

HMIS USER GUIDE FOR DHS HTHP PROJECTS

Support Services (SSO) | Transitional Housing (TH) | Rapid Re-Housing (RRH)

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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.

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.
 - a. If you are provisionally accepting a referral from your CoC's Coordinated Entry System for a housing opening, select your project provider (the project that has an opening the client may be filling at your agency) when entering EDA mode.
3. If no records match, fill out all of the search prompts and click on **Add New Client With This Information**.
 - a. If the client has consented to participate in statewide data sharing, enter the word **SHARED** in the **Alias** field.
 - b. If receiving a Coordinated Entry referral, you can go directly to the client's record using the client ID given to you by your CoC's Priority List Manager.
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 **Current System Date**. (The date can be changed by clicking on **Back Date** in the top-right corner of the screen).
 - a. If receiving a Coordinated Entry referral, you do not need to Back Date at this point. Please refer to the steps given in the "CES in HMIS Written Instructions" document for your CoC's workflow.
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 **Basic** 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 **MN: DHS HTHP Step 1** 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

Outcomes updates are required quarterly. Create an update prior to each quarterly report due date.

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. Select **90-Day Review** from the **Interim Review Type** drop-down menu.
 - 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. Review the Outcomes data elements in the **Entry/Exit Interim Review** pop-up; where a change has taken place, update with the correct answer.

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, Reason for Leaving, and Destination**, then click on **Save & Continue**.
3. Only **Reason for Leaving** and **Destination** are required at exit. **Save & Exit**.
4. Record updated information on the **MN: DHS HTHP Outcomes Assessment** by creating a final **90-Day Review** (or update one that had already been created that quarter).

RUN A REPORT

For more information about DHS HTHP Reports, refer to the user guide section titled [Reporting Guidelines](#).

1. Click on **Reports** to open the **Report Dashboard**. Select **ART**.
2. Schedule reports for **DHS HTHP** located in Public Folder → SSA Report Gallery → DHS HTHP (Youth Transitions)
3. Select the report you wish you run, fill out the prompts, then click **Next**, fill out **Report Format** and **Interval**, and then click on **Send**.
4. Send reports to funder as PDF email attachments.

DATA COLLECTION FORMS

DATA COLLECTION FORMS FOR DHS HTHP PROJECTS CAN BE FOUND BY FOLLOWING THE LINKS PROVIDED BELOW OR VISITING THE [FORMS AND INSTRUCTIONS](#) PAGE ON THE MINNESOTA HMIS WEBSITE. THESE FORMS WILL CHANGE AS NEW DATA STANDARDS ARE RELEASED ANNUALLY ON JULY 1 (MINNESOTA) AND OCTOBER 1 (HUD).

You are not required to use ICA's data collection forms. Staff responsible for data collection should also be aware that their agency may require them to gather non-HMIS data that is not captured by these forms.

FAMILIES

[DHS HTHP Household Entry](#)

[DHS HTHP Household Exit](#)

[DHS HTHP Outcomes](#)

INDIVIDUALS

[DHS HTHP Single Entry](#)

[DHS HTHP Single Exit](#)

[DHS HTHP Outcomes](#)

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 HTHP PROGRAM MANUAL, AVAILABLE BY REQUEST FROM **NIC VOGEL** AT THE MN DEPARTMENT OF HUMAN SERVICES.

PREGNANT OR PARENTING

Project Type Applicability: All Project Types

Data Collected About: Head of Household & Adults

Data Collection Point: Project Start and Update

Data Collection Instructions: Record status at project start. If there is a change in status during the client’s enrollment, create an Update.

Field	Dependency	Response Category/Data Type
A Pregnant or parenting?	None	Yes
		No
		Client doesn’t know
		Client refused
		Data not collected

REASON FOR LEAVING

Project Type Applicability: All Project Types

Data Collected About: All Clients

Data Collection Point: Project Exit

Data Collection Instructions: This is required in addition to answering “Destination at Exit.”

Field	Dependency	Response Category/Data Type
A Reason for Leaving	None	Completed program
		Non-payment of rent
		Reached Maximum Age Allowed
		Reached maximum time allowed
		Criminal activity / violence
		Voluntarily Withdrew From Program
		Left for Housing Opportunity Before Reaching Maximum Time Allowed
		Non-compliance with program
		Unknown/Disappeared
		Needs could not be met
		Death
Other		

OUTCOMES MEASURED

Project Type Applicability: All Project Types

Data Collected About: All Clients Receiving Services **Data Collection Point:** Update (Interim Review)

Data Collection Instructions: Outcomes can be updated throughout the individual’s participation in the program. A response of “yes” or “no” is required for every single outcome area listed in the Outcomes Measured section. “Yes” indicates the client accomplished the outcome. “No” means they are either not focused on that outcome or are making progress but the outcome has not yet been achieved. See [Adding Outcomes](#) section for detailed instructions on entering Outcomes in HMIS.

INDEPENDENT LIVING SKILLS PLAN

Field	Dependency	Response Category/Data Type
A Independent Living Skills Plan completed?	None	Yes
		No
B Number of individual sessions during reporting period?	None	[number field]
C Number of group sessions youth attended during reporting period?	None	[number field]

TRANSPORTATION

Field	Dependency	Response Category/Data Type
A Does youth have Driver's License?	None	Yes
		No
B Does youth have Driver's Permit?	None	Yes
		No
C Successfully navigates public transportation?	None	Yes
		No

VITAL DOCUMENTS PORTFOLIO

Field	Dependency	Response Category/Data Type
A Does youth have their Birth Certificate?	None	Yes
		No
B Does youth have their Social Security Card?	None	Yes
		No
C Does youth have a State ID or Tribal ID Card?	None	Yes
		No

EMPLOYMENT

Field	Dependency	Response Category/Data Type
A Is youth currently employed?	None	1 Yes
		2 No
B Was youth employed for entire reporting period?	Field A; Response 1	1 Yes
		2 No

EDUCATION

Field	Dependency	Response Category/Data Type
A Does youth have GED or High School Diploma?	None	1 Yes
		2 No
B If No , are they currently attending school?	Field A; Response 2	1 Yes
		2 No
C Was youth accepted into a post-secondary education program?	None	1 Yes
		2 No
D Assisted youth in applying for financial aid, including completing the FAFSA?	Field C; Response 1	1 Yes
		2 No
E Youth obtained Education and Training Voucher (ETV)?	Field C; Response 1	1 Yes
		2 No

FISCAL

Field	Dependency	Response Category/Data Type
A Was the youth provided with financial literacy training in reporting period?	None	Yes
		No

HOUSING ASSISTANCE

Field	Dependency	Response Category/Data Type
A Did the youth receive housing assistance this reporting period?	None	1 Yes
		2 No
B Amount of assistance provided during quarter?	Field A; Response 1	1 [Money field]

FAMILY REUNIFICATION AND PERMANENT CONNECTIONS

Field	Dependency	Response Category/Data Type
A Is family reunification a safe, appropriate option for this youth?	None	Yes
		No
B Was youth provided support in connecting and building relationships with family during the reporting period?	None	Yes
		No
C Completed Permanency Pact?	None	Yes
		No
D Completed Youth Connection Scale?	None	Yes
		No
E Was youth provided support in connecting and building a stable relationship with a positive, supporting adult (other than family or agency staff)?	None	Yes
		No

EXTENDED FOSTER CARE

Field	Dependency	Response Category/Data Type
A Has the youth attempted to access their extended Foster Care Benefits?	None	Yes
		No

MEDICAL

Field	Dependency	Response Category/Data Type
A Does the youth have identified healthcare (including mental health) providers and/or is connected to a clinic?	None	Yes
		No
B If youth is pregnant or parenting, has the youth been offered or referred to support services?	None	Yes
		No
		Not Applicable

TRAUMA SCREENING

Field	Dependency	Response Category/Data Type
A Did the agency provide youth with a trauma screening?	None	Yes
		No

SEY/SEX TRAFFICKING

Field	Dependency	Response Category/Data Type
A Has the youth exchanged sex acts for money, a place to stay, clothing, food, drugs, transportation, or other things to meet their needs?	None	1 Yes
		2 No
B If Yes , was a third-party trafficker involved?	Field A; Response 1	1 Yes
		2 No
C If Yes , has the youth been offered or referred to Safe Harbor services?	Field A; Response 1	1 Yes
		2 No

DO YOU CREATE A HOUSEHOLD?

You will primarily be entering single clients into ServicePoint (youth served by your program placed in foster care or having left foster care). If youth are being served on their own, no household needs to be created and the youth will be considered “Self (head of household).”

Only create a household if the youth head of household is a parenting youth. You should not record information on parents or other adults to whom the youth client may be connected as they are not being served by your program.

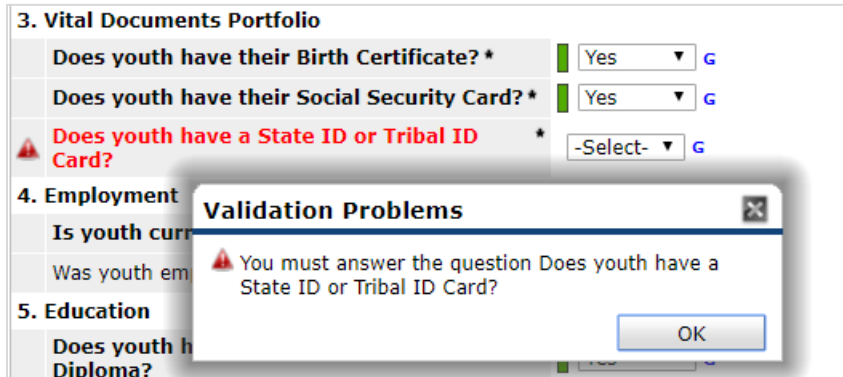
ADDING OUTCOMES

The “MN: DHS HTHP Outcomes” (“Outcomes”) assessment tracks a client’s progress for 12 outcome or goal areas which the client identifies, works towards, and/or completes while in your program. Outcomes should be completed for all clients and should be updated quarterly as the client makes progress. Outcomes can be updated from the Entry / Exit tab under the Interim heading.

HOW TO: INTERIM REVIEW

1. If a client is enrolled in your program *at any point* during the quarterly reporting period, you must create a **90-Day Review** and answer/update the MN: DHS HTHP Outcomes assessment questions. Please note, the *Review Type* will always be **90-Day Review**, even if a client has not been enrolled in your project for 90 days. **90-Day Review** does not refer to a length of time, it is just the Review Type used to report Outcomes!
2. Create *only one 90-Day Review* for each quarterly reporting period. A new **90-Day Review** should be created for each quarterly reporting period. Below are the date ranges for the quarterly reporting periods:
 - Quarter 1 Dates: January 1 - March 31
 - Quarter 2 Dates: April 1 - June 30
 - Quarter 3 Dates: July 1 - September 30
 - Quarter 4 Dates: October 1 - December 31

3. From the Entry / Exit tab, under the Interim heading, click on the correct Entry / Exit you're wanting to create an Interim Review for.
4. Select **90-Day Review** for Interim Review Type. Review Date should fall within the quarter you're recording data and reporting on.
5. A response of "yes" or "no" is required for every outcome area listed in the **Outcomes Measured** section. "Yes" indicates the client accomplished the outcome. "No" means they are either not focused on that outcome or are making progress but the outcome has not yet been achieved.
 - a. **Please Note:** If you try to **Save & Exit** without answering all the required questions in the Outcomes Assessment, a pop-up window will appear, prompting you to complete the remaining questions:



- b.
 - c. For some "yes/no" statements, there are "If yes..." or "If no..." clauses that require additional information. The system will not prompt you to answer these questions if they are left blank, so make sure to record an answer if necessary.
6. Best practice is to update Outcomes as a client meets a goal, so you are prepared for reporting. As you update outcomes during the reporting period, update the **90-Day Review** you've created for that reporting period.
7. At client's exit, update the **90-Day Review** that falls within the reporting period at exit so that the answer to the Outcomes assessment are current as of exit date.
8. **Scenario:** A client enters your program with a project start date of 10/4/2017 and exits on 6/21/2019. Correct Outcomes assessment data entry would include seven Interim Reviews completed with the following Interim Review dates as possibilities: 12/15/2017, 3/20/2018, 5/24/2018, 8/30/2018, 10/16/18, 2/28/2019, and 6/21/2019. Note that each review that has been completed is a **90-Day Review** and there is one review completed within each quarterly reporting period:

Interim Reviews Associated with this Entry / Exit			
	Review Date	Review Type	Client Count
	06/21/2019	90-Day Review	
	02/28/2019	90-Day Review	
	10/16/2018	90-Day Review	
	08/30/2018	90-Day Review	
	05/24/2018	90-Day Review	
	03/20/2018	90-Day Review	
	12/15/2017	90-Day Review	

9. If a client reenters your program, when you create a new Interim associated with the new Entry/Exit you'll see previously entered Outcomes. You can continue to track these even if the outcome was accomplished in previous enrollment.

REPORTING GUIDELINES

This section introduces the data quality and funder-required reports for DHS HTHP projects. Users should run data quality reports 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

Names: SHP-30-DQR-064 - DHS HTHP Demographics Data Check

SHP-30-SAG-039 - DHS HTHP Outcomes (Same report used to submit to Funder)

Location: Public Folder → SSA Report Gallery (Funder Reports) (Secure) → 4. State Homeless Programs → DHS HTHP

Report Prompts:

- Select Provider(s): *Choose the provider(s) you want to include in your report*
- Select Reporting Group(s): *Can be left blank if not using a Reporting Group*
- EDA Provider: *Can be left blank except in rare cases*
- Enter Start Date: *The first day of the quarter*
- Enter End Date (PLUS 1 Day): *The last day of the report period +1 day*
- Enter Biennium Start Date: *Leave as is (correct date is pre-populated)*
- Enter Biennium End Date (PLUS 1 Day): *Leave as is (correct date is pre-populated)*

Data Quality Instructions: Run all the reports listed above every month to identify and correct erroneous and missing data prior to the quarterly DHS due date. It is best to export these reports as an Excel file and cross analyze the counting and data check reports for both demographics and outcomes.

Check to confirm that all clients served in a report period appear on the report. Additionally, check to confirm that clients exited in prior quarters are not showing up on the report. If a client does not appear on a report, it is likely a problem with the project start date or the entry provider. If a client shows up on a report and has exited the program prior to the report period, it is likely a problem with the exit date.

FUNDER-REQUIRED REPORTS

Names: SHP-30-SAG-108 - DHS HTHP Demographics Counting

SHP-30-SAG-039 - DHS HTHP Outcomes (Same report used for Data Quality)

Location: Public Folder → SSA Report Gallery (Funder Reports) (Secure) → 4. State Homeless Programs → DHS HTHP

Report Prompts:

- Select Provider(s): *Choose the provider(s) you want to include in your report*
- Select Reporting Group(s): *Can be left blank if not using a Reporting Group*
- EDA Provider: *Can be left blank except in rare cases*
- Enter Start Date: *The first day of the quarter*
- Enter End Date (PLUS 1 Day): *The last day of the report period +1 day*

- Enter Biennium Start Date: *Leave as is (correct date is pre-populated)*
- Enter Biennium End Date (PLUS 1 Day): *Leave as is (correct date is pre-populated)*

Submission Frequency: Reports are due to DHS quarterly on the 15th day of the month following the end of the quarter.

Submission Instructions: If you have more than one HTHP program (i.e. In Care and Left Care), include both providers in the ART report prompts and send the combined reports to DHS. ICA HMIS runs a different report summarizing each HTHP provider separately for DHS. Email the “DHS HTHP Demographics Counting Report” and “DHS HTHP Outcomes” to DHS staff as PDF files.