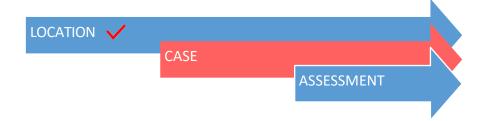
Department of Disabilities, Aging, and Independent Living (DAIL) Home Safety Inspection and Accessibility for Shared Living

Agency Portal User Manual Creating a Case November 2024

The Location **MUST** be in the database before a **Case** can be created.



A new Case is created when a Participant moves to an existing Location, a new Location, or when a 5-year reinspection is required for the Location.

Open the Location, click the Related tab, go to Cases section and click New

VERMONT				SD UVS 👻		
HOME LOCATIONS ASSESSMENTS	5 TASK			CONTRACTOR OF		
Location LN-029877			+ Follow View Sharing	Edit		
Home Safety Assessment Expiration Date	Home Provider Name Developer_Test	Provider Agency Upper Valley Services (UVS)	Created By ODSO UVS. 10/8/2024 10:10			
DETAILS RELATED						
Location Number LN 029977 Is Location Lessed/Rented	Home Provider Nan Developer Test Secondary Home Pr	/				
Provider Agency Upper Velley Services (UVS) Location Comments	Property Type Single family	,				
Location comments			HOME LOCATIONS ASSESSMENT	S TASK		
			Location LN-029877			+ Follow View Sharing Edit
			Home Safety Assessment Expiration Date	Home Provider Name Developer Test	Provider Agency Upper Valley Services (UVS)	Created By
			DETAILS RELATED			
			Cases (0)		New	
			Assessments (0)			
			Request Access (0)		New	
			Parties Involved (0)		New	

Home Safety Inspection and Accessibility for Shared Living Agency Portal User Manual: Creating a Case November 2024

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1	New Ca	ase: DAIL
		* = Required Information
*Participant Name		*Status
Search Contacts	Q	Open 💌
Move-in Date		• Program
	i	Search Programs Q
Case Number		Accessibility Assessment Expiration Date
Location		
▲ LN-029877	×	
Independent Vasa avaikar o Hearing impair Visual impairm Other mobility		
mergency Placement		Emergency Placement Comment
None	*	Salesforce Sans v 12 v
Ca	ncel S	ave & New Save

Complete the fields according to the steps below

Step 1 – Enter Participant Name

Start typing the **Participant's Name**. If the Participant is already in the system, it will appear. You may need to try typing the participant's name a few different ways, example: Robert, Bob, Rob; or Chris, Christopher, etc.

- If the Participant <u>IS</u> in the system, click on the Participant's name to choose that participant.
 - If there are two Participant names in the system that are the same name, contact DAIL before proceeding.
- If the Participant is <u>NOT</u> in the system, click **NEW CONTACT** to add a new Participant.

Adding a New Participant:

- o Click on New Contact
- o Enter Participant's First Name and Last Name
- Enter Account Name For a Participant this is always Citizen Public
- *Remaining fields may be left blank*
- Save Contact

Q Show more results for "Strawberry" + New Contact	
Strawberry Q	

Step 2 – Status

Status remains Open; there is nothing to change in this field.

Step 3 – Move In Date

Enter the date the Participant moved into the home (If date is not available when creating the Case, it may be added later)

Step 4 – Choose the Program

Start typing the name of the program in which the Participant is receiving services, and it will appear.

- Home and Community Based Services DDSD
- Choices for Care (Adult Family Care)
- Brain Injury Program

Step 5 – Enter Mobility and Accessibility Needs

- Click on item to highlight,
- Click on chevron to move it to the next column, Chosen

Repeat this step to add all Mobility and Accessibility Needs (multiple items may be Chosen)

Step 6 - Save

The newly created **Case** is now related to the **Location**

HOME	LOCATION	S ASSESSMENTS	TASK				
≜	Location LN-03280)1				+ Follow	Edit
Home	Safety Assessmer	nt Expiration Date	Home Provider Name Developer Test	Provider Agency Upper Valley Services (UVS)	Created By Dailds Uvs, 11/14/2024 9:25 AM		
DETA	ILS RI	ELATED					
	Cases (1)			New			
Case	lumber	Participant Name	Status	Date/Time Opened			
02380	0170	Stage Tester	Open	11/14/2024 9:28 AM			
				View All			
0,	Assessmen	ts (0)					
ø	Request Ac	cess (0)		New			

To open the Case, click the Case Number

		• = Required In	nformation
cation & Participan	t Information		
Participant Name Stage Tester	x	*Status Open	
_			* *>
Move-in Date 0	ح ا	Program Home and Community Based Services - DDSD	×
Case Number		Accessibility Assessment Expiration Date	
ase Number		Accessionity Assessment expiration pate	
Location			
실 LN-029877	×		
Mobility and Accessibility Ne Available	Chosen		
Independent	Uses a walker or oth		
Hearing impairment	Other mobility assist		
	4		
Visual impairment			
nergency Placemer	t		
Emergency Placement?		Emergency Placement Comment	
None	•	Salesforce Sans 💌 12 💌	
		B I U ∽ ≔ ≡ +≡ +≡	