Family Shelter Waitlist ServicePoint Handbook

Contents

REVISION HISTORY	. 1
PROGRAM MODEL	. 2
DATA MILESTONES	.2
BUILD HOUSEHOLD & TRANSACT ROI	.3
PROGRAM ENTRY	.5
WAITLIST MAINTENANCE AND FOLLOW-UP	. 8
EXITING FROM FAMILY SHELTER WAITLIST	.9
APPENDIX I: RESIDENCE PRIOR - CONDITIONAL RESPONSE GUIDE	11



Questions? Contact the ServicePoint Helpline at servicepoint@multco.us http://multco.us/servicepoint

Version 1.2

FAMILY SHELTER WAITLIST REVISION HISTORY

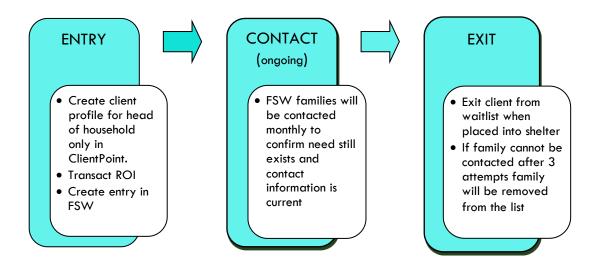
- July 2022 v1.2 Added information on how to select more than one Gender option, warning to verify/update all data brought forward from previous entries.
- May 2021 Added further guidance for Entry Date and Waitlist Maintenance and Follow-Up
- March 2021 First release

PROGRAM MODEL – FAMILY SHELTER WAITLIST

Families in need of shelter will be placed on the Family Shelter Waitlist. This is a trauma-informed process collecting minimal information. Families may or may not go through the Coordinated Entry process to be placed on the housing list. To be eligible, a family must include at least one child under the age of 18 OR be pregnant in their third trimester, staying in Multnomah County, and the family is experiencing homelessness.

 A driving framework that recognizes the impact of trauma on family stability
 A client-driven and strengths- based mode of practice that empowers individuals to overcome barriers and achieve self- sufficiency

DATA MILESTONES – FAMILY SHELTER WAITLIST



* Reach out to families on the waitlist every 30 days, after three failed contact attempts, exit client from the list.

ENTRY INTO FSW

- Search for your client in ServicePoint. If your client is already in ServicePoint, select their name to continue to their profile.
- If your client is not already in ServicePoint, select the Add New Client with this Information.

1. BUILD/UPDATE HOUSEHOLD

Household Type

Head of Household	Only <u>one</u> person should be designated as head of household. * Only add Head of Household to the waitlist.
Relationship to Head of HH	If client is head of household, this should be 'Self'
HH Date Entered	

2. TRANSACT ROI Required for ALL Household Members included in Program Entry

After clients sign a Client Consent to Release of Information for Data Sharing in Multnomah County form for their household, transact Parent and Program level ROI to all household members.

Clients only need to sign one Client Consent form per agency.

Only one Client Consent form needs to be signed per household, but it needs to be transacted in SP under multiple SP providers, including the Parent provider: 211 - SP (or other CE agency) and the Family Shelter Waitlist program provider.

- Download Client Consent forms here: <u>https://multco.us/multnomah-county-servicepoint-helpline/homeless-family-system-care-hfsc</u>
- View a Video on How to Transact an ROI here: <u>https://www.youtube.com/watch?v=A6YYacA-sd4</u>

In the client profile of the <u>Head of Household</u>, click on the "ROI" tab. Then, click on "Add Release of Information."

	Client Information				Service Transactions
Transact ROI under	Summary	Client Profile	Households	ROI	Entry / Exit
Head of Household	Release of Info	ormation			
	Provider				Permission
-	Add Release of Inf	ormation			No ma

Check off all household members who were included on the Client Consent to Release of Information for Data Sharing in Multnomah County form.

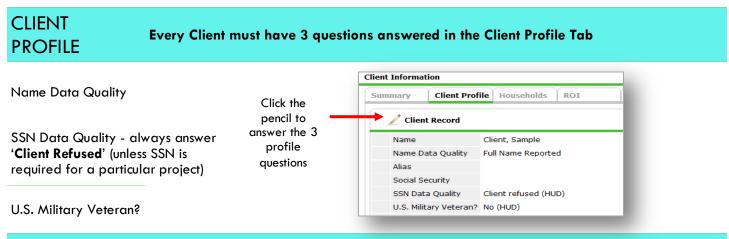


	Click 'Search' to select your PARENT provider		
	(also known as your	Release of Inform	ation Data
Provider	Login provider) <u>AND</u> all applicable Shelter	1 Clicking 'Save Rele	ase of Information' will create a distinct Release of Informatio for each selected provider.
	Providers.	Provider *	✓ 211info Information and Referral (23) ✓ HFSOC Shelter Waitlist OR-501 (7960)
Release Granted	Choose Yes or No based on the Client Consent to Share form		
Start Date	Date the Client Consent to Share form was signed	Release Granted *	Yes V
	1 year after Start	Start Date*	05/06/2021 202
End Date	Date	End Date *	05/06/2022 20 20
	Select "Signed	Documentation	Verbal Consent
	Statement from Client"	Witness	multco
Documentation	- Verbal consent only if your agency has been granted permission		Save Release of Information Cancel
Witness	Enter Multco		

When successfully transacted, it should look like this under the ROI tab. You may choose to attach the signed Client Consent to Share form by clicking on the image of the binder clip (optional).

Summary	Client Profile	Households	ROI	Entry / Exit	Case Managers	Case Plans	Assessments
Release of	Information						
Provide	r		1	Permission	Start Date	End Date	
🖉 🗑 HFSOC Shelter Waitlist Y			/es	03/12/2021	03/12/2022	Â.	
Z 🗑 211info - Information and Referral			/es	03/12/2021	03/12/2022	4	
Add Release of	Information			Showing 1	-2 of 2		
							Exit
							Ente

* Email the ServicePoint Helpline if you notice there are other ROIs transacted for the household already and you are unsure what to do: servicepoint@multco.us



ADD PROGRAM ENTRY

Create a program entry for the <u>Head of Household</u> by clicking on "Add Entry/Exit" from the Summary or Entry/Exit tabs.

NOTE: Any answer brought forward from a previous entry needs your review. You are responsible for all data to be current.

Entry Provider	Choose the relevant provider: HFSOC Shelter Waitlist #7960
Entry Type	Always choose 'Basic'
	Defaults to data entry date - Change to date of intake/added to the waitlist
Entry Date	*For clients being transferred from the old list into HMIS – if the entry date is within 14 days of an existing Coordinated Access Entry then use the same entry date to auto-fill already collected assessment info.
Complete the follow	ving questions for Head of Household only
Housing Move-in Date	If this person is NOT in permanent housing at the time of program entry, make sure this field is blank (delete date if needed). When permanent housing placement is made, update this field by creating an Interim Review (see page 9).
Relationship to Head of Household	Choose "Self" since client is head of household. Make sure to designate one person as the head of household. Do NOT assign more than one person as the head of household.
Date of Birth	
Date of Birth Type	
Gender	Use CTRL to select more than one option
Federal Race/Ethnic	ity Questions: Required by HUD
Race	
Race-Additional	(optional) Do not answer the same as what was selected under 'Race' above
Ethnicity	

Inclusive Identity: Required Locally

Click 'Add' to enter a client's self-identified race/ethnicity. Add all that apply. This is in addition to the Federal Race/Ethnicity Questions above (i.e. If you entered "White" under Race above, enter "White" here as well).

Inclusive Identity

	Q Inclusive Identity (Race/Ethnicity/Origin)	
	Start Date *	Please add all that apply (Race/Ethnicity/Origin):
\rightarrow	Add	

Shelter Waitlist Assessment

	-	
Primary Language	Primary Language	English V G
If Primary Language	Pregnant?	No (HUD) V G
is Other (ONLY), then Specify	Are you in Multnomah County now?	Yes V G
Pregnant	How many people are in your household?	3 G
Are you in Multnomah County now?	Of those, how many are under age 18?	2 G
How many people	Does HH have vehicle requiring parking space?	No C
are in your household?	Pets/Companion animals	[No ✔] G
Of those, how many	Prior Living Situation	Place not meant for habitation (HUD)
are under age 18?	Length of Stay in Previous Place	One week or more, but less than one month 🗸 G
Does HH have vehicle-requiring	Approximate date homelessness started:	01/01/2021 💐 🔿 🤯 G
parking space? Pets/Companion animals? Prior Living Situation	Regardless of where they stayed last night - Number of times the client has been on the streets, in ES, or SH in the past three years	Two times (HUD)
Residence just prior to entry (i.e. the night before entry). Choose only ONE.	three years	[4G
*See Appendix A: Conditional Response Guide	How would you like to be contacted? Please indicate how, when , etc	By phone, M-Fr after 4pm. Anytime Sat. and Sun.
Length of Stay in Previous Place		
Approximate Date	Primary Contact Phone	971-555-2222 G
Homelessness Started	Email Address	daisyduke@yahoo.com G
Regardless of where	OK to leave voicemail?	Yes V G
they stayed last night – Number of times the	OK to send texts?	Yes V G
client has been on the streets, in ES or SH in the past 3 years.	Other Contacts	My friend Susan. 503-444-2222
Total number of months homeless on the street, in ES or SH		
in the past three years.	Assessor Phone and/or Email Address	sharonvance90@yahoo.com
Contact Information:		Save Save & Exit Exit
Save & Exit		

WAITLIST MAINTENANCE AND FOLLOW-UP

Document all follow-up conversations with the family through an **Interim Review** from the **Program Entry** module:

*Add as many Interim Reviews as necessary

Document Follow-up Conversations

Program	Type		Project Start Date		Exit Date	Interims
HFSOC Shelter Waitlist (7832)	Basic	1	03/04/2021	1		B

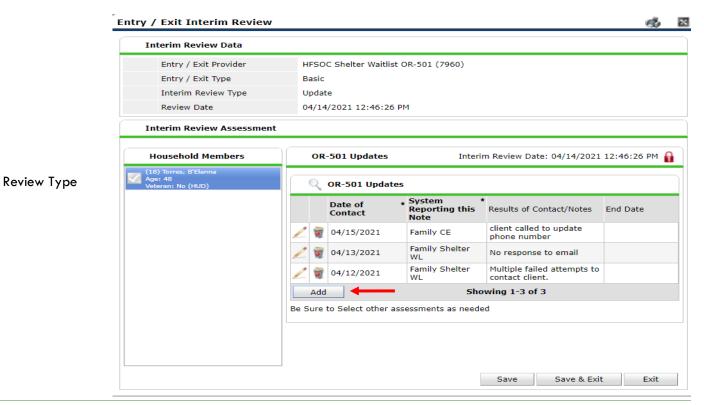
Select the **Pencil** to edit an existing review or select **Add Interim Review** to log a new review – both options allow you to proceed to the client's notes

Inte	nterim Reviews					
		s Associated with this Entry / Exit	Client Count			
2	04/26/2021	Review Type Update				
Ac	dd Interim Review	Showing 1-1 o	of 1			

Interim Review Type is Update. Select Save & Continue

Edit or Add a New Review	Edit Interim Review Data		
	Interim Review Data]
	Entry / Exit Provider	HFSOC Shelter Waitlist OR-501 (7960)]
	Entry / Exit Type	Basic	
	Interim Review Type *	Update V	
	Review Date *	04 / 26 / 2021 🕂 🖏 💙 🥂 10 🗸 : 27 🗸 : 05 🗸 AM 🗸	

Save & Continue Cancel



Select Add. Add as many notes as necessary

Select Family Shelter WL for System Reporting this note.

	Add Recordset - (18) To	orres, B'Elanna 🛛 👔	
	OR-501 Updates		
System Reporting for this Note	Date of Contact * System Reporting * this Note Results of Contact/Notes	04 / 14 / 2021 Ø ♥ Ø ♥ G Family Shelter WL ♥ G G -Select- Adults CE Adults CE Family Shelter WL Other or Multiple Veterans CE	
	End Date	// 🥂 🦉 G	
		Save Save and Add Another Cancel	

EXITING FROM FAMILY SHELTER WAITLIST

• Exit client from program when the family is placed in shelter, family no longer desires assistance, or a sufficient number of failed contacts have been attempted.

Exit	Answers from En	try will carry over. <u>Rememb</u>	per to update all response	es that have cha	<u>inged</u> .
Exit Date		Defaults to data entry d	ate – change to Exit Date		
	Entry/Exits		Households		
	Program Type	Project Start Date Exit Date	ID Type	Head of Household	
	HFSOC Shelter Waitlist Basic	Showing 1-1 of 1	Search Existing Households Start Nev	v Household	*
	Services		Shelter Stays		
	Start Add Se Edit Exit Data - (934 Edit Exit Data - (93		-	o matches.	
Reason for Leaving	Exit Date • Reason for Leaving If "Other", Specify	03]/04]/2021 3 3 1 ▼:55 ▼:47 ▼ Completed program ✓	(PM v)		
Destination	Destination * If "Other", Specify Notes	Emergency shelter, incl. hotel/motel paid for w/ ES v	roucher, or RHY-funded Host Home shelter (HUD)		

Reach out to families on the waitlist every <u>30 days</u>, after <u>three failed contact</u> <u>attempts</u>, exit client from the list.

APPENDIX I: RESIDENCE PRIOR – CONDITIONAL RESPONSE GUIDE

Residence Prior to Project Entry

Residence just prior to entry (i.e. the night before entry date). Choose only ONE.

Length of Stay in Previous Place

If response to Residence Prior to Project Entry is under HOMELESS SITUATION, you will see the following questions:

Approximate date homelessness started

Regardless of where they stayed last night - Number of times client has been on the streets, in emergency shelter, or safe haven in the past 3 years including today

Total number of months homeless on the street, in emergency shelter or safe haven in the past 3 years

If response to Residence Prior to Project Entry is under INSTITUTIONAL SITUATION <u>and</u> Length of Stay in Previous Place is less than **90 days**, you will see the following questions:

On the night before [residence prior situation], did client stay on the streets, emergency shelter or safe haven? If yes, complete the following:

Approximate date homelessness started

Regardless of where they stayed last night - Number of times client has been on the streets, in emergency shelter, or safe haven in the past 3 years including today

Total number of months homeless on the street, in emergency shelter or safe haven in the past 3 years

If response to Residence Prior to Project Entry is under TRANSITIONAL AND PERMANENT HOUSING SITUATION <u>and</u> Length of Stay in Previous Place is less than **7 days**, you will see the following questions:

On the night before [residence prior situation], did client stay on the streets, emergency shelter or safe haven? If yes, complete the following:

Approximate date homelessness started

Regardless of where they stayed last night - Number of times client has been on the streets, in emergency shelter, or safe haven in the past 3 years including today

Total number of months homeless on the street, in emergency shelter or safe haven in the past 3 years