



Reference Document for Link2Feed Client Intake: **Creating New Client Profile**

This document serves as a best-practice guide for utilizing the Client Intake function within Link2Feed to ensure all our sites are using the software in the same way. This allows us to record the most accurate data.

**For questions on Link2Feed, please contact Kara Stewart: kstewart@rfbo.org
or Katharine Morgan: kmorgan@rfbo.org**

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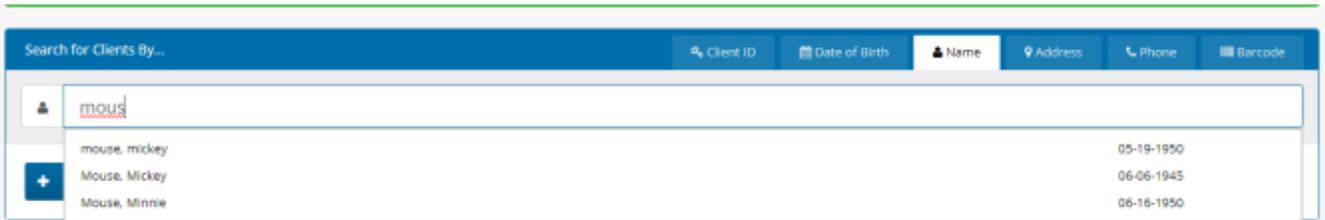
Link2Feed Standard of Use

Every user at every partner agency is expected to use the system the same way in order to preserve the integrity of the data. The following instructions should be provided to everyone at your location that will be utilizing Link2Feed to ensure consistent intake practices and system use.

First Things First

Always begin by searching through existing clients before entering new data.

Within Link2Feed, you can search by name (first, last, or both), date of birth, address, and phone number. If no client match is found, **then** create a new client profile.



When creating a new client profile, Link2Feed is dynamically comparing the information you enter against information already in the system to avoid duplicate profiles.

Entering New Clients:

When entering a new client profile, it must be completed within 72 hours or the information will be removed from the system. As a reminder, clients have a right to choose not to disclose information being asked; if this is the case, please select "Undisclosed" as the appropriate option. **A profile is not considered "complete" until the first 4 tabs (Personal, Profile, Monthly Income, and Dietary Considerations) are completed and saved.**

1. Personal Tab

This is where you will enter the Head of Household's information, including information on the members in their household.

- Under "First Food Bank Visit," please select "Today" regardless if entering a new or existing client. This is a required field within Link2Feed that we are unable to remove. **Note:** If you do happen to know the client's original intake date, please feel free to use that date here.

* First Food Bank Visit

Select

Select

Unknown

Today

Specific Date

mm-dd-yyyy

- If a client is uncertain regarding their date of birth, you may check the “Date of Birth Estimated” box to indicate that it may not be exact. **However**, please note that without proof of date of birth, this could impact their eligibility for CSFP, if your agency participates in the CSFP program.

* Last Name

* First Name

* Date of Birth

Age

* Gender

Is Date of Birth Estimated?



- A consent signature **is required for every client**. You may have them sign using an electronic signature “script” pad, a hard-copy intake form, or by using a touch-screen or mouse. If they sign a hard-copy intake form, please keep the form for your records. The hard-copy intake form does have an abbreviated version of this text, which is also supported by the Client ROI sign from the prep packet.

Consent Signature

Client eSignature

Disclaimer
 The Regional Food Bank of Oklahoma respects your information and wants to ensure it remains private. Providing information electronically can be safer than providing information on paper. Only certain staff and volunteers can log in to the system, and each person has been trained and has signed an agreement to keep your information private.

We may use your personal information for a variety of reasons:

- **To Improve Our Programs:** We may use your information to improve our programs or activities. For example, staff and/or volunteers may look at information to improve our service to you (example: food selection, community referrals or onsite resources).
- **To Do Research:** We may use your information for research and analysis to review the quality of services that people receive. Any reports produced with the data will not identify your individual information. Our staff and/or volunteers will only share your information with qualified persons outside of our organization.
- **To Connect You with Other Programs:** At your request, we may share your personal information to see if you are eligible for other benefits or programs such as Social Security benefits or SNAP.
- **To Report Abuse, Harm or Neglect:** We are required by law to report any cases of suspected abuse or neglect of children or vulnerable adults. We are also required to share information about you to law enforcement in certain cases, for example, if you cause harm to a member of our staff, another client, or if you damage our property. We may also share your personal information in case of a threat to the public, such as a terrorist attack or natural disaster.

Signature Type

ScripTel Signature Pad
Sign On Screen
 Hard Copy Signature
 ScripTel Signature Pad
 signature pad or click "Clear" below to clear signature and re-take it.

Clear

Date
 10-08-2019

Cancel Save Changes

- When entering the address, Link2Feed will begin searching valid addresses that match. **Please be sure the address that populates exactly matches what the client provides to you.**

Street

3355 South

3355 S Purdue Ave, Oklahoma City, OK, USA
 3355 SW 17th St, Oklahoma City, OK, USA
 3355 S, Larimer County, CO, USA
 3355 S, Burlington, NC, USA
 3355 S Pm 373, Cooke County, TX, USA
 3355 S Custer Ave, Wichita, KS, USA
 3355 S Chase Ave, Wichita, KS, USA
 3355 S Gordon Ave, Wichita, KS, USA
 3355 S Edwards Ave, Wichita, KS, USA
 3355 S Richmond Ave, Wichita, KS, USA

Other
 Own Home

Undisclosed
 Unhoused

Map

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- If your client identifies as having no fixed address, please check the box indicating "Homeless/No Fixed Address." This will remove the option to enter an address. In either instance, you will still need to identify the Housing Type. **For any other questions about housing type, please contact RFBO.**

1. Private Rental is considered a non-subsidized property where the rental agreement is between residents and the leasing company or private owner.
2. Public/Social Housing is considered government housing or subsidized housing. In public housing, the government owns the building and is the landlord; in subsidized housing, the housing authority is not the landlord but owned and operated by private owners who receive subsidies in exchange for renting to low- or moderate-income persons.

* Street

* City

* County

* State

* Zip Code

No Fixed Address / Undisclosed



* Housing Type

- | | | |
|--|---|---|
| <input type="radio"/> Emergency Shelter / Mission / Transitional | <input checked="" type="radio"/> Private Rental | <input type="radio"/> With Family / Friends |
| <input type="radio"/> Evacuee | <input type="radio"/> Public (Social) Housing | <input type="radio"/> Youth Home / Shelter |
| <input type="radio"/> Other | <input type="radio"/> Undisclosed | |
| <input type="radio"/> Own Home | <input type="radio"/> Unhoused | |

- When confirming a client’s ID, please select the form of identification you reviewed. Please **do not** enter any unique detailed information, such as the Driver’s License Number, within the “Confirmation” box. Instead, please enter the initials of the agency worker who verified this identification and the date. The confirmation box **must** be filled out to save the profile information.

ID Type

* Confirmation



+ Add

- The “Referred By” section populates a dropdown where you can search for the appropriate party that referred your client to your agency. If the client did not receive a referral, there is a “No Referral” option. **Please note this section is required**, so you will need to choose an option.

Referred By

No Referral

Immigration/Newcomer Services

Legal Support

Media/News/Outreach

Mental Health Support or Education

No Referral

Nutritional Education

Other Food Bank Program

- The “Self-Identifies As” section refers to **military status** exclusively. The “Disability” option listed here refers to disabled veteran and should **not** be used to indicate any other type of disability.

Ethnicity

White / Anglo

Black / African American

Hispanic / Latino

American Indian / Native American

Asian

Alaska Native / Aleut / Eskimo

Middle-Eastern / North-African

Pacific Islander

Other

None

Undisclosed

Self-Identifies As

Military Active Duty

Military Reservist

Disability

Veteran

Other

None

Undisclosed

Household Members

Please enter **any** member associated with your client’s household, even if another household may be claiming them. L2F provides a feature to note that members are shared with multiple households; this is covered at the end of this document under the “Linking Household Members and Managing Potential Duplicates” section.

Household Member Info

* Last Name

* First Name

* Date of Birth Age

* Gender

* Relationship

Is Date of Birth Estimated?

* Ethnicity

White / Anglo

Black / African American

Hispanic / Latino

American Indian / Native American

Other

None

Undisclosed

Asian

Alaska Native / Aleut / Eskimo

Middle-Eastern / North-African

Pacific Islander

* Self-Identifies As

Military Active Duty

Military Reservist

Disability

Veteran

Other

None

Undisclosed

ID Type

* Confirmation

- If the client is uncertain of a member’s date of birth, please use the “Date of Birth is Estimated” checkbox to indicate this.

- If a client is uncertain of a member’s ethnicity or military status, please use the “Undisclosed” option.

- ID Type is **not required** for members of the household.

2. Profile Tab

This information pertains **only** to the Head of Household. The Education and Employment information **is required** to save a client’s profile. If necessary, please select “Undisclosed.”

* Highest Education Level Completed

Grades 0-8

Grades 9-11

High School Diploma

GED

Post Secondary (some)

Tradeschool / Professional Accreditation

2 Year Degree

4 Year Degree

Master's Degree

PhD

Undisclosed

* Employment Type

Self-Employment

Unable to Work Due to Disability

Unemployed

Working Multiple Jobs

Post Secondary Student

Full-Time

Part-Time

None

Undisclosed

Other

Retired

3. Monthly Income

This information will be used to determine TEFAP eligibility, and to provide better data on the current needs of the household. If your agency distributes USDA commodities, you will have a separate TEFAP tab.

- **It is only required to enter information for the Head of Household**, although you may enter information for everyone within a household if it is known and/or available. When entering income, please be sure to mark the “Primary” box and identify the source of income in order to save.
 - As a reminder, **Oklahoma is a self-declare state**, meaning proof of income is **not** required and **cannot** be requested.
 - This is only meant to track **gross** income; please **do not** count other benefits such as SNAP as a source of income. SNAP is awarded based on income and **cannot** be included as income.

Monthly Income

* Marvin Mouse (34 years old)

Primary	Income Type	Monthly Amount
<input checked="" type="radio"/>	Employment Income	\$ 1200.00

+ Add

- If possible, please also enter any additional benefits the head of household and/or members of the household are receiving. **This is not required.**

Marvin Mouse is receiving the following:

- | | | |
|--|--|------------------------------|
| <input type="checkbox"/> CSFP / Senior Boxes | <input type="checkbox"/> Medicare | <input type="checkbox"/> WIC |
| <input type="checkbox"/> Disability / SSI | <input checked="" type="checkbox"/> SNAP / Food Stamps | |
| <input type="checkbox"/> FDPIR (Tribal Benefits) | <input type="checkbox"/> TANF | |
| <input type="checkbox"/> Medicaid / Sooner Care | <input type="checkbox"/> Veteran Benefits | |

4. Dietary Considerations Tab

This tab is meant to list any allergies or preferences a client may have for food assistance. It is **not** meant as a guarantee that your agency or RFBO will always be able to provide options for those needs and preferences. If your client does not have any allergies or preferences, you **do not** have to mark any here.

- Dietary Considerations
- | | |
|---|---|
| <input type="checkbox"/> Dairy | <input type="checkbox"/> Peanut Allergy |
| <input type="checkbox"/> Diabetic | <input type="checkbox"/> Vegan |
| <input type="checkbox"/> Gluten Allergy | <input type="checkbox"/> Vegetarian |
| <input type="checkbox"/> Halal | |
| <input type="checkbox"/> Kosher | |
| <input type="checkbox"/> Low Sodium | |

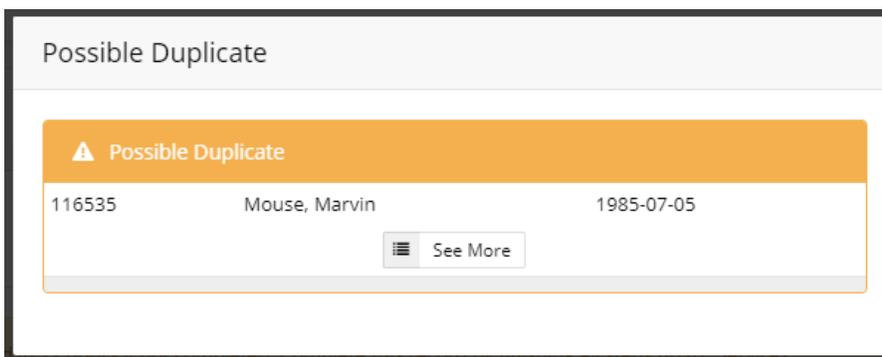
Once you have completed these tabs, your client’s profile is considered complete and will be stored within Link2Feed. You will now be able to search for this client, as well as any of their household members.

Linking Household Members and Managing Potential Duplicates

When creating a new client profile, Link2Feed is dynamically comparing the information you enter against information already in the system.

In instances where separate households are claiming a single client, it is possible to associate the client with each household to avoid duplication. Most commonly, this will become evident when a new client entering information during intake lists a member that is already within the Link2Feed system. **When this happens, a “Possible Duplicate” pop-up will appear.**

- First, verify whether the information entered matches the possible duplicate listed and is in fact the same person. You may do this by clicking the “See More” button.



- This will generate a new window with additional information for you to compare against the information entered for the potential duplicate profile.

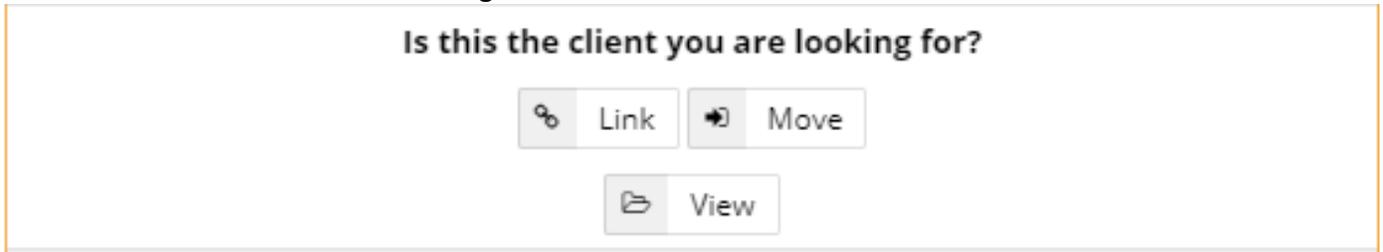


- **If the information does not match**, please click the “No” button to dismiss the duplicate. This instance of possible duplication will still be recorded and can be reviewed or modified later, if necessary.

- **If the information matches**, please click the “Yes” button to confirm that this is the same person.

If this client is associated with another household, this will populate a new option:

- Choose “**Link**” if this member belongs to more than one household. This may be the case for grandparents who take care of grandchildren during the summer, other custody arrangements, et cetera.
- Choose “**Move**” if the member has completely vacated the other household and now solely resides in the household being entered.



As you may notice, the system **does not** allow for duplicate accounts to be created. Every instance of possible duplication, and possible duplications that have been marked as dismissed, are recorded for review by your agency manager and Regional Food Bank. This is to help ensure and maintain the integrity of unduplicated data regarding the clients we serve.