Fresno Madera Continuum of Care

Homelessness Management Information System
Coordinated Entry System
Data Entry Manual

October 2023

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Fresno Madera Coordinated Entry System (CES)
Homeless Management Information System (HMIS) Introduction

Individuals must complete the Coordinated Entry series training prior to having access to enter data into HMIS for the Coordinated Entry Project. Coordinated Entry training series consist of CES Overview, Access, Navigation/Matching, CES Access and Navigation/Matching Data Entry. HMIS users may gain permission to the CES project as an Access Site, Assessor, Navigation, and view only. You should discuss with your agency and the Community Coordinator how your role fits into Coordinated Entry. The Community Coordinator will provide the names of staff who need access to the Coordinated Entry project in HMIS. This data entry manual will provide all data entry steps for the full Coordinated Entry process from Access (initial entry) to Match referral.

Access staff and staff with the role of an Assessor and/or Navigator must comply with the following:

- Data entry from Access Sites needs to be completed in real time or as close to real time as possible (no later than 24 hours).
- Data from Assessors and Navigators will be entered into HMIS within 72 hours from data collection.
- Confidentiality of all clients must be maintained.
- All screenings must be completed with minimal missing data. The acceptable range for all clients with Null/Missing data is 0% and Don’t Know/Refused will be no higher than 5%.
- HMIS staff will work in partnership with the Coordinated Entry Management Entity to maintain high quality data and offer support to staff when errors are made. If ongoing errors are made, HMIS staff will exercise discretion and remove staff from the Coordinated Entry project, if necessary, to maintain the quality and integrity of the Coordinated Entry System on behalf of households facing housing instabilities.

Workflow Manual Key

Red circles/ovals/squares – areas you will need to click.

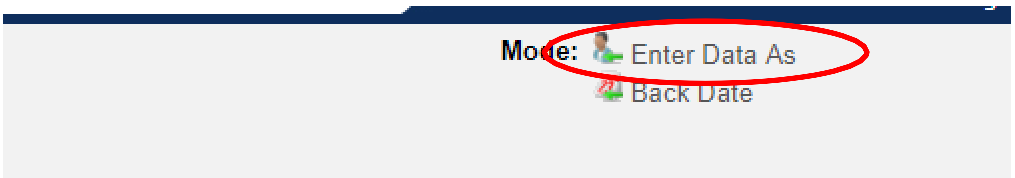
Purple rectangles/squares – areas that you should pay attention to/review.

Prior to collecting information from a client, you should ALWAYS check HMIS to see if the client currently has an active record in HMIS. A client’s active record may prevent you from gathering duplicate record or seeing if the client is currently receiving services from another provider.

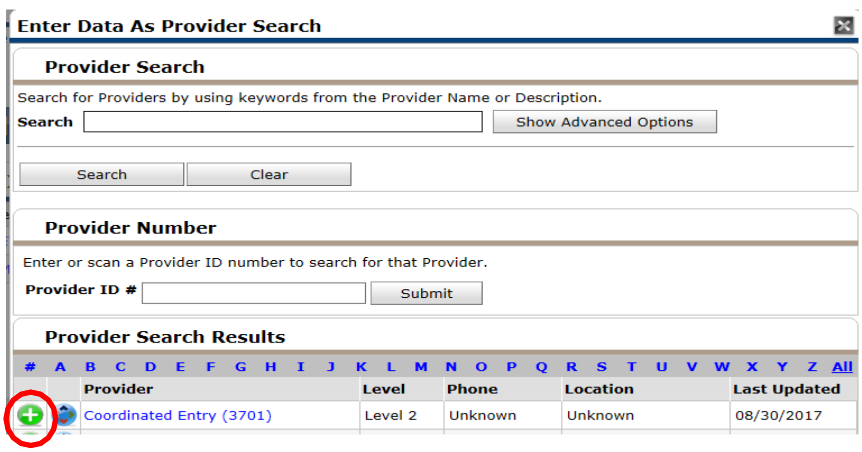
ACCESS SITE DATA ENTRY WORKFLOW

Step 1: Use Enter Data As (EDA)* mode to select provider **Coordinated Entry (3701)**

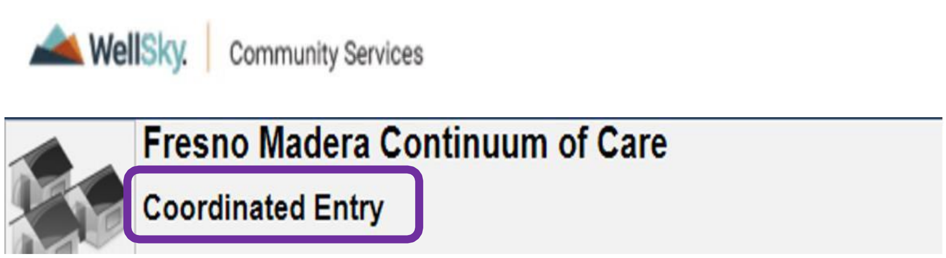
A. Click Enter Data As on the top right of the HMIS Homepage, Using EDA mode will ensure that the client's information is visible to Access Sites, Assessors, Community Coordinator, Navigators, and Matcher. If you do not use the EDA mode, the data will not be visible, and the client assistance will be delayed.



B. Click the icon next to the provider Coordinated Entry (3701)



- *Note: If your default provider is Coordinated Entry, you can skip STEP 1. The upper left-hand corner of your HMIS screen will show your default provider. The screenshot below shows an example of Coordinated Entry as the default provider.*



Step 2: Create a client record into the Coordinated Entry Project.

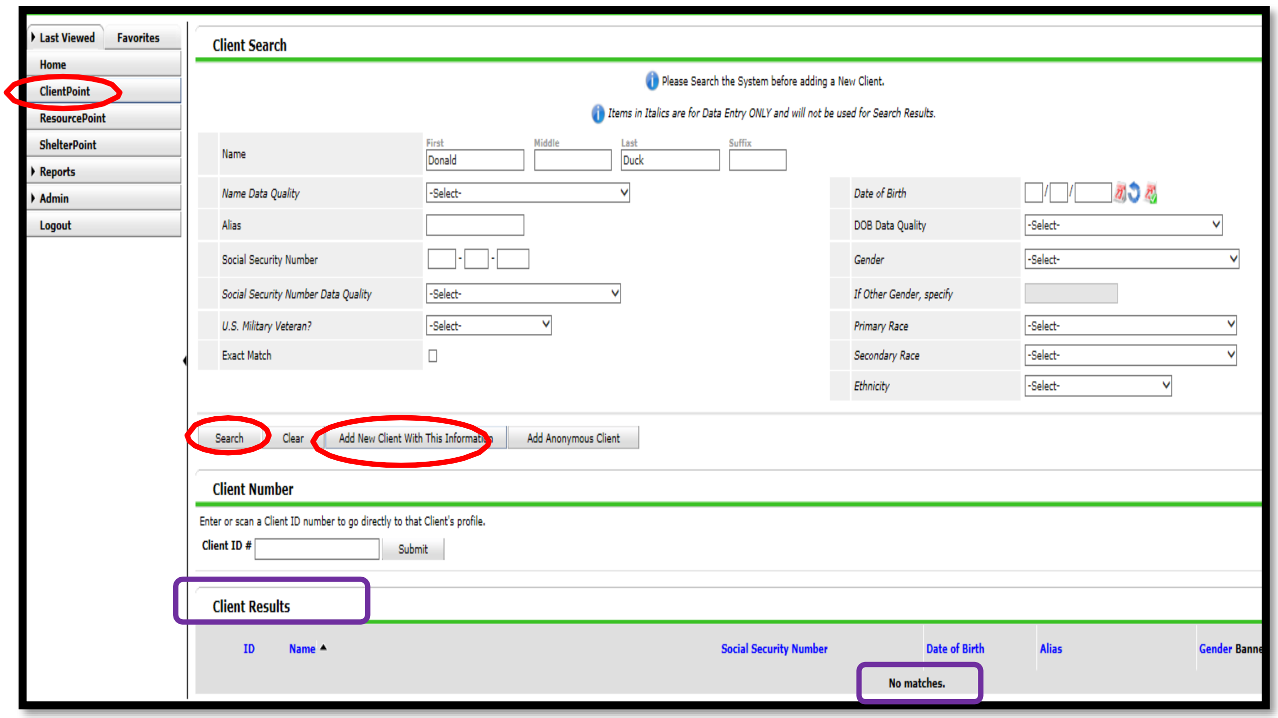
Email Fresno Housing Authority when a duplicate client record is identified (hmissupport@fresnohousing.org).

A. Click on ClientPoint. Enter the first and last name of the person and click Search

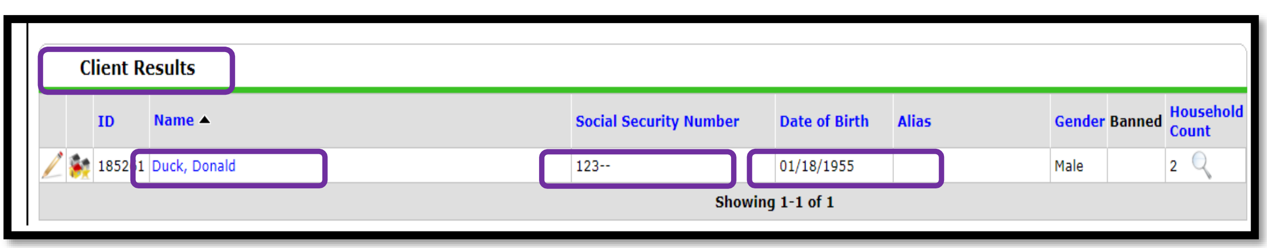
   a. If your client does not appear in Client Results, then enter the follow information in Client Search

      i. Name Data Quality
      ii. Social Security Number and Social Security Number Data Quality
      iii. U.S. Military Veteran
      iv. Date of Birth and DOB Data Quality
      v. Gender
      vi. Primary Race and Ethnicity

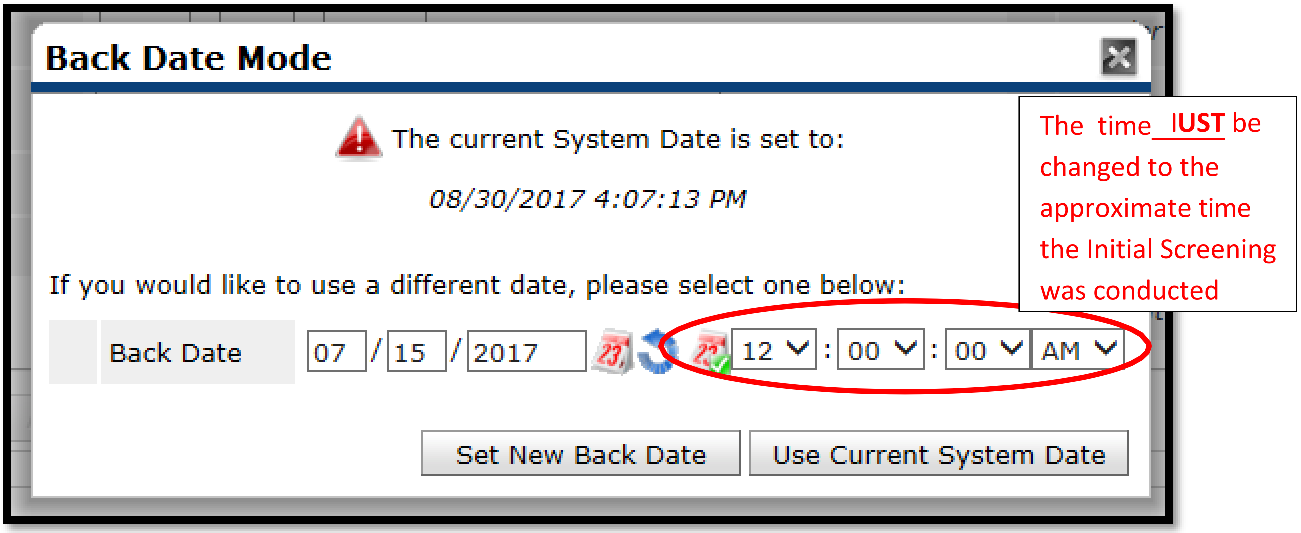
Then click on **Add New Client With This Information**



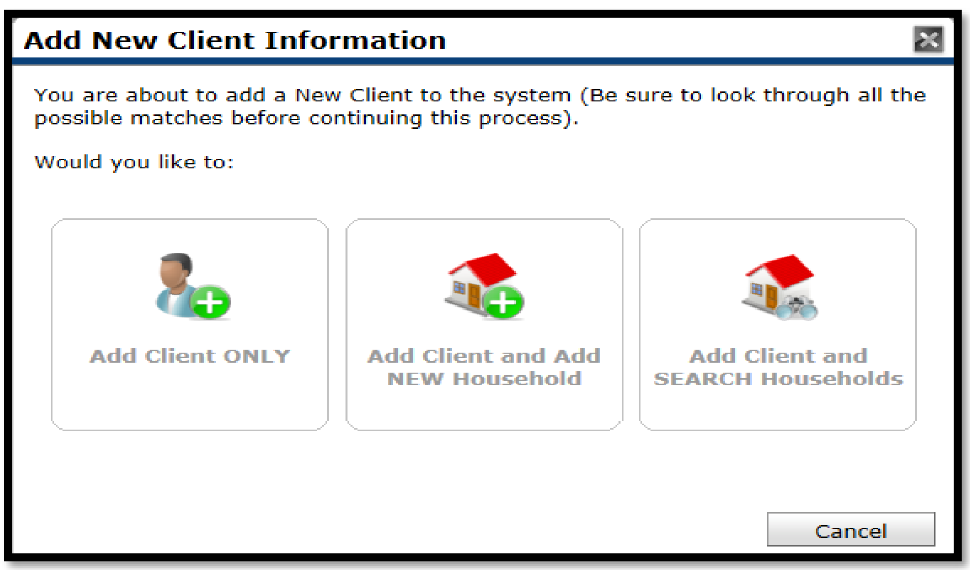
   b. If a client name appears under Client Results, you **<u>MUST</u>** ensure that the spelling of the name, the SSN, and Date of Birth are an EXACT match to the client you are serving. If it is an exact match then you may click on the name to add the coordinated entry data. If the information in HMIS DOES NOT match, then you must enter the client as a New Client.



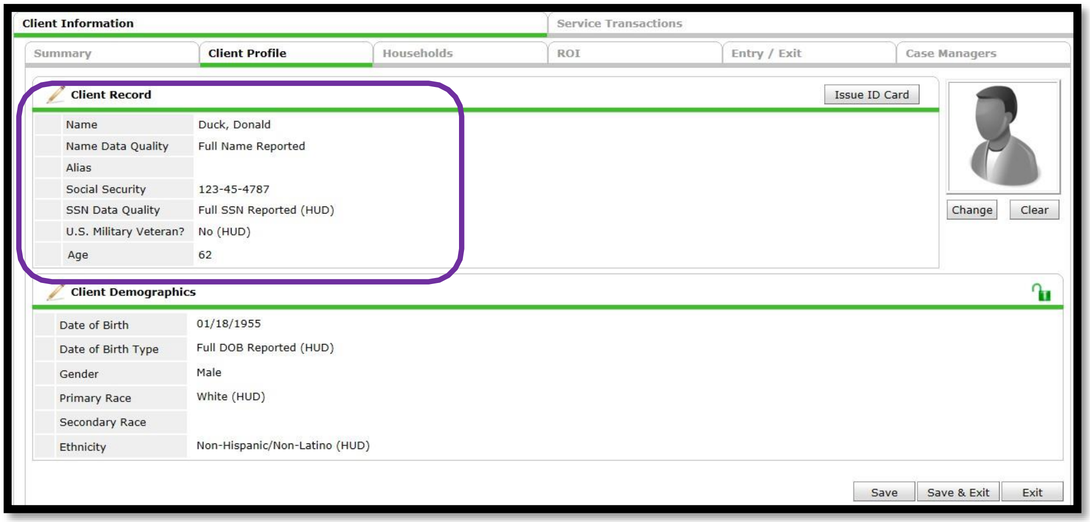
B. You will receive a pop box asking if you would like to enter Back Date Mode. Change the time to the approximate time you met with the client.



C. After you Click Set New Back Date, you will receive another pop-up box asking if you would like to add the client only, add the client and add new household, or add client and search households. For single clients, click Add Client Only.

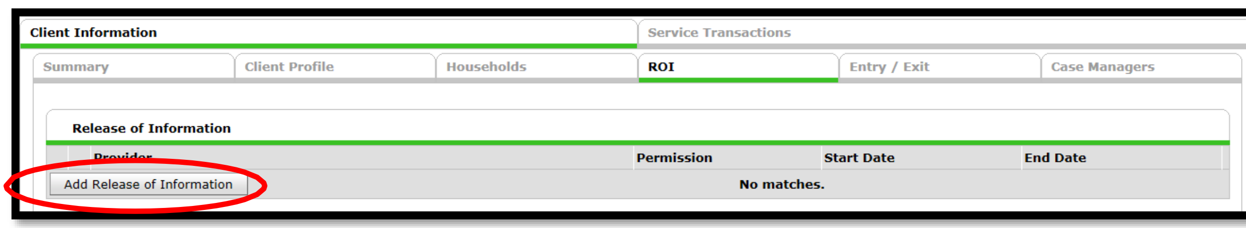


D. You will then be taken to the Client Profile tab, ensure that the information in Client Record and Client Demographics is accurate and complete.

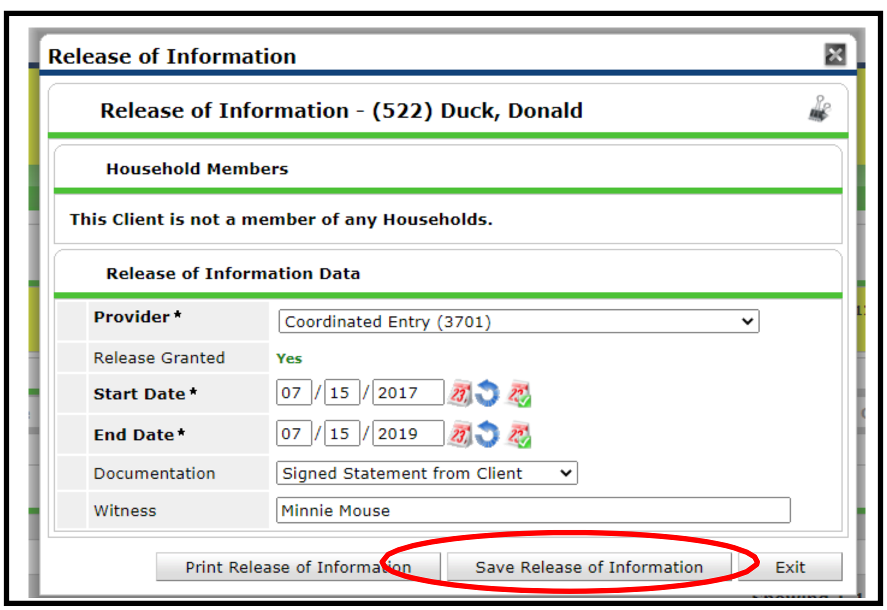


Step 3: Enter and upload ALL consent forms.

A. Click on the ROI Tab, Click on Add Release of Information (ROI)

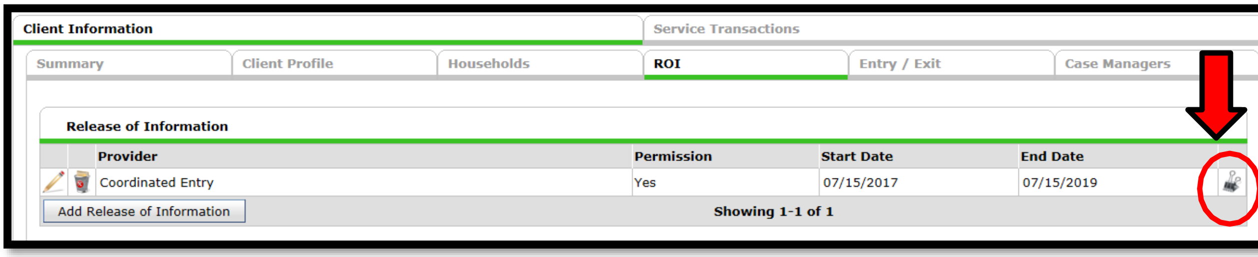


B. Complete the Release of Information pop-up box. Complete Release Granted drop down, and End Date which will be 2 years from the start date. Enter name of the person who completed the client informed consent & release of information authorization (HMIS) and the authorization to use or disclose personal identifiable information (FMCoC) in the Witness box.

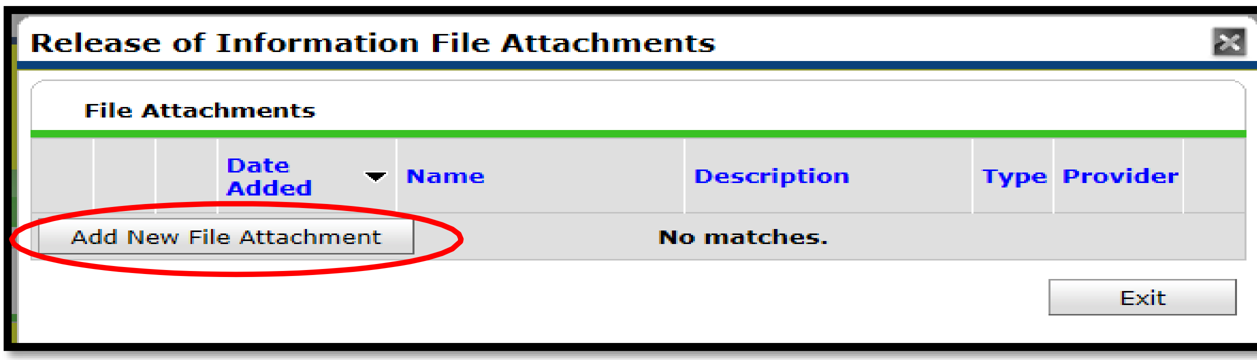


C. Click Save Release of Information.

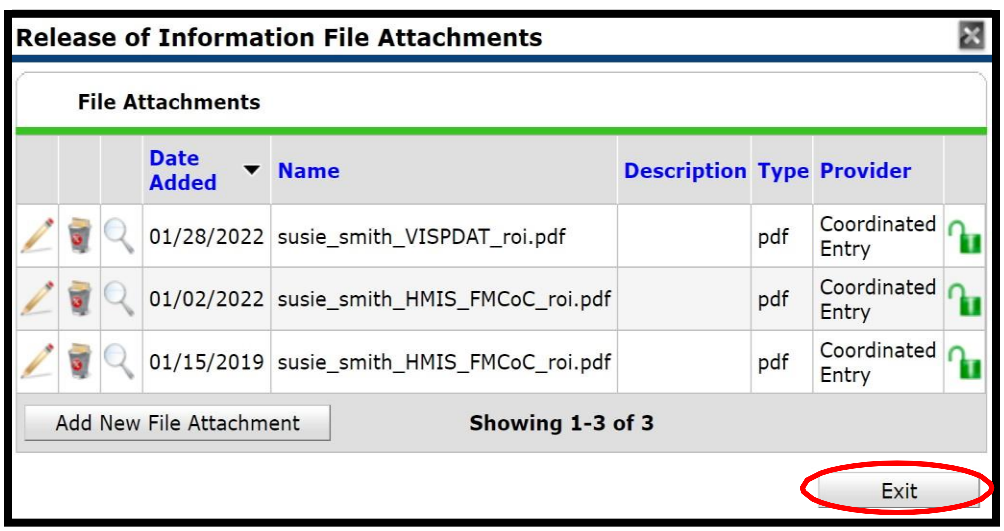
D. Attach consent forms by clicking on the binder clip  at the end of the row.



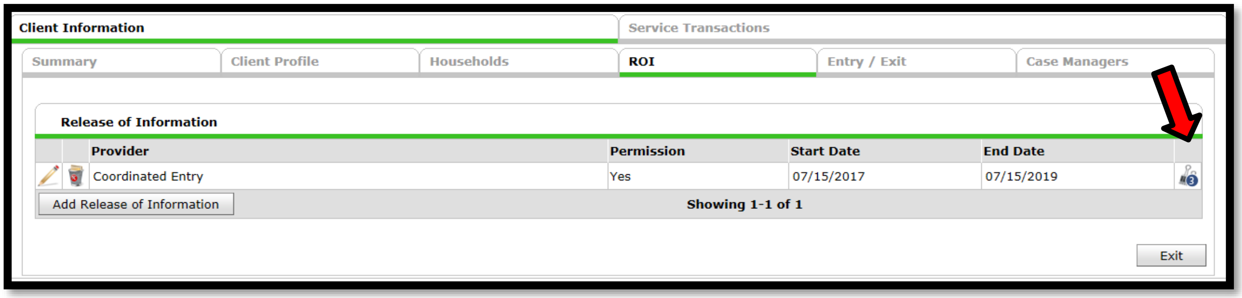
E. The Release of Information File Attachments box will pop-up, click on Add New File Attachment. You will receive another pop-up box, to upload the files, click on browse to find the documents from your desktop.



F. Upload all forms that the client signed. Click Exit.



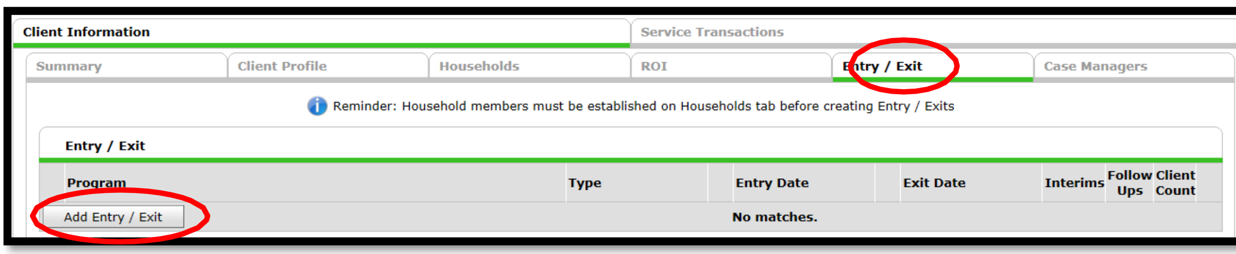
G. You will return to the Release of Information tab. On top of the binder clip you will see a number which will denote how many files have been attached. After you have completed this, DO NOT CLICK EXIT, in case you missed that, **DO NOT CLICK EXIT.**



ONCE THE HMIS ROI AND FMCoC ROI FOR COORDINATED ENTRY IS ENTERED INTO HMIS BY THE ACCESS SITE STAFF, BOTH ROIS WILL NOT NEED TO BE COMPLETED AGAIN BY THE ASSESSOR OR NAVIGATOR AS LONG AS THE ROI IS NOT EXPIRED**

Step 4: Enter Client Data

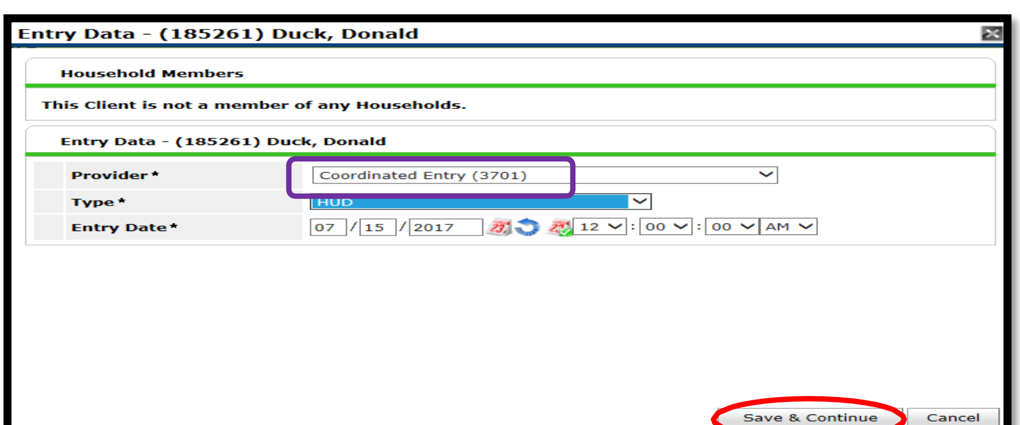
A. Click the Entry/Exit tab, then click Add Entry/Exit



B. The Entry Data box will appear, ensure that the Provider appears as Coordinated Entry, and select HUD from the **Type*** drop down box. Be sure you back date (if not already in back date mode), to the approximate time and date you completed the initial screening with the client. Click Save & Continue to view the screening questions.

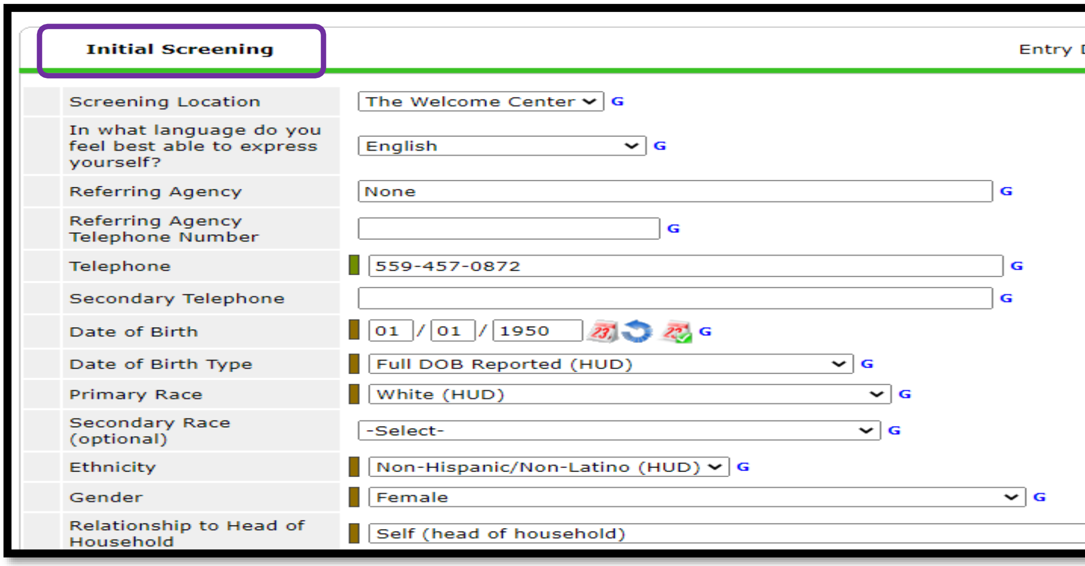
C. Make sure if you are working with a household that all household members are selected by having each of their names checked off at the top of the box. If you are working with a single individual, no checkbox will appear (see section on how to add household if applicable).

D. Make sure to add required information for child (if any).

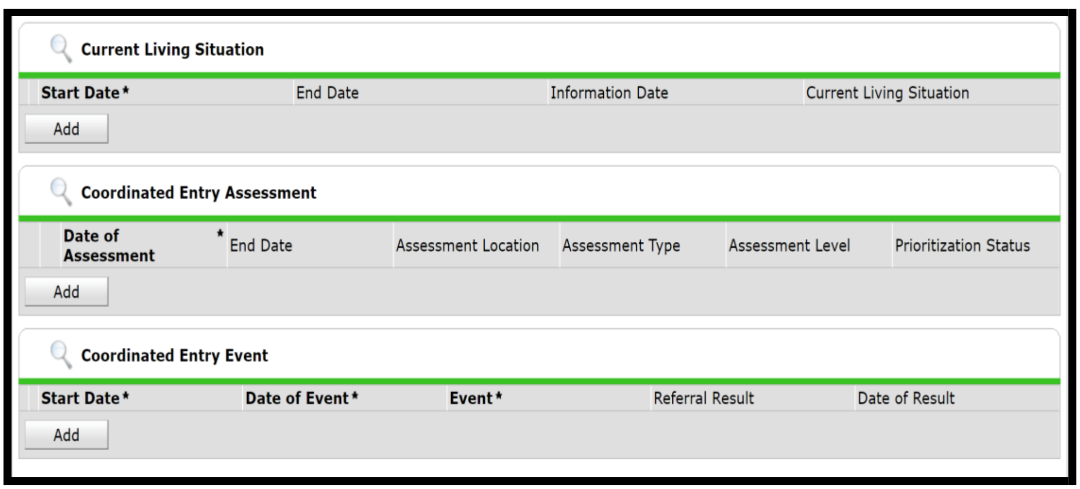


Note: if you do not choose HUD from the Type dropdown box, you will not see the screening questions*

E. Finish filling in the questions from the Initial Screening to include location to find



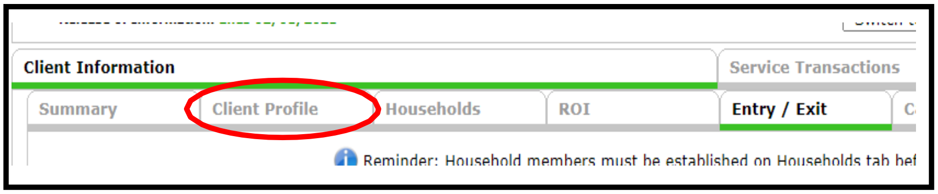
F. Coordinated Entry Data Elements must be completed during the initial screening and for every interim. **Use Coordinated Entry key for guidance.**



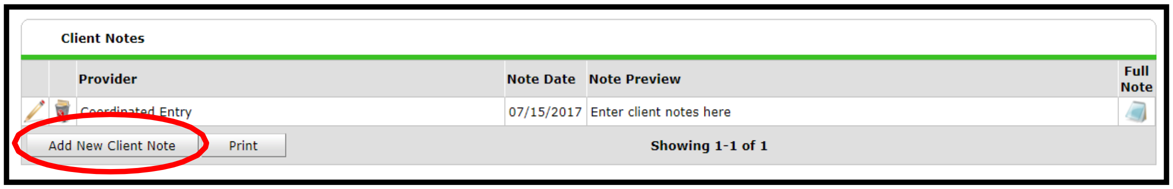
G. After all data has been completed click Save & Exit

STEP 5: Enter Client Notes and Location

A. Client notes can be found by clicking on the Client Profile tab.

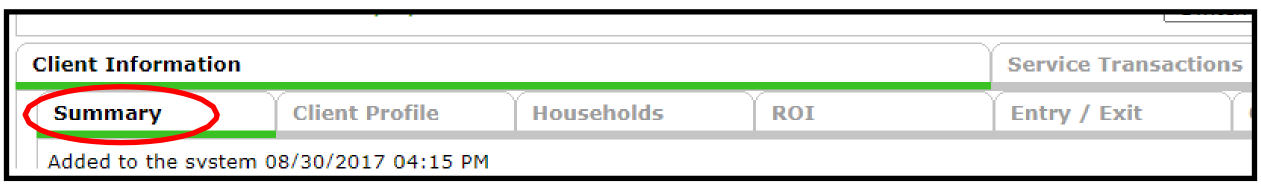


B. Scroll down the screen until you come to the Client Notes section. Click Add New Client Note. This section can be used throughout the Coordinated Entry process to enter access site notes on a client. *Once a client is assigned to a Navigator, the Navigator should utilize Notes in the Case Plan tab.

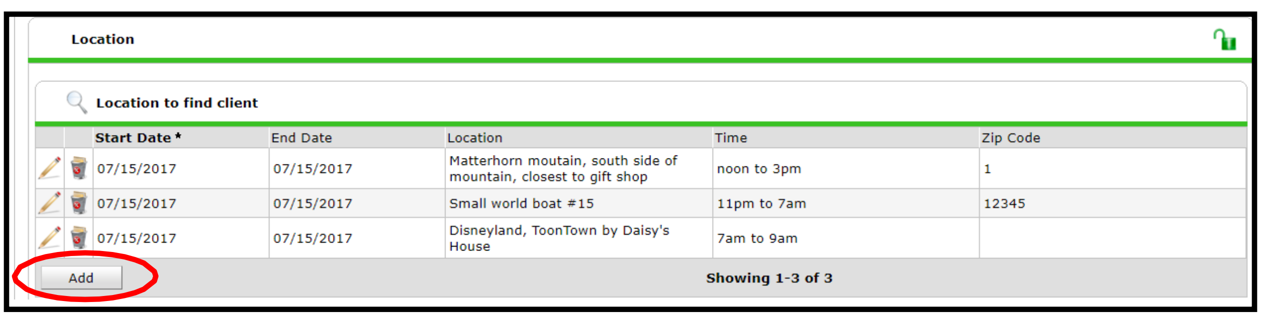


STEP 6: Update Location to find client (as needed)

A. Location to find client can be found during entry into the HMIS coordinated entry project (initial screening) or by clicking the Summary tab (images below).



B. Scroll down the screen until you come to the Location section. Click Add to enter or update the location to find client. *Location information is important especially for clients who are staying on the streets, this information can assist street outreach staff and staff providing navigation.*

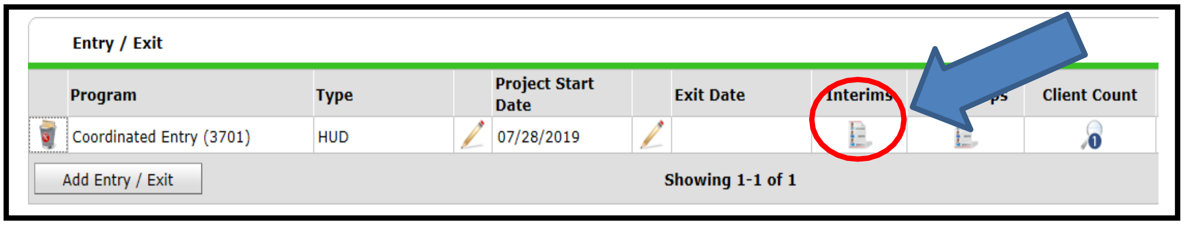


INTERIMS

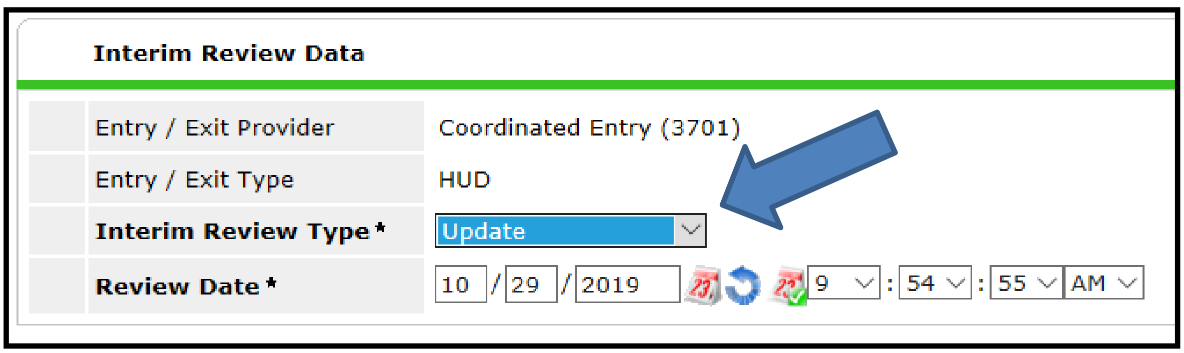
Interims (CES Update) must be completed until date of housing/Coordinated Entry exit date.

If after the Client Search it is determined the client already has a record in HMIS, an open Coordinated Entry project has been started, and no exit date is entered, follow this workflow:

Step 1: In the Entry/Exit tab, locate the Coordinated Entry project line. You WILL NOT be editing the Project Start Date. Rather you will need to click on the INTERIMS logo.



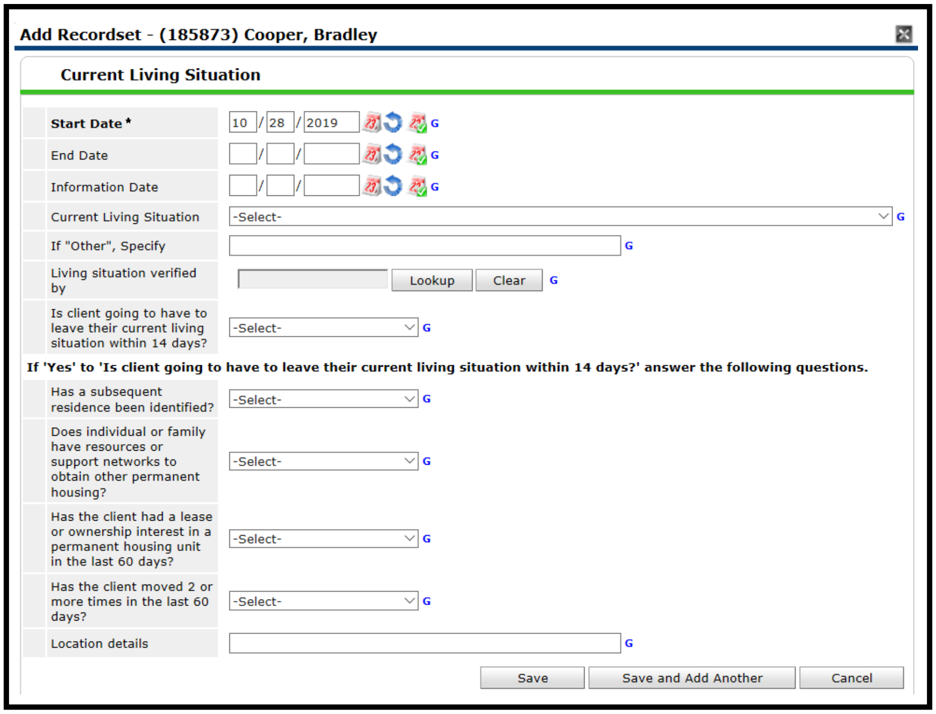
A. You will need to click on Add Interim Review. On the following page select "Update" as the Interim Review Type.



B. On the following page, make sure you click on the CES Update, since you may be defaulted to another assessment. It is crucial that you click on the CES Update.

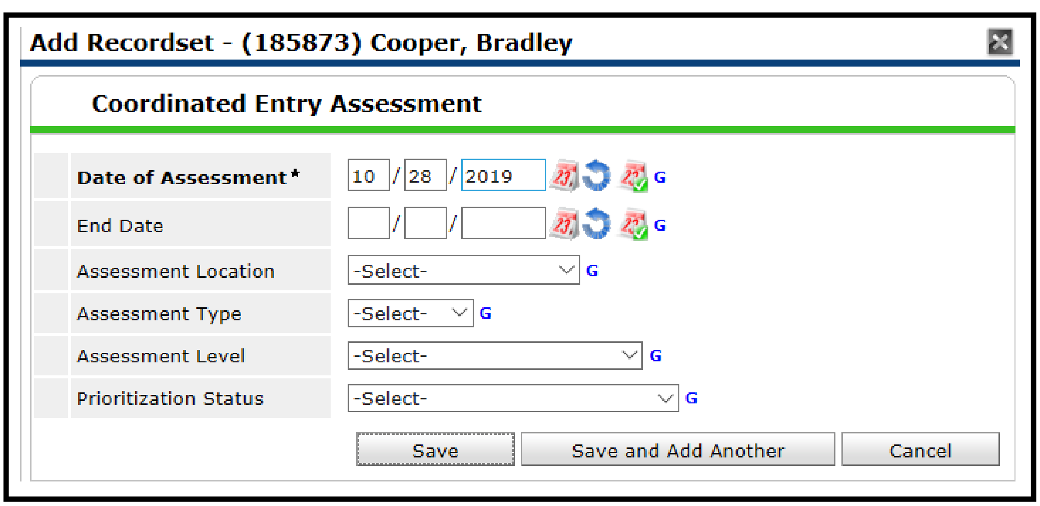
Step 2: Enter all questions on the Initial Screening accordingly.

A. Complete the Current Living Situation sub-assessment box.



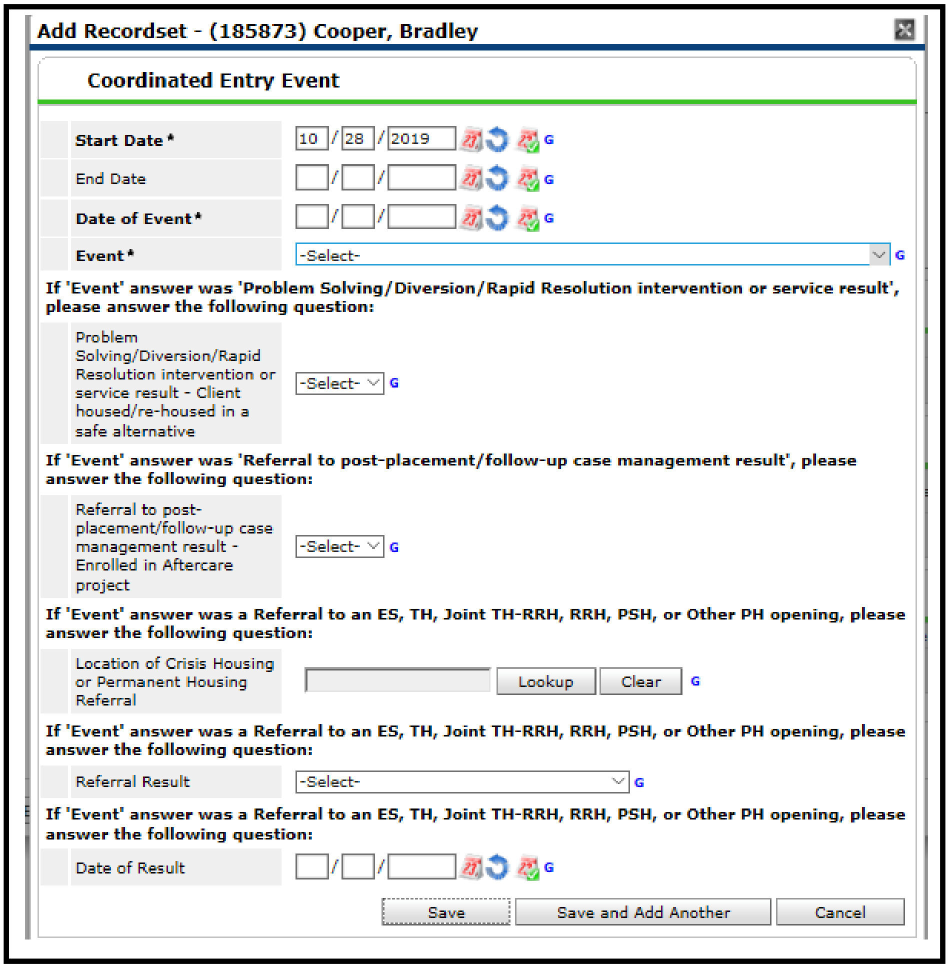
- In the Current Living Situation box make sure you are reading all questions to see if they apply to the client's living situation. The Current Living Situation questions are regarding where the client has been living. Enter the same date for Start, End, and Information.
- You will need to document a Current Living Situation from the dropdown selection options. The list breaks down the living situations into homeless situations, institutional situations, and temporary and permanent housing situations.
- If a client's current living situation is in a non-homeless situation, record the additional housing information to help determine if the client is in imminent or at-risk of homelessness, based on HUD's definition of homelessness.
- A Current Living Situation must be recorded anytime a client is met, including when a Coordinated Entry Assessment or Coordinated Entry Event is recorded on the same day.

B. Complete the Coordinated Entry Assessment box.
(**Utilize the Coordinated Entry Elements Key**)



- The Coordinated Entry Assessment box is designed to help standardize data collection on core components of a Coordinated Entry System like access, assessment, referral, and prioritization. Enter the same date for Start and End.
- In this sub-assessment box, you are reiterating the date of meeting with the client, the location of where the client presented, select the client presented in-person, identify the assessment level (Crisis Needs or Housing Needs), and lastly select if the client was placed on a prioritization list (By Name list).

C. Complete the Coordinated Entry Event sub-assessment box.



Add Recordset - (185873) Cooper, Bradley

Coordinated Entry Event

Start Date*	10 / 28 / 2019 G
End Date	/ / G
Date of Event*	/ / G
Event*	-Select- G

If 'Event' answer was 'Problem Solving/Diversion/Rapid Resolution intervention or service result', please answer the following question:

Problem Solving/Diversion/Rapid Resolution intervention or service result - Client housed/re-housed in a safe alternative	-Select- G

If 'Event' answer was 'Referral to post-placement/follow-up case management result', please answer the following question:

Referral to post-placement/follow-up case management result - Enrolled in Aftercare project	-Select- G

If 'Event' answer was a Referral to an ES, TH, Joint TH-RRH, RRH, PSH, or Other PH opening, please answer the following question:

Location of Crisis Housing or Permanent Housing Referral	Lookup Clear G

If 'Event' answer was a Referral to an ES, TH, Joint TH-RRH, RRH, PSH, or Other PH opening, please answer the following question:

Referral Result	-Select- G

If 'Event' answer was a Referral to an ES, TH, Joint TH-RRH, RRH, PSH, or Other PH opening, please answer the following question:

Date of Result	/ / G

Save | Save and Add Another | Cancel

A. The Coordinated Entry Event box is designed to capture key referral and placement events, as well as the results of those events.

B. In this sub-assessment box, make sure you become familiar with the questions, as depending on the Event selection, follow up questions would be required.

Step 3: Anytime you meet with the client after the initial meeting date you will need to document a Current Living Situation and document if there were any additional Coordinated Entry Assessments or Coordinated Entry Events that occur hereafter. Documenting additional contacts with the client will need to be entered via an Interim Review of an Update. In the Update you would need to select **Initial Screening Update** and add the Current Living Situation, and if needed the Coordinated Entry Assessment and the Coordinated Entry Event.

NAVIGATION DATA ENTRY

GUIDE Key -

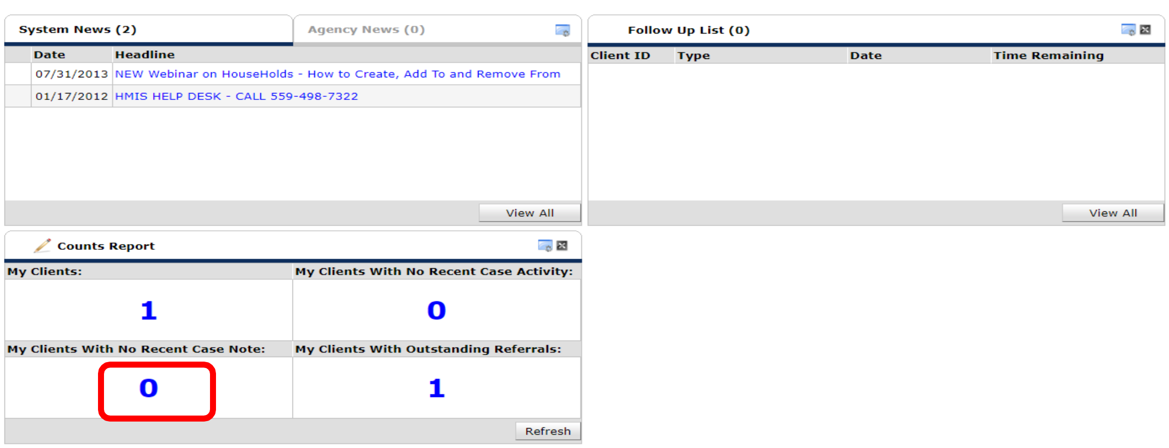
Red outline indicates the area where you need to click.

Blue outline indicates an observation area.

WORKFLOW

1. Log into HMIS.
2. You may or may not have to utilize the **ENTER DATA AS** tab located in the upper right hand corner. Check the Project name in the upper left hand corner;
    a. If the project name displayed **DOES NOT STATE COORDINATED ENTRY, YOU WILL NEED TO CLICK ENTER DATA AS**:

3. HOME PAGE DASHBOARD – Clients will be assigned to you by the Community Coordinator. The clients that you navigate will appear in the Counts Report in the **My Clients** section. Click on the number under my clients to see your list of clients

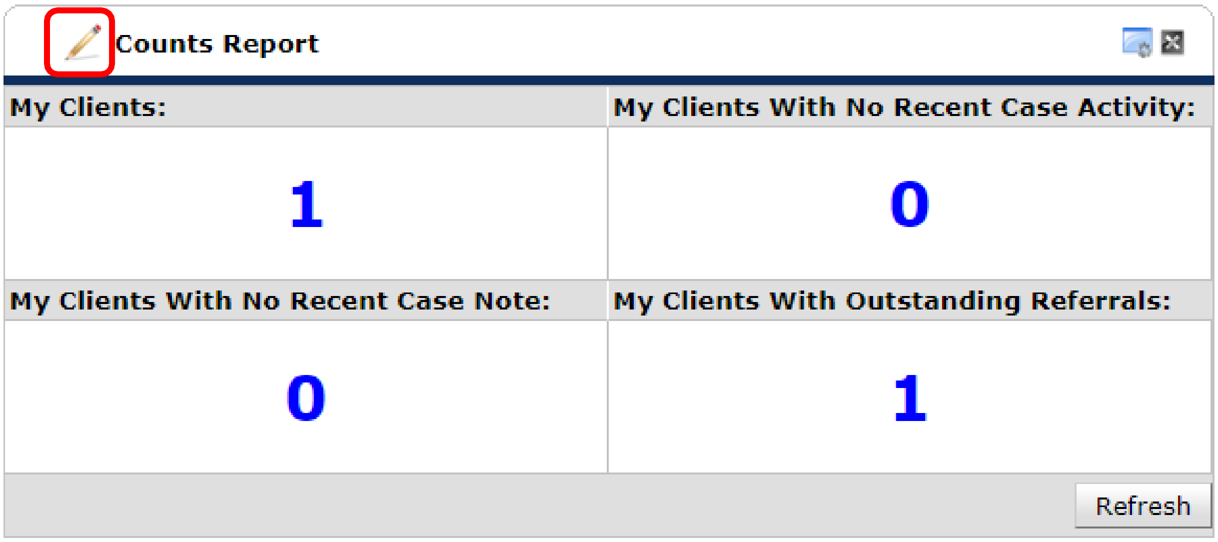


4. COUNTS REPORT (examples):
   My Clients (top left)– lists of our clients.

   My Clients With No Recent Case Activity (top right)– list of clients that do not have any recent case activity within the specified date range.

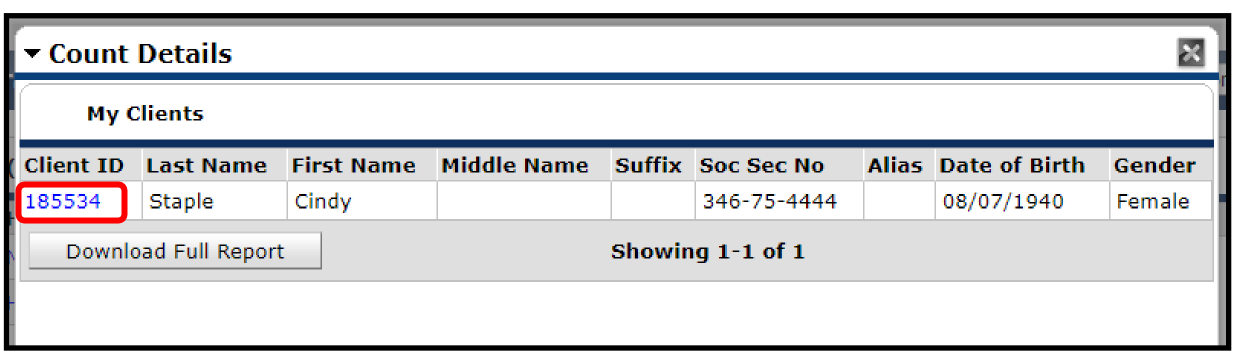
   My Clients With No Recent Case Note (bottom left) – clients that do not have a case note associated within the specified date range.

   My Clients With Outstanding Referrals (bottom right)- clients that have an outstanding referral made by you (to the Matcher) that has “closed”.

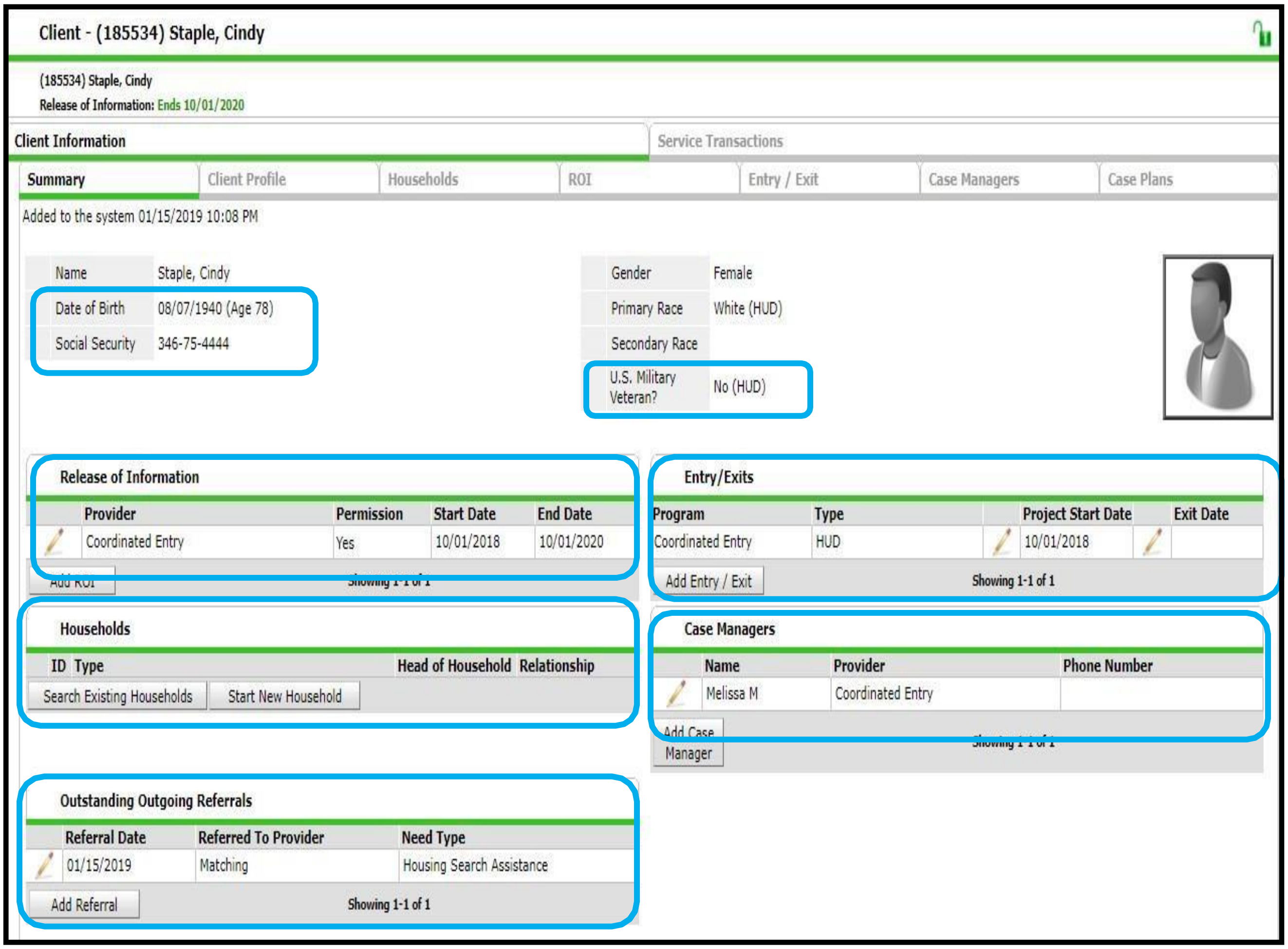


If you want to change the information in the Counts Report, you can click on the pencil in front of Counts Report.

5. Click on the number in the My Clients box to display your list of clients. The Count Detail Box will appear with your clients. Clicking on the Client ID will take you to the client’s page.



6. You will be defaulted to the Summary Page.



Items to check for:

- Date of Birth and SSN
- Release of Information
- Entry/Exits
- Households
- Case Managers
- Outstanding Outgoing Referrals

7. Click on Client Profile for additional information:

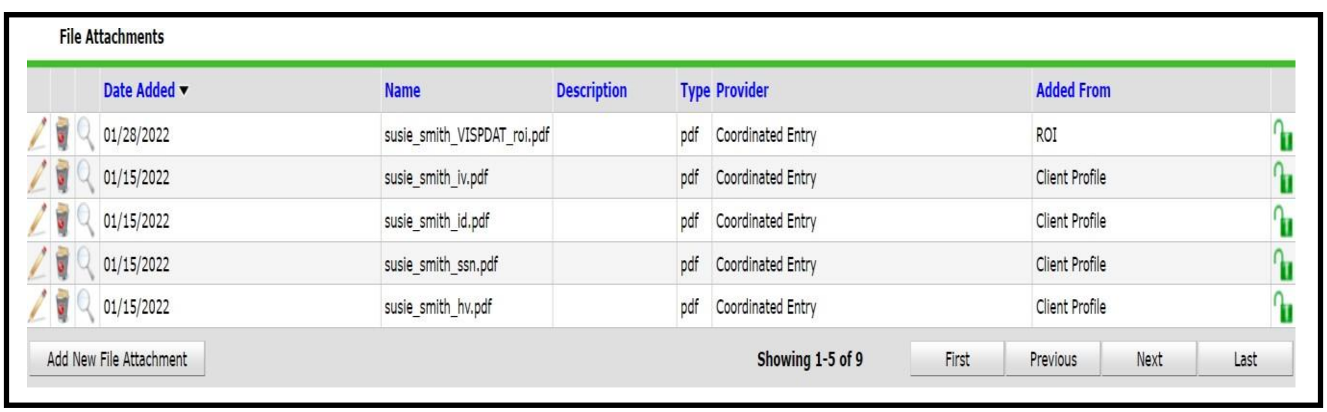
   a. Location
   b. Client Notes – notes entered here will not populate on your Counts Report
   c. File Attachments – *practice uploading documents*

8. PRIOR TO ENTERING THE MATCH INITIATION FORM IN HMIS, the following documents **MUST** be uploaded and appropriately named under File Attachments on the Client Profile tab:

Document	Name
Homelessness Verification including Chronic (if applicable)	firstname_lastname_hv
Disability Verification	firstname_lastname_dv
Income Verification	firstname_lastname_iv
Social Security Card*	firstname_lastname_ssc
Identification Card*	firstname_lastname_id
Birth Certificate**	firstname_lastname_bc

*A receipt for Social Security Card or Identification Card is acceptable.
Birth Certificate - if a birth certificate was recently ordered please upload the receipt. If you are assisting a family, a birth certificate must be obtained for **every member of the family for most of the programs that are in our community.

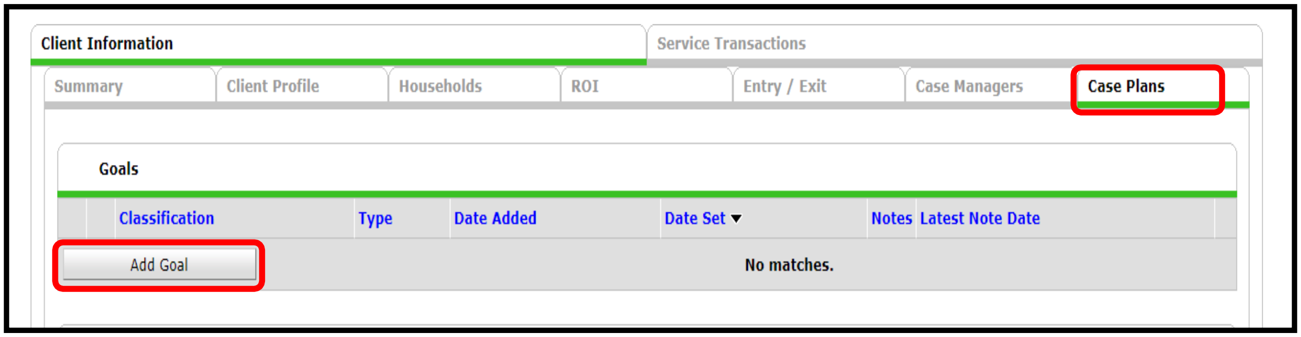
Example of how the documents should be entered into HMIS:



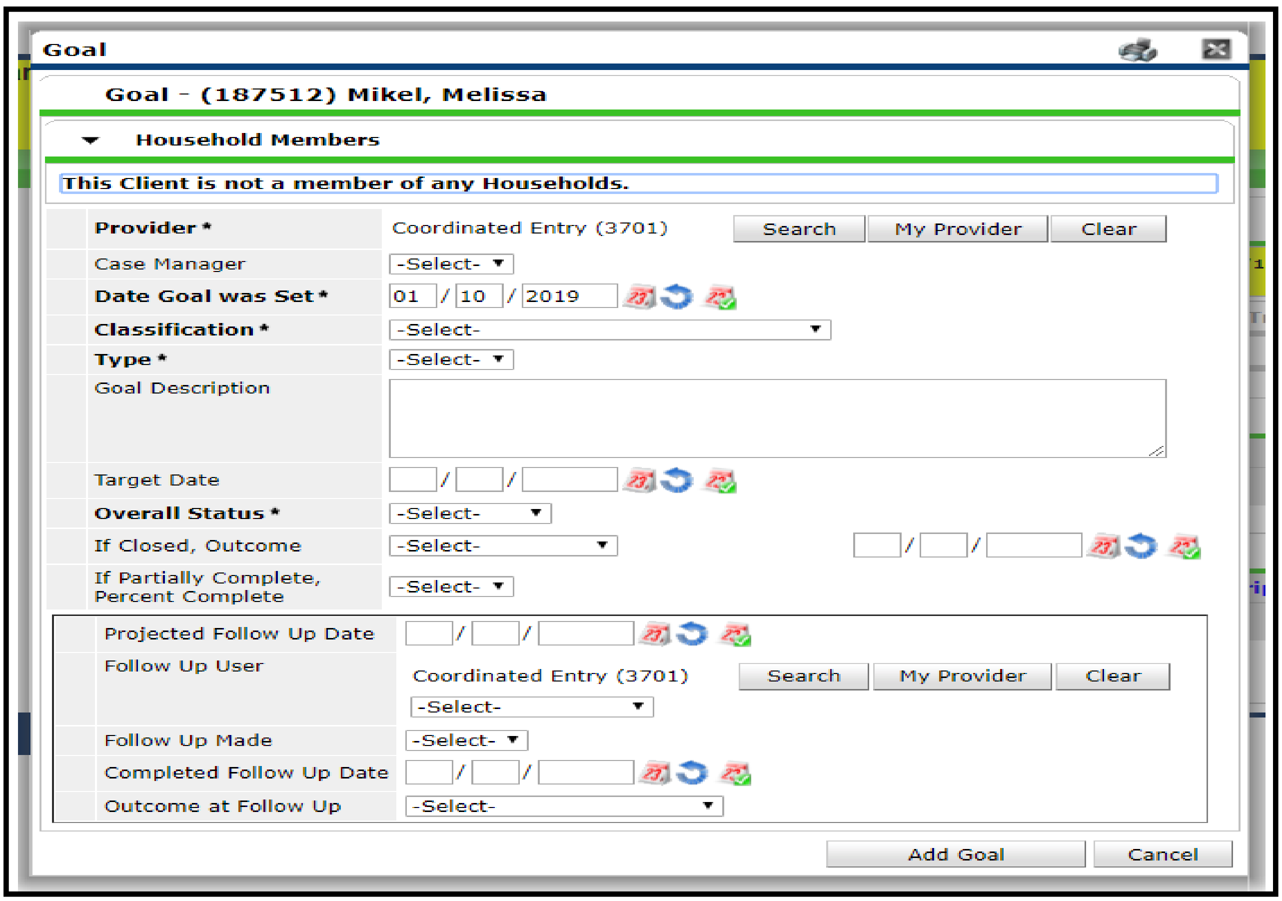
CASE PLANS and CASE NOTES

Once you are assigned as the Navigator, all notes should be entered under Case Plan tab. This will allow the Community Coordinator to generate one report for Case Notes for all clients. Additionally, as the process of Coordinated Entry evolves, this will be used to develop case plans that will follow the client into Permanent Housing.

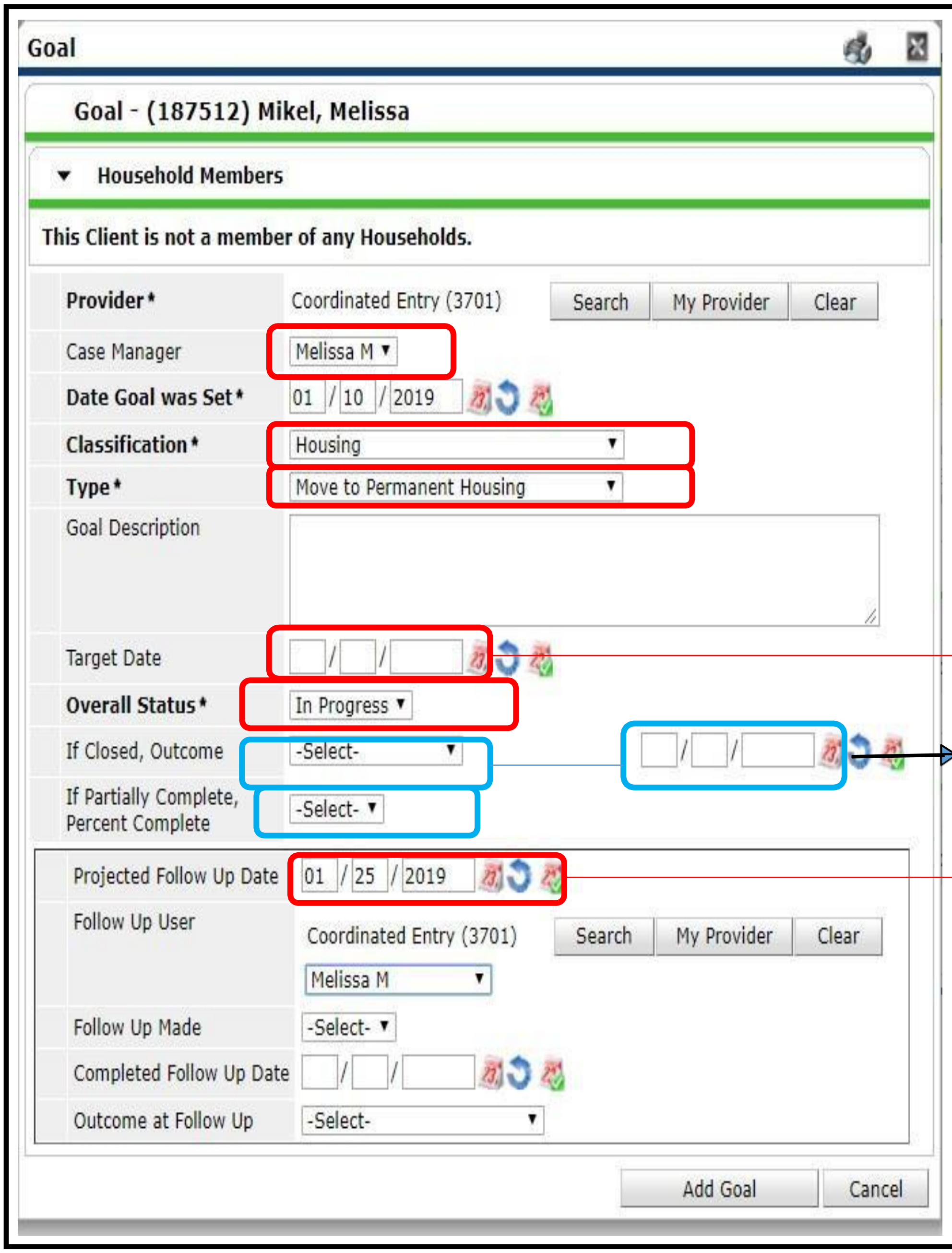
1. Click on Case Plans.
2. Click on Add Goals.



3. The Goal pop-up box will appear.



4. Complete the following sections outlined in red, then click Add Goal.

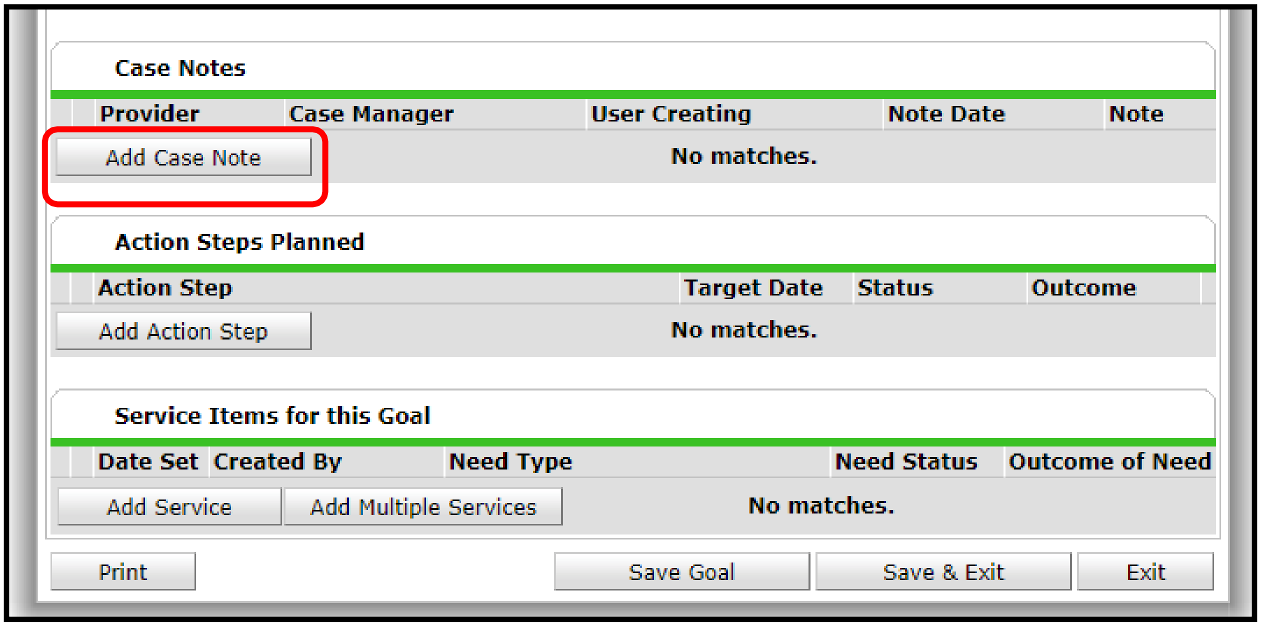


Enter expected housed date here.

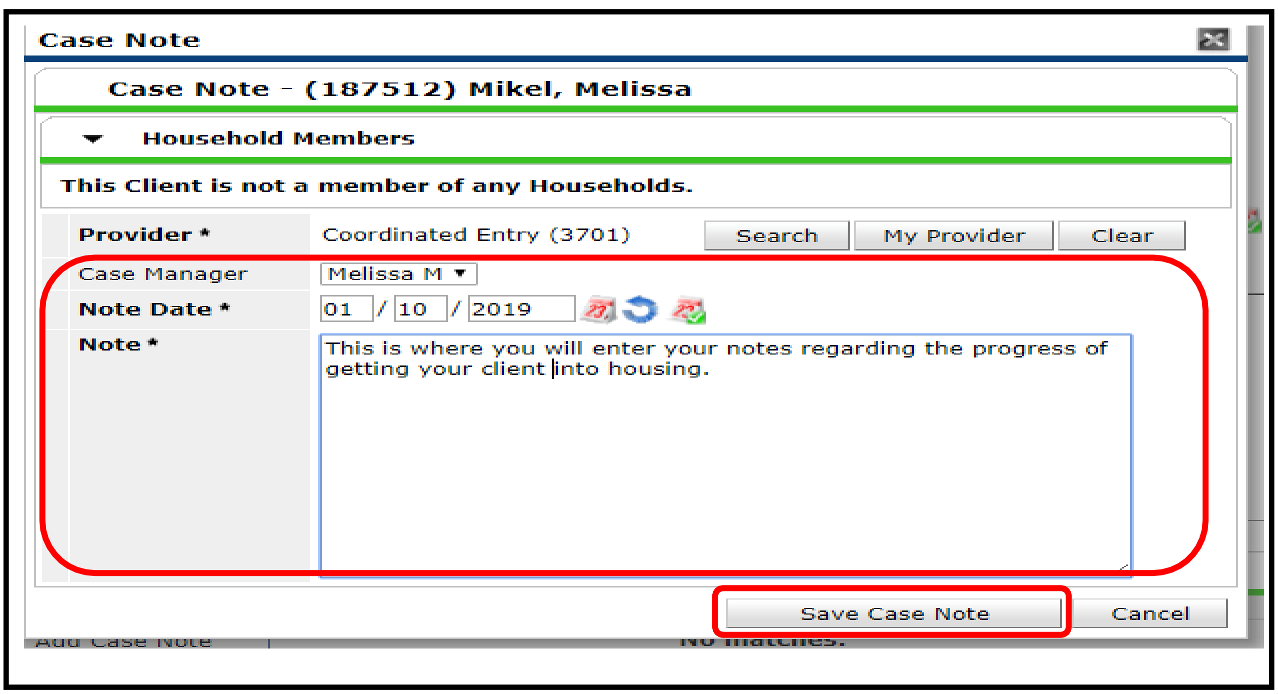
Enter data in here when the client is housed.

Enter a Project Follow Up Date to show on your Follow-Up Dashboard to remind you to follow up with your clients.

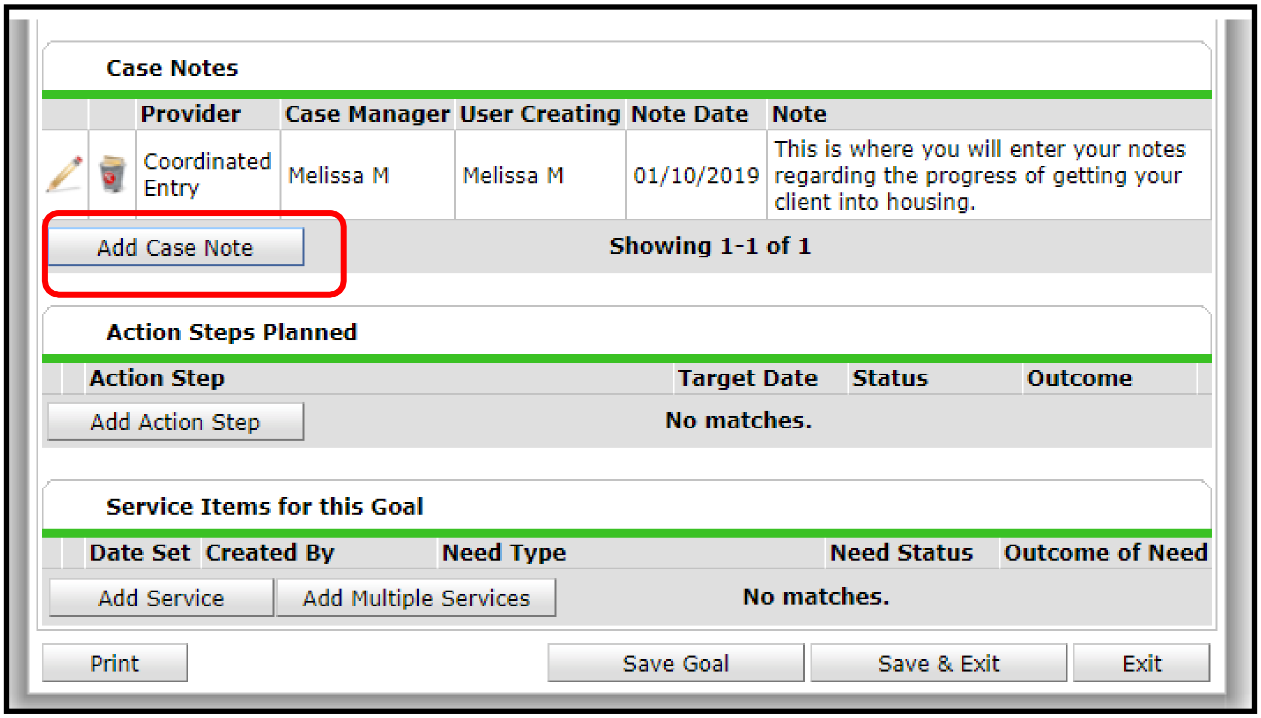
5. After clicking Add Goal, the pop-up box will expand to show the view below. Click on Add Case Note to add you notes.



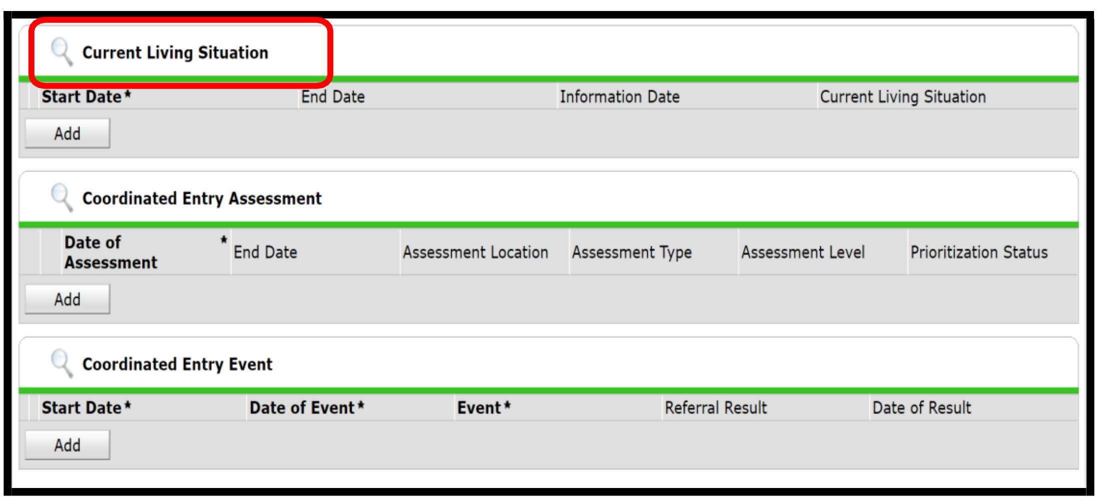
6. Choose your name as the Case Manager, ensure the correct date is showing, type your notes. Click Save Case Note.



7. Your notes will then appear in the Case Notes section.



8. If an eligible event has been completed, an **INTERIM** must be completed and all Coordinated Entry Data Elements must be answered (review Interims section for guidance).
9. If no Assessment or Event occurred but communication was had, at minimum Navigators are to complete the **CURRENT LIVING SITUATION**.

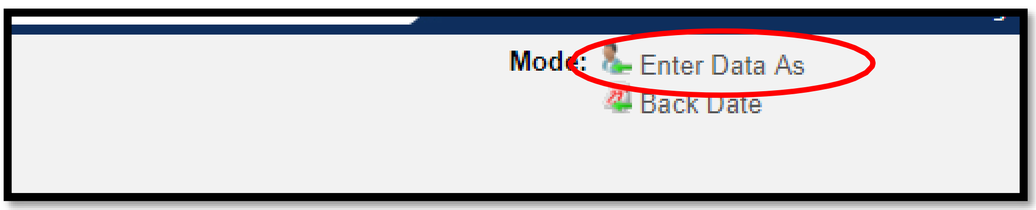


VI-SPDAT DATA ENTRY & SUBMISSION PROCEDURE

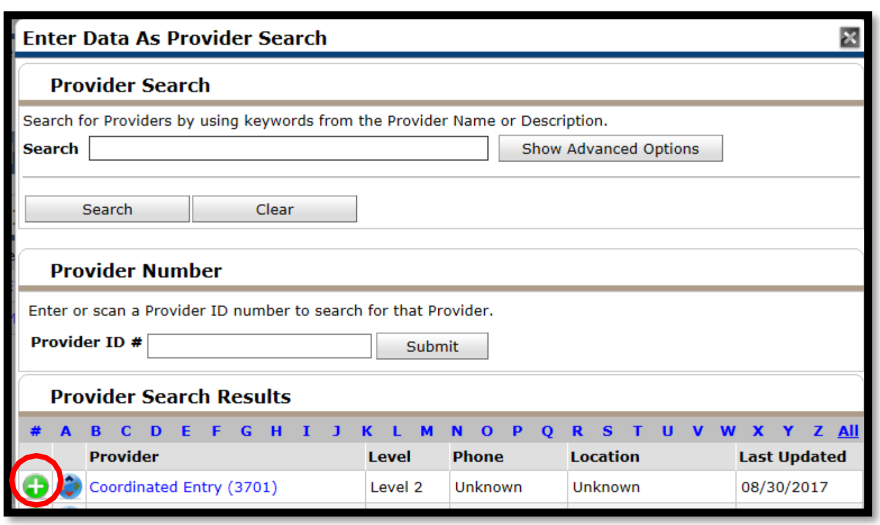
Prior to collecting information from a client, you should ALWAYS check HMIS to see if the client currently has an active record in HMIS. A client's active record may prevent you from creating a duplicate record and show if the client is currently receiving services from another provider. All clients who are going to have a VI-SPDAT completed must have had an Initial Screening completed and an entry in the Coordinated Entry Project in HMIS.

Step 1: Use Enter Data As (EDA) mode to select provider **Coordinated Entry (3701)**

A. Click Enter Data As on the top right of the HMIS Homepage, Using EDA mode will ensure that the client's information is visible to Access Sites, Assessors, Community Coordinator, Navigators, and Matcher. If you do not use the EDA mode, the data will not be visible, and the client's assistance will be delayed.

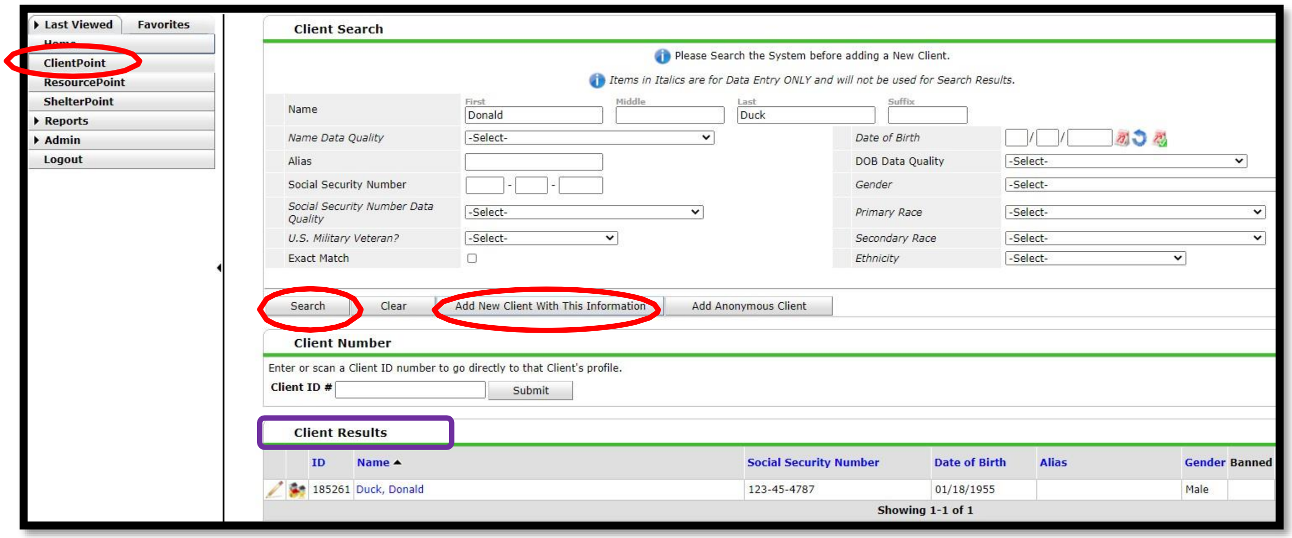


B. Click the  icon next to the provider Coordinated Entry (3701)



STEP 2: Client Search

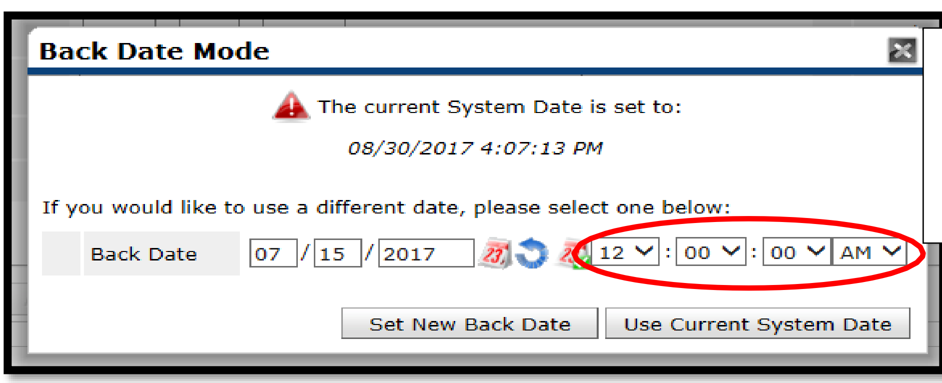
A. Click on ClientPoint. Enter the first and last name of the person and click Search.



B. In the Client Results field, you MUST ensure that the spelling of the name, the SSN, and Date of Birth are an EXACT match to the client you are serving. If it is an exact match, then you may click on the name to add the VI-SPDAT. If the information in HMIS DOES NOT match, then you must enter the client as a New Client.

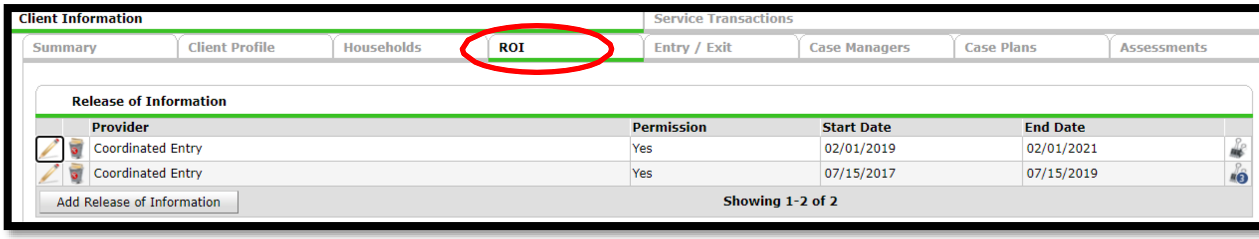
STEP 3: Entering the VI-SPDAT

A. You will receive a pop-up box asking if you would like to enter Back Date Mode. Change the date if you not entering the data the same day you collected it. *Remember: VI-SPDAT data must be entered within 3 business days of collecting it.*

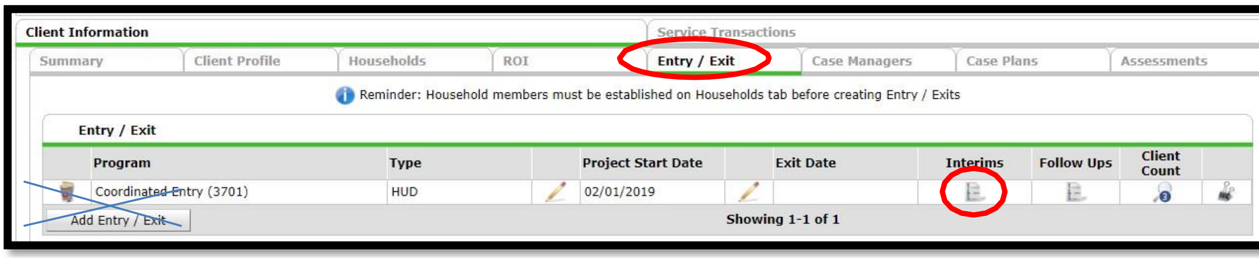


The time **MUST** be changed to the approximate time the VI-SPDAT was conducted.

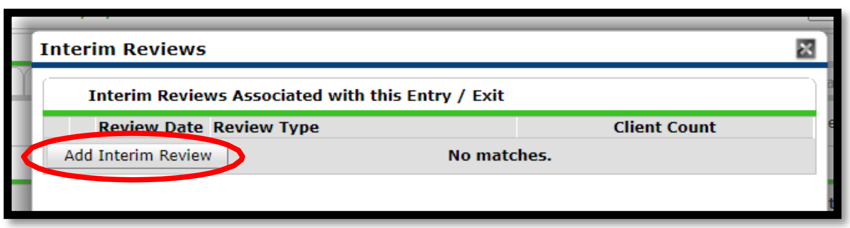
B. Click on the ROI tab to view the Releases of Information. A VI-SPDAT release must also be entered. Review the HMIS and FMCoC release of information to make sure they are valid.



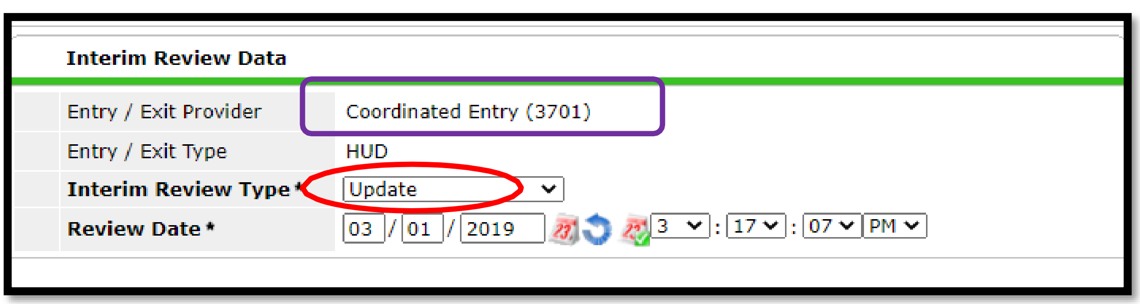
C. Click on the Entry/Exit tab, you will see that there is an active Coordinated Entry record. To enter the VI-SPDAT you will click on the Interims tab. DO NOT create a new Coordinated Entry record unless the record has an exit date.



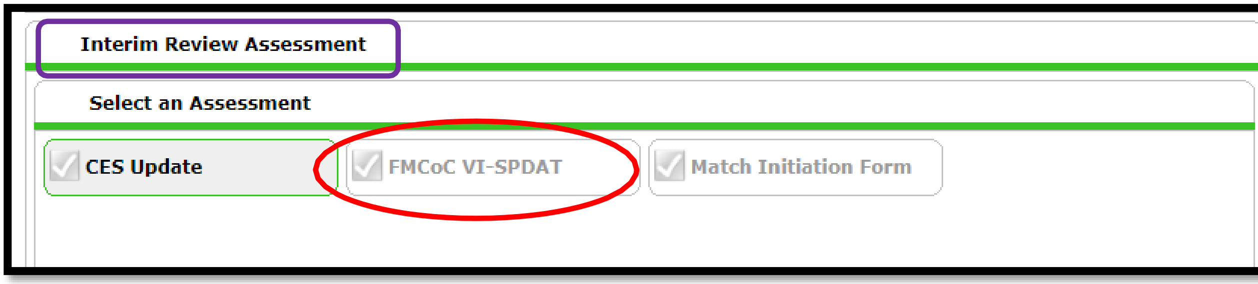
D. The Interim Reviews pop up box will appear. Click on Add Interim Review.



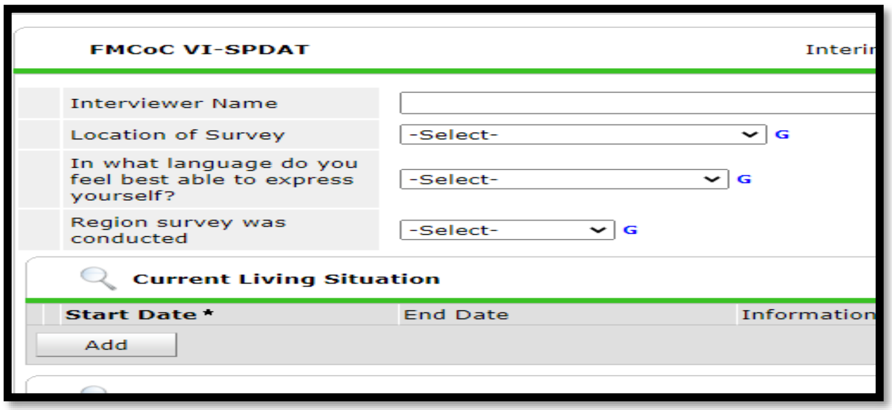
E. The Interim Review Data box will appear, ensure that the Provider appears as Coordinated Entry, and select Update from the **Interim Review Type*** drop down box. Be sure to have set the back date mode to the correct date approximate time you completed the VI-SPDAT with the client. Click Save & Continue.



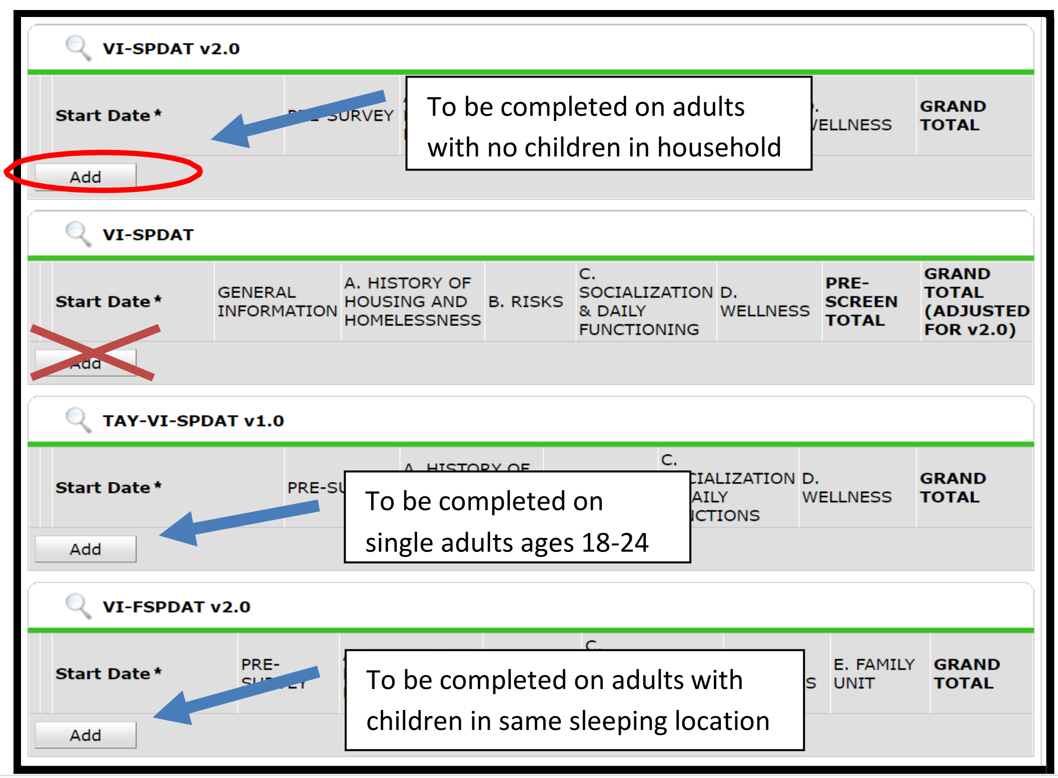
F. After clicking Save & Continue, the Interim Review Assessment box will appear. Under Select an Assessment you will see 3 options, select FMCoC VI-SPDAT.



G. Complete all fields in the assessment.

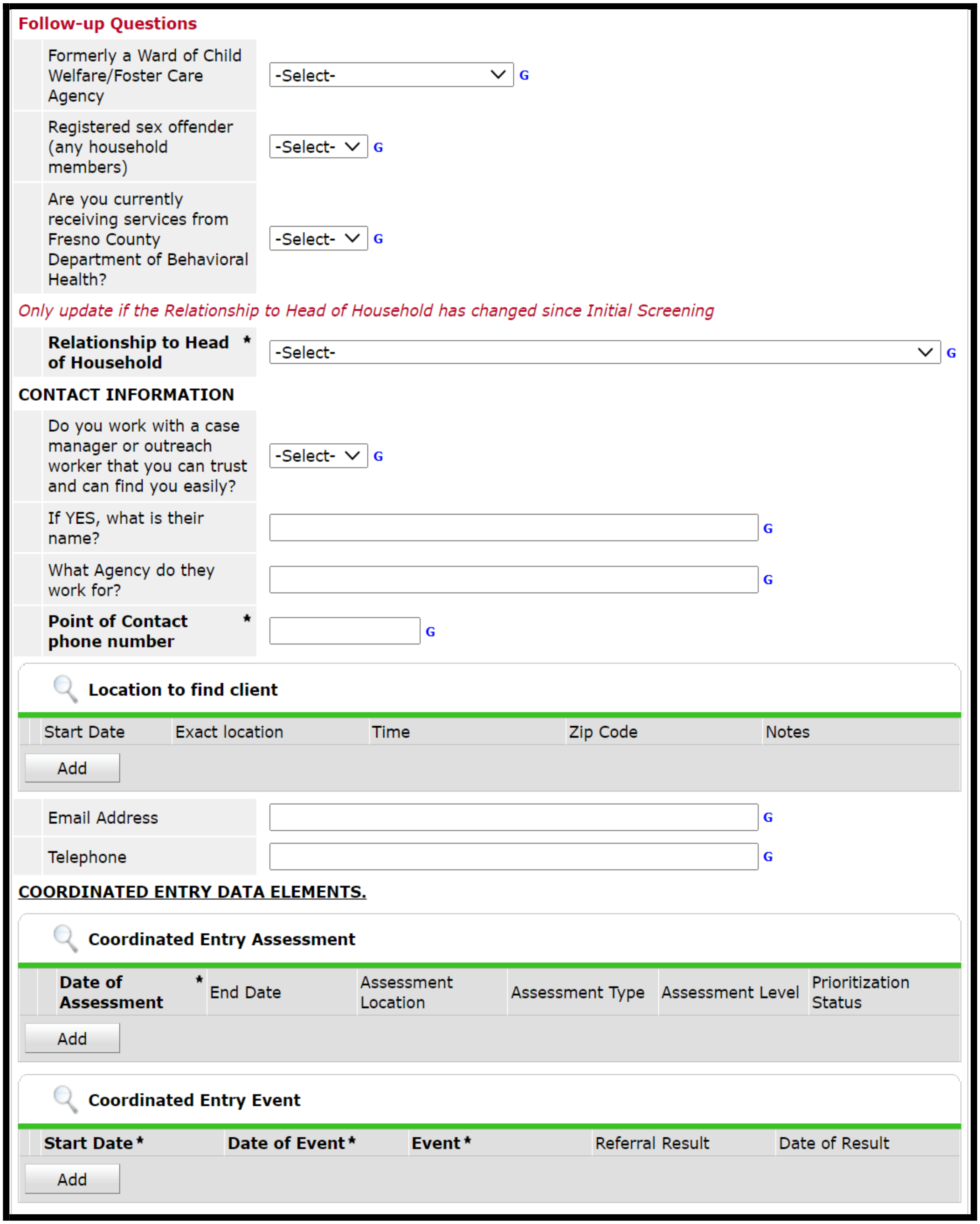


H. In the middle of the assessment, you will see a variety of VI-SPDAT sub-assessment boxes. Choose the correct VI-SPDAT assessment by clicking on Add button in the VI-SPDAT section. All fields should be completed. (DO NOT complete a VI-FSPDAT on a family if children are housed).



I. Complete the Follow up Questions, Contact Information, Location to find client and Coordinated Entry Data Elements.

Use Coordinated Entry key for documenting the appropriate event.



Follow-up Questions

Formerly a Ward of Child Welfare/Foster Care Agency	-Select- G
Registered sex offender (any household members)	-Select- G
Are you currently receiving services from Fresno County Department of Behavioral Health?	-Select- G

Only update if the Relationship to Head of Household has changed since Initial Screening

Relationship to Head of Household *	-Select- G

CONTACT INFORMATION

Do you work with a case manager or outreach worker that you can trust and can find you easily?	-Select- G
If YES, what is their name?	G
What Agency do they work for?	G
Point of Contact phone number *	G

Location to find client

Start Date	Exact location	Time	Zip Code	Notes
Add				

Email Address	G
Telephone	G

COORDINATED ENTRY DATA ELEMENTS.

Coordinated Entry Assessment

Date of Assessment *	End Date	Assessment Location	Assessment Type	Assessment Level	Prioritization Status
Add					

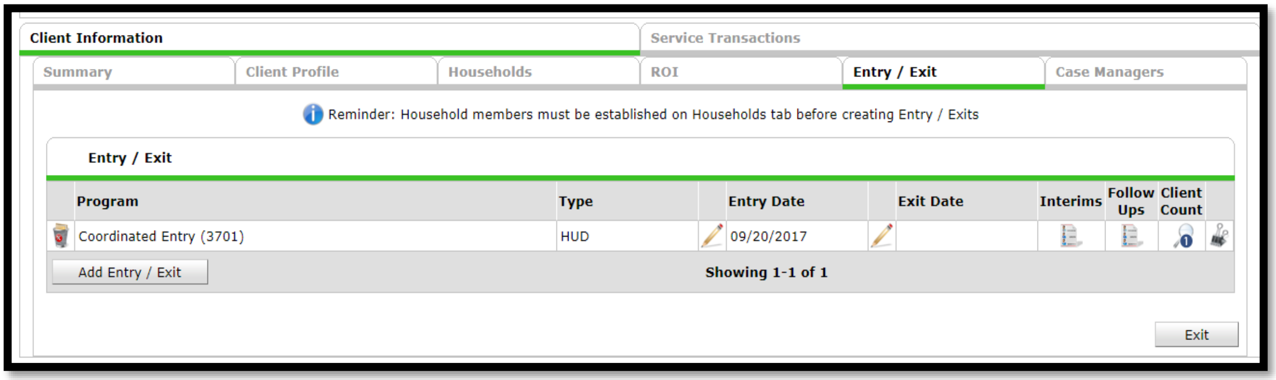
Coordinated Entry Event

Start Date *	**Date of Event** *	**Event** *	Referral Result	Date of Result
Add				

J. Click Save & Exit when done.

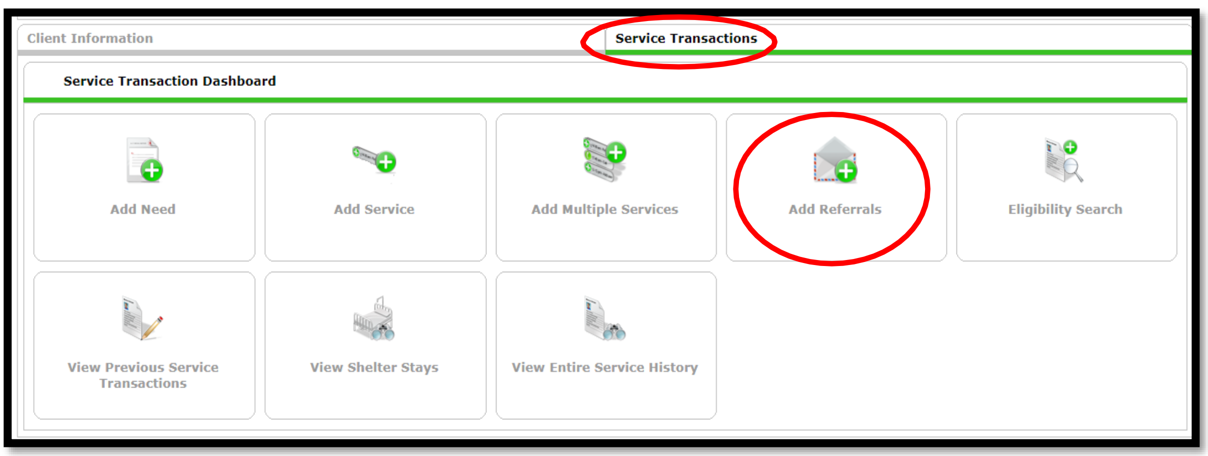
Step 4: Refer the Client to the Community Coordinator to get placed on the By Name list.

A. After the VI-SPDAT is entered, click Save & Exit, your screen will take you to the Entry/Exit tab.

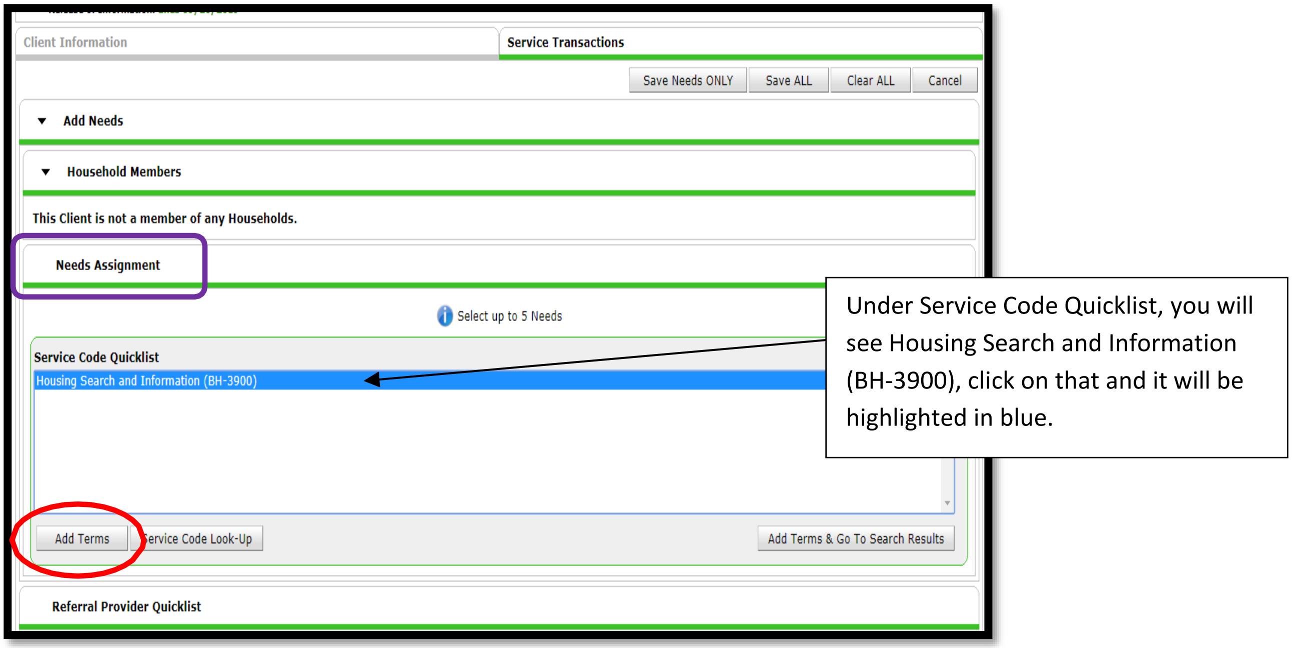


B. Click on Service Transactions, which is the long tab located next to Client Information. Then click on Add Referrals

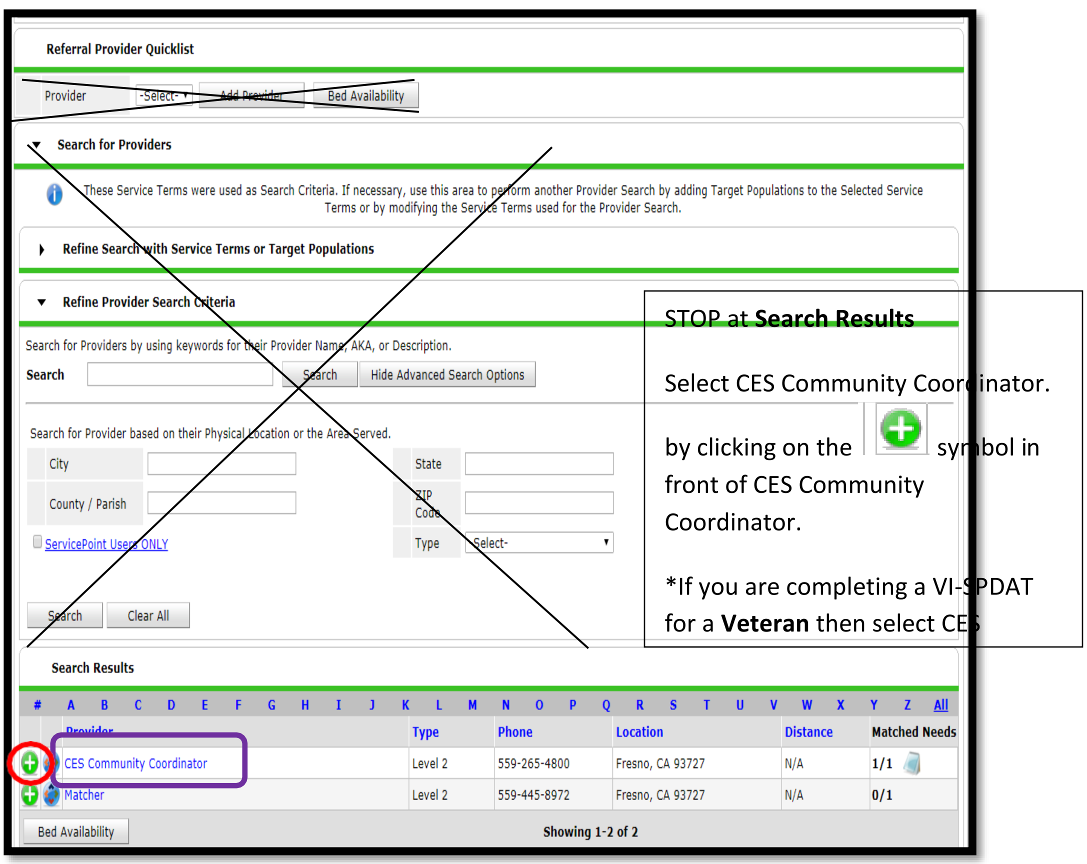
C. Please ensure you submit your VI-SPDAT service transaction in real time (exit out of back date mode, failure to do so may cause your VI-SPDAT referral to not be reviewed)

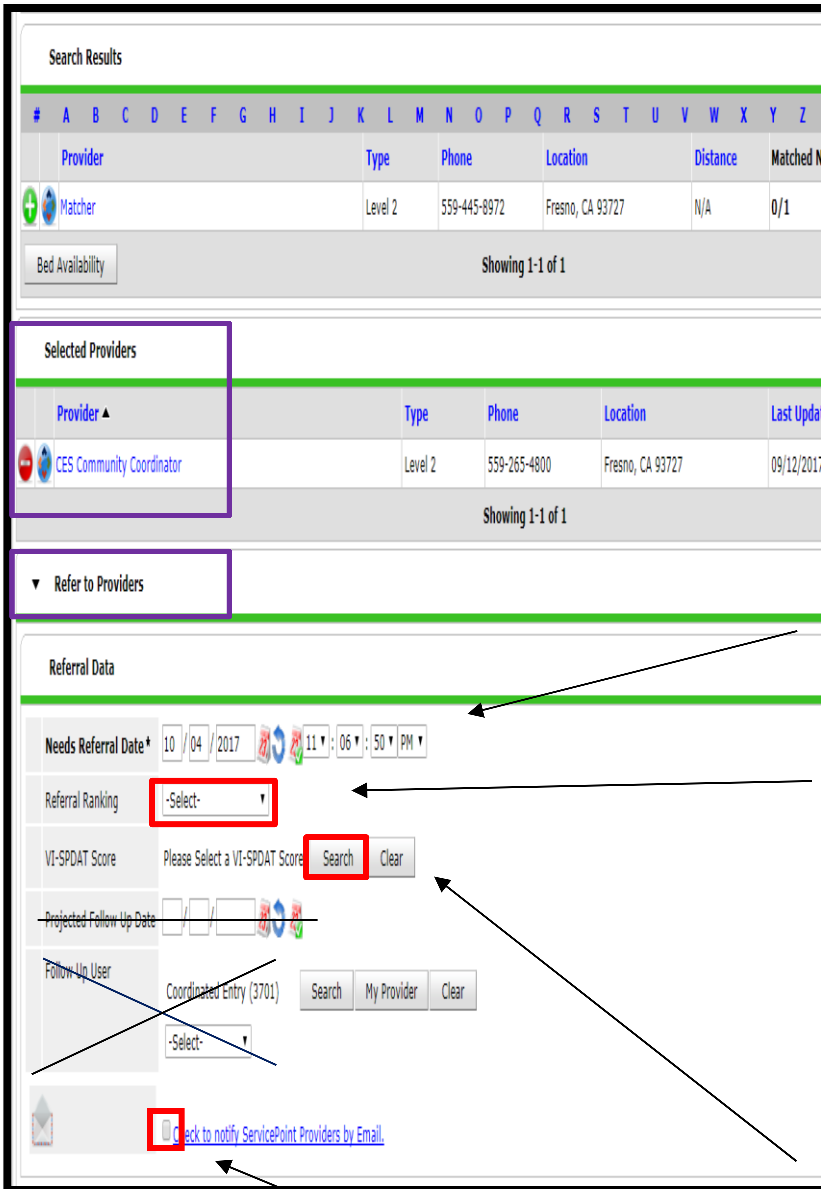


D. You will then be taken to the Needs Assignment page. Click on Housing Search and Information, then click Add Terms.



E. Scroll until you get to Search Results, follow the instructions below





The view of the **Search Results** will change and you will see CES Community Coordinator (or CES Veteran Coordinator) in the **Selected Providers area** (See purple box).

Complete the Refer to Providers area.

a. **Needs Referal Date**: this will default to the date you completed the VI-SPDAT (if you are entering your VI-SPDATs on a different day you collect the information, make sure to back date.

b. **Referral Ranking** – choose the appropriate drop down menu:

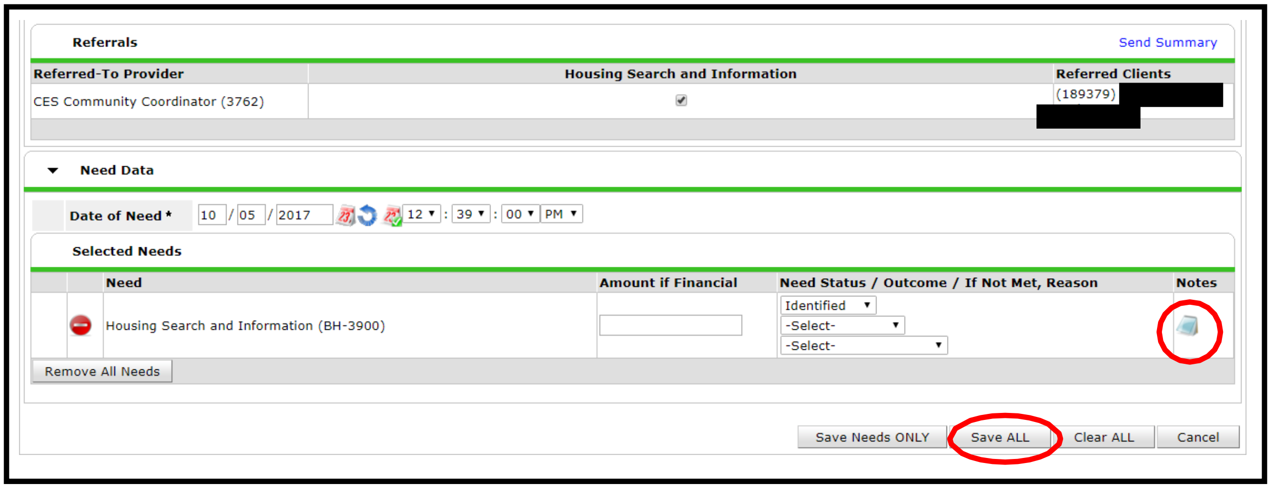
- Non-Chronic – the responses from the interview do not deem the client as chronic.
- Non-Verified Chronic – the responses from the interview deem that the client is chronic, but no documentation has been provided to verify chronicity.
- Verified Chronic – the FMCoC Homeless Verification form must be uploaded into HMIS.

c. **VI-SPDAT Score** – Click on Search to Choose the correct score.

d. **DO NOT complete** Projected Follow Up Date, or Follow up User.

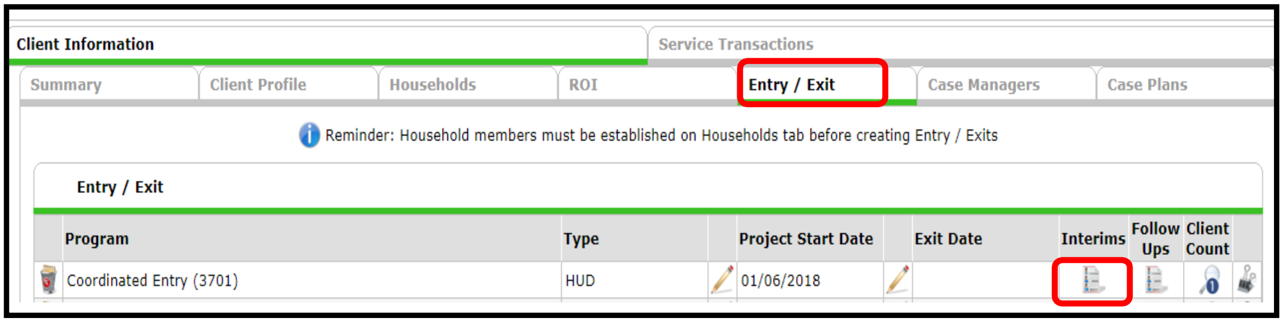
e. Click the box in front of Check to notify ServicePoint Providers by Email

If you need to include a note about the person you are referring, click on the Notes icon to enter the note. Scroll to the bottom click Save ALL.



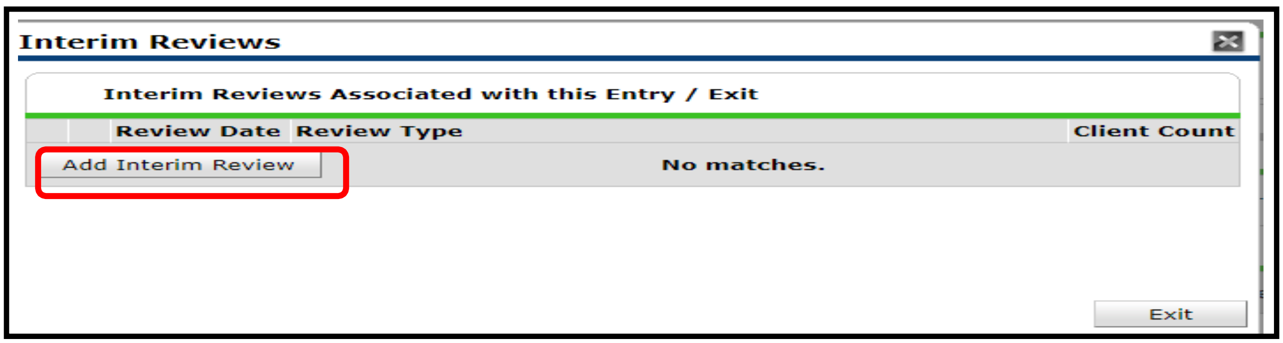
MATCH INITIATION FORM & SUBMISSION PROCEDURE

1. Enter Match form.

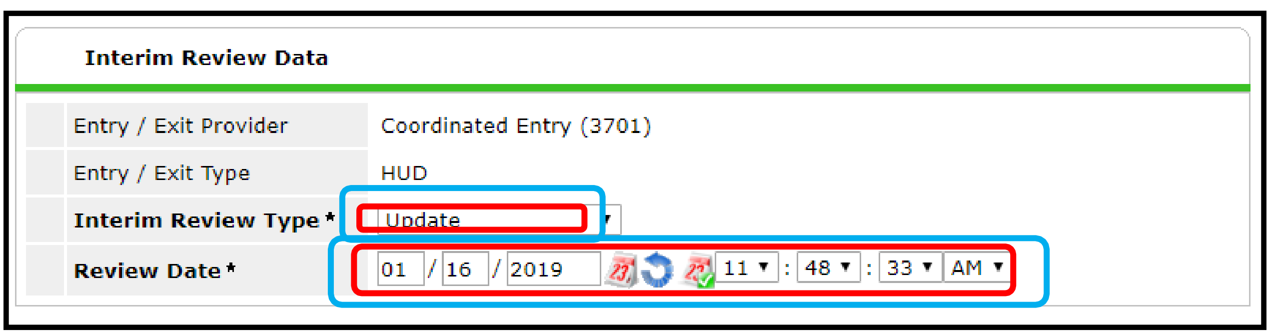


   A. Click on the Entry/ Exit tab.
   B. Click on the paper document under Interims.

2. The Interim Reviews pop up box will appear. Click on Add Interim Review.

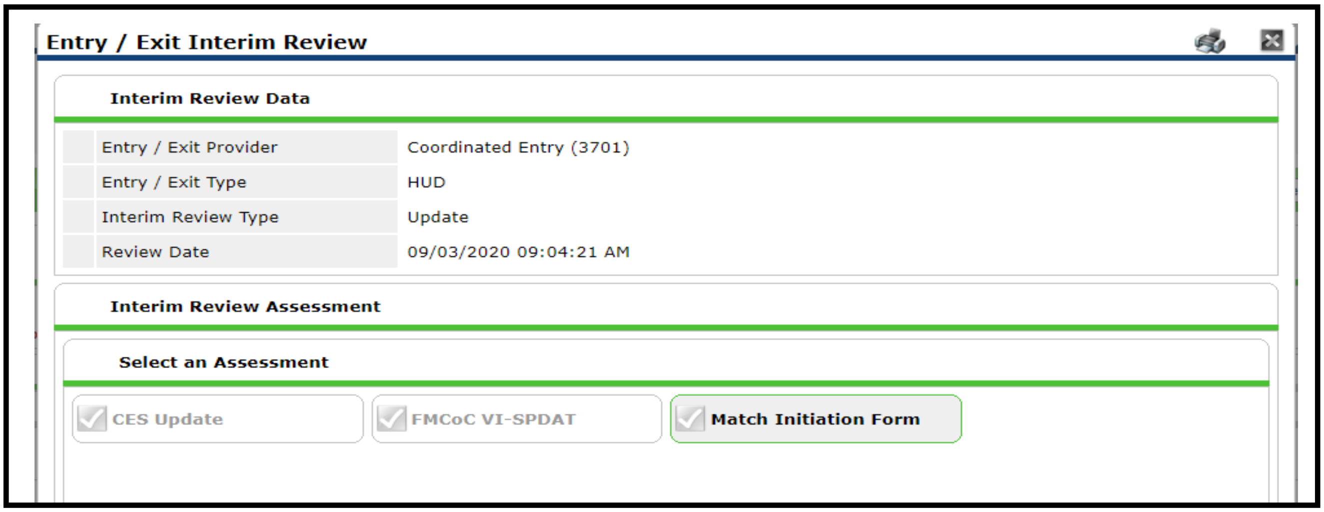


3. Add Interim Review.



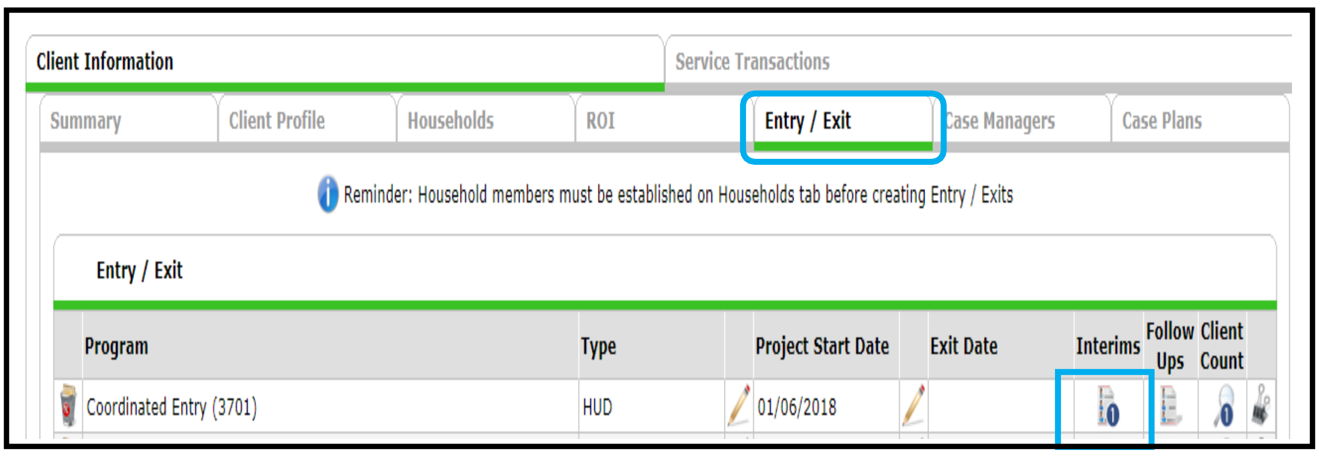
   A. Interim Review Type – **UPDATE.**
   B. Review Date – this should be reflective of the date and time the Match form was completed with the client.

4. The Interim Review Assessment will appear.

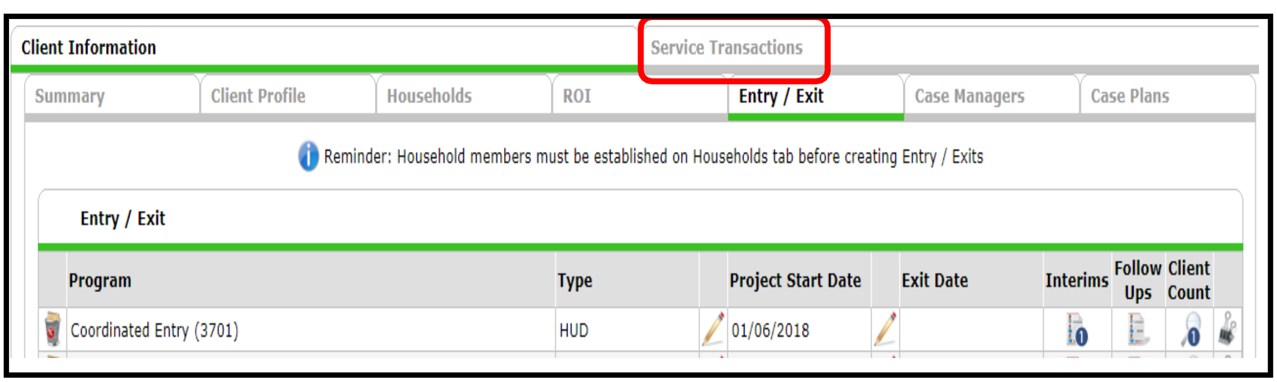


A. Verify that the Match Initiation Form assessment is highlighted in light grey.
B. Enter all information requested (if applicable), then click Save & Exit.

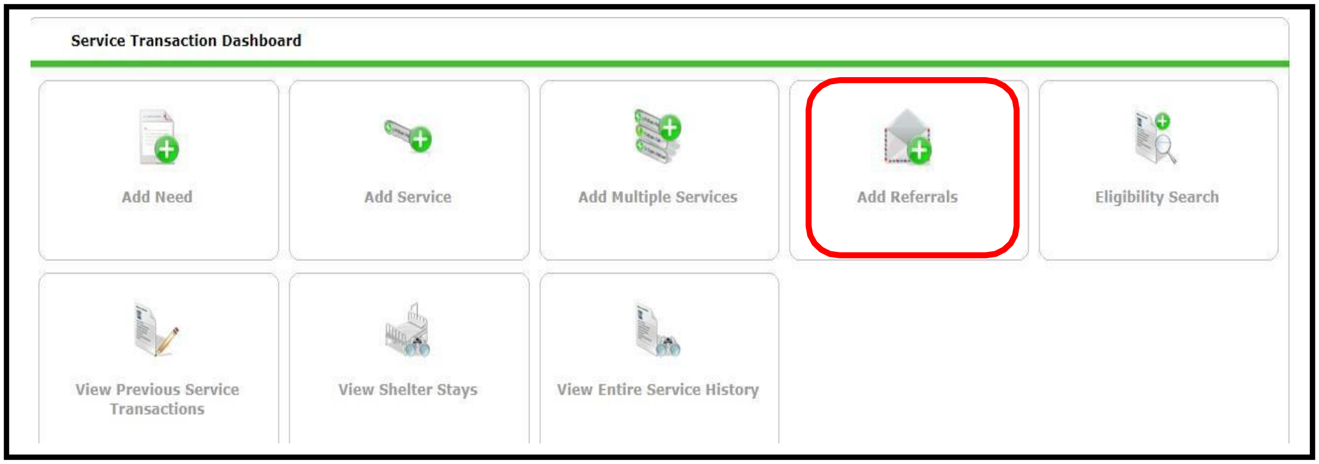
5. After you click Save & Exit you will return to the Entry/Exit screen, you will now see the number under interims has increased by 1 which indicates you have completed an update to this client's record.



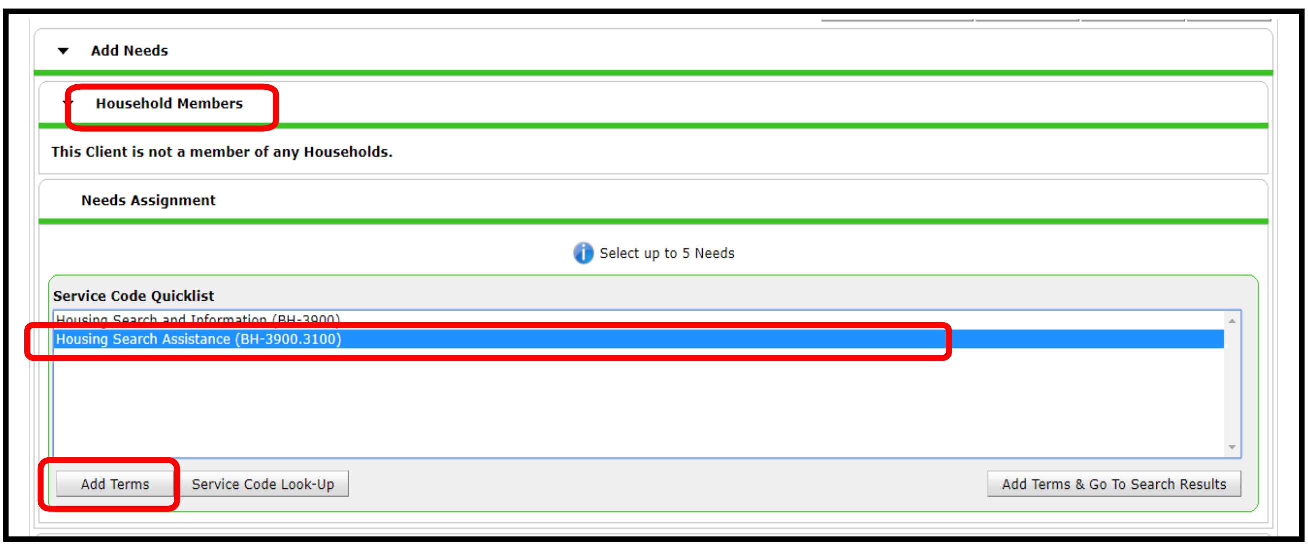
6. Click on Service Transactions.



7. You will be directed to the Service Transaction Dashboard. Click Add Referrals.
   A. Please ensure you submit your Match service transaction in real time (exit out of back date mode, failure to do so may cause your Match referral to not be reviewed)

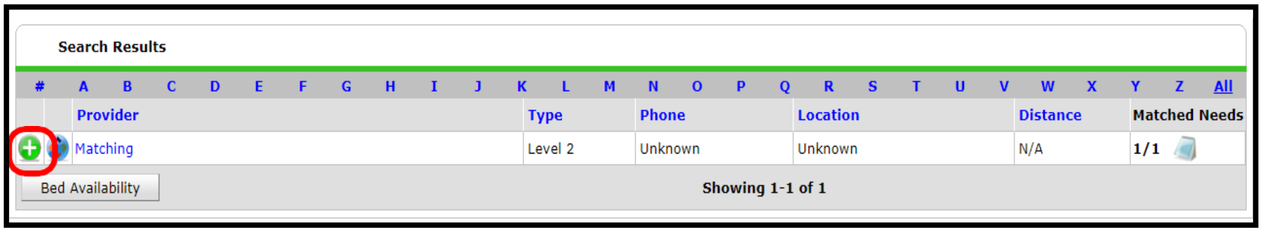


8. You will be directed to Add Needs box.



   A. Housed Members – Only select adults in household, uncheck children (if any).
   B. Click on **<u>HOUSING SEARCH ASSISTANCE,</u>** this will be highlighted blue. DO NOT select Housing Search and Information.
   C. Click Add Terms.

9. Scroll down to Search Results (you will skip over Referral Provider Quicklist, Search for Providers, Refine with Service Terms or Target Populations, Refine Provider Search Criteria).

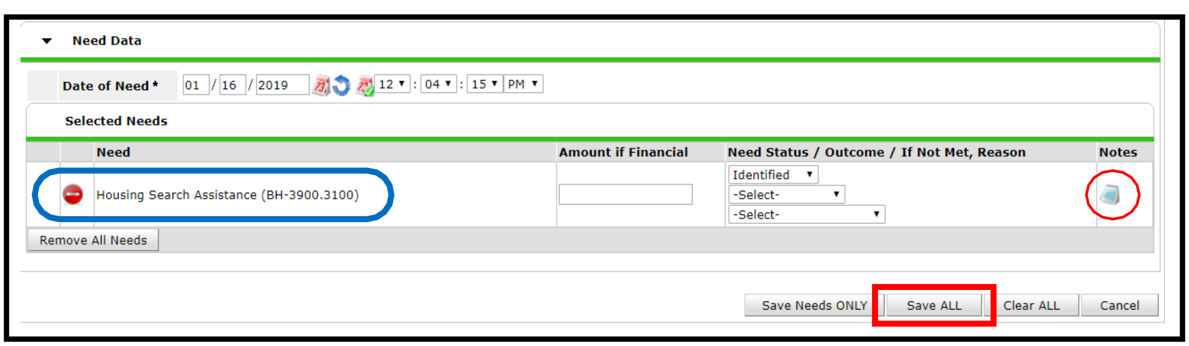


   A. Click on the green circle in front of Matching. This will submit your Match form to the CES Matcher.

10. You will then complete the Refer to Provides/ Referral Data.

   A. Referral Ranking – Choose the appropriate response.
   B. Select the most current VI-SPDAT score by clicking SEARCH.
   C. Click the box in front of Check to notify ServicePoint Providers by Email.

11. Scroll down until you see Housing Search Assistance Selected Need box.
   A. If you want to include additional notes about the client, click on the Notes icon and enter notes that need to be relayed to the Matcher (ex: deposit only, advocacy for client, etc.).
   B. Click Save All.

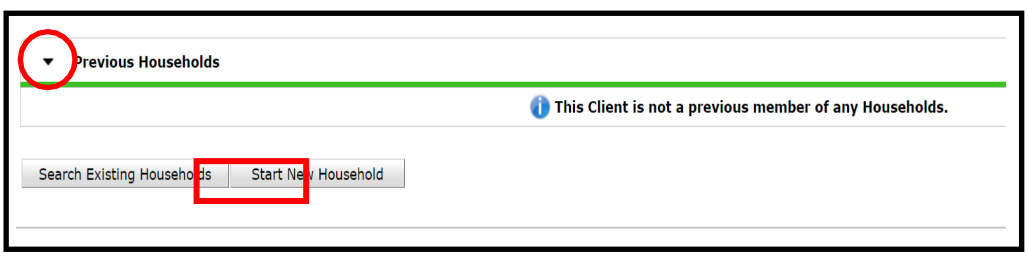


CREATING HOUSEHOLDS

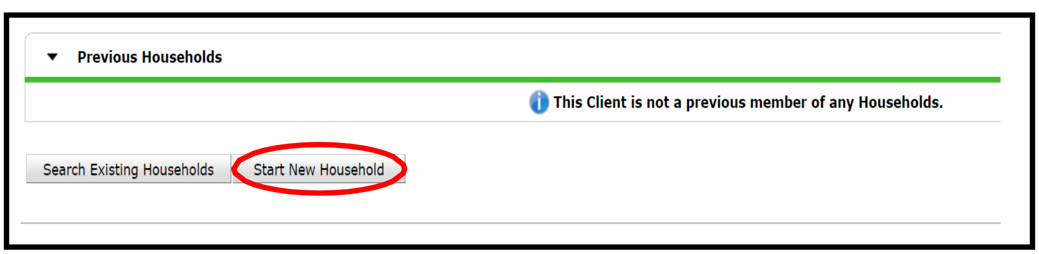
When adding a household to a current profile (staff are encouraged to wait on combining couples in HMIS until they are ready to be matched as households. If a child is in the household, please connect immediately).

Step 1: Select the Households tab (one way to see if client is connected to household members)

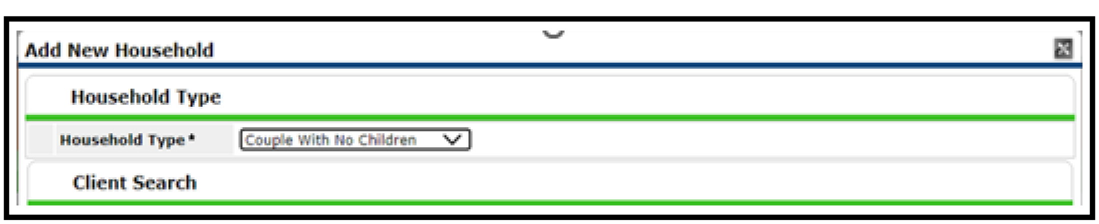
Step 2: To identify past household members select the right facing triangle (will face down upon selecting).



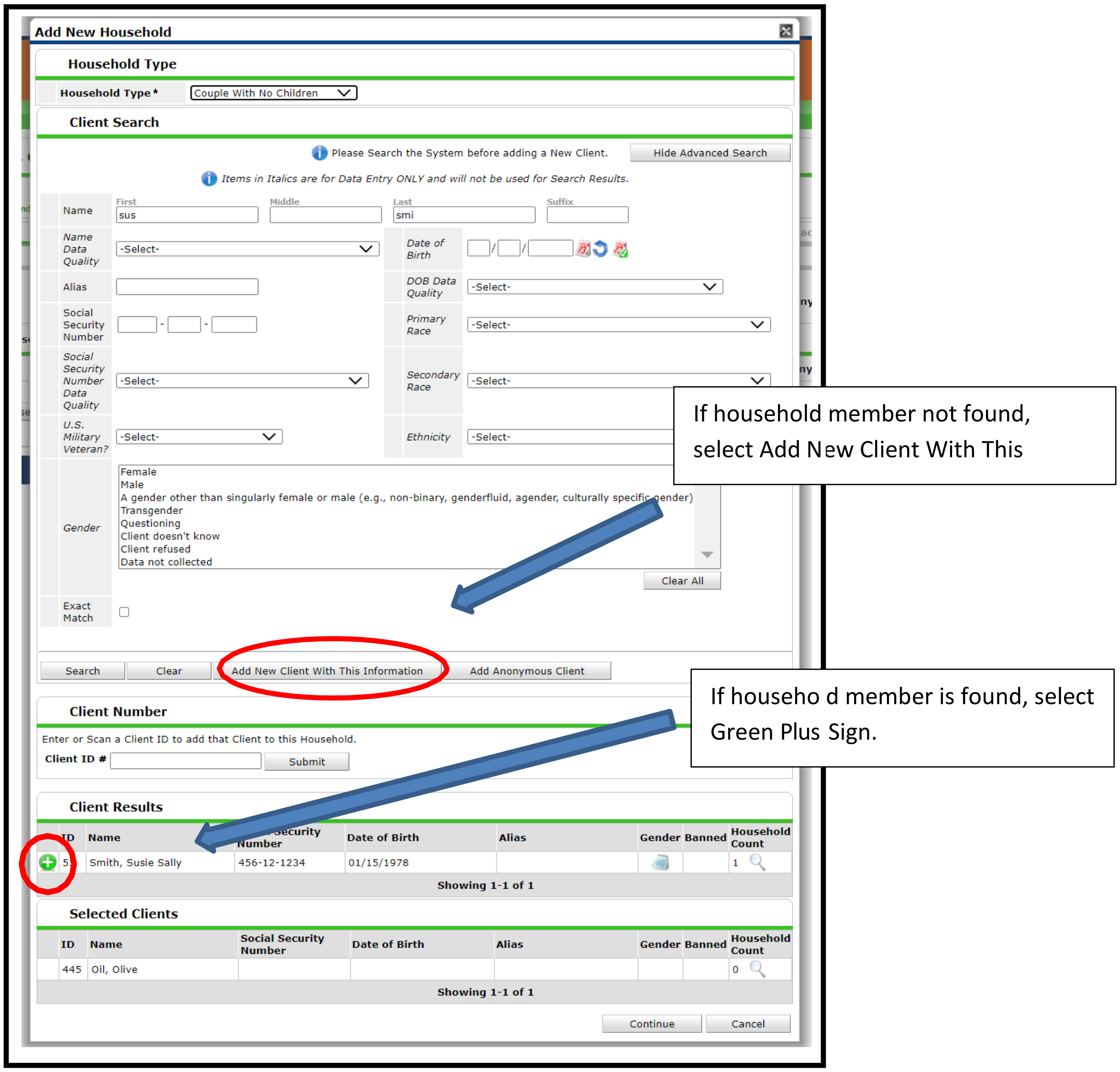
Step 3: Select Start New Household.



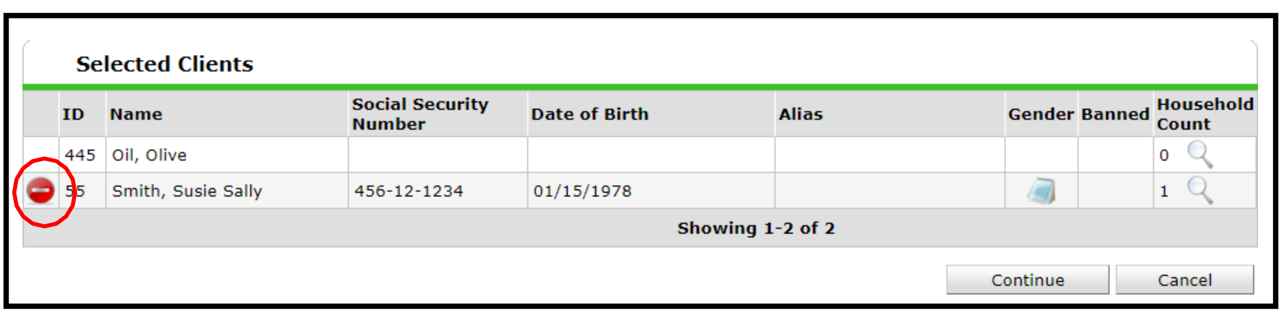
Step 4: Pop up box will appear (fill in Household Type and Client Search information).



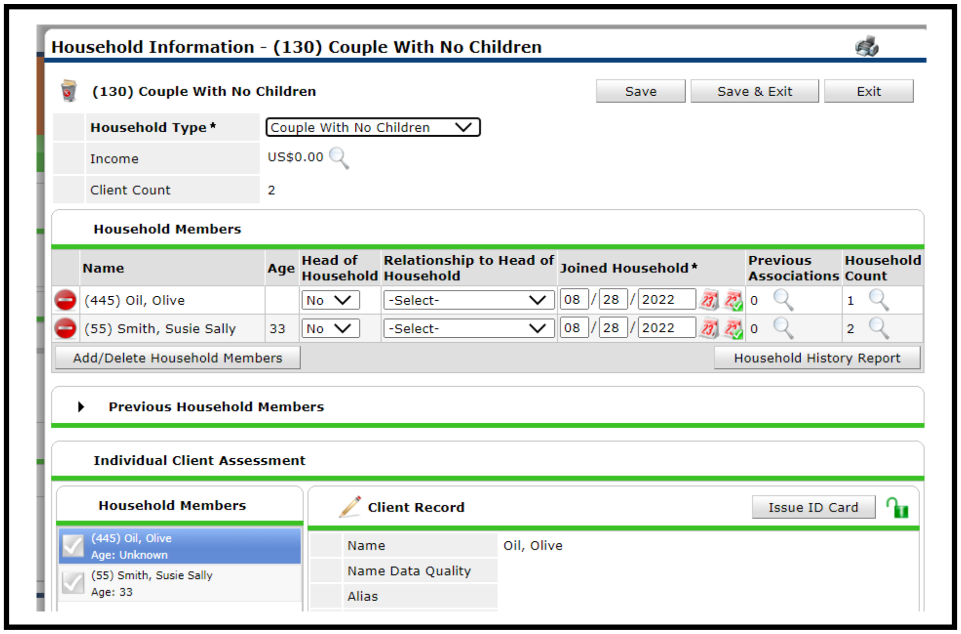
Step 5: If household member is found, a name will appear in Client Result, select
If household member is not found select Add New Client with This Information.



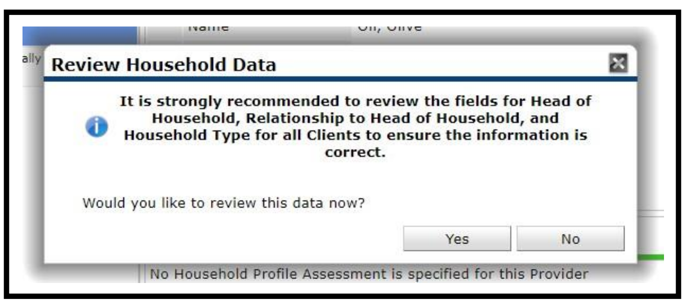
Step 6: Once plus is selected household members will join, press continue if ready to proceed. If needing to remove name, select negative sign.



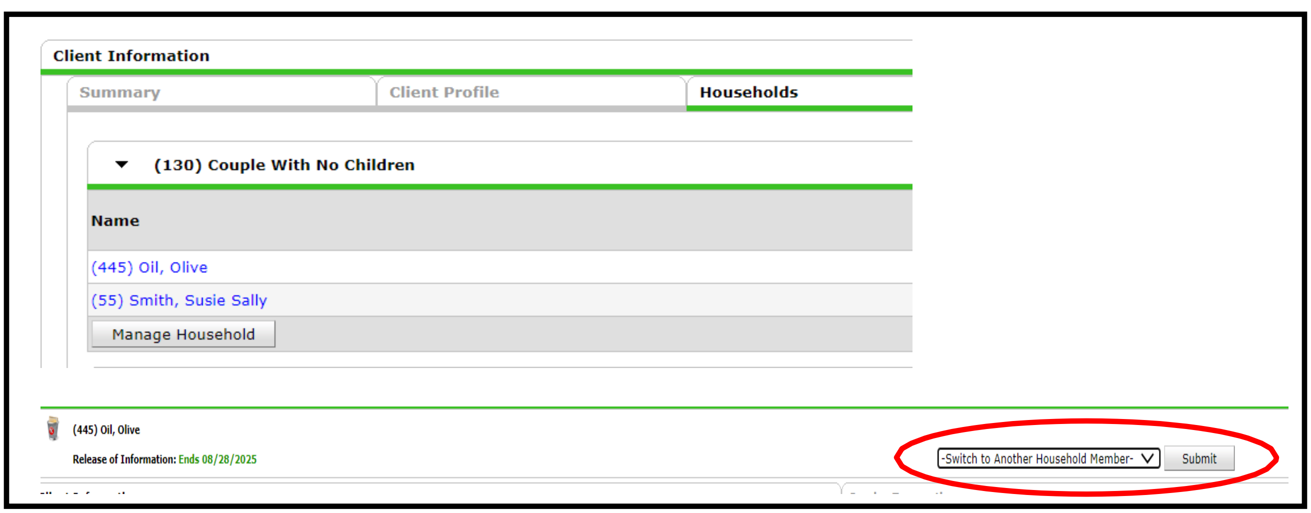
Step 7: Complete Head of Household and Relationship to Head of Household, select Save and Continue. Only one member may be head of household in this section.



Step 8: Pop-up box will appear, select no if review is completed.

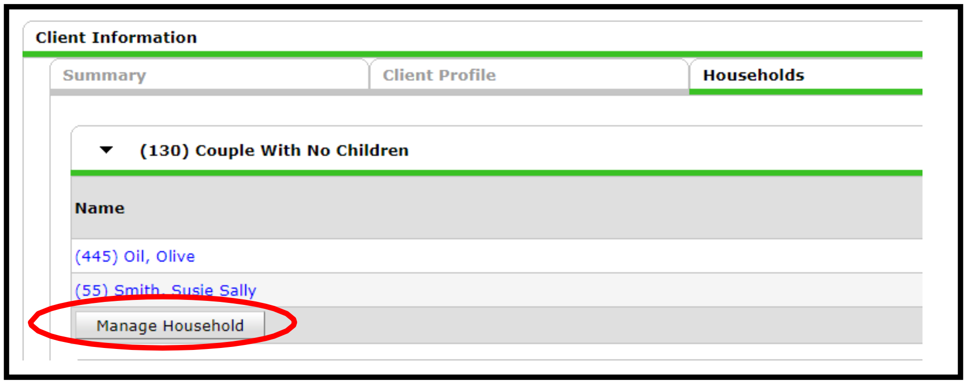


Step 9: Household members will appear in Households tab and will appear in a drop-down box to the right of the client's profile (Switch to Another Household Member).

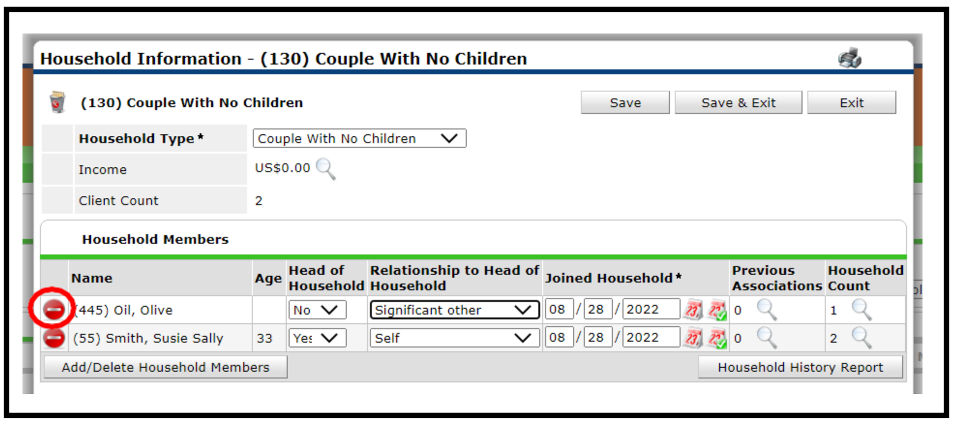


REMOVING HOUSEHOLD MEMBERS

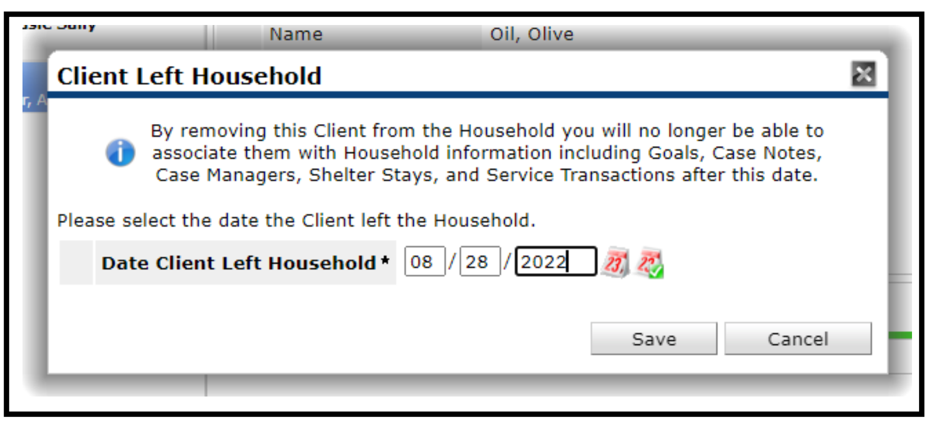
Step 1: Open Households tab, select Manage Household.



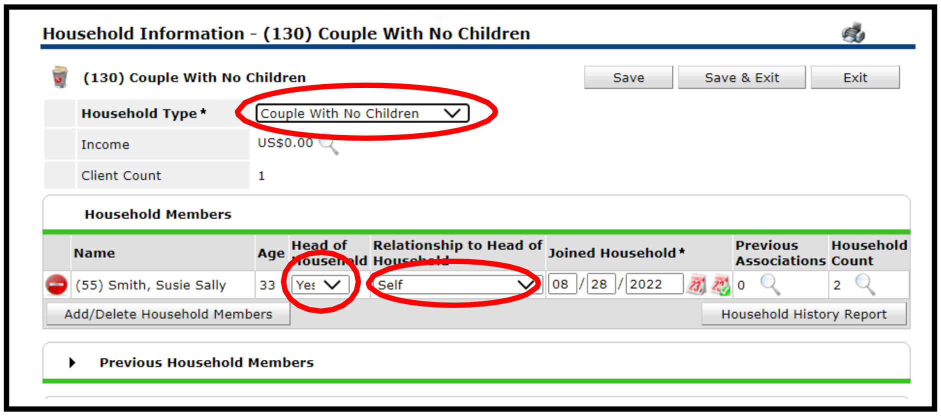
Step 2: Select the negative sign on household member being removed.



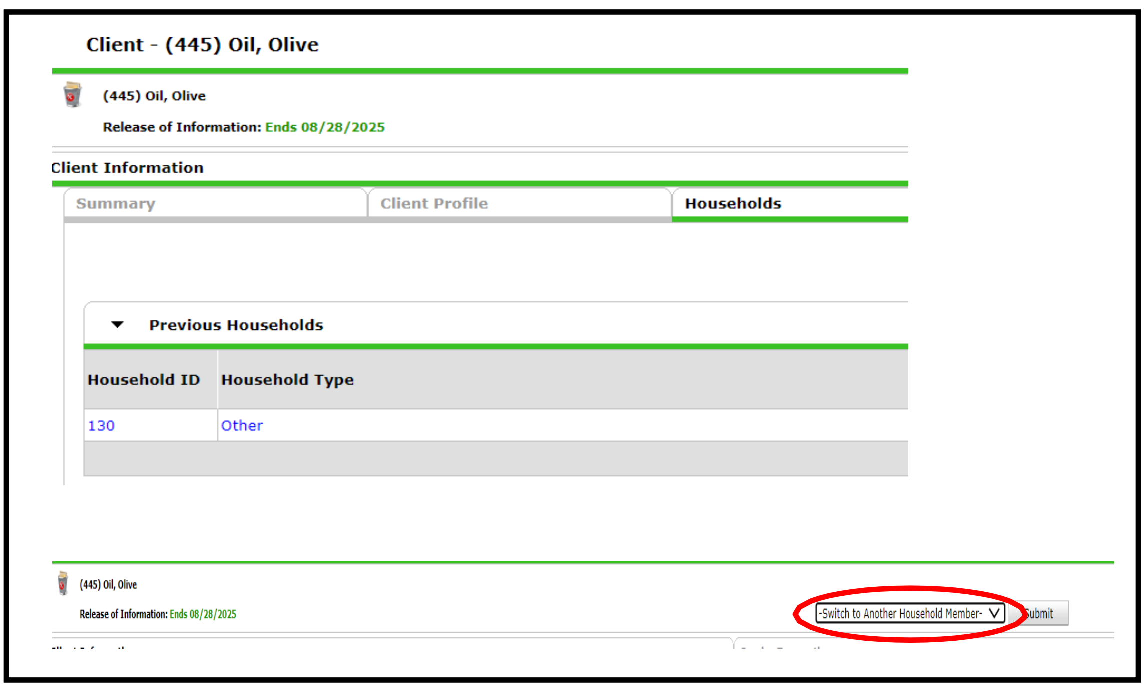
Step 3: After selecting negative sign pop-up box will appear. Enter left date, Save.



Step 4: Once member is removed from household, be sure to update Household Type, Head of Household and Relationship to Head of Household.



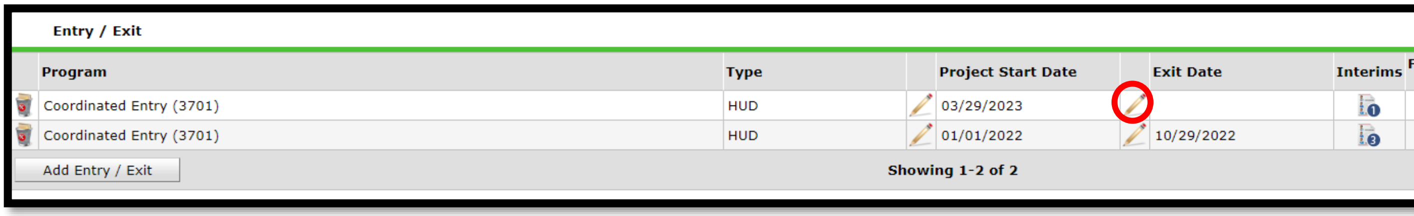
Step 5: History of previous household member will appear in Households tab and in the Switch to Another Household Member drop down to the right of client profile.



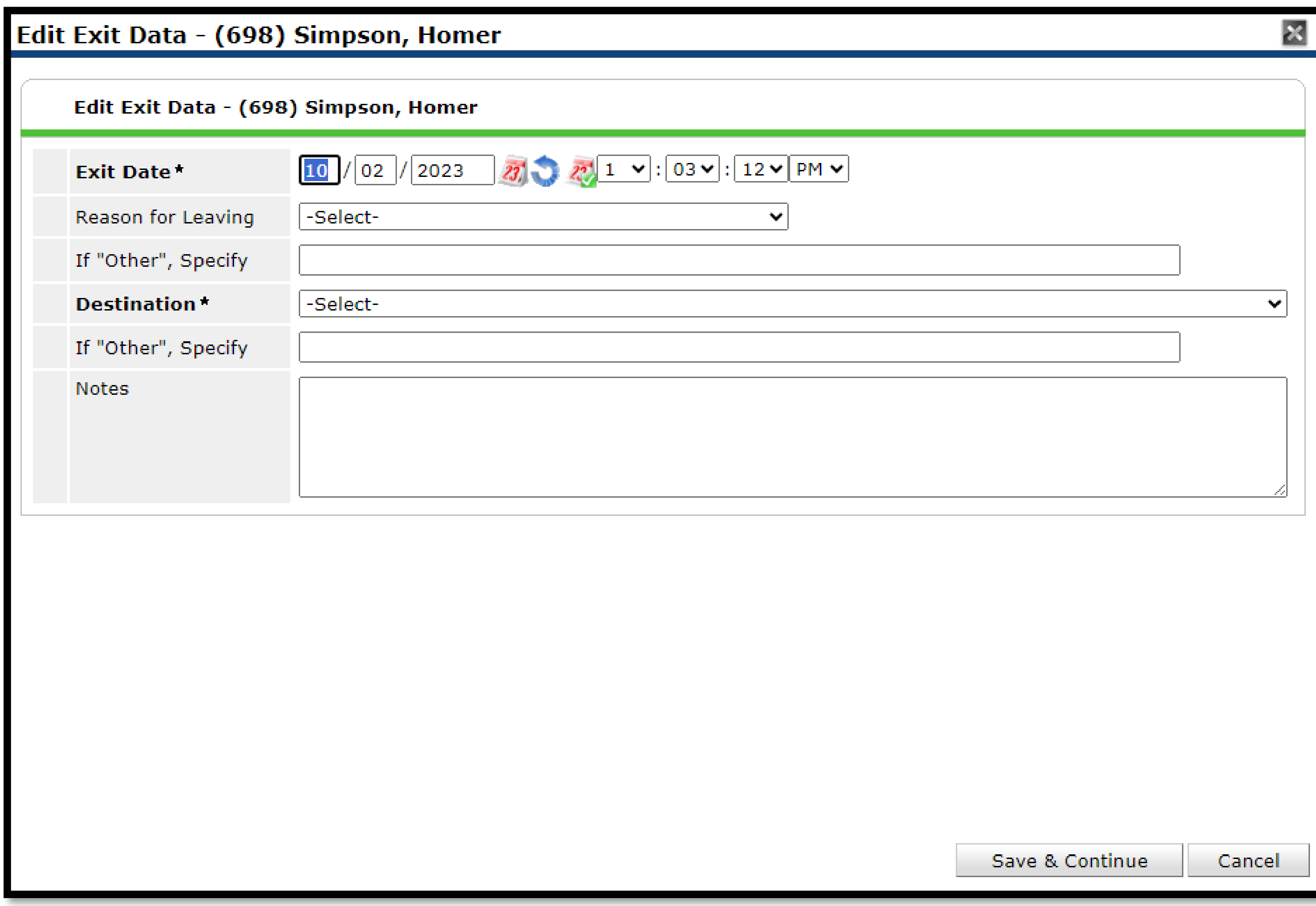
For further assistance with adding/removing household members, please contact HMIS Analyst or CES Management Entity.

EXITING HOUSEHOLDS

1. Click on exit date pencil (Ensure you click on all household members if applicable)



2. Answer the questions in Edit Exit Data box to include
   A. Exit date and time
   B. Reason for leaving (Please mark Completed Program for all Positive Exits)
   C. Destination (Please reference the HMIS Exit Destination guide)
   D. In Notes, please include additional information such as note writer, agency name, complex, voucher name, or any pertinent information
   E. Save & Continue



3. Complete Exit Assessment tab containing CES data elements
4. At minimum answer for current living situation and CES Assessment

Entry Assessment | **Exit Assessment**

Household Members

(698) Simpson, Homer
Age: 67
Veteran: No (HUD)

CES Update Exit Date: 10/02/2023 01:03:12 PM

Current Living Situation

		Start Date *	End Date	Information Date	Current Living Situation
		04/04/2023	04/04/2023	04/04/2023	Place not meant for habitation (HUD)
		03/29/2023	03/29/2023	03/29/2023	Emergency shelter, incl. hotel/motel paid for w/ ES voucher, or RHY-funded Host Home shelter (HUD)
		03/29/2023	03/29/2023	03/29/2023	
		05/21/2022	05/21/2022	05/21/2022	Emergency shelter, incl. hotel/motel paid for w/ ES voucher, or RHY-funded Host Home shelter (HUD)
		03/21/2022	03/21/2022	03/21/2022	Place not meant for habitation (HUD)

Add **Showing 1-5 of 7** First Previous Next Last

Coordinated Entry Assessment

		Date of Assessment *	End Date	Assessment Location	Assessment Type	Assessment Level	Prioritization Status
		04/04/2023	04/04/2023	Madera CAP	In Person	Housing Needs Assessment	Not Placed on Prioritization List
		03/29/2023	03/29/2023	Golden State Triage	In Person	Housing Needs Assessment	Not Placed on Prioritization List
		03/29/2023	03/29/2023	Madera CAP	Phone	Housing Needs Assessment	Not Placed on Prioritization List
		05/21/2022	05/21/2022	Poverello House Outreach	In Person	Crisis Needs Assessment	Not Placed on Prioritization List
		03/21/2022	03/21/2022	Poverello House Outreach	In Person	Crisis Needs Assessment	Not Placed on Prioritization List

Add **Showing 1-5 of 7** First Previous Next Last

5. For Coordinated Entry Event only complete if the event correlates with a drop down

Coordinated Entry Event

		Start Date *	Date of Event *	Event *	Referral Result	Date of Result
		03/29/2023	03/29/2023	Referral to Housing Navigation project or services		
		01/01/2022	01/01/2022	Problem Solving/Diversion/Rapid Resolution intervention or service		

Add **Showing 1-2 of 2**

Coordinated Entry Data Elements Key (CE Key)

All dates entered HMIS should reflect same date of contact (initial and follow-up)

Assessment Level

1. **Crisis Needs Assessment** = Linkage to shelter, wrap-around services
2. **Housing Needs Assessment** = Direct housing linkage (self-resolving, family reunification, VI-SPDAT referral/administration, linkage/matched to housing)

Prioritization Status

1. **Placed on prioritization list** = VI-SPDAT was/will be completed (there should not be multiple entries)
2. **Not placed on prioritization list** = All other services

Events

1. **Referral to a Prevention Assistance project** = Homeless prevention form was completed for screening/assistance (ex: Westcare ESG, TBRA, other HP funding)
2. **Problem Solving/Diversion/Rapid Resolution intervention or service** = Signifies that staff are practicing diversion tactics (linking to family/friends, room and board, self-resolving), referring to Diversion Specialist
    - **Client housed/re-housed in a safe alternative =** Were diversion tactics successful (did client get immediate housing?)
3. **Referral to a scheduled Coordinated Entry Crisis Assessment = Not Applicable**
4. **Referral to a scheduled Coordinated Entry Housing Needs Assessment** = Staff connecting client to be administered a VI-SPDAT (either from self or another assessor)
5. **Referral to post-placement/ follow-up case management** = Pertains to a person being linked to case management upon exiting residential
    - **Enrolled in Aftercare project** = Outcome of enrollment
6. **Referral to a Street Outreach project or services** = Staff linking client to street outreach program for a homeless verification to be completed or for outreach worker to begin engagement
7. **Referral to a Housing Navigation project or services =** Staff are requesting for self to become navigator or for a navigator to be assigned. *If a client needs to be assigned a navigator other than self, staff are to send email to Community Coordinator for assignment. If you (enterer) are going to be navigator, assign yourself as the case manager.

8. **Referral to Non-continuum services: Ineligible for continuum services = Not Applicable**

9. **Referral to Non-continuum services: No availability in continuum services** = Courthouse services

10. **Referral to Emergency Shelter BED OPENING =** Staff linked client to a shelter after confirming shelter acceptance (ex: Triage Centers, shelter)
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =** Document which shelter (if available) was client linked to
    - **Referral Result =**
        - Select successful referral if CLIENT ACCEPTS bed
        - Select unsuccessful referral if CLIENT REJECTS bed
        - Select unsuccessful referral if PROVIDER REJECTS client
        - Date of result

11. **Referral to Transitional Housing bed/unit opening =** Navigator connects person to Valley Teen Ranch or other Transitional Housing (TH) Project
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =** Document which transitional housing (if available) was client linked to
    - **Referral Result =**
        - Select successful referral if CLIENT ACCEPTS
        - Select unsuccessful referral if CLIENT REJECTS
        - Select unsuccessful referral if PROVIDER REJECTS client
        - Date of result

12. **Referral to Joint TH-RRH project/unit/resource opening = Not Applicable**
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =**
    - **Referral Result =**
        - Select successful referral if CLIENT ACCEPTS
        - Select unsuccessful referral if CLIENT REJECTS
        - Select Unsuccessful referral if PROVIDER REJECTS client
        - Date of result

13. **Referral to RRH project resource opening =** Navigator received match confirmation for a Rapid Rehousing Project (RRH) (ONLY document project selected)
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =** Select/Document which Rapid Rehousing (if available) was client linked to **(Ex: TBRA, RRH, ESG, etc)**
    - **Referral Result =**
        - Select successful referral if CLIENT ACCEPTS
        - Select unsuccessful referral if CLIENT REJECTS
        - Select Unsuccessful referral if PROVIDER REJECTS client
        - Date of result

14. **Referral to PSH project resource opening =** Navigator received match confirmation for a Permanent Support Housing Project (PSH) (ONLY document project selected)
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =**

Select/Document which PSH (if available) was client linked to **(Ex: Shelter Plus Care, Falcon Court, etc)**

- **Referral Result =**
  - Select successful referral if CLIENT ACCEPTS
  - Select unsuccessful referral if CLIENT REJECTS
  - Select Unsuccessful referral if PROVIDER REJECTS client
  - Date of result

15. **Referral to Other PH project/unit/resource opening = Not Applicable**
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =**
    - **Referral Result =**
      - Select successful referral if CLIENT ACCEPTS
      - Select unsuccessful referral if CLIENT REJECTS
      - Select Unsuccessful referral if PROVIDER REJECTS client
      - Date of result

16. **Referral to emergency assistance/flex fund/furniture assistance =** Navigator connected client to agency who can provide specific service (ex: Wings Advocacy, Poverello House, Faith Based organizations, etc.).
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =** Navigator does not have to select a location for this question
    - **Referral Result =**
      - Select successful referral if CLIENT ACCEPTS
      - Select unsuccessful referral if CLIENT REJECTS
      - Select Unsuccessful referral if PROVIDER REJECTS client
      - Date of result

17. **Referral to Emergency Housing Voucher (EHV) =** Navigator receives match confirmation for Emergency Housing Voucher (EHV) (ONLY document if project is selected)
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =** Select Emergency Housing Voucher project
    - **Referral Result =**
      - Select successful referral if CLIENT ACCEPTS
      - Select unsuccessful referral if CLIENT REJECTS
      - Select Unsuccessful referral if PROVIDER REJECTS client
      - Date of result

18. **Referral to a Housing Stability Voucher = Not Applicable**
    - **Location of Crisis Housing or Permanent Housing Referral [Project Name] =**
    - **Referral Result =**
      - Select successful referral if CLIENT ACCEPTS
      - Select unsuccessful referral if CLIENT REJECTS
      - Select Unsuccessful referral if PROVIDER REJECTS client
      - Date of result