category.

*Changes from Previous Notice:* Response value 18, Safe Haven, has been added. A safe haven is a form of transitional supportive housing or a drop-in supportive service center that serves hard-to-reach homeless persons with severe mental illness who are on the street and have been unable or unwilling to participate in housing or supportive services.

#### **City of Origin**

*Rationale:* To identify the current geographic location of persons who are at risk of homelessness. *Data Source:* Interview or self-administered form.

When Data are Collected: Upon any program entry or as soon as possible thereafter.

Subjects: All adults and unaccompanied youth served.

#### City of Origin

Hampton Roads Cities

#### **Other City**

Type in the other city

*Special Issues:* This standard is designed for the Hampton Roads area to determine the locality from which clients are coming from.

#### Zip Code of Last Permanent Address

*Rationale:* To identify the former geographic location of persons experiencing homelessness or current geographic location of persons who are at risk of homelessness.

Data Source: Interview or self-administered form.

When Data are Collected: Upon any program entry or as soon as possible thereafter.

Subjects: All adults and unaccompanied youth served.

*Definitions and Instructions:* In one field, record the five-digit zip code of the apartment, room, or house where the client last lived for 90 days or more. In another field, record the appropriate zip code type (data quality code).

Required Response Categories:

Zip Code of Last Permanent Address

*Zip Code* \_\_\_\_\_ 12345

Zip Code Type

1 = Full or Partial Zip Code Reported

8 = Don't Know

9 = Refused

*Special Issues:* HPRP and other homelessness prevention programs serving persons who are currently living in housing that they have resided in for 90 days or longer (as of the Program Entry Date) should record the zip code of the apartment, room, or house, where the client is currently living. *Changes from Previous Notice:* Zip Code Type response value 1 was changed to "Full or

Partial Zip Reported".

#### **Housing Status**

*Rationale:* To identify persons who, at program entry and program exit, are literally homeless; housed, but at imminent risk of losing their housing; housed, but at-risk of losing their housing; or in a stable housing situation. This data element allows programs that serve homeless and non-homeless persons to separate these two populations for reporting purposes. This data element is not intended to be used for program eligibility determination purposes, as program eligibility criteria may vary by program and/or funding source. This information can help homelessness prevention programs target their resources appropriately.

Data Source: Client interview or self-administered form.

When Data are Collected: Upon <u>initial program entry</u> or as soon as possible thereafter <u>and at program</u> <u>exit</u> for all programs except emergency shelters. This information may be needed prior to admission to determine program eligibility.

Subjects: All clients.

*Definitions and Instructions:* For each client, determine whether the client is: literally homeless; imminently losing their housing; unstably housed and at-risk of losing their housing; or stably housed at program entry and exit. A client must be coded to a single response category. For clients exiting a program, the Housing Status should reflect their housing status immediately after exiting the program as determined by the client's housing destination and anticipated housing stability.

Persons who are *literally homeless* include people who at program entry or program exit are in one of the following:

- Places 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;
- A supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing for homeless persons);
- A hospital or other institution, if the person was sleeping in an emergency shelter or other place not meant for human habitation (cars, parks, streets, etc.) immediately prior to entry into the hospital or institution;
- Fleeing a domestic violence situation.

Persons who are *imminently losing their housing* include people who at program entry or program exit:

- Are currently housed and not literally homeless, per above definition;
- Are imminently losing their housing, whether permanent or temporary;
- Have no subsequent housing options identified; and
- Lack the resources or support networks needed to retain current housing or obtain temporary or permanent housing.
- Examples of imminent housing loss include:
  - Being evicted from a private dwelling unit (including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations);
  - Being discharged from a hospital or other institution;

• Living in housing that has been condemned by housing officials and is no longer considered meant for human habitation;

Persons who are *unstably housed and at-risk of losing their housing* include people who at program entry or program exit:

- Are currently housed and not literally homeless or imminently losing their housing, per above definitions;
- Are experiencing housing instability, but may have one or more other temporary housing options; and
- Lack the resources or support networks to retain or obtain permanent housing.
- Housing instability may be evidenced by:
  - Frequent moves because of economic reasons;
  - Living in the home of another because of economic hardship;
  - Being evicted from a private dwelling unit (including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations);
  - Living in a hotel or motel not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations;
  - Living in severely overcrowded housing;
  - o Being discharged from a hospital or other institution; or
  - Otherwise living in housing that has characteristics associated with instability and an increased risk of homelessness.

Persons who are **stably housed** are in a stable housing situation and not at risk of losing this housing (i.e., do not meet the criteria for any of the other housing response categories, per above definitions). *Required Response Categories:* 

#### **Housing Status**

- 1 = Literally homeless
- 2 = Imminently losing their housing
- 3 = Unstably housed and at-risk of losing their housing
- 4 = Stably housed
- 8 = Don't Know
- 9 = Refused

#### **Income and Sources**

*Rationale*: Income and sources of income are important for determining service needs of people at the time of program entry, determining whether they are accessing all income sources for which they are eligible, and describing the characteristics of the homeless population. Capturing the receipt of cash income from various sources will help to: ensure all income sources are counted in the calculation of total income; enable program staff to take into account the composition of income in determining needs; determine if people are receiving the mainstream program benefits to which they may be entitled; help clients apply for benefits assistance; and allow analysis of changes in the composition of income between entry and exit from the program and annual changes prior to program exit. Income data are also needed to complete APRs for all HUD funded CoC Programs, including HPRP programs. *Data Source*: Client interview, self-administered form, and/or case manager records. *When Data Are Collected*: In the course of client assessment nearest to program entry, at program exit and at least once annually during program enrollment, if the period between program entry and exit

exceeds one year. Programs may decide when to collect the information on an annual basis, but HUD encourages programs that are required to complete an APR to update these data elements near the end of their APR operating year.

#### Subjects: All clients served.

Definition and Instructions: In separate fields, determine (a) whether the client receives any income from any source listed below in the past 30 days, (b) if the client received any earned income, the amount of income received in the past 30 days (recording the amount of income received is optional for all other income sources, although recording client's total income is still required) and (c) the client's total monthly income (rounded to the nearest U.S. dollar). Allow clients to identify multiple sources of income. As a general rule, income is assigned to a household member if the income source/amount leaves the household upon the departure of that member. The same income source and income amount should not be assigned to more than one person in the same household. For example, for a household with one adult and three children, if only the adult member of the household reports earned income then that adult's record should have a "Yes" for earned income, and the amount of earned income received over the past 30 days. The children in the household should have a "No" value for earned income. For Temporary Assistance for Needy Families, Child Support, Alimony or other spousal support income, the "Receiving Income from Source" and "Amount from Source" responses should be assigned to the adult member of the household who is issued the income payment. For Supplemental Security Income (SSI) received on behalf of a minor child, income source/amount should be assigned to the minor child. However, if it is not possible to discern which minor child the SSI benefit is intended for, the program may assign the SSI benefit to the child's parent or legal guardian.

#### Required Response Categories:

#### Income received from any source in past 30 days?

- 0 = No
- 1 = Yes
- 8 = Don't Know
- 9 = Refused

#### Source and Amount of Income

- 1 = Earned Income (i.e., employment income) \$\_\_\_\_.00
- 2 = Unemployment Insurance \$\_\_\_.00
- 3 = Supplemental Security Income (SSI) \$\_\_\_\_.00
- 4 = Social Security Disability Income (SSDI) \$\_\_\_\_.00
- 5 = Veteran's disability payment \$\_\_\_\_.00
- 6 = Private disability insurance \$\_\_\_\_.00
- 7 = Worker's compensation \$\_\_\_\_.00
- 10 = Temporary Assistance for Needy Families (TANF) (or use local program name) \$\_\_\_\_00
- 11 = General Assistance (GA) (or use local program name) \$\_\_\_\_00
- 12 = Retirement income from Social Security \$\_\_\_\_.00
- 13 = Veteran's pension \$\_\_\_\_.00
- 14 = Pension from a former job \$\_\_\_\_.00
- 15 = Child support \$\_\_\_\_.00
- 16 = Alimony or other spousal support \$\_\_\_\_.00
- 17 = Other source \$\_\_\_.00

*Special Issues*: Income should be reported at the client-level. Programs may choose to disaggregate the sources of income into more detailed categories as long as these categories can be aggregated into the above stated sources of income. Programs collecting data through client interviews should ask clients whether they receive income from each of the sources listed under "Required Response Categories" rather than asking them to state the sources of income they receive. The "Don't Know" and "Refused"

responses should only be used when clients do not know or refuse to answer whether they have any income. When a client has income, but does not know the amount, a "Yes" response should be recorded for both the overall income question and the specific source, and the income amount should be left blank.

To reduce data collection and reporting burden, if a client reports receiving no income from any source in the past 30 days, no additional data collection is required. However, since clients often know the source of income, but not the precise amount, Users should have the ability to enter "Yes" without recording an exact amount.

*Changes from Previous Notice*: Under the previous notice, collection of this information was required only at program entry and exit. Income information also is required to be collected at least once annually during program enrollment, if the period between program entry and exit exceeds one year. A general question on whether any income has been received has been added. In the 2004 notice, programs were required to collect the amount of income received in the past 30 days. Now they are required to record whether or not the client received that income source; however, aside from earned income, capturing the dollar amount is optional.

#### **Non-Cash Benefits**

*Rationale*: Non-cash benefits are important to determine whether clients are accessing all mainstream program benefits for which they may be eligible and to ascertain a more complete picture of their economic circumstances. This information is needed to complete APRs and QPRs for HUD funded CoC Programs, including HPRP programs.

Data Source: Client interview, self-administered form, and/or case manager records.

When Data Are Collected: In the course of client assessment nearest to program entry, at program exit and at least once annually during program enrollment, if the period between program entry and exit exceeds one year. Programs may decide when to collect the information on an annual basis, but HUD encourages programs that are required to complete an APR to update these data elements near the end of their APR operating year.

#### Subjects: All clients served.

*Definition and Instructions*: For each source listed below, determine if the client received any non-cash benefits in the past 30 days. Clients may identify multiple sources of noncash benefits. For households with more than one member, non-cash benefits should be assigned in HMIS to all members of the household for whom the benefit is intended. For example, if an entire family is enrolled in Medicaid, the "Non-cash benefits received from any source in the past 30 days" question would be assigned as "Yes" for all household members and the "Source of non-cash benefit: Medicaid health insurance program" would be assigned as "Yes" for all household members.

#### Required Response Categories:

#### Non-cash benefit received from any source in past 30 days?

- 0 = No
- 1 = Yes
- 8 = Don't Know
- 9 = Refused

#### Source of Non-cash Benefit Receive Benefit

- 1 = Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)
- 2 = MEDICAID health insurance program (or use local name)
- 3 = MEDICARE health insurance program (or use local name)
- 4 = State Children's Health Insurance Program (or use local name)
- 5 = Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

- 6 = Veteran's Administration (VA) Medical Services
- 7 = TANF Child Care services (or use local name)
- 10 = TANF transportation services (or use local name)
- 11 = Other TANF-funded services (or use local name)
- 12 = Section 8, public housing, or other ongoing rental assistance
- 13 = Other source
- 14 = Temporary rental assistance

*Special Issues*: Programs may choose to disaggregate the non-cash sources of income into more detailed categories as long as these categories can be aggregated into the above-stated non-cash sources of income. Programs may also choose to record additional information about non-cash sources of income, including: information related to benefit eligibility (e.g., if a person is not receiving a service, is it because they are not eligible or eligibility has not yet been determined); date of application; amount of benefits; and start and stop dates for receipt of benefits.

In order to determine whether the client received any non-cash benefits, program's collecting data through client interviews are advised to ask clients whether they receive non-cash benefits from each of the sources listed under "Required Response Categories" rather than asking whether they received any benefit and to state the sources of income they receive. To reduce data collection and reporting burden, if a client reports receiving no non-cash benefit from any source in the past 30 days, no additional data collection is required. If a client reports receiving non-cash benefits, an HMIS may be designed such that programs only need to directly enter "Yes" for the benefits the clients received. The HMIS software may automatically generate a "No" response for the other non-cash benefit sources. *Changes from Previous Notice*: Under the previous notice, collection of this information was required only at program entry and program exit. Non-cash benefits information also is now required to be collected at least once annually during program enrollment, if the period between program entry and exit exceeds one year.

Then, Click Save. Go back towards the top of the page, and click on the next household member. Continue this process for all clients.

	Source of Non-Cash Benefit	Start Date *	End	Date		
1	MEDICAID (HUD)	11/17/2009	05/0	1/2012		
1	Supplemental Nutrition Assistance Program (Food Stamps) (HVD)	11/17/2009				
1	TANF Child Care Services (HUD)	09/17/2009				
1	Supplemental Nutrition Assistance Program (Food Stamps) (HVD)	09/17/2009				
Add Showing 1-4 of 4						
			Save	Save & Exit	Exit	

Then click the Assessment that says Confidential Data. The following questions must be answered.

Entry Assessment	
Select an Assessment	
HUD-40118	al Confidential

#### **Domestic Violence**

*Rationale*: Ascertaining whether a person is a victim of domestic violence is necessary to provide the person with the appropriate services to prevent further abuse and to treat the physical and psychological injuries from prior abuse. Also, ascertaining that a person may be experiencing domestic violence may be important for the safety of program staff and other clients. At the aggregate level, knowing the size of the homeless population that has experienced domestic violence is critical for determining the resources needed to address the problem in this population. Needed to complete APRs for HUD-funded homeless assistance programs (excluding HPRP).

*Data Source*: Client interview, self-administered form and/or case manager records.

When Data are Collected: In the course of client assessment.

*Subjects*: All adults and unaccompanied youth served.

*Definition and Instructions*: In separate fields, determine (a) if the person has ever been a victim of domestic violence, and (b), if so, how long ago did the person have the most recent experience. *Required Response Categories:* 

#### Domestic violence victim/survivor

- 0 = No
- 1 = Yes
- 8 = Don't Know
- 9 = Refused

#### (If yes) When experience occurred

- 1 = Within the past three months
- 2 = Three to six months ago
- 3 = From six to twelve months ago
- 4 = More than a year ago
- 8 = Don't Know
- 9 = Refused

*Special Issues*: Programs should be especially sensitive to the collection of domestic violence information from clients and should implement appropriate interview protocols to protect client privacy and safety such as: asking this question in a private location and not in the presence of a romantic partner; delaying all entry of data about clients identified with a recent history of domestic violence; or choosing not to disclose data about clients with a history of domestic violence to other homeless programs. *Changes from Previous Notice*: Response categories for "Don't Know" and "Refused" were also added to capture information when the client does not know or the client refuses to respond and to ensure consistency in data quality reporting.

#### Disability

*Rationale*: Needed to complete APRs for HUD-funded homeless assistance programs (excluding HPRP). *Data Source*: Client interview, self-administered form and/or case manager records.

When Data are Collected: In the course of client assessment once the individual is admitted—unless this information is needed prior to admission to determine program eligibility—at program exit, and at least once annually during program enrollment if the period between program entry and exit exceeds one year. Programs may decide when to collect the information on an annual basis, but HUD encourages programs that are required to complete an APR to update these data elements near the end of their APR operating year.

Subjects: All clients served.

Required Response Categories:

#### Disability

- 0 = Alcohol Abuse
- 1 = Substance Abuse
- 2 = Both Alcohol and Substance Abuse
- 3 = Developmental
- 4 = HIV/AIDS
- 5 = Physical
- 6 = Mental Health Condition
- 7 = Physical/Medical

Be sure to Save after each assessment. When the last client has been entered, click Save & Exit.

		Source of Non-Cash Benefit	Start Date *		End Date
*	0	MEDICAID (HUD)	11/17/2009		05/01/2012
*	1	Supplemental Nutrition Assistance Program (Food Stamps) (HVD)	11/17/2009		
*	0	TANF Child Care Services (HUD)	09/17/2009		
*	3	Supplemental Nutrition Assistance Program (Food Stamps) (HVD)	09/17/2009		
	Add	1	Showi	ng 1-4 of 4	
					Save Save & Exit Exi

All other tabs are optional and require additional training upon request.

# Editing a client record

Search for the client in ClientPoint or use the client's ID, if known.

To edit the Name, SSN, SSN Data Quality, click the Pencil next to Client Record on the Profile Page. When finished, click Save.

Client Info	lient Information					Service Transactions				
Summa	ry Client	Profile	Households	ROI	Entry / Exit	Case Managers	Case Plans	SSOM	Activities	Assessments
2	client Record							Issue ID (	Card	
Na	me	Client, F	ake							
Alia	as									
So	cial Security	123-45-	6789							
SS	iN Data Quality	Full SSN	I Reported (HUD)							
Ag	je	53							Ch	ange Clear
-	Client Demogr e of Birth		01/1959							
Dat	e of Birth Type									
Gen	nder	Female								
Prin	nary Race	American Indian or Alaska Native (HUD)								
Sec any	condary Race (i ?)	f								
Eth	nicity	Nor	n-Hispanic/Non-La	tino (HUD)						

Click on Entry/Exit, then click on the Pencil next to the Entry Date. This will open the client's demographic information. Here the User will be able to edit any other demographic data that they need to. When the User is finished, click Save & Exit.

ClientPo	ClientPoint > Client Profile					Type here for Global Search			
Client - (	92) Client, Fak	ke							ില
	nformation: Ends 07	7/01/2015					-Switch to Ano	ther Household Membe	r- 💌 Submit
Summary	client Profile	Households	ROI	Entry / Exit	Service Transac	tions Case Plans	SSOM	Activities	Assessments
		(1) Reminder:	Household membe	rs must be establi	shed on Households	tab before cr	reating Entry / I	Exits	
Entry / Program					Туре	E	ntry Date	Exit Date	Client Count
The Plan Add Entr	ning Council (1) y / Exit				HUD Showing		7/01/2012	2	<b>1</b>
									Exit

## Exiting a client

Search for the client in ClientPoint or use the client's ID, if known.

Click on Entry/Exit, then click on the Pencil next to the Exit Date.

📔 ClientPoint > Clien	t Profile				j	Type here for Globa	I Search	<b>─</b> ★?			
Client - (92) Client, F	ake							ſ			
蘭 (92) Client, Fake Release of Information: Ends	07/01/2015				-Sw	vitch to Another	Household Member	- 💌 Submit			
Client Information	Client Information					Service Transactions					
Summary Client Profile	e Households	ROI	Entry / Exit	Case Managers	Case Plans	SSOM	Activities	Assessments			
	() Reminder:	Household membe	ers must be establi:	shed on Households	tab before creat	ing Entry / Exits					
Entry / Exit											
Program				Туре	Entry	y Date	Exit Date	Client Count			
The Planning Council (1)				HUD	07/0:	1/2012	2	<b>a</b>			
Add Entry / Exit				Showing	1-1 of 1	_					
								Exit			

This will open the exit information screen. Click the check box for all the clients exiting. Enter the Exit Date. This is the day that the client has exited from all assistance through this program. Answer the following 2 questions. The specifics about the questions are as follows. Then click Save & Continue.

Edit Exit Data - (92)	) Client, Fake	×
Household Memb	ers	
i (7544) Female Si (11799) client, fr (92) Client, Fake (17560) Client, f Edit Exit Data - (9	ake1 ! !akeyest	
Exit Date *	08 /09 /2012 🛛 💐 3 💌 : 35 💌 : 57 💌 PM 💌	_
Reason for Leaving	-Select-	
If "Other", Specify		
Destination *	-Select-	*
If "Other", Specify		
Notes		
	Save & Continue Can	cel

#### **Reason for Leaving**

*Rationale:* Reason for leaving is used, in part, to identify the barriers and issues clients face in completing a program or staying in a residential facility, which may affect their ability to achieve economic self-sufficiency.

Data Source: Client interview, self-administered form or case manager records.

When Data Are Collected: At program exit.

Subjects: All clients served.

*Definition and Instructions:* Identify the reason why the client left the program. If a client left for multiple reasons, record only the primary reason.

Required Response Categories:

#### Reason for leaving

- 1 = Left for a housing opportunity before completing program
- 2 = Completed program
- 3 = Non-payment of rent/occupancy charge
- 4 = Non-compliance with program
- 5 = Criminal activity/destruction of property/violence
- 6 = Reached maximum time allowed by program
- 7 = Needs could not be met by program
- 8 = Disagreement with rules/persons

9 = Death

10 = Unknown/disappeared

11 = Other

#### Destination

*Rationale*: Destination is an important outcome measure needed to complete APRs and QPRs for all HUD funded CoC Programs, including HPRP programs.

Data Source: Client interview or self-administered form.

When Data Are Collected: At program exit.

Subjects: All clients served.

*Definition and Instructions*: Determine the response value that best describes where the client will be staying after they leave the program. For clients who will be staying with family or friends, select the response that includes the expected tenure of the destination (permanent or temporary). For rental by client and owned by client, select the response that includes the type of housing subsidy, if any, the client will be receiving. A housing subsidy may be tenant-, project- or sponsor-based and provides ongoing assistance to reduce rent burden. This includes either a housing subsidy provided through the Veterans Affairs Supportive Housing (VASH) program or other housing subsidy. Other housing subsidies may include a HUD-funded subsidy (e.g., public housing, Housing Choice Voucher or "Section 8") or other housing subsidy (e.g., state rental assistance voucher).

Required Response Categories:

#### **Destination Type**

1 = Emergency shelter, including hotel or motel paid for with emergency shelter voucher\*

- 2 = Transitional housing for homeless persons (including homeless youth)\*
- 3 = Permanent supportive housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)
- 4 = Psychiatric hospital or other psychiatric facility
- 5 = Substance abuse treatment facility or detox center
- 6 = Hospital (non-psychiatric)

- 7 = Jail, prison or juvenile detention facility
- 10 = Rental by client, no ongoing housing subsidy
- 11 = Owned by client, no ongoing housing subsidy
- 12 = Staying or living with family, temporary tenure (e.g., room, apartment or house)
- 13 = Staying or living with friends, temporary tenure (.e.g., room apartment or house;)
- 14 = Hotel or motel paid for without emergency shelter voucher
- 15 = Foster care home or foster care group home
- 16 = Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)
- 17 = Other
- 18 = Safe Haven
- 19 = Rental by client, VASH Subsidy
- 20 = Rental by client, other (non-VASH) ongoing housing subsidy
- 21 = Owned by client, with ongoing housing subsidy:
- 22 = Staying or living with family, permanent tenure
- 23 = Staying or living with friends, permanent tenure
- 24 = Deceased
- 8 = Don't Know
- 9 = Refused

*Special Issues:* For response categories marked with an asterisk (\*), these destinations are currently not permissible destinations for HOPWA-funded programs that provide short-term payments to prevent homelessness.

*Changes from Previous Notice*: There are a number of changes to the response categories. At the request of the Department of Veterans Affairs, programs are now asked to track subsidies provided through the Veterans Affairs Supportive Housing (VASH) program as a separate destination type. Tenure and housing subsidy type information have been incorporated into the destination field, and non-VASH housing subsidy types have been combined. The term "Transitional" has been changed to "Temporary." Accordingly, response categories 10 and 11 have been revised to refer specifically to destinations where no housing subsidy exists. Response categories 12 and 13 have been revised to refer specifically to destinations that include ongoing subsidies. New response values 22 and 23 refer to destinations with permanent tenure. Finally, two other new response categories were added: "Safe Haven" and "Deceased."

After the User has clicked Save & Continue, please remember to update Housing Status, Income, Non-Cash Benefits and Disabilities (located in Confidential).

# Appendix

#### **Common Mistakes**

- Dates! The user must make sure that dates are correct before saving data. Date of Birth should be the client's date of birth, not the current date or date entering the program (or service). Also, the date set for the Entry Date should be accurate, based on when the client entered the program. There will be errors if the date has to be changed. Data may have to be re-entered if the Entry Date is changed.
- Secondary Race <u>ONLY</u> has to be answered if the client is of mixed race. Do not put in a Secondary Race that is the same as Primary Race.
- For children, the only questions that have to be answered are the questions in BOLD. All plain text questions are for adults. Adults are defined as any person over 18 years of age.
- SSN Data Quality, Zip Code Data Quality, and Date of Birth Data Quality questions are extremely important when the data elements they are concerning are left blank. Answering these questions ensures that those blanks are not counted as Nulls, or missing values. The answers should be either, Don't Know, or Refused.
- Income, Non-Cash Benefits, and Housing Status must be updated upon exit.
- Income and Non-Cash Benefits need to be updated annually for permanent housing and permanent supportive housing programs.