

Emergency Shelter Data Entry Handbook

Wellsky Community Services HMIS

Multnomah County

This handbook provides instructions to check participants into and out of a shelter.

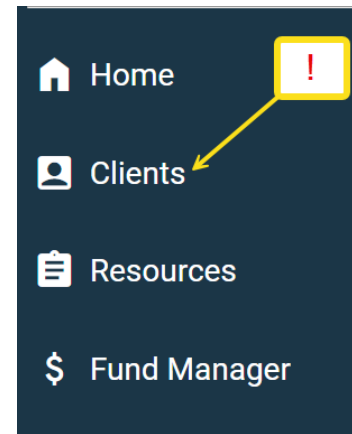
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Participant Search /Add Participant Process

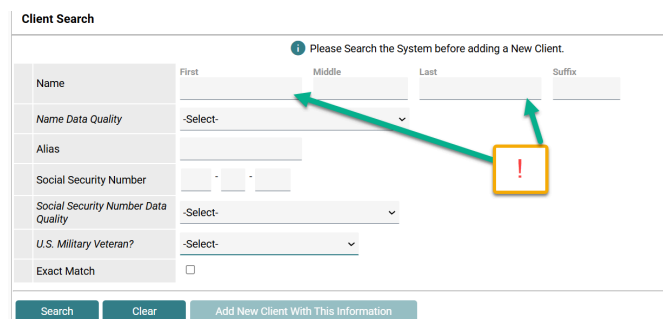
If the participant record exists

Click **participants** from the left hand navigation pane on the Main Menu



Participant Search displays

- Search participants by entering First Name and Last Name.
- Click **Search**



NOTE:

- Always check to see if a participant profile already exists before creating a new profile in HMIS. This step reduces the risk of creating duplicate profiles for the person.
- HMIS provides three ways to search, using first/last name, SSN, or participant ID. The preferred method is to use the name field.
- As a best practice, use the first three letters of their first name and first three letters of their last name to catch any spelling errors or differences in the name.
- If time permits, search for participants by entering different spellings of their name or nicknames.
- If the participant has multiple last names, search them under each of the last names provided. Search using an alias if applicable.
- In the event you find multiple participant IDs# for a participant, please email them to hmishelp@multco.us.

OR Search for Participant by
participant ID

- Click **Submit**

Client Results displays the
participants that match the
search criteria.

Client Number

Enter or scan a Client ID number to go directly to that Client's profile.

Client ID # **Submit**

Client Results								
	ID	Name ▲	Social Security Number	Date of Birth	Alias	Gender Banned	Household Count	
	65	Scott, Jill	533-98-2222	10/22/1980			1	
Showing 1-1 of 1								

To choose the participant click on either the participant name or pencil  to open the record.

If participant record does not exist

- If the search results in **No Matches** and a thorough search has been done, click **Add New participant With This Information**

Search **Clear** **Add New Client With This Information**

Client Number

Enter or scan a Client ID number to go directly to that Client's profile.

Client ID # **Submit**

Client Results

ID	Name ▲	Social Security Number	Date of Birth	Alias	Gender Banned	Household Count
No matches.						

- Once you have added a new participant with this Information - a pop up will appear - just confirm and click **OK**

Add New Client Information ×

You are about to add a New Client to the system (Be sure to look through all the possible matches before continuing this process). Continue with Add New Client?

Ok **Cancel**

- A new participant record has been created. A new

Clients > Client Profile Type here for Global Search

Client - (708) Anderson, Gillian

(708) Anderson, Gillian
Release of Information: None

Client Information **Service Transactions**

Summary Client Profile Households ROI Entry / Exit

Added to the system 01/22/2025 02:37 PM

Name	Anderson, Gillian	Social Security	
Date of Birth		U.S. Military Veteran?	
Race and Ethnicity			
Gender			



HMIS ID is assigned.

- There are two large tabs that make up the structure of the participant record.
participant Information and **Service Transactions**
- In a new participant record click **participant Profile** to continue adding participant information.

Client - (708) Anderson, Gillian

(708) Anderson, Gillian
Release of Information: **None**

Client Information **Service Transactions**

Summary **Client Profile** Households ROI

Client Record

Name	Anderson, Gillian
Name Data Quality	
Alias	

- Click pencil to edit the record

Client - (708) Anderson, Gillian

(708) Anderson, Gillian
Release of Information: **None**

Client Information **Service Transactions**

Summary **Client Profile** Households

Client Record

Name	Anderson, Gillian
Name Data Quality	
Alias	
Social Security	
SSN Data Quality	
U.S. Military Veteran?	
Age	

Note:

- **participant Profile** is the only area of the record where these specific data elements can be updated or corrected.
- There are also **Data Quality** questions that are required to be filled out.

Client Record

Editing the Client Record Information could affect the Unique ID and the Client Search.

Client Record

Name	First	Middle	Last	Suffix
	Gillian		Anderson	
Name Data Quality	-Select-			
Alias				
Social Security				
SSN Data Quality	-Select-			
U.S. Military Veteran?	-Select-			

Save **Cancel**

- Ensure all data elements have been added - First/Last Name, SSN, SSN Data Quality and Veteran Status
- Choices for **Data Quality** are shown to the right. These answers are helpful to ensure data elements are captured completely and correctly.

Client Record

⚠ Editing the Client Record Information could affect the Unique ID and the Client Search.

Client Record				
Name	First	Middle	Last	Suffix
	Fox		Mulder	
Name Data Quality	Full Name Reported			
Alias	-Select-			
Social Security	Partial, Street Name, or Code Name Reported			
SSN Data Quality	Client Doesn't Know			
U.S. Military Veteran?	Client prefers not to answer			
	Data Not Collected			

Save Cancel

***Note** - Asking for SSN is only required for certain funding sources. However, if participants are comfortable providing the last four digits that is acceptable. Data quality response would be Approximate or Partial SSN reported.

- If a participant does not have a SSN Data Quality responses could be participant doesn't know or participant prefers not to answer.
- Ensure all Data Quality questions are answered.
- Click **Save**.

Client Record

⚠ Editing the Client Record Information could affect the Unique ID and the Client Search.

Client Record				
Name	First	Middle	Last	Suffix
	Fox		Mulder	
Name Data Quality	Full Name Reported			
Alias				
Social Security				
SSN Data Quality	Client prefers not to answer (HUD)			
U.S. Military Veteran?	No (HUD)			

Save Cancel

Household Information

Note:

- A **Household** only needs to be created in the event there are 2 or more individuals in the household being served.
- Click **Households** under the **participant Information** tab.

Client - (490) Mira, Walter, Sr

(490) Mira, Walter, Sr

Release of Information: **None**

Client Information

Summary	Client Profile	Households	ROI
---------	----------------	-------------------	-----

- Click **Start New Household**

Client Information Service Transactions

Summary Client Profile **Households** ROI Entry / Exit Case Managers Assessments

i This Client is not currently a member of any Households.

▶ Previous Households

Search Existing Households Start New Household Exit

- Enter the appropriate Household Type

Add New Household

Household Type

Household Type * -Select- ▼

Client Search

-Select- ▼

Single Individual

Female Single Parent

Male Single Parent

Two Parent Family

Grandparent(s) and Child

Foster Parent(s)

Couple With No Children

Non-custodial Caregiver(s)

Family Unit (HOPWA)

Shared Housing (HOPWA)

Living with a live-in aide (HOPWA)

Other

Exact Match ☐

Add New Household ✕

Household Type

Household Type * Female Single Parent ▼

Client Search

i Please Search the System before adding a New Client. Hide Advanced Search

Name First Middle Last Suffix

Name Data Quality -Select- ▼

Alias

Social Security Number - - -

Social Security Number Data Quality -Select- ▼

U.S. Military Veteran? -Select- ▼

Exact Match ☐

Search Clear Add New Client With This Information

Client Number

Enter or Scan a Client ID to add that Client to this Household.

Client ID # Submit

Selected Clients

ID	Name	Social Security Number	Date of Birth	Alias	Gender Banned	Household Count
82	Thompson, Kendra		08/30/1983			0

Showing 1-1 of 1

As we continue building the household, enter data for the next household member.

- Click Search to ensure this person is not already in the system and then **Add New participant with The Information.**

- Once you have attached additional household members, Click Continue.

Selected Clients

ID	Name	Social Security Number	Date of Birth	Alias	Gender	Banned	Household Count
708	Anderson, Gillian						0
712	Mulder, William						0

Showing 1-2 of 2





- One person must be designated as Head of Household.

- Click on **Head of Household** and click “Yes.” Notice the Relationship to Head of Household automatically changes to “Self”

Household Information - (427) Female Single Parent

(427) Female Single Parent

Save

Save & Exit

Exit

Household Type *	Female Single Parent
Income	US\$0.00 monthly (US\$0.00 annual)
Client Count	2

Household Members

Name	Age	Head of Household	Relationship to Head of Household	Joined Household *	Previous Associations	Household Count
(708) Anderson, Gillian		Yes	Self	01 / 22 / 2025	0	1
(712) Mulder, William		No	-Select-	01 / 22 / 2025	0	1

Add/Delete Household Members

Household History Report

- For the second household member, click on Household to Relationship and choose the best answer to describe the relationship to the Head of Household.
- If creating a household for a new participant - the **Joined Household** date needs to be aligned with the date of the intake. The date will default to the day you are entering the data.

Household Members

Name	Age	Head of Household	Relationship to Head of Household	Joined Household *	Previous Associations	Household Count
(708) Anderson, Gillian		Yes	Self	01 / 22 / 2025	0	1
(712) Mulder, William		No	Son	01 / 22 / 2025	0	1

Add/Delete Household Members

Household History Report

Multiple Member Households

- From Households tab, click **Manage Household**

Client Information				Service Transactions																								
Summary	Client Profile	Households	ROI	Entry / Exit	Case Managers	Assessments																						
▼ (427) Female Single Parent <table border="1"> <thead> <tr> <th>Name</th> <th>Age</th> <th>Head of Household</th> <th>Relationship to Head of Household</th> <th>Joined Household</th> <th>Previous Associations</th> <th>Household Count</th> </tr> </thead> <tbody> <tr> <td>(708) Anderson, Gillian</td> <td></td> <td>Yes</td> <td>Self</td> <td>01/22/2025</td> <td>0</td> <td>1</td> </tr> <tr> <td>(712) Mulder, William</td> <td></td> <td>No</td> <td>Son</td> <td>01/22/2025</td> <td>0</td> <td>1</td> </tr> </tbody> </table> Manage Household								Name	Age	Head of Household	Relationship to Head of Household	Joined Household	Previous Associations	Household Count	(708) Anderson, Gillian		Yes	Self	01/22/2025	0	1	(712) Mulder, William		No	Son	01/22/2025	0	1
Name	Age	Head of Household	Relationship to Head of Household	Joined Household	Previous Associations	Household Count																						
(708) Anderson, Gillian		Yes	Self	01/22/2025	0	1																						
(712) Mulder, William		No	Son	01/22/2025	0	1																						

- Click **Add/Delete Household Members**

Household Members							
Name	Age	Head of Household	Relationship to Head of Household	Joined Household *	Previous Associations	Household Count	
(708) Anderson, Gillian		Yes	Self	01 / 22 / 2025	0	1	
(712) Mulder, William		No	Son	01 / 22 / 2025	0	1	

Add/Delete Household Members

Household History Report

- Click the **arrow** to open page to add household members
- Enter search criteria First and/or Last Name, SSN

This Household does not have any previous members.

▼ Add Clients to the Household

Client Search

Please Search the System before adding a New Client.

Hide Advanced Search

Name	First	Middle	Last	Suffix
			Anderson	
Name Data Quality	-Select-			
Alias				
Social Security Number				

- Click **Search**

▼ Add Clients to the Household

Client Search

Please Search the System before adding a New Client.

Hide Advanced Search

Name	First	Middle	Last	Suffix
	Fox		Mulder	
Name Data Quality	Full Name Reported			
Alias				
Social Security Number				
Social Security Number Data Quality	-Select-			
U.S. Military Veteran?	-Select-			
Exact Match	☐			

Search

Clear

Add New Client With This Information

- Click on the plus sign to add the household member name if one displays

Client Results								
ID	Name	Social Security Number	Date of Birth	Alias	Gender	Banned	Household Count	
 8	Mulder, Fox	329-80-2343	10/13/1961				2	
Showing 1-1 of 1								

- If no records returned, click **Add New participant With This Information**

(cont. on next page)

Release of Information

Note: Work with your supervisor for information about how to ask participants for consent around data sharing.

- Click the **ROI** tab from main menu bar

Client - (490) Mira, Walter, Sr

(490) Mira, Walter, Sr

Release of Information: **None**

Client Information

Summary

Client Profile

Households

ROI

- Click **Add Release of Information**

Release of Information

Provider

Add Release of Information

- The current participant's name should already be grayed out.

Release of Information - (490) Mira, Walter, Sr

Household Members

To include Household members for this Release of Information, click the box beside each name. Only members from the SAME Household may be selected.

☐ (260) ...rent Family

☐ (490) Mira, Walter, Sr

- All members of the household staying in the shelter must complete an ROI - Click the box next to the household "bucket" where it describes the household type, if all participants give the same consent to sharing.

Release of Information

Release of Information - (708) Anderson, Gillian

Household Members

To include Household members for this Release of Information, click the box beside each name. Only members from the SAME Household may be selected.

☒ (427) Two Parent Family

☒ (708) Anderson, Gillian

☒ (8) Mulder, Fox

☒ (712) Mulder, William

(cont. on next page)

Release of Information Data

Provider* – This will default to your login in provider.

Note - in order for the data to flow properly and to allow for other agencies to see the data - you must select 2 providers:

- 1) Where you log in
- 2) Project/program where you are entering the data (shelter provider).

- **Release Granted:** Select Yes or No based on whether the participant agreed to share data or not.
- **Start date:** the ROI start date *must* equal the program start date *even if consent was collected on a different day*.
- **End date:** 7 years after the start date.
- **Documentation:** Select Verbal Consent.
- **Witness:** Enter the name of the person identified in the Witness field of the Verbal ROI form.
- **Client Signature:** Skip this.
- **Case Signature:** Skip this.
- Click **Save Release of Information**.

Wellsky added the new ROI buttons in early August, 2026. HSD does not require the use of these buttons. Data added to Client Signature and Case Manager Signature will not be migrated to Clarity HMIS.

Now move to the Shelter Module from the left side Navigation Pane

Release of Information

Release of Information - (708) Anderson, Gillian

Household Members

To include Household members for this Release of Information, click the box beside each name. Only members from the SAME Household may be selected.

- ☒ (427) Two Parent Family
 - ☐ (708) Anderson, Gillian
 - ☒ (8) Mulder, Fox
 - ☒ (712) Mulder, William

Release of Information Data

Clicking 'Save Release of Information' will create a distinct Release of Information for each selected provider.

Provider *

- ☒ Urban Alchemy - Agency (8807)
- ☒ Urban Alchemy - Reedway Safe Rest Village (ES) (8827)

Release Granted * -Select-

Start Date * 01 / 23 / 2025

End Date * / /

Documentation -Select-

Witness

Client Signature Add

Case Manager Signature Add

Save Release of Information **Cancel**

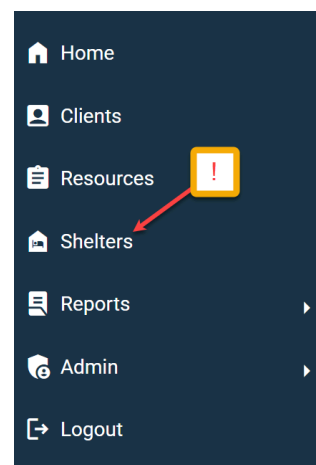
Annotations:

- two providers are selected
- Skip Client Signature and Case Manager Signature

Shelter Inventory Information

The following steps are applicable to shelters that use the check-in/check-in process through the Shelters portal. Addendum 2 describes the check-in/check-out process for shelters that utilize the entry/exit tab for this purpose. **Emergency Motel Voucher programs utilize the entry/exit tab for tracking shelter stays.**

- Navigate to the **Main Menu** section on the left hand side.
- Click **Shelters**



- **Provider** value defaults to your login provider

View Shelter Inventory

Provider *	Our Just Future - Agency (14)	Search	My Provider	Clear	Check Unit Availability
Unit List *	-Select-	Submit			

- Click **Search** to choose the correct shelter program the household is being enrolled in.
- Click on the + sign to choose the program and open the Shelters Dashboard

Enter or scan a Provider ID number to search for that Provider.

Provider ID # Submit

Provider Search Results

#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	All
+	+	Our Just Future: Chestnut Inn Shelter_ARPA COVID ES (7445)	Level 6	503-548-0200	Portland, OR 97236	02/13/2024																					
+	+	Our Just Future: Gresham Women's SHELTER (ES) (5731)	Level 7	503-548-0200	Portland, OR 97236	08/28/2024																					
+	+	Our Just Future: Lilac Meadows Shelter-SP (3066)	Level 7	503-548-0200	Portland, OR 97236	09/24/2024																					
+	+	zz_Human Solutions: FY11 ONLY! Homeless Families Winter Shelter - SP (3115)	Level 6	503-548-0200	Portland, OR 97236	03/18/2019																					
+	+	zz_Human Solutions: FY11 ONLY! SHELTERPOINT-Homeless Families Winter Shelter - SP (3116)	Level 7	503-548-0200	Portland, OR 97236	10/09/2020																					
+	+	zz_Human Solutions - Rockwood Building - Housing Plus - SHELTERPOINT - SP (2997)	Level 6	503-548-0200	Portland, OR 97236	04/01/2019																					
+	+	zz_Human Solutions: RRH-HUD Family Futures (3062)	Level 7	503-5480-0200	Portland, OR 97236	11/25/2018																					

- Click **View All** to display the Shelter roster.

View Shelter Inventory

Provider *	Our Just Future: Lilac Meadows Shelter-SP (3066)	Search	My Provider	Clear	Check Unit Availability
Unit List *	Family Shelter	Submit			
Type	Emergency Shelter				

Shelters Dashboard

Check Client In	Check In Referral	Hold ALL Empty Beds	Print ID Cards	Update Confirmation List
Transmit Today's Check	View All			

Checking Participants into Shelter Beds

The following steps are applicable to shelters that use the check-in/check-out process through the Shelters portal. Addendum 2 describes the shelter entry/exit process for shelters that utilize the entry/exit tab for this purpose. **Emergency Motel Voucher programs utilize the entry/exit tab for check-in/check-outs.**

- Click **green plus** sign next to the row of the room/bed where participant column = Empty

View Shelter Inventory

Provider * Our Just Future: Lilac Meadows Shelter-SP (3066) Search My Provider Clear Check Unit Availability

Unit List * Family Shelter Submit

Type Emergency Shelter

Shelter Inventory Information

Unit List - Family Shelter

Display All Beds Sort By Floor Ascending

Date In	Floor	Room	Bed	Hold	Client	Date of Birth	Gender	Group ID	Conf.	Co
	Floor 1	Room 1	Bed 0001	Hold	EMPTY					
	Floor 1	Room 1	Bed 0002	Hold	EMPTY					

- Search for the participant by name or **participant ID**
- Click **Search**

Client Search

Please Search the System before adding a New Client.

Name First Gillian Middle Last Suffix

Name Data Quality -Select-

Alias

Social Security Number - - -

Social Security Number Data Quality -Select-

U.S. Military Veteran? -Select-

Exact Match ☐

Search Clear Add New Client With This Information

Client Number

Enter or scan a Client ID to check that Client in.

Client ID # 708 Submit

- Date In*** defaults to {today date}.
- Ensure the date reflects the intake date when the participant actually checks into the bed.

Shelters > Check In Type here for Global Search 🔔 ★ ?

Unit Entry Data - (708) Anderson, Gillian

Date In * 01 / 23 / 2025 📅 🕒 2 : 33 : 47 PM 📅 🕒

Unit Name / Number Floor 1 / Room 1 / Bed 0001

Supplies Given

Locker number

Codes/Notes

Midnight Check In Assign Unit

- If a participant moves rooms/beds click **Assign Unit** to reassign.

- Scroll down to check household configuration and if ROIs are present.
- Review **Household Members** to enroll other household members as appropriate. Assign them a bed.
- **Release of Information** is present as this was done prior to enrolling the household into the shelter module.

Program Entry

- Do not leave any of the questions you see completely blank. If a participant doesn't answer a question, mark "Client prefers not to answer"

A note on overlapping entries: Data rules prohibit someone from occupying two or more beds at the same time. This means that someone needs to be exited from one residential program before entering another one. See Addendum 1 for more information..

- **Enter Relationship to Head of Household**
- Choose **Enrollment CoC** from values list - this is indicating what area you are enrolling the participant. Select OR-501 if the participant is sleeping in a bed located within Multnomah County.

- **DOB** defaults from participant Profile
- **Date of Birth Type** defaults from participant Profile

- Choose appropriate **Gender** identity and **race/ethnicity** identity. To select multiple values hold down the “ctrl” or “cmd” key and click on each value.
- Answer if Translation Assistance is Needed and if ‘yes’, identify which language is needed.
- Select Primary language

Disabilities Section

This section can be skipped for all overnight shelters.

- Does the participant have a self reported disabling condition? Click ‘Yes’ or ‘No’
 - Click ‘participant doesn’t know’, ‘participant prefers not to answer’, or ‘data not collected’ as appropriate.

- The red triangle is signaling that the second step is required. Click on the HUD Verification - to bring up the menu of disabling conditions to choose from.

Per Disability Type, the current records for Disabilities as of 01/23/2025 are displayed below. Any previous records for Disabilities not overlapping as of this date are not displayed. In the event that multiple records exist per Disability Type as of 01/23/2025, records containing “Yes” values will be displayed and take precedence for reporting purposes.

Select the Disability determination value for all incomplete Disability Type records

☐ No (HUD)
☐ Client doesn't know (HUD)
☐ Client prefers not to answer (HUD)
☐ Data not collected (HUD)
☒ Incomplete

Choose the disability type by clicking Yes. Click as many as appropriate.

For the remainder of the conditions click “No” to complete this step

Disability Type	Disability determination					
	Yes (HUD)	No (HUD)	Client doesn't know (HUD)	Client prefers not to answer (HUD)	Data not collected (HUD)	Incomplete
Alcohol Use Disorder (HUD)	☐	☐	☐	☐	☐	☒
Drug Use Disorder (HUD)	☐	☐	☐	☐	☐	☒
Both Alcohol and Drug Use Disorder (HUD)	☐	☐	☐	☐	☐	☒
Developmental (HUD)	☐	☐	☐	☐	☐	☒
HIV/AIDS (HUD)	☐	☐	☐	☐	☐	☒
Mental Health Disorder (HUD)	☐	☐	☐	☐	☐	☒
Physical (HUD)	☐	☐	☐	☐	☐	☒
Chronic Health Condition (HUD)	☐	☐	☐	☐	☐	☒

- Disability Type - For each condition that is chosen a pop up window appears.

Add Recordset

Disabilities

Disability Type: Mental Health Disorder (HUD)

Start Date *: 01 / 23 / 2025

Note on Disability: Enter if helpful, not required

Above condition is going to be long term? (Retired): -Select-

- Start Date* - This date should reflect the date of intake or enrollment into the program.
- Note on Disability - enter notes if applicable
- Click **Save**
- **Exit** when complete

Disabilities				HUD Verification
Disability Type	Start Date*	Disability determination	End Date	
Chronic Health Condition (HUD)	01/23/2025	No (HUD)		If everything has been done correctly the 'red' triangle turns 'green'.
Physical (HUD)	01/23/2025	No (HUD)		
HIV/AIDS (HUD)	01/23/2025	No (HUD)		
Both Alcohol and Drug Use Disorder (HUD)	01/23/2025	No (HUD)		
Developmental (HUD)	01/23/2025	No (HUD)		
Add Showing 1-5 of 8 First Previous Next Last				

Red means 'stop' and 'green' means proceed.

Editing Disabilities

NOTE:

- A participant may have reported a disabling condition when served by another provider in the past. Today during intake, the participants reported not having that condition or maybe it is no longer applicable.
- Click the pencil next to the disability that needs to be updated.
- End date the information that had been entered previously.

Disabilities

Disability Type

Mental Health Disorder (HUD)

Start Date*

01 / 01 / 2025

Note on Disability

Above condition is going to be long term? (Retired)

-Select-

If Yes, Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently

-Select-

Disability determination

Yes (HUD)

End Date

01 / 24 / 2025

Print Recordset

Save

Save and Add Another

Cancel

Health Insurance

This section can be skipped for all overnight shelters.

- 1 Is the participant Covered by Health Insurance? Click 'Yes' or 'No'
 - a) Click 'participant doesn't know', 'participant prefers not to answer', or 'data not collected' as appropriate.

1
Covered by Health Insurance

-Select-

Health Insurance
2
HUD Verification

Start Date *	Health Insurance Type	Covered?	End Date
Add			

- The red triangle is signaling that the second step is required. Click on the HUD Verification - to bring up the menu of health insurance to choose from.

HUD Verification: Health Insurance for 01/28/2025

i Per Health Insurance Type, the current records for Health Insurance as of 01/28/2025 are displayed below. Any previous records for Health Insurance not overlapping as of this date are not displayed. In the event that multiple records exist per Health Insurance Type as of 01/28/2025, records containing "Yes" values will be displayed and take precedence for reporting purposes.

Select the Covered? value for all incomplete Health Insurance Type records

- ☐ Yes
☒ No
☐ Data Not Collected
☐ Incomplete

- A timesaving step - click 'No' for them all and then click the one type that applies as a 'Yes' and then click Save & Exit.

Health Insurance Type	Covered?			
	Yes	No	Data Not Collected	Incomplete
MEDICAID	☒	☐	☐	☐
MEDICARE	☐	☒	☐	☐
State Children's Health Insurance Program	☐	☒	☐	☐
Veteran's Health Administration (VHA)	☐	☒	☐	☐
Employer - Provided Health Insurance	☐	☒	☐	☐
Health Insurance obtained through COBRA	☐	☒	☐	☐
Private Pay Health Insurance	☐	☒	☐	☐
State Health Insurance for Adults	☐	☒	☐	☐
Indian Health Services Program	☐	☒	☐	☐
Other	☐	☒	☐	☐

Red means 'stop' and 'green'  means proceed

SHS Priority Population

- SHS stands for "Supportive Housing Services". Use this question to indicate whether heads of household belong to SHS population A or B. This question is required for programs receiving *any* HSD funding.
- Complete this question for all Heads of Households only.
- Definition:** Population A includes participants who self-report a disabling condition, are below 30% AMI, and are experiencing long-term homelessness or at imminent risk. *Use the Experiencing or At Imminent Risk of Homelessness* form to determine SHS population status.

Population B includes anyone who is not in Population A.

Complete the following questions for Head of Household and All Adults

Complete SHS Priority Pop for HOH if funded by JOHS

Identify the SHS Priority Population

Income from Any Source

-Select- 
 -Select- 
 Population A
 Population B

Income from any Source

This section can be skipped for all overnight shelters.

1

Income from Any Source

-Select-

▼

G

Monthly Income

2 HUD Verification

Start Date *	Source of Income	Receiving Income Source?	Monthly Amount	End Date
Add View Gross Income				

- Does the participant receive Income from Any Source? Click 'Yes' or 'No'
 - Click 'participant doesn't know', 'participant prefers not to answer', or 'data not collected' as appropriate.

HUD Verification: Monthly Income for 01/28/2025

1 Per Source of Income, the current records for Monthly Income as of 01/28/2025 are displayed below. Any previous records for Monthly Income not overlapping as of this date are not displayed. In the event that multiple records exist per Source of Income as of 01/28/2025, records containing "Yes" values will be displayed and take precedence for reporting purposes.

Select the Receiving Income Source? value for all incomplete Source of Income records

☐ No
☐ Data Not Collected
☒ Incomplete

Source of Income	Receiving Income Source?			
	Yes	No	Data Not Collected	Incomplete
Alimony or Other Spousal Support (HUD)	☐	☐	☐	☒
Child Support (HUD)	☐	☐	☐	☒
Earned Income (HUD)	☐	☐	☐	☒
General Assistance (HUD)	☐	☐	☐	☒
Other (HUD)	☐	☐	☐	☒
Pension or retirement income from another job (HUD)	☐	☐	☐	☒
Private Disability Insurance (HUD)	☐	☐	☐	☒
Retirement Income From Social Security (HUD)	☐	☐	☐	☒
SSDI (HUD)	☐	☐	☐	☒
SSI (HUD)	☐	☐	☐	☒
TANF (HUD)	☐	☐	☐	☒
Unemployment Insurance (HUD)	☐	☐	☐	☒
VA Non-Service Connected Disability Pension (HUD)	☐	☐	☐	☒
VA Service Connected Disability Compensation (HUD)	☐	☐	☐	☒
Worker's Compensation (HUD)	☐	☐	☐	☒

Save

Save & Exit

Exit

Non-Cash Benefits

This section can be skipped for all overnight shelters.

- Does the participant have any Non-cash benefit from any source? Click 'Yes' or 'No'
 - Click 'participant doesn't know', 'participant prefers not to answer', or 'data not collected' as appropriate.

1

Non-cash benefit from any source

-Select-

▼

G

Non-Cash Benefits

2 HUD Verification

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

2. The red triangle is signaling that the second step is required. Click on the HUD Verification - to bring up the menu of different sources of Non-cash Benefits to choose from.

3. Time-saving step - click 'No' for all of them but then click 'Yes' if the participant receives food stamps. Click 'Save' and the editing pencil  appears.

Click the pencil  next to food stamps to enter the amount received.

4. Then click Save & Exit.

HUD Verification: Non-Cash Benefits for 01/28/2025

 Per Source of Non-Cash Benefit, the current records for Non-Cash Benefits as of 01/28/2025 are displayed below. Any previous records for Non-Cash Benefits not overlapping as of this date are not displayed. In the event that multiple records exist per Source of Non-Cash Benefit as of 01/28/2025, records containing 'Yes' values will be displayed and take precedence for reporting purposes.

Source of Non-Cash Benefit	Receiving Benefit?			
	Yes	No	Data Not Collected	Incomplete
 Supplemental Nutrition Assistance Program (Food Stamps) (HUD)	☒	☐	☐	☐
 Special Supplemental Nutrition Program for WIC (HUD)	☐	☒	☐	☐
 TANF Child Care Services (HUD)	☐	☒	☐	☐
 TANF Transportation Services (HUD)	☐	☒	☐	☐
 Other TANF-Funded Services (HUD)	☐	☒	☐	☐
 Other Source (HUD)	☐	☒	☐	☐

Save

Save & Exit

Exit

(cont. on next page)

Prior Living Situation

- Select the 'Type of Residence' from the *Living Situation Option List* that most closely matches where the participant was living prior to the project start, i.e. last night.
- Adult members of the same household may have different prior living situations.

Select-

HOMELESS SITUATIONS

Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside) (HUD)

Emergency shelter, including hotel or motel paid for with emergency shelter voucher, Host Home shelter (HUD)

Safe Haven (HUD)

INSTITUTIONAL SITUATIONS

Foster care home or foster care group home (HUD)

Hospital or other residential non-psychiatric medical facility (HUD)

Jail, prison, or juvenile detention facility (HUD)

Long-term care facility or nursing home (HUD)

Psychiatric hospital or other psychiatric facility (HUD)

Substance abuse treatment facility or detox center (HUD)

TEMPORARY HOUSING SITUATIONS

Transitional housing for homeless persons (including homeless youth) (HUD)

Residential project or halfway house with no homeless criteria (HUD)

Hotel or motel paid for without emergency shelter voucher (HUD)

Host Home (non-crisis) (HUD)

Staying or living in a friend's room, apartment, or house (HUD)

Staying or living in a family member's room, apartment, or house (HUD)

PERMANENT HOUSING SITUATIONS

Rental by client, no ongoing housing subsidy (HUD)

Rental by client, with ongoing housing subsidy (HUD)

Owned by client, with ongoing housing subsidy (HUD)

Owned by client, no ongoing housing subsidy (HUD)

OTHER

Client doesn't know (HUD)

Client prefers not to answer (HUD)

Data not collected (HUD)

- Length of Stay in Previous Place

Approximate date this episode of homelessness 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 three years including today

-Select-

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

-Select-

One week or more, but less than one month

One month or more, but less than 90 days

90 days or more, but less than one year

One year or longer

Client doesn't know

Client prefers not to answer

Data not collected

- The next set of questions are to identify if the participant meets the definition of chronically homeless.

Survivor of Domestic Violence

This section can be skipped for all overnight shelters.

- Click the appropriate response if the participant is a survivor of Domestic Violence?

- If yes, click when the last experience occurred

Survivor of Domestic Violence	-Select-
If Yes for Survivor of Domestic Violence, When experience occurred	-Select-
If Yes for Survivor of Domestic Violence, Are you currently fleeing?	-Select-

Prior Living Situation	-Select-
Length of Stay in Previous Place	-Select-
Survivor of Domestic Violence	-Select-
If Yes for Survivor of Domestic Violence, When experience occurred	-Select-

Survivor of Domestic Violence	-Select-
If Yes for Survivor of Domestic Violence, When experience occurred	-Select-
If Yes for Survivor of Domestic Violence, Are you currently fleeing?	-Select-

- If yes, for survivor of domestic violence, are you currently fleeing?

You are done! Now just press Save & Exit!

Participant Check Out from the Shelter

The following steps are applicable to shelters that use the check-in/check-in process through the Shelters module. Addendum 2 describes the check-in/check-out process for shelters that utilize the Entry/Exit tab for this purpose. **Emergency Motel Voucher programs utilize the Entry/Exit tab for shelter entries.**

Shelters Dashboard				
Check Client In	Check In Referral	Hold ALL Empty Beds	Print ID Cards	Update Confirmation List
Transmit Today's Check Out List	View All			

Addendum 3 describes special considerations for night-by-night (a.k.a. “overnight”) shelters.

- Check the participant out by clicking ‘View All’ on the Shelters Dashboard.

- Click the red **minus sign** next to the participant who is leaving the shelter bed.

Unit List - Peninsula SRV										
			Display	All Beds	Sort By	Floor	Ascending			
Date In	Floor	Room	Bed	Hold	Client	Date of Birth	Gender	Group ID	Conf.	Codes/Notes
	SRV	01	01-001	Hold	EMPTY					
	SRV	01	01-002	Hold	EMPTY					
	SRV	02	02-001	Hold	EMPTY					
01/31/2025	SRV	02	02-002		(1) Cabrera, Ana				No	

- The Date Out* defaults to today's date. Change the date if applicable.

- For entry/exit (a.k.a "24/7") shelters:

- Select **Reason for Leaving** from the dropdown list.
- Select **Destination** from the dropdown list.
- Update the record if there has been any changes *at exit* for **disabilities, covered by health insurance, monthly income and non-cash benefits.**

Unit Exit Data - (1) Cabrera, Ana

Date Out *	01 / 31 / 2025
Unit Name / Number	02-002
Supplies Returned	☒ Yes ☐ No
Reason For Leaving *	Unknown/Disappeared
Destination *	Client doesn't know (HUD)

- For overnight shelters:

- Retain the default answers for Reason For Leaving and Destination. These are "Completed program" and "Place not meant for habitation", respectively.

- Scroll to the end of the page and choose **Save and Exit.**

When exiting households who have **more than one individual**:

- Click the "household bucket" to ensure both individuals are checked.
- Click **Save & Exit.**

Unit Exit Data - (2) Diaz, Jose

Date Out *	01 / 31 / 2025
Unit Name / Number	01-002
Supplies Returned	☒ Yes ☐ No
Reason For Leaving *	Unknown/Disappeared
Destination *	No exit interview completed (HUD)

Household Members

To update Household members' Check Out data, click on the box beside each name. Note: Household Members who were previously checked out are disabled and appear for informational purposes only.

☐ (1) Couple With No Children

☒ (2) Diaz, Jose (Date In: 01/31/2025 8:03:22 AM) (Primary Client)

☐ (3) Diaz, Kristi (Date In: 01/31/2025 8:03:22 AM)

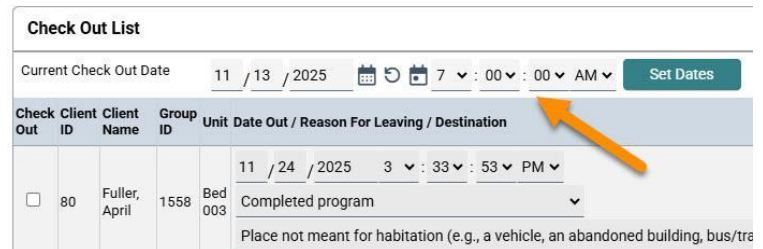
For **overnight shelters only**: To check out multiple participants with the same exit date using 'Transmit Today's Check Out List':

Shelters Dashboard

 Check Client In	 Check In Reservation	 Check In Referral
 Update Confirmation List	 Transmit Today's Check Out List	 View All

- Click the **Check Out** box for all participants leaving the shelter on the same day.
- Date Out defaults to today's date.

- Change if not today.
Use 7:00am always,
by typing in 7:00am
at the top and clicking
"Set Dates".



Check Out	Client ID	Client Name	Group ID	Unit	Date Out	Reason For Leaving / Destination	Destination
☐	80	Fuller, April	1558	Bed 003	11 / 24 / 2025 3 : 33 : 53 PM	Completed program	Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/tr

- Leave the default values for **Exit Destination** and **Reason for Leaving**.
- Click **Check Out**

Addendum 1: Exit Process Considerations for Overnight Shelters

Overnight shelters use the “Shelters” module within HMIS to transact check-ins and check-outs. When the shelter closes the morning after providing overnight services, all clients who stayed that night should remain checked in, with their bed/unit assignment viewable on the Shelters module’s Shelter Inventory. Shelter staff should check out any client that does not return to the shelter after staying the previous night.

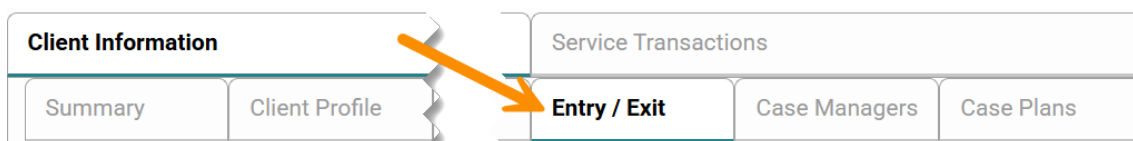
While the operational flow of an individual shelter may differ, we recommend organizing the daily check-in process this way:

- When clients who are already checked into the shelter stay another night, no HMIS activity is necessary.
- When clients who did not stay at the shelter the previous night are not yet checked in, complete the Check-In process, as described in the “Checking Participants into Shelter Beds” section of this document.
- When clients who stayed in the shelter the previous night are checked in but did not return, check the participant out of the shelter using the process described in the “Participant Check Out from the Shelter” section of this document.

Addendum 2: Emergency Motel Vouchers: Data Entry Process using Entry/Exits

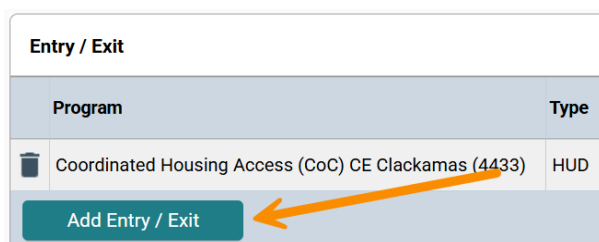
Emergency Motel Voucher (EMV) programs do *not* utilize the “Shelters” module because they operate on a scattered site basis. Instead, complete the shelter entry and exit process using the Entry/Exit feature within a participant’s profile (i.e. the “Clients” module).

Shelter Entry Process using Entry/Exits



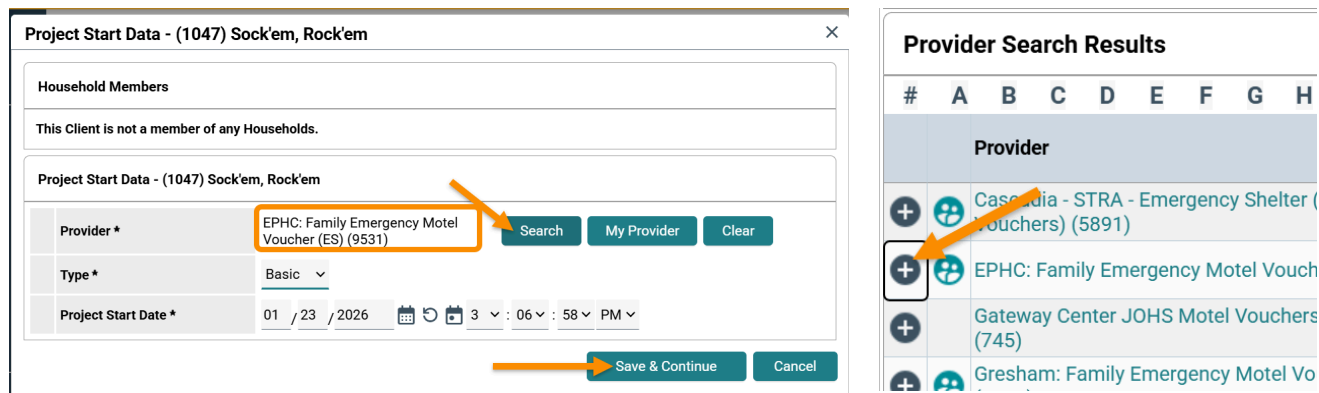
The screenshot shows the 'Client Information' tab with sub-tabs 'Summary' and 'Client Profile'. An orange arrow points to the 'Entry / Exit' sub-tab, which is highlighted in blue. Other sub-tabs visible are 'Service Transactions', 'Case Managers', and 'Case Plans'.

Step 1: In the participant’s record, click the Entry/Exit tab. Click “Add Entry/Exit”.



The screenshot shows the 'Entry / Exit' form. It has a table with columns 'Program' and 'Type'. The first row shows 'Coordinated Housing Access (CoC) CE Clackamas (4433)' and 'HUD'. Below the table is a blue button labeled 'Add Entry / Exit'. An orange arrow points to this button.

Step 2: Select the correct Emergency Shelter provider, by clicking Search in the provider field and clicking the grey “+” next to the correct provider.



The first screenshot shows the 'Project Start Data - (1047) Sock'em, Rock'em' form. It has fields for 'Provider *', 'Type *', and 'Project Start Date *'. The 'Provider *' field contains 'EPHC: Family Emergency Motel Voucher (ES) (9531)'. An orange arrow points to the 'Search' button. The 'Type *' field is set to 'Basic'. The 'Project Start Date *' is set to '01 / 23 / 2026'. A 'Save & Continue' button is at the bottom right. The second screenshot shows the 'Provider Search Results' table. It has columns '#', 'A', 'B', 'C', 'D', 'E', 'F', 'G', 'H'. The first row is 'Cascadia - STRA - Emergency Shelter (Vouchers) (5891)'. The second row is 'EPHC: Family Emergency Motel Vouch (745)'. The third row is 'Gateway Center JOHS Motel Vouchers (745)'. The fourth row is 'Gresham: Family Emergency Motel Vo'. An orange arrow points to the grey '+' button next to the second row.

Step 3: Select the “Basic” E/E type and select the correct Project Start Date.

Step 4: Click “Save & Continue.”

Step 5: Enter all entry assessment data. All of these questions should be located on your emergency shelter intake paperwork. Individual fields in the assessment are described in detail in earlier sections of this document.

Shelter Exit Process using Entry/Exits

Step 1: In the participant’s record, click the Entry/Exit tab. Find the Emergency Shelter provider entry/exit.

Client Information				Service Transactions																	
Summary	Client Profile	Households	ROI	Entry / Exit	Case Managers	Case Plans	Assessments														
Entry / Exit <i>Reminder: Household members must be established on Households tab before creating Entry / Exits</i> <table border="1"> <thead> <tr> <th>Program</th> <th>Type</th> <th>Project Start Date</th> <th>Exit Date</th> <th>Interims</th> <th>Follow Ups</th> <th>Client Count</th> </tr> </thead> <tbody> <tr> <td>EPHC: Family Emergency Motel Voucher (ES) (9531)</td> <td>Basic</td> <td>01/23/2026</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> Add Entry / Exit Showing 1-1 of 1								Program	Type	Project Start Date	Exit Date	Interims	Follow Ups	Client Count	EPHC: Family Emergency Motel Voucher (ES) (9531)	Basic	01/23/2026				
Program	Type	Project Start Date	Exit Date	Interims	Follow Ups	Client Count															
EPHC: Family Emergency Motel Voucher (ES) (9531)	Basic	01/23/2026																			

Step 2: Click the pencil next to the “Exit Date” field.

Edit Exit Data - (1047) Sock'em, Rock'em

Exit Date *	01 / 23 / 2026
Reason for Leaving	-Select-
If "Other", Specify	
Destination *	-Select-
If "Other", Specify	
Notes	

Save & Continue **Cancel**

Step 3: Enter the Exit Destination and Project Exit Date. Click “Save & Continue”.

Step 4: Make any needed updates to the participant’s exit assessment. Once all updates are complete, scroll to the bottom and click “Save & Exit”.

Addendum 3: Overlapping Entries within Emergency Shelter

Participants have “overlapping entries” when they have multiple entries open at the same time for more than one night. Overlaps often happen in shelters because beds are held for multiple nights after someone’s departure from an earlier shelter stay. While overlaps are allowable from a programmatic perspective, they are not allowable in the data. Overlaps need to be resolved or avoided for all shelter types. Or, you may see someone enrolled in a shelter while also being housed in a permanent housing project (e.g. PSH or RRH). The rules for fixing an overlap depend on the types of projects involved.

For shelter: A participant cannot have more than one shelter entry open at the same time for more than one night. The Entry Date for the new shelter stay must be on or after the Exit Date of the previous shelter stay. Covid-related shelters are a local exception to this rule. If the participant moves out of the shelter into permanent housing, the exit date of the shelter stay must be on or before the Housing Move-In Date for the permanent housing entry.

The following situations will produce an “overlapping entry” error:

Situation	How to fix
Participant enrolled at two shelters at the same time	1) Adjust exit date of earlier shelter stay to be on or before the entry date of the later shelter stay, or 2) delete one shelter stay if its entry and exit dates fall <i>within</i> the dates of the other shelter stay.
Participant enrolled in ES while housed in PSH at the same time	Adjust exit date of shelter stay to be on or before the HMID of the PSH entry
Participant enrolled in ES while housed in RRH at the same time	Adjust exit date of shelter stay to be on or before the HMID of the RRH entry

The following situations will not produce an “overlapping entry” error:

Situation	Why it’s okay
Participant enrolled in ES and RRH at the same time	Participants are able to utilize RRH case management to assist in housing barrier busting and housing search, while actively enrolled at an ES. The participant must be exited from the ES entry on or before the HMID for the RRH entry.

Revision History

- **07/24/2026:** Added ROI with signature buttons.
- **3/27/2026** Added addendum 1, “Exit Process Considerations for Overnight Shelters”. Renamed and moved the amendment previously #1 to #3, “Overlapping Entries within Emergency Shelter”. Minor adjustments made to screenshots and wording of “Participant Check Out from the Shelter” section. Ensured all sub-assessments not required for overnight shelters have explainer text.
- **1/23/2026** Add addendum 2, “Emergency Motel Vouchers: Data Entry Process using Entry/Exits”.
- **1/9/2026** Additional detail and definition added to ‘SHS Priority Population’ subsection.
- **1/6/2026** Added addendum 1, “Overlapping Entries within Emergency Shelter”.