

PARTICIPANT TRACKING SYSTEM:

COMPASS

Intake & Registration

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Key Terms

What is an Intake?

Intake:	a digital record of participant that is used to store various types of participant data
<u>How do you Complete a</u>	an Intake?
Intake Switchboard:	a navigation panel, located on the left side of the intake, that enables users to quickly navigate through the various sections of the intake
Power Search:	a search function that can be used to complete a keyword search on any field that has a magnifying glass icon on it. To begin a power search, type a *, a keyword, and then hit enter on your keyboard
	Ex. To find I.S.73 The Frank Sansivieri School you may type *73 or *frank to quickly find it.



Purpose of this Guide

This guide outlines the process of submitting participant intakes on DYCD Connect, using information from the Universal Intake Forms for COMPASS Programs. It also describes how to review and take actions on Online Applications received from <u>discoverDYCD</u>.

What is an Intake?

All providers must complete an <u>intake</u> on the workscope for all participants before providing services. The intake collects

participant data and creates a profile in DYCD Connect, which tracks enrollment, attendance, and services.

You can complete intakes in the Participation>Intake section of your workscope after the workscope is released to your program. Intakes can be received in paper form through the Universal Intake Form, or online via discoverDYCD.

Intake Section Basics

In the Intake section, data is stored in the Registrations table. All accepted participants will have their intake saved here. Applications from discoverDYCD first appear in the Online Applications section, but are transferred to the Registrations table once the participant is accepted.

WORKSCOPE Released		500060-COMPASS El	500060-COMPASS Elementary-7/1/2024-8/31/2024 Program Themys				ram Site Program Period myscira Educational Campus 7/1/2024 - 8/31/203			
GENERAL	~	Egistrations	nentary-7/1/2024-8/31/20	These fiel your pai the regis	lds inform where rticipants are in stration process.	e			+NEW Q	
	_	Participant 🔺	Registration ID 🛛 🍦	Stage 🌲	Status ≑	Start Date 🔶	Grade	\$	School Infor	
SERVICE DELIVERY MODS		Bravo, Johnny	REG-1053895332	Accepted	Enrolled	7/5/2024	4th		PS 19 Asher L	
SCHEDULING	~	Vermillion, Donny	REG-1100246821	Accepted	Enrolled	7/1/2024	5th		PS 19 Asher L	
8 PARTICIPATION 1	^	1 - 2 of 2 Click on a pa	rticipant's name					<		
Intake 🛛 🕘		to view the	eir intake form					Ť		
Online Applications										







Intake Stage

On the Registrations table, Participants will display the following stage depending on the completion of their intake.

- Intake: The participant intake is partially completed
- Accepted: The participant intake is complete.
- Wait list: The participant intake may or may not be complete, but the program is currently at capacity and so the participant may not be accepted at this time.
- **Exited:** Participant intake was completed, services may have been delivered, but the participant is no longer attending programming

Intake Status

On the Registrations table, participants will have the following statuses, depending on if they may be enrolled into programming.

- In Progress: Registration is not complete and so the participant cannot be enrolled yet
- Enrolled: The participant is registered and may be enrolled into programming
- **De-enrolled:** The participant was registered, but is no longer attending your program

How do you Submit a New Intake?

Prior to starting a new intake in the Participant Tracking System (PTS), make sure you have received a completed Universal Participant Intake Form from the participant. The current form is available in the <u>DYCD Connect Document Library</u>.

You may create a new intake by navigating through Participation>Intake and clicking on "NEW".



WORKSCOPE Approved	500060-COMPASS Elementary- 9/1/2023-6/30/2024	Period Type Year Provider Program Site Program Period School 2024 CBO1 Themyscira Educational Campus 9/1/2023 - 6/30/2024
🗀 GENERAL 🗸	III De mintere tie me	
PUBLIC PROFILE Y	500060-COMPASS Elementary-9/1/2023-6/30/20	
SERVICE DELIVERY MODS	Participant Registration ID	
🗰 SCHEDULING 🗸 🗸	Allende, Isabel REG-6163350248	Accepted Enrolled 9/1/2023
	James, Lebron REG-2711297298	Accepted Enrolled 9/1/2023
Intake 2	Kent, Connor REG-8260784582	Accepted Enrolled 9/1/2023
Online Applications	Lewis, Huey REG-2862226171	Accepted Enrolled 9/1/2023

Duplication Check

On the new intake page, you must type data into the mandatory fields and then click "SEARCH". This initiates a system scan that searches for participants with the same First Name, Last Name, Date of Birth and Sex at Birth.

 ✓ New Intak First Name Last Name Middle Initial Date of Birth Age Sex at Birth 	C These red astericks indicate the a field must have data entered into it.	David Parker 5/3/2006 18 Male
Sex at Birth		Male
		SEARCH

If a match is found, then you may register a returning participant and import data from their previous intake to expedite the intake process. If a match is not found, then you will need to register a new participant.



Registering a Returning Participant

If an existing participant is found, click on "Register Existing Participant" to associate this applicant with their previous registration. This will enable you to import data from their previous intake.

2. Choose Particip	pant			
We have found review the optic	1 existing participant(s) with t ons below carefully to make th	he same Fi n ne best choi	rst Name, Last Na ice.	me, and Date of Birth. Please
Add New Participant Register Existing Participant				ter Existing Participant
First Name	Test		First Name	Test
Last Name	Test		Last Name	Test
MI			MI	
DOB	5/26/2002		DOB	5/26/2002
Gender	Male		Gender	Male
SSN			SSN	

If you would like to import data from a previous intake, click on "Copy Existing Intake," and then click on "START INTAKE."

	۲	
Blank Application	Cop	y Existing Intake
Start the intake with a blank application.	Registration 1D	REG-2041617232
	Intake Year	2022
	Intake Stage	Intake
	Program Site	
	Workscope	

While importing data from a previous intake populates many sections of the intake, some sections, such as Consents, must be completed again. Providers must review intake sections to ensure that the data is accurate and aligns with the information provided on the participant's Universal Intake Form.



Registering a New Participant

If an existing participant is not found after completing the Duplication Check, then you will have to register a new participant on your workscope. The system will select "Add New Participant" and "Blank Application" by default for Steps 2 and 3. You will need to click on "START INTAKE" to begin your new registration.

Choose Particip	pant	
No matching p	articipants found. A new participant	will be created.
	2+	
Ac	ld New Participant	
First Name	David	
Last Name	Parker	
MI		
DOB	5/3/2006	
Gender	Male	
Choose Applica	tion	
Ð	Blank Application	
Start the ir	ntake with a blank application.	



How do you Complete an Intake?

Using data from the Universal Application, providers must complete data entry on all required fields on the intake before it may be submitted for review. As providers complete data entry, it is highly recommended to periodically save by clicking on the "SAVE" button at the top-left of the page. This ensures that data entry is stored on the system.

Navigating through the Intake

The Intake Switchboard, located on the left side of the intake page, may be used to quickly navigate through the various sections of the intake. Mandatory intake fields are noted by an * icon or say "(Required)" in parentheses.

The Intake Menu Bar allows for specific actions on the intake. For example, providers may click on the "Intake Form" button to view a printable version of the participant intake.





Registration Information

Throughout each intake section, you will click on fields to select from a dropdown list of appropriate responses for each field, or click to type responses directly into them.

After completing data entry on a section, you may use the switchboard or click the "Next" button at the bottom right of the page to navigate to the next section of the intake.





Participant Information

In this section, you will enter various types of demographic information, an address, respond to the gender identity questions, and list a referral source. Your responses may trigger additional fields to appear, requesting additional information.

Participant Informa	ntion		
First Name *	a Davina	Address (Required)	Address
Last Name *	🔒 Parker	Name	Borough Priman
Middle Initial	<u><u><u></u></u></u>	No Degistration Address records found	
Date of Birth *	5/30/2009	No Registration Address records round.	
Age	🔒 15		
Sex at Birth *	🔒 Female		
Race/Ethnicity (Required) *			
Select all that apply	Demographics	b the applicant any of the following:	Additional Participant Information
		Parent/Legal Guardian?*	
low well does the applicant sp	eak Englisi*	Offender/Justice Involved?*	
Primary Language *		In Foster Care?*	
		Runaway Youth?*	
		An Individual with a Disability?*	
Other Languages Spoken		Supplemental Form Submitted?	
Select all that apply		Victim of Domestic Violence?*	
		Victim of Human Trafficking?*	
Applicant's Gender Identity (Sel	lect all that Apply) (Required) *]	
Select all that apply	Gender Identity	Did you or any member of your household serv	e in the armed forces, national guard, or
Does the applicant identify as t Applicant's Gender Pronoun Applicant's Sexual Orientation I	ransgender? (Select One)	How did you learn about the DYCD program(s (Required)*: Select all that apply) you're applying to? (Select all that appl Referral Source

To add an address, click on the "+" at the top right of the Address table.

Address (Required)		Ð
Name	Borough	3
583 w 212 st, Manhattan, NY 10034	Manhattan	
4		÷



On the popup overlay, click to type data into each field. After selecting a borough, the system will auto-fill the zip code if the addressed is recognized as a valid address. Then, you may review the Address Verification information at the bottom of the overlay.

If the address is valid, click "SAVE" at the top-left of the overlay to add the address to the intake. Then, click the "X" at the top right to exit the overlay.

For all remaining fields, click on all fields or magnifying glass icons to access dropdown options and select options for all mandatory fields. Once data entry is completed, click "Next" at the bottom right to navigate to the next section.

🗅 New Address		$\mathbf{\times}$
SAVE	I FORM EDITOR	
	INFORMATION	
New Reai	stration Ad -=	
new neg	500001770 =	
Primary Address?		
Mailing Adress		
Number & Street *	2 lafayette st	
Apt		
Borough	Manhattan	
City *	Manhattan	
State *	M NY	
Zip Code *	10007	
Country *	United States	
Validation Status	Address is valid	
Address Verification		
Community District	Manhattan CD 001	
City Council District	Council District 001 Manhattan	
NTA 🔒	MN24	
NDA	Out of NDA	

Davina Parker			Registration ID REG-1279144655	Start Date	Age 15	DOB 5/30/2009	Provider New York Edge, Inc.
Participant Information							
First Name *	🔒 Davina	Address (Required	D				-
Last Name *	🔒 Parker	Name			Bor	ough	Primary Address?
Middle Initial	··	2 lafavette stre	et Manhattan NV 100	77	Manh	attan	Ves
Date of Birth *	⋒ 5/30/2009	2 Marayette Sale				accarr	100
Age	1 5						
Sex at Birth *	🔒 Female	k the applicant ap	of the following:				
Race/Ethnicity (Required) *		Parent/Legal Guard	ian?*	No			
		Offender/Justice In	volved?*	No			
Asian × Select all that apply		In Foster Care?*		No			
I f of Asian origin, please select from the follo	owing (Select All That Apply):	Runaway Youth?*		No			
Chinese X Hmong X Select all that app	ulw.	An Individual with	a Disability?*	No			
	.,,	Supplemental Form	Submitted?	No			
How well does the applicant speak Englisl*	Fluent/Very well	Victim of Domestic	Violence?*	No			
Primary Language *	English	Victim of Human Tr	afficking?*	No			
Other Languages Spoken		Did you or any mer	aber of your bousebol	d serve in the	armed f	iorces nationa	louard or reserves of th
Coloct all that apply		Yes	iber of your nousenor	a serve in are	. annea i	orces, naciona	i gaara, or reserves or a
select an triat apply		Would you like to I No	oe contacted by the N\	/C Departmer	it of Vete	ran Services?*	
Applicant's Gender Identity (Select all that A	pply) (Required) *	110					
		How did you learn	about the DYCD prog	ram(s) you're	applyin	g to? (Select al	l that apply)(Required)*
Female X Select all that apply		Word of mouth :	Advertisement ×	Select all tha	t apply		
Does the applicant identify as transgender? Applicant's Gender Pronoun	No She/Her/Hers			Clar	lick 'Ne e ready	xt' when yo y to move or	Next >



Contact Information

In this section, providers will enter in contact information for the applicant and at least one parent or emergency contact. At minimum, an email address must be provided. If the participant is under 14 years of age, the system will request the Parent/Guardian's email address.

Youth is und	ler age 14	Youth is	s age 14+
 Contact Information 	۱	 Contact Information 	
Applicant's Contact Information		Applicant's Contact Information	
Cell Phone *	(718) 111-1111	Cell Phone*	(929) 333-2221
Dreferred Method of Contact	Coll Phone	Preferred Method of Contact *	Cell Phone
Preferred Method of Contact	Cell Phone	Home Phone	
Home Phone		E-mail *	spicyaaliyah@gmail.com
Parent/Guardian E-mail *	mrogers@fakeemail.com		

To enter Parent/Emergency Contact information, click on "+" and enter the information on the overlay.

Parent/Emerger	ncy Contact (Requi	red)		+
Name	Relationship	Primary Contact? \downarrow	May Pick-up Child? Cell Phone Work Phone	Home Phone
Nathan Jung	Father	Yes	Yes	(646) 111-2222

If you are entering multiple Parent/Emergency contacts, the first contact you list will be marked as the Primary Contact.

On the Universal Intake Form, you may also receive information denoting additional people who may or may not pick up the child. Use the following table to list them:

Additional people who MAY	or MAY NOT pick-up the child			(+)
Name of Person Λ	May Pick-up Child? 🛧	Relationship	Phone	
Sandy Thomas	Yes	Child Care Provider	(718) 455-3456	
Tony M.	No	Friend of the family		



Education/Work Status

In this section, providers will ent the participant. Select the appro	er school and work details related priate responses using the	d to Current Grade *
information provided in the Univ	versal Intake Form.	O (None)
		O Pre-K - Elementary School
Education (Mark St	atuc	🔘 K - Elementary School
- Education/ Work Sta	atus	1st - Elementary School
Student Type *	Full-Time Student	🔘 2nd - Elementary School
Educational Level	🔒 Elementary School	3rd - Elementary School
Current Work Status*	Employed Full-Time	4th - Elementary School
OSIS/Student ID		5th - Elementary School

If the participant is a full-time student, you must enter the participant's School Information by clicking on the "+" icon.

School Information (Required for Full-Time St	tudent)	÷.
School Name 🛧	School Type	- ÷
No Registration School records found.		



You may find a school by clicking on the magnifying glass icon and clicking on "Look Up More Records" to access the school overlay. Alternatively, you may run a power search by typing *, a keyword, and pressing enter on your keyboard.

Ex. If your school's name is IS73 - The Frank Sansivieri Intermediate School, then you may consider *73 or *frank as power search options and then click enter on your keyboard to quickly find the school's name in the drop-down options.



Household Information

This section collects information about the participant's household and income. Click each field, and then select the appropriate responses based on information provided in the Universal intake form.

 Household Information 				
Head of Household Type *	Two Parent Housef	old Total Household Income	*	
Housing Type *	Rent	(None)	\$24,601 - \$28,780	\$60,001 - \$70,000
Household Size *	Three	\$0	\$28,781 - \$32,960	\$70,001 - \$80,000
Annual Income Amount*	75.000		\$32,961 - \$37,140	\$80,001 - \$90,000
		Total Household Income will	\$37,141 - \$41,320	\$90,001 - \$100,000
Decline to Answer Income Amount?	U	update after Annual Income	\$41,321 - \$50,000	\$100,000+
		Amount field data is saved.	\$50,001 - \$60,000	Decline to Answer
Sources of Household Income (Required)				
Childcare Voucher × Employment Wag	select all that app	Multiple sources of i should be included if a	income ppropriate	

Health Information

In this section, health-related data is stored. Select "Yes", "No" or "Decline to Answer" for all fields in this section. If "Yes" is selected, then additional fields may appear to collect more information to further explain the health issue or situation.

Health Information	Health Insurance Status
Does the applicant have any allergies? (food, medication, etc.) * Yes Please provide list of allergies * Peanuts, Pollen Does the applicant have asthma? * No	Does the applicant have health Insurance? * Decline to Answer
Does the applicant have special health care needs?* No	
Does the applicant take medication for any condition or illness? * No	
Are there activities the applicant cannot participate in?* No	



Consents

This section collects consent information from the participant for various privileges. The "Consent to Participate/Verification of Information Provided" must be received to submit the intake. All other consents may be marked as "Yes" or "No."

<u>Note</u>: The types of consents requested may vary across the COMPASS programs, but the procedure to respond to them will remain the same.

Consents

General Program Consents

Consent to Participate/Verification of Information Provided * Yes	¢
Participant may travel home alone *	
No	
Consent for Emergency Medical Treatment *	
No	
Participant Consent for Photo/Videotaping *	
No	
Participant consent for use of original work *	
No	
Participant Consent to Share Data for DYCD Referrals *	
No	

What Actions can you Complete on an Intake?

Once you have completed data entry in all sections of the intake, click "SAVE" in the Intake Menu Bar. Then, click on the "Three Dots Icon" at the top right of the intake switchboard to take actions on the intake.

- REGISTRATION
Intake
 Add to Waitlist

 Intake
 Add to Waitlist

 Check Eligibility
 Submit

 PARTICIPANTI
 Deactivate

 CONTACT INFC
 Copy URL
- Add to Waitlist this option adds participants to a waitlist on your workscope. This is used when your program is at maximum capacity and cannot support

another participant. When a seat opens, there is an option to remove participants from the waitlist. This action will prompt the intake form to revert to the intake/submitted status, allowing you to submit and enroll the youth into the program.

- **Check Eligibility** this option will make the system review all fields on the intake for completion and run an eligibility check based on the data provided to ensure that they may join your program.
- **Submit** this option will submit the intake application for final review by the system. If all data entry has been completed, then the participant will be accepted into your program.
- **Deactivate** this option will delete the entire intake. This is typically used when multiple intakes were accidentally created for the same participant.



How do you Respond to Online Applications?

If your program receives intake applications through discoverDYCD, then they will appear in the Online Applications sub-section of the workscope under Participation.

Reviewing & Taking Actions on Online Applications

STEP 1: Navigate through Participation>Online Applications and click on a participant's name to view their application.

WORKSCOPE Released	:	50006	0-		-7/1	/2024-8,	/31/2024	Perio Sum	d Type mer Year	Year 2025	Provider CBO1	Program 7/1/20	n Period 24 - 8/31/2024
🗅 GENERAL	~	⊞ R	egistratio	ns	-7/1/2024	-8/31/202	4						Q
D PUBLIC PROFILE	~												
SERVICE DELIVERY MODS		Part	icipant	\$	Stage	÷	Status	÷	Applicat	ion Subm	itted On	DOB	\$
SCHEDULING	~			-	Intake	_	Submitted	-	_	_	7/1/2021		1/1/2014
8 PARTICIPATION	^	1 - 1	011									\ 1	
Intake													
Online Applications 2													
Activity Enrollment													

STEP 2: Click on the "Three Dots Icon" and select "Check Eligibility" to see if the participant is eligible to join your program based on the information provided.





STEP 2B: If the participant is ineligible, then click "Decline Participant" from the options under the "Three Dots Icon". Then, select the reason to decline the applicant, add any additional comments at the bottom, and then click "OK" to decline the application.

Decline applicant X
Please select the reason and enter any comments. All information entered here will be sent to the applicant via email.
Please select the reason to decline applicant.
Applicant paperwork is incomplete Program staff are unable to contact Applicant Applicant is not eligible for the program Program is full at this time Enrollment period is closed for this program Applicant did not accept a slot in the program Program staff referred Applicant to another program Enter Comments 2
3 OK CANCEL

STEP 3: If the participant is eligible to join your program, then review the sections of the intake to review the data submitted to ensure that it is accurate. If any information is missing, then you may set the status of the intake to "Pending Info" via the "Three Dots Icon" menu. Then, contact the applicant to gather the missing information so that you may update the intake.





STEP 4: If all the data provided looks accurate, then you may add the "Enrollment Start Date" for the participant to denote when they may begin attending your program.

Participant *	Lily Benjamin							
Registration ID	REG-4582310144							
Registration Stage *	Intake							
Registration Status *	Submitted							
Form Completed By *	Parent/Guardian							
Date Application Received *	7/1/2024							
Enrollment Start Date *	7/1/2024		5 v					
		4		Jul	y 20	24		
		Su	Мо	Tu	We	Th	Fr	
		30	1	2	3	4	5	
		7	83	9	10	11	12	
		14	15	16	17	18	19	
		14 21	15 22	16 23	17 24	18 25	19 26	
		14 21 28	15 22 29	16 23 30	17 24 31	18 25 1	19 26 2	

STEP 5: Click the "Three Dots Icon," and then click on "Submit." In the pop-up window that appears, click on "Submit" to confirm the intake is ready for submission.

REGISTRATION	:
Add to Waitlist	
REGISTRATION Check Eligibility	
9 PARTICIPANT Pending Info	_
CONTACT INF	t
Copy URL	



How do you Update Participant Information?

As the program period progresses, COMPASS providers may need to update intake information. Some common updates are correcting participant names & date of birth, as well as updating contact information.

Updating Name / Date of Birth / Gender

Step 1: In the Registration Information section, click on the participant's name in blue text.

Step 2: When the new browser window opens, make the necessary changes, and then click "Save & Close."



<u>Note</u>: You will not be able to make modifications if the participant is registered at another program site during the same period (Summer, School, or Fiscal Year). In this situation, reach out to the <u>DYCD Connect Help Center</u> for additional assistance.

Click "SAVE" to apply the changes.				
Davie Parker -=				
- General	Click to type & modify any of the fields.			
Participant ID	PAR-000053 755			
First Name *	David			
Last Name *	Parker			
Date of Birth *	5/31/2009			
Sex at Birth: *	Male			



Updating Parent / Emergency Contact(s)

Step 1: In the Contact Information section, click on the contact's name to open their information page.

Parent/Emergency Contact (Required)			
Name	Relationship	Primary Co	ntact? \downarrow Cell Phone
Paula Stark	Mom	Yes	(646) 555-5555

Step 2: Update the information and then click "SAVE" to apply the changes.

🗅 Emergency Contact	
Click "SAVE" to app the changes.	lγ
REGISTRATION CONTACT : INFORMATIO	N
Paula Stark -≡	
Contact Method	Make changes directly to the fields.
Preferred Method of Contact *	Cell Phone
Cell Phone	(718) 444-4444
Work Phone	



DYCD Connect Help Center

If you have any questions or concerns, please submit a ticket or help request to the DYCD Connect Help Center. You may navigate to the Help Center directly from the banner at the top of DYCD Connect by clicking on the question mark as shown below.



Alternatively, you may submit a ticket through the <u>Help Center</u> on the DYCD Connect homepage.

DYCD RESOURCE CENTER	DYCD HE	LP CENTER		
DYCD Connect is the main resource center to help organizations communicate and coordinate with the communities they serve.	The DYCD help center is where you can fi operational issues you may come across. H look into additonal resources and guides the	ind resources to help with the technical and lere you can contact DYCD support directly or at can help you move forward with your tasks.		
	firstname Ditter your first sense	A Setname Ditry our last name		
View DYCD's public website for Information about our funded programs.	Confer your phone number	E email Enteryour e mult address		
	organization Select an Organization			
CB CAPACITY BUILDING DYCD Invests in building the capacity	🖨 programania – Select a Program Ania –	B program type Select a Program Type •		
strategy to help ensure that youth and families receive high-quality services.	I am a DYCD employee			
HELP CENTER	NEED TECHNICAL	NEED OPERATIONAL		
Having trouble? Send a message to our support team through the Help Center.	ASSISTANCE?	ASSISTANCE?		
	If you are having a technical issue related to logging in, accessing your services, or experiencing a bug, contact the technical help desit	Having trouble performing your existing operations using the new systems and tools within DYCD contect? Get in touch with a program specialist		
F.A.Q				
Read Frequently Asked Questions to learn more about DYCD Connect.	Detailed Description			
	Enter a detailed description			

