COMMERCIALLY SEXUALLY EXPLOITED CHILDREN

ServicePoint Handbook

CONTENTS

Multnomah County

CSEC SERVICEPOINT HANDBOOK - REVISION HISTORY

Revised April 2016: Incorporated data entry steps for Janus into ServicePoint Comp Site.
Revised May 2016: Added new intake questions and removed matrix for SARC.
Revised July 2016: Added SARC Closing Status table.

COMMERCIALLY SEXUALLY EXPLOITED CHILDREN PROGRAM MODEL

Commercially Sexually Exploited Children (CSEC) provides cultural and gender specific services in a safe, secure, and respectful environment to youth ages 12-18 with a history of commercial sexual exploitation. Services target youth who are seeking alternatives to the human trafficking lifestyle, with special attention given to the needs of under-aged victims of human trafficking as they "age-out" of the youth system. CSEC services are infused with the principles of positive youth development, motivational interviewing, cognitive behavioral therapy and assertive engagement and include the use of flexible funds to assist clients in reaching case plan goals.

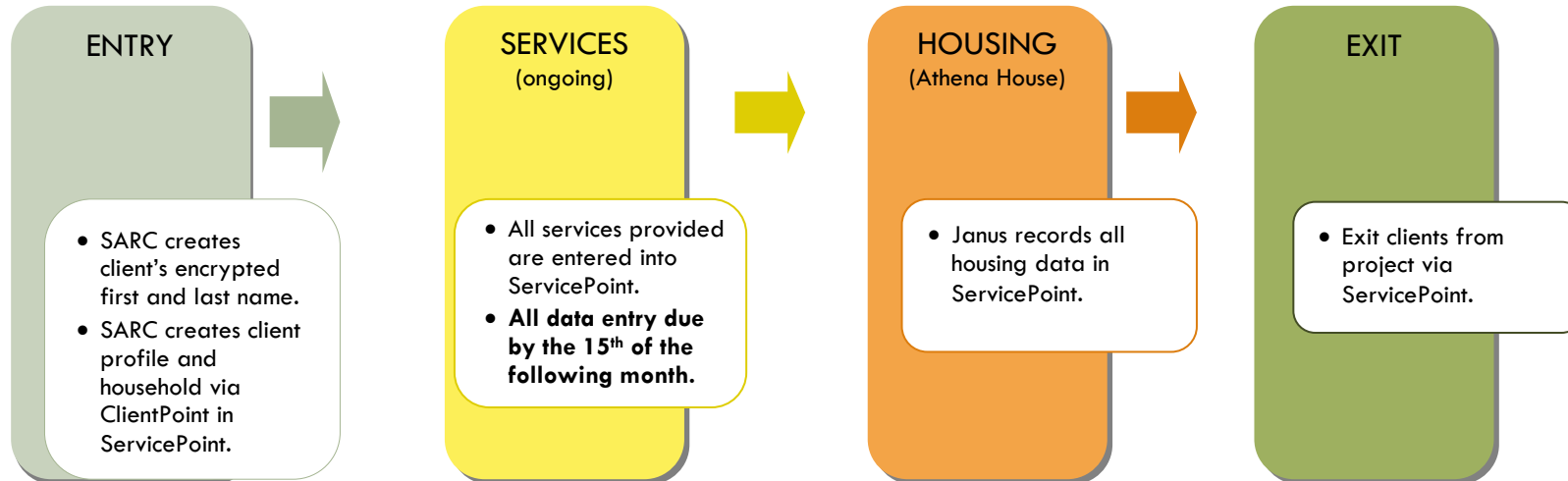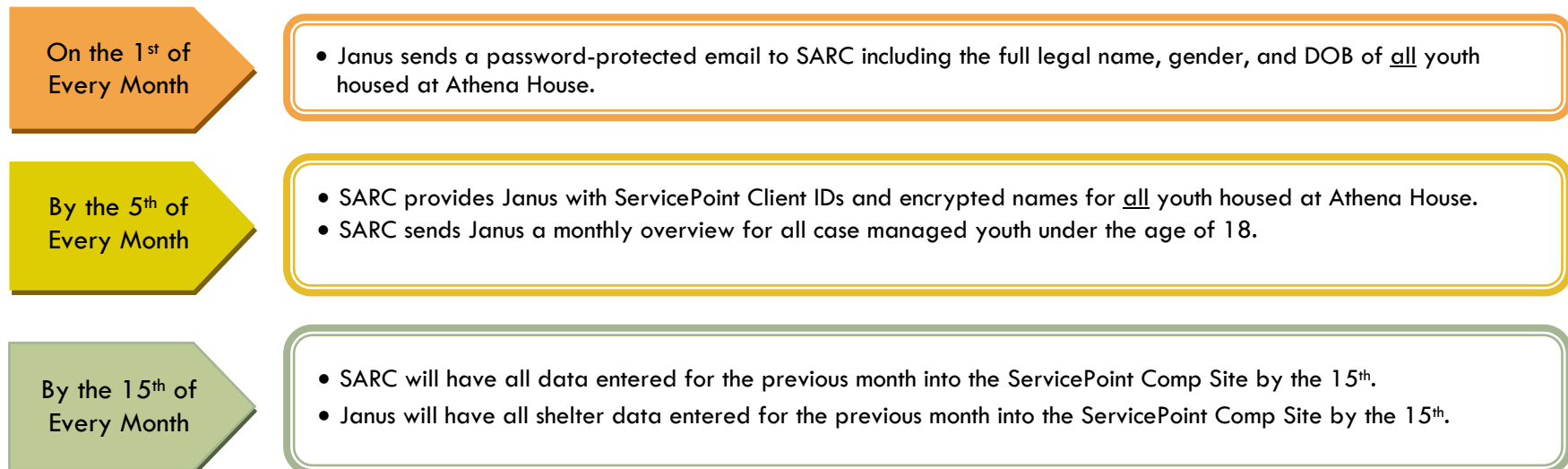|	
ASSERTIVE ENGAGEMENT	CSEC services are based in an **Assertive Engagement/Case Management** model which relies on relationship oriented, client-driven case management that recognizes the client's ability to determine their own goals and solutions in their transition from dependence to independence. Interventions are based on client self-determination with a focus on strengths and community connections as a strategy for promoting social, psychological, and emotional development.
HOUSING	CSEC provides confidential housing at **Athena House** for youth fleeing from sexually exploitative environments. Athena House maintains 5-7 beds throughout the year. Clients housed there receive intensive case management, access pro-social group activities, and receive referrals to outside support services as necessary, including mental health and addiction recovery services.
NETWORK FACILITATION AND COORDINATION	CSEC providers coordinate a system of care for victims by convening and facilitating the **Victims' Services Implementation Team** (VSIT). This team coordinates problem-solving among service providers, offers public education and media management, and aligns systems of service delivery in the fields of child welfare, mental health, addiction recovery, and other relevant sectors.

DATA MILESTONES – COMMERCIALLY SEXUALLY EXPLOITED CHILDREN

ENTRY

- SARC creates client's encrypted first and last name.
- SARC creates client profile and household via ClientPoint in ServicePoint.

SERVICES
(ongoing)

- All services provided are entered into ServicePoint.
- **All data entry due by the 15th of the following month.**

HOUSING
(Athena House)

- Janus records all housing data in ServicePoint.

EXIT

- Exit clients from project via ServicePoint.

REPORTING DEADLINES FOR SARC & JANUS (ATHENA HOUSE)

On the 1st of Every Month

- Janus sends a password-protected email to SARC including the full legal name, gender, and DOB of all youth housed at Athena House.

By the 5th of Every Month

- SARC provides Janus with ServicePoint Client IDs and encrypted names for all youth housed at Athena House.
- SARC sends Janus a monthly overview for all case managed youth under the age of 18.

By the 15th of Every Month

- SARC will have all data entered for the previous month into the ServicePoint Comp Site by the 15th.
- Janus will have all shelter data entered for the previous month into the ServicePoint Comp Site by the 15th.

ENTERING A CSEC CLIENT IN SERVICEPOINT

- All case managed clients should be under the age of 18 at the time of program entry.
- Clients should be entered into ServicePoint only after being screened and identified as a CSEC client. Do **not** enter clients who only call the crisis line on a limited basis.
- Always use the encrypted client name when creating a client profile in ServicePoint Comp Site.

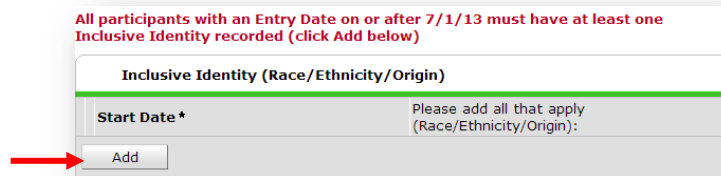| 1. HOUSEHOLD	**Every client needs one household**
Head of Household	Only one head of household.
Relationship to Head of HH	Self (if head of household)
HH Date Entered	Same as Program Entry Date.

2a. SARC ENTRY	
Provider	Sexual Assault Resource Center (SARC): Commercial Sexual Exploitation of Children
Entry Type	Always choose 'HUD' .
Entry Date	Date of program entry *Defaults to date of data entry - Remember to change*.
Date of Birth	Enter client's date of birth.
Date of Birth Type	Full, approx/partial, don't know, refused, or data not collected.
Gender	Enter client's self identified gender.
Sexual Orientation	Enter client's self identified sexual orientation.
Inclusive Identity	**Click 'Add' to enter a client's self-identified race/ethnicity. Add as many as apply.**
Citizenship status	Enter client's self identified citizenship status at time of entry.
Primary Language	Enter client's self identified primary language.

Does client have children?

If no records exist, click on the Add button to create a new record. If a record(s) already exists, click on the edit pencil to review the existing responses and determine if the answers are still appropriate. The answers are no longer valid, place an end date of the existing record and create a new record.

Start Date *	Does client have children	Number of children under the age of 18	Number of children 18 years old or older	Number of children living with the client	End Date

Add

Income from Any Source

Select the appropriate response.

Total Monthly Income

Sum of all Income Types. Enter a zero (0) if the client does not have any income.

If no Income records exist, click 'HUD Verification' to create a Yes/No response for each Income Type. Provide a dollar amount for each Yes response. If a record(s) already exists, click on the edit pencil for the income type to review the existing response to determine if the answers are still appropriate. If the answers are no longer valid, place an end date on the existing record and create a new record.

Monthly Income

Monthly Income   **HUD Verification** ⚠

Start Date *	Source of Income	Receiving Income Source?	Monthly Amount	End Date

Add   View Gross Income

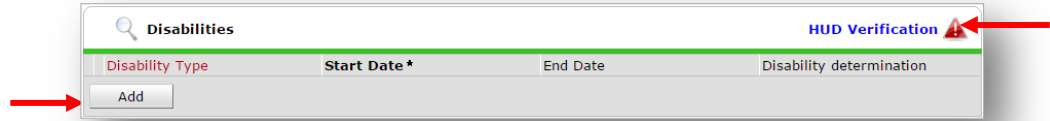**Non-cash benefit from any source**

Non-Cash Benefits

If no Non-Cash Benefits records exist, click 'HUD Verification' to create a Yes/No response for each Benefit Type. If a record(s) already exists, click on the edit pencil for the benefit type to review the existing response to determine if the answers are still appropriate. If the answers are no longer valid, place an end date on the existing record and create a new record.
* Only list benefits that will be **ongoing**
* Enter benefits received by a minor in the **Head of Household's profile**
* $ amounts are not required for non-cash benefits

Non-Cash Benefits   **HUD Verification** ⚠

Start Date *	Source of Non-Cash Benefit	Receiving Benefit?	Amount of Non-Cash Benefit	End Date

Add

Does the client have a disabling condition?

Disabilities	**If no Disability records exist, click 'HUD Verification' to create a Yes/No response for each Disability Type. If a record(s) already exists, click on the edit pencil for the Disability Type to review the existing response to determine if the answers are still appropriate. If the answers are no longer valid, place an end date on the existing record and create a new record.**

Cover by Health Insurance	
Health Insurance	**If no Health Insurance records exist, click 'HUD Verification' to create a Yes/No response for each Insurance Type. If a record(s) already exists, click on the edit pencil for the Insurance Type to review the existing response to determine if the answers are still appropriate. If the answers are no longer valid, place an end date on the existing record and create a new record.**
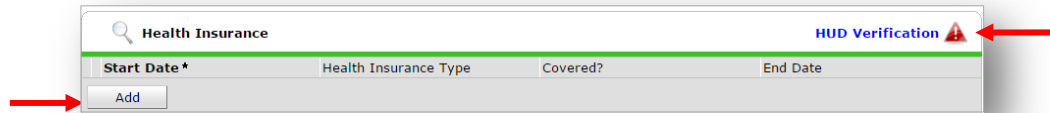
Residence Prior to Entry	Residence just prior to program entry (i.e. the night before Entry Date).
Residence Prior to Entry – Other	Only required if answer to 'Residence Prior' was 'Other'
Employment Status	This question helps to determine if the client is currently employed or looking for employment.
Current School Status	This question helps to determine if the client is currently enrolled in school.
Current Grade Level	This question is related to the prior question. If the client is enrolled in school, what grade are they in (for pre-K through 12th grade).
Highest Grade Completed	This question helps to determine the client's highest level of education. Do not select *current* grade.
Current System Involvement	This question helps to determine if the client is working with any other local supportive service agency.
Current Criminal Justice System Involvement	This question helps to determine if the client is involved in the criminal justice system as a victim, witness, or other.
Client has been sexually abused	This is self identified by the client but also coincide with the requirements of program entry.
Sexual exploitation (e.g. prostitution, trafficking)	This is self identified by the client but also coincide with the requirements of program entry.
Referral Date	The date the client was referred to SARC for services by another agency or person.
Referral Source	Identifies the party that referred the client to SARC for services.
Referral Source – Other (must specify)	Only answer this question of the referral source is "other".

2b. Janus ENTRY

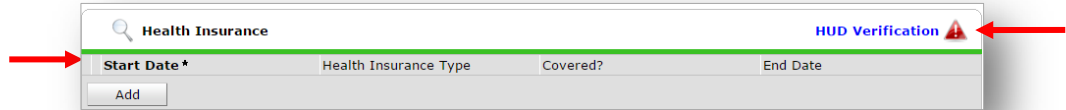|	
Provider	Janus Youth Programs: Commerical Sexual Exploitation of Children (CSEC) - SP
Client Search	Enter client's ServicePoint ID number (provided by SARC) and click the submit button.
Entry Type	Always choose 'Basic' .
Entry Date	Date of program entry *__Defaults to date of data entry - Remember to change*__.
Date of Birth	Enter client's date of birth.
Date of Birth Type	Full, approx/partial, don't know, refused, or data not collected.
Gender	Enter client's self identified gender.
Inclusive Identity	**Click 'Add' to enter a client's self-identified race/ethnicity. Add as many as apply.** 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
Race	Enter client's self identified race.
Race – Additional	Only required if client identifies as more than one race.
Race – Other (must specify)	Only required if answer to 'Race was 'Other'.
Ethnicity (Hispanic/Latino)	
Primary Language	Enter client's self identified primary language.
Primary Language - Other (must specify)	Only required if answer to Primary Language was 'Other'.
Highest Grade Completed	This question helps to determine the client's highest level of education. Do not select *current* grade.
Household Size	Enter the size of the client identified family household
Client Location	Always use OR-501 Portland/Gresham/Multnomah County
Does the client have a disabling condition?	
Disabilities	**If no Disability records exist, click 'HUD Verification' to create a Y/N response for each Disability.** **Otherwise, click the magnifying glass to review and update existing records.** Disabilities HUD Verification Disability Type Start Date* End Date Disability determination Add

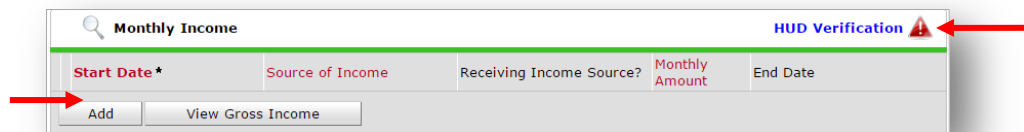| Cover by Health Insurance	
Health Insurance	**If no Health Insurance records exist, click 'HUD Verification' to create a Yes/No response for each Insurance Type. If a record(s) already exists, click on the edit pencil for the Insurance Type to review the existing response to determine if the answers are still appropriate. If the answers are no longer valid, place an end date on the existing record and create a new record.**

| Income from Any Source	
Total Monthly Income	Sum of all Income Types. Enter a zero (0) if the client does not have any income.
Monthly Income	**If no Income records exist, click 'HUD Verification' to create a Yes/No response for each Income Type. Provide a dollar amount for each Yes response. If a record(s) already exists, click on the edit pencil for the income type to review the existing response to determine if the answers are still appropriate. If the answers are no longer valid, place an end date on the existing record and create a new record.**

Non-cash benefit from any source	
Non-Cash Benefits	**If no Non-Cash Benefits records exist, click 'HUD Verification' to create a Yes/No response for each Benefit Type. If a record(s) already exists, click on the edit pencil for the benefit type to review the existing response to determine if the answers are still appropriate. If the answers are no longer valid, place an end date on the existing record and create a new record.** * Only list benefits that will be **ongoing** * Enter benefits received by a minor in the **Head of Household's profile** * $ amounts are not required for non-cash benefits
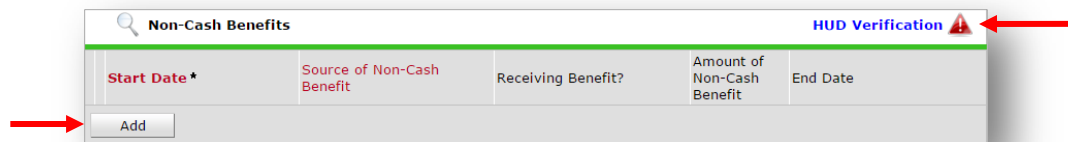
Domestic violence victim/survivor	
Residence Prior to Project Entry	Residence just prior to entry (i.e. the night before entry date)
Residence Prior to Entry - Other	Only required if Residence Prior is 'Other'
Length of Stay in Previous Place	How long did the client stayed in the place they lived the night before entering Athena House.

Zip Code of Last Permanent Address	Zip code of the city where the client stayed the night before entering Athena House.

The following history of homelessness questions refer ONLY to a client's length of time on the street, in Emergency Shelter, or in a Safe Haven:

Client entering from the streets, ES or SH

If Yes for "Client entering from streets, ES or SH" Approximate date started

Regardless of where they stayed last night – Number of times the client has been on the streets, in ES or SH in the past 3 years including today

Total number of months homeless on the street, in ES or SH in the past 3 years

Length of Time Homeless - Status Documented?

County of Last Permanent Residence

Section II

Age Verified?

Current Involvement with DHS?

Past Involvement with DHS?

Felony Warrants?

Misdemeanor Warrants?

Run Report?

Primary Referral Destination	Only required if Primary Referral Destination is not specified in list

Section III

Have you ever become homeless because...

Were you arrested, picked up by the police, or did you spend time in jail or detention before you 18th birthday? (TAY #1)

...there was violence at home between your family members? (TAY #2)

...you had differences in religious beliefs with parents/guardians/caregivers? (TAY #3)

...you ran away from your family home (or foster home)? (TAY #4)

If you have use marijuana, how old were you when you tried it for the first time? (TAY #5; Score = 1 for 12 or younger)	Only answer if the first time of use was 12 years old or younger. Only enter a 1 if the client was 12 years old or younger.
Have you ever been pregnant, or did you get someone else pregnant? (TAY #6)	
Total TAY Score (Each Yes=1)	A response of Yes equals 1. Enter the sum of all the TAY questions

Section IV	
Ever received anything in exchange for sex (e.g. money, food, drugs, shelter)?	
Run Report?	
Has youth had any intentional contact with former sexually exploitative associates during the last three months?	
If yes for "received anything in exchange for sex"? How many times?	
Alcohol & Drug Screening?	
Suicidal Ideation?	
Sexual Orientation	
Client has been sexually abused	

RECORDING CSEC SERVICE TRANSACTIONS IN SERVICEPOINT

- Services can be summed by service category and entered into ServicePoint on a monthly basis.
- Services entered in ServicePoint must match client case files in terms of: service month, service type, and number of hours.

SERVICES

Start Date	First day of the month services are provided in.
End Date	Last day of the month services are provided in.
Service Type	Always Basic Needs - automatically fills if you select a provider-specific service
Provider Specific Service	Select service (See definitions below)
Service Staff	Select staff person providing services; contact the helpline to update the list if necessary
# of units	Total number of service hours provided to client rounded to nearest 15 minutes (.25 hours)
Unit Type	Select Hours

PROVIDER-SPECIFIC SERVICE DEFINITIONS - CSEC

Assertive Engagement/Case Management (Hours) - a multi-faceted service to help a client identify and address issues of concern; to coordinate goals; services and resources with the client's service providers; and to obtain available resources to achieve the client's goals. It may also include:

- Screening and collection of demographics and other eligibility information,
- Engaging the client in a comprehensive strengths-based assessment and development of a service plan which addresses the client's goals,
- Advocacy and case coordination on behalf of client,
- Completing the CSEC matrices and eco-maps,
- Coordination, referral, follow-up on a referral and/or arrangement of client services with other providers,
- Coordination of efforts with other agencies involved with the client to clarify roles, to coordinate directions to the client and to facilitate the achievement of case plan goals, and/or
- Ongoing reassessment of the service plan to determine the client's progress towards achieving the goals, needed resources and any necessary adjustments to the service plan.

Crisis Intervention (Hours) - an intervention (face to face or by telephone) to assist clients in stabilizing an acute, immediate need or problem. Crisis intervention does **not** include: ongoing services that respond to a client's crisis situation (this is Case Management), telephone-based work with other agencies to connect clients to services (this is Case Management) or emergency nights of housing.

Child Care – Supervision of a client's child by your organization or another organization or individual.

Dental – Services provided related to the care of the client's teeth.

Education – Provision of services related to client education; includes but not limited to literacy, GED assistance, and school enrollment.

Emotional Support – Emotional support and informal counseling provided to a client by organization staff or volunteers who are not mental health providers; includes informal counseling and peer support.

Employment – Activities and services related to assistance with obtaining employment; includes but not limited to employment assistance, job training, and vocational services.

Family Reunification – Activities and services to support a client to reunify with his or her family members.

Financial Assistance – All types of money given to the client including phone and gift cards (excluding housing expenses covered in Housing Financial Assistance).

Housing Advocacy – Assistance to locate and place client in housing or maintain current housing; includes but not limited to emergency and transitional shelter, group or independent living options.

Housing Financial Assistance – Assistance with expenditures for client's rent, shelter stay, hotel/motel stay, or other housing expenses.

Interpreter/Translator – Used to assess service needs and/or provide services to a client.

Legal – Services provided to address legal needs; includes but not limited to information for or representation by civil attorneys and prosecutors.

Life Skills – Services to help clients achieve self-sufficiency; includes but not limited to information to managing personal finances and self-care.

Medical – Services provided related to client's mental health.

Mental/Behavioral Health – Services provided by a licensed mental health provider; includes but not limited to assessment and treatment.

Personal Items – Material goods or support to obtain goods including but not limited to food, clothing, toiletries.

Reproductive/Sexual Health – Services provided related to client's reproductive and/or sexual health; includes but not limited to HIV testing, STI screening and treatment, pregnancy testing, prenatal services.

Safety Planning – Services provided and activities surrounding client protection and safety planning.

Social Service Advocacy – Services provided to a client to address social service needs and to inform client of available benefits and services.

Substance Abuse Services – Services related to treatment of substance and/or alcohol abuse; includes but not limited to assessment and treatment.

Transportation – Services provided to a client related to transportation to ensure clients have access to services and other activities; includes but not limited to metro, subway, and/or bus.

Victim Advocacy – Information and support provided to help client understand and exercise his or her rights as a victim of crime within the criminal justice process.

Other Need/Service – Activities, services, or needs that do not fall within existing service categories described above.

EXITING CSEC CLIENTS FROM SERVICEPOINT

- Wait until client has been inactive for 90 days before exiting, then exit them as of their last service date.
- If the same client returns after being exited, create a new program entry.

SARC EXIT

Exit Date	***Defaults to date of data entry – Change to last service date***
Reason for leaving	
Destination	
Current school status at exit	
Highest grade completed at exit	
Has client had any intentional contact with former sexually exploitative associates during the last 3 months?	
Has youth formed at least one positive relationship with an adult?	
Number of Felony Arrests since program enrollment	
Number of Misdemeanor Arrests since program enrollment	
Number of Status Arrests since program enrollment	
Did youth participate in substance abuse treatment?	
Did youth participate in mental health treatment?	

Janus EXIT

Exit Date	***Defaults to date of data entry – Change to last service date***
Reason For Leaving*	Select the appropriate answer from the drop list.
Destination*	*See Closing Status table of page 16.*
Income from Any Source	

Monthly Income	**If no Income records exist, click 'HUD Verification' to create a Y/N response for each Income Type.** **Otherwise, click the magnifying glass to review and update existing records.** * Only list income that will be **ongoing** (per HUD Standards) * Enter Household Income provided by a minor in the **Head of Household's profile**

Total Monthly Income	Sum of all Income Types. Enter a zero (0) if the client does not have any income.
Non-cash benefit from any source	
Non-Cash Benefits	**If no Benefit records exist, click 'HUD Verification' to create a Y/N response for each Benefit Type.** **Otherwise, click the magnifying glass to review and update existing records.** * Only list benefits that will be **ongoing** * Enter benefits received by a minor in the **Head of Household's profile** * $ amounts are not required for non-cash benefits

Cover by Health Insurance	
Health Insurance	**If no Health Insurance records exist, click 'HUD Verification' to create a Y/N response for each Insurance Type.** **Otherwise, click the magnifying glass to review and update existing records.**

SARC Closing Status

Use the table below to help answer the question Reason for Leaving in ServicePoint. The table provides the equivalent ServicePoint answers for the RTI Closing Status.

| RTI Closing Status options	ServicePoint Reason for Leaving options
No longer in need of services	Completed program
Lost contact	Unknown/Disappeared
Incarcerated and out of contact with program	Criminal activity/violence
Client relocated	Left for housing opp. before completing program
Client discontinued	Death , Disagreement with rules/person, Reached maximum time allowed, or Needs could not be met
Transfer to another service program	Transfer to another program
Determined not eligible*	*Clients that are not eligible for SARC services should not be entered into ServicPoint.
Noncompliance (e.g. client broke policies)	Non-compliance with program
Other, specify	Other

PROTECTING CLIENT CONFIDENTIALITY

Any confidential client information being send by email must be sent as an attached, password-protected document. Always send the password in a separate email.

- Confidential client information includes: name, date of birth, or any details that could potentially be used to identify a client.
- ServicePoint client ID numbers are **not** considered protected client information. They can be sent directly in the body of an email.
- When communicating by email with the ServicePoint team regarding a client, **always refers to the client using the ServicePoint client ID whenever possible**. This will both protect client confidentiality and avoid any confusion about clients with similar names.

PASSWORD PROTECTING AN EXCEL SPREADSHEET

❶ **In Excel 2007 or newer:** Before saving the spreadsheet, click the 'Tools' button right next to the 'Save' button.

❷ Select "General Options" from the drop down menu.
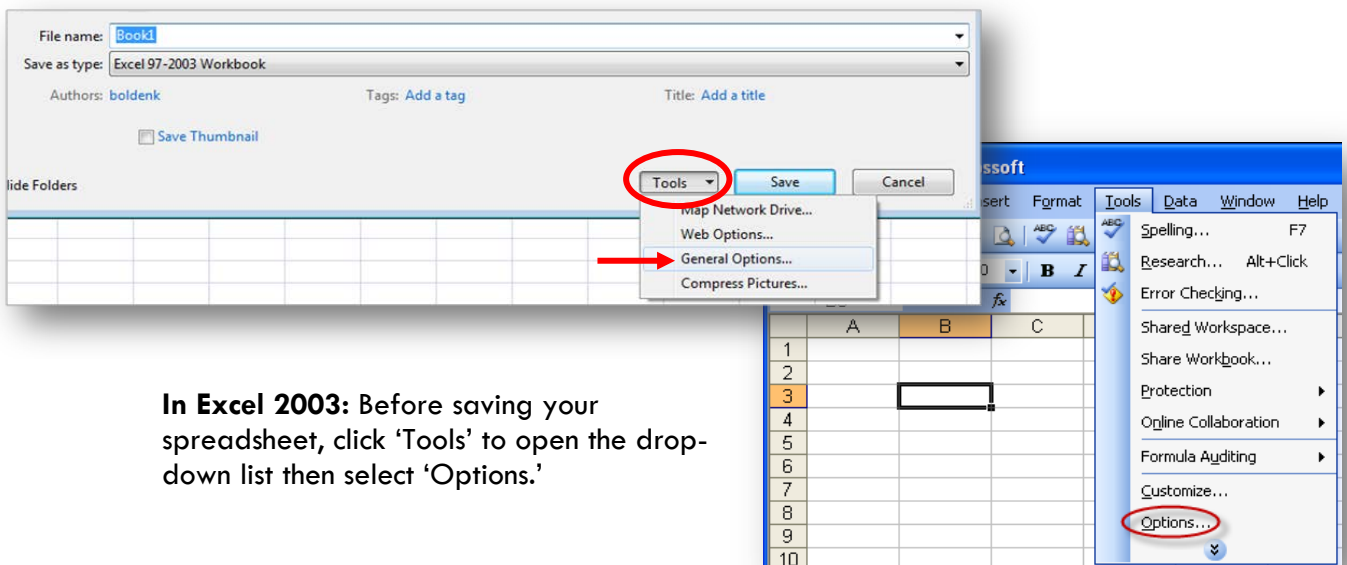
In Excel 2003: Before saving your spreadsheet, click 'Tools' to open the drop-down list then select 'Options.'

❸ In either version of Excel, the next window that opens will ask you for a '**Password to Open**' and a '**Password to Modify.**' If you would like the recipient to be able to both open and make changes to this spreadsheet, enter the same password in both fields.

If you want the recipient to only see the spreadsheet but not make changes to it, enter a 'Password to Open' and click the 'Read only recommended' box.

❹ You will be asked to **confirm** both passwords. Re-enter the same passwords and click 'OK.' The spreadsheet can then be saved and attached to an email.