

Updated Coordinated Entry Process for DV ClientTrack Participating Providers

1. The DV provider will provide the client a brief overview of Coordinated Entry:
 - a. ***“Coordinated Entry is a system which is used to identify individuals and families experiencing a housing crisis that are currently homeless. An intake is completed by phone, virtually or in person, using a standardized assessment tool that measures a client’s vulnerability. The Coordinated Entry process will assist us in identifying which housing interventions you may qualify for. As a DV/SA survivor you have the choice of participating in the process by signing a Client Consent form and agreeing to have your Personal Protected Information (PPI) entered into the HMIS database which will be shared with other housing providers in the area, or you may choose to participate in the process by keeping your Personal Protected Information (PPI) confidential. If you choose to remain anonymous by keeping your PPI confidential, you will be assigned an Alternate Reference ID (ARI) number that will be forwarded to the Regional Coordinated Entry Regional CE Lead Agency in our area along with the results of the standardized assessment which we will complete with you here at the shelter. No information that might identify you and/or your children will be shared with the Regional CE Lead Agency. When a permanent housing opportunity becomes available, the Regional CE Lead Agency will notify us, and we will assist you with moving through the housing process.”***
2. If the client agrees to sign the Client Consent and to share their Personal Protected Information (PPI) and have the information entered into the HMIS database (Option #1 on the Client Consent Form), please complete the:
 - a. Client Consent Form
 - b. DV CE Referral form – Full Disclosure
 - c. CHAT – Paper forms are available here.
3. **Forward the completed documents to the Regional CE Lead Agency or nearest CE Access Site for HMIS data entry via secure email or secure fax.** The list of Regional CE Lead Agencies (Regional CE Lead Agency Contact List) can be accessed at <https://www.in.gov/ihcda/indiana-balance-of-state-continuum-of-care/regional-structure/>
4. The Regional CE Lead Agency will complete a CE Intake in HMIS using the information provided. The signed CE HMIS Client Consent Form will be scanned and uploaded to the client’s CE HMIS file. If scanning capabilities at the Regional CE Lead Agency are unavailable, a hard copy will be retained in the client’s file. The Regional CE Lead Agency will note on the electronic Client Consent Form screen in HMIS “Scanned copy on file” or “Hard copy on file.”
5. If the client chooses to remain anonymous and **not** share their PPI, the DV provider will complete their normal Client Intake in DV ClientTrack. **The DV provider will then assign the client an Alternate Reference ID number which appears on the “Client Information” screen in DV ClientTrack.** The ARI will be the Client ID# assigned by DV ClientTrack. Please double check to make sure the client only has ONE client record in DV ClientTrack. If a client has duplicate client records, it will cause data issues if the records are later merged and will negatively affect

Updated Coordinated Entry Process for DV ClientTrack Participating Providers

the ARI.

6. The DV provider will complete a paper CHAT for the **Head of Household**. **The DV provider will not write any PPI on the CHAT form. The client's ARI will be used as the Client's Name for the purposes of this form.**
7. The DV Provider will then complete the **IN BoS CoC DV Provider CE Referral – Anonymous Clients** with the **Client's ARI** and other non-identifying information.
8. **Next, forward the Referral Form and a copy of the CHAT to the Regional CE Lead Agency via secure fax or secure email.** The list of Regional CE Lead Agencies (Regional CE Lead Agency Contact List) can be accessed at <https://www.in.gov/ihcda/indiana-balance-of-state-continuum-of-care/regional-structure/>
9. The Regional CE Lead Agency staff will then enter the client as a CE Intake in HMIS using the ARI as the client's name. All data fields that ask for PPI and missing will be marked as "data not collected". The Regional CE Lead Agency staff will then use the electronic signature pad or mouse to indicate in the signature field on the Client Consent Form "Not Applicable".
10. When the client's ARI is prioritized and a housing offer becomes available, the Regional CE Lead Agency will contact the DV provider by telephone, secured email, or secured fax to inform the DV provider's Case Manager of the opening.
11. The Regional CE Lead Agency will then complete the bottom section of the client's original Referral form with the housing referral information and send the form to the DV provider via secured fax or secured email.
12. The DV provider will share the referral information with the client.
13. **Client Accepts Referral:** DV provider will assist the Client with contacting the Housing Provider
13. to set an appointment for possible housing intake and the client will begin working with the
13. housing provider's Case Manager. Please obtain any necessary Release of Information
13. documents from the client, at this time.
14. **Housing Provider Accepts Referral:** the DV Case Manager will notify the Regional CE Lead Agency once the client moves into housing. The DV Case Manager will provide the "Housing Move-in Date" to the Regional CE Lead Agency.
15. The Regional CE Lead Agency will complete the Coordinated Entry exit workflow for the client and select the appropriate "Exit Destination" using the "Housing Move in Date" as the Coordinated Entry EXIT Date in HMIS. The Regional CE Lead Agency will complete the CE EXIT workflow in HMIS.

Updated Coordinated Entry Process for DV ClientTrack Participating Providers

- **PLEASE NOTE:** When survivors present at a CE Access Site for a CE Intake, the CE Access Site will follow the normal protocol for completing the CE Intake in HMIS with the survivor. In instances where a CE Access Site Assessor meets with the survivor at the VSP agency to complete the CE Intake, the CE Access Site Assessor will again follow the normal protocol for completing the CE Intake in HMIS with the survivor. No Referral Form is required when completing the CE Intake in person with the survivor at the CE Access Site or VSP agency. As with all CE assessments, a survivor does not have to consent to providing full personal information in order to be eligible and may choose to be assessed anonymously or with personal protected information not entered into HMIS.

Please email HMIS related questions to the HMISHelpdesk@ihcda.in.gov and CE Process questions to lwood1@ihcda.in.gov

Updated Coordinated Entry Process for DV ClientTrack Participating Providers

HMIS Client Consent:

Purpose of this form: This Agency uses the Homeless Information Management System (HMIS). HMIS is a database and case management system that collects and maintains information on the characteristics and service needs of clients. The system collects and stores client level data that can be utilized to generate unduplicated and aggregate reports for the US Department of Housing and Urban Development (HUD) that can be analyzed to determine the use and effectiveness of the services being provided by Agency. When you request or receive services, we may collect and share your Personal Protected Information (PPI) including data on your household such as:

*First and last names, dates of birth, Social Security numbers, gender, ethnicity/race, veteran status, prior residence, contact information and program status. Your service needs, income, government benefits, education, employment, destination, disability, general health as well as pregnancy, HIV/AIDS, behavioral health, mental health, legal and history of domestic violence, dating violence, sexual assault, stalking and human trafficking.

How will my PPI be used?

Your data will be entered into the HMIS to generate reports that can be analyzed to determine the use and effectiveness of the services being provided by the Agency. The ways in which this Agency may use or disclose your information are discussed in our Notice of Privacy Practices, which is posted in the Agency near the intake stations (or comparable location) for review by clients.

How will my PPI be protected?

We are required to protect the privacy of your PPI by complying with the privacy practices described in our Privacy Policy. Your information is protected by passwords and encryption technology. Each Agency and user must sign an agreement to maintain the security and confidentiality of your information. Any person or Agency that uses the HMIS and violates the terms of the agreement may lose its access rights and may be subject to other negative consequences.

How will my PPI be shared and disclosed?

The PPI we collect can be shared and disclosed under the following circumstances:

- Shared with other HMIS service providers.
- To provide or coordinate services to you and your household.
- For HMIS administrative purposes.
- When required by law or for law enforcement purposes or to prevent a serious threat to health or safety.
- Reports to HUD, audits, and management functions.

I UNDERSTAND THAT:

The Agency may not refuse or decline certain services to me if I refuse or am unable to provide information; however, some information may be required by the applicable program to determine eligibility for housing or services, to assess needed services, or to fulfill reporting requirements. Therefore, I am not required to sign this consent. I may request a copy of this consent.

This consent permits any HMIS service provider to add or update my information in the HMIS database without asking me to sign another consent form.

This consent expires in three (3) years. I have the right to revoke this consent at any time in writing. PPI that I previously authorized to be shared cannot be entirely removed the HMIS database and will remain accessible to the limited number of organization(s) that provided me with direct service.

Updated Coordinated Entry Process for DV ClientTrack Participating Providers

This Agency has posted a Notice of Privacy Practices, and I may request a paper copy of the Notice from this Agency. I acknowledge that I have been given an opportunity to read and/or request a copy of the Notice and that I have read the Notice. The Notice described ways in which my personal information may be used and disclosed. Every effort will be made to ensure the proper use and security of my information.

Client Informed Consent:

- ☐ I agree that this Agency and its employees and agents can enter all my information into the HMIS and share my PPI with other HMIS Service Providers.
- ☐ I will provide my information to the Agency, but I do not agree to allow the agency to enter any of my information into the HMIS or share my PPI with other HMIS Service Providers.
- ☐ I do not agree to provide any information to this Agency, and I understand that I may not be able to receive certain services from this Agency if my eligibility to receive these services cannot be verified.

Client Signature:

Client Name: _____

DATE: _____

Case Manager Signature:

Case Manager Name: _____

DATE: _____

Restriction Options:

- ☐ Restrict to Organization
- ☐ Restrict to MOU/InfoRelease