Updated 4/17/2020



Osnium User Guide to Data Entry for Health and Human Services Commission Family Violence Program (HHSC FVP) Reporting

This document is intended as an introductory guide for Osnium users who are reporting to HHSC through Osnium. This guide will help you to properly enter data so that your data will pull correctly and your reporting to HHSC will be accurate. *This is not exhaustive to all data you may need to enter into the Osnium system. It is specifically reviewing data needed for the HHSC export and HHSC FVNet reporting.* To review HHSC data elements and valid responses accepted by FVNet, please review the FVNET Data Element Guide. Should there be a discrepancy between this guide and the HHSC Data Element Guide at any time, please differ to the most recent version that HHSC has sent. Do not hesitate to contact us at <u>datatx@tcfv.org</u> with any questions.

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CLIENT RECORD

For new clients, create a new client in Osnium and enter the demographic information on the main client screen. The following highlighted sections will be the most important to thoroughly complete as it can affect your reporting capabilities if they are not entered.

- Client ID is automatically created by Osnium.
- First Name
- Last Name
- Date of Birth
- Age Status check boxes, if client does not disclose their age.
- County
- Race
- Ethnicity
- Gender
- Veteran Status
- Primary Language Spoken
- Needing Language Services
- TANF/SSBG Eligible
- TANF/SSBG Date

Quick Tips

- Make sure that all clients that are being reported to HHSC have the County field and Primary Language Spoken field entered.
- If age is unknown or refused, the Age Status check box is required to fill out.
- Client Language and County pull into the HHSC export as an aggregate number, and only when they are a *new* client in that reporting period.
- TANF is required for any adult client receiving HHSC services. TANF form fields should not be left blank for any funding type except for SNRP or EIF and should be

Primary Details		 Demographics 		 Identifiers
Client ID: 0	× -	Gender:	x *	ID/ITS Number/Alice ID:
Intake Date:	-	Races	x *	Client File Number:
First Name:		Other Race:		Contact Information
Middle Name:		Ethnicity:	x *	- · · · · · · · · · · · · · · · · · · ·
Last Name:		Primary Language Spoken: English	× *	County of Residence: Be
ernate Names:		Primary Language Other:		Address:
Pseudonym:		Highest Education Completed:	x *	Phone Numbers:
Date Of Birth:		Current Victimization:	x -	Geographic Location:
		Veteran Status:	× -	Email Address:
DOB Unknown DOB Kerused		TANF/SSBG Eligible:	x *	Email Restrictions:
stimated Date of Birth	0	TANE/SSBG Date:	•	Advocate/Case Manager:
Age.	•	Citizated Earlich Destriction (LED)		Counselor/Therapist:

CLIENTS VS. HOUSEHOLD MEMBERS

As we all know, *No funder requires one client to be labeled a "primary" client.* Any person that receives services at your agency is a client, no matter if they are directly or indirectly impacted by the violence that brought the family in to receive services. However, due to limitations of the database, one person must be labeled the "Client" and the other family members to be labeled as "Household Members" to connect the client files in the system. <u>Both record types can collect the same type of information.</u> We suggest programs put the parent or head of household as the "client" record to simplify data collection. If you have questions, please reach out to <u>datatx@tcfv.org</u>.

HOUSEHOLD MEMBER RECORD

Enter the same information for the Household Members as needed for HHSC reporting.

- Client ID is automatically created by Osnium.
- First Name
- Last Name
- Date of Birth
- Age Status check boxes, if client does not disclose their age.
- County
- Race
- Ethnicity
- Gender

Primary Details

- Veteran Status
- Primary Language Spoken
- Needing Language Services
- TANF/SSBG Eligible
- TANF/SSBG Date

4. Warning	"TANF/SSBG Date" is "TANF/SSBG Eligible" Please confirm that T	empty, but no is empty, but ANF information	ot required. not required. on is correct or	-		
	for clients over 18 be	fore saving		10	tr	needeo
	↑					
^_ 4 Demographic	5			×		1
	Gender:			×	-	0.

Client ID:	0	х -		Gender:	× •
Intake Date:		-		Race:	x =
First Name:				Other Race:	
Middle Name:				Ethnicity:	x *
Last Name:				Primary Language Spoken:	x -
Alternate Names:				Primary Language Other:	
Pseudonym:			ł	Highest Education Completed:	X *
Main Client:	Smith, Benny	× *		Current Victimization:	x -
Relationship To Main Client:		× -		Veteran Status:	x -
Date Of Birth:		-		TANF/SSBG Eligible:	x *
	DOR Defined			TANF/SSBG Date:	•
DOB Unknown Adult	DOB Kerused			Limited English Proficient (LEP)	Needing Language Services
Estimated Date of Birth	Age:	0		Discuss Asylee, Immigration, Refugee Information Experiencing Homelessness	 Self-Identified as LGBTQ Incarcerated

- To connect the Household Member to the Client, make sure to fill out the extra fields included in the primary details section (highlighted above).
- If a Household Member (HM) is a child, TANF fields can be left blank, and their TANF status will be reported as the same as the associated adult client record. If the HM is over the age of 18, you will get a warning asking if the blank TANF fields are correct. If they do not require their own TANF because they are still within the household of the Client record, you can leave it blank and it will continue to associate that HM with the adult's TANF status. If they need their own TANF form, fill in the blank fields before moving on.
- Only enter a victimization record for a Household Member if they are the primary victim of the abuse. If they are not the direct victim of abuse, their victimization record can be left blank.

VICTIMIZATIONS

Enter at least one victimization record for each client under the Victimization tab. A victimization record will only pull into the report if it has been entered during the grant year or six (6) months prior to the grant year. The following highlighted sections will be the most important to thoroughly complete.

- Victimization Date
- Offender's Relationship to Survivor
- County of Incident
- Victimization Type
- Domestic Violence Abuse Type: These are specific check boxes created to pull needed information into the HHSC export.
- Youth IPV Status

- HHSC only requires you to report victimization for clients who directly experienced the victimization, sometimes called the primary victim.
- Report the most recent incident of victimization only. If multiple victimization types occurred recently, multiple can be reported.
- HHSC eligible clients must have Domestic Violence or Dual Domestic Violence/Sexual Assault chosen as victimization type.
- Youth IPV status is defined as a youth under the age of 18 who is a victim of IPV.

- ^ - 🛆 Victimization Information —			A 🛕 HHSC Abuse Types		_ ^ _ 1 Offender Information
Date Reported: Date Of Victimization:	• •		Physical Emotional/Psychological/Verbal Stalking		Primary Offender: Survivor: Offender Unknown
Age At The Time Of Victimization: County of Incident:	× ×	1	Sexual	I	
Victimization Type: Youth IPV Status: Assault Location:	x • x • x •				
Other Victimization Types Add Remove Second Punding Name	Victimizati	on N	lary Victims		

SERVICES

Enter each of the client's HHSC services on the Services tab within the Client page. The following highlighted sections will be the most important to thoroughly complete.

- Core Service
- HHSC Type: This is your HHSC Contract type.
- Count: This is the number of service contacts the client received within the day for the same Core Service.
- Date
- County
- How Provided: this is called "Service Channel" within your HHSC Data Element Guide.
- Residential Checkbox: Choose this when the service is provided to a client residing in an HHSC-funded Shelter, Shelter A or Satellite location.



- Make sure that you only enter HHSC core services for HHSC eligible clients. Review victimization types allowable in the FVNet Data Element Guide, or reach out to <u>datatx@tcfv.org</u> with questions.
- Not all HHSC services are allowable by telephone. Review HHSC Telephone Policy Guidance for more information.
- HHSC wants to know about all eligible services provided to eligible clients, regardless of funding source. If you have questions about this, please reach out to your HHSC contract manager, or email familyviolence2@hhsc.state.tx.us.
- Make sure a client has an HHSC Enter Shelter service the day they enter shelter, and an HHSC Exit Shelter service on the date they exit shelter. The HHSC export will look back for an HHSC Enter Shelter or HHSC Exit Shelter Service through the grant year plus six (6) months. If a client has been in shelter for an extended period of time, you may need to enter a new HHSC Enter Shelter service for that client to pull into the report.

Service		
Staff Member:		📃 Residential
Core Service:	Funding Stream:	📋 New 🖷 Copy 🗙 📑
HHSC Type: HH	SC Shelter Count: 0 0	Generic Person *
Other Service:		> Sue, Betty
County:	Harris 🛛 🔍 🗸	
Date:	12/31/2019	
Start Time:	1:00 PM	
Duration In Hou	rs: 0.25 🕥 Duration in Minutes: 15 🕥	
Location:		
Other Location:		
How Provided:	Xv	

HOTLINE CALLS

Open your Hotline page on the navigation pane to enter your hotline calls. The highlighted sections will be the most important to thoroughly complete.

Call Type: The following call types are the only types of calls to be reported to HHSC:

- Batterer/Offender Referral
- Hotline Calls From or About Family Violence
- Other Family Violence Related Call
- Hotline Call Seeking Shelter- Denied Due to Lack of Space
- Hotline Call Seeking Shelter- Referrals to Another Family Violence Shelter
- Hotline Call Seeking Shelter- Referrals to Temporary Shelter Due to Lack of Space
- Hotline Call Seeking Shelter- Denied for Other Reasons

Number of Calls: Use this only if entering calls in bulk. If you leave this blank, the entry will be counted as one call.

^ - 🤳 Call Details ———				Call Reasons
Call Start Date:	10/19/2021	• 6:01 PM	*	Add 🕼 Remove
Call Type:			x •	Name
County:			x +	
ZIP Code:	78737			
^ 🤰 Individual Calls				
Call End Date:	10/19/2021	- i 6:01 PM	*	
Caller Name (if available):				
Phone Number:				I
Associated Client:			x *	
Number of Children:			0 +	
Referral Source:			× *	
Initial Contact:			x *	
Created By:	Breall Baccus		× *	
	Accepted to Shelter			
- 📮 Bulk Call Entry				
Number of Calls:			0 -	

- If you choose any other options in the Call Type list beside the seven listed above, it will not pull into the HHSC export. Call Reasons also do not report to HHSC, but can be used for your internal agency use.
- The hotline screen also has an "Accepted to Shelter" checkbox. This also is *not* pulled into the HHSC export, but may be helpful to use for internal agency use.
- It is up to your program to decide if you'd like to enter hotline calls individually or in bulk at the end of the month. Whatever you choose, make sure all staff are consistent in their data entry method.
- "Denied Due to Lack of Space" calls are defined by HHSC as: 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 a temporary shelter. This includes referrals to alternate shelters if you are not aware that shelter was secured. These survivors are truly denied any shelter service.

EDUCATION PRESENTATIONS

Open your Trainings/Presentations/Community Education page on the navigation pane and enter your education presentations entries during the reporting timeframe. The following highlighted sections will be the most important to thoroughly complete.

- Education Type: Be sure to add only Education types with that start with "HHSC". •
- HHSC Type: This is your HHSC Contract type.
- Number of Sessions

Trainings/Presentations/Community Education	
Education Type:	
Type of Informational Product:	
OVAG/SAPCS General Training Subject:	
HHSC Type;	×v
Start On:	1/3/2020
Duration:	30 📀
Start Time:	11:00 AM
End On:	1/3/2020
End Time:	11:30 AM
Number of Sessions:	0 😒

Topics for Meetings, Presentations, or Trainings: This is labeled "Topics Covered" in your HHSC export. Choose only topics that start with "HHSC".



Location Notes	
Contact Name:	
Agency:	
Phone:	
Address:	
County:	Hays 🛛 💌

Audience Types: Add new audience type of Adult- HHSC, Youth- HHSC, or both if needed. Also enter a total • unduplicated attendee count for all sessions being counted in this one entry.

	Audience Types		
	New 🗙 📑 💿 🙆 Filter A	II Items 💌 📑 Export to 🝷	>
	Audience Type	Attendee Count	
4.4	Adult - HHSC		2
	Youth - HHSC		5

SURVEYS

Open your Trainings/Presentations/Community Education page on the navigation tab to enter survey information during your reporting timeframe. Create a new Trainings/Presentation and complete the required survey information. The following highlighted sections will be the most important to thoroughly complete.

Start On

- Survey Type: There are four types of surveys collected for HHSC:
 - Shelter Survey
 - Support Services and Advocacy Survey
 - Counseling Survey
 - Support Group Survey
- Total Number of Completed Surveys: This is the total number of Resource Surveys received within the reporting month.
- Number of Surveys with Completed Resource
 Outcome
- Number of Yes Responses to Resource Outcome
- Number of Surveys with Completed Safety Outcome
- Number of Yes Responses to Safety Outcome

- These surveys collected for HHSC are required for FVPSA-funded programs to measure the extent to which survivors enhance their strategies for safety and knowledge of community resources.
- When entering surveys, leave the Education Type field blank.
- For more information on the survey types, please see the HHSC FVNet Data Element Guide on our website.

I rainings/Presentations/Community Education	
Education Type:	
Type of Informational Product:	
OVAG/SAPCS General Training Subject:	×
HHSC Type:	×v
Start On:	2/20/2020
Duration:	30 💸
Start Time:	1:30 PM
End On:	2/20/2020
End Time:	2:00 PM
Number of Sessions:	0 🗘
OVAG/SAPCS State:	
OVAG/SAPCS State: Outcome Type	: Number of Instruments Given: 0 0
OVAG/SAPCS State: Outcome Type Number Completed	e: Number of Instruments Given: 0 0
OVAG/SAPCS State: Outcome Type Number Completed Number Reporting Desired Outcome	Number of Instruments Given: 0 1: 0 2: 0
OVAG/SAPCS State: Outcome Type Number Completed Number Reporting Desired Outcome Surveys	Number of Instruments Given: 0 i: 0 0
OVAG/SAPCS State: Outcome Type Number Completed Number Reporting Desired Outcome Surveys Surveys	Number of Instruments Given: 0 1: 0 0
OVAG/SAPCS State: Outcome Type Number Completed Number Reporting Desired Outcome Surveys Surveys Survey Type Number of Surveys with Completed Resource Outcome	Image: Image
OVAG/SAPCS State: Outcome Type Number Completed Number Reporting Desired Outcome Surveys Surveys Surveys Number of Surveys with Completed Resource Outcome Number of Yes Responses to Resource Outcome	Image:
OVAG/SAPCS State: Outcome Type Number Completed Number Reporting Desired Outcome Surveys Surveys Surveys Number of Surveys with Completed Resource Outcome Number of Yes Responses to Resource Outcome Number of Surveys with Completed Safety Outcome	e: Number of Instruments Given: 0 😳 d: 0 😳 e: 0 😳 i 0 😳 i 0 😳 i 0 😳 i 0 😳 i 0 😳 i 0 😳

VOLUNTEER ENTRIES

Open your Volunteer Time page from the navigation pane to enter the volunteer entries during the reporting timeframe. The following highlighted sections will be the most important to thoroughly complete.

- If you are entering Volunteer Time in bulk:
 - HHSC Attributable Checkbox: This makes sure this entry is pulled into the HHSC export.
 - Start On: Make sure the date is within the reporting time frame.
 - Total Number of Hours
 - Number of Volunteers

🔯 Volunteer Time	Volunteer Time 🛛			
🔁 Volunteer Time				
Volunteer				
Type:				
County:	×v			
📃 Direct 📃 H	HSC Attributable			
Start On: 1	/3/2020			
Bulk Volunteer Entry				
Total Number of Hours:	0.00 🗘			
Group Name:				
Number of Volunteers:	0 📦			
Individual Volunteer				
Start Time:	12:00 PM			
Duration:	30 🗘			
End On:	1/3/2020			
End Time:	12:30 PM			
Mileage:	0 📦			

- If you are entering Volunteer Time individually:
 - HHSC Attributable Checkbox: This makes sure this entry is pulled into the HHSC export.
 - o Start On
 - Number of Volunteers: Must enter "1"
 - o Individual Volunteer section
 - o Number of Volunteers



• Volunteer information pulls into the Aggregate Data tab on the HHSC export.

🔁 Volunteer Time	Volunteer Time 🔛
🖗 Volunteel	r Time
Volunteer	
Type:	
County:	
📃 Direct	HHSC Attributable
Start On: 1	/3/2020
Bulk Volunteer Entry	
Total Number of Hours:	0.00 📦
Group Name:	
Number of Volunteers:	0 📦
Individual Volunteer	
Start Time:	12:00 PM
Duration:	30 🕥
End On:	1/3/2020
End Time:	12:30 PM
Mileage:	0 📚

To run the HHSC export, you must have the "administrator" or "almost administrator" role in Osnium. Go to Tools > Run HHSC Export.

Home	View	Tools						
	1	Ø	٩					
Show Log File	Show Log App Info File		Show Options	Save Customization Summary	Maintenance *	Documentation	Run External Application	Edit Mod
				ITS Export				
n	Reporting Dashboard		👌 Worksheet 🛛 🔡 StartupVie			HHSC Export		

This will pull up the most updated HHSC export version. Fill in the parameters for the reporting month, and the start date of the fiscal year. When you click Start Export, you will see all 9 CSV files populate as tabs. Click "Save Results to Files" to save files that can then be uploaded to FVNet.

o C	HHSC Expo	ort									-	- 🗆	\times
4	Α	В	С	D	E	F	G		н	I		J	K
1	Client_Id	Age	Age_Status	Ethnicity	Veteran_Status	Gender	TANF_Date_Cor	npleted	TANF_Status	Total_Shelte	r_Days		*
2	100134	16		NHPI	U	F	11/07/2019		R	4			
3	100135	29		R	U	R	12/18/2019		E	29			
1	100137	33		BLK	U	F	01/13/2020		L	0			
5	100120	38		HISP	U	F	04/13/2016		E	29			
5	100053	35		ASN	N	TFTM	02/01/2020		E	29			
7	100129	12		MRAC	U	F	09/26/2019		L	0			
8	100130	30		ASN	U	F	07/26/2019		L	29			
)	100133	2		NHPI	U	М	11/07/2019		R	4			
0	100140	9		BLK	U	М	01/13/2020		L	0			
1	100062	34		WHT	Υ	F	04/03/2016		E	29			
2	100138	4		MRAC	U	M	10/15/2019		L	0			
3	100128	34		ASN	U	R	09/26/2019		L	0			
4	100132	34		NHPI	U	F	10/15/2019		L	27			
5	100063	47		HISP	R	F	12/27/2019		E	0			
14	4 F FF	CLI	ENT VICTIM	IZATION	CLIENT_SERVICES	CLIENT_SE	RVED_BY_COUNTY	∢ ⊂	:	1			- F
F	iscal year 09	9/01/20)19 🗐 🔻	Company Sł	nort Name Test			Sta	rt Export	Оре	n Log Folde	er	
	Start 02	tart 02/01/2020 🗐 🔻					Save Res		sults to Files Show/Hide Connection		n Details		
	End 02	2/29/20)20 💷 🔻							Show	New Client	IDs	
											.	_	
		_									100129 100053 100137 100133		

Quick Tips

- The Company Short Name is designated by HHSC. If you do not know your short name, please reach out to your HHSC contract manager or email <u>familyviolence2@hhsc.state.tx.us</u>.
- Please review your data for accuracy before downloading the export.
- One common error message when uploading to FVNet is (CSC3) and (CSL3), which is a difference in New Clients between the HHSC export and FVNet. The typical reason this occurs is because a service was added in Osnium for a past month after that month was uploaded and closed out in FVNet. You can use the button at the bottom of the HHSC export called "New Client IDs" to easily pull a list to compare to the Client IDs listed in the FVNet error report.

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