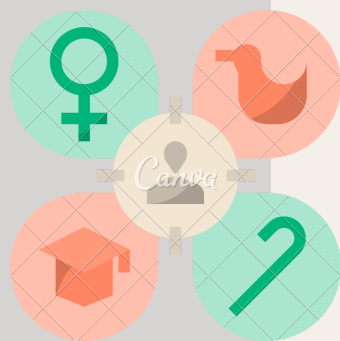# CMIS ENTRY ASSESSMENT

Use this checklist when adding entry data for each household member through ClientPoint

STEP 1. UNIVERSAL DATA ELEMENTS

Does client have responses to birthday, race, ethnicity, gender, relationship to head of household, client location, and county?

STEP 2. PRIOR LIVING SITUATION

Where did client sleep prior to intake and for how long? When did they last lose their housing? How many times and total months have they been experiencing homelessness?

STEP 3. INCOME

For new clients, are they receiving any source of income? If yes, how much?

For old clients, do they still receive the same source and amount of income? If not, add an end date.
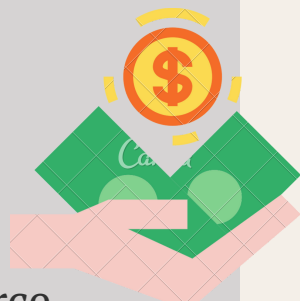
STEP 4. NON-CASH BENEFITS

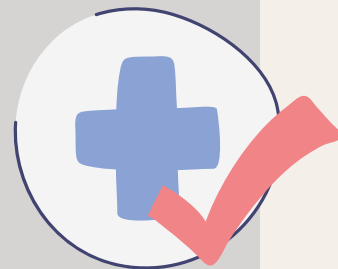For new clients, are they receiving any source of benefits? If yes, how much?

For old clients, do they still receive the same source and amount of benefits? If not, add an end date.

STEP 5. HEALTH INSURANCE

For new clients, do they have any insurance?

For old clients, do they still have the same insurance? If not, add an end date.

STEP 6. DISABLITIES

For new clients, are they living with any disabling conditions?

For old clients, do they still live with the same disabling condition? If not, add an end date.
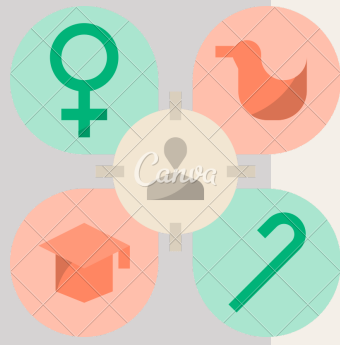
HOUSING ALLIANCE DELAWARE

CMIS EXIT ASSESSMENT

Use this checklist when adding exit data for each household member through ClientPoint

STEP 1. REASON FOR LEAVING

Why did the client exit from your program? Please select the most appropriate reason, and avoid using 'Other'.

STEP 2. DESTINATION

Where did the client go to after leaving your program? If not specified, but client has shared a possible destination (e.g. friends/family), use that. Save "No Exit Interview Completed" as a last resort since it will be flagged as an error.
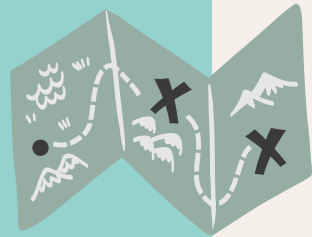
STEP 3. INCOME

Did client exit with the same source and amount of income?

If no, update answers on 1) Yes/No, 2) HUD Verification, and 3) Total Monthly Income

STEP 4. NON-CASH BENEFITS

Did client exit with the same source and amount of non-cash benefits?

If no, update answers on 1) Yes/No and 2) HUD Verification. If necessary, add an End Date.

STEP 5. HEALTH INSURANCE

Did client exit with the same source of health insurance?

If no, update answers on 1) Yes/No and 2) HUD Verification. If necessary, add an End Date.

STEP 6. DISABLING CONDITIONS

Did client exit with the same disabling conditions?

If no, update answers on 1) Yes/No and 2) HUD Verification. If necessary, add an End Date.