



Quick Look at Assessments

Use this Quick Look Guide to learn how to complete assessments and view Social Determinant of Health information in **kynect resources**.





To view a Resident record, search the client from the organization inbox, or use the Client Search link, or from the **Referral Inbox**, by clicking the **Edit** button next to the Referral

ct	Q, Searoh Keyword		Search By	Category 🔻				Referral Inbox
rkspace	Deferre	linhav						
Inbox	Referra	xodul I						
Outbox	Client		i	.coation			Resource	
Dashboard	Searoh		Q	1 items selected		*	0 items selected	
	Status			Created			Days Open	
	3 items selected		Ψ			Ħ	None	•
arch								Search
orites	ID	First Name	Last Name	Referral Date	Created	Resource	e Location	Status
ation	DEE-2367	Alevia	Dale	1/4/2022	106 days and	Animal Shel	tere Alberry 1	
5								





On the Referral Details screen or from the search results screen, Click the **Resident Name** which is a blue hyperlink.







If Consent has not previously been provided, Click the **Request Consent** action button.

← Back to Clients	Needs - SDOH			
Request Consent	Create Referral			
Client Information	• 	Contact		
Client ID	Gender	Email Address	Contaot Preference	
DOB		Mobile Phone		





Consent is granted via email, text or captured verbally. Select the method of consent request. If **Send Email** or **Send Text** is selected, the **kynect resources** system will generate a **Consent** request to that resident. Once the resident responds to kynect via email or text, Consent is granted to view their information.

My Workspace Referral Inbox	Client Search								
Referral Outbox	Search Full Profile	My Clients							
Referral Dashboard Reports	* First Name Q. Amy		* Last Name Brand	*DOB 01/01/1990	🗃 Search Re	set			
Client Search	First Name 🕇		DOB			View			
My Favorites	Amy	Brand	01/01/1990	amy.brand@mailinator.oo	rm (707) 244-9958	*			
Organization	Requ	lest Access		×					
Resources	You de	o not have permission	to view Amy Brand's full informat	tion. Please request					
Staff	conse	nt via one of the optio	ns below. Send Email Send Te	ext Verbal Consent					





When meeting with the resident in person or via phone, the resident may provide **Verbal Consent**. Read the resident each statement and check the box to acknowledge agreement. When completed, click **Submit**.





From the OneView Screen, users can **Start Assessment**, view the resident's Social Determinant of Health Risk Factors and see the date and source for previously completed Assessment(s).

← Back to Clients	well	_				Referrals	in Progress	View My Plan	
Send Email	Add Note	Create Referral	itart Assessment			2	0	0	
Client Information	I.		Contact			Risk Fact	tors	View All	SDoH
Client ID 901007575	Gender Female		Email Address estill@gmaill.com	Pr	eferred Contact Method nail	 Stable Childca Education 	 Vulnerable re 	In-Crisis N/A	Information i populated
DOB 12/01/1985			Mobile Phone (303) 241-2679	Ac 12 FR	ldress 3 MAIN STREET NEW LANE ANKFORT, KY 40601-	Food Housing Access Career	to Services Resiliency/Trainir	na	assessments within kynec
Household		View All	Enrolled Programs	5	View All	Clothing]	e.	resources o
Client 🕑	Age 🔽	Relationship 🔽	Program 🖂	Start	Renewal	Employi English	Language Skills		Health
CLARK MERCER	19	Son	КТАР	6/1/2015	4/1/2016	Iranspo	rtation		Information
HAPPY BROTHER	35	Brother/ Half-Br	Medicaid	6/1/2015	4/1/2016				Exchange
(Child)	9	Son	Qualified Health	6/1/2015	4/1/2016				(KHIE) data
RICHARDO POW	59	Husband							
Assessments		View All	Notes		View All				
Date N	Name 💟 Tak	sen By 💟	Subject 💟 C	Created Date	Created By 💟				
1/21/2020	kynect Cat	therine Eliza 🔹	Estill is expect 1	/21/2020	Catherine Eliza 🔹				

Assessments inform SDOH data. This tab indicates the date of last assessment and from where it came.





Click the Get Started action button to begin the Needs Assessment

kynect	Q Search Keyword Search By Category 💌	Referral Inbox
My Workspace Referral Inbox Referral Outbox		
Referral Dashboard Reports	Needs Assessment	Get Started
Client Search		
Organization		
Resources Staff		





Enter the Resident **address** in the field, then click **Next**

kynect resources will return suggested resources based on the Assessment results and location.





Obtain an answer to each question from the resident. Indicate the response by clicking the radio button next to the appropriate response.

resources

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Click Next to navigate to the next question. Complete all questions and select Submit.

There are currently 18 Social Determinant of Health questions in the Assessment. Assessment questions align with the Kentucky Health Information Exchange SDoH categories.

kynect	Q Search Keyword Search By Category V Referral Inbox
My Workspace	<= <u>Back to Surveys</u>
Referral Inbox	Needs Assessment
Referral Outbox	
Referral Dashboard	Question 1 of 18
Reports	
Client Search	1 Which best describes your bousing situation?
My Favorites	V. do not have stable housing
Organization	 am temporarily living with a friend or family member
Resources	am currently not paying my rent/mortgage and in danger of eviction
Staff	o am paying my rent/mortgage, but it is unaffordable (over 30% of income)
	am currently utilizing a rent/mortgage assistance program
	pay my rent/mortgage without difficulty
	Previous Next



Assessment results are displayed to indicate the risk level.





Users may View Responses or navigate through the suggested resources based on the Assessment results.



After an Assessment has been completed, the resident detail screen will update the **Needs-SDOH risk factors** and the **Assessment** field is updated with the updated **Assessment date** and details.

resources

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orkspace	← Back to Clients						Referral		View My Plan
alInbox	Alexis Dale								
al Outbox	Alexis Dal	Alexis Dale							Closed
al Dashboard	Send Email Ad	d Note Create Referral	Assessments	+ Add to My	Clients		1	2	5
ts	Client Information		Contact			_	Needs -	SDOH	View All
Search	Client ID	Gender	Email Address	Con	taot Preference		• Employ	ment	
vorites		remaie	alexisdale@disp	ostable.com Ema			Housin	9	
ization	DOB 01/01/1990		Mobile Phone (707) 244-9958	Add	ress		 Income Legal 	•	
roes	00000000		0007244 7700				• Comm	unity Involvement	
	Household		Enrolled Progr	ams			• Food		
	Client Age	Relationship	Program	Start	Renewal		 Life Sk Mobilit 	v	
	There are no	records to display	The	re are no record	ds to display		 Adult 8 	ducation	
							Childo	are	
	Assessments	View All	Notes			View All			
	Date Name	Taken By View	Subject	Created Date	Create	View			
	4/20/2022 Needs /	ases Julie Macaron 👻	note title	8/19/2020	Partner Admin	•			
	8/19/2020 Needs A	ases Partner Admin 💌							





Thank you

For additional support, please use the Help section in **kynect resources** or email <u>kynectresources@ky.gov</u>