JOINT OFFICE OF HOMELESS SERVICES – STREET OUTREACH (SO)

ServicePoint Handbook

Contents

Multnomah County

Questions? Contact servicepoint@multco.us

JOINT OFFICE OF HOMELESS SERVICES – STREET OUTREACH (SO) SERVICEPOINT HANDBOOK REVISION HISTORY

- Published December 2020
- **July 2021** – added 3 Client Profile questions (Name Data Quality, SSN Data Quality, U.S. Veteran), added appendices on completing Income and HUD Verifications.
- **October 2021** – added instructions for selecting more than one Gender option; added SHS Population A/B question to program entry.

JOHS-SO PROGRAM MODEL

Intensive street outreach to move those with the highest barriers to services, into permanent housing.

DATA MILESTONES – JOHS-SO

ENTRY

- Add client to ServicePoint*
- Create household if more than one person is entering program
- Create ROI for entire HH
- Answer 3 questions on the Client Profile tab
- Create JOHS-SO program entry for entire HH

SERVICES / INTERIM REVIEWS

- Services data entry is due within 10 days of services given
- Not all agencies will enter services for SO
- Complete Interim Review to update client information as needed

EXIT

- Exit client in ServicePoint

ENTRY INTO JOHS-SO

- After clients sign a *Client Consent to Share* form for their household, add agency AND JOHS-SO level ROIs to each HH member's ServicePoint profile. Instructions can be found at: https://multco.us/servicepoint/manualsguides
- Create a program entry for the Head of Household. Click the check box next to the names of **all household members** to include them in the entry.
- Go into **each** client's entry (adults and children) to enter data.

1. BUILD/UPDATE HOUSEHOLD – if more than one person in household

Household Type	
Head of Household	Only one person should be designated as head of household
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 SO level ROI to all household members.

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

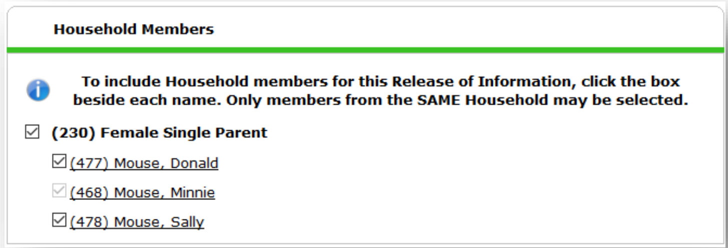
Only one Client Consent form needs to be signed per household, but it needs to be transacted in SP under multiple SP providers, including the Parent provider (also known as your Login Provider) AND **all** of the SP providers associated with the program they are participating in (e.g. all of your agency's STRA providers that the household might possibly use).

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

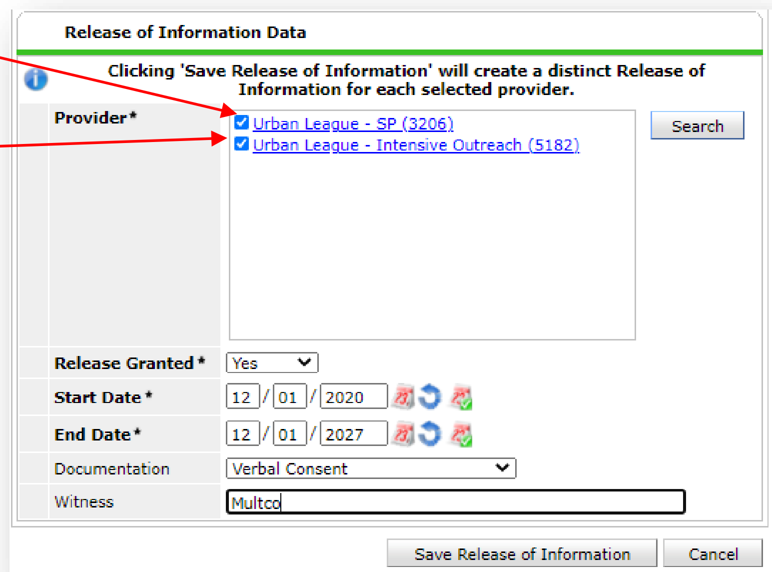
Transact ROI under Head of Household

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

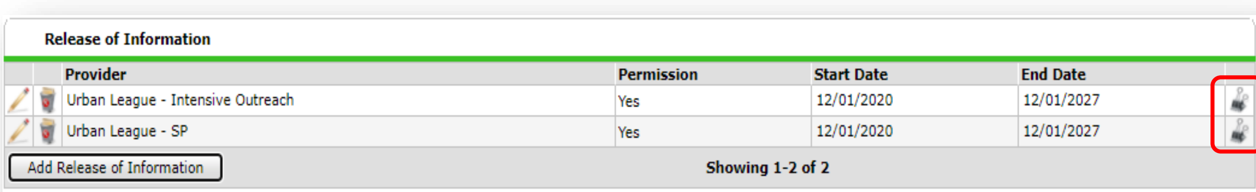
Household Members	Check off all household members who were included on the *Client Consent to Release of Information for Data Sharing in Multnomah County* form.



Provider	Click 'Search' to select your PARENT provider (also known as your Login provider) AND your JOHS-SO provider
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
End Date	7 years after Start Date
Documentation	Select Signed Statement from Client or Verbal consent
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).



* Email or call the ServicePoint Helpline if you see there are other ROIs transacted for the household already and you are unsure what to do: 503-970-4408 or servicepoint@multco.us

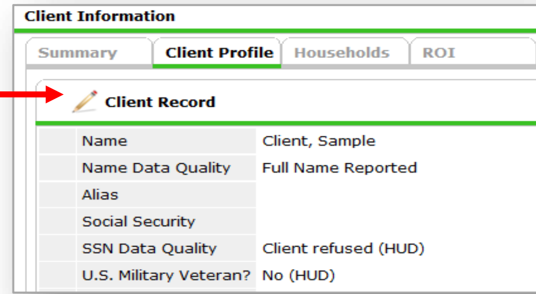
3. CLIENT PROFILE **Every Client must have 3 questions answered in the Client Profile Tab**

Name Data Quality

SSN Data Quality - always answer '**Client Refused**' (unless SSN is required for a particular project)

U.S. Military Veteran?

Click the pencil to answer the 3 profile questions

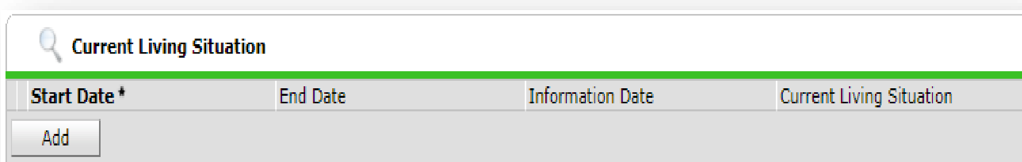


4. ADD PROGRAM ENTRY

Entry Provider	Choose your JOHS-SO provider
Entry Type	Always choose 'Basic'
Entry Date	Defaults to data entry date - **Change to date of intake**

Complete the following questions for EACH Household Member

Current Living Situation

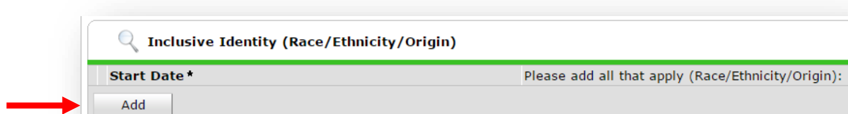


Click 'Add' to answer Current Living Situation

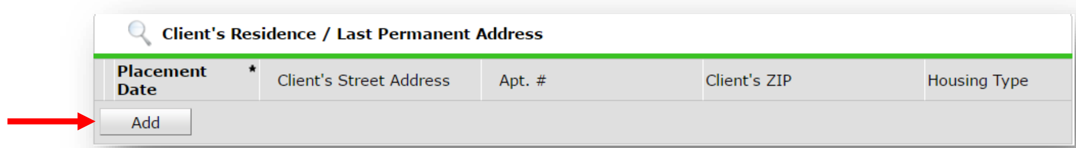
Date of Engagement	
Date of Birth	
Date of Birth Type	
Race	**Required *in addition to* Inclusive Identity**
Race-Additional	(optional) Do not answer the same as 'Race'
Ethnicity	**Required *in addition to* Inclusive Identity**

Inclusive Identity

Click 'Add' to enter a client's self-identified race/ethnicity. Add as many as apply.



Gender	Use CTRL to select more than one option

Does client have a disabling condition?	
Domestic violence victim/survivor	If response is "Yes," also provide a response to the two follow-up questions: *When did the experience occur?* and *Are you currently fleeing?*
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	
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	
Relationship to Head of Household	Choose "Self" if 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.
Client Location	Choose OR-501 Portland/Gresham/Multnomah County
Complete SHS Priority Pop for HOH if funded by JOHS	
Identify the SHS Priority Population	Refer to Population A/B Determination form: https://rb.gy/hfc1au
Update the following questions when required by funder or administrator:	
Client's Residence / Last Permanent Address	**Click "Add" to enter a client's residence or last permanent address** 

ENTERING JOHS-SO SERVICE TRANSACTIONS IN SERVICEPOINT

- Enter all services under the Head of Household

SERVICES	
Start Date	Day of service
End Date	Day of service; same as the Start Date
Service Type	Select the appropriate service type.
Provider Specific Service	Optional: some programs will answer this additional field
Service Notes	Add note about the service provided

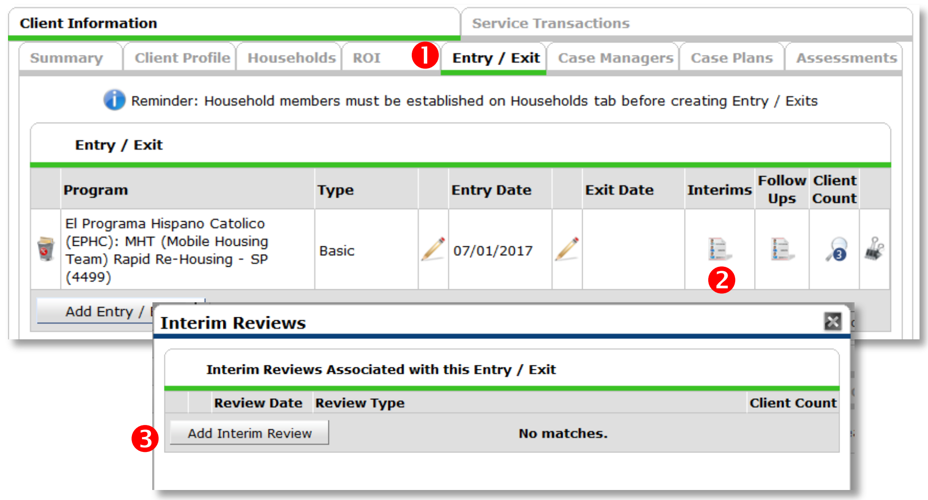
INTERIM REVIEWS / CLIENT INFORMATION UPDATES

Do NOT pencil back into the program entry to update client information after program entry date.

❶ Click on the Entry/Exit tab in the Head of Household's profile

❷ Click on the icon in the 'Interims' column

❸ Click the 'Add Interim Review' button

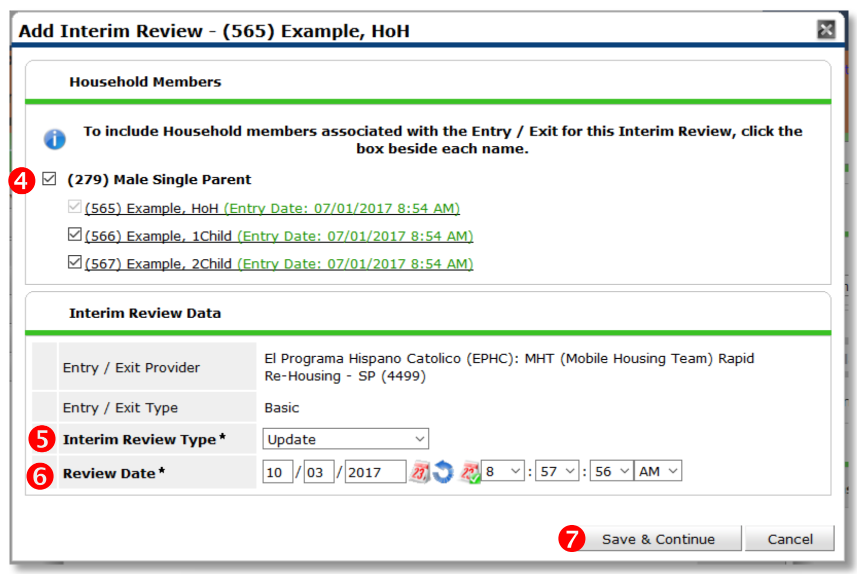


❹ Click to include all household members

❺ Choose 'Update' for Interim Review Type

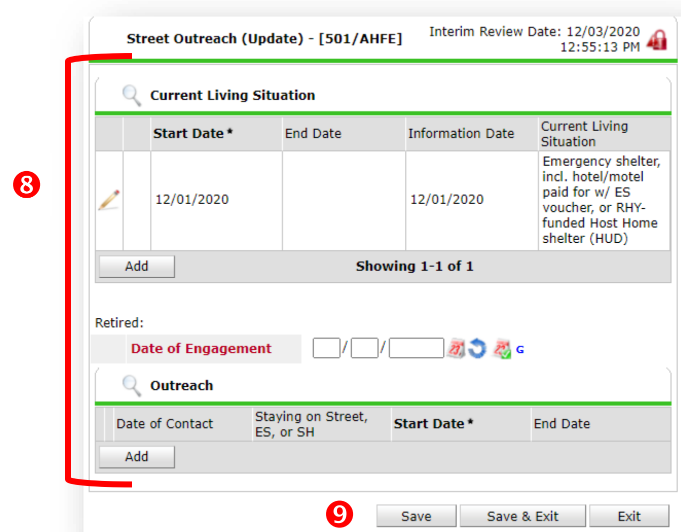
❻ Set 'Review Date' to day you are entering the information

❼ Click 'Save & Continue'



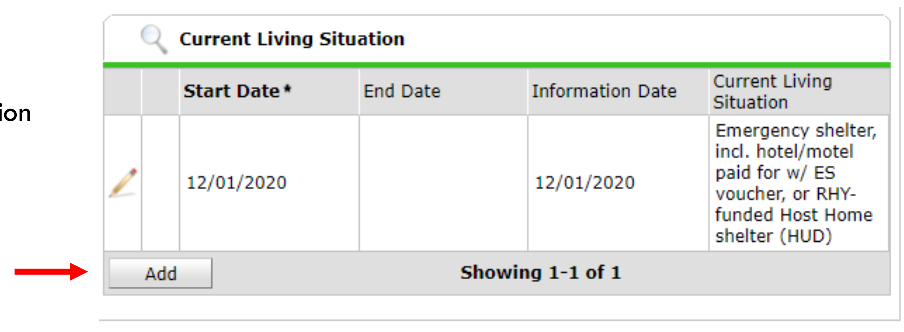
❽ Update information

❾ When steps above are Completed, click on 'Save & Exit.'



EXIT FROM JOHS-SO

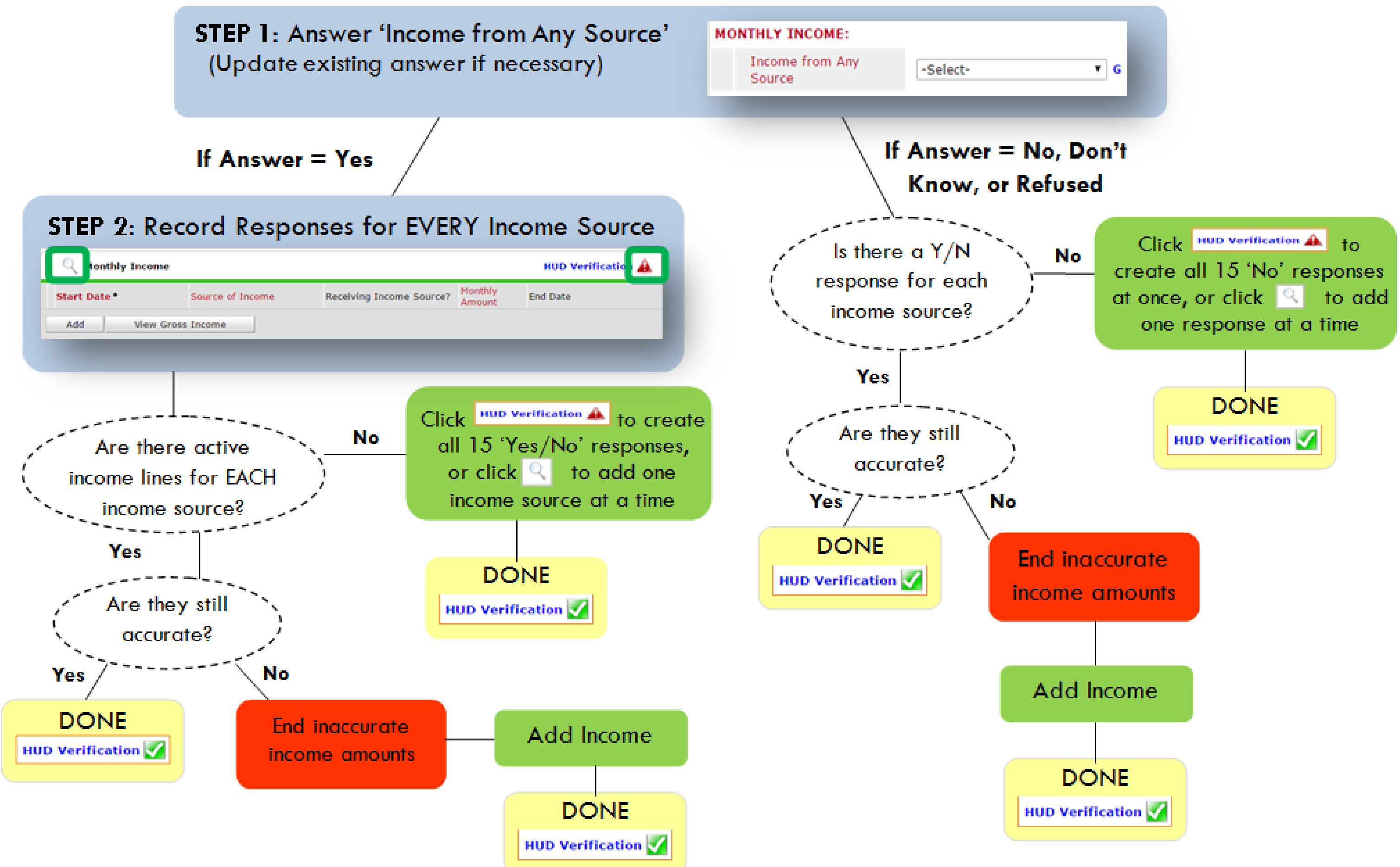
- After exiting clients from JOHS-SO, if they come back within 3 months – delete exit date and add new services. If the client comes back after 3 months or longer from program exit, create new program entry.

EXIT	**Answers from Entry will carry over. <u>Remember to update all responses that have changed</u>.**
Exit Date	
Reason for Leaving	
Destination	
Verify, and if applicable, update the following questions for EACH Household Member	
Housing Move-in Date	Review. Leave blank or delete only if client is NOT in permanent housing at exit.
Current Living Situation	

APPENDIX: RECORDING INCOME & HUD VERIFICATIONS

RECORDING CLIENT INCOME

- Each client's record should store their entire income history. **Never update a client's income by deleting or writing-over the answers in an existing income record.**
- Each income source should have a Yes/No response. The same is true for Benefits, Disability and Health Insurance types.
- New program entries pre-fill with income data from previous entries. If the income data that pre-fills is not accurate for your point in time, **end date** it and **add** a new/updated income.
- When completing an Annual Review, record changes through the 'Interims' icon. Do not change answers in Program Entry.



ADDING INCOME

❶ To create all 15 income responses at once for NEW clients, click the HUD V icon HUD Verification
If updating clients who already have responses, click the magnifying glass

❷ Leave Start Date as default (date of Entry, Annual Review, or Exit)

❸ Select Source of Income

❹ Monthly Amount = ($ amount from this source)

❺ Leave End Date blank

❻ Save /add another and Exit

ENDING INCOME

✪ **If updating income at Entry/Exit, enter data in client's program Entry/Exit. If updating income *during* enrollment, use appropriate interim.**

❶ Click the pencil next to outdated income

❷ Leave Start Date, Source, and Amount unchanged

❸ End Date = the **day before** Entry/Annual Review/Exit

❹ Save and Exit

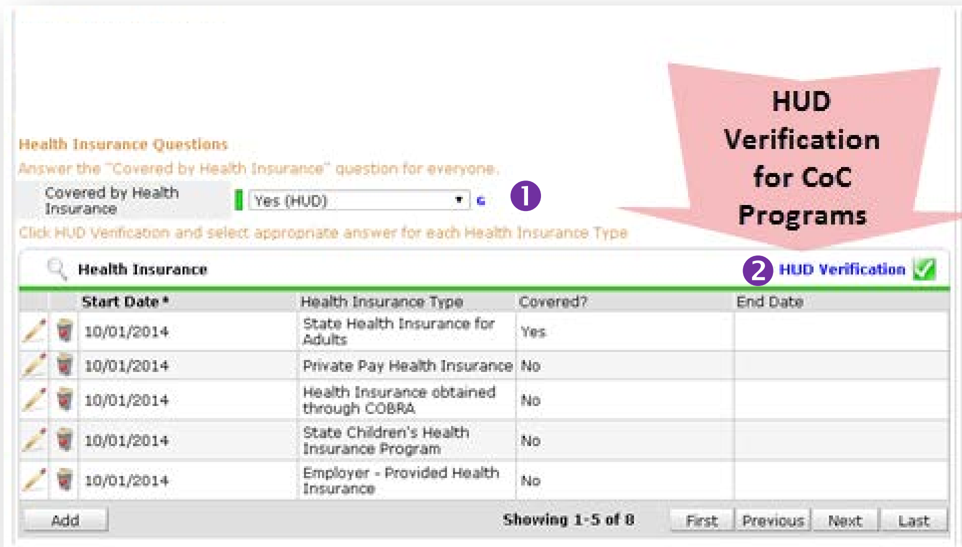
NOTE: Follow the same process when recording Benefits, Disabilities and Health Insurance

HUD VERIFICATION

Answering HUD Verification Questions for New Participants

Your program's Entry may include the following questions:

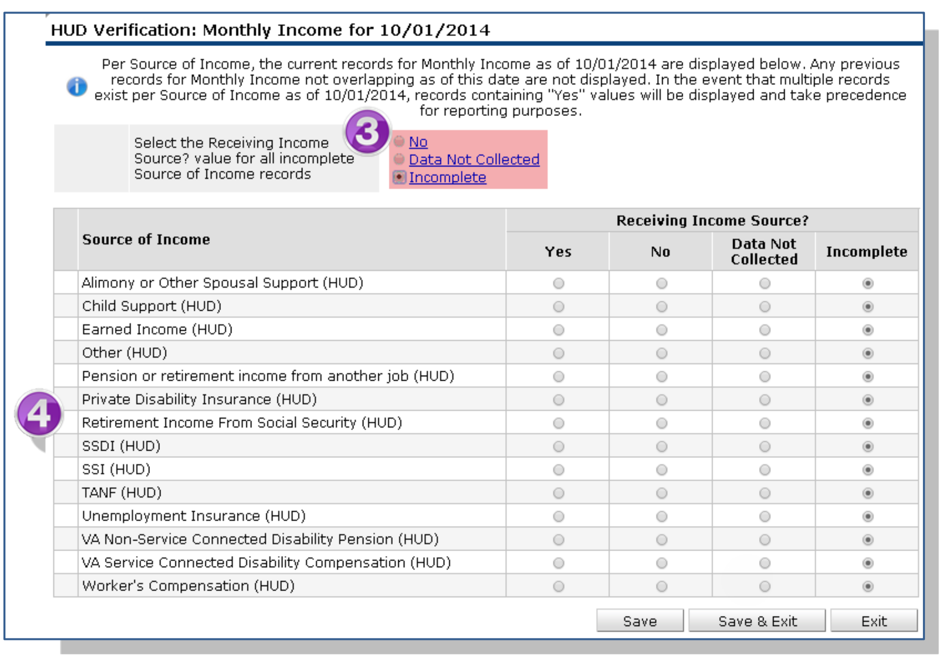
- Health Insurance
- Disabilities
- Monthly Income
- Non-Cash Benefits



Though these four questions each have different answers available to choose from, all function the same way. This type of question has two parts to answer:

1. Answer the Yes/No question that sits above the HUD Verification.

2. Click HUD Verification, which opens the next window.



3. Select the "No" link. All of the answers in the bottom section will shift to "No".

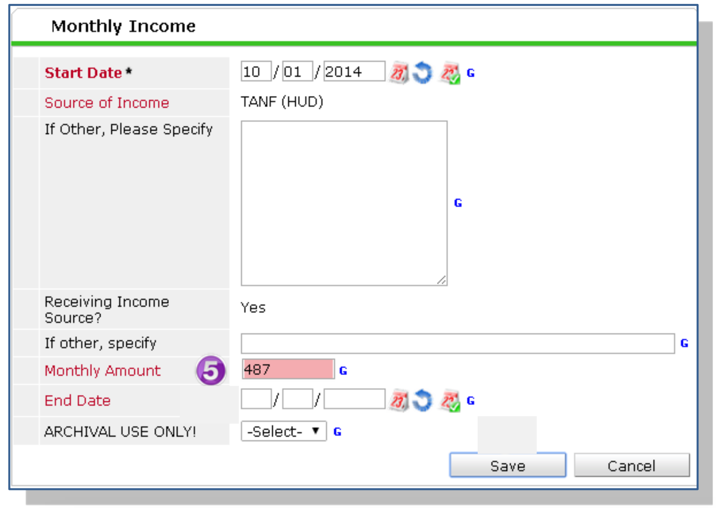
4. Carefully review the list of answers. If one of the answers applies to the participant, shift the answer on that one line to a "Yes".

If you answer "Yes" to an Income Source for the Monthly Income question, or for the Disability types, an additional box will pop up. See Step 5 and/or 6 below.

Otherwise, click **Save & Exit**.

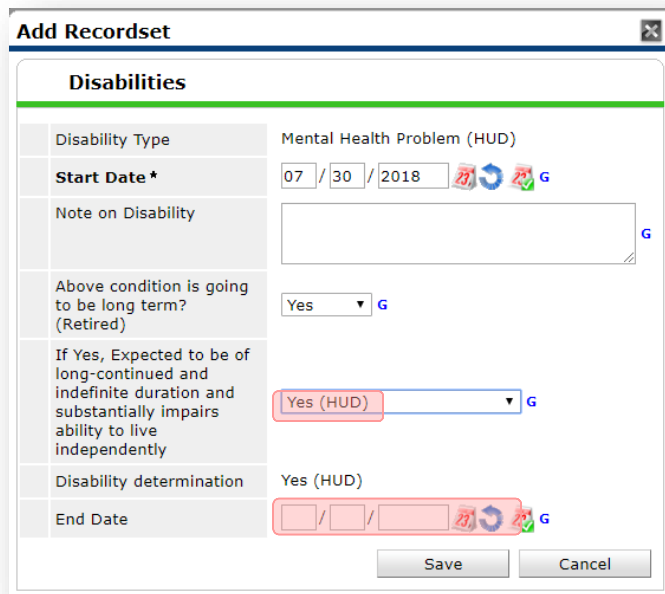
5. **INCOME**: Enter the amount of that Income. Enter an approximate amount if necessary.

Record all income received in the 30 days prior to intake, but only if that income will be continuous and ongoing.



6. **DISABILITIES**: Enter “Yes”* in the 2 fields below the Note on Disability box.

***If the project requires an official documentation of disability, you must have that in the client file in order to enter “Yes”.**



Click **Save.**

Continue answering the remaining Entry questions.

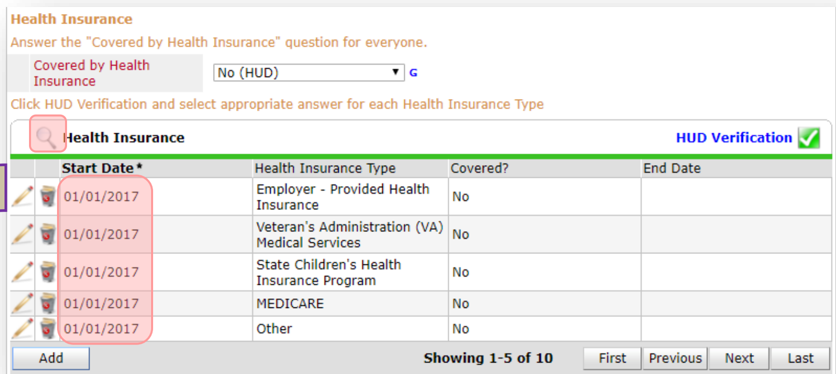
When you’re done answering questions for the Head of Household, remember to click **Save**, then scroll back to the top of the entry window and click on the names of any other household members included in the entry to complete their assessments.

Updating HUD Verification Questions for Existing Participants

If you are answering the HUD Verification questions for a participant who already exists in ServicePoint, there's a good chance that these type of questions (health insurance, disability, income, non-cash benefits) have already been answered at least once. ServicePoint will display all previously recorded answers as long as they are *ongoing*. This means that no one has entered an "End Date" for the answers you are seeing.

In order for you to update a HUD Verification question that has already been answered, you must enter an End Date for each previously recorded answer **that is no longer correct**. Then create a line for each **new** correct answer; new answers should be dated with the date of your new entry or annual update.

EXAMPLE: Last year, a survivor and her child completed the intake process for a program on 01/01/2017. A couple days later, her advocate created a program entry in ServicePoint using the intake date as the entry date. The advocate answered all of the questions required by ServicePoint in the program entry, including all four of the HUD Verification-type questions (Health Insurance, Disability, Monthly Income, and Non-Cash Benefits). At the time the advocate completed her intake, the participant did not have health insurance.


Health Insurance
Answer the "Covered by Health Insurance" question for everyone.
Covered by Health Insurance: No (HUD)
Click HUD Verification and select appropriate answer for each Health Insurance Type
Health Insurance — HUD Verification

Start Date *	Health Insurance Type	Covered?	End Date
01/01/2017	Employer - Provided Health Insurance	No	
01/01/2017	Veteran's Administration (VA) Medical Services	No	
01/01/2017	State Children's Health Insurance Program	No	
01/01/2017	MEDICARE	No	
01/01/2017	Other	No	

Add — Showing 1-5 of 10 — First | Previous | Next | Last

Notice how each of the individual answers within the HUD Verification-type questions has a **Start Date** of 01/01/2017 (the same as the participants' entry date). Because the advocate recorded these answers from within the program entry dated 01/01/2017, the **Start Date** for each answer defaults to the entry date. **(Don't change it.)**

TIP: After completing a HUD Verification, click on the magnifying glass icon to expand the HUD Verification box and see all of your answers at once!

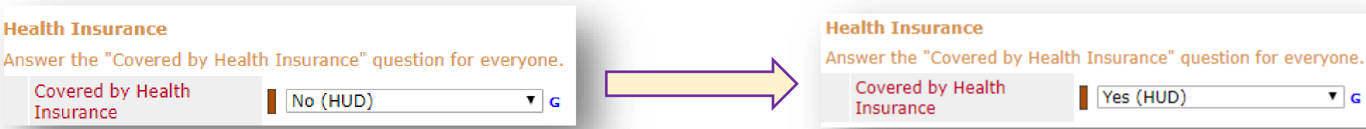

Show All Health Insurance Records
Health Insurance

Provider	Date Effective	Start Date	Health Insurance Type	Covered?	End Date
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Employer - Provided Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Veteran's Administration (VA) Medical Services	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Children's Health Insurance Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICARE	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Other	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Indian Health Services Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Health Insurance for Adults	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Private Pay Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Health Insurance obtained through COBRA	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICAID	No	

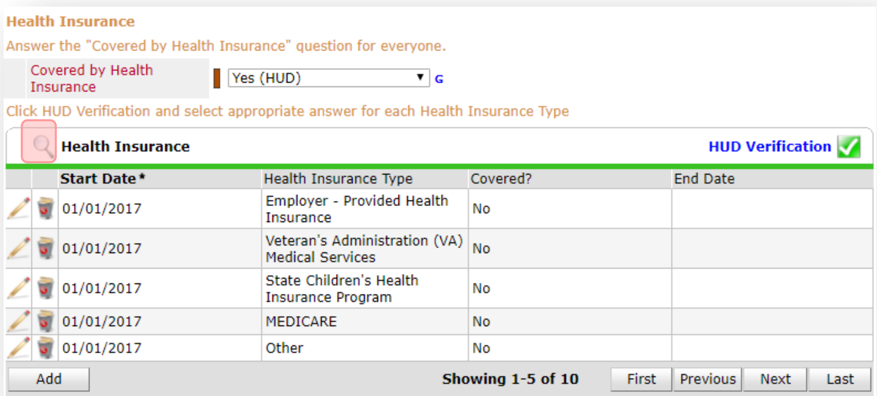
Add — Showing 1-10 of 10 — Exit

A year later, the same participant completed an intake for a new program. A couple days later, her advocate creates an entry for the new program, using the new intake date (01/01/2018) as the program entry date.

Sometime in the last year, the participant acquired health insurance through the Oregon Health Plan. Yay! The HUD Verification question about Health Insurance in the new program's entry pulls the "No" answer from the last time this question was answered, just like all other questions in ServicePoint. Flip the answer in the first part of the question from a "No" to a "Yes".



Click on the magnifying glass icon to review each of the individual answers within the HUD Verification.


Health Insurance

Answer the "Covered by Health Insurance" question for everyone.

Covered by Health Insurance: Yes (HUD)

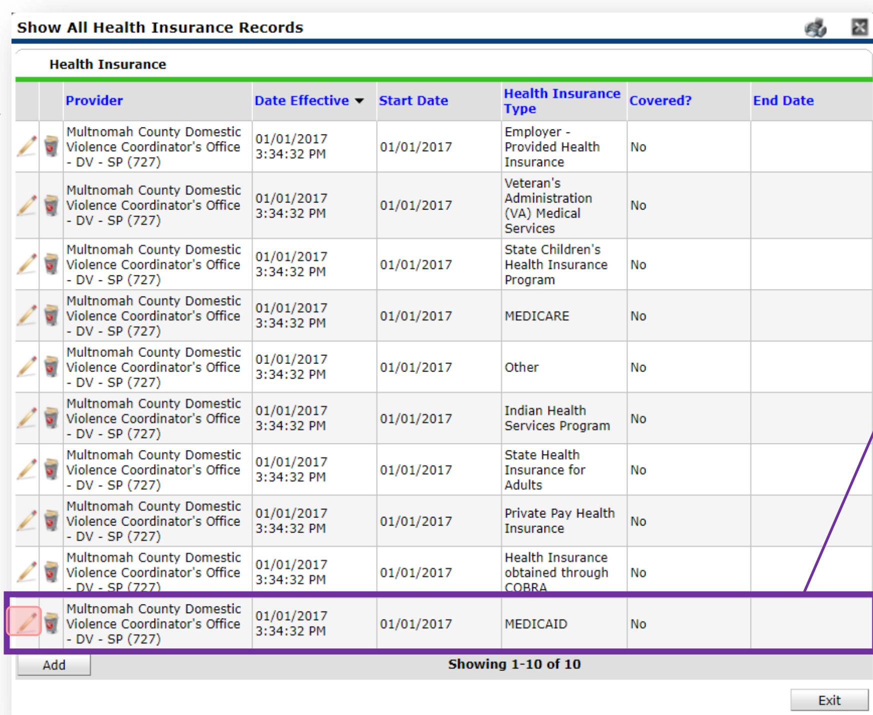
Click HUD Verification and select appropriate answer for each Health Insurance Type

Health Insurance — HUD Verification

Start Date*	Health Insurance Type	Covered?	End Date
01/01/2017	Employer - Provided Health Insurance	No	
01/01/2017	Veteran's Administration (VA) Medical Services	No	
01/01/2017	State Children's Health Insurance Program	No	
01/01/2017	MEDICARE	No	
01/01/2017	Other	No	

Add — Showing 1-5 of 10 — First Previous Next Last

Tip: The **Start Date** shows the date of the entry wherein each answer was created.


Show All Health Insurance Records

Health Insurance

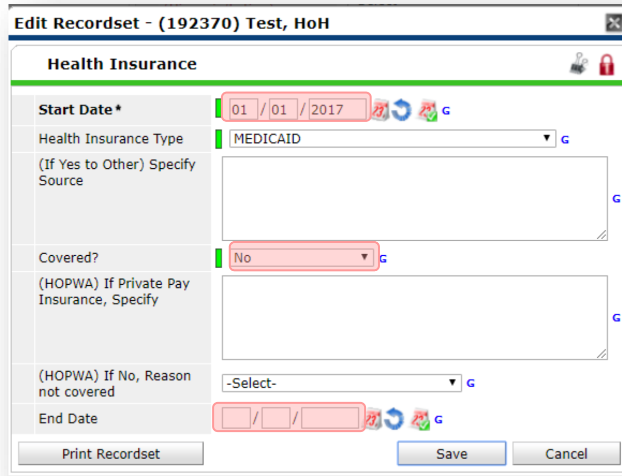
Provider	Date Effective	Start Date	Health Insurance Type	Covered?	End Date
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Employer - Provided Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Veteran's Administration (VA) Medical Services	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Children's Health Insurance Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICARE	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Other	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Indian Health Services Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Health Insurance for Adults	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Private Pay Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Health Insurance obtained through COBRA	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICAID	No	

Add — Showing 1-10 of 10 — Exit

OHP is recorded in ServicePoint as "MEDICAID", so this is the line that must be updated to reflect that the participant now has health insurance.

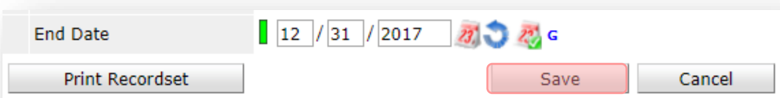
Click on the pencil icon in line with this answer to edit.

The **Start Date** tells you the date of the entry wherein this answer was created. When the answer was created on 01/01/2017, “No” *was* the correct answer to the question “Covered?” for “MEDICAID”.



But as of 01/01/2018, “No” is no longer a correct answer. Document this change by entering an **End Date** for the “No” answer. The date “No” stopped being correct is the date the participant first acquired health insurance; however, the participant isn’t expected to remember that date, and the advocate is not expected to record it.

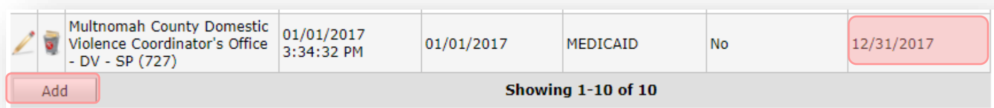
But the advocate *does* know that on the date the participant completed the intake for the new program, she had OHP. The advocate is only responsible for reporting what is true as of the **Entry Date**. So, use the date of the day before the program entry as the **End Date.**



In this example, the **Entry Date** for the new program is 01/01/2018, so the **End Date** is 12/31/2017.

After entering an **End Date**, click **Save**.

The **End Date** now appears in line with the “No” for the MEDICAID answer.



The next step is to document an ongoing “Yes” for MEDICAID as of the date of the new program entry. Click the **Add** button.

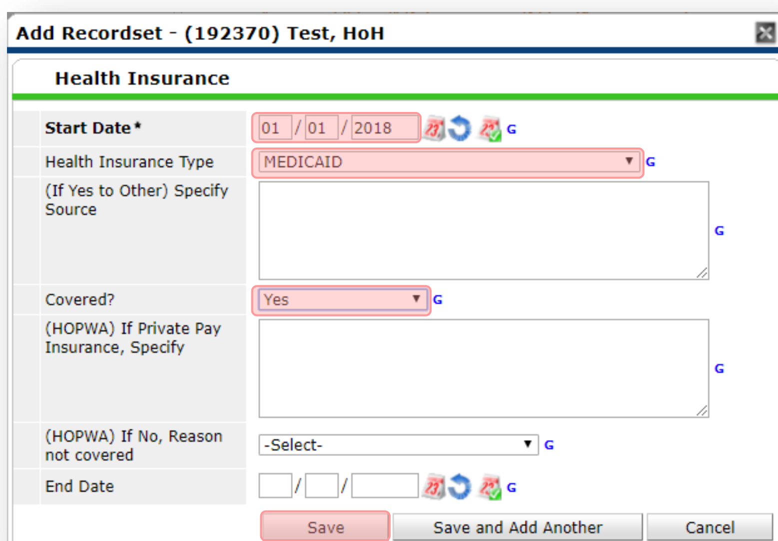
1. The **Start Date** defaults to the date of the Program entry. **(Don’t change it).**

2. Health Insurance Type is MEDICAID.

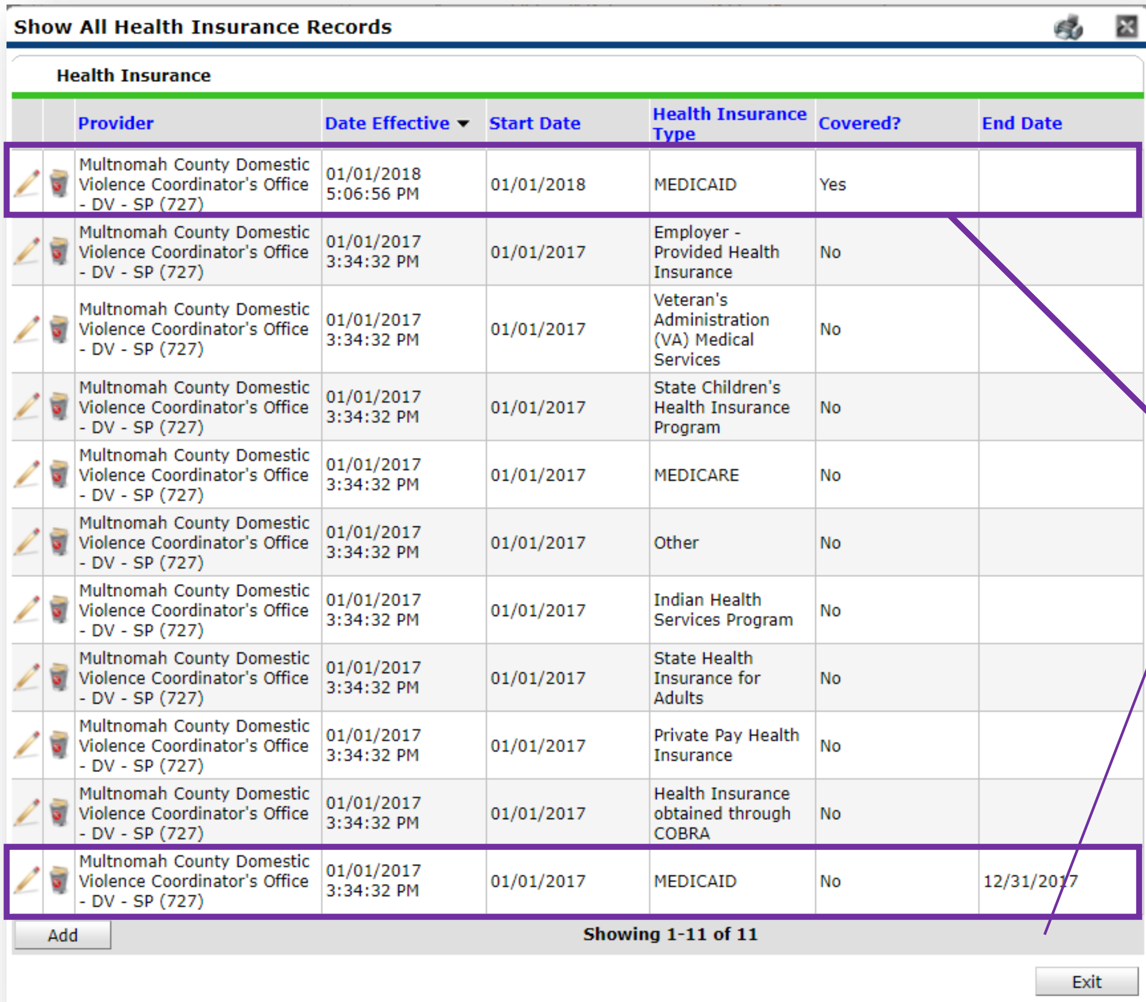
3. Covered? Is “Yes”.

LEAVE END DATE BLANK.

Click **Save.**



A correctly updated HUD Verification question should look something like this:



Show All Health Insurance Records

Health Insurance

Provider	Date Effective	Start Date	Health Insurance Type	Covered?	End Date
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2018 5:06:56 PM	01/01/2018	MEDICAID	Yes	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Employer - Provided Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Veteran's Administration (VA) Medical Services	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Children's Health Insurance Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICARE	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Other	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Indian Health Services Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Health Insurance for Adults	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Private Pay Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Health Insurance obtained through COBRA	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICAID	No	12/31/2017

Add

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Exit

A HUD Verification question that correctly captures a change in a participant's circumstances may have multiple lines with **End Dates**, but should have only one *ongoing* line per answer, whether "Yes" or "No".

When you're done answering entry assessment questions for the Head of Household, remember to click **Save**, then scroll back to the top of the entry window and click on the names of any other household members included in the entry to complete their assessments.