HMIS USER GUIDE FOR VA SSVF PROJECTS

HOMLESSNESS PREVENTION (HP) | RAPID RE-HOUSING (RRH)

Contents

Date of Last Revision: 8/15/2022

DATA ENTRY QUICK REFERENCE

This section provides simplified instructions for common data entry tasks. Please refer to the General HMIS Instructions and upcoming sections of this document for further instruction. Your agency may have a project that receives funding from multiple sources for the same project to serve the same clients.

If you are using a single HMIS provider to report out to multiple funders, you will need to complete the data entry and reporting requirements for *each funder.* For detailed instructions, please refer to the Using one provider for multiple funding sources article found on MN's HMIS Knowledge Base.

CREATE A NEW CLIENT RECORD

1. Enter **EDA mode** as the correct provider and open the client's record in **ClientPoint**.
2. Make sure that the client is not already in HMIS by searching for different combinations of their information.
3. If no records match, fill out all of the search prompts and click on **Add New Client With This Information**. Clients that have consented to statewide data sharing should have the word **SHARED** typed in the **Alias** field.
    a. If the client has consented to participate in statewide data sharing, type the word **SHARED** in the **Alias** field. If you have additional questions about verifying and documenting statewide data sharing, refer to this document.
4. When prompted, enter the date of the client's entry into the project and select **Set New Back Date**. If the client entered the project today, you can select Clients entering on the day of data entry should use the **Current System Date**. (The date can be changed by clicking on **Back Date** in the top-right corner of the screen.)
5. Select the **Client Profile** tab and enter any information missing from the **Universal Profile Assessment**.
    a. If a client has agreed to statewide data sharing, enter a **Date of ROI Consent**.
6. If the client is being served with other household members, click on the **Households** tab and either add them to an existing household or create a new household.

ENTER A CLIENT INTO A PROJECT

1. Enter **EDA mode** as the correct provider and open the client's record in **ClientPoint**.
    a. If entering data for a household, be sure to search for the head of household.
2. When prompted, enter the date of the client's entry into the project and select **Set New Back Date**. If the client entered the project today, you can select **Current System Date**.
    a. The date can be changed by clicking on **Back Date** in the top-right corner of the screen.
3. Click on the **Entry / Exit** tab and select **Add Entry / Exit**.
    a. If entering a household, check the box next to each client included in the entry.
    b. Select **VA** from the **Type** drop-down menu.
    c. If necessary, adjust the **project start date**, then select **Save & Continue**.
4. For each client included in the entry, complete the data elements on the **VA: SSVF Entry (MACV)** in the **Entry/Exit Data** pop-up.
    a. If entering data for multiple household members, save time by clicking on **Add Household Data** and completing the **Household Data Sharing Assessment**.

UPDATE A CLIENT'S INFORMATION

Update information as needed for SSVF

1. Enter **EDA mode** as the correct provider and open the client's record in **ClientPoint**.
2. Click on the Entry/Exit tab, then select the Interims icon for the correct Entry/Exit.
3. In the Interim Reviews pop-up, click on Add Interim Review.
    a. For updates required every 6 months after entry, select 6 Month Review for "Interim Review Type." For updates prompted by a change, select Update.
    b. If serving a household, be sure to include all applicable household members in the entry by checking the boxes next to their names.
4. Update data elements (for each household member) on the **VA: SSVF Update (MACV)** in the Entry/Exit Interim Review pop-up.

Updates include:

1. Client's Residence (update client's residence information for duration of enrollment)
2. Occupying Permanent Housing: Complete at entry and update every 90 days while in program. To update, back date as needed to each additional 90 days after program entry and record appropriate response.
3. SSVF HP Targeting Criteria (Homelessness Prevention projects only)
4. VAMC Station Number -DROPDOWN ONLY, TEXT FIELD RETIRED

EXIT A CLIENT FROM A PROJECT	1. Enter **EDA mode** as the correct provider and open the client's record in **ClientPoint**. 2. Click on the **Entry/Exit** tab, then select the **edit pencil** (in the **Exit Date** column) next to the correct entry. a. If exiting a household, be sure to include all applicable household members in the exit by checking the boxes next to their names. b. Enter the correct **Exit Date** and **Destination**, then click on **Save & Continue.** 3. Complete the **VA: SSVF Exit (MACV)** for each household member. 4. **End all service transactions** from the Summary tab (or the Service Transactions tab)
RUN A REPORT	For more information about VA SSVF Reports, refer to the user guide section titled Reporting Guidelines. 1. Click on **Reports** to open the **Report Dashboard**. Select **SSVF Export** under the Custom Reports section. 2. Fill out the prompts in the **Report Options** section, then Click **Quality Report**. 3. Click on the blue numbers in the **Error Count** to identify clients with data quality issues. All data corrections need to be done by the 1st of every month. SSVF staff and ICA must have the reports uploaded to the repository by the 5th business day of each month.

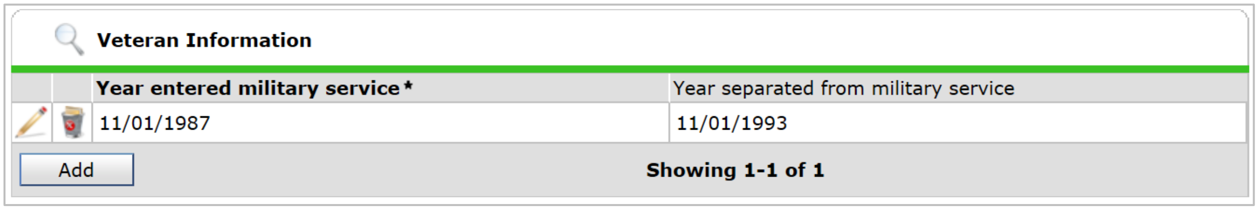
DATA COLLECTION FORMS

ICA does not create or maintain Data Collection Forms for SSVF.

PROGRAM-SPECIFIC DATA ELEMENTS

Program-specific data elements are chosen by your funder and are often unique to the types of projects they fund. More information about these data elements can be found in the VA Provider Data Guide

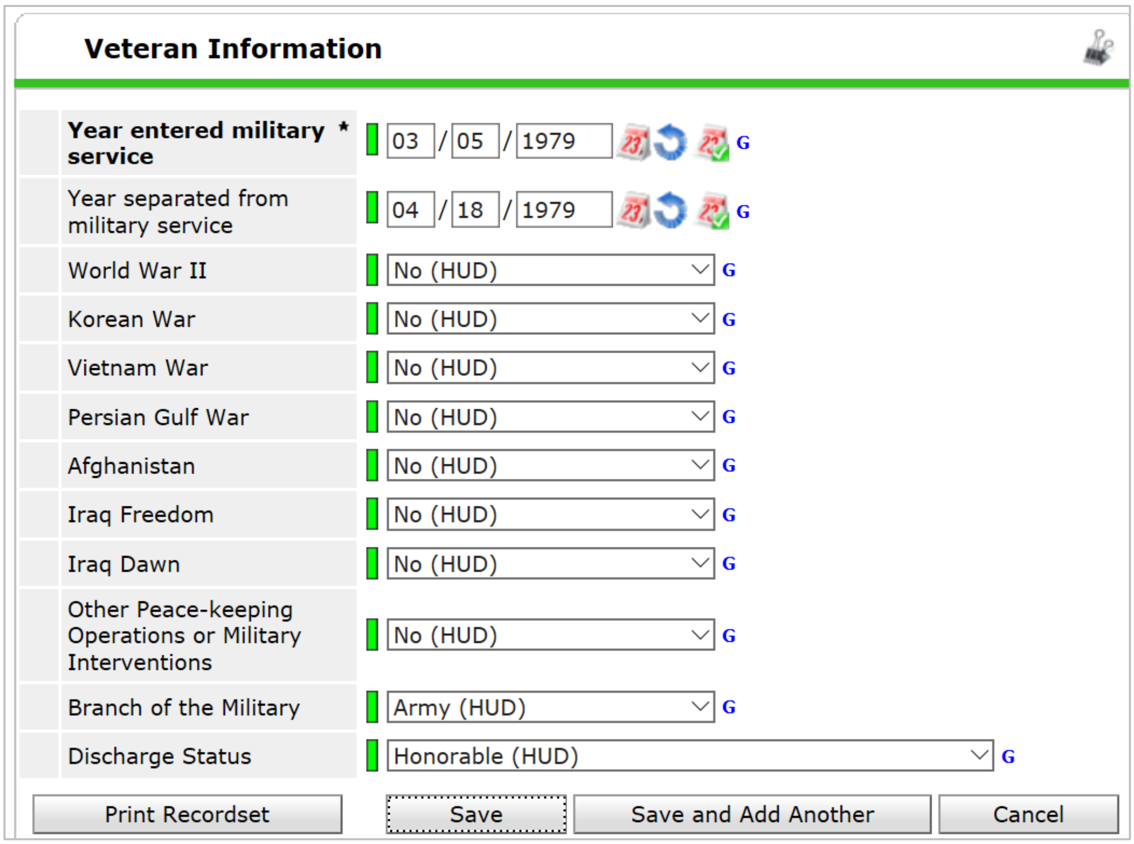
V1 VETERAN INFORMATION



Veteran Information

	Year entered military service *	Year separated from military service
	11/01/1987	11/01/1993

Add Showing 1-1 of 1



Veteran Information

Year entered military service *	03 / 05 / 1979 G
Year separated from military service	04 / 18 / 1979 G
World War II	No (HUD) G
Korean War	No (HUD) G
Vietnam War	No (HUD) G
Persian Gulf War	No (HUD) G
Afghanistan	No (HUD) G
Iraq Freedom	No (HUD) G
Iraq Dawn	No (HUD) G
Other Peace-keeping Operations or Military Interventions	No (HUD) G
Branch of the Military	Army (HUD) G
Discharge Status	Honorable (HUD) G

Print Recordset Save Save and Add Another Cancel

Project Type Applicability: PH - Rapid Re-Housing, Homelessness Prevention

Data Collected About: All Veterans

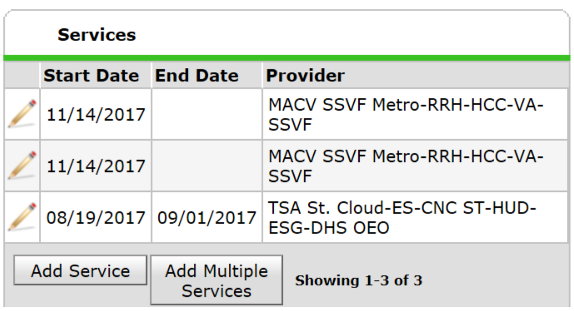
Data Collection Point: Project Start

Data Collection Instructions: Record the Year Entered and Year Separated for the Veteran's longest continuous period of service.

Field		Dependency	Response Category/Data Type	
1	Year Entered Military Service	None	1	[Integer YYYY]
2	Year Separated from Military Service	None	1	[Integer YYYY]
3	Theatre of Operations: World War II	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
4	Theatre of Operations: Korean War	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
5	Theatre of Operations: Vietnam War	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
6	Theatre of Operations: Persian Gulf War (Operation Desert Storm)	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
7	Theatre of Operations: Afghanistan (Operation Enduring Freedom)	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
8	Theatre of Operations: Iraq (Operation Iraqi Freedom)	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
9	Theatre of Operations: Iraq (Operation New Dawn)	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
10	Theatre of Operations: Other Peace-keeping Operations or Military Interventions (such as Lebanon, Panama, Somalia, Bosnia, Kosovo)	None	1	No
			2	Yes
			3	Client doesn't know
			4	Client refused
			5	Data not collected
11	Branch of the Military	None	1	Army

			2	Air Force
			3	Navy
			4	Marines
			5	Coast Guard
			6	Client Doesn't Know
			7	Client Refused
			8	Data Not Collected
12	Discharge Status	None	1	Honorable
			2	General under honorable conditions
			3	Under other than honorable conditions (OTH)
			4	Bad conduct
			5	Dishonorable
			6	Uncharacterized
			7	Client doesn't know
			8	Client refused
			9	Data not collected

V2 SERVICES PROVIDED


Services

Start Date	End Date	Provider
11/14/2017		MACV SSVF Metro-RRH-HCC-VA-SSVF
11/14/2017		MACV SSVF Metro-RRH-HCC-VA-SSVF
08/19/2017	09/01/2017	TSA St. Cloud-ES-CNC ST-HUD-ESG-DHS OEO

Add Service Add Multiple Services Showing 1-3 of 3

Project Type Applicability: PH - Rapid Re-Housing, Homelessness Prevention

Data Collected About: All Veterans

Data Collection Point: Occurrence Point (date service is provided)

Data Collection Instructions: If you meet with a participant 5 times during the course of enrollment to provide case management, there should be a record for each date.

Data Entry Instructions: Add a service/add multiple services on the date it is provided.

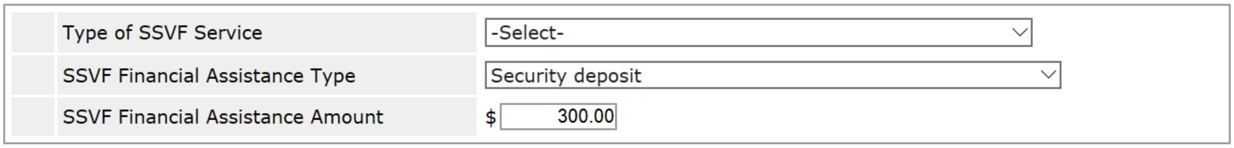
Services should be attached to the head of household's record. Do not create duplicate records of a single service for each household member.

Field		Dependency	Response Category/Data Type	
1	Date of Service	None	1	[Date]
2	Type of Service	None	1	Outreach services

Field	Dependency	Response Category/Data Type	
		2	Case management services
		3	Assistance obtaining VA benefits
		4	Assistance obtaining/coordinating other public benefits
		5	Direct provision of other public benefits
		6	Other (non TFA) supportive service approved by VA
		7	Extended Shallow Subsidy
		8	Returning Home
		9	Rapid Resolution
A If "Assistance obtaining VA Benefits"	Field 2 & Response 3	1	VA vocational rehabilitation counseling
		2	Employment and training services
		3	Educational assistance
		4	Health care services
B If "Assistance obtaining/coordinating other public benefits"	Field 2 & Response 4	1	Health care services
		2	Daily living services
		3	Personal financial planning services
		4	Transportation services
		5	Income support services
		6	Fiduciary and representative payee services
		7	Legal services - child support
		8	Legal services - eviction prevention
		9	Legal services - outstanding fines and penalties
		10	Legal services - restore/acquire driver's license
		11	Legal services - other
		12	Childcare
		13	Housing counseling
C If "Direct provision of other public benefits"	Field 2 & Response 5	1	Personal financial planning services
		2	Transportation services
		3	Income support services
		4	Fiduciary and representative payee services
		5	Legal services - child support
		6	Legal services - eviction prevention
		7	Legal services - outstanding fines and penalties
		8	Legal services - restore/acquire driver's license
		9	Legal services - other
		10	Childcare
		11	Housing counseling

Field		Dependency	Response Category/Data Type	
D	If "Other (non TFA) Supportive Service approved by VA"	Field 2 & Response 6	1	[Text]

V3 FINANCIAL ASSISTANCE



Data Collection Point: Occurrence Point (date provided) **Data Collected About:** All Veterans

Project Type Availability: PH - Rapid Re-Housing, Homelessness Prevention

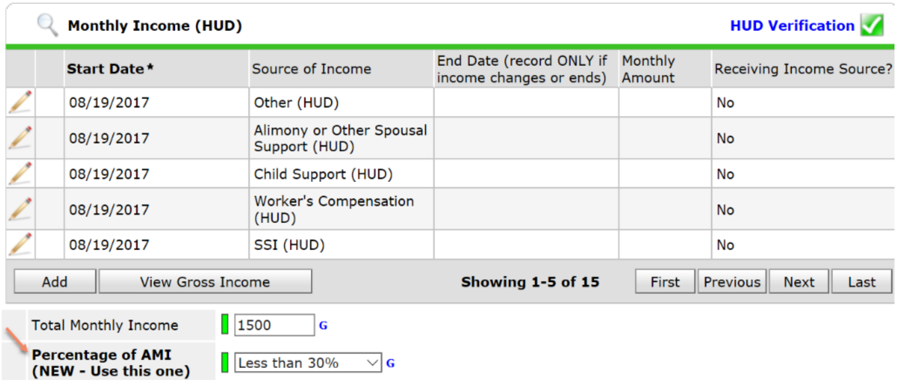
Data Collection Instructions:

- Add a financial service on the date the check is cut.
- There should be a separate record of financial assistance for each check that is cut; the date of financial assistance should be the date that the check is cut.
- If a check is returned or not cashed, delete the record in HMIS.

Data Entry Instructions: Enter financial assistance under the head of household's record. Do not create duplicate records of a single instance of financial assistance for each household member; after a household is discharged, it should be possible to determine, based on HMIS data, how much financial assistance the household received.

Field		Dependency	Response Category/Data Type	
1	Date of Financial Assistance	None	1	[Date]
2	Financial Assistance Amount	None	1	[Date]
3	Financial Assistance Type	None	1	Rental Assistance
			2	Utility fee payment assistance
			3	Security deposit
			4	Utility deposit
			5	Moving costs
			6	Transportation services: token/vouchers
			7	Transportation services: vehicle repair/maintenance
			8	Childcare
			9	General housing stability assistance
			10	Emergency housing assistance
			11	Extended Shallow Subsidy - Rental Assistance
			12	Food Assistance

V4 PERCENT OF AMI (SSVF ELIGIBILITY)



Data Collection Point: Project Start **Data Collected About:** Head of Household

Project Type Availability: PH - Rapid Re-Housing, Homelessness Prevention

Data Collection Instructions: Record the household income as a percentage of Area Median Income (AMI). Select a category based on the SSVF Income Eligibility Calculation using the SSVF Income Eligibility Worksheet (on the next page).

Field	Dependency	Response Category/Data Type
1 Household Income as a percentage of AMI	None	1 Less than 30%
		2 30% to 50%
		3 Greater than 50%

Please note that although 'Greater than 50%' is a response category defined in the HMIS Data Standards, households with income greater than 50% of the Area Median Income are ineligible for SSVF. Responses of 'Greater than 50%' will negatively impact data quality.

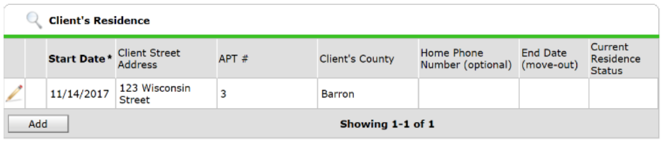
SSVF Income Eligibility Calculation Worksheet

To be eligible for SSVF, households must be at or below 50% of the Area Median Income (and meet other SSVF eligibility requirements). Grantees may use this sample worksheet to determine whether an applicant household meets the SSVF income eligibility threshold. A copy of this worksheet should be kept in the SSVF participant case file. For additional information on SSVF eligibility requirements and documentation standards, see the SSVF Program Guide.

Household Member Number	Household Member Name	Age of Household Member
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
	Total Household Members (Household size)	
	50% of Area Median Income (AMI) for Household Size	$ -

Household Member Number/Name	Sources of Household Income	Gross Documented Current Income Amount	Frequency of Income	Number of Payments per Year	Annual Gross Income (gross income amount X # of payments per year)
	Earned Income (for ADULT household members only)	$ -			$ -
	Earned Income (for ADULT household members only)	$ -			$ -
	Earned Income (for ADULT household members only)	$ -			$ -
	Self-employment/business income	$ -			$ -
	Self-employment/business income	$ -			$ -
	Interest & Dividend Income	$ -			$ -
	Income from Assets	$ -			$ -
	Pension/Retirement Income	$ -			$ -
	Pension/Retirement Income	$ -			$ -
	Unemployment & Disability Income	$ -			$ -
	Unemployment & Disability Income	$ -			$ -
	TANF/Public Assistance	$ -			$ -
	TANF/Public Assistance	$ -			$ -
	Alimony, Child Support and Foster Care Income	$ -			$ -
	Alimony, Child Support and Foster Care Income	$ -			$ -
	Armed Forces Income	$ -			$ -
	Armed Forces Income	$ -			$ -
	Other (specify):	$ -			$ -
	Other (specify):	$ -			$ -
	Total Annual Gross Income from all Sources				**$ -**
	50% of Area Median Income for Household Size				**$ -**
	Variance (If less than AMI, then household is income eligible)				**$ -**
	Is the household at or below 50% Area Median Income?				***YES-Income Eligible***
					NO-Not Income Eligible

V5 LAST PERMANENT ADDRESS



Data Collection Point: Project Start **Data Collected About**: Head of Household

Project Type Availability: PH - Rapid Re-Housing, Homelessness Prevention

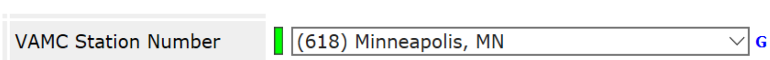
Data Collection Instructions: Record the head of household's last permanent address. For Prevention clients, this will be their current address. For Rapid Re-Housing participants, this is not the location where the participant is currently staying, but the address of the last place they were permanently housed. This should never be the address of a shelter or a reference to a location like the streets or a park – it should be the address where the client was last in housing that might be categorized as permanent, such as:

• An apartment or house rented by the client, with or without a subsidy;

• A home owned or rented by someone else (e.g., the client's parents, a friend, etc.) where the client lived.

Field	Dependency	Response Category/Data Type
1 Street Address	None	1 [Text]
2 City	None	1 [Text]
3 State	None	1 [Text]
4 Zip Code	None	1 [Text]
5 Address Data Quality	None	1 Full address reported
		2 Incomplete or estimated address reported
		3 Client doesn't know
		4 Client refused
		5 Data not collected

V6 VAMC STATION NUMBER



Data Collection Point: Project Start **Data Collected About:** Head of Household (All Veterans)

Project Type Availability: PH - Rapid Re-Housing, Homelessness Prevention

Data Collection Instructions: The service number requires no input from the client. The list of VAMC Station Numbers can be found on the HMIS_CSV_Specifications document located on the Homelessness Data Exchange.

Data Entry Instructions: This data element has been revised to offer a drop-down option for selecting the VA Medical Center (VAMC) Station Number that corresponds to the grantee's service location.

Field	Dependency	Response Category/Data Type
1 VAMC Station Number	None	1 [Text]

V7 SSVF HP TARGETING CRITERIA

Data Collection Point: Project Start **Data Collected About:** Head of Household (All Veterans)

Project Type Availability: Homelessness Prevention

Data Collection Instructions: The data element contains nineteen separate questions or field names.

Data Entry Instructions: Enter the results of SSVF Homelessness Prevention Stage 2 Targeting Criteria Screening as of the date of Project Start for all heads of households.

Field	Dependency	Response Category/Data Type
1 Is Homelessness Prevention Targeting Screener required?	None	0 No
		1 Yes
2 **Housing loss expected within...**	Field 1 Response 1	0 0-6 days
		1 7-13 days
		2 14-21 days
		3 More than 21 days
3 Current household income	Field 1 Response 1	0 $0 (i.e., not employed, not receiving cash benefits, no other current income)
		1 1-14% of Area Median Income (AMI) for household size
		2 15-30% of AMI for household size
		3 More than 30% of AMI for household size
4 **History of Literal Homelessness (street/shelter/transitional housing) (any adult)**	Field 1 Response 1	0 Most recent episode occurred within the last year
		1 Most recent episode occurred more than one year ago
		2 None
5 **Head of Household (HOH) is not a current leaseholder**	Field 1 Response 1	0 No
		1 Yes
6 **Head of Household (HOH) has never been a leaseholder**	Field 1 Response 1	0 No
		1 Yes
7 **Currently at risk of losing a tenant-based housing subsidy or housing in a subsidized building or unit?**	Field 1 Response 1	0 No
		1 Yes
8 **Rental Evictions within the past 7 years (any adult)**	Field 1 Response 1	0
		1 Yes
9 **Criminal record for arson, drug dealing or manufacture, or felony offense against persons or property (any adult)**	Field 1 Response 1	0 No
		1 Yes

10 **Incarcerated as adult (any adult in household)**	Field 1 Response 1	0	No
		1	Yes
11 **Discharged from jail or prison within last six months after incarceration of 90 days or more (adults)**	Field 1 Response 1	0	No
		1	Yes
12 Registered sex offender (any household members)	Field 1 Response 1	0	No
		1	Yes
13 **Head of Household with disabling condition (physical health, mental health, substance use) that directly affects ability to secure/maintain housing**	Field 1 Response 1	0	No
		1	Yes
14 **Currently pregnant (any household member)**	Field 1 Response 1	0	No
		1	Yes
15 **Single parent with minor child(ren)**	Field 1 Response 1	0	No
		1	Yes
16 **Household includes one or more young children (age six or under), or a child who requires significant care**	Field 1 Response 1	0	No
		1	Youngest child is under 1 year old
		2	Youngest child is 1 to 6 years old and/or one or more children (any age) require significant care
17 **Household size of 5 or more requiring at least 3 bedrooms (due to age/gender mix)**	Field 1 Response 1	0	No
		1	Yes
18 **Household includes one or more members of an overrepresented population in the homelessness system when compared to the general population**	Field 1 Response 1	0	No
		1	Yes
19 HP applicant total points	None	[integer]	
20 Grantee targeting threshold score	None	[integer]	

P4 CONNECTION WITH SOAR

Data Collection Point: Project Start, Update, Annual Assessment, Project Exit

Project Type Availability: PH - Rapid Re-Housing, Homelessness Prevention

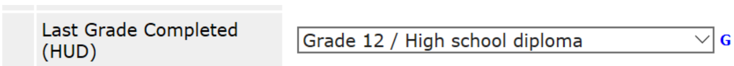
Data Collected About: Head of Household and All Adults

Data Collection Instructions: Record for all adults in the household any connection to a SOAR program. Update the connection status anytime between project, annual assessment, and project.

Field	Dependency	Response Category/Data Type	
1 Connection with SOAR	None	0	No

Field	Dependency	Response Category/Data Type
		1 Yes
		8 Client doesn't know
		9 Client refused
		99 Data not collected

R4 LAST GRADE COMPLETED



Data Collection Point: Project Start and Project Exit

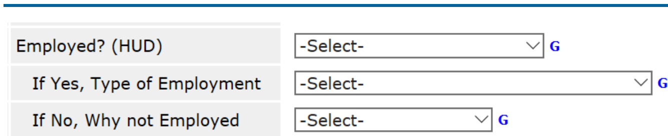
Project Type Availability: PH - Rapid Re-Housing, Homelessness Prevention

Data Collected About: Head of Household and All Adults

Data Entry Instructions Enter the last grade completed by choosing the appropriate answer from the dropdown question.

Field	Dependency	Response Category/Data Type
1 Last grade completed	None	1 Less than Grade 5
		2 Grade 5-6
		3 Grade 7-8
		4 Grade 9-11
		5 Grade 12/High school diploma
		6 School program does not have grade levels
		7 GED
		10 Some college
		11 Associate degree
		12 Bachelor's degree
		13 Graduate degree
		14 Vocational certification
		8 Client doesn't know
		9 Client refused
		99 Data not collected

R6 EMPLOYMENT STATUS



Data Collection Point: Project Start, Project Exit

Project Type Availability: PH - Rapid Re-Housing, HP - Homelessness Prevention, GPD

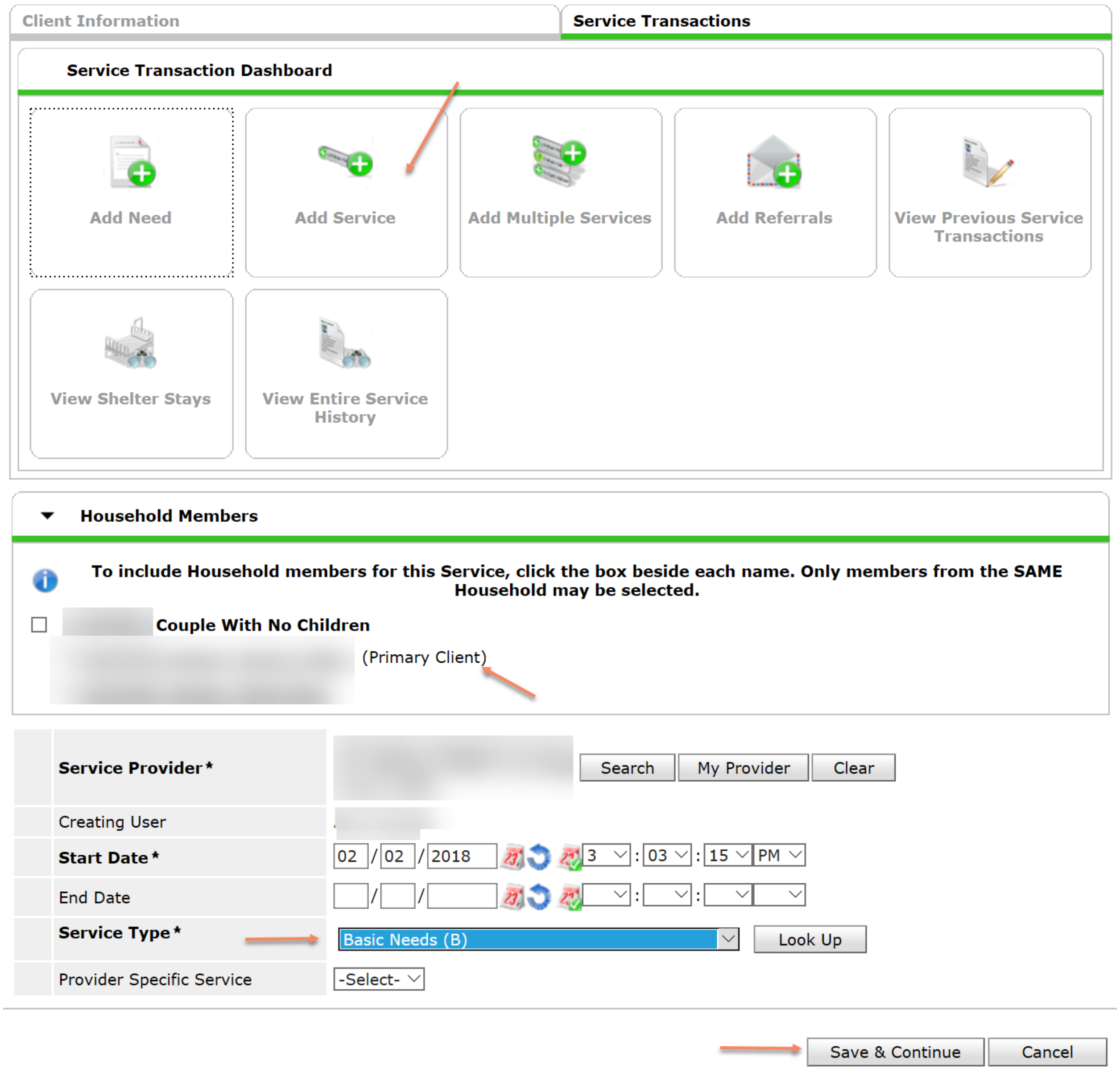
Data Collected About: Head of Household and All Adults

Data Entry Instructions Enter the employment status using the dropdowns.

Field	Dependency	Response Category/Data Type	
1 Information Date (date information was collected)	None	1	[integer]
2 Employed	None	0	No
		1	Yes
		8	Client doesn’t know
		9	Client refused
		99	Data not collected
A If Yes for employed, type of employment	Field 2 & Response 1	1	Full-time
		2	Part-time
		3	Seasonal/sporadic (including day labor)
B If No for employed, why not employed	Field 2 & Response 0	1	Looking for work
		2	Unable to work
		3	Not looking for work
		1	Yes
15 Household size of 5 or more requiring at least 3 bedrooms (due to age/gender mix)	None	0	No (0 points)
		1	Yes
16 Any Veteran in household served in Iraq or Afghanistan	None	0	No (0 points)
		1	Yes
17 Female Veteran	None	0	No (0 points)
		1	Yes
20 HP applicant total points	None	1	[integer]
21 Grantee targeting threshold score	None	1	[integer]

ENTERING SERVICE TRANSACTIONS

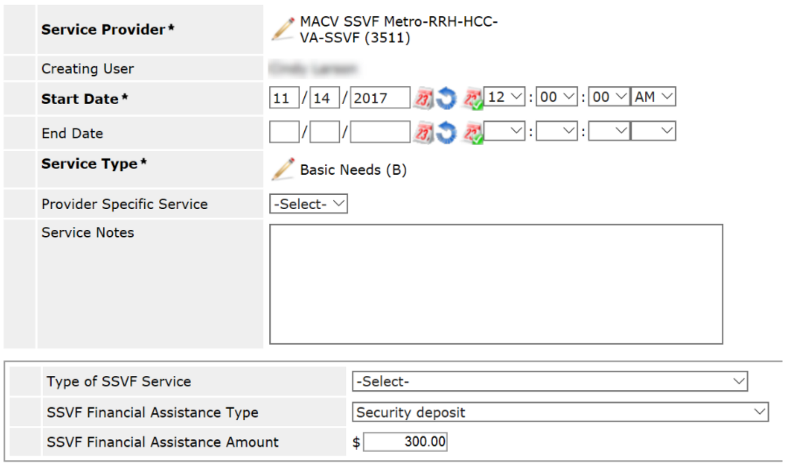
Note: You must be on the HOH record (Primary Client) when entering Service Transactions, both Financial and Non-Financial.



Service Type=Basic Needs

1. Save & Continue (Select and Save only one service type at a time)
2. If entering a non-financial assistance service, select from the Type of SSVF Service drop-down menu.
3. If you select Assistance Obtaining VA Benefits, a second dropdown will appear for you to select the type of VA Benefit.
4. Scroll down and hit Save & Exit. Do not add a financial assistance service at the same time.

5. If entering a financial assistance service, follow the steps above. Select from the SSVF Financial Assistance Type drop-down menu and enter the Amount. A separate entry (i.e. Security deposit, Rental Assistance, Utility Fee Payment, etc.) must be completed for each financial service provided. Add VA for the funding source and the amount again under Funding Sources.
6. Scroll down and hit Save & Exit. Do not add a non-financial assistance service at the same time.



REPORTING GUIDELINES

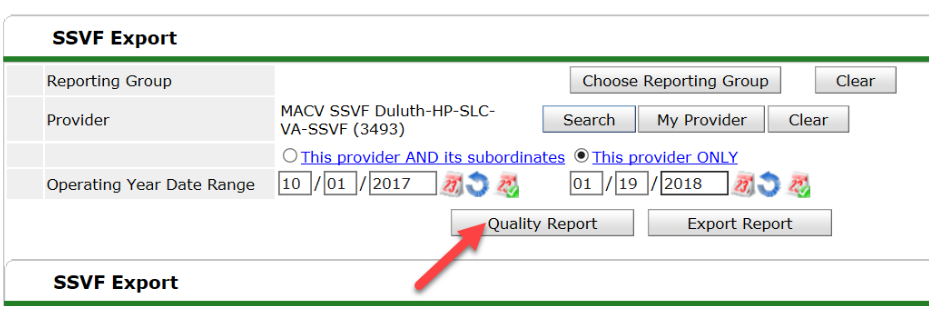
This section introduces the data quality and funder-required reports for VA SSVF projects. Users should run Quality Reports from within the SSVF Export regularly to ensure that accurate information is being provided to funders and other agencies. For information about reporting periods, due dates, and changes to requirements, refer to communications from funders.

DATA QUALITY REPORTS

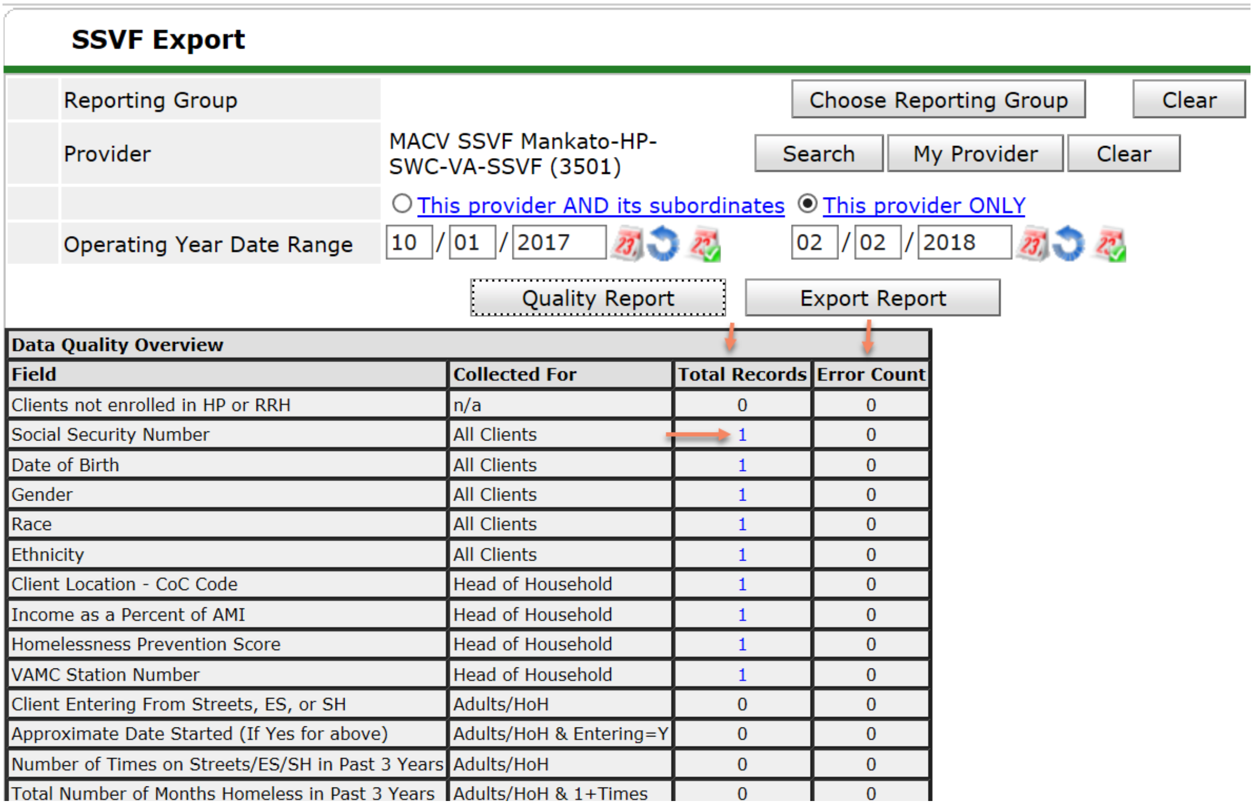
Name: Quality Report

Location: SSVF Export

Required Prompts: Provider or Reporting Group, check "This provider only" and Operating Year Date Range Start and End Dates. (See above.)



1. **Data Quality Instructions:** Data Correction: Run the Quality Report (within the canned report) for SSVF found here: **Reports > Custom Reports > SSVF Export Dashlet.** Click on the hyperlinks for the client ids that are showing corrections needed. Please make sure to make any data entry corrections before the first of the month. SSVF staff and ICA must upload the report to the repository by the 5th business day of the month.



Data Quality Overview			
Field	**Collected For**	**Total Records**	**Error Count**
Clients not enrolled in HP or RRH	n/a	0	0
Social Security Number	All Clients	1	0
Date of Birth	All Clients	1	0
Gender	All Clients	1	0
Race	All Clients	1	0
Ethnicity	All Clients	1	0
Client Location - CoC Code	Head of Household	1	0
Income as a Percent of AMI	Head of Household	1	0
Homelessness Prevention Score	Head of Household	1	0
VAMC Station Number	Head of Household	1	0
Client Entering From Streets, ES, or SH	Adults/HoH	0	0
Approximate Date Started (If Yes for above)	Adults/HoH & Entering=Y	0	0
Number of Times on Streets/ES/SH in Past 3 Years	Adults/HoH	0	0
Total Number of Months Homeless in Past 3 Years	Adults/HoH & 1+Times	0	0