CREATE FACILITY, INDIVIDUAL, OR SERVICE OFFERINGS

Summary

This guide will walkthrough how to create, update, and close: facilities, individuals, and service offerings

Table of Contents

Introduction

The Master Provider Enterprise Repository, MPER, includes pertinent information for each Allegheny County, Department of Human Services, contracted/non-contracted provider.

It is the responsibility of the provider to maintain information in MPER.

This job aid pertains to the following screens:

• Provider Facility - Create a facility for each location where services are provided.

• Provider Individual – Create an individual for CYF caregivers such as foster parents.

• Service offering ID - Create a service offering which is a combination of a contracted service and the location where the service is provided.

Tool tips are available by hovering over the field name. Shaded fields are mandatory to save the entered information.

Create New Facility

• Hover over the Provider button.

• Hover over New.

• Click Facility (Agency is greyed out for provider users).

• Click the Direct Service Provider checkbox.

• Facility - Enter the name of the facility.

• Enter Doing Business As if applicable.

• Audit shows Last Updated Date and By and Originally Created Date and By. This is not editable

Input Addresses

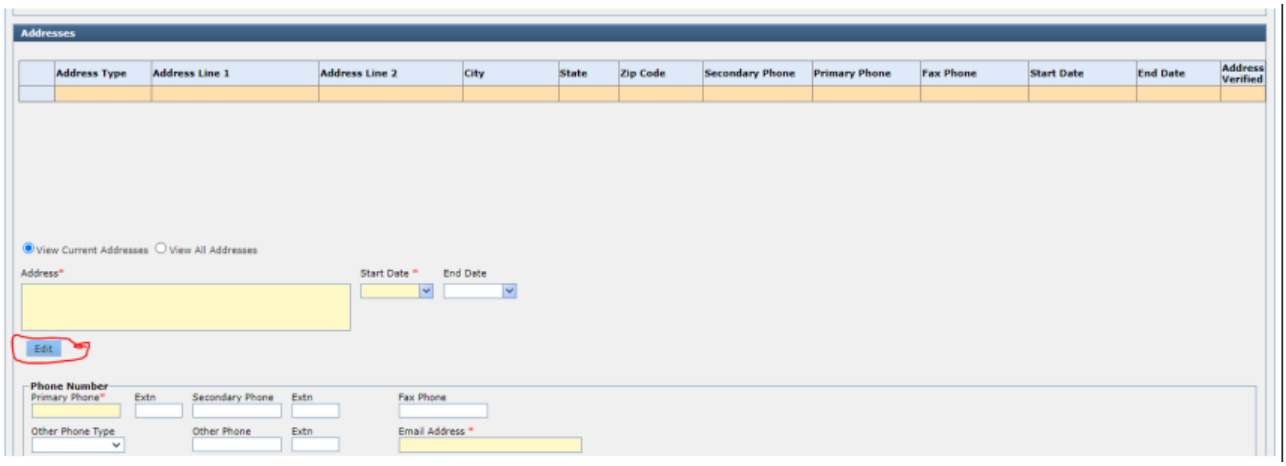
o Enter a Start Date. (The date this address became in existence, or the fiscal year start date.)

o Enter a Primary Phone number.

o Enter an Email Address.

o Click the Edit button.

▪ Click New Addresses for additional addresses if applicable.



o Address type defaults to Local Address.

o Enter the street number and name in Address Line 1 field.

o Enter the City.

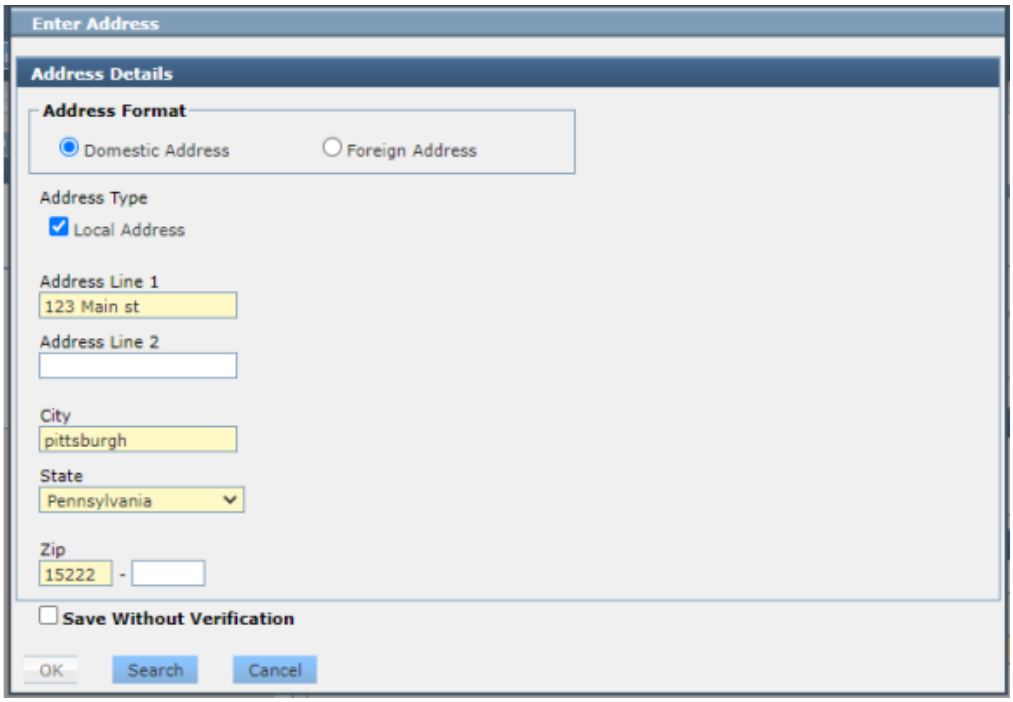
o Choose the State from the dropdown list.

o Enter the Zip.

o Click the Search button.

o Review the Search Results if applicable. Select the Alternate Address if shown; otherwise click the OK button.

▪ Check the Save Without Verification check box only when the system will not take the address you are trying to enter; then OK



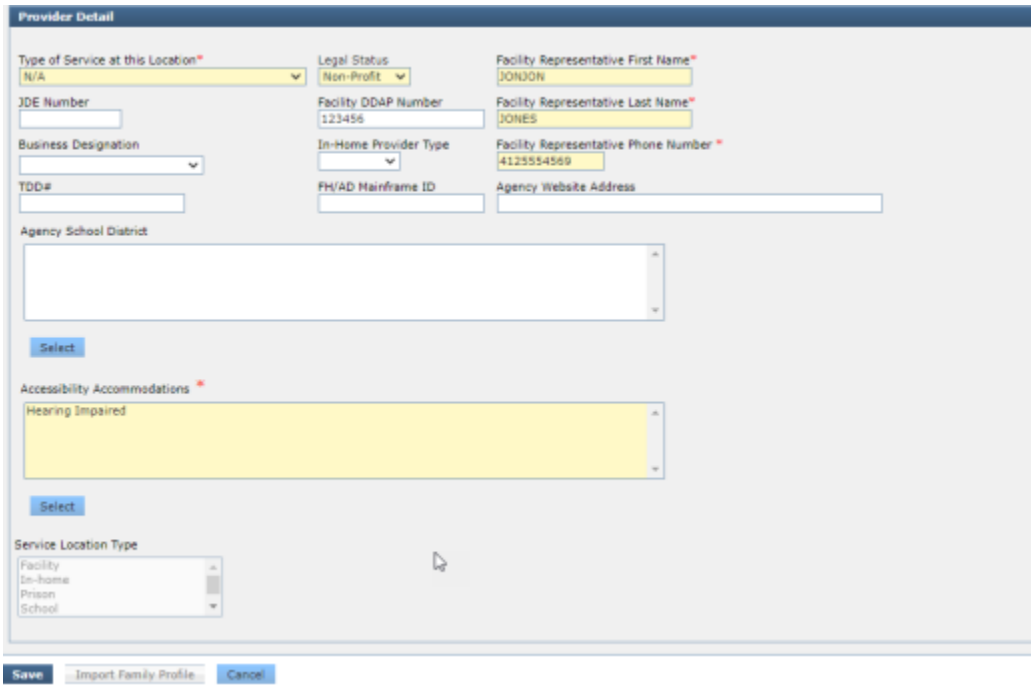
Input Provider Detail

o Complete the mandatory fields and other fields that are applicable.

o Service Location Type is not editable.

▪ This field will reflect on this screen if chosen on the service offering screen associated to this facility.

o Click the Save button.



o Click the Select button.

Checking for Duplicates

▪ If the pop up screen shows possible duplicate facilities, review the information to determine if the facility is already created. Click on the Select button for the correct facility.

Extra Info

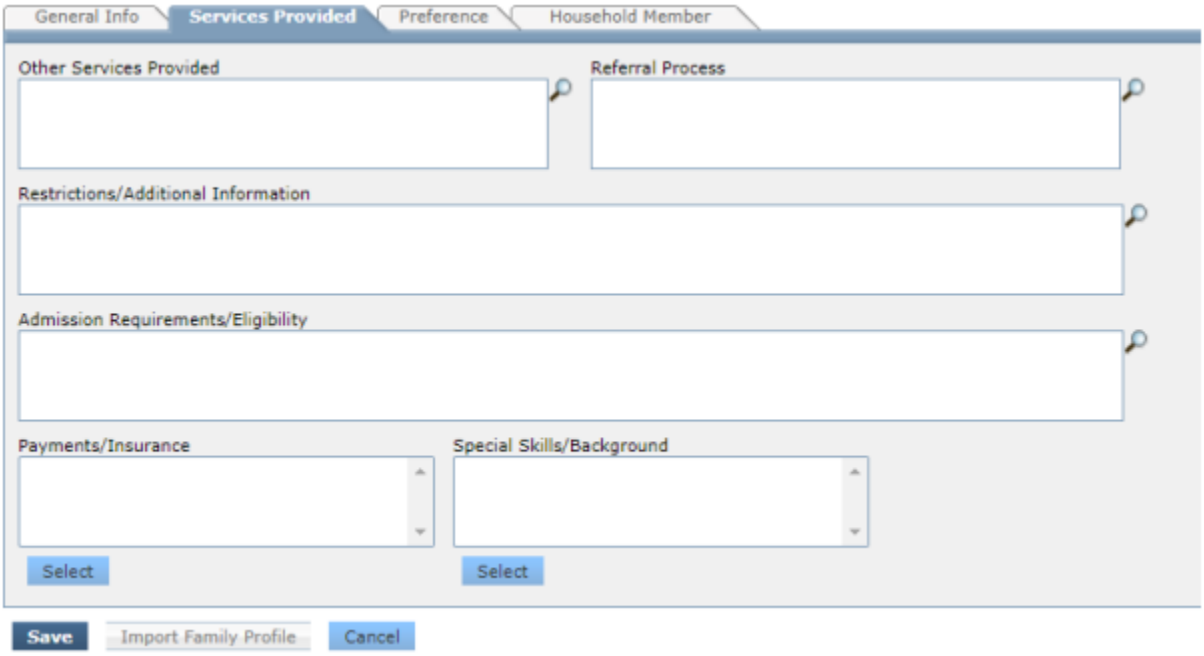
• Services Provider tab – enter information if the facility is a CYF residential/group home.

o Enter a description for Other Services Provided, Referral Process, Restrictions/Additional Information and Admission Requirements/Eligibility.

o To enter Payment/Insurance information, click Select under the Payment/Insurance box. Highlight all that apply, click >> and click OK.

o To enter Special Skills/Background information, click Select under the Special Skills/Background box. Highlight all that apply, click >> and click OK.

o Click the Save button to save entries.

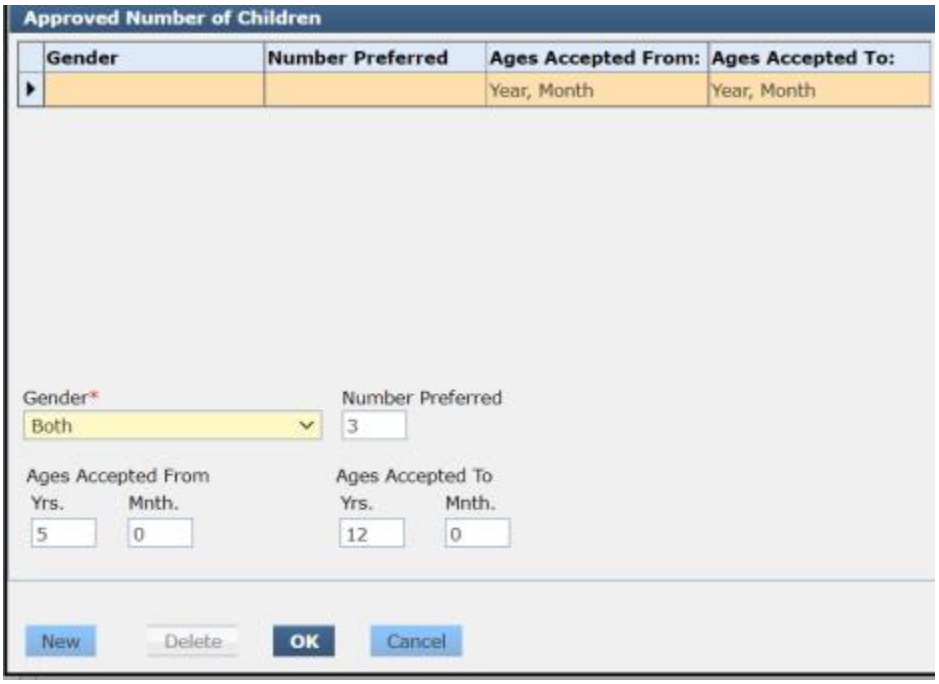


• Preference tab - enter information if the facility is a CYF residential/group home.

  o Click Select Preferred Clients.

  o Enter the fields.

Note: Enter the number of children the facility would want to host by age and gender of preference. Multiple entries should only be created if preferences differ by gender or age

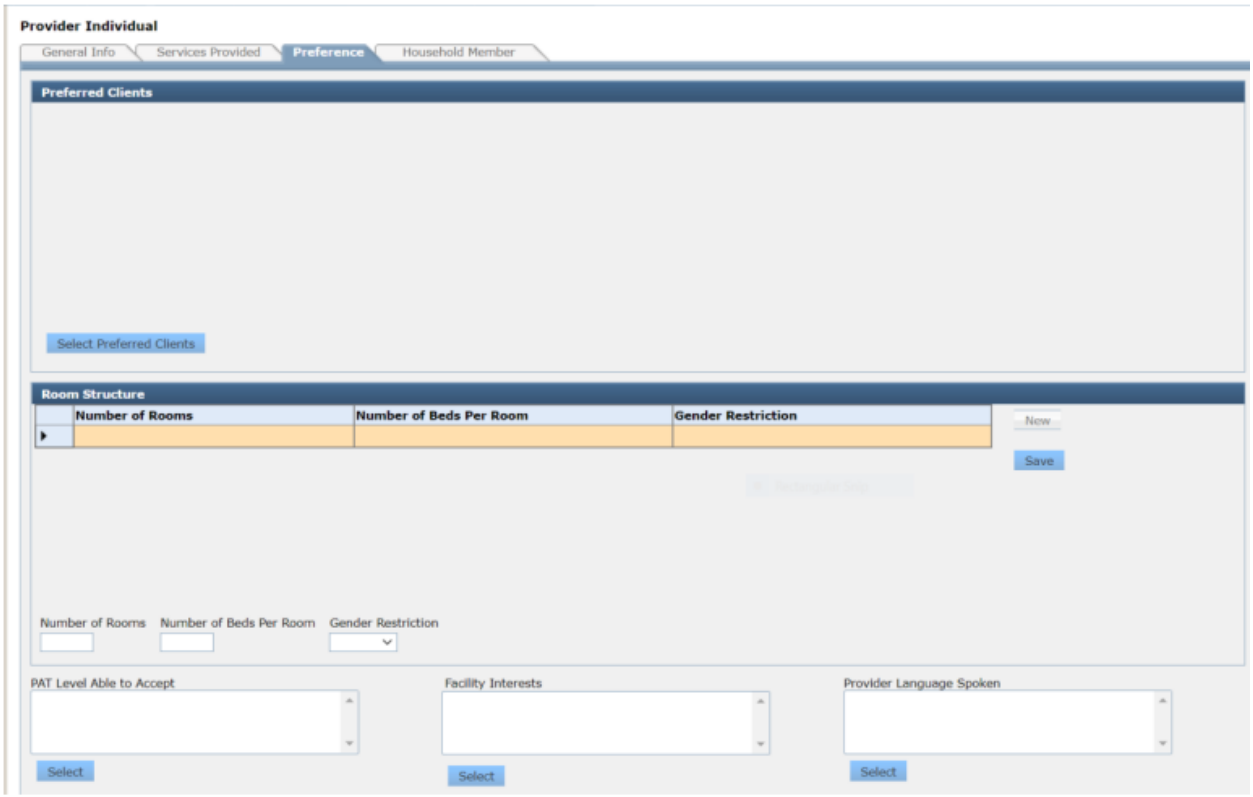


• Room Structure

o Enter the information in each field for the first entry.

o Click the Save button.

o Click the New button for subsequent entries.



Note:

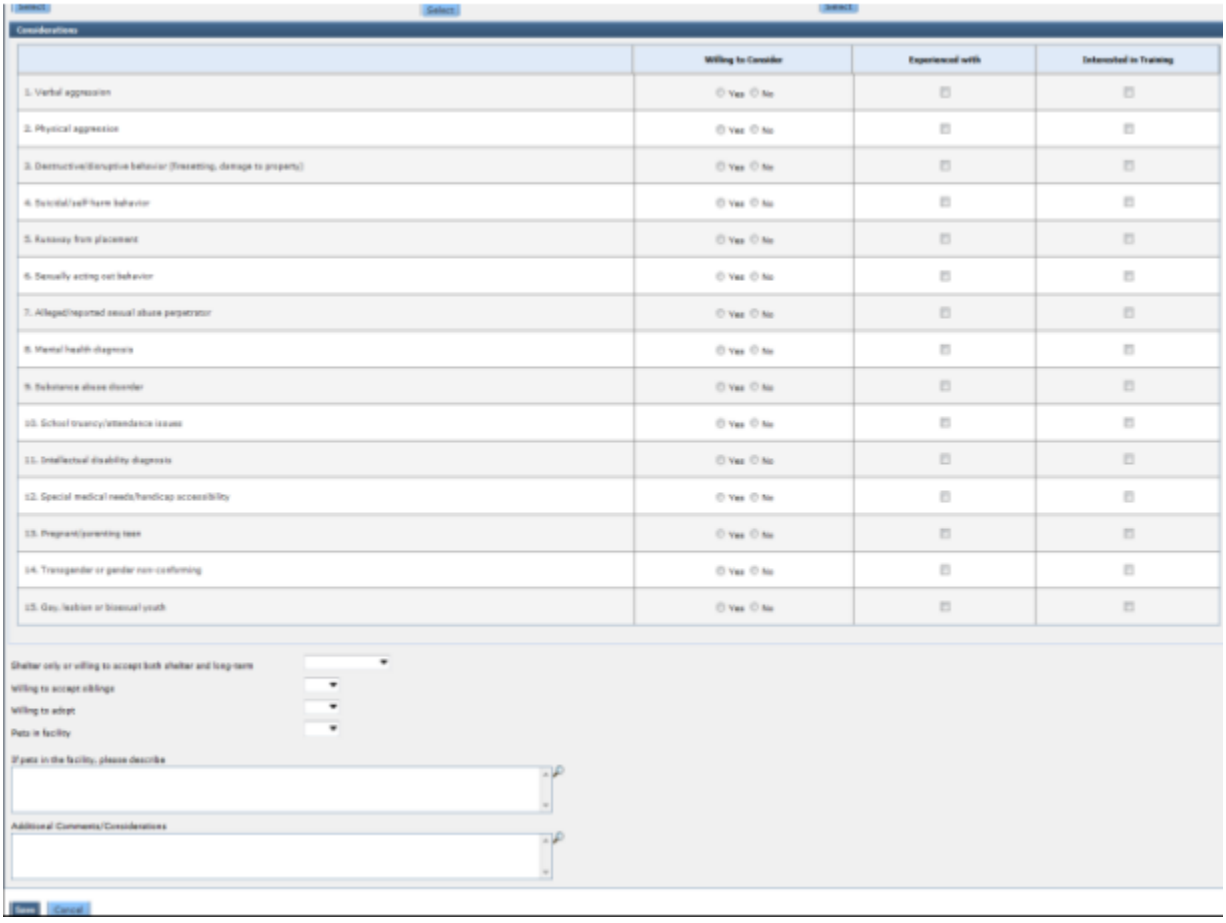
If there are multiple rooms with different numbers of beds or gender restrictions, please have an entry for every room. If the room structure is the same (e.g., 2 rooms with 2 beds that can take either boys or girls), you only need one entry.

To enter PAT Level, click Select under the PAT Level Able to Accept box. Highlight all that apply, click >> and click OK.

To enter Facility Interests information, click Select under the Facility Interests box. Highlight all that apply, click >> and click OK.

To enter Provider Language Spoken information, click Select under the Provider Language Spoken box. Highlight all that apply, click >> and click OK.

- Considerations
    - o Click Yes or No in the Willing to Consider column.
    - o Check the box for Experienced with and Interested in Training if applicable.
    - o Select Shelter only or willing to accept both shelter and long-term.
    - o Select Willingness to accept siblings.
    - o Select Willing to adopt.
    - o Select Pets in the facility. If yes, complete the info in the facility; describe narrative field.
    - o Enter notes in the Additional Comments/Considerations field.
    - o Click the Save button.



- License information is entered by DHS.
- Provider Contacts information is captured on the Provider Detail section.
    - This tab can be used to identify other contacts if applicable.
- Availability

- Update a Start Date
- Enter an End date (see below for instructions).

• HMIS Program List is entered only for HMIS users if applicable.

Create an Individual

• Hover over the Provider button.

• Hover over New.

• Click Individual (Agency is greyed out for provider users).

• Click the Direct Service Provider checkbox.

• Enter First and Last Name of the person designated as the head of household.

• Enter Date of Birth.

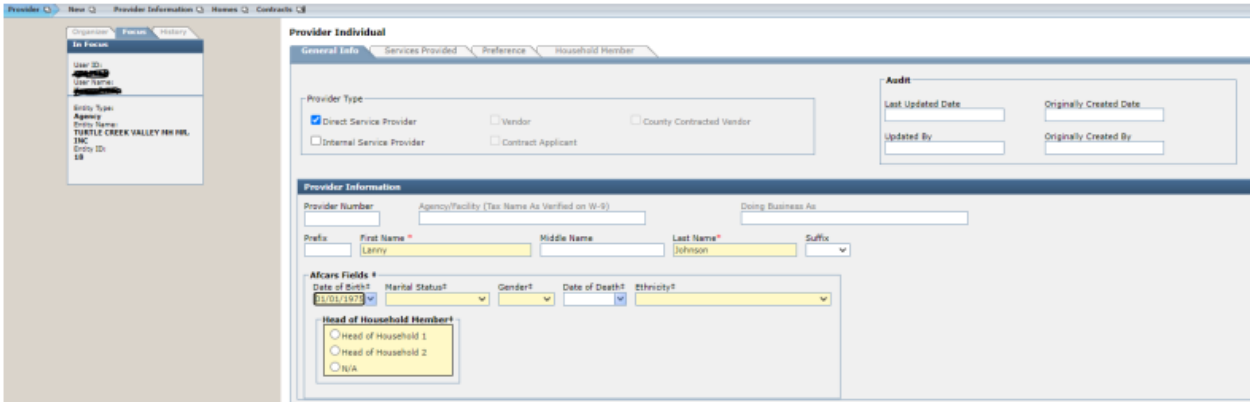
• Choose Marital Status from the dropdown.

• Choose Gender from the dropdown.

• Choose Ethnicity from the dropdown.

• Click radio button for Head of Household 1.

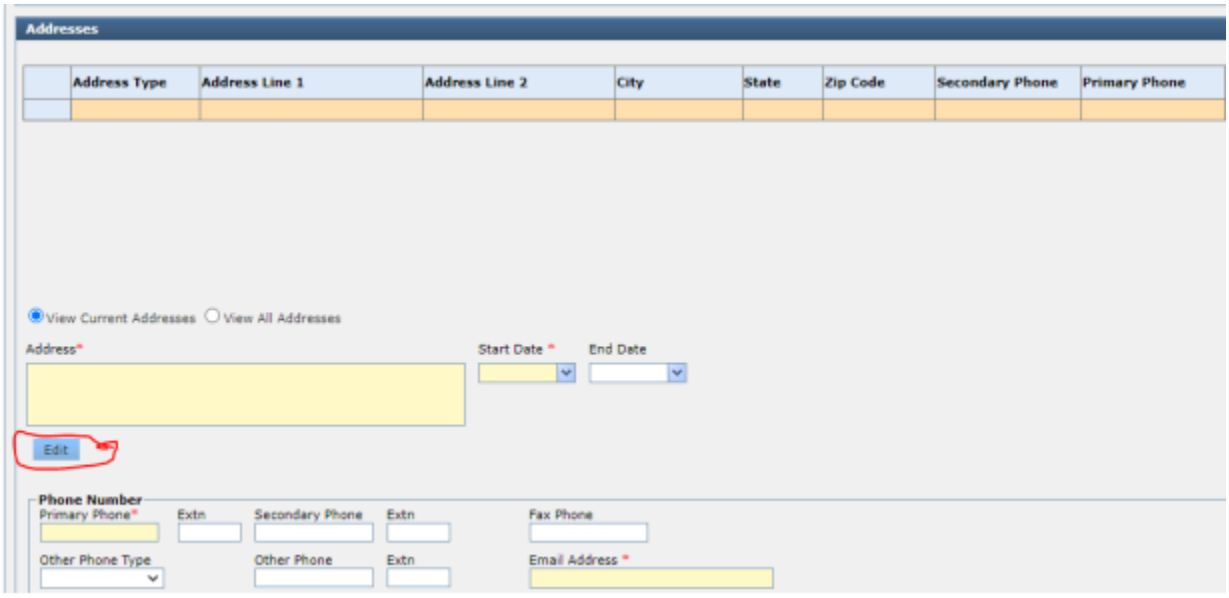
• Audit shows Last Updated Date and By and Originally Created Date and By. This is not editable.



Entering Addresses

- Enter a Start Date. The date the individual started living at the address.
- Enter a Primary Phone number.
- Enter an Email Address.
- Click the Edit button.

▪ Click New Addresses for additional addresses if applicable

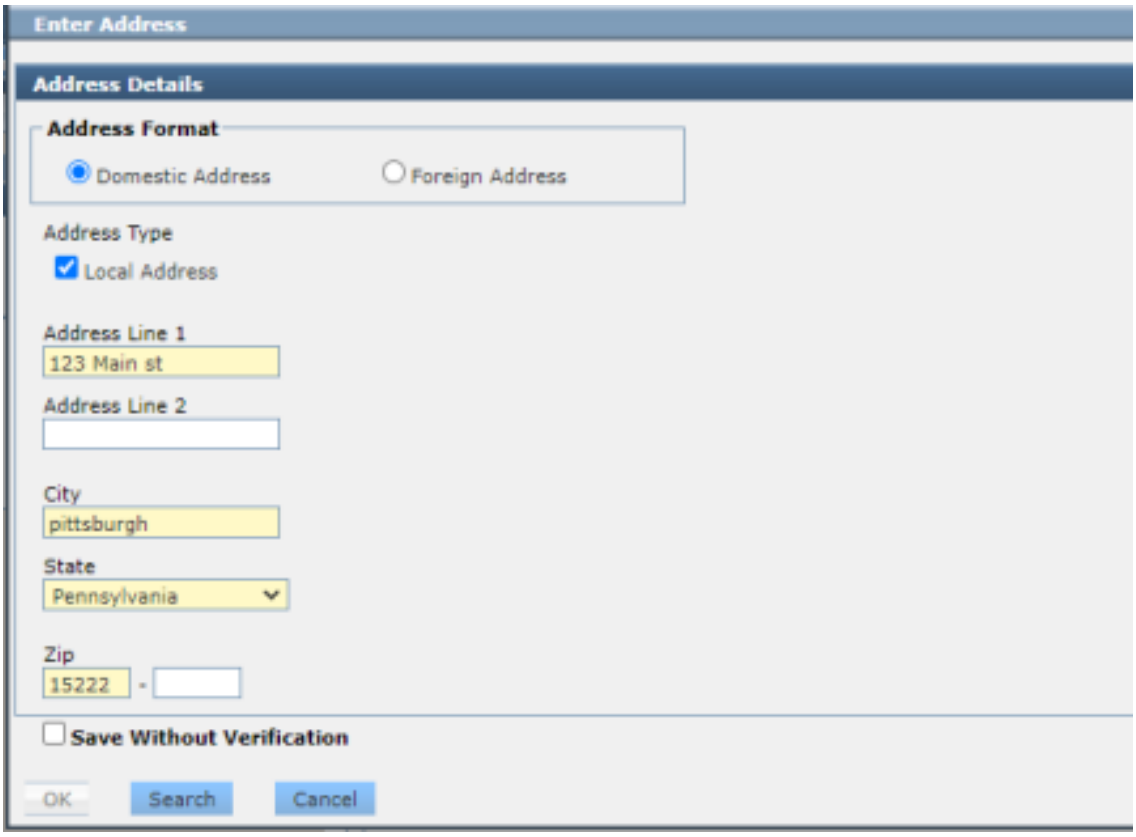


- Address type defaults to Local Address.
- Enter the street number and name in Address Line 1 field.
- Enter the City.
- Choose the State.
- Enter the Zip.

o Click the Search button.

o Review the Search Results if applicable. Select the Alternate Address if shown; otherwise click the OK button.

▪ Check the Save Without Verification check box only when the system will not take the address you are trying to enter.

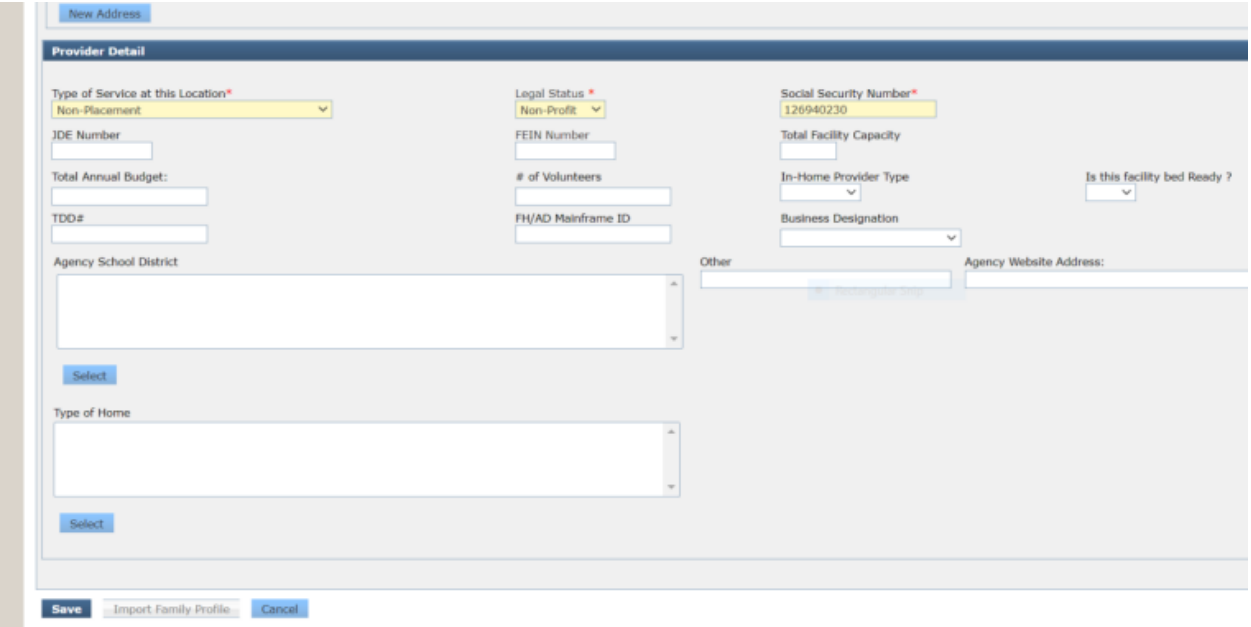


• Provider Detail

o Enter all fields that are applicable. Shaded fields are mandatory to save the individual.

▪ Depending on Type of Service chosen and/or Type of Home determines which fields will become mandatory.

o Click the Save button.



Checking for Duplicates

o Click the Select button.

▪ If the pop up screen shows possible duplicate facilities, review the information to determine if the facility is already created. Click on the Select button for the correct individual

Extra Info

• Import Family Profile can be selected if applicable.

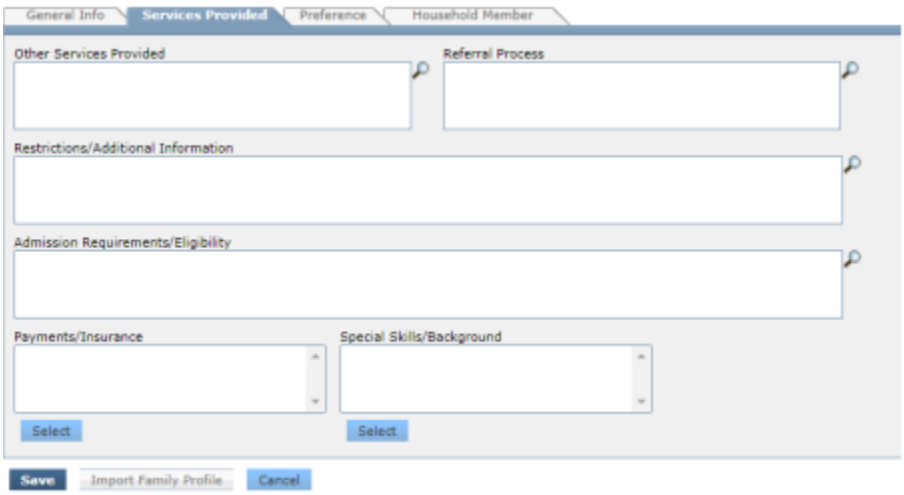
• Services Provider tab

o Enter a description for Other Services Provided, Referral Process, Restrictions/Additional Information and Admission Requirements/Eligibility.

o To enter Payment/Insurance information, click Select under the Payment/Insurance box. Highlight all that apply, click >> and click OK.

o To enter Special Skills/Background information, click Select under the Special Skills/Background box. Highlight all that apply, click >> and click OK.

o Click the Save button to save entries.



• Preference tab

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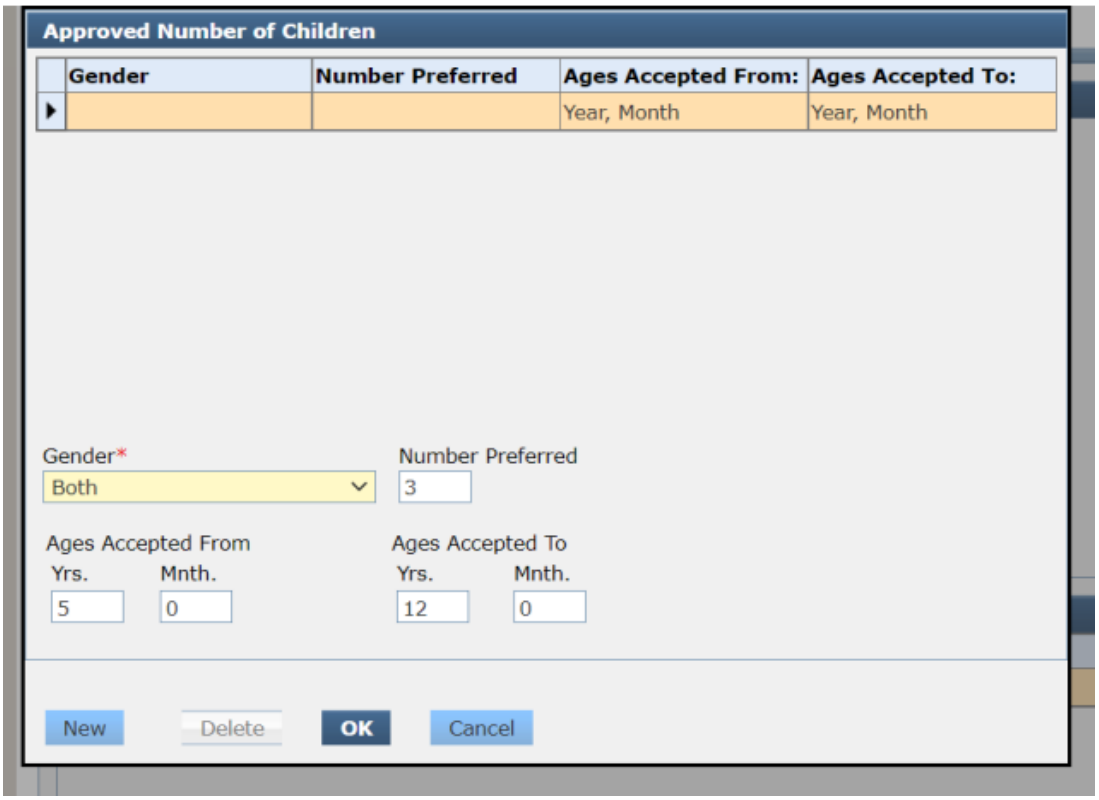

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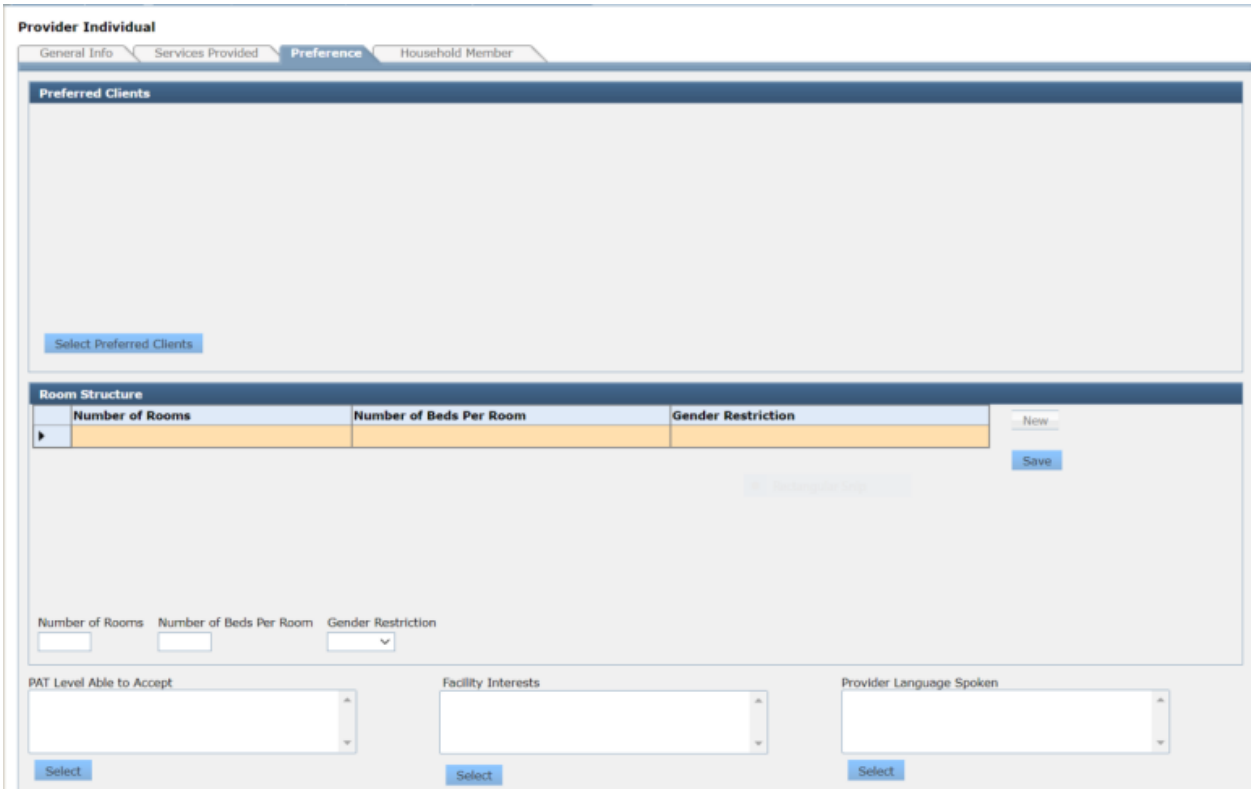
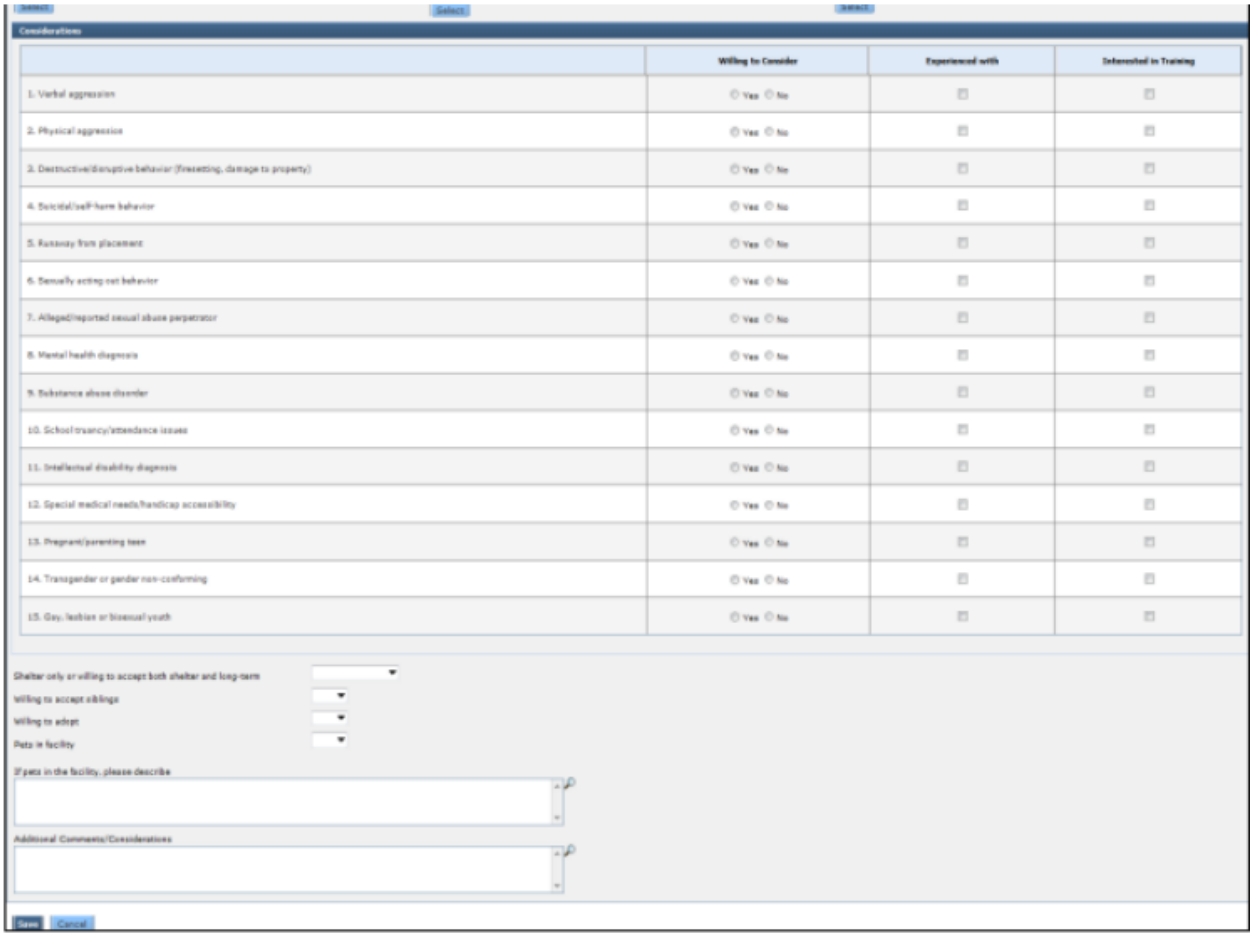


- Considerations
    - o Click Yes or No in the Willing to Consider column.
    - o Check the box for Experienced with and Interested in Training if applicable.
    - o Select Shelter only or willing to accept both shelter and long-term.
    - o Select Willingness to accept siblings.
    - o Select Willing to adopt.
    - o Select Pets in the facility. If yes, complete the info in the facility; describe narrative field.
    - o Enter notes in the Additional Comments/Considerations field.
    - o Click the Save button



- Household Member Tab
    - o Head of Household 1 is populated from the information entered on the General Info screen.
    - o Click the New button to create a new household member.

Note: Head of Household 2 or N/A. You can only choose one option. TIP: If the Household Member is indicated to be HOH 1, then the relationship to HOH 2 is selected. The Relationship to HOH 1 defaults to 'Self'.

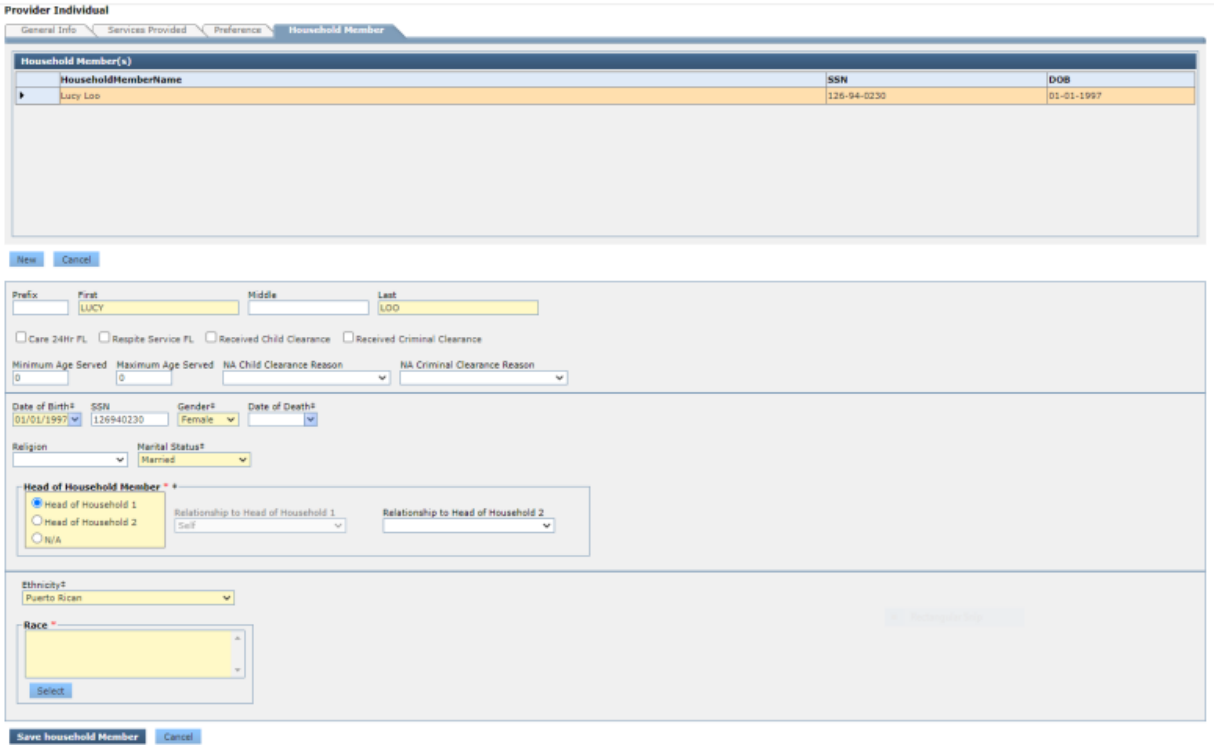
o Enter applicable fields; shaded fields are mandatory to save.

o Click Save household member button.

o Household Information can be edited by clicking on the row for the household member.

▪ Change the applicable field.

▪ Click Save household Member button.



• Insurance - enter information per direction from the contract monitor

• License CYF - is entered by DHS.

• Provider Contacts information is captured on the Provider Detail section.

▪ This tab can be used to identify other contacts if applicable.

• Availability

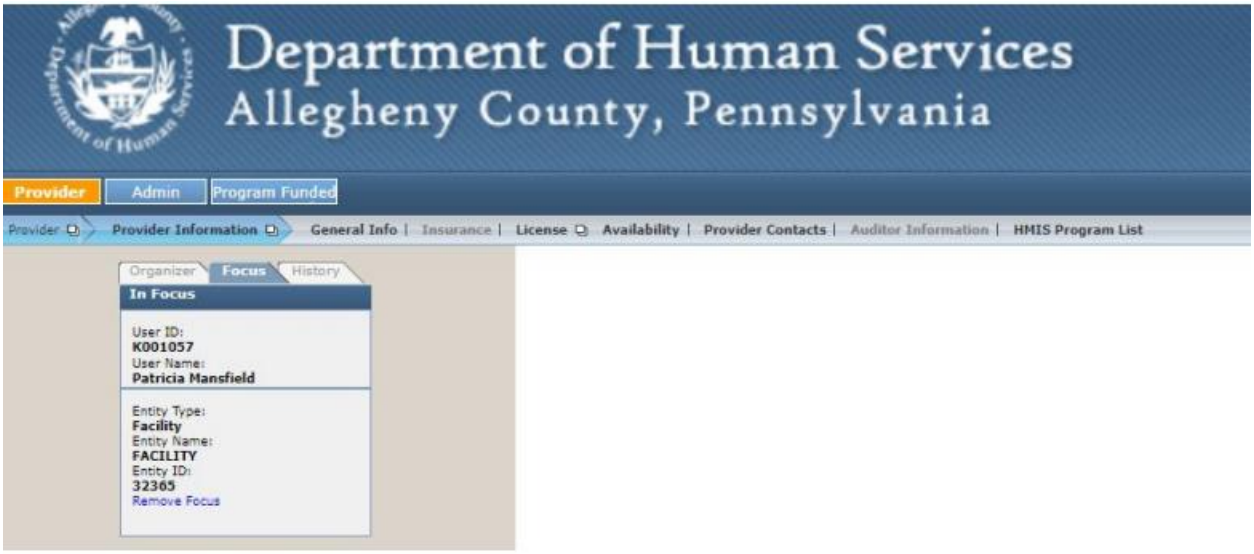
▪ Update a Start Date

▪ Enter an End date (see below for instructions).

• HMIS Program List is entered only for HMIS users if applicable.

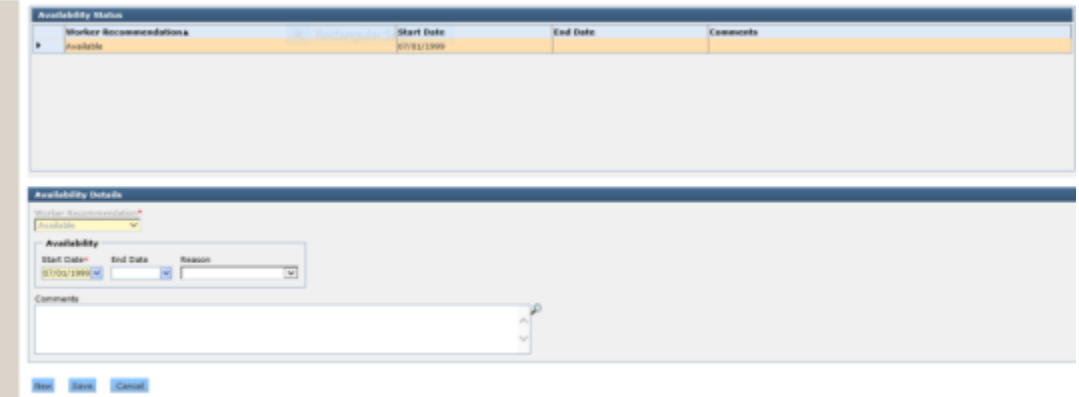
View and Update Facilities/Individuals

- Click on the Organizer tab
- Click My Facilities.
- Click the row of the facility to view.
- Click the Show button.
- Click Provider Information > General Info tabs.
- Make changes or additions.
- Click the Save button.



Close a Facility/Individual

- End date each service offering associated to the facility to be closed first.
- Go to My Facilities and select the row for the facility that needs to be closed
- Click the Show button.
- Navigate to the Availability tab—Provider>Provider Information>Availability
- Choose an end date in the dropdown – this must be the day after the service offering end date.
- Choose a reason in the dropdown. Enter comments if applicable.
- Click the Save button.



Create New Service Offering

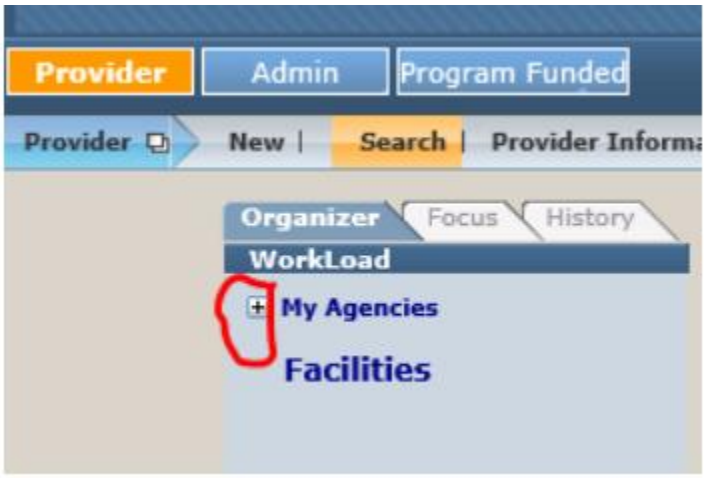
Service offerings are used to identify which facilities/individuals at the agency will be providing the services on the contract.

The facility must be created before a service offering can be created. If the facility is already created, navigate to the Service Offering List (see below).

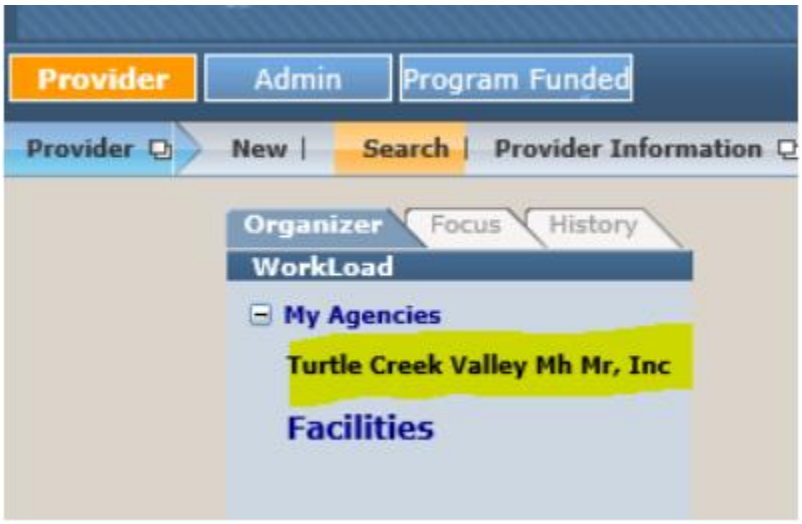
To Focus the Agency after creating the facility

• Click the Organizer tab.

• Click the plus sign + beside My Agencies



• Click on the agency's name



Navigation Path to List of Service Offering screen:

Hover over Provider > Scroll down to Contracts > Click on List of Contracts>Click into the row of the appropriate Contract ID>Click SHOW> Click Service Offerings tab > Click List of Service Offering tab

Creating the Service Offering

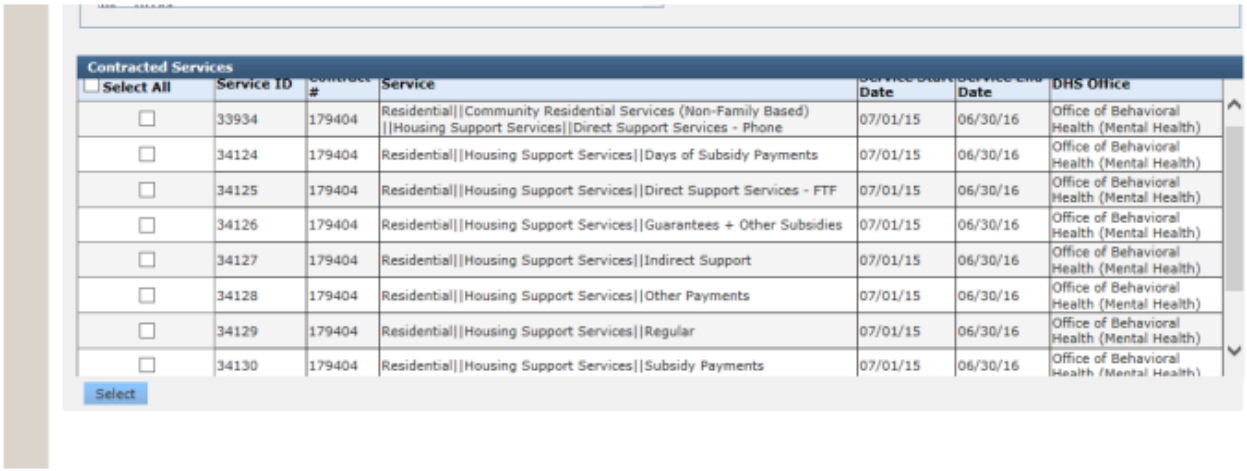
Creating the Service Offering initially only requires the input of three fields.

If a Service Offering needs updated, more info will be needed before you can save.

• Click the New button.

• Click the checkbox beside the contracted service(s) for which a service offering should be created (multiple services can be chosen).

• Click the Select button.



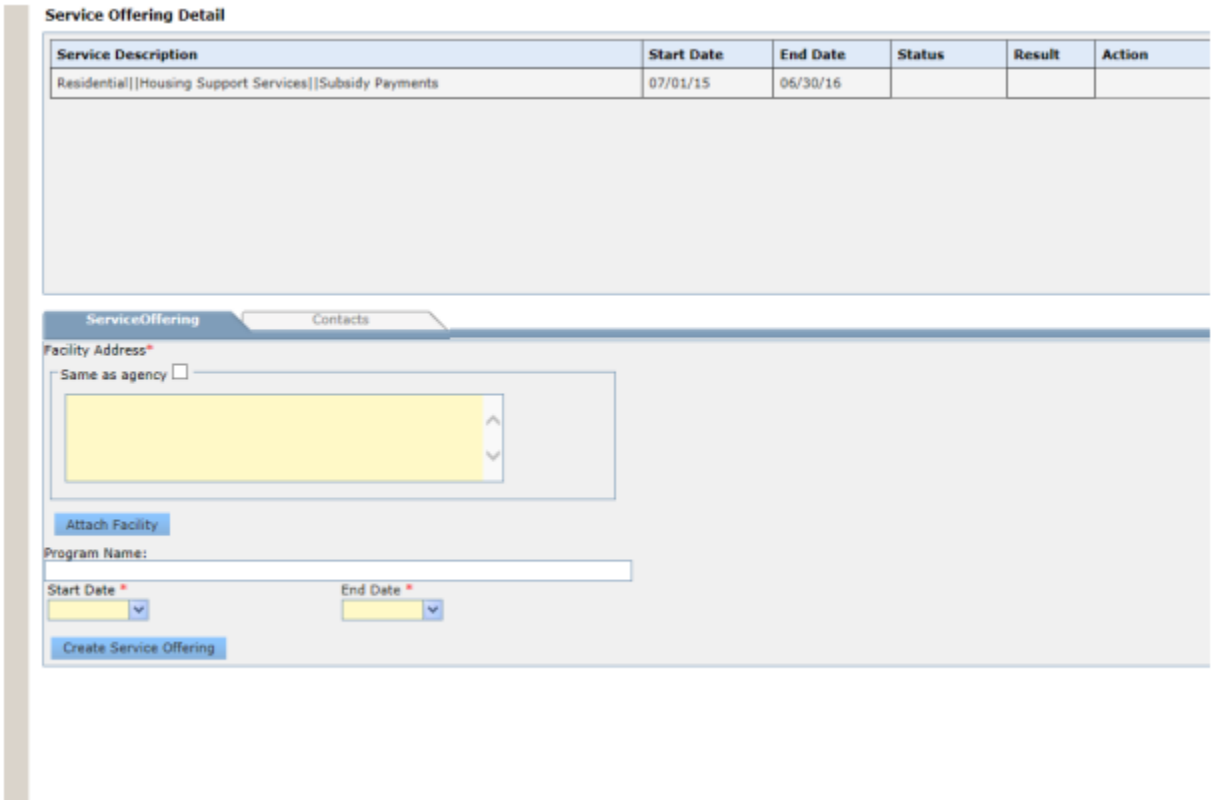
• Click Attach Facility to choose a facility that should already be created.

• Click Same as Agency only if the service offering is related to the Agency address.

• Enter a Service Offering Start Date (the date the agency started providing the service or the first date of the current fiscal year).

• Enter a Service Offering End Date (always the last date of the current fiscal year).

• Select 'Create Service Offering'



Updating a Service Offering

• Choose Is This Facility Bed Ready? from the dropdown list.

• Enter a Program Name is applicable.

• Type of Service at this Location is not editable.

• Adjust Dates if needed.

• Check the grid at the top of the screen.

o If the status shows Success, click the Add Details button under the Action column.

o Choose Mandatory Fields from the dropdown:

- Offered In Home
- Service Availability
- Crisis Emergency Services Available
- Capacity
- Service Offering type
- Is this service available to clients outside of Allegheny County?
- Enter the Service Offering Email.

o Complete non mandatory fields if applicable.

- Extended Hours
- The Service Location Type can be chosen.

o The following fields are populated from another source; they are editable:

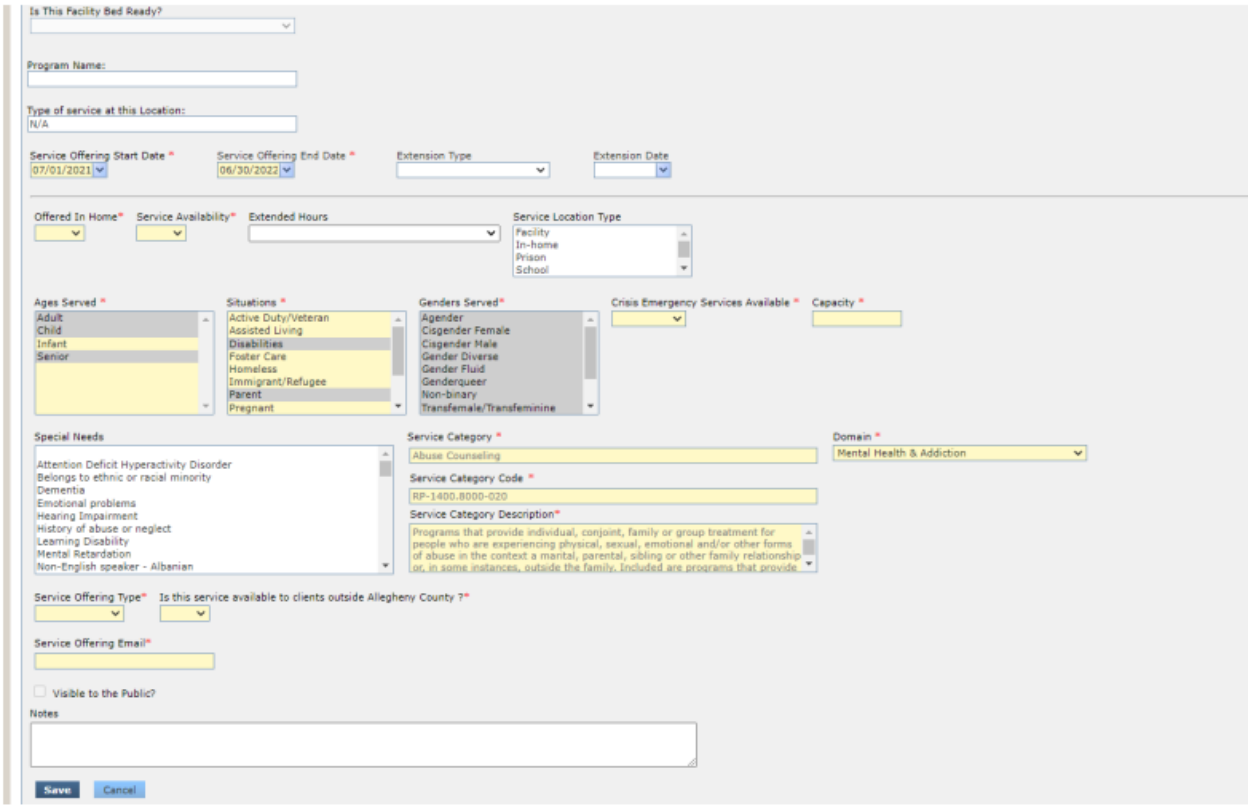
- Ages Served
- Situations
- Genders Served
- Domain

o The following fields are populated from another source; they are not editable:

Note: If these fields are not populated, please create a service desk ticket. You cannot save the service offering details without these fields being populated.

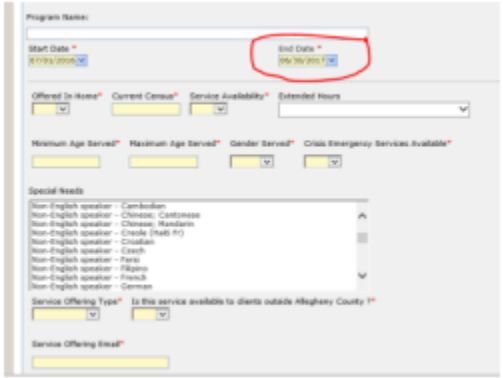
- Service Category
- Service Category Code
- Service Category Description

o Click the Save button.



To End Date a Service Offering

- Navigate to your List of Service Offerings.
- Choose the row for the service offering to be end dated.
- Click the Show button.
- Change the end date to the appropriate date.
    - If the details were not completed when the service offering was created, they must be completed now.



Misc

Users must be given their own access to MPER to log onto the application.

Contact the DHS Service Desk for user access by calling 412-350-4357 #2.

All questions and/or issues must be sent to the DHS Service Desk. servicedesk@alleghenycounty.us

To create an incident, send an email to the Service Desk and type 'MPER issue" in the body of the email and include the following:

- Your full name
- Your agency name
- Your phone number
- Description of the issue

URL: https://mper.county.allegheny.pa.us/mper/