

Homeless To Housing Grantee/Subgrantee HMIS Set Up and User Guide:

HMIS Provider and Program Set Up:

- The H2H programs are all set up under their respective grantee organization in HMIS. For example, The Housing Collective is the Grantees and Pacific House is the Subgrantee. The Pacific House H2H program is set up under the organization The Housing Collective. This means the user will need to set their organization to 'The housing Collective' in HMIS and select the appropriate provider.

Organization: The Housing Collective Inc

Provider: The Housing Collective-FFLD CAN-Homeless to Housing(DMHAS)(SO)

Role: DMHAS / DDaP

Buttons: Role apBuilder, Log Out

- Each Grantee has a single provider to represent the H2H programs. For example, The Housing Collective has a provider called 'The Housing Collective-FFLD CAN-Homeless to Housing(DMHAS)(SO)'. All Subgrantees for the Housing Collective Fairfield will need to select this provider under their username in HMIS.
- The program for each subgrantee will be found during the program enrollment process. When the user gets to the program enrollment screen, they will select their specific H2H program. For example, Pacific House will select the program 'THC.Pacific House-Homeless to Housing(DMHAS)(SO)'
- The role setting will be **DMHAS/DDaP**

Family Name: Testh2h,Testh2h-1980-01-01

Provider: The Housing Collective-FFLD CAN-Home

Program: THC.Pacific House-Homeless to Housing

Program Entry Date: 09/07/2023

Assign Case Manager:

Program Type: Street Outreach

Program SubType: DMHAS/DDaP - H2H

Target Population: NA: Not applicable

The naming convention for all H2H providers will be:

- Grantee-CAN-program name(funder)(programtype)
- Example: The Housing Collective-FFLD CAN-Homeless to Housing(DMHAS)(SO)

The program naming convention for all H2H programs will be:

- Grantee Indicator.subgrantee indicator-program name(funder)(programtype)
 - Example: THC.Pacific House-Homeless to Housing(DMHAS)(SO)
-

User Guide:

HUD Universal Assessment:

This assessment is important. The prior residence response for all clients eligible for the H2H outreach program must be literally homeless at enrollment. This means that the only valid responses for the Prior Residence question are:

- Place Not Meant for Habitation
- Emergency Shelter including hotel/motel paid for with Emergency Shelter voucher or RHY Funded Host Home Shelter
- Institutional Settings as long as the individual was homeless prior to entry into that institution and they stayed for less than 90 days.

If the client does not meet the above criteria, then they should not be enrolled in this program

HUD Universal Assessment: 7/1/2023 - THC:Pacific House-Homeless to Housing(DMHAS)(SO) - At Entry

If client has changed residences since project entry, change the client location (CoC) through a new during program assessment.

Client location: The Housing Collective-FLD:CAN-Hor | Continuum of Care Code: CT-503

Disabling Condition: No

Prior Living Situation

Type of homelessness: Place not meant for habitation | Length of stay in the prior living situation: 90 days or more, but less than one year

Approximate date homelessness started: 04/01/2023

Number of times the client has been on the streets, in SL, or SH in the past three years including today: Two Times | Total number of nights homeless on the street, in SL, or SH in the past three years: 2

HUD Program Assessment: Complete all required fields

HUD Program Assessment: 7/1/2023 - THC:Pacific House-Homeless to Housing(DMHAS)(SO) - At Entry

Domestic Violence: Domestic violence victim/survivor? No

Non-Cash Benefits from Any Source: Non Cash Benefit? Yes | Non Cash Benefits List: Supplemental Nutrition Assistance P

Health Insurance: Covered by health insurance? Yes

Disabling Conditions: Substance Use Disorder? No | Mental Health Disorder? No | Developmental Disability? No | Chronic Health Condition? No | HIV / AIDS? No | Physical Disability? No

Zip Code Assessment: Complete all required fields

Zip Code Assessment: 7/1/2023 - THC:Pacific House-Homeless to Housing(DMHAS)(SO) - At Entry

Prior Zip Code (Numbers ONLY): 064

Shared Housing Information: Would the client accept shared housing if offered? Yes

Health Insurance Assessment: Provide at least one health insurance option if you see this form

Assessment: 7/1/2023 - The Pacific House-Homeless to Housing(DMMS)(SO) - At Entry

Area/Location Income: CT 2019 DM & Fed Poverty Tables

Income from Any Source: Yes

Health Insurance Type	Yes/No *
<input checked="" type="checkbox"/> MEDICAD	Yes
<input checked="" type="checkbox"/> MEDICARE	No
<input checked="" type="checkbox"/> State Children's Health Insurance Program	No
<input checked="" type="checkbox"/> Veteran's Administration (VA) Medical Services	No
<input checked="" type="checkbox"/> Employer-Provided Health Insurance	No
<input checked="" type="checkbox"/> Health insurance obtained through COBRA	No
<input checked="" type="checkbox"/> State Health Insurance for Adults	No
<input checked="" type="checkbox"/> Private Pay Health Insurance	No
<input checked="" type="checkbox"/> Indian Health Services Program	No
<input checked="" type="checkbox"/> Other (Specify)	No

Income Assessment when Income is Yes: If you select 'Yes' for income then at least one income source and dollar amount greater than '\$0.00' must be entered.

Assessment: 7/1/2023 - The Pacific House-Homeless to Housing(DMMS)(SO) - At Entry

Area/Location Income: CT 2019 DM & Fed Poverty Tables

Income from Any Source: Yes

Income Type *	Interval *	Amount Per Interval *	Intervals Per Month	Monthly Amount *
<input checked="" type="checkbox"/> Unemployment Insurance		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Earned Income (i.e., employment income)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Supplemental Security Income (SSI)	Monthly	200	1.00000000	\$200.00
<input checked="" type="checkbox"/> Social Security Disability Insurance (SSDI)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> VA Service-Connected Disability Compensation		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Private disability insurance		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Temporary Assistance for Needy Families (TANF)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> General Assistance (GA)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Retirement Income from Social Security		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> VA Non-Service-Connected Disability Pension		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Pension or retirement income from a former job		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Child support		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Alimony or other spousal support		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Other Source		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Worker's Compensation		\$0.00	0.00	\$0.00
				SUM: \$200.00

Income Assessment when Income is No: If the person has no income, then select 'No' in the Income from any source field and then select 'save no income' at the bottom of the screen. Do not select any income sources or enter any dollar amounts.

Assessment: 7/1/2023 - The Pacific House-Homeless to Housing(DMMS)(SO) - At Entry

Area/Location Income: CT 2019 DM & Fed Poverty Tables

Income from Any Source: Yes

Income Type *	Interval *	Amount Per Interval *	Intervals Per Month	Monthly Amount *
<input checked="" type="checkbox"/> Unemployment Insurance		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Earned Income (i.e., employment income)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Supplemental Security Income (SSI)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Social Security Disability Insurance (SSDI)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> VA Service-Connected Disability Compensation		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Private disability insurance		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Temporary Assistance for Needy Families (TANF)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> General Assistance (GA)		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Retirement Income from Social Security		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> VA Non-Service-Connected Disability Pension		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Pension or retirement income from a former job		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Child support		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Alimony or other spousal support		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Other Source		\$0.00	0.00	\$0.00
<input checked="" type="checkbox"/> Worker's Compensation		\$0.00	0.00	\$0.00
				SUM: \$0.00

H2H and DMHAS Assessments:

The first question you will encounter is related to the Homeless to Housing source of enrollment. Was the client found through 'canvassing' or was the client referred to H2H? If the client was found through canvassing then select the canvassing option.

If the client was referred to H2H, then you will need to select 1 or 2 options.

1. Referral (Contact After 24 Hours) – choose this option if you did not make contact within 24 hours of the referral
2. Referral (Contact within 24 Hours) – choose this option if you made contact within 24 hours of the referral

Source of Enrollment

Primary Language

Remaining Questions are for DMHAS:

Source of Enrollment

Primary Language

Belgian

Marital status

Primary referral source

Tobacco use

Substance Abuse Screening Test

Insurance Type 1

Insurance Type 2

Insurance Type 3

Insurance Type 4

After completing this assessment click save and then click done when the summary screen opens.

Current Address:

If you are importing data from HMIS to DDAP, you will need to complete the current address for the client after completing the enrollment.

Client ID: 32810
Family ID: 217961
Family Name:
Testh2h,Testh2h-1980-01-01

+ Enroll DMHAS / DDAP

Client

Find Client

VI-SPDAT v2

+ CAN/211 Dashboard

Case Management

Basic Demographics

Veteran Information

Address and Contact Info

Family and Contacts

Client Photo

Coordinated Entry Events

Program Enrollment

Case Managers / Mentor

Employment / Retention

Goals

Case Notes

Click Add New in the top right of the form.

Client Address History

Add New

Total Rows: 0

Type	Address	Begin - End Date	Family Name	Client ID
------	---------	------------------	-------------	-----------

Results Per Page

Complete the form. If the client is homeless:

- Enter 'homeless' in the address field
- Provide the zip code
- Make sure the begin date matches the enrollment start date

Click 'Verify Address'

Either click on Address Banner or Click 'Make Verify Address Not Mandatory' – both do the same thing if the person is homeless.

Then click save in the bottom right.

DMHAS Case Note and Services and Current Living Situation Assessment:

Once the enrollment is complete, the user will be responsible for creating any required DMHAS services at minimum monthly as well as the Current Living Situation Assessment with every contact with the client.

1. DMHAS Case Notes and Services:

From the left side menu, select Case Management and then select Case Notes/Services (DMHAS)
 In the top right corner select Add New DMHAS Case note/Service

Complete the form and provide a case note. Then click the 'Post Service' check box

The screenshot shows a web-based form for entering service information. At the top, there are dropdown menus for 'Contact Prog' (set to 'Mald') and 'Face to Face' (set to 'Yes'). Below these are fields for 'TCM Location' (set to 'Other Place of Service'), 'Case Note Date' (07/01/2023), and 'Program Enrollment' (THC_Pacific House-Homeless to Housing[DMHAS](SO)). A rich text editor contains the case note: 'Made contact with client at town green'. At the bottom left, there is a section titled 'Posting Options - Service' with a 'Post Service' checkbox and a 'Sharing' dropdown (set to 'Not Shared (Org Only)'). A large red arrow points from the 'Post Service' checkbox in the bottom section to the 'Post Service' checkbox in the top section.

This will open the services screen. Complete the form. Make sure to check the date as it should match the date the service was provided and make sure to the enrollment to the H2H program. There will only be a few DMHAS services required for this program:

- T1016 – case management with client face to face
- T116B case management with client with collateral
- T116C – case management with client by phone
- ENG01 – engagement of the identified population

When done, click update in the bottom right.

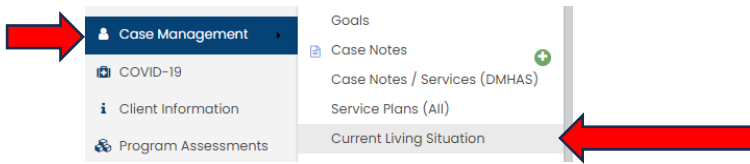
The screenshot shows the 'Post Service' form with the following details: 'Service Entry Post Control - CDAF'. The 'Begin Date' and 'End Date' are both set to 07/01/2023. The 'Enrollment' is 'THC_Pacific House-Homeless to Housing[DMHAS](SO)'. The 'Service' is 'T1016 - Case Management with Client Face to Face'. The 'Unit Of Measure' is 'Minutes', 'Unit Value' is '1', and 'Units of Service' is '15'. The 'Service Total' is '15' and the 'Restriction' is 'Not Shared'. An 'Update' button is located in the bottom right corner.

This will bring you back to the case note screen. From here just click save in the bottom right. After clicking save, this will bring you back to the original screen and you will see your case note and service.

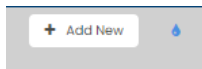
Case Note Date	Created Date	Created By	Preview	Service Type	Contact Flag	Case Note Summary	Service Begin Date	Contact Flag	TCM Location	OrgID	ServiceID
7/1/2023	8/8/2023	jbombaci	✓ Q	T1016 - Case Management with Client Face to Face	Made	Initial Contact	7/1/2023	Made	Other Place of Service	92764	927606

2. Current Living Situation Assessment (CLA): This assessment is required at every contact with the individual. This assessment is the primary trigger to indicate the state of the person’s homeless situation as they move through the Homeless to Housing process.

From the left side menu select Case Management and then select Current Living Situation.



When the form opens, click Add New in the top right.



Complete the Assessment:

- Make sure the date matches the date the assessment occurred.
- Make sure to select the H2H program from the program list
- The Current Living Situation represents where they are living at the time of the assessment
- The Location field will auto populate.
- For services, there will only be a few services to choose from
 - Outreach
 - community resources
 - behavioral health
 - healthcare
 - Emergency Shelter (ES)-Placement (H2H)
 - Permanent Supportive Housing (PSH)-Placement (H2H)

Information Date * 09/07/2023

Program * THC.Pacific House-Homeless to Housing(DMHA)

Current Living Situation * Place not meant for habitation (e.g., a vehicle, an aba)

Location details * The Housing Collective-FFLD CAN-Homeless to Housin

Service Type *

Account *

Some Notes about services in the CLA:

- **Outreach** is used with the first CLA created when the client is enrolled in the program
- **Community Resources, Behavioral Health or Healthcare** are used anytime the case manager provides information or access to these services.
- **Emergency Shelter (ES)-Placement (H2H)** – This service is used when the clients current living situation changes to being Emergency Shelter. This service is an indicator that the client has progressed from being unsheltered homeless to sheltered homeless.
- **Permanent Supportive Housing (PSH)-Placement (H2H)** – This service is used when the client’s current living situation changes to a Permanent Housing Setting. This service is an indicator that the client has progressed from being either unsheltered homeless or sheltered homeless to housed

Once you have completed the CLA you can click save in the bottom right and it will bring you back to the original screen.

Service Type	Current Living Situation	Project Enrollment	Verified by Project	Date
Case Management	Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	THC Pacific House-Homeless to Housing(DMHAS)(SO)		9/7/2023

Results Per Page: 50

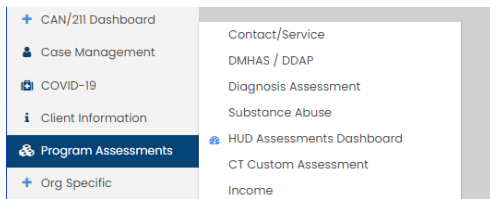
AS stated, each time the outreach worker interacts with a client, they must complete the CLA and if during any of those interactions they provide any of the DMHAS related services then a DMHAS service must be created. A DMHAS service is required at minimum monthly.

If a client goes more than 90 consecutive days without a current living situation assessment, then their enrollment should be ended in HMIS. If they re-surface, a new enrollment can be created.

More available assessments:

The other DMHAS assessments are available should grantees/subgrantees choose to use them. These assessments are available from the left side menu by clicking on program assessments and selecting any of the following:

- DMHAS/DDaP
- Diagnosis Assessment
- Substance Abuse Assessment



Acuity Index Outcomes Assessment - This will only need to happen once the client has been matched to housing.

