COMMUNITY HEALING INITIATIVE (CHI) PROBATION

ServicePoint Handbook

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Questions? Contact servicepoint@multco.us

COMMUNITY HEALING INITIATIVE PROGRAM MODEL

The Community Healing Initiative (CHI-Probation) utilizes a culturally specific, whole-family program model to provide wraparound services to gang-involved, primarily adjudicated youth and their families. CHI families receive intensive youth development, educational assistance, employment support, parent training, access to health and community services, and advocacy to support the successful re-entry of youth into their schools and communities. CHI Case Managers work with families to develop family-driven case plan goals. Services are delivered inside the homes, neighborhoods, schools, and workplaces of the individual families. CHI is dedicated to decreasing violence in our community and reducing the overrepresentation of Latino and African American youth in our justice system.



• Data entry due

month.

7 days after the

end of following

ServicePoint.

• Record youth's

outcomes at time of

program completion.

• Add Case Manager.

Revised 08/2021

^{3 &}amp; 6 months after exit.

ENTERING A CHI PROBATION CLIENT IN SERVICEPOINT

- Entry date should match the date on the client's intake form. Must be on or before the first service date.
- Switch between household members in the entry by clicking their name in the list on the left.

1. CLIENTPOINT	Search for an existing record first.				
Name	Searching with fewer letters will broaden your search (e.g. first 3 letters of first and last name). Compare demographics to check for the right record.				
Name Data Quality	Required - Select 'Full Name Reported'				
Alias	Any nicknames or other names client goes by				
Social Security Number	Optional				
SSN Data Quality	Required - Describe the accuracy of the SSN: full, partial, client doesn't know, etc.				
U.S. Military Veteran	Answer 'No' for all minors				
2. HOUSEHOLD	Create if multiple people (i.e. siblings) will be receiving services together				
Head of Household	Assign to the primary youth client being served, <i>not</i> who the client deems as the familial head of household. 1 Head of Household per Household.				
Relationship to Head of HH	Head of Household = Yes, Relationship = 'Self'. For all others, describe their relation to the Head of Household.				
HH Date Entered	For newly created Households, update to match Program Entry Date.				
3. ENTRY	Without a program entry, clients will not appear in reports				
Household Members	Check all household members that will be receiving CHI services				
Entry Type	Always choose 'Basic'				
Entry Date	Date of intake *Defaults to date of data entry – REMEMBER TO CHANGE*				
Section I	Complete for All Clients				
Date of Birth					
Gender					
If Other Gender, Specify	Only required if Gender is 'Other'				
Race	Race-Additional is optional. Fill in Race-Additional only if the client identifies with two different races. Race and Race-Additional must be different values.				
	Click 'Add' to enter a client's self-identified race/ethnicity. Add as many as apply.				
Inclusive Identity	All participants with an Entry Date on or after 7/1/13 must have at least one Inclusive Identity recorded (click Add below) Inclusive Identity (Race/Ethnicity/Origin) Start Date * Please add all that apply (Race/Ethnicity/Origin): Add				
Primary Language	Select Primary Language				
Thinki / Langeage					
Primary Language-Other	Only required if Primary Language is 'Other' - Do not enter a second language				

Residence Prior to Entry	Residence just prior to program entry (i.e. the night before Entry Date)

Health Insurance	
Household Size	Total # in household - may be different from # of people who need an entry
Zip Code of Last Perm Addr.	Zip code of current residence or last place of permanent residence if homeless
Employment Status	
Disabling Condition	If Yes, click 'Add' button to specify
Disability Type	Specify start date (same as entry date), type, and whether the disability is expected to be long term and inhibit client's ability to live independently
Section II	For YGPS clients only. Skip if not applicable.
Section III	School-Age Clients Only
Current School Status	If attending school, must specify below
Current Grade Level	
Please indicate which school client is attending	Only select current school (as of program entry date)
Section IV	Complete for All CHI Probation Clients
Relationship to Primary Client	Select Primary Client, Parent/Caregiver, Sibling, or 'Primary (Formerly Sibling)' *See p. 6 'Sibling Becomes Primary Client' for more details*
Date of Relationship Change	Only required for clients whose relationship to primary is 'Primary (Formerly Sibling)' Enter the effective date of that change
	Complete questions below for Primary Clients Only
Is the Primary Client a referral from the justice system?	If yes, enter either a JJIS# or SID# below
JJIS#	Only required for Primary Clients under 18 referred by justice system
SID#	Only required for adult Primary Clients referred by justice system
	Described for repeting surpose

3. CASE MANAGER Required for reporting purposes

Click 'Add Case Manager' in		Case Managers			
Summary Tab of Client Profile		Name Add Case Manager	Provider	Phone Number No matches.	
Туре	Click 'Me' or 'Service or click 'Other' and t			elect from pull-dov	vn menu
Start Date	Change Start Date				
End Case Manager		tart dat teps abo	e of the n	ew Case Manager	e old Case Manager that is . Then add the new Case ase Manager.*

RECORDING CHI-PROBATION SERVICE TRANSACTIONS IN SERVICEPOINT

- Services can be grouped by category and entered at the end of each month only if they include all the same participants.
- If the Primary Client is participating, enter the service under his/her record and check the box next to any other household members who participated.
- If the Primary Client is **not** participating, enter the service under the oldest participant's record and check the box next to any additional household members that participated.
- Services recorded in ServicePoint must match client case files in terms of service month, type, and hours.

SERVICES	
Start Date	Last day of the service month (if entering data monthly)
End Date	Leave blank
Service Type	Always 'Basic Needs' - automatically fills if you select a provider-specific service
Provider Specific Service	Select service (see definitions on following page)
Service Staff	Select person or agency providing service (see definitions on following page)
Service Notes	 A service note is required for: Any service provided by an External Agency or Contracted External Staff: Name the agency or contracted provider Any service that is Skill Building: Describe the activity Any Client Assistance: Include an itemized list of purchases and purpose (e.g. \$50 gas card, \$20 books for school)
Number of Units	Total # of service hours rounded to nearest 15 minutes (.25 hours) or Total \$ amount of Client Assistance

PROVIDER-SPECIFIC SERVICE DEFINITIONS - CHI PROBATION

Alcohol & Drug Services: Treatment provided either individually or in a group setting that focuses on eliminating or reducing substance abuse and is provided by a certified Addiction & Drug Counselor.

Case Management: Assessment across the six domains on the matrix, advocacy with anti-poverty services (rent/energy supports, food, clothing, etc.), help navigating health and mental health systems, access to physical and wellness activities, locating education resources (credit recovery, GED, school/alternative school registration), assisting youth and siblings with accessing and engaging in afterschool activities, case planning, case consultation and non-group-based skill training and coaching.

Cognitive Behavioral Therapy (CBT): An evidence-based practice program that focuses on cognitive behavioral training such as Aggression Replacement Training, Multi-Systemic Therapy, Functional Family Therapy, Dialectical Behavior Therapy, and/or Multi-Dimensional Family Therapy. Does not include CBT provided within a mental health counseling session.

Client Assistance: Funds used to access services and goods meant to assist the family in achieving their case plan goals. Under no circumstances should the client receive cash. Allowable expenditures include only those expenses that clearly support the delivery of services and show a clear and direct benefit to the client's success in the CHI program. Examples of eligible client assistance purchases within CHI program include but are not limited to: bus tickets, healthy food, school uniforms/clothing, school supplies, health/dental/vision/mental health care expenses not covered by insurance (so long as there are no other resources and there is no existing MOU in place under Professional Services).

Employment Services: Pre-employment training, job skills training, and referrals to job internships provided by an established employment program (e.g. WorkSystems Inc., POIC Work Opportunity Training, etc.) or other employers/partners.

Mentoring Services: Services provided by CHI provider agencies or an established mentoring program with trained, fully vetted and committed community-based mentors (e.g. Big Brothers Big Sisters, SE Works, etc.).

Other Mental Health Services: Services other than CBT provided by a qualified mental health professional.

Parent Training Groups: Parent training groups that are evidence-based practices or practice-based evidence such as Parents Helping Parents, Strengthening Families, and Nurturing Parents.

Skill-Building: Groups such as anger management, interpersonal skills, life skills, virtues, financial management, assertiveness training, household management, domestic violence prevention, teen dating violence and safety. Groups can be provided by Care Management personnel, other internal staff or external staff/agency. Skill building can also include one-on-one coaching and practicing skills as provided by non-Care Management personnel.

SERVICE STAFF DEFINITIONS

Contracted External Staff: Providers sub-contracted by POIC or Latino Network (e.g. Lifeworks NW, Jackie Strong, Teatro Milagro, Conexiones, etc.).

External Agency: Services provided by an external community provider (e.g. Cascadia, Catholic Charities, etc.)

Other Internal Staff: Internal (POIC or Latino Network) staff that are *not already listed* in the drop-down menu. *Note: Contact the administrator on the cover page if the list of Case Managers needs to be updated

IF A SIBLING BECOMES A PRIMARY CLIENT

In the course of service, a sibling in a household may be reclassified as the 'Primary Client.' Typically, the triggering event is when a sibling becomes involved in the justice system.

Do not make changes in the Household tab. Only the Entry needs to be updated.

To change a client's status in ServicePoint from 'Sibling' to 'Primary,' follow the steps below:

• Go into the sibling's program entry by clicking the pencil next to their entry date

Entry	/Exits				
Program	Туре		Entry Date		Exit Date
POIC: Community Healing Initiative (CHI) - SP	Basic		05/29/2014	/	
Add Entry Exit	y /	Showing	1-1 of 1		

Ochange 'Relationship to Primary Client' from 'Sibling' to 'Primary (Formerly Sibling)'

SECTION IV.	
Community Healing Initiati	ive ONLY
Relationship to Primary Client	-Select-
Effective Date of Relationship Change (above)	// / 🛃 🞝 🕺 G

- Enter the effective date of that change
- **1** If the youth is justice-involved, enter the JJIS# or SID#
- G Click 'Save and Exit'

EXITING CHI-PROBATION CLIENTS FROM SERVICEPOINT

- When the *entire household* has had no services in 90 days, exit all applicable household members with the date of their last service. If the household is not expected to return for services, proceed to exit them on their last service date.
- To exit a household, click the pencil next to the Exit Date in the Primary Client's Entry/Exit tab. Click the checkboxes next to each household member's name to exit them as well.
- Use the program exit date as the trigger for scheduling 3 and 6 month follow-ups.

EXIT					
Exit Date	Set Exit Date as last date that services were received				
Reason for Leaving	'Completed program' is useful as a neutral response				
Destination	Required				
Section I	YGPS only				
Section II	Complete for All Youth (Primary Clients and Siblings)				
Youth has stable, caring adu	lt as a role model				
During program enrollment: [Did youth attend at least 30 days of a positive youth development program?				
During program enrollment: I	Did youth form at least one positive relationship with adult? (outside of CHI system)				
During program enrollment: I	Did youth graduate from high school or complete their GED?				
Did parent complete at least	75% of parent training sessions?				
	School-Age Clients Only				
Current School Status at Exit					
Section III	Complete for All Youth (Primary Clients and Siblings)				
Was client arrested while enrolled in the program?					
Was client committed to a correctional facility while enrolled in the program?					
Complete for All Household Members					
Employment Status at Exit					
Latino Network Only:					
Was Health Education provid	ded?				

CHI-PROBATION FOLLOW-UP IN SERVICEPOINT

- Follow-ups are required for all household members at 3 and 6 months after their program exit date.
- If household members exit at different times, use the exit date of the Primary Client to schedule follow-ups.

In the client's record, go to the Assessment Tab (far left)
 Select 'DSCP_CHI 3- and 6-Month Follow-up' from the drop-down menu and click 'Submit'.
 Click Add.

CHI Follow-ups can be found in the Assessments tab of the client profile. Select 'CHI 3 and 6 Month Follow-up' from the drop-down menu and click 'Submit.'

ummary Clien	t Profile Hou	iseholds	ROI	Entry / Exit	Case Managers	Case Pla	ns Assessments
		Sele	ct an Assessment	1			
		DSCP_CHI	3- and 6-Month F	ollow-Up 📢	Submit		
DSCP_CHI 3- a	nd 6-Month Foll	low-Up					🎉 🔒
						Save	Cancel
CHI Follow-Up							
		-	urrent School tatus (at Follow-	A stable, cari adult as a role	ng Employmer e model (at Follow-	nt Status ·Up)	End Date
Start Date *	Follow-Up		P)				

FOLLOW-UP	Click 'Add' to record follow-ups for Each Household Member				
Start Date	Date follow-up was conducted				
Follow Up Interval	Select 3 or 6 months from the pull-down menu				
Section I	Complete for All Youth (Primary Clients and Siblings)				
Current School Status					
Since program exit youth has a stable, caring adult as a role model? (outside of CHI system)					
Section II	Complete for All Household Members				
Employment Status at Follow-up					
Section III	POIC at 3 Month Follow Up ONLY				
Health Insurance at 3 mo. Follow-up					
End Date	Leave blank				

CUSTOM CHI PROBATION REPORTS

Users with an Advance Reporting Tool (ART) license can access a range of reports in ServicePoint. A few custom reports made for CHI include the CHI Entry Overview, CHI Quarterly Services report, and the CHI Service Transactions report, which are highlighted below.

To access CHI reports in ART: Public Folder > Multnomah County > Reports by Program > CHI & YGPS Reports

CHI Entry Overview

This report includes a cover page listing all clients who were entered on or after the report start date. The second tab includes an overview of any new households entered in the timeframe that you select. Households will only appear if they share a program entry/exit.

Daughter Client's Household:

 Care Manager
 Entry Date
 Exit Date
 LOS
 Household Type

 Joe Caremanager
 10/22/2013
 No Exit
 5 Months to Date
 Two Parent Family

Household Member Demographics at Entry

Household Member Demo	graphics at Entry.		
Name	Daughter Client	Mother Client	Brother Client
Client ID	234567	123456	345678
HH Relationship	Daughter	Self	Son
Relationship to Primary	Primary Client	Parent/Caregiver	Sibling
Date of Birth	1/1/1997	1/1/1970	1/1/1999
Age at Entry	17	46	15
Gender	Female	Female	Male
Primary Language	English	English	English
Highest Grade Completed	10 ^m	High School Diploma	8 ^m
Living Situation at Entry	Rental by client, no housing subsidy (HUD)	Rental by client, no housing subsidy (HUD)	Rental by client, no housing subsidy (HUD)
Zip Code	97230	97230	97230
Employment Status	Not Employed - Not Seeking	Not Employed Seeking	NotEmployed-Not Seeking
Disabling condition	No	Don't Know (HUD)	Yes
School Status at Entry	Attending Alternative School	NotRequired	Attending School Full-Time (K-12)
Grade Level at Entry	11 ^m	Not Required	9 ^m
JJIS#	000001	Not Required	Not Required
SID#		Not Required	Not Required

CHI Quarterly Services for DCJ/OYA

This report gives a monthly tally of Provider-Specific Services and the total # of unique clients served each month. It does not include mentoring, client assistance, or services provided by external agencies. This report is sent to the Department of Community Justice, quarterly.

	July 2013	August 2013	September 2013
Case Management	416.25	330.75	331.75
Employment Services	95	95	100
Parent Training	52	46	61
Skill-Building	751	72.5	141
Treatment	88.5	25	29
Sum of Service Hours:	1402.75	569.25	662.75
Total Clients Served:	89	76	86

CHI Service Transactions

This report gives an overview of the types and amounts of services a household received in a given period. Each household appears on a separate page. The Primary Client's name is in red and any additional family members that were checked as included in that service will appear in gray. The service amounts will appear next to the client whose profile that service was recorded in.

Name	Relationship	Client ID	Service Date	Amount	Service Type	Service Staff
Client, Mother	Parent/Caregiver	123456	10/22/2013		Case Management (Hours)	Caremanager, Joe
Client, Daughter	Primary Client	234567	10/22/2013	2	Case Management (Hours)	Caremanager, Joe
Client, Daughter	Primary Client	234567	11/5/2013	2	Employment Services	Other Internal Staff
Client, Brother	Sibling	345678	12/1/2013	1.5	Other Mental Health Services (Hours)	Contracted External Staff
Client, Mother	Parent/Caregiver	123456	1/15/2014	2	Parent Training Groups (Hours)	Other Internal Staff
Client, Mother	Parent/Caregiver	123456	1/31/2014		Skill-Building (Hours)	Caremanager, Joe
Client, Daughter	Primary Client	234567	1/31/2014	2	Skill-Building (Hours)	Caremanager, Joe
Client, Brother	Sibling	345678	1/31/2014		Skill-Building (Hours)	Caremanager, Joe