

HHSC - Family Violence Program

Family Violence Program - Data Element Guide

Effective August 1, 2021

1. Overview

This document serves as a data collection instructional guide for HHSC funded Family Violence (FV) Providers. The guide discusses each required HHSC data element and the valid responses accepted by the FVNET system.

The guide is structured into 9 sections, which correspond with the 9 required CSV files. Under each section you will find an example of the CSV file, a description of each data element within the file and an overview of the acceptable responses for each data element. For file naming conventions and alpha coding information, please refer to the FVNET Data Format Guide.

2. Client Demographic Information

Sample File Structure

Client_Id	Age	Age_Status	Ethnicity	Veteran_Status	Gender	Tanf_Date_Completed	Tanf_Status	Total_Shelter_Days
1001	27		AI	Y	M	1/12/2016	E	20
1002		R	ASN	U	R			0

Data Elements & Accepted Responses

- **Client ID-** The client ID is a unique number assigned to the client upon entering the organization for services. The client ID is assigned to the client by the FV Provider.
 - **Accepted responses-** This field is required and must be a unique numerical value. The value can contain up to 36 numbers, letters and/or dashes.
- **Age-** The age of the client at the first time of service within the fiscal year.
 - **Accepted responses-** This is required and must be a numerical value. If the client does not disclose their age, this can be left blank, but the Age Status must still be received. You will report the age for the client every time they receive services, however you will not be required to update their age if it should change while the client is receiving services within the fiscal year.
- **Age Status-** If the client does not wish to disclose his or her age, this data element must be completed explaining why an age was not reported. If the client reports an age, this data element will remain blank.
 - **Accepted responses-** The four accepted responses for this data element are Refused, Unknown, Unknown Adult and Unknown Child. If the client refuses to provide their age, then report "R". If the reason the age is not provided is unknown, but it can be determined with reasonable certainty the person is an adult, then report "UA". Likewise, report "UC" if there is reasonable certainty the client is a child. If the reason the age is not provided is unknown and it is unclear whether the client is an adult or child, report "U".

FVNet will allow for up to 10% of total clients to be reported as Age Status Unknown. (Unknown Adult and Unknown Child are not included in that 10 percent.)

- **Ethnicity-** The self-disclosed race/ethnicity of the client.
 - **Accepted responses-** The accepted responses for this required data element are:
 - Black or African American
 - American Indian/Alaskan Native
 - Asian
 - Hispanic or Latino
 - Native Hawaiian/other Pacific Islander
 - White
 - Multi-racial
 - Unknown
 - Other
 - Refused

- **Veteran Status-** Does the client have any military experience?
 - **Accepted responses-** The accepted responses for this required data element are:
 - Yes
 - No
 - Unknown
 - Refused

- **Gender-** The self-disclosed gender of the client at the first time of service within the fiscal year.
 - **Accepted responses-**The accepted responses for this required data element are:
 - Female
 - Male
 - Unknown
 - Transgender Male to Female
 - Transgender Female to Male
 - Other
 - Refused

- **TANF Date Completed-** This field includes the date in which the HHSC FVP TANF form was completed for the client.
 - **Accepted responses-** The date format for this field is 00/00/0000.

- **TANF Status-** This field includes information on the status of the clients TANF form.
 - **Accepted responses-** The accepted responses for this required data element are:
 - Eligible
 - Ineligible
 - No Form on File
 - Refused

- **Total Shelter Days-** This field is required for Shelter organizations reporting the total number of shelter days for clients. The number reported in this field must correspond with the "Enter Shelter" service date and "Exit Shelter" service date reported in the Client Services table. If a client enters shelter in a previous month and is not exiting shelter in the current reporting month, then this number should correspond with the total number of days within the reporting month.

- **Accepted responses-** This field is required for all shelter clients and should be a numerical value. If you are serving nonresidential clients, then the shelter days should always be "0" for the client.

3. Victimization Information

Sample File Structure

Client_Id	Type_of_Abuse	Youth_IPV_Victim_Status	Victim_Abuser_Relationship	Incident_County
1001	P;E;SK	Y	DATE	009
1002	R	U	U	OS

Data Elements & Accepted Responses

Please report only the most recent occurrence of victimization.

- **Client ID-** The client ID is a unique number assigned to the client upon entering the organization for services. The client ID is assigned to the client by the FV Provider.
 - **Accepted responses-** This field is required and must be a unique numerical value.
- **Type of Abuse-** This field includes information on the type of abuse the client experienced. Multiple responses can be reported
 - **Accepted responses-** This information is required for all clients who received services within the reporting month. The accepted responses include the following: (multiple values can be reported with a semicolon between each value)
 - Physical
 - Emotional/Psychological/Verbal
 - Stalking
 - Sexual
 - Refused
 - None
- **Youth IPV Victim Status-** A youth IPV victim is defined as a youth under the age of eighteen who is a victim of intimate partner violence (i.e. teen dating violence). For example, a client who enters shelter for dating violence and is 16 years old would be considered a YIPV client. A client who comes into the shelter as a result of experiencing dating violence when they were 16 but is now over the age of 18 would not be considered a YIPV client. Below is the definition that is in the data element guide that all programs received
 - **Accepted responses-** The accepted responses for this required data element are:
 - Yes
 - No
 - Unknown
 - Refused
- **Victim Abuser Relationship-** This information includes the relationship between the victim and the offender/abuser.
 - **Accepted responses-** The accepted responses for this required data element are:

- Dating Relationship
 - Current or Former Spouse or Intimate Partner
 - Other Family/Household Member
 - Unknown
 - Other
- **Incident County**- In what county did the victimization incident occur?
 - **Accepted responses**- The accepted responses for this required data element can be found in Appendix I.

4. Client Services

Sample File Structure

Client_Id	Service_Type	Is_Residential	Funding_Source	Total_Service_Contacts	Service_Date	Service_County	Service_Channel
1001	OY	Y	RES	2	1/12/2016	010	FTF
1002	FVE	N	NONRES	3	1/15/2016	050	FTFT

Data Elements & Accepted Responses

- **Client ID**- The client ID is a unique number assigned to the client upon entering the organization for services. The client ID is assigned to the client by the FV Provider.
 - **Accepted responses**- This field is required and must be a unique numerical value.
- **Service Type**- This field includes information on the type of service the client received.
 - **Accepted responses**- This information is required for all clients who received services within the reporting month. For information on the types of services that can be included within each service type, please refer below. For information on what may or may not be counted as a *Telephone Service*, please refer to **Appendix II - July 2020 Updated Telephone Services Policy Guidance**.
 - **Overnight Stay for Youth**- This service should be reported when you have a child client who is staying overnight away from your shelter due to visitation, social visit with friends and/or family or any other reason and can only be reported in-person (face-to-face). This service cannot be used more than 2 consecutive nights, no more than twice a month. Accepted funding type for this service include: HHSC Shelter, HHSC Shelter A, and HHSC Satellite.
 - **Family Violence Option**-This service should be reported when providing a client with a Family Violence Option (Good Cause) form or a Family Violence Exemption and can be done in-person, through face-to-face technology, or over-the-phone. Please refer to the Emergency Orientation policy guidance for more information on how to report clients who only receive this service. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite, HHSC EIF and HHSC SNRP.
 - **Emergency Orientation**- This service should be reported when providing a client an Emergency Orientation during a one-time critical assistance service, such as at the hospital, court, or for a hotel stay and can be done in-person, through face-to-face technology, or over-the-phone. Staff person must complete

and retain an HHSC Emergency Proof of Orientation Form. Please refer to the **HHSC Emergency Orientation Policy Guidance** for more information on what constitutes an emergency orientation, as well as **Appendix II - July 2020 Updated Telephone Services Policy Guidance** for counting this service over-the-phone. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential and HHSC Satellite.

- **Educational Arrangement for Children-** This service should be reported when providing services that result in a resident or nonresident child being in compliance with the compulsory attendance requirements found in the Education Code. Examples include providing clothing or supplies for school, conferring with schoolteachers or administrators. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential and HHSC Satellite.
- **Child Services-** This service should be reported when providing services to a child resident that includes activities such as; structured arts and crafts activities and/or non-counseling, information activities provided by a trained staff person or a volunteer. This service also may include child care for nonresidential clients when the child's parent is receiving a family violence service or when child care services are provided for current family violence clients by the center's licensed or permitted HHSC child care facility. If the center contracts with a non-HHSC approved subcontractor, then the service can only be counted as a one-time referral. If transportation to the service is provided, each round trip can count as a Transportation service. If a parent resident is accompanying a child for any of the identified child services, record the service as a crisis intervention service for the parent. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Child Recreation or Social Group-** This service should be reported when providing a child client with group social activities such as; daycare programming, after-school programming, arts and crafts, special outings or other non-counseling information group activities. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Transportation-** This service should be reported when providing a client with transportation and/or transportation assistance such as; arranging transportation to and from emergency medical facilities for shelter residents and nonresidents and/or from a safe place to the shelter for persons being considered for acceptance as residents of the shelter and who are located within the shelter's service area. This also includes non-emergency transportation for the adult/child resident, nonresident or program participant to a single destination or to a series of destinations in a single trip. Transportation can include staff providing or arranging clients' transportation to court, place of employment and other appointments. Transportation service also includes the provisioning of bus

passes or taxi fares. Rideshare companies like Uber and Lyft may also be utilized for a transportation service. However, please make sure your agency is aware of the safety and background check policies the company has since some do not have as strict requirements as taxi companies. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.

- **Medical Care-** This service should be reported when providing a client with assistance in responding to any urgent medical situations for the adult/child residents, nonresidents or program participants accessing shelter center services. This also can include basic first aid, arranging for non-emergency professional medical services for adult/child residents, nonresidents, or program participants, or obtaining prescription or nonprescription medication for the victim's self-administration. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Medical Accompaniment-** This service should be reported when accompanying a domestic violence victim to, or meeting a victim at a hospital, clinic, or medical office. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Enter Shelter-**This service should be reported when all clients (including children) enters emergency shelter for services and can only be reported in-person (face-to-face). Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Exit Shelter-** This service should be reported when all clients (including children) exits emergency shelter for services and can only be reported in-person (face-to-face). Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Intervention Services-** This service should be reported when providing a client (including children) intervention services such as; safety planning, understanding and support, advocacy, case management, and dating violence services, to victims of family violence. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Non-client hotline calls cannot be counted under this service. Please see **Appendix II - July 2020 Updated Telephone Services Policy Guidance** for more information. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Information and Referral-Community Services-** This service should be reported when providing a client with information and referrals about existing community resources, including but not limited to the following: medical care

providers, legal assistance providers, protective and regulatory services, resource assistance, public assistance, counseling and treatment services, children's services, and any other appropriate family violence services. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Non-client hotline calls cannot be counted under this service. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.

- **Information and Referral-Employment-** This service should be reported when providing a client with information and referrals about employment training and employment opportunities, either directly or through formal arrangements with other agencies. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Non-client hotline calls cannot be counted under this service. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Legal Assistance-** This service should be reported when providing a client with legal assistance including; identifying individual legal needs, legal rights and options, and providing support and accompaniment (including court accompaniments) in their pursuit of those options. Legal Assistance can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.
- **Support Groups-** This service should be reported when providing a client with support groups related to family violence led by trained staff, survivors, or volunteers covering educational material or issues brought up by the group. Support groups may be gender, population and/or age specific. Support groups may be open-ended or closed, time specific or on-going. Weekly support groups must be provided, but attendance cannot be mandated. The shelter center's adult support groups may include recreational and/or social activities. These services can be done in-person, through face-to-face technology, or over-the-phone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite and HHSC SNRP
- **Orientation-** This service should be reported one-time per client when providing introductions to the organization by a trained staff. This service should be provided in person or through face-to-face technology; however, it can be provided over the phone in certain circumstances as a last-resort option. Please see **Appendix II - July 2020 Updated Telephone Services Policy Guidance** for more information. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite, and HHSC SNRP.
- **Counseling/Therapy-** This service should be reported when providing a client (including children) with the use of therapeutic methods of treatment and/or one-on-one support delivered by a trained staff or a volunteer. This includes

professional counseling, peer therapy, group therapy and any other form of therapeutic treatment. Counseling can be counted if in person, through face-to-face technology, or over the telephone with an established client who has had an intake or has received continued services within the previous 12 months. Accepted funding sources for this service include: HHSC Shelter, HHSC Non-Residential, HHSC Satellite and HHSC SNRP.

- **EIF-Legal Services-Protective Orders-**This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in obtaining a protective order as outlined in your EIF project. These services can be provided by a specialized legal representative in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Divorce-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in obtaining or navigating a divorce, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Child Custody-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in a child custody case, or any related navigation or modification thereof, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Child Support-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in obtaining child support, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Child Visitation-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client assistance with the legal aspects of arranging or modifying child visitation, or representation in a child custody case, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Child Protective Services-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in a child protective services case that goes beyond the standard work of a DFPS liaison, as outlined in your EIF project. The service should be counted for the parent or an unaccompanied minor. These services can be provided in-person,

through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.

- **EIF-Legal Services-Immigration-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in an immigration issue, proceeding, application, case, or other assistance, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Housing-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in a case involving housing issues, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Financial-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in a case involving financial issues (such as filing for bankruptcy, assistance getting credit card debt resolved, or other fees waived, etc.), as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Legal Services-Other-** This service can only be used by organizations who have an HHSC Legal Services EIF contract. The service will be reported when providing an EIF client with assistance or representation in a case not involving protective orders, divorce, child custody, child support, child visitation, child protective services, immigration, housing, or financial issues, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only. Legal advocacy is not allowable under this service category.
- **EIF-Economic Stability-Housing Assistance-** This service can only be used by organizations who have an HHSC Economic Stability EIF contract. The service will be reported when providing an EIF client with financial housing assistance and case management to provide financial housing assistance, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only.
- **EIF-Economic Stability-Educational Assistance-** This service can only be used by organizations who have an HHSC Economic Stability EIF contract. The service will be reported when providing an EIF client with educational assistance, and resources related to educational assistance, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only.
- **EIF-Economic Stability-Employment Assistance-** This service can only be used by organizations who have an HHSC Economic Stability EIF contract. The

service will be reported when providing an EIF client with employment assistance, and resources related to employment assistance, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only.

- **EIF-Economic Stability-Childcare/Ancillary Support-** This service can only be used by organizations who have an HHSC Economic Stability EIF contract. The service will be reported when providing an EIF client with child care assistance and/or ancillary supports, as outlined in your EIF project. This may be provided in-house, or through a contractor. The service should be counted for the parent client when the program interacts with the organization regarding childcare, and for the child each day that they attend childcare. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only.
 - **EIF-Economic Stability-Other-** This service can only be used by organizations who have an HHSC Economic Stability EIF contract. The service will be reported when providing an EIF client with assistance that does not fall within housing assistance, educational assistance, employment assistance and/or childcare and ancillary supports, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only.
 - **EIF-Mental Health-Counseling-** This service can only be used by organizations who have an HHSC Mental Health EIF contract. The service will be reported when providing an EIF client with professional counseling or counseling related activities, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only.
 - **EIF-Mental Health-Other-** This service can only be used by organizations who have an HHSC Mental Health EIF contract. The service will be reported when providing an EIF client with any mental health service that is not professional counseling, as outlined in your EIF project. These services can be provided in-person, through face-to-face technology, or over-the-phone. Accepted funding sources for this service include: HHSC EIF only.
- **Is Residential-** Is this service provided to a client residing in your HHSC-funded residential facility? This field pertains more to where the client is residing rather than the type or location of the service the client is receiving. *If you have a client receiving a nonresidential service but is residing at your shelter, then you will report "Yes" for all of their services. If you select "Y" that the client is a residential client, then the client must have an "enter shelter" service within a previous or within the current month. If the client does not have an enter shelter service, then the service must be reported as "N" for nonresidential.*

Note: If your agency is paying for an HHSC client to stay at a hotel/motel, then you will report "Yes" for all of their services. Please see the **HHSC Policy Guidance- Reporting Hotel/Motel Stays** for more information.

 - **Accepted responses-** The accepted responses for this required data element are:
 - Yes
 - No

- **Funding Type-** This information includes the type of funding source used to support the services the client is receiving. This will also correspond with the type of HHSC contract your organization has.
 - **Accepted responses-** The accepted responses for this required data element are:
 - **HHSC Shelter-** Centers with an HHSC Shelter contract should select this funding source for all of the services they submit, *unless* they have a Satellite, SNRP or EIF contract also. If you are serving Non-Residential clients under your HHSC Shelter contract, you will still submit HHSC Shelter as the funding source since this is the type of contract you have with HHSC.
 - **HHSC Shelter A-** Centers with two HHSC Shelter contracts should select this funding source for all of the services they submit, unless they have a Satellite, SNRP or EIF contract also. If you are serving Non-Residential clients under your HHSC Shelter contract, you will still submit HHSC Shelter as the funding source since this is the type of contract you have with HHSC.
 - **HHSC Non-Residential-** Centers with an HHSC Non-Residential contract should select this funding source for all of the services they submit, even if operating a shelter that is not funded by HHSC (unless they have an SNRP or EIF contract also)
 - **HHSC Satellite-** This funding source should be submitted when serving a client who resides in, or is receiving non-residential services at your HHSC funded Satellite shelter. Only use this funding source if you receive additional base funding from HHSC to support your HHSC Satellite shelter
 - **HHSC SNRP-** This funding should be used only for those with an HHSC SNRP contract. This will be the only way HHSC can determine how many clients you are serving under your HHSC SNRP contract, so it is critical that the SNRP funding source is reported when you are serving a client under your SNRP contract.
 - **HHSC EIF-** This funding should be used only for those with an HHSC EIF (Exceptional Item Funding AKA *Enhanced Services*) contract. This will be the only way HHSC can determine how many clients you are serving under your HHSC EIF contract, so it is critical that the EIF funding source is reported when you are serving a client under your EIF contract. **This funding source can only be used for services titled "EIF-XXX" from the list of accepted services. If you report a non-EIF service with the EIF funding source, your files will be rejected.**

- **Service Contacts-** This element contains the number of service contacts the client received within the day for the same service type. For example, if a client received crisis intervention 3 times from the caseworker in the same day, then the service contacts for this client would be 3.
 - **Accepted responses-** This required field should contain a numeric value.

- **Service Date-** This field includes the date in which the client received the corresponding service.
 - **Accepted responses-** The date format for this field is 00/00/0000.

- **Service County-** In what county did the client receive services?
 - **Accepted responses-** The accepted responses for this required data element can be found in Appendix I.

- **Service Channel-** This information includes the method in which the client received services. If the client received services in person, the channel would be face to face. If the client received

services through a technology source such as facetime and/or skype, the channel would be face to face technology. No other forms of communication channels are currently accepted.

- **Accepted responses-** The accepted responses for this required data element are:
 - Face to Face- service provided in-person with the client
 - Face to Face Technology- service provided through technological tool (does not include telephone)
 - Telephone- service provided over the phone with an established client (does not include hotline calls where the caller isn't a client receiving service)
 - Telephone as a service channel can be counted for all HHSC services *except* for the following:
 - o Enter Shelter
 - o Exit Shelter
 - o Overnight Stay for Youth

*See **Appendix II - July 2020 Updated Telephone Services Policy Guidance** for more information on allowable services over the phone.

5. Aggregate Client County Information

Sample File Structure

County_Of_Residence	Total_New_Clients_Served
001	50
012	25

* If you do not have any new clients to report for the month, leave this file blank but do include the two headers at the top. If the headers are not included in the file, your submission will be rejected.

Data Elements & Accepted Responses

- **County Of Resident-** This is the county of residence that the client resides in or the county the client resided in prior to entering shelter.
 - **Accepted responses-** The accepted responses for this required data element can be found in Appendix I.
- **Total New Clients Served-** This field includes information unique number of new clients served within the reporting month that reside or resided in the identified county. In the first month of reporting within the fiscal year, all clients should be counted in this file. After the first month, you will only include new clients that receive services for the first time during the reporting month.
 - **Accepted responses-** This field is required and must be a numerical value.

6. Aggregate Client Language Information

Sample File Structure

Preferred_Language	Total_New_Clients_Served
ENG	20
SPA	30

* If you do not have any new clients to report for the month, leave this file blank but do include the two headers at the top. If the headers are not included in the file, your submission will be rejected.

Data Elements & Accepted Responses

- **Preferred Language-** This is the preferred language of the new client receiving services.
 - **Accepted responses-** The accepted responses for this data element are:
 - English
 - Spanish
 - American Sign Language
 - Vietnamese
 - Cantonese
 - Urdu
 - Korean
 - Arabic
 - Chinese
 - French
 - Tagalog
 - German
 - Italian
 - Russian
 - Other
- **Total New Clients Served-** This field includes the preferred language information for new clients served within the reporting month. In the first month of reporting within the fiscal year, all clients should be counted in this file. After the first month, you will only include new clients that receive services for the first time during the reporting month.
 - **Accepted responses-** This field is required and must be a numerical value.

7. Education Presentations

Sample File Structure

Education_Type	Topics_Covered	Funding_Source	Total_Adult_Attendance	Total_Youth_Attendance	Event_County	No_Of_Sessions
CE	DOMV;FL;GR	RES	200		10 003	2
PT	CHILD;HR	EIFD	25		75 227	1

*** If you do not have any new clients to report for the month, leave this file blank but do include the seven headers at the top. If the headers are not included in the file, your submission will be rejected.**

Data Elements & Accepted Responses

- **Education Type-** This field includes information on the type of education presentation provided. For information on what may or may not be counted as an *Education Presentation*, please refer to **Appendix III - Counting HHSC Community Education and Awareness Presentations.**
 - **Accepted responses-** The accepted values for this field include;
 - **Community Education-** This education type should be reported to HHSC when providing an education session that is provided to a targeted population such as youth, adults, college-aged youth, etc. This would include all *primary prevention* presentations, including those for SNRP and/or EIF, or any presentation that occurs over a course of sessions that build upon one another. Sessions may be provided in-person or virtually but should not include emails or written social media posts. Recorded or live-streamed videos where unduplicated views can be determined may be counted with a total audience count. Programs need to establish a policy to ensure unique counts are reported each month the virtual content is available.
 - **Professional Training-** This education type should be reported when providing a presentation to a group of professionals. This could include school personnel, government employees, counselors, civic groups, religious groups or any other professional group. These trainings are typically a one-time event and are not held over a series of sessions. Sessions may be provided in-person or virtually.
 - **Community Awareness-** This education type should be reported to HHSC when providing a community awareness information to a large, broad population. This would include activities such as health fairs, large events where the attendees cannot be counted. Social media posts with primary prevention content can also be counted as community awareness. When reporting the total adult and youth attendance, you may estimate the total number of persons you came into contact during this event, or you can enter “1” if you are unable to make an estimate. Sessions may be provided in-person or virtually but should not include emails or written social media posts that only contain the organization’s contact information. Targeted media outreach and video trainings may be included as community awareness. Recorded or live-streamed videos where unduplicated views can be determined may be reported with a total audience count. Programs need to establish a policy to ensure unique counts are reported each month the virtual content is available.
 - **Volunteer Training-** This education type should be reported when providing volunteer training to groups who will be supporting your family violence program. Sessions may be provided in-person or virtually.
- **Topics Covered-** This field includes information on the different topics covered within the presentation and/or educational session. Multiple topics can be reported for each education type. The multiple topics will need to be reported with a semicolon between values.

- **Accepted responses-** Accepted responses for this field include:
 - Domestic Violence Awareness Month
 - Dating Violence
 - Issues related to an underserved population
 - General Family Violence Information
 - Financial Literacy
 - Bystanders Intervention
 - Cultural Competence
 - Dynamics of Abuse
 - Gender Roles
 - Healthy Relationships
 - Intersection of Mental Health and Family Violence
 - Domestic Violence Overview, Dynamics and Services
 - Children
 - Confidentiality
 - Coordinated Community Response
 - Immigration
 - Civil/Criminal Justice
 - Technology
 - Protective Orders
 - Primary Prevention of Violence
 - Safety Planning
 - Victim Rights
 - Family Violence and the Legal System
 - Community Specific Request-Family Violence
 - Family Violence Awareness
 - Other

- **Funding Source-** This information includes the type of funding source used to support the presentation and/or educational sessions. This will also correspond with the type of HHSC contract your organization has.
 - **Accepted responses-** The accepted responses for this required data element are:
 - **HHSC Shelter-** Centers with an HHSC Shelter contract should select this funding source for all of the education types reported (unless they have a Satellite, SNRP or EIF contract also).
 - **HHSC Shelter A-** Centers with two HHSC Shelter contracts should select this funding source for all of the education types reported (unless they have a Satellite, SNRP or EIF contract also).
 - **HHSC Non-Residential-** Centers with an HHSC Non-Residential contract should select this funding sources for all of the education types reported (unless they have an SNRP or EIF contract also)
 - **HHSC Satellite-** This funding source should be submitted when providing a presentation and/or educational session at your HHSC funded Satellite shelter, in the community of your Satellite shelter or with staff who are funded by HHSC and employed at your Satellite shelter. Only use this funding source if you receive additional base funding from HHSC to support your HHSC Satellite shelter
 - **HHSC SNRP-** This funding should be used only for those with an HHSC SNRP contract. This will be the only way HHSC can determine which presentations/educational sessions that are funded through your HHSC SNRP contract, so it is critical that the SNRP funding source is reported when you are providing an educational session through your SNRP project.

- **HHSC EIF-** This funding should be used only for those with an HHSC EIF contract. This will be the only way HHSC can determine which presentations/educational sessions that are funded through your HHSC EIF contract, so it is critical that the EIF funding source is reported when you are providing an educational session through your EIF project.
- **Total Adult Attendance-** This field will include the total number of adults who attended the education event being reported. If you have multiple sessions within the education type being reported, you will want to report the total unduplicated number of adult attendees over the course of the entire education sessions provided. For example, if during session 1 you have a total of 15 adult attendees and then in session 2 you have a total of 10 attendees (the 10 attendees also attended session 1 and are part of the 15 reported in session 1), then you would report a total of 15 unduplicated adult attendees. You will not report the education type and all corresponding sessions until all sessions have been completed. For example, if you begin your sessions in October, but the sessions are not concluded until January, you would not report any data on the sessions until your January data submission. When reporting a community awareness event or a presentation in which you are unable to provide an accurate count of attendees, you can report an estimated number of adult attendees or report 0.
 - **Accepted responses-** This field is required and must be a numerical value.
- **Total Youth Attendance-** This field will include the total number of youth who attended the education event being reported. If you have multiple sessions within the education type being reported, you will want to report the total unduplicated number of youth attendees over the course of the entire education sessions provided. For example, if during session 1 you have a total of 15 youth attendees and then in session 2 you have a total of 10 attendees (the 10 attendees also attended session 1 and are part of the 15 reported in session 1), then you would report a total of 15 unduplicated youth attendees. You will not report the education type and all corresponding sessions until all sessions have been completed. For example, if you begin your sessions in October, but the sessions are not concluded until January, you would not report any data on the sessions until your January data submission. When reporting a community awareness event or a presentation in which you are unable to provide an accurate count of attendees, you can report an estimated number of youth attendees or report 0.
 - **Accepted responses-** This field is required and must be a numerical value.
- **Event County-** This is the county in which the education presentation was provided.
 - **Accepted responses-** The accepted responses for this required data element can be found in Appendix I.
- **Total Number of Sessions-** This field will include the total number sessions that were conducted within the education type. If the education type only included a one-time presentation to the audience and does not include ongoing sessions with the same group of adults and/or youth, then you would report 1. If the education type includes multiple sessions with the same group of adults and/or youth you will report the total number of sessions that occurred with that group.
 - **Accepted responses-** This field is required and must be a numerical value.

8. Hotline Calls

Sample File Structure

Hotline_Call_Type	Total_Calls
BATREF	100
FV	200
OFV	0
DENLOS	0
REFOTH	0
REFTMP	0
DENOTH	0

***If you do not have any hotline calls to report for the month, report "0's" for all hotline types in addition to the headers. If the headers are not included in the file, your submission will be rejected.**

Data Elements & Accepted Responses

- **Hotline Call Type-** This column includes the 7 types of hotline calls that should be reported to HHSC. The call types cannot be changed or modified
 - **Accepted responses-** The accepted responses for this data element are:
 - **Batterer/Offender Referral-** Calls reported under this category include any call regarding batterer or offender information or referral.
 - **Hotline Calls From or About Family Violence-** Calls reported under this category include any call about family violence, this includes calls from survivors seeking information, as well as, from others who may be seeking information for friends or family. Calls from clients seeking shelter that are successfully placed within your organization should be reported under this category. All other calls regarding shelter can be reported under the "Hotline Call Seeking Shelter" options.
 - **Other Family Violence Related Calls-** Calls reported under this category include any call about family violence that is not directly related to calls from survivors seeking information. This may include public information requests, media requests, donation inquiries, etc.
 - **Hotline Call Seeking Shelter - Denied Due to Lack of Space-** Calls reported under this category include any call from a survivor who is seeking shelter, but you are unable to place them within your shelter, within a neighboring family violence shelter, nor within a temporary shelter. This includes referrals to alternate shelters if you are not aware that shelter was secured, or if your agency does not operate a shelter and it is unclear if shelter was obtained elsewhere. These survivors are truly denied any shelter service.
 - **Hotline Call Seeking Shelter - Referrals to Another Family Violence Shelter-** Calls reported under this category include any call from a survivor who is seeking shelter and you are unable to place them within your shelter, but you can secure shelter within a neighboring family violence shelter. Do not report the call here if it

is only a referral and shelter was not secured. If it was only a referral, then select “denied due to lack of space”.

- **Hotline Call Seeking Shelter - Referrals to Temporary Shelter Due to Lack of Space-** Calls reported under this category include any call from a survivor who is seeking shelter, but you are unable to place them within your shelter or within a neighboring family violence shelter, but you can place them within a temporary shelter such as a homeless shelter. Do not report the call here if it is only a referral and shelter was not secured. If it is only a referral, then select “denied due to lack of space”.
 - **Hotline Call Seeking Shelter - Denied for Other Reasons-** Calls reported under this category include any call from a person who is seeking shelter, but you are unable to place them within your shelter due to a reason other than lack of space. This could include reasons such as the caller is not a survivor of family violence, or any other reason you are unable to provide them shelter that does not include lack of space.
- **Total Calls-** This field includes the total number of hotline calls received within the reporting month for the corresponding hotline call type.
 - **Accepted responses-** This field is required and must be a numerical value.

9. Aggregate Data

Sample File Structure

Aggregate_Data_Type		Aggregate_Count
VOLNTR_COUNT		100
VOLNTR_HOURS		2000
LGBTQ_COUNT		5
LANGSVCS_COUNT		3

*** If you do not have any aggregate data to report for the month, leave report "0's" and include the two headers at the top. If the headers are not included in the file, your submission will be rejected.**

Data Elements & Accepted Responses

- **Total Volunteers-** This field includes the total number of volunteers who supported your family violence program within the reporting month. Volunteers must have completed the required volunteer training as outlined in the Texas Administrative Code, Chapter 379. Volunteers may be counted in each month that they provide service, but not more than once within each month. For example, if Volunteer #1 works 5 hours on Monday, 5 hours on Tuesday and 5 hours on Wednesday, you would count a 1 volunteer even though they worked more than once within the month.

- **Accepted responses**- This field is required and must be a numerical value.
- **Hours Worked**- This field includes the total number of hours worked by volunteers who support your family violence program. When reporting the total number of hours for the month, always round up. For example, if Volunteer #1 works 5.15 hours on Monday, 5.10 hours on Tuesday and 5 hours on Wednesday, you would count a total of 16 hours even though the hours were provided by the same volunteer and were technically only 15.25 hours
 - **Accepted responses**- This field is required and must be a numerical value
- **LGBTQ**- This field includes the total number of new clients that self-identify as lesbian, gay, bisexual, transgender or queer (LGBTQ). In the first month of reporting all clients that self-identify as LGBTQ would be counted in this file. After the first month, you will only include new self-identified LGBTQ clients that receive services for the first time during the reporting month.
 - **Accepted responses**- This field is required and must be a numerical value
- **Needing Language Services**- This field includes the total number of new clients that need interpretation and/or translation. A language service is considered to be anything that is non-verbal English, even if the service is provided by someone within your organization. In the first month of reporting all clients that need a language service would be counted in this file. After the first month, you will only include new clients that need language services for the first time during the reporting month.
 - **Accepted responses**- This field is required and must be a numerical value

10. Survey

Sample File Structure

Survey_Type	No_Of_Surveys_Comp_Res_Outcome	Yes_Resource_Outcome	No_Of_Surveys_Comp_Safety_Outcome	Yes_Safety_Outcome
SHLTR	21	18	32	30
SPTADV	13	6	56	44
COUNSL	14	4	12	7
SPTGRP	16	9	56	34

* If you do not have any surveys to report for the month, report "0's" for all survey types and include the four headers at the top and all four survey types in the first column of the file.

Data Elements & Accepted Responses

- **Survey Type-** This column includes the 4 types of surveys that must be reported to HHSC as a result of funding from the Family Violence Prevention and Services Act (FVPSA). The survey types cannot be changed or modified
 - **Accepted responses-** The accepted responses for this data element are:
 - Shelter Survey
 - Support Services and Advocacy Survey
 - Counseling Survey
 - Support Group Survey
 - **Shelter-** Surveys reported under this category must be completed by shelter clients.
 - **Support Services and Advocacy Survey-** Surveys reported under this category must be completed by clients participating in support services and receiving advocacy services.
 - **Counseling Survey-** Surveys reported under this category must be completed by clients receiving counseling services.
 - **Support Group Survey-** Surveys reported under this category must be completed by clients participating in support group activities.
- **Number of Resource Surveys-** This field includes the total number of surveys received within the reporting month for the corresponding survey type, in which the question regarding the resource outcome has been answered.
 - **Accepted responses-** This field is required and must be a numerical value.
- **Yes Resource Outcome-** This field includes the total number of surveys received that responded "Yes" to the resource outcome question within the reporting month for the corresponding survey type.
 - **Accepted responses-** This field is required and must be a numerical value.
- **Number of Outcome Surveys-** This field includes the total number of surveys received within the reporting month for the corresponding survey type, in which the question regarding the safety outcome has been answered.
 - **Accepted responses-** This field is required and must be a numerical value.
- **Yes Safety Outcome-** This field includes the total number of surveys received that responded "Yes" to the safety outcome question within the reporting month for the corresponding survey type.
 - **Accepted responses-** This field is required and must be a numerical value.

Appendix I

Accepted County Values

ANDERSON
ANDREWS
ANGELINA
ARANSAS
ARCHER
ARMSTRONG
ATASCOSA
AUSTIN
BAILEY
BANDERA
BASTROP
BAYLOR
BEE
BELL
BEXAR
BLANCO
BORDEN
BOSQUE
BOWIE
BRAZORIA
BRAZOS
BREWSTER
BRISCOE
BROOKS
BROWN
BURLESON
BURNET
CALDWELL
CALHOUN
CALLAHAN
CAMERON
CAMP
CARSON
CASS
CASTRO
CHAMBERS
CHEROKEE
CHILDRESS
CLAY
COCHRAN

COKE
COLEMAN
COLLIN
COLLINGSWORTH
COLORADO
COMAL
COMANCHE
CONCHO
COOKE
CORYELL
COTTLE
CRANE
CROCKETT
CROSBY
CULBERSON
DALLAM
DALLAS
DAWSON
DEAF SMITH
DELTA
DENTON
DEWITT
DICKENS
DIMMIT
DONLEY
DUVAL
EASTLAND
ECTOR
EDWARDS
ELLIS
EL PASO
ERATH
FALLS
FANNIN
FAYETTE
FISHER
FLOYD
FOARD
FORT BEND
FRANKLIN

FREESTONE
FRIO
GAINES
GALVESTON
GARZA
GILLESPIE
GLASSCOCK
GOLIAD
GONZALES
GRAY
GRAYSON
GREGG
GRIMES
GUADALUPE
HALE
HALL
HAMILTON
HANFORD
HARDEMAN
HARDIN
HARRIS
HARRISON
HARTLEY
HASKELL
HAYS
HEMPHILL
HENDERSON
HIDALGO
HILL
HOCKLEY
HOOD
HOPKINS
HOUSTON
HOWARD
HUDSPETH
HUNT
HUTCHINSON
IRION
JACK
JACKSON

JASPER
JEFF DAVIS
JEFFERSON
JIM HOGG
JIM WELLS
JOHNSON
JONES
KARNES
KAUFMAN
KENDALL
KENEDY
KENT
KERR
KIMBLE
KING
KINNEY
KLEBERG
KNOX
LAMAR
LAMB
LAMPASAS
LA SALLE
LAVACA
LEE
LEON
LIBERTY
LIMESTONE
LIPSCOMB
LIVE OAK
LLANO
LOVING
LUBBOCK
LYNN
MADISON
MARION
MARTIN
MASON
MATAGORDA
MAVERICK
MCCULLOCH
MCLENNAN
MCMULLEN
MEDINA
MENARD
MIDLAND
MILAM

MILLS
MITCHELL
MONTAGUE
MONTGOMERY
MOORE
MORRIS
MOTLEY
NACOGDOCHES
NAVARRO
NEWTON
NOLAN
NUECES
OCHILTREE
OLDHAM
ORANGE
PALO PINTO
PANOLA
PARKER
PARMER
PECOS
POLK
POTTER
PRESIDIO
RAINS
RANDALL
REAGAN
REAL
RED RIVER
REEVES
REFUGIO
ROBERTS
ROBERTSON
ROCKWALL
RUNNELS
RUSK
SABINE
SAN AUGUSTINE
SAN JACINTO
SAN PATRICIO
SAN SABA
SCHLEICHER
SCURRY
SHACKELFORD
SHELBY
SHERMAN
SMITH

SOMERVELL
STARR
STEPHENS
STERLING
STONEWALL
SUTTON
SWISHER
TARRANT
TAYLOR
TERRELL
TERRY
THROCKMORTON
TITUS
TOM GREEN
TRAVIS
TRINITY
TYLER
UPSHUR
UPTON
UVALDE
VAL VERDE
VAN ZANDT
VICTORIA
WALKER
WALLER
WARD
WASHINGTON
WEBB
WHARTON
WHEELER
WICHITA
WILBARGER
WILLACY
WILLIAMSON
WILSON
WINKLER
WISE
WOOD
YOAKUM
YOUNG
ZAPATA
ZAVALA
Unknown
Out of State
Out of Country
Refused

Appendix II

July 2020 Updated Telephone Services Policy Guidance

July 23, 2020

To: Health and Human Services Commission (HHSC) Family Violence Program Contractors

From: HHSC Family Violence Program (FVP)

Subject: July 2020 Updated Telephone Services Policy Guidance

Purpose

The purpose of this letter is to provide guidance regarding the accepted use of the telephone for HHSC approved services. This amended policy is effective July 1, 2020.

The HHSC Family Violence Program is extending the use of the telephone as a service channel for certain HHSC services. The telephone is only approved for these services when used to directly serve an established client who has had an intake completed within the past 12 months or has continued to receive services over the past 12 months. A telephone service does not include calls made on behalf of the client, appointment reminder calls, or hotline calls where the caller is not a client receiving services. Several specific examples of allowable and unallowable telephone services are listed in Appendix A.

HHSC will allow the use of a telephone to provide services under the following circumstances:

- **Legal Assistance:** This service can be reported to HHSC as a telephone service when providing a client with the following by phone: legal assistance including; identifying individual legal needs, legal rights and options, and providing support and accompaniment (including court accompaniments) in their pursuit of those options.
- **Information and Referral-Community Services:** This service can be reported to HHSC as a telephone service when providing a client with the following by phone: information and referrals about existing community resources, including but not limited to the following: medical care, legal assistance providers, protective and regulatory services, resource assistance, public assistance, counseling and treatment services, children's services, and any other appropriate family violence services.
- **Information and Referral-Employment:** This service should be reported to HHSC as a telephone service when providing a client with the following by phone: information and referrals about

employment training and employment opportunities, either directly or through formal arrangements with other agencies.

- **Family Violence Option:** This service should be reported to HHSC as a telephone service when providing a client with the following by phone: a Family Violence Option (Good Cause) form or a Family Violence Exemption. Please refer to the Family Violence Option policy guidance for more information on how to report clients who only receive this service.
- **Intervention Services:** This service should be reported to HHSC as a telephone service when providing a client (including children) with the following by phone: intervention services such as; safety planning, understanding and support, advocacy, case management, and dating violence services.
- **Counseling:** This service should be reported to HHSC as a telephone service when providing a client with the following by phone: the use of therapeutic methods of treatment and/or one-on-one support delivered by a trained staff or volunteer. Counseling over the phone with children can now be counted.
- **Orientation:** This service should be reported one-time per client when providing introductions to the organization by a trained staff. Accepted funding sources for this service include: HHSC Shelter, HHSC Shelter A, HHSC Non-Residential, HHSC Satellite, and HHSC SNRP. In rare instances, an orientation service may be provided over the phone, if the survivor identifies at least one of the barriers outlined below:
 - survivor self-identified disability;
 - survivor discloses health or safety concerns in receiving services in-person;
 - significant geographic distance to the closest access point to services;
 - other significant transportation challenges as identified by the survivor;
 - survivor does not have access to technology that would allow for a face-to-face technology service;
 - for other challenges identified by the survivor, please contact your HHSC contract manager.

Providing an orientation/intake service over the phone should be considered a last resort option. When a survivor is unable or unwilling to travel to the center to conduct an intake, other options should be considered such as:

- meeting at a safe location identified by the survivor;
- utilizing Skype, Facetime or other face-to-face technology tools;
- providing the survivor with transportation to the center; or
- other innovative mobile advocacy efforts as approved by your HHSC Contract Manager.

When employing any of these methods for intake, including telephone, the center must have policies for providing all the required intake information and documentation as required by Texas Administrative Code, Chapter 379, including a process for obtaining required signatures on intake documents.

- **Emergency Orientation:** This service should be reported when providing a nonresidential client an Emergency Orientation during a one-time critical assistance service, such as at the hospital or

court. Staff person must complete and retain an HHSC Emergency Nonresidential Proof of Orientation Form. Refer to the Emergency Orientation Policy Guidance for more information.

- **Educational Arrangement for Children:** This service should be reported to HHSC as a telephone service when providing a client with the following by phone: services that result in a resident or nonresident child being in compliance with the compulsory attendance requirements found in the Education Code. Examples include providing clothing or supplies for school, conferring with schoolteachers or administrators.
- **Child Services:** This service should be reported when providing services to a child resident that includes activities such as; structured arts and crafts activities and/or non-counseling, information activities provided by a trained staff person or a volunteer. This service also may include child care for nonresidential clients when the child's parent is receiving a family violence service or when child care services are provided for current family violence clients by the center's licensed or permitted DFPS child care facility. If the center contracts with a non-HHSC approved subcontractor, then the service can only be counted as a one-time referral. If transportation to the service is provided, each round trip can count as a Transportation service. If a parent resident is accompanying a child for any of the identified child services, record the service as a crisis intervention service for the parent.
- **Child Recreation or Social Group:** This service should be reported when providing a child client with group social activities such as; daycare programming, after-school programming, arts and crafts, special outings or other non-counseling information group activities.
- **Medical Care:** This service should be reported when providing a client with assistance in responding to any urgent medical situations for the adult/child residents, nonresidents or program participants accessing shelter center services. This also can include basic first aid, arranging for non-emergency professional medical services for adult/child residents, nonresidents, or program participants, or obtaining prescription or nonprescription medication for the victim's self-administration.
- **Medical Accompaniment:** This service should be reported when accompanying a domestic violence victim to, or meeting a victim at a hospital, clinic, or medical office.
- **Support Groups:** This service should be reported when providing a client with support groups related to family violence led by trained staff, survivors, or volunteers covering educational material or issues brought up by the group. The shelter center's adult support groups may include recreational and/or social activities.
- **Transportation:** This service should be reported when providing a client with transportation and/or transportation assistance such as; arranging transportation to and from emergency medical facilities for shelter residents and nonresidents and/or from a safe place to the shelter for persons being considered for acceptance as residents of the shelter and who are located within the shelter's service area. This also includes non-emergency transportation for the adult/child resident, nonresident or program participant to a single destination or to a series of

destinations in a single trip. Transportation can include staff providing or arranging clients' transportation to court, place of employment and other appointments. Transportation service also includes the provisioning of bus passes or taxi fares. Rideshare companies like Uber and Lyft may also be utilized for a transportation service. However, please make sure your agency is aware of the safety and background check policies the company has since some do not have as strict requirements as taxi companies.

Appendix A has several examples of allowable and unallowable telephone services.

APPENDIX A

The following list illustrates examples of allowable and unallowable telephone services. If you have questions about specific examples, please contact your HHSC family violence program contract manager.

Legal Assistance

Allowable Example: A case manager/advocate or legal advocate calls an established client to provide Crime Victims Compensation information or assistance with the application.

Unallowable Examples:

- A legal advocate calls a client to remind them of an upcoming court date.
- An established client with a child support case calls the family violence center and an attorney provides legal advice. **This is unallowable because providing legal advice/representation is not an approved service under HHSC Family Violence Program shelter, nonresidential, or special nonresidential project contracts. However, it is allowable if your organization has a Legal Services EIF contract with HHSC.**

Information and Referral-Community Services

Allowable Example: A former shelter client calls her case manager/advocate to request information about low-cost child care facilities in the community.

Unallowable Example: Someone calls the hotline to request information about a community resource. It is unknown if this person was previously a client receiving family violence services from the center. **This is unallowable as a service but could be counted as a type of Hotline Call.**

Information and Referral-Employment

Allowable Example: A case manager/advocate calls a client to give them the address and phone number for the local workforce development office.

Unallowable Example: A case manager/advocate calls a workforce development office on behalf of a client and the client is not present during the call.

Intervention Services

Allowable Examples:

- A non-residential client calls her case manager to discuss safety planning.

- A former residential client, who received services within the current fiscal year, but is no longer residing at the shelter calls her prior case manager to discuss safety planning with her and her teenage daughter.

Unallowable Examples:

- A hotline caller who has never received services calls to request resources and help safety planning.
- A case manager calls a client to let the client know that resources are ready for pick-up.

Counseling Services

Allowable Example: An adult client who received in-person counseling services gets a job and can no longer come in for services. The client makes arrangements to receive counseling services over-the-phone.

Unallowable Examples:

- A counselor provides counseling services over the phone to a client who has not conducted an intake for the current fiscal year and is not a continuing client from the previous fiscal year.
- A counselor calls the survivor to remind them of an upcoming appointment.

Orientation Services

Allowable Example: An adult with a disability wants counseling services but is physically unable to come into the center for services. The case manager conducts an intake over the phone for this potential client.

Unallowable Example: A hotline caller wants to receive intervention services over the phone but is unwilling to come into the center for an orientation, despite having access to transportation. This can be reported as an “Emergency Orientation” service over the telephone.

Emergency Orientation

Allowable Example: During a community education session, an attendee requests follow-up services. An advocate later calls the person to give them an emergency orientation and provide an intervention service.

Unallowable Example: A client who wants to receive ongoing remote counseling services is provided an Emergency Orientation service over the phone. The person should be provided a regular “Orientation” service over the telephone.

Educational Arrangement for Children

Allowable Example: Case manager has a phone call with a parent about McKinney Vento requirements and considerations.

Unallowable Example: Case manager calls a parent to let them know their child's school clothes and supplies are available to be picked-up.

Child Services

Allowable Example: Due to the need for social distancing, a child residing in a hotel does a structured activity with an advocate over the phone while the parent attends a virtual job training.

Unallowable Example: Case manager calls a client to see if their child will be in child care the following day.

Child Recreation or Social Group

Allowable Example: Family violence center coordinates a virtual cooking class for current youth clients and several participants call-in to the activity instead of joining through face-to-face technology.

Unallowable Example: Case manager calls a youth participant to see if they are joining for an upcoming trip or event.

Medical Care

Allowable Example: An advocate has a phone conversation with a survivor to discuss her concerns and think through questions for her to ask her doctor at their next appointment.

Unallowable Example: An advocate talks to a client on the phone and reminds her of an upcoming medical appointment.

Medical Accompaniment

Allowable Example: A returning client calls her advocate during a medical appointment and he/she provides support and/or advocacy over the phone.

Unallowable Example: An advocate calls a new client to schedule an orientation/intake while the person is in the hospital.

Support Groups

Allowable Example: A group of clients who have previously received services now meet virtually and some of the clients call-in to the group instead of joining through face-to-face technology.

Unallowable Example: A family violence center does not have space to host a support group in-person, and so it only offers Support Groups remotely.

Transportation

Allowable Example: Case manager calls a client to arrange transportation for an upcoming court hearing.

Unallowable Example: Case manager calls the local taxi company to check on the status of a pick-up request.

Appendix III

Counting HHSC Community Education and Awareness Presentations

August 21, 2020

To: Health and Human Services Commission (HHSC) Family Violence Program Contractors
From: HHSC Family Violence Program (FVP)
Subject: Counting HHSC Community Education and Awareness Presentations

Purpose

The purpose of this letter is to provide guidance regarding allowable HHSC Community Education and Community Awareness sessions and attendees.

Policy

In accordance with the HHSC FVNet Data Element Guide, HHSC FVP contractors are currently required to collect and report data on four types of Education Presentations sessions. HHSC understands there is a growing need to conduct education and awareness presentations virtually. In response to this shift, HHSC is providing additional guidance on reporting education presentation data. For specific examples of allowable and unallowable presentations and how to count attendees, refer to Appendix A.

HHSC will allow for reporting sessions under the following circumstances:

- **Community Education-** This education type should be reported to HHSC when providing an education session that is provided to a targeted population such as youth, adults, college-aged youth, etc. This would include all *primary prevention* presentations, including those for SNRP and/or EIF, or any presentation that occurs over a course of sessions that build upon one another. Sessions may be provided in-person or virtually but should not include emails or written social media posts. Recorded or live-streamed videos where unduplicated views can be determined may be counted with a total audience count. Programs need to establish a policy to ensure unique counts are reported each month the virtual content is available.
- **Community Awareness-** This education type should be reported to HHSC when providing a community awareness information to a large, broad population. This would include activities such as health fairs, large events where the attendees cannot be counted. Social media posts with primary prevention content can also be counted as community awareness. When reporting

the total adult and youth attendance, you may estimate the total number of persons you came into contact during this event, or you can enter “1” if you are unable to make an estimate. Sessions may be provided in-person or virtually but should not include emails or written social media posts that only contain the organization’s contact information. Targeted media outreach and video trainings may be included as community awareness. Recorded or live-streamed videos where unduplicated views can be determined may be reported with a total audience count. Programs need to establish a policy to ensure unique counts are reported each month the virtual content is available.

- **Professional Training-** This education type should be reported to HHSC when providing a presentation to a group of professionals. This could include school personnel, government employees, counselors, civic groups, religious groups or any other professional group. These trainings are typically a one-time event and are not held over a series of sessions. Sessions may be provided in-person or virtually.
- **Volunteer Training-** This education type should be reported to HHSC when providing volunteer training to groups who will be supporting your family violence program. Sessions may be provided in-person or virtually.

Presentations must cover one or more of the following family violence related topics:

- Domestic Violence Awareness Month
- Dating Violence
- Issues related to an underserved population
- General Family Violence Information
- Financial Literacy
- Bystanders Intervention
- Cultural Competence
- Dynamics of Abuse
- Gender Roles
- Healthy Relationships
- Intersection of Mental Health and Family Violence
- Family Violence and the Legal System
- Community Specific Request-Family Violence
- Family Violence Awareness
- Other
- Domestic Violence Overview, Dynamics and Services
- Children
- Confidentiality
- Coordinated Community Response
- Immigration
- Civil/Criminal Justice
- Technology
- Protective Orders
- Primary Prevention of Violence
- Safety Planning
- Victim Rights

Appendix A has several examples of allowable and unallowable Community Education and Awareness presentations.

APPENDIX A

The following list illustrates examples of allowable and unallowable Community Education and Awareness presentations. If you have questions about specific examples, please contact your HHSC Family Violence Program contract manager.

Community Education

Allowable Examples:

- In-person presentations on an allowable topic
- Live, virtual presentations via webinar platforms like Zoom, WebEx, etc. Attendees should be counted the same as an in-person event, via participant or registrant list.
- Live presentation or training posted on social media platforms on an allowable topic when a unique number of views/downloads can be counted. The program would need to establish a policy to ensure unique counts are reported each month the presentation is available.
- Pre-recorded presentations on an allowable topic when a unique number of views/downloads can be counted. The program would need to establish a policy to ensure unique counts are reported each month the presentation is available.

Unallowable Examples:

- Short content videos (under one minute) posted to social media (includes TikTok, Twitter, Instagram, etc.)
- Social media posts that do not include an educational video
- Literature or resources shared on social media

Community Awareness

Allowable Examples:

- In-person tabling at a community event. Tables visitors can be counted as attendee numbers or can be reported with a “1” if you are unable to make an estimate.
- Social media, television, or radio ads that share community awareness information. This should be counted with a “1” reported for attendees.
- A program posts a video on its website to bring awareness to their family violence services. Attendees should be reported with a “1”, or with the actual numbers of views within the reporting month. The program would need to establish a policy to ensure unique counts are reported each month the video is available.

Unallowable Examples:

- Social media posts that do not offer awareness information other than the program’s contact information.
- Information or resources emailed to a program’s distribution list or in advance of a presentation (unallowable for *Community Education* as well).