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HMIS CLIENT INTAKE INSTRUCTIONS

Get in the HMIS

See Quick Reference Guide Step by Step Logging In

You Are Ready to Enter a Client

CLIENT tab at the top

SELECT: “Program Data Intake” on the left side

CHOOSE: “Add a new client” big purple button

For Support, Please

Submit a ticket in the HMIS

Email us at: hmis@computerhelp.biz

Contact Computer Help at (850) 651-0341

Contact Computer Help at (850) 259-4164 Page 1

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HMIS

On all the pages, if you see this (*) then the information is required.

Client Intake

DATA NEEDED

ENTER: Last name

ENTER: First name

NEXT

ENTER: SSN Quality

ENTER: Date of Birth Quality

ENTER: Ethnicity

ENTER: Race

ENTER: Gender

FINISH

Assessment

DATA NEEDED

ENTER: Assessment Date

ENTER: Assessment Type

ENTER: Program

ENTER: Assessor

ENTER: Restriction

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SAVE

Assessment Data - HMIS Universal Data

DATA NEEDED

- ENTER: Assessment Date
- ENTER: Veteran Status
- ENTER: Disabling Condition
- ENTER: Residence Prior to Program Entry
- ENTER: Length of Stay
- ENTER: Housing Status
- ENTER: Prior Zip Code Quality
- ENTER: Restriction

SAVE

Assessment Data - Chronic Homelessness Assessment

DATA NEEDED

No Data is needed

SAVE

Assessment Data - Barriers

DATA NEEDED

No Data is needed

SELECT: "No Barriers" if there are none

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SAVE

Assessment Data - Domestic Violence Assessment

DATA NEEDED

ENTER: Domestic Violence Experience

SAVE

Assessment Data - Financial Assessment

DATA NEEDED

ENTER: Assessment Date

ENTER: Income Received

ENTER: Non-cash Benefits

Scroll down

ENTER: Restriction

SAVE AND CLOSE

Assessment Data - Employment Assessment

DATA NEEDED

ENTER: Assessment Date

ENTER: Employed

YES then ENTER: Hours worked in Last Week

ENTER: Employment Tenure

ENTER: Looking For Work

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SAVE

Assessment Data - Adult Education Assessment

DATA NEEDED

ENTER: Assessment Date

ENTER: Currently in School/Working on Degree

ENTER: Received Vocational Training/Apprenticeship

ENTER: Highest Grade Completed

SAVE

Assessment Data - Health Assessment

DATA NEEDED

ENTER: Assessment Date

ENTER: General Health Status

ENTER: Restriction

SAVE

Does this client have a family?

DATA NEEDED

Yes or No

YES, ENTER FAMILY NOW

ENTER: Last Name

ENTER: First Name

SAVE

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HUD Enrollment

DATA NEEDED

ENTER: Enrollment Date

ENTER: Case

ENTER: Grant

ENTER: Program

ENTER: Relationship to Head of Household

Scroll down

ENTER: Restriction

SAVE

Enroll Family Members

See Quick Reference Guide – Step by Step Enroll Family Members

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