	Instruction Update /2020
Steps for entering activity/service codes in RIFI Flex Fund - example (A) shown below	<ul> <li>Enter required fields (FCCP, Agency, etc.)</li> <li>Select Location/FCCP Funding as: Within FCCP</li> <li>Select Place of Service as: your FCCP agency</li> <li>Select Payer as: Flex Funds</li> <li>Under the activity heading, choose a service code that best describes what the Flex Funds were spent on by clicking the ellipsis, and selecting the service code</li> <li>Enter unit cost (the amount spent)</li> <li>Check the box if emergency expenditure</li> <li>General/Flex Fund Note: briefly elaborate on the service code selected (ie. housing: 1 week at hotel name, apartment security deposit to realtor name, etc.)</li> <li>Scroll to top of the page and enter Start/End date as: receipt of purchase date, 1 minute of time allotment and click ADD</li> <li>Lastly, change status to "complete", save</li> </ul>
In Kind Donation - example (B) shown below	<ul> <li>and close</li> <li>Enter required fields (FCCP, Agency, etc.)</li> <li>Select Location/FCCP Funding as: Within FCCP</li> <li>Select Place of Service as: your FCCP agency</li> <li>Select Payer as: In Kind Donation</li> <li>Under the activity heading, choose a service code that best describes what the In Kind Donation was given to the family by clicking the ellipsis, and selecting the service code</li> <li>Enter # of units (typically 1)</li> <li>Enter unit cost (a guesstimate of donation value)</li> <li>Check the box if emergency expenditure</li> <li>General/Flex Fund Note: briefly elaborate on the service code selected (ie. supplies: school, baby, cleaning, etc.)</li> <li>Scroll to top of the page and enter Start/End date as: date donation was given to the family</li> <li>Lastly, change status to "complete", save and close</li> </ul>

Reoccurring service when family is referred to a service per their plan (FAAP and/or FSP) - <i>example (C &amp; D) shown below</i>	<ul> <li>Enter required fields (FCCP, Agency, etc.)</li> <li>Leave status in "pending"</li> <li>Select Location/FCCP Funding as: Referred to a Non FCCP Agency</li> <li>Select Place of Service as: Non FCCP Agency</li> <li>Select Payer as: Family's Insurance (i.e. Medicaid, Private, No Insurance, etc.)</li> <li>Under the activity heading, choose a service code that best describes what service was delivered per the FCCP Plan by clicking the ellipsis, and selecting the service code</li> <li>Scroll to top of the page and enter Start/End date as: the date the family reports they have begun a service they were referred out to per the FCCP Plan, indicate 1 minute of time allotment and click ADD</li> <li>Save and close as a "pending service"</li> <li>When the family Reports the Service has Ended: UPDATE the "pending" service previously entered by:</li> <li>Clicking on the row of the service activity previously entered and saved as "pending"</li> <li>Enter Start/End date of service ending, click ADD and change status to "complete", save and close</li> </ul>
Face to Face with Primary Child Face to Face with Parent/Caregiver Face to Face with Primary Child & Parent/Caregiver- <i>example (E) shown below</i>	<ul> <li>Enter required fields (FCCP, Agency, etc.)</li> <li>Select Location/FCCP Funding as: Within the FCCP</li> <li>Select Place of Service as: your own agency</li> <li>Select Payer as: Service Contract</li> <li>Under the activity heading, choose a service code that best describes who you had a Face to Face visit with by clicking the ellipsis, and selecting the service code (there should be a Progress Note DAP narrative that supports engagement)</li> <li>Scroll to top of the page and enter Start/End date as: the date you had the Face to Face visit, indicate the time spent at the Face to Face visit (ie 15 min. increments) and click ADD</li> <li>Mark the status of the activity "complete", save and close</li> </ul>

# Entering a FLEX FUND (example A)

Mar mon	lsY.						Activ
land						Last Updated by scha	ise at 2/1 4:2-
Activity Times							
	rt Time	End Date *	End Time	Total Minutes			
2/12/2020 12	♥ 00 ♥ AM ♥	2/12/2020	12 V 01 V AM V		Delete		
2/12/2020 🛄 12	✓ 00 ✓ AM ✓	2/12/2020	12 V 00 V AM V		Add		
Activity Details							
FCCP * *	EB		Location/FCCP Funding	Within FCCP	$\checkmark$		
Agency * •	Child and Fam	ily Servic Deta	Is Place of Service *	Child and Family	Services of Newport County 🗸		
Worker * *	Chase, Sheila		✓ Payer *	Flex Funds	✓ Details		
Status *	Complete 🗸						
Activity Service							
Service *	SocialServ10						
	Housing						
Unit Type	\$						
Units *	1.00						
Unit Cost	\$500.00						
Total Cost	\$500.00						
Emergency Expenditure (FLEX FUND ACTIVITIES ONLY)	√						
Status of Record Completie (FLEX FUND ACTIVITIES ONLY)	on 2/12/2020	8					
General/Flex Fund Notes	One week at Ro	adway Inn	~				

# Entering an IN KIND DONATION (example B)

s://hss.ha	irmonyis.net/RIFISTest/Pages/Harm	nony.aspx?ChapterID=164&ViewType=	SubPageView&PageID=29202&Chap	terEntityID=71024&EntityID=51	396&CallingChapter=Consumers&Call	lingPage=Activities+List&ParentEntityID=71024&_popup_=1	
V	/ har mone	У.				/	Activitie
Garland	4					Last Updated by scha	se at 2/19/202 4:25:19 P
vities	Activity Times						
	Start Date * Start	Time End Date *	End Time	Total Minutes			
	2/12/2020	00 V AM V 2/12/2020	12 V 01 V AM V		Delete		
	2/12/2020 12 🗸	00 V AM V 2/12/2020	12 V 00 V AM V		Add		
	Activity Details						
	FCCP * *	EB	Location/FCCP Funding	Within FCCP	~		
	Agency * *	Child and Family Servic	Place of Service *	Child and Family Se	rvices of Newport County 🗸		
	Worker * *	Chase, Sheila	V Payer *	In kind donation	✓ Details		
	Status *	Complete 🗸					
	Activity Service						
	Service *	SocialServ14					
		Supplies					
	Unit Type	Clear					
	Units *	\$					
	Unit Cost	1.00					
	Total Cost	\$25.00					
	Emergency Expenditure	\$25.00					
	(FLEX FUND ACTIVITIES ONLY)						
		2/12/2020					
	General/Flex Fund Notes	Diapers for infant	~				

### Entering a SERVICE delivered per the family FCCP Plan (*example C*)

N	🖊 har mons	У <sup>~</sup>							Activitie
y Garlar	nd							Last Updated by sch	ase at 2/12/202 4:01:57 F
tivities	Activity Times								
	Start Date * Start	Time	End Date *	End Time	Total Minutes				
	2/3/2020 🔳 12 🗸	′00 ✔ AM ✔	2/3/2020	12 V 01 V AM V	1	Delete			
	2/19/2020 🔳 12 🗸	00 🗸 AM 🗸	2/19/2020	12 V 00 V AM V	1	Add			
			-						
	Activity Details								
		EB		Location/FCCP Funding	Referred Out to n	on-FCCP 🗸			
	Agency * *		nily Servic Deta		Non FCCP Agency		$\sim$		
	Worker * *	Chase, Sheila		V Payer *	Medicaid	✓ Details			
	Status *	Pending 🗸							
	Activity Service Service *	0.111.01.05	-						
	Jervice -	BehHealth05							
		Therapy - Fam	lly						
	Unit Type	15 mins	_						
	Units *								
	Unit Cost	1440.0							
		\$0.00							
	Total Cost	\$0.00							
	Emergency Expenditure (FLEX FUND ACTIVITIES ONLY)								
	Status of Record Completion (FLEX FUND ACTIVITIES ONLY)								
	a 1000 n 141.								

UPDATING a SERVICE delivered when the family reports service is complete. (example D)

s://nss.n			)=164801ew1ype=5	10Pageview&PageiD=29202&Cnat	terEntityID=710248(EntityID=	513998CallingChapter=Con	isumers&CallingPage=Activities+L	st&ParentEntityID=71024&_popup_=1
		n sy.						Activit
Garlan	d							Last Updated by schase at 2/12/ 4:01:5
vities	Activity Times							
		art Time	End Date *	End Time	Total Minutes			
	2/3/2020	2 V 00 V AM V	2/3/2020	12 V 01 V AM V	1	Delete		
	2/19/2020		2/19/2020	12 V 01 V AM V		Delete		
				12 V 00 V AM V		Add		
	2/15/2020		2/19/2020			Add		
	Activity Details							
	FCCP * *	EB		Location/FCCP Funding	Referred Out to r	ion-FCCP 🗸		
	Agency * *	Child and Fa	mily Servic Det	ails Place of Service *	Non FCCP Agency	r	$\sim$	
	Worker * *	Chase, Sheila		✓ Payer *	Medicaid	✓ Details		
	Status *	Complete 🗸						
	Activity Service							
	Service *	BehHealth05						
		Therapy - Farr	nily					
		Clear						
	Unit Type	15 mins						
	Units *	0.133						
	Unit Cost	\$0.00						
	Total Cost	\$0.00	1					
	Emergency Expenditure (FLEX FUND ACTIVITIES ONLY)							
	Status of Record Complet	tion						
								<b>%</b> 1

### Entering a Face to Face visit (*example E*)

https://hss.h	opy of Live 1/27/20) - Internet Explo harmonvis.net/RIFISTest/Pages/Harm		164&ViewType=Sub	PageView&PageID=29202&Chap	erEntityID=71024&EntityID=5	1400&CallingChapter=Consumers&Call	ingPage=Activities+List&ParentEntityID=71024&_popup	
File								
		У <sup>~</sup>						Activities
Judy Garlar	nd						Last Updated b	y schase at 2/20/2020 12:08:08 AM
Activities	Activity Times							
	Start Date * Start		End Date *	End Time	Total Minutes			
	2/12/2020	00 V PM V	2/12/2020	12 V 15 V PM V		Delete		
	2/12/2020	00 🗸 AM 🗸	2/12/2020	12 V 00 V AM V		Add		
	Activity Details							
		EB		Location/FCCP Funding	Within FCCP	$\sim$		
	Agency * *	Child and Fam			Child and Family Se	ervices of Newport County $\checkmark$		
	Worker * *	Chase, Sheila		V Payer *	Service contract	✓ Details		
	Status *	Complete 🗸						
	Activity Service Service *	ServDelImp01_	2					
		Face to Face Vis		h & Far				
		Clear						
	Unit Type	15 mins						
	Units *	1.00						
	Unit Cost	\$0.00						
	Total Cost	\$0.00						
	Emergency Expenditure (FLEX FUND ACTIVITIES ONLY)							
	Status of Record Completion (FLEX FUND ACTIVITIES ONLY)							
<								>
			o 💼	🖬 🔰 🚺 😒	🛛 🧔	<b>1</b>		€ 150% •

After entering these types of services, your Activity Summary List will look like the following (Therapy remains "pending" until you update the entry as shown in example D):

Mail - Sheila Chase - Outlook 🛛 🖉 RIFIS Test (Copy	of Live 1/2 × 📑			
e Edit View Favorites Tools Help				×
🛚 💁 CFP_email 🔤 Romero Reclining Sofa - Bl 🔯 Ap	ollo Reclining Loveseat 😢 Oatmeal Choco	olate Chip C 🗸 AutoCheck.com Homepag	ge 🔇 Ratings NHTSA 💽 Mortgage A 🗿 DCYF_email 🛷 ADP 🛃 Amica In	surance - Logged 🤺 Book Now
Change Role RIFIS Sys Admin V Go		n y*		Activities ^
About	Judy Garland			Last Updated by schase at 2/20/2020 12:28:59 AM
My RIFIS	RIFIS ID 71024 First Name Judy Last Name Garland	Status SSN DOB	Active 123-45-6789 8/17/2010	
Quick Search	Demographics FCCP Open/Close Family Relations Natural Suppor Assessments & Forms Diagnosis Plans Activities Progress No Signed Documents	ts/Case Relations		
Providers Utilities Reports Sign Out	Filter Date V Add Search Reset			
	Date         Service           02/12/2020         Housing           02/12/2020         Supplies           02/12/2020         Therapy - Family           02/12/2020         Face to Face Visit w/ O	Child and Family Child and Family	Worker         Units         Status           Services of Newport         Chase, Sheila         1.00         Complete         >           Services of Newport         Chase, Sheila         1.00         Complete         >           Services of Newport         Chase, Sheila         8.00         Pending         >           Services of Newport         Chase, Sheila         8.00         Complete         >	

Newest code names effective 04/04/19Service/Delivery/ Implementation in RIFIS1. Housing Navigation provided specifically by theassigned FCCP Housing Navigator to the family2. Housing Navigation provided by an FCCPSupervisor to the family3. Housing Navigation provided by PrimaryWorker (FSCC) to the family4. Housing Navigation provided by SecondaryWorker (FSC) to the family5. Housing Navigation provided by a "non" FCCPposition and/or assigned worker to the family6. Emergency housing secured7. Temporary housing secured8. Permanent housing secured9. Moved from emergency housing to temporary housing10. Moved from emergency housing to permanent housing11. Moved from temporary housing to permanent housing12. Emergency housing not secured at close/time of transition from FCCP13. Temporary housing not secured at close/time of transition from FCCP14. Permanent housing not secured at close/time of transition from FCCP15. Child/youth referred to Youth Diversionary Program (YDP) while in FCCP care16. Child/youth referred to Wayward Disobedient Program (WDP) while in FCCP care17. Child/Youth WDP 197 form complete (record for all YDP/WDP cases)18. FCCP referring child/youth to DCYF CRU 19. CRU service referral by FCCP not accepted20. CRU service referral by FCCP not accepted <th><ul> <li>Enter required fields (FCCP, Agency, etc.)</li> <li>Select Location/FCCP Funding as: Within the FCCP</li> <li>Select Place of Service as: your own agency</li> <li>Select Payer as: Service Contract</li> <li>Under the activity heading, choose a service code that best describes what service was delivered by clicking the ellipsis, and selecting the service code</li> <li>Utilize the activities notes section (at the bottom of the activity page) to indicate other members of the housing "team" when multiple people work on a family's housing needs</li> <li>Scroll to top of the page and enter Start/End service date, indicate 1 minute for time allotment and click ADD</li> <li>Mark the status of the activity "complete", save and close</li> </ul></th>	<ul> <li>Enter required fields (FCCP, Agency, etc.)</li> <li>Select Location/FCCP Funding as: Within the FCCP</li> <li>Select Place of Service as: your own agency</li> <li>Select Payer as: Service Contract</li> <li>Under the activity heading, choose a service code that best describes what service was delivered by clicking the ellipsis, and selecting the service code</li> <li>Utilize the activities notes section (at the bottom of the activity page) to indicate other members of the housing "team" when multiple people work on a family's housing needs</li> <li>Scroll to top of the page and enter Start/End service date, indicate 1 minute for time allotment and click ADD</li> <li>Mark the status of the activity "complete", save and close</li> </ul>
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Please note: Code 17 should be recorded for all YDP/WDP youth – even those referred to YDP/WDP services right @ day 0.

# **Definitions**

# • Housing type definitions:

o *Emergency*: DCYF defines emergency housing for FCCP's as short-term immediate housing that cannot be sustained. Emergency housing is for people who are homeless or in crisis in that moment. The goal of emergency housing is to ensure safety and shelter to avoid DCYF involvement until temporary or permanent housing can be secured.

o **Temporary**: DCYF defines temporary housing for FCCP's as housing that can be sustained for a period of time but is subject to change. Temporary housing is for persons who are without housing or a fixed address. Temporary housing is not secure housing, it is to be sustained for a reasonable time until viable and safe, formal or informal resources are available. The goal of temporary housing is to transition to permanent housing.

o **Permanent**: DCYF defines permanent housing as a community-based housing without a designated length of stay in which formerly homeless individuals and families live as independently as possible. Person must be the tenant on a lease (or sublease) for an initial term of at least one year that is renewable and is terminable only for cause. Further, leases (or subleases) must be renewable for a minimum term of one month.

• For codes 1-5, please use a ranking system when housing activities began if there are multiple people assisting with the family. The ranking system is as follows:

o If the housing Navigator Position is participating in anyway, in any capacity, please choose code 1. For example, this person may be coordinating the housing activities, consulting on the case, meeting with outside constituents, etc.

o If team approach, with no Housing Navigator Position involvement, select the codes in the following order, based on team: Supervisor, Primary Worker (FSCC), Secondary Worker (FSP), Other/Non FCCP position

• When emergency or temporary or permanent housing is secured, choose the applicable code once. If the family changes physical home multiple times, but housing status does not change, only enter the code once at start date of period.

o If the status changes, at that time, use codes 9-11.

### • Use codes 12- 14 at time of closing if no housing is secured.

### **Please Note:**

- Dispose of any other "draft" version of this documentation and disperse this update to all staff
- > Report to RIFIS.support@dcyf.ri.gov if you have any questions when entering codes