BoS SSO Grantee Webinar September 2018



North Carolina Coalition to End Homelessness

securing resources

encouraging public dialogue

advocating for public policy change

Agenda

- SSO Grantee Reporting
- Coordinated Assessment Project workflow
- Prevention and Diverson workflow



What are the SSO reporting needs?

SSO grantees are required to report back to the CoC using 3 main reports:

- 1. By-Name List report (ART)
- 2. Services Transactions (Dashboard)
- 3. Annual Performance Report (Dashboard)



BNL Report – How to Use Tab

How should I use the information on the By-Name List?

The By-Name List results can be used to accomplish the following tasks:

 Identify who is currently experiencing homelessness during the specified time frame by filtering out people with a Housing Move-in date.

2. Identify who has long lengths of time homeless by sorting the Length of Stay (Cumulative) column from longest to shortest cumulative stay.

 Identify special populations experiencing homelessness or being housed by looking at Veteran Status, Chronically Homeless status, and/or Household Type.

4. Identify the counties where people are receiving services by looking at NC County of Service.

5. Identify who may need additional supports/resources by looking at Client Status and filtering for "missing documents," "need case conferencing," or "waiting for housing opening."

6. Identify who has been referred to a housing provider and when they were referred.

BNL Report – How to Use Tab

How is someone removed from the By-Name List?

There are 3 ways someone is removed from the list:

1. Disappearance - the person should have "Cannot be located" under the Reason removed from By-Name List column.

2. Death - the person should have "Deceased" under the Reason removed from By-Name List column.

3. Housed - the person should hve "Housed for 90 days or more" under the Reason removed from By-Name List column.

BNL Report – Key

Client Status

Select one	of the	following:
------------	--------	------------

Missing documents

Needs case conferencing

Waiting for housing opening

In housing search

Housed

Cannot locate currently

Removed from active list

BNL Report – Key

	Select one of the following:
	Referred to emergency shelter/safe haven
	Referred to transitional housing
	Referred to rapid re-housing
	Referred to permanent supportive housing
	Referred to homelessness prevention
	Referred to street outreach
Housing Assessment Disposition	Referred to other continuum project type
	Referred to a homelessness diversion program
	Unable to refer/accept within continuum: ineligible for continuum projects
	Unable to refer/accept within continuum: continuum services unavailable
	Referred to other community project (non-continuum)
	Applicant declined referral/acceptance
	Applicant terminated assessment prior to completion
	Other/specify

BNL Report – Key

	Select one of the following:
Reason removed from By-Name List	Cannot be located
	Deceased
	Housed for 90 days or more

BNL Report- Personally Identifiable Info

Personally Identifiable Information								
HMIS ID	First Name	Last Name	Date of Birth	Ag e	Gender	Veteran? Y or N	Is Client Chronically Homeless? Y or N	Household Type
4	Han	Solo	5/04/1978	40	Male	No (HUD)	No	Unaccompanied Adult 25+ Individual
4	Han	Solo	5/04/1978	40	Male	No (HUD)	No	Unaccompanied Adult 25+ Individual
479038	test	test	2/02/1982	36	Male	Yes (HUD)	No	Family: Adult 25+ Family Member
479038	test	test	2/02/1982	36	Male	Yes (HUD)	No	Family: Adult 25+ Family Member
479038	test	test	2/02/1982	36	Male	Yes (HUD)	No	Family: Adult 25+ Family Member
479038	test	test	2/02/1982	36	Male	Yes (HUD)	No	Family: Adult 25+ Family Member
481427	test	again	1/01/1981	37	Female	No (HUD)	Yes	Unaccompanied Adult 25+ Individual
481427	test	again	1/01/1981	37	Female	No (HUD)	Yes	Unaccompanied Adult 25+ Individual
481427	test	again	1/01/1981	37	Female	No (HUD)	Yes	Unaccompanied Adult 25+ Individual
482624	dad	test	1/01/1990	28	Male	No (HUD)		Family: Adult 25+ Family Member
482624	dad	test	1/01/1990	28	Male	No (HUD)		Family: Adult 25+ Family Member
488104	Test	Test	1/01/1975	43	Male		Yes	Unaccompanied Adult 25+ Individual
488104	Test	Test	1/01/1975	43	Male		Yes	Unaccompanied Adult 25+ Individual
490397	CCP	test	1/01/1980	38	Female	No (HUD)		Family: Adult 25+ Family Member
490397	CCP	test	1/01/1980	38	Female	No (HUD)		Family: Adult 25+ Family Member
490400	CCPA	test	1/01/1950	68	Female	Yes (HUD)		Family: Adult 25+ Family Member
490400	CCPA	test	1/01/1950	68	Female	Yes (HUD)		Family: Adult 25+ Family Member

BNL Report- Homeless Provider Info

Homeless Provider Information						
NC County of Service	Current Provider	Project Entry Date	Project Exit Date (If Applicable)	Length of Stay	Length of Stay (Cumulative)	
Rowan	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	971072018		3	6	
Rowan	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	9/10/2018		3	6	
Rowan	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	9/10/2018		3	10	
Rowan	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	9/11/2018		2	10	
Rowan	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	9/10/2018		3	10	
Rowan	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	9/11/2018		2	10	
Rowan	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	9/10/2018		3	6	
Rowan	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	971072018	9/10/2018	0	6	
Rowan	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	971072018		3	6	
	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	971172018		2	4	
	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	971172018		2	4	
Rowan	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	971072018		3	6	
Rowan	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	971072018		3	6	
Wake	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	971072018		3	5	
Wake	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	971172018		2	5	
Wake	Heading Home - Rowan County - Emergency Shelter - State ESG(7389)	971072018		3	5	
Wake	NC Balance of State - Region 5 Coordinated Assessment Project(7595)	971172018		2	5	

BNL Report- Assessment Status

Assessment Status								
VI-SPDAT Complete? Y or N	VI- SPDAT Date	VI- SPDAT Score	Family VI- SPDAT	Youth VI-SPDAT				
Yes	9/10/2018	11						
Yes	971072018	11						
Yes	971072018	12						
Yes	9/10/2018	12						
Yes	9/10/2018	12						
Yes	971072018	12						
Not Yet								
Not Yet								
Not Yet								
Yes		12						
Yes		12						
Yes	971072018	10						
Yes	971072018	10						
Yes			17					
Yes			17					
Yes			17					
Yes			17					

BNL Report- Case Conferencing

	Case Conferencing							
Case Conferencing Date	Client Status	Housing Assessment Disposition	Date referred to a housing provider	Housing Move-in Date	Date removed from By-Name List	Reason removed from By-Name List		
	Missing documents	Referred to street outreach						
	Missing documents	Referred to street outreach						
	Needs case conferencing							
	Needs case conferencing							
	Needs case conferencing							
	Needs case conferencing							
	Missing documents							
	Missing documents							
	Missing documents							
				9/11/2018				
				9/11/2018				
	Needs case conferencing	Referred to emergency shelter/safe haven						
	Needs case conferencing	Referred to emergency shelter/safe haven						
				9/10/2018				
				9/10/2018				



Service Transactions Report

Report Options	
Provider *	NC Balance of State - Region 7 Coordinated Assessment Project (7465)
Provider Search Type *	The selected provider ONLY
Services *	Needs Entered by my provider
	Services Provided by my provider (Non-shelter stays)
	Shelter Stays provided by my provider
	Needs Referred to my provider
	Referrals Made by my provider
Service Code	Choose Service Code Clear
Need Date Range	09 / 01 / 2018 🧃 🔿 🤯 09 / 21 / 2018 🗃 🔿 🦉
Service Provided Date Range	
Need Outcome	-All-
	Build Report Download Results

Service Transaction

Need Date	Name	Need Type	Created By	Referred To	Service	Service Provider
09/15/2018	(13) One, Test	Housing Related Coordinated Entry	Heading Home - Rowan County - Emergency Shelter - State ESG	NC Balance of State - Region 7 Coordinated Assessment Project		
09/21/2018	(13) One, Test	Homeless Permanent Supportive Housing	NC Balance of State - Region 7 Coordinated Assessment Project	Heading Home - Rowan County - Permanent Supportive Housing - HUD		
				Showing 1-2 of 2		



Report Options	
Provider Type	Provider Reporting Group
Provider *	NC Balance of State - Piedmont (Region 5) Coordinated Assessment Project (7595) ▼ <u>This provider AND its subordinates</u>
Program Date Range *	09 / 01 / 2018 🔊 🖏 to 09 / 24 / 2018 🔊 🖏
Entry/Exit Types *	Basic Center ProgramImage: Center Program
Build Report	Download Clear

5a - Report Validations Table	
Report Validations Table	
1. Total Number of Persons Served	7
2. Number of Adults (age 18 or over)	7
3. Number of Children (under age 18)	0
4. Number of Persons with Unknown Age	0
5. Number of Leavers	1
6. Number of Adult Leavers	1
7. Number of Adult and Head of Household Leavers	1
8. Number of Stayers	6
9. Number of Adult Stayers	6
10. Number of Veterans	2
11. Number of Chronically Homeless Persons	1
12. Number of Youth Under Age 25	0
13. Number of Parenting Youth Under Age 25 with Children	0
14. Number of Adult Heads of Household	6
15. Number of Child and Unknown-Age Heads of Household	0
16. Heads of Households and Adult Stayers in the Project 365 Days or More	0
6a - Data Quality: Personally Identifiable Information	

Data Element	Client Doesn't Know/Client Refused	Information Missing	Data Issues	% of Error Rate
Name (3.1)	0	0	0	0%
SSN (3.2)	0	5	1	86%
Date of Birth (3.3)	0	0	0	0%
Race (3.4)	0	0		0%
Ethnicity (3.5)	0	0		0%
Gender (3.6)	0	0		0%
Overall Score				86%

15 - Living Situation					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	2	2	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Place not meant for habitation	5	5	0	0	0
Safe Haven	0	0	0	0	0
Interim Housing	0	0	0	0	0
Subtotal	7	7	0	0	0
Institutional Settings					
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Foster care home or foster care group home	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Locations					
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Staying or living in a friend's room, apartment or house	0	0	0	0	0
Staying or living in a family member's room, apartment or house	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	7	7	0	0	0

23b - Exit Destination - 90 Days or Less					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	1	1	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Subtotal	1	1	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	0	0	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Subtotal	0	0	0	0	0

Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	1	1	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%

SSO-CE Projects in HMIS





4 Pre-HMIS Workflows: Pick a Path



HMIS Workflow



**Clients served by DV agencies are not entered into RCAP, but may be entered into HMIS by a HMIS participating PH project. All clients served by DV agencies will be included on the BNL for prioritization and case conferencing purposes.



Accepting HMIS shelter referral



-The SSO grantee <u>must</u> use Enter Data As (EDA) to access the Regional Coordinated Assessment Project (RCAP)

-This is the **only** way to accept the HMIS-participating shelter referral

Access Coordinated Assessment Project

Select EDA before entering client data!!



Provider Search Results

M N O P 0 G Provider Level Phone Click the green circle to NC Balance of State - Region 7 Coordinated Assessment Project Level 5 Unknown 2 select the Coordinated (7465)Assessment Project – NC Balance of State - Region 7 SSO Level 5 Unknown Prevention and Diversion (7466) will vary by region The sum of the set of the set D-----

Backdate if not entering data same day



	Back Date Mode	
Enter date Click Set Back	Back Date Mode allows you to enter historic information for a client. 10 / 08 / 2017 2 ▼: 00 ▼: 00 ▼ AM ▼ Set Back Date Cancel	

How Back Date Mode should look

Top ribbon is yellow when in Back Date mode



Monitor unaccepted referrals

Look at the Counts report on the Home screen dashboard to see number of unaccepted referrals

💋 Counts Report
Outstanding Incoming Referrals:
→ 6

Count Details

Outstanding Incoming Referrals

×

		intering incom	ing iterer				
	Clie nt ID	Call Record ID	Group ID	Household ID	Referral Date	Referral Ranking	Need Type
	13				09/15/2018	High	Housing Related Coordina
	22				08/12/2018		Case/Care Management
	82				08/12/2018		Case/Care Management
Click on the	92				08/01/2018	Medium	Housing Related Coordina
HMIS ID to	104				08/01/2018	Medium	Housing Related Coordina
accors client	303				08/01/2018	High	Housing Related Coordina
	4						۱. ۲
record	Downle	oad Full Report			Showing 1-	-6 of 6	

View and accept shelter referral in service transaction



Open Referral Editing

Client - (13) One, Test

(13) One, Test Release of Information: None			
Client Information			Y
Needs	Services		Referrals
All Service Transactions			
Select Dates	Start Date		
-Select-		21) 🤍 22	
Transaction Type	Date	Provider	
📝 🐜 📷 🕅 Need	09/15/2018	Heading Home - Rowan County - Emergenc	y Shelter - State ESG
🥖 🗑 Referral	09/15/2018	NC Balance of State - Region 7 Coordinated	Assessment Project
K			
3	Click pencil to vie actual shelter ref	ew the erral	

Add VI-SPDAT if needed

Search for VI-SPDAT score

×

Referral Data	4
Referred-To Provider	NC Balance of State - Region 7 Coordinated Assessment Project (7465)
Needs Referral Date *	09 / 15 / 2018 👼 🔿 🦉 2 ▼ : 00 ▼ : 00 ▼ AM ▼
Referral Ranking	High v
VI-SPDAT Score	10 Recorded using VI-SPDAT v2.0 (Individual) on 09/01/2018 by Heading Home - Rowan County - Emergency Shelter - State ESG (7389) Search Clear
TAY-VI-SPDAT Score	Please Select a TAY-VI-SPDAT Score Search Clear
VI-FSPDAT Score	Please Select a VI-FSPDAT Score Search Clear
Referral Outcome	-Select-

Select VI-SPDAT Score

Household Members	(V	VI-SPDAT v2.0 (Individual)				VI-SPDAT 1.0				
(13) One, Test Age: 48		Provider	Start * Date	PRE- SURVEY	A. HISTORY C HOUSING ANI HOMELESSNE	F B. SS RISKS	C. SOCIALIZATION & DAILY FUNCTIONS	D. WELLNESS	GRAND TOTAL	
	•	Heading Home - Rowan County - Emergency Shelter - State ESG (7389)	09/01/2018	0	0	4	2	4	10	
		5 C re	lick + sig eferral if	n to a not a	show add VI-SI Ilready ir	PDAT	score to ed in referi	ral		

Update Referral Outcome

Household Members

This Client is not a member of any Households.

💋 Need Informat	🖉 Need Information							
Need	Housing Related Coordinated Entry (BH-0500.3200)							
Provider	Heading Home - Rowan County - Emergency Shelter - State ESG (7389)							
Date of Need	09/15/2018 02:00:00 AM							
Amount if Financial	No amount entered.							
Notes	No notes entered.							

Referral Data

Referred-To Provider	NC Balance of State - Region 7 Coordinated Assessment Project (7465)
Needs Referral Date *	09 / 15 / 2018 🕂 🥸 2 ▼ : 00 ▼ : 00 ▼ AM ▼
Referral Ranking	High T
VI-SPDAT Score	10 Recorded using VI-SPDAT v2.0 (Individual) on 09/01/2018 by Heading Home - Rowan County - Emergency Shelter - State ESG (7389) Search Clear
TAY-VI-SPDAT Score	Please Select a TAY-VI-SPDAT Score Search Clear
VI-FSPDAT Score	Please Select a VI-FSPDAT Score Search Clear
Referral Outcome	Accepted
	Review information, change
	Referral Outcome to
	Accepted, then click Save &
	Evit to leave referral screen
Complete RCAP entry after accepting the shelter referral



The SSO grantee will need to use Enter Data As and Back Date mode to complete a Release of Information (ROI), full entry into the Regional Coordinated Assessment Project (RCAP), VI-SPDAT (if not already completed), and NCCEH Coordinated Assessment Form.

*This is where the SSO Outreach and Non-HMIS workflows intersect with the HMIS

Release of Information (ROI) Tips

- Triggers security, visibility and sharing
- For <u>every</u> client served
- Must match project name at entry (level 5)
- Good for one year

Option to attach paper documentation to record in HMIS



Click on the ROI tab

lient Informa	ition				Service Transactions					
Summary	Client Profile	Households	ROI	Entry /	Exit	Case Managers	Case Plans	Measurements	Assessments	

Adding an ROI in ClientPoint

Client - (13) One, Test

(13) One, Test Release of Information: None									
Client Information									
Summary	Client Profile	Households	ROI						
Release of Informatio	n								
Provider									
Add Release of Information									

Enter an ROI for Client



Add full entry for RCAP

(13) One, Test Release of Information: E	inds 09/19/2019			3	
ent Information	Client Profile	Housebolds) POT	Service Transa	ctions
Entry / Exit					
Program			Туре		Project Start Dat
-		er - State ESG (7389)	HUD	1	09/01/2018
Heading Home -	Rowan County - Emergency Shelte				
Heading Home - Add Entry / Exit	Rowan County - Emergency Shelte				Showing 1-1

Pick Entry Type

Project Start Data -	(13) One, Test	×
Household Membe	rs	
This Client is not a me	mber of any Households.	
Project Start Data	- (13) One, Test	
Provider* Type* Project Start Date*	NC Balance of State - Region 7 Coordinated Assessment Project (7465) HUD ▼ 09 / 20 / 2018	
4	Make sure Type is HUD and Provider and Start Date are correct before clicking Save & Continue to access entry questions and VI-SPDAT	Cancel

Complete Entry Assessment UDEs

Entry Assessment

Household Members		NC HMIS CoC Inta	ke (3.917B)			Ent	ry Date: 09/20/	2018 05:40:44 PN	
(13) One, Test Age: 48 Veteran: No (HUD)	<u>Gen</u> **A	eral Demographic I NSWER FOR ALL CL	information: IENTS, INCLUD	ING CHILDRE	N unless specifie	ed otherwise*	*		
		Relationship to Head (Household	Self (hea	d of household)			▼G	
	I	Date of Birth	01 / 01	/ 1970 🥂	🔿 🥂 G				
		Date of Birth Type	Full DOB	Reported (HUD))	▼G			
5	(Gender	Female			▼ G			
Click each househo	Ы	Primary Race	Black or /	African America	▼ G				
	iu ,	Secondary Race	Black or /	African America	an (HUD)	▼ G			
member to answer	I	Ethnicity	Non-Hisp	anic/Non-Latin					
their entry question	าร								
Use for Individuals:									
VI-SPDAT v2.0 (Indiv	vidual)							
Start Date *		PRE-SURVEY	A. HISTORY OF HOUSING AND HOMELESSNESS	B. RISKS	C. SOCIALIZATION & DAILY FUNCTIONS	D. WELLNESS	GRAND TOTAL		
09/01/2018		0	0	4	2	4	10		
Add		Showing 1-1 of 1							
	6	Scroll to k	oottom of	entry a	ssessmen	t to add	а		

VI-SPDAT score if not already completed

Start the NCCEH Coordinated Assessment Form

SSO grantee stays EDA'd to complete the NCCEH Coordinated Assessment Form

The SSO grantee <u>must</u> use Enter Data As and Back Date mode to start the NCCEH Coordinated Assessment Form.

The SSO grantee will return to this form once the client has been referred to a Permanent Housing (PH) project or any other information needs to be updated.

Complete the NCCEH Coordinated Assessment Form



Add/Update Information

NCCEH Coordinated Assessment Form						
Client Status Information						
Is Client Chronically Homeless?	Yes T G					
If yes, is chronic verification attached?	Yes 🔻 G					
Client Status	Needs case conferencing T G					
Coordinated Assessment Dates						
VI-SPDAT Date	09 / 20 / 2018 🔊 🏹 G					
Date case conferences	09 / 24 / 2018 🛛 🔊 🎘 G					
Housing Assessment Disposition (Coordinated Assessment)	-Select- G					
If Other Housing Assessment Disposition, specify (Coordinated Assessment)	G					
Date referred to a housing provider	// 🥘 🧭 🦝 G					
Housing Move-in Date	// 🧖 🎝 🧟 G					
Please do not remove clients from your community's Active By Name List without approval.	Dates and reasons should be confirmed prior to data entry					
Date removed from Active By-Name List	// 🥘 🥘 🦓 G					
Reason client was removed from Active By-Name List	-Select- 🔻 G					
Print Assessment						



Run the By-Name List report to prepare for case conferencing

SSO grantee attends case conferencing meeting to review BNL and discuss next steps SSO grantee leaves EDA mode to run the By-Name List in ART as often as needed and adds DV clients

The SSO grantee must access ART in order to run the BNL report for review at the case conferencing meeting.

The SSO grantee must manually add DV clients to the final BNL report to ensure they are also discussed and prioritized at the meeting.

Access the By-Name List report in ART

Advanced Reporting Tool

Click the black ART Browser triangle then scroll to Inbox Provider Specific Favorites Available Reports and Templates Bowman Systems Resources 2 Click the black Public Folder triangle then scroll down to Provider Specific NC-503 folder Data Center at NCCEH ESG Grantees NC-500 Forsyth NC-501 Buncombe Click black triangle, 3 NC-502 Durham then scroll down to NC-503 Balance of State 2017 HIC/PIT By-Name List report CoC Application 0212-Duplicate Clients In SP - v2 NCCEH CoC 2016- Weekly ECCCM Payment Pending Report Click magnifying 4 All Clients Demographics Report -Additional County Tabs - Group (Andrea's Edit) glass next to the By-Red and Unit Utilization By Provider 2017 By-Name List of People Experiencing Homelessness Name List report NCCEH VI-SPDATv2(Family & Singles) By Name List

Permanent Housing referral post case conferencing

SSO grantee refers client to a Permanent Housing project (RRH or PSH) via HMIS

The SSO grantee will refer a client to a Rapid Re-Housing or Permanent Supportive Housing project (via HMIS if possible) depending upon outcome of case conferencing. Use EDA and Backdate mode (if needed) before making referral.

If the client disappears the SSO grantee exits client from the RCAP project after 90 days of no contact.

Permanent Housing referral via HMIS



Referral Provider Quicklist



dropdown and click Add Provider

Check Referral Information

Provider Type Phone Location Lest Updated Heading Home - Rowan Courty - Permanent Supportive Housing - HUD Level 5 Unknown 09/21/2018 Showing 1-1 of 1 Showing 1-1 of 1 Showing 1-1 of 1 Referral Date 09/21/2018 Image: Select - Image:	Selected Providers					
Indexing Home - Rowan County - Permanent Supportive Housing - HUD Level 5 Unknown Unknown 09/21/2018 Showing 1-1 of 1 Refer to Providers Referral Date 09/21/2018 Select - I V1-SPDAT Score Projected Follow Up Date Projected Follow Up Date Projected Follow Up Date Referration Providers Make sure all data incl. VI- SpDAT is present and accurate before clicking Save ALL Select - I With ServiceBoint Providers by Emails Referrate Clients Select Of Providers Accurate to Provider Accurate to Pr	Provider 🔺	Туре	Phone	Location	Last Updated	
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Kefer to Providers Referral Date Needs Referral Date 09 //21 //2018 20 16 12 9 1: 12 7 1 AM * Referral Ranking Select * V1-SPDAT Score ID recorded using v1 SPDAT v20 (Individual) on 09/01/2018 by Heading Home * Bream County: Envergency Shelter * State ESG (738) Search Cleare V1-SPDAT Score Please Select a TAV-VI-SPDAT Score Search Clear Make sure all data incl. VI- V1-SPDAT Score Please Select a VI-SPDAT Score Search Clear Make sure all data incl. VI- Projected Follow Up Date V2-SPDAT Score Search Clear Make sure all data incl. VI- Follow Up User V1-C Balance of State - Region 7 Coordinated Assessment Project (7465) SPDAT is pressent and accurate before clickking Save ALL Referral Need State - Region 7 Coordinated Assessment Project (7465) SPDAT is pressent and accurate before clickking Save ALL Referral Need State - Region 7 Coordinated Assessment Project (7465) Search Click Need Save ALL Referral Need State - Region 7 Coordinated Assessment Project (7465) Search Click Need Save ALL Referral Need Save Click Need Save ALL Search Click Need Save ALL Referral Need Save Click Need Save All Need Sa			Showing 1-1 of 1			
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Referrals Send Summar For each outly ServicePoint Providers by Email. Referral ServicePoint Provider Moneless Permanent Supportive Housing Intered - To Provider Interest - To Provider<			berc	ore clicking Save	2 ALL	
Homeless Permanent Supportive Housing Referred Clients Iter of Need * Op / 21 / 2018 Selected Needs Need Need Amount if Financial Need Status / Outcome / If Not M Identified Service Pending * Identified Service Pending * Imove All Needs	Check to notify ServicePoint Providers by Email.				Send Summary	
Instruction of the ending	erred-To Provider Hon	eless Permanent Sun	portive Housing	Ref	erred Clients	
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Homeless Permanent Supportive Housing (BH-8400.3000) Service Pending T Service Pending T -Select-	Need	Amount if Financi	ial Need Status /	Outcome / If Not M t, Reason	Notes	
-Select-	Homeless Permanent Supportive Housing (BH-8400, 3000)		Service Pending	▼		
emove All Needs			-Select-	▼		
	emove All Needs					

Update the NCCEH Coordinated Assessment Form

SSO grantee EDA's into RCAP to update the NCCEH Coordinated Assessment Form

The SSO grantee will need to use Enter Data As and Back Date mode to update the NCCEH Coordinated Assessment Form to reflect referral to a Permanent Housing (PH) project.

Update the NCCEH Coordinated Assessment Form



Update/Add information

N	CCEH Coordinated Assessment Form		
Client !	Status Information		
	Is Client Chronically Homeless?	Yes 🔻 G	
	If yes, is chronic verification attached?	Yes 🔻 G	
	Client Status	Needs case conferencing 🔹 G	
Coordi	nated Assessment Dates		
	VI-SPDAT Date	09 / 20 / 2018 🧖 🌍 🦓 G	
	Date case conferences	09 / 24 / 2018 🛛 🥂 💙 🦓 G	
	Housing Assessment Disposition (Coordinated Assessment)	-Select-	T
	If Other Housing Assessment Disposition, specify (Coordinated Assessment)] G
	Date referred to a housing provider	//	
	Housing Move-in Date	//	
Please o	to not remove clients from your community's Active By Name List without approval.	Dates and reasons should be confirmed prior to data entry	
	Date removed from Active By-Name List	// 🧖 😋 🦓 G	
	Reason client was removed from Active By-Name List	-Select- 🔻 G	
P	rint Assessment		



4

Next Steps



This part of workflow is completed by the Permanent Housing project that accepts the referral.

Exit from RCAP and remove from BNL

SSO grantee exits client from RCAP after 90 days missing or housed

The SSO grantee will need to exit clients after 90+ days of being housed or 90+ days missing. PH projects will need to notify the SSO grantee when a client is housed. DV agencies can also notify the SSO grantee when it is time to remove DV clients from the BNL.

Add full exit for RCAP

Client - (481427) again, test

(* R	481427) again, tes elease of Informat	t ion: Ends 09/10/2019								
Clien	t Information			Servio	e Trar	isactions				
Sur	Summary Client Profile Households ROI Entry						ise Managers	Case Pl	ans	Measurer
_	Entry / Exit		ust be established on	House	iolds tab before cr	eating Ent	try / Exits			
	Program				Туре		Project Start Da	ate	Exit Date	
Ì	NC Balance of 9 (7595)	sessment Project	HUD	/	09/10/2018					
	•							7		

Click the pencil next to Exit Date to exit client from the RegionalCoordinated Assessment Project

Complete RCAP exit incl Housing Disposition Assessment

Edit Exit Data - (481427) again, test

 -	-	-	-	-
			-	
	2	e	2	
			۰	
	-	a		

Edit Exit Data - (481427) aga	ain, test
Exit Date *	09 / 21 / 2018 🔊 🗞 2 🔻 : 44 🔻 : 59 🔻 PM 🔻
Reason for Leaving	Completed program
If "Other", Specify	
Destination*	Permanent housing (other than RRH) for formerly homeless persons (HUD)
If "Other", Specify	
Notes	
1 Select appropriation f destination f dropdown	priate 2 Select Save & Continue to access rest of exit assessment
	Save & Continue Cancel

Complete the whole Exit Assessment

	Household Members Associated with this Entry / Exit													
		Name	Head of Household		Project Start Date		Exit Date	Interin	ns Follow Ups	Reason for Leaving	Destination			Notes
A	ŵ	(481427) again, test		/	09/10/2018	/	09/21/2018	E.	E.	Completed program	Permanent housi formerly homele	ng (other than RRI ss persons (HUD)	H) for	
Ir	nclud	le Additional Ho	usehold Membe	ers					Shov	ving 1-1 of 1				
E	ntry	Assessment							Exit Asse	ssment				
	н	Iousehold Men	nbers		NC HMIS Exit						Exit	Date: 09/21/2018	02:44:59 PM	4
	(48 Age Vet	1427) again, test e: 37 eran: No (HUD)		Answ H	er Following 3 (ousing Assessm	Quest	tions For Prev	ention P	rojects On	ly				
			E: If he Ir	kit Able to mainta ousing at entry, iformation	in Sub	sidy -Sele	ct-] G		- G	
				If	Moved to new nit, Subsidy info	hous orma	ing tion -Selec	ct-		▼G				
				Ir	overed by Heali Isurance	n	No (HUD)		▼ G				
				(Realth Ins	uran	ice					HUD \	/erification	
					Start Date	*	Health Insu Type	urance o	Covered?	(HOPW Insura	A) If Private Pay nce, Specify	(HOPWA) If No, Reason not covered	End Date	
*	Re	view all	of the	/	09/10/2018	3	Other	I	Vo					
e>	kit	informa	ntion to	/	09/10/2018	3	State Healt Insurance Adults	th for I	Vo					
eı	ensure accuracy		iracy	/	09/10/2018	3	Indian Health Services Program		No					
				/	09/10/2018	3	Private Pay Health Inst	urance I	No					
				/	09/10/2018	3	Veteran's Administra (VA) Medic Services	tion r al	No					

Complete Housing Assessment Disposition

🔍 Non-Cash Benefits					HUD Ve	rification 🛕	
Source of Non-Cash * S Benefit	tart Date *	End Date		Amount of Non-Cash Benefit	Receiving I	Benefit?	
Add							
Housing Assessment Disposition (Coordinated Assessment)	-Select- -Select-	sholtor/opfal			•	G	
If Other Housing Assessment Disposition, specify (Coordinated Assessment)	 Referred to emergency shelter/safe haven Referred to transitional housing Referred to rapid re-housing Referred to permanent supportive housing 						
🔍 Contact Information	Referred to street outre Referred to other contin	ach nuum project	type				
Start Date * Add	Referred to a homelessness diversion program Unable to refer/accept within continuum; ineligible for continuum projects Unable to refer/accept within continuum; continuum services unavailable						
🔍 Outreach	Applicant declined refer Applicant terminated as	ral/acceptancessment pri	e or to completi	on			
Date of Contact Stayin ES, or	SH Start Da	te*	End Date	Notes	6		
Add							
Click Save	& Exit once exit		Sa	ave S	ave & Exit	Exit	



Approved Service Codes

The SSO grant allows specific services. BoS has identified the service codes that should be used to identify these services

Service Code Name	SSO Grantee Activity		
Housing related coordinated entry	VI-SPDAT assessment		
Homeless diversion programs	P&D screen		
Homelessness Prevention programs	Prevention Activities		
Street Outreach Programs	Street outreach Activities		
	Developing housing plan/other		
transitional case/care management	case management		
specialized information and referral	Information/referrals		
system advocacy	system advocacy		
Housing Complaints	Handling grievances		
	Service Code Name Housing related coordinated entry Homeless diversion programs Homelessness Prevention programs Street Outreach Programs transitional case/care management specialized information and referral system advocacy Housing Complaints		

Service Transactions

Services transactions should be used whenever an assessment is completed or service is provided by SSO grantee

Client - (173) Marie, Bobby Brown

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	(173) Marie, Bob	by Brown											
	Release of Inform	nation: Ends 09/18/20		-									
Clie	Client Information						Service Transactions						
Su	ımmary	Client Profile	Households	ROI	Entry ,	/ Exit	Case Managers	Case	Plans	Measurements	Ass	essmen	ts
Reminder: Household members must be establ Entry / Exit				nust be establ	ished on H	ouseholds tab before	creatin	ng Entry / Ex	kits				
	Program				Туре		Project Start Date	E	xit Date	Interims	Follow Ups	Client Count	
ţ	NC Balance of (7466)	of State - Region 7 S	SSO Prevention and	Diversion	HUD		09/18/2018	/		Ē.	E.	ø	Å.
	Add Entry / E	xit				s	howing 1-1 of 1						

Add Service



Add dates, and Service Type

Client - (173) Marie, Bobby Brown

	(173) Marie, Bobby Brown							
	Release of Information: Ends 09/18/2019							
Clie	ent Information Service Transactions							
	Add Service							
	▼ Household Mem	bers	ers if					
т	his Client is not a me	mber of any Households.						
	Service Provider *	Auto-populates to						
ſ	Creating User	Nicole Purdy		your EDA mode				
	Start Date *	09 / 18 / 2018 💐 🔿 🤯 4 🔻 : 30 V : 52 V PM V						
	End Date	09 / 18 / 2018 Ø 2019 2019 09 / 18 / 2018 Ø 2019 00 00 00 00 00 00 00 00 00 00 00 00 00						
	Service Type *	Homeless Diversion Programs (BH-0500.3100)	Look Up					
	Provider Specific Service	-Select- V						

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Check household members, then scroll down for more details

Client Information		Service Transactions						
Edit Service	Edit Service							
▼ Household Mem	▼ Household Members							
This Client is not a me	ember of any Households.							
Service Provider *	/ NC Balance of State - Region 7 SSO Prevention and Diver	rsion (7466)						
Creating User	Nicole Purdy							
Start Date *	09 / 18 / 2018 🧃 🔿 🦧 4 🔻 : 30 🔻 : 52 🔻 PM 🔻							
End Date	09 / 18 / 2018 🧖 🔿 🦧 4 🔻 : 31 🔻 : 23 🔻 PM 🔻							
Service Type *	/ Homeless Diversion Programs (BH-0500.3100)							
Provider Specific Service	-Select- •							
Service Notes								

Skip the next few options

These may not apply to your projects

Service Costs							
Number of Units							
Unit Type	-Select- V						
Cost per Unit	\$						
Total Cost of Units	\$						
Apply Funds for	Apply Funds for Service						
Conditional Commitments							
Responsible P	arty 🔺		Condition	Due Date	Status		
Add Conditional Comm	itment Print Commitment Letter		No matches.				

Support Documentation

- Optional, but helpful electronic record
- Add File Attachments under Support Documentation

	Support Documentation			
	Date Added Name	Descripti	on Ty	ype
-	Add Support Documentation		No matches.	
•				
	Upload Support Documentati	on 🛛 🔀		
	Name * Choose File No file	chosen		
	Description	<	Add file and a brief	
		//		
		Upload Cancel		

Complete the Service Transaction with Need Information

Does this service require further action in or out of HMIS?

• Make sure that if the Need Status is not "Closed" there is a plan to close it

Г	Follow Up Information	J					
	Projected Follow Up Date						
	Follow Up User	Canceled Closed Identified		y - Fresh Start II RRH - HUD (7168)	¥		
	Follow Up Made	In Progress No Show					
	Completed Follow Up Date	z-ECCM Counseling Appointment Pen z-GUM Blessed Table	ding				
	Need Information	z-GUM Market St z-SAG FPFA Default Amt Paid					
	Need Status*	Identified	•]			
	Outcome of Need	-Select-					
	If Need is Not Met, Reason	-Select	T]			
		Not Met Partially Met Service Pending			Save	Save & Exit	Exit

Add Services (can use Multiple if needed)



Add dates, Service Code and Need Status

▼ Household Mem	Add house	old members if						
This Client is not a me	is Client is not a member of any Households.							
Multiple Services								
Be sure to	select the correct Provider before entering data in defaults. Any dat	he Service List below. If you change the Provider, the page will refresh to make adjustments for the new Provider's Service List that is currently in the Service List will be removed and will need to be re-entered.						
Service Provider*	NC Balance of State - Region 7 SSO Prevention and D	version (7466) 🔹 🔶 Auto-populates to						
Start Date *	09 / 18 / 2018 🔊 🏹 5 🔹 : 46 🔻 : 54 🔻 1	your EDA mode						
End Date	09 / 18 / 2018 🧖 🕽 🦉 5 🔻 : 46 🖲 : 54 🕇	M						
Service List								
		Number of Services 1 Need Status Identified Set All						
Number of Services	* 1	Confirm Service						
Service Type	Homeless Diversion Programs (BH-0500.3100)	Type and Update						
Need Information		Need Status						
Need Status *	Identified •							
		Remove Clear						
Number of Services	*1							
Service Type	Homelessness Prevention Programs (BH-0500.3140)	Confirm Service						
Need Information		Type and Update						
Need Status *	Identified •	Need Status						
		Remove Clear						
		Add Another Remove All Clear All						
		Save & Exit Cancel						


Workflow: Prevention and Diversion



Initial Assessment of Eligibility (via paper form)

NC Balance of State Prevention and Diversion Screen Form

Initial Homeless Assessment

_	Are you homeless or do you believe you will become homeless in the next	72 ha	ours?	
	Yes		No	

2. Are you currently residing with, or trying to leave an intimate partner, family member, caregiver, or other person in your home who threatens you or makes you fearful? No D Yes



1

If yes to Question 2, refer to DV resources. If yes to second question, clients are referred to DV resources and DO NOT PROCEED WITH THIS ASSESSMENT or any part of the Coordinated Assessment process

Interim Housing

medical facility

3. Where did you sleep last night?

- Π Place not meant for habitation Foster care home or foster care group home
- Jail, prison or juvenile detention facility
- Psychiatric hospital or other psychiatric facility
- Hotel or motel paid for without emergency п shelter voucher
- Owned by client, with ongoing housing subsidy
- Rental by client, no ongoing housing subsidy
- Rental by client, with GPD TIP subsidy Residential project or hallway house with no
- homeless criteria Staying or living in a friend's room, apartment
- п or house
- п Client doesn't know
- Emergency Shelter, including hotel or motel п paid for with emergency shelter voucher
- Substance abuse treatment facility or detox center Owned by client, no ongoing housing subsidy Permanent housing (other than RRH) for formerly homeless persons Rental by client, with VASH subsidy

Long-term care facility or nursing home

Hospital or other residential non-psychiatric

- Rental by client, with other ongoing housing subsidy (including RRH)
- Staying or living in a family member's room, apartment or house
- Transitional housing for homeless persons (including homeless youth)
- Client refused

4. Was it a safe location? Yes E No

5. If client is literally homeless: How long have you stayed there?	 Less than 2 weeks 	 Longer than 2 weeks
If client is literally homeless for less than 2 weeks, skip to gatherin literally homeless for more than 2 weeks, start VI-SDPAT. If client	ng demographic infe t is fleeing DV, refe	ormation. If client has been r to DV resources.
If the client is not literally homeless and they answered no to Question 1, 6. Will you be forced to leave your current housing in the part 14	ask:	5 No.

days?

7. If yes, is it for any of the following reasons:

- In a hotel/motel, client does not have the resources to pay for the room for more than 14 days.
- In a rental unit, client has received a court order to leave in the next 14 days.
- In a rental unit owned or leased by someone else, that person is requiring the client to leave the unit in the next 14 days.

If the client answers no to #5 or #6, they are not eligible, refer to mainstream resource. If client answers yes to #5 or #6, continue with screen.

Eligibility Categories



Next steps depend on results from Initial Assessment of eligibility

Eligibility Categories

 If person/household is not homeless or at risk of being homeless within 14 days refer them to another resource

 If person/household is fleeing a domestic violence situation refer them to a DV shelter/hotline

Eligibility Categories

- If person/household is literally homeless and has been unsheltered complete the VI-SPDAT and enter them into the Coordinated Assessment Project
- If person/household is newly literally homeless but sheltered or if they will become homeless within 14 days continue with Prevention and Diversion Screen



Start Prevention and Diversion in HMIS

Select EDA before entering client data!!



Provider Search Results

		4		
		# ·	~	Provider Level Phone
Click the green circle	ç	D	٢	NC Balance of State - Region 7 Coordinated Assessment Project Level 5 Unknown (7465)
to select the	→ [D	٢	NC Balance of State - Region 7 SSO Prevention and Diversion (7466) Level 5 Unknown
Prevention and			-	Talanna da af Fatta Dalanda da
Diversion Project				

Backdate if not entering data same day



	Back Date Mode	
Enter date Click Set Back	Back Date Mode allows you to enter historic information for a client. 10 / 08 / 2017 2 ▼: 00 ▼: 00 ▼ AM ▼ Set Back Date Cancel	

Add ROI to ensure proper sharing & visibility

Client - (173) Marie, Bo	bby Brown						ſ
(173) Marie, B Release of Info	obby Brown ormation: None							
Client Informat	tion			Serv	ice Transactions			
Summary	Client Profile	Households	ROI	Entry / Exit	Case Managers	Case Plans	Measurements	Assessments
Release	e of Information er			Permi	sion St	art Date	End Date	
Add Release of Information			Click t	o add a	No matches. P&D releas	se		Exit

Household Men	nbers	
his Client is not a	member of any Households.	
Release of Info	rmation Data	
Provider *	NC Balance of State - Region 7 SSO Prev	vention and Diversion (7466)
Release Granted	* Yes ▼	
Start Date *	09 / 18 / 2018	Make sure information
End Date *	09 / 18 / 2019 🧃 🔿 🤯	accurate before saving
Documentation	Signed Statement from Client	· · · · · · · · · · · · · · · · · · ·
Witness	Rebecca Skloot	

Entry/Exit tab in ClientPoint

Client - (173) Marie, Bobby Brown	ſ
(173) Marie, Bobby Brown Release of Information: Ends 09/18/2019	
Client Information	Service Transactions
Summary Client Profile Households ROI Entry /	Exit Case Managers Case Plans Measurements Assessments

Add P&D project entry

Client - (17	3) Marie, Bobb	y Brown							ſu
(173) Marie, Bob Release of Inform	173) Marie, Bobby Brown 129) Marie, Bobby Brown telease of Information: Ends 09/18/2019 t Information Inmary Client Profile Households ROI Entry / Exit Case Managers Case Plans Measurements Assessments Image: Reminder: Household members must be established on Households tab before creating Entry / Exits Entry / Exit Program Type Project Start Date Exit Date Interims Follow Ups Client Count								
Client Information	n				Service	Transactions			
Summary	Client Profile	Households	ROI	Entry /	Exit	Case Managers	Case Plans	Measureme	nts Assessments
	đ	Reminder: House	hold members must t	oe establis	shed on Ho	useholds tab before	e creating Entry / Ex	kits	
Entry / Ex	it								
Program	Туре		Project Start Date	Exit D	ate	Interi	ms Fo	llow Ups	Client Count
Add Entry / E	Exit 🔶		Service Transactions olds ROI Entry / Exit Case Managers Case Plans Measurements Assessments r: Household members must be established on Households tab before creating Entry / Exits Project Start Date Exit Date Interims Follow Ups Client Count No matches. Exit						
	rie, Bobby Brown f Information: Ends 09/18/2019 mation Service Transactions Client Profile Households ROI Entry / Exit Case Managers Case Plans Measurements Assessme i Reminder: Household members must be established on Households tab before creating Entry / Exits y / Exit m Type Project Start Date Exit Date Interims Follow Ups Client Count httry / Exit No matches.								
									Exit

Entry data: Household + Provider

P	roject Start Data - (173) Marie, Bobby Brown	×
members	Household Members		
entering \longrightarrow	This Client is not a member	of any Households.	
If Provider did not	Project Start Data - (17	3) Marie, Bobby Brown	
autopopulate,	Provider *	NC Balance of State - Region 7 SSO Prevention and Diversion (7466)	
	Type *	HUD	
Select household members entering This Client is not a member of any Households. If Provider did not autopopulate, STOP Select HUD entry type + enter entry date			
enter entry date			

Save & Continue

Cancel

Confirm Prevention and Diversion Screen is selected

Entry/Exit Data

🤹 🛛

Note: If you change the provider selected it may cause the Assessments to adjust for the new Provider's Entry/Exit Assessment defaults. Any information saved to the
 previous Assessment will still be attached to that Assessment record for the Client.

Provider *	NC Balance of Sta	ate - Region 7 SSO Prever	tion and Diver	sion (7466)	•		
Type *	HUD	▼					
	Update						
Household Members Assoc	ciated with this Entry / Exit						
Name	Head of Household	Project Start Date	Exit Date In	nterims Foll	ow Reason for Leaving	Destination	Notes
🕼 흁 (173) Marie, Bobby Brown	1	/ 08/15/2018	/	E E			
Include Additional Household Mer	mbers		Showing 1	-1 of 1			
Entry Assessment							
Colort on Accordment							
Ye	S						
NC HMIS Update	NC HMIS Exit		NC HMIS CoC	Intake (3.9	17B) NCCEH Pr Diversion	evention and screen	
Household Members	NCCEH Preventior	and Diversion screen			Entry Date: 08/1	5/2018 11:09:32 A	м 🔏 🗋
(173) Marie, Bobby Brown							
Veteran: No (HUD)	1 Are you homeles	s *					
	or do you believe y	ou -Select-▼G					
	in the next 72 hour	5?					
	Are you currently residing with, or try	y ying					
	to leave an intimate partner, family	e					
	member, caregiver	or -Select-▼G					
	barren person in you						

Complete Prevention and Diversion Screen Questions

Entry/Exit Data

Note: If you change the provider selected it may cause the Assessments to adjust for the new Provider's Entry/Exit Assessment defaults. Any information saved to the previous Assessment will still be attached to that Assessment record for the Client.

FIOVIDEL		State Region 7 550 Prever	cion and Div	ersion (740		<u> </u>		
Type *	HUD	•						
	Update							
Household Members Ass	ociated with this Entry / Ex	kit						
Name	Head of Household	Project Start Date	on 7 SS0 Prevention and Diversion (7466) •					
👍 巖 (173) Marie, Bobby Brov	vn	08/15/2018	\angle	E.	Ē.			
Include Additional Household M	embers		Showing	1-1 of 1				
Entry Assessment								
Select an Assessment y	'es							
NC HMIS Update	NC HMIS Exit		IC HMIS Co	oC Intake	(3.917)	B) NCCEH Prev Diversion so	ention and creen	
Household Members	NCCEH Preventi	on and Diversion screen				Entry Date: 08/15/2	2018 11:09:32 A	ам 👍
(173) Marie, Bobby Brown Age: 35	INTRODUCTORY QUE	STIONS						
Veteran: No (HUD)	1. Are you homel	ess *						
	or do you believe will become home	you eless -Select-▼G						
^	in the next 72 ho	urs?						
	2. Are you curren	tly						
	residing with, or to leave an intima	trying ate						
n't forget other	partner, family member, caregive	-Select- 🔻 G						
	other person in y	our						

Don't forget to click "Save & Exit"

TOPILLES.	SIVE 33	FUNCTIO	DNS		
nation					
		End Date			
ntact Information					
			Save	Save & Exit	Exit





If diversion is not possible, person/household needs shelter and shelter is available do a warm handoff to shelter.

Add service transaction for P&D screen and complete exit from P&D project.

Add Service for P&D Screen

Client Information		Service Transactions
Edit Service		
▼ Household Mem	ıbers	
This Client is not a me	ember of any Households.	
Service Provider *	/ NC Balance of State - Region 7 SSO Prevention and Diver	rsion (7466)
Creating User	Nicole Purdy	
Start Date *	09 / 18 / 2018 🥘 📚 4 🔹 : 30 🔹 : 52 🔻 PM 🔻	
End Date	09 / 18 / 2018 🧖 🔿 🤯 4 🔻 : 31 ¥ : 23 ¥ PM ¥	
Service Type *	Homeless Diversion Programs (BH-0500.3100)	
Provider Specific Service	-Select- •	
Service Notes		

Complete Limited Exit from P&D Project

Clien	t - (173) Marie, Bobb	oy Brown						Դա
(173) M Release	Marie, Bobby Brown e of Information: Ends 09/18/2	019						
Client Info	ormation			Service	Transactions			
Summar	y Client Profile	Households	ROI	Entry / Exit	Case Managers	Case Plans	Measurements	Assessments

Exiting clients in ClientPoint

(173) Marie, Bobby Brown	
Release of Information: Ends 09/18/2019	
Client Information Service Transactions	
Summary Client Profile Households ROI Entry / Exit Case Managers Case Plans Measurements Assessments	
i Reminder: Household members must be established on Households tab before creating Entry / Exits	
Entry / Exit	
Program Type Project Start Date Exit Date Interims Follow Client Ups Count	1
VC Balance of State - Region 7 SSO Prevention and Diversion HUD 🖉 09/18/2018 🖉 🗈 🗈	
Add Entry / Exit Showing 1-1 of 1	
Click the pencil located under Exit	
Date to exit the client	

Enter Limited Exit Data

Include appropriate household members

-			
Confirm	Edit Exit Data - (173) M	arie, Bobby Brown	
Fxit Date	Exit Date *	09 / 18 / 2018 🔊 🏹 4 ▼ : 51 ▼ : 59 ▼ PM ▼	
	Reason for Leaving	-Select-	
Enter	If "Other", Specify		
Evit	Destination *	-Select-	•
	If "Other", Specify		
Destination	Notes		li li
		Save & Continue	Cancel

Complete the Housing Assessment at Exit

Entr	y/	Exit Data									é	s 🛛
0	Not	e: If you change t	he provider se	lecteo the	d it may cause e previous Asse	the essm	Assessments ent will still b	to adjust f e attached	or the n to that	ew Provider' Assessment	's Entry/Exit Assessment defaults. Any information s record for the Client.	aved to
	Pro	vider *			NC Balance	of St	ate - Region	7 SSO Prev	vention a	nd Diversion	n (7466) 🔻	
Type *					HUD			¥				
					Update							
	H	ousehold Membe	ers Associate	d wit	th this Entry ,	/ Exi	it					
		Name	Head of Household		Project Start Date		Exit Date	Interims	Follow Ups	Reason for Leaving	Destination	Notes
4	k	(173) Marie, Bobby Brown			09/18/2018		09/18/2018	E.	E.		Emergency shelter, including hotel or motel paid for with emergency shelter voucher (HUD)	
In	cluc	le Additional Hous	ehold Member	s					Sho	wing 1-1 of	f 1	
En	try	Assessment						E	xit Asse	ssment		
	F	lousehold Memb	pers		NC HMIS Exi	t					Exit Date: 09/18/2018 04:51:59 PM	1 🔬
\checkmark	(17 Ag	'3) Marie, Bobby Brow e: 35 reran: No (HUD)	'n	Answ	ver Following 3	Que	stions For Pre	evention Pr	ojects O	nly		
	ve		\rightarrow	HE	lousing Assess xit	ousing Assessment at -Select-						•
			If h Ir	f Able to maint ousing at entry nformation	maintain It entry, Subsidy on				▼ G			
				If u	f Moved to new nit, Subsidy in	/ hou form	ation -Sel	ect-		▼G		

Complete the Housing Assessment Disposition

🔍 Non-Cash Benefits					HUD Verifi	ication 🔬
Source of Non-Cash * Benefit	Start Date *	End Date		Amount of Non-Cash Benefit	Receiving Ben	efit?
Add						
Housing Assessment Disposition (Coordinated Assessment)	-Select- -Select- Referred to em	ergency shelter/sa	fe haven		▼ G	~
If Other Housing Assessment Disposition, specify (Coordinated Assessment)	Referred to tra Referred to rap Referred to per	nsitional housing bid re-housing rmanent supportive	housing			
Q Contact Information	Referred to str Referred to oth	eet outreach ner continuum proje	ect type		_	
Start Date * Add	Unable to refer Unable to refer	r/accept within cont r/accept within cont r/accept within cont	sion program inuum; ineligib inuum; continu	le for continuu um services u	um projects inavailable	
🔍 Outreach	Applicant decli Applicant term	ned referral/accept inated assessment	ance prior to comple	tion		
Date of Contact Stayi ES, o	ng on Street, r SH	Start Date *	End Date	Note	S	
Add						
			S	Save S	Save & Exit	Exit

Diversion NOT Possible



If diversion is not possible, person/household needs shelter and shelter is **NOT** available do a full entry into P&D project.

Add service transaction for P&D screen and continue to work on plan for shelter

Select full assessment in Entry Edit

	Client	: - (17	3) Marie, Bobb	y Brown											ſ
	(173) M Release	arie, Bob of Inforn	by Brown nation: Ends 09/18/2	019											
Cli	ent Info	rmatio	า				Servi	ice Tra	nsactions						
s	Summary	/	Client Profile	Households	ROI	Entry /	/ Exit	Ca	se Managers	Ca	se Plans	Measuremen	ts A	sessme	ents
	Ent Prog	ry / Ex ram	it	Reminder: Househ	old members	must be establi	ished on	House Pro	holds tab before	e crea	ating Entry / E	xits Interim	s Follo Ups	w Clien Coun	
	T NC B (746	alance (6)	of State - Region 7	SSO Prevention and	Diversion	HUD	1	/ 09/	/18/2018		-	Ē.	E.	ø	ж¢
	Add I	Entry / E	Exit				1	Show	/ing 1-1 of 1						

Select Assessment

Entry Assessment

Select an Assessment			Q		
NC HMIS Update	NC HMIS Exit			oC Intake (3.917B)	NCCEH Prevention and Diversion screen
Household Members	NC HMIS CoC Intake ((3.917B)			Entry Date: 08/15/2018 11:09:32 AM 🥡
(173) Marie, Bobby Brown Age: 35	General Demographic Info	rmation:			
Veteran: No (HUD)	**ANSWER FOR ALL CLIEN	ITS, INCLUDIN	IG CHILDREN un	less specified otherw	vise**
	Relationship to Head of Household	-Select-			₹ G
	Date of Birth		23 💙 23	G	
	Date of Birth Type	-Select-		▼G	
	Gender	-Select-			▼G
	Primary Race	-Select-		▼ G	
	Secondary Race	-Select-		▼G	
	Ethnicity	-Select-		▼G	
	Health and Disability Infor	mation:			
	Does the client have a disabling condition?	-Select-	•	G	
	Q Disabilities				HUD Verification 🔺
	Disability Type *	Disability	determination *	Start Date *	End Date
	Add				
	Covered by Health Insurance	-Select-	•	G	
	Q Health Insurance				HUD Verification 🛕
	Start Date * Health Type	Insurance Co	vered? (F	OPWA) If Private Pay surance, Specify	(HOPWA) If No, Reason not End Date

Complete Entry Assessment UDEs

Entry/Exit Data

Provider *	NC Balance of State	- Region 7 SSO Preve	ntion and Diversion (7	166)	r		
Type *	HUD	•					
	Update						
Household Members Associa	ted with this Entry / Exit						
Name	Head of Household	Project Start Date	Exit Date Interim	Follow Ups	Reason for Leaving	Destination	Not
🕼 흁 (173) Marie, Bobby Brown		09/18/2018	<u>/</u> E	E.			
Include Additional Household Memb	bers		Showing 1-1 of 1				
Entry Accossment							
Entry Assessment							
Select an Assessment							
Yes							
i es							
NC HMIS Update	NC HMIS Exit		NC HMIS CoC Intak	(3.917B) NCCEH Prev Diversion so	vention and creen	
NC HMIS Update	NC HMIS Exit		NC HMIS CoC Intak	(3.917B	NCCEH Prev Diversion so	vention and creen	
NC HMIS Update	NC HMIS Exit		NC HMIS CoC Intak	: (3.917B) NCCEH Prev Diversion so	vention and creen	
NC HMIS Update	NC HMIS Exit		NC HMIS CoC Intak	: (3.917B	Diversion so	rention and creen	
NC HMIS Update	NC HMIS Exit	e (3.917B)	NC HMIS CoC Intak	: (3.917B) NCCEH Prev Diversion so	rention and creen 2018 01:08:42 P	м 🚛
Household Members	NC HMIS Exit	e (3.917B)	NC HMIS CoC Intak	: (3.917B	Diversion so	vention and creen 2018 01:08:42 P	м 4
NC HMIS Update Household Members (173) Marie, Bobby Brown Age: 35 (173) Marie, Composition	NC HMIS Exit	e (3.917B)	NC HMIS CoC Intak	: (3.917B	Diversion so	rention and creen 2018 01:08:42 P	м 🔏
Household Members	NC HMIS Exit	(3.917B)	NC HMIS CoC Intake	ified othe	Entry Date: 09/18/2	rention and creen 2018 01:08:42 P	м 🔏
NC HMIS Update	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household	e (3.917B) formation: ENTS, INCLUDING CH	NC HMIS CoC Intake	i (3.917B	Diversion so Entry Date: 09/18/2	vention and creen 2018 01:08:42 P	M 🔏
NC HMIS Update	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth	e (3.917B) Formation: ENTS, INCLUDING CH	NC HMIS CoC Intake	ified othe	Entry Date: 09/18/2	vention and creen 2018 01:08:42 P	м 4
NC HMIS Update	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth Date of Birth Date of Birth Type	e (3.917B) formation: ENTS, INCLUDING CH -Select-	NC HMIS CoC Intake	ified othe	NCCEH Prev Diversion so Entry Date: 09/18/2	rention and creen 2018 01:08:42 P	м 4
NC HMIS Update	NC HMIS Exit NC HMIS CoC Intake General Demographic Infe **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth Date of Birth Type Gender	e (3.917B)	NC HMIS CoC Intake	ified othe	Entry Date: 09/18/2	vention and creen	м 4
NC HMIS Update	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth Date of Birth Type Gender Primary Race	e (3.917B) formation: ENTS, INCLUDING CH -Select- -Select- -Select- -Select- -Select- -Select-	NC HMIS CoC Intake	ified othe	NCCEH Prev Diversion sc Entry Date: 09/18/2 erwise**	rention and creen 2018 01:08:42 P	м 着

Don't forget to click "Save & Exit"

TOPILLES.	SIVE 33	FUNCTIO	DNS		
nation					
		End Date			
ntact Information					
			Save	Save & Exit	Exit

Add Service for P&D Screen

Client Information		Service Transactions
Edit Service		
▼ Household Mem	ıbers	
This Client is not a me	ember of any Households.	
Service Provider *	/ NC Balance of State - Region 7 SSO Prevention and Diver	rsion (7466)
Creating User	Nicole Purdy	
Start Date *	09 / 18 / 2018 🥘 📚 4 🔹 : 30 🔹 : 52 🔻 PM 🔻	
End Date	09 / 18 / 2018 🧖 🔿 🤯 4 🔻 : 31 ¥ : 23 ¥ PM ¥	
Service Type *	Homeless Diversion Programs (BH-0500.3100)	
Provider Specific Service	-Select- •	
Service Notes		

Diversion NOT Possible Outcomes



-If shelter is found or they self-resolve do full exit from P&D project

-If they become unsheltered do full exit from P&D project, enter into CA project and complete VI-SPDAT

Complete Full Exit from P&D Project

Client - (173) Marie, Bobby Brown



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Exiting clients in ClientPoint

(173) Marie, Bobby Brown	
Release of Information: Ends 09/18/2019	
Client Information Service Transactions	
Summary Client Profile Households ROI Entry / Exit Case Managers Case Plans Measurements Assessments	
i Reminder: Household members must be established on Households tab before creating Entry / Exits	
Entry / Exit	
Program Type Project Start Date Exit Date Interims Follow Client Ups Count	1
VC Balance of State - Region 7 SSO Prevention and Diversion HUD 🖉 09/18/2018 🖉 🗈 🗈	
Add Entry / Exit Showing 1-1 of 1	
Click the pencil located under Exit	
Date to exit the client	

Enter Full Exit Data

Include appropriate household members

Confirm	Edit Exit Data - (173) Marie, Bobby Brown					
Fxit Date	Exit Date *	09 / 18 / 2018 🔊 🏹 4 ▼ : 51 ▼ : 59 ▼ PM ▼				
Enter Exit Destination	Reason for Leaving	-Select-				
	If "Other", Specify					
	Destination *	-Select-	•			
	If "Other", Specify					
	Notes		li li			
		Save & Continue	Cancel			

Complete the whole Exit Assessment

	ote: If you chang	ge the provider sele	the previous Assessm	Assessments to a ent will still be at	tached to t	hat Ass	Provider's Ent essment reco	ry/Exit Assessn rd for the Client	ient defaults. Any information 	saved to
Provider * Type *		Heading Home H Rowan County - Housing (7075)	Heading Home Housing - Rowan County - Rapid Re- Housing (7075)			Search	My Provider	Clear		
		HUD								
			Update							
Н	ousehold Men	bers Associated	with this Entry / Exi	t						
	Name .	Head of Household	Entry Date	Exit Date	Interims	Follow Ups	Reason for Leaving	Destinati	on	Notes
4	(9) Lacks, Henrietta	Yes	/ 10/17/2016	🧪 10/27/2016	lo	B.	Completed program	Owned by subsidy (F	client, with ongoing housing IUD)	
4	(12) Lacks, Harry	No	/ 10/17/2016	/ 10/27/2016	6	E.	Completed program	Owned by subsidy (F	client, with ongoing housing IUD)	
Inclu	de Additional H	ousehold Members				Showin	g 1-2 of 2			
Entr	y Assessment				Exit A	ssessn	nent			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Household Mei	nbers	NC HMIS Exit					Exit	Date: 10/27/2016 09:34:53	РМ 🔏
	9) Lacks, Henriett a ge: 26 eteran: No (HUD)		Housing Assessmen Exit	t at Select-	-					T G
(12) Lacks, Harry Age: Unknown Veteran: No (HUD)		If Able to maintain housing at entry, Su Information	ubsidy -Select	N.			,	G		
		If Moved to new hou unit, Subsidy inform	using ation -Select-	g -Select-			▼ G			

Don't forget other Household Members

Don't forget to click "Save & Exit"

TOPIELES.	SIVE 33	FUNCTIO	DNS		
nation					
		End Date			
ntact Information					
			Save	Save & Exit	Exit


If unsheltered switch to Coordinated Assessment Project workflow

Diversion may be Possible



If diversion is possible, do a full entry into P&D project, add service transactions for P&D screen and prevention services and conduct mediation, secure resources etc to divert

Select full assessment in Entry Edit

Client - (173) Marie, Bobby Brown											ſ		
	(173) Marie, I Release of Inf	Bobby Brown Formation: Ends 09/18/2	019										
Cli	ent Informat	ion				Servio	e Transactions						
s	Summary	Client Profile	Households	ROI	Entry /	Exit	Case Managers	Cas	se Plans	Measurement	s As	sessme	nts
	Entry / Program	Exit	Reminder: Househ	old members	must be establi	shed on	Households tab before Project Start Date	e crea	ating Entry / E Exit Date	xits Interims	Follow Ups	/ Client Count	
	NC Balance of State - Regi (7466)		SSO Prevention and	SO Prevention and Diversion HUD		09/18/2018				E.	E.	E 🔊	ŵ
Add Entry / Exit Showing 1-1 of 1													

Complete Entry Assessment UDEs

Entry/Exit Data

Provider *	NC Balance of State - Region 7 SSO Prevention and Diversion (7466)								
Type *	HUD	HUD							
	Update								
Household Members Associa	ited with this Entry / Exit								
Name	Head of Household	Project Start Date	Exit Date	Interims	Follow Ups	Reason for Leaving	Destination	Note	
🐴 흁 (173) Marie, Bobby Brown	2	09/18/2018	/	E.	E.				
Include Additional Household Memb	pers		Showing	1-1 of 1					
Entry Assessment									
Select an Assessment									
NC HMIS Update	NC HMIS Exit		NC HMIS Co	oC Intake	(3.9178) VCCEH Prev	vention and creen		
NC HMIS Update	NC HMIS Exit		NC HMIS Co	oC Intake	(3.9178	Diversion se	vention and creen		
NC HMIS Update	NC HMIS Exit		NC HMIS Co	oC Intake	(3.9178	Diversion se	vention and creen		
NC HMIS Update	NC HMIS Exit		NC HMIS CO	oC Intake	(3.917E	Diversion se	rention and creen		
NC HMIS Update Household Members	NC HMIS Exit	(3.917B)	NC HMIS Co	oC Intake	(3.917E	Diversion so Entry Date: 09/18/2	rention and creen 2018 01:08:42 P	м 4	
NC HMIS Update Household Members (173) Marie, Bobby Brown Low 25	NC HMIS Exit	(3.917B)	NC HMIS Co	oC Intake	(3.9178	Diversion so	vention and creen	м 4	
NC HMIS Update Household Members Image: 35 Veteran: No (HUD)	NC HMIS Exit	e (3.917B) formation:	NC HMIS Co	oC Intake	(3.917E	Entry Date: 09/18/2	zention and creen	м 4	
Image: NC HMIS Update Household Members Age: 35 Veteran: No (HUD)	NC HMIS Exit NC HMIS CoC Intake General Demographic Inf **ANSWER FOR ALL CLIE Relationship to Head of Household	e (3.917B) Formation: ENTS, INCLUDING CH	NC HMIS Co ILDREN un	oC Intake less speci	(3.917E	Entry Date: 09/18/2	rention and creen 2018 01:08:42 P	м 4	
Image: NC HMIS Update Household Members Image: No (HUD) Image: No (HUD)	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth	(3.917B)	ILDREN uni	oC Intake	(3.917E	Entry Date: 09/18/:	vention and creen	м 4	
Image: NC HMIS Update Household Members Image: 15 Veteran: No (HUD)	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth Date of Birth	e (3.917B) Formation: ENTS, INCLUDING CH	ILDREN unl	oC Intake less speci	(3.917E	Entry Date: 09/18/2	rention and creen 2018 01:08:42 P	м 4	
NC HMIS Update Household Members (173) Marie, Bobby Brown Age: 35 Veteran: No (HUD) (HUD)	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth Date of Birth Date of Birth Type Gender	e (3.917B) Formation: ENTS, INCLUDING CH	ILDREN un	oC Intake less speci	(3.917E	Entry Date: 09/18/:	rention and creen	м 4	
Image: NC HMIS Update Household Members Image: 35 Veteran: No (HUD) Image: Veteran: No (HUD) Image: Veteran: No (HUD)	NC HMIS Exit NC HMIS CoC Intake General Demographic Info **ANSWER FOR ALL CLIE Relationship to Head of Household Date of Birth Date of Birth Date of Birth Type Gender Primary Race	e (3.917B) formation: ENTS, INCLUDING CH -Select- -Select- -Select- -Select- -Select-	ILDREN un	oC Intake	(3.917E	CENTRY Date: 09/18/2 Entry Date: 09/18/2 COMPARENT G G	rention and creen 2018 01:08:42 P	м 4	

Add Service for P&D Screen & Diversion

•	Household Mem	Add household members if	
Thi	s Client is not a me	nber of any Households.	
	Multiple Services		
	Be sure to	elect the correct Provider before entering data in the Service List below. If you change the Provider, the page will refresh to make adjustments for the new Provider's Service List defaults. Any data that is currently in the Service List will be removed and will need to be re-entered.	
:	Service Provider *	NC Balance of State - Region 7 SSO Prevention and Diversion (7466) 🔹 🔶 Auto-populates to	
:	Start Date *	09 / 18 / 2018 7 5 • : 46 • : 54 • PM • your EDA mode	
I	End Date	09 / 18 / 2018 🔊 3 T : 46 T : 54 T PM T	
	Service List		
		Number of Services 1 Need Status Identified ✓ Set All	
	Number of Services	*	
	Service Type	Homeless Diversion Programs (BH-0500.3100)	
	leed Information		۱
	Need Status*	Identified •	
		Remove Clear	ĺ
	Number of Services	* 1	
	Service Type	Homelessness Prevention Programs (BH-0500.3140)	
	leed Information		ון
	Need Status*	Identified v	
		Remove Clear	
		Add Another Remove All Clear All	
		Save & Exit Cancel	



-If diversion is successful do full exit from P&D project

-If diversion fails, refer to shelter, do warm handoff to shelter or continue to work on shelter and/or self-resolution until sheltered. Then do full exit from P&D project

-If all diversion and shelter efforts fail and they become unsheltered do full exit from P&D project, enter into CA project and complete VI-SPDAT and continue to work with clients for shelter/housing.

Complete Full Exit from P&D Project

Client - (17	73) Marie, Bobb	y Brown								ſ
(173) Marie, Bol Release of Infor	bby Brown mation: Ends 09/18/2	019								
Client Informatio	n				Service	Transactions				
Summary	Client Profile	Households	ROI	Entry /	/ Exit	Case Managers	Case Plans	Measurements	Assessme	nts
	6	Reminder: Househ	old members	must be establi	ished on H	ouseholds tab before	e creating Entry / E	xits		
Entry / Ex	vit									
Program				Туре		Project Start Date	e Exit Date	Interims ^I	-ollow Client Ups Count	
WC Balance (7466)	of State - Region 7 S	SSO Prevention and	Diversion	HUD	/	09/18/2018	/	E.	E a	¢,
Add Entry /	Exit				5	Showing 1-1 of 1				
				C	lick tł	ne pencil lo	cated unde	er Exit		
						ام ممالا لالاندم م	:			

Date to exit the client

Complete the whole Exit Assessment

	ote: If you chang	ge the provider sele	the previous Assessm	Assessments to a ent will still be at	tached to t	hat Ass	Provider's Ent essment reco	ry/Exit Assessn rd for the Client	ient defaults. Any information 	saved to
Provider * Type *			Heading Home H Rowan County - Housing (7075)	Heading Home Housing - Rowan County - Rapid Re- Housing (7075)				My Provider	Clear	
			HUD							
			Update							
Н	ousehold Men	bers Associated	with this Entry / Exi	t						
	Name .	Head of Household	Entry Date	Exit Date	Interims	Follow Ups	Reason for Leaving	Destinati	on	Notes
4	🕼 ᡒ (9) Lacks, Yes		/ 10/17/2016	🧪 10/27/2016	lo	B.	Completed program	Owned by subsidy (F	client, with ongoing housing IUD)	
4	(12) Lacks, Harry	No	/ 10/17/2016	/ 10/27/2016	6	E.	Completed program	Owned by subsidy (F	client, with ongoing housing IUD)	
Inclu	de Additional H	ousehold Members				Showin	g 1-2 of 2			
Entr	y Assessment				Exit A	ssessn	nent			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Household Mei	nbers	NC HMIS Exit					Exit	Date: 10/27/2016 09:34:53	РМ 🔏
	9) Lacks, Henriett a ge: 26 eteran: No (HUD)		Housing Assessmen Exit	t at Select-	-					T G
A V	12) Lacks, Harry ge: Unknown eteran: No (HUD)		If Able to maintain housing at entry, Su Information	ubsidy -Select	N.			,	G	
	Τ		If Moved to new hou unit, Subsidy inform	using ation -Select-	8		₹ G			

Don't forget other Household Members



Diversion is NOT

If unsheltered switch to Coordinated Assessment Project workflow



New DV ROI

- Client's choice what to share
- Safety planning for CE should happen before DV shelter refers to CE
- DV shelters refer to CE with electronic or paper BNL spreadsheet



More HUD Guidance

- Training is NOT (unfortunately) eligible for SSO reimbursement.
- It IS eligible as match (it's eligible under Admin, which is not in our budget)
- Assessment of eligibility IS eligible, even if you do it a lot (i.e. act as an access point and a lot of ineligible people call you)
 - HUD plans to provide more guidance about what to do when you refer that ineligible person somewhere else

Other eligible cost questions?

Reimbursement form questions?

• Remember, first reimbursement requests are due November 30.

QUESTION & ANSWER

Data security depends on all of us



Do not leave your computer logged in & unattended



Do not share passwords



Alert us when staff with access to HMIS leave your agency

ncceh.org/hmis

access local support for Balance of State, Wake, Durham, & Orange CoCs

919.410.6997 or hmis@ncceh.org

helpdesk for local support



North Carolina Coalition to End Homelessness

securing resources encouraging public dialogue

advocating for public policy change