

Apricot Data Entry Instructions

Family support

September 2026

Contact:

Ulises Sanchez

usanchez@oaklandca.gov



Table of Contents

03	Deliverables
05	Family Outreach Form
12	Participant Record
21	Program Enrollment Form
28	Service Note Form
34	Referral Form

An aerial photograph of a densely populated residential neighborhood. The houses are mostly two-story structures with varying rooflines, interspersed with trees. In the background, a range of mountains is visible under a cloudy sky. The word "Deliverables" is superimposed in the center of the image.

Deliverables

Deliverables

Outreach to next-of-kin

- Percentage of families contacted within 72 hours of next-of-kin information being received. **(Family outreach form)**

System navigation and financial support

- Number of families served. **(Participant record + service notes form)**
- Amount of funding disbursed for family support. **(Service notes form)**

Deliverables

Clinical therapy

- Number of individuals served through clinical therapy.
(Participant record + service notes form)
- Number of service hours received through clinical therapy.
(Service notes form)

Support groups

- Number of healing/support groups hosted. **(Group activity form)**
- Number of attendees at healing/support groups. **(Group activity form)**

An aerial photograph of a densely populated residential neighborhood. The houses are mostly two-story structures with varying rooflines, interspersed with trees. In the background, a range of hills or mountains is visible under a sky filled with soft, white clouds. The overall tone is slightly desaturated, giving it a calm, community-oriented feel.

Family Outreach Form



Family Outreach Form

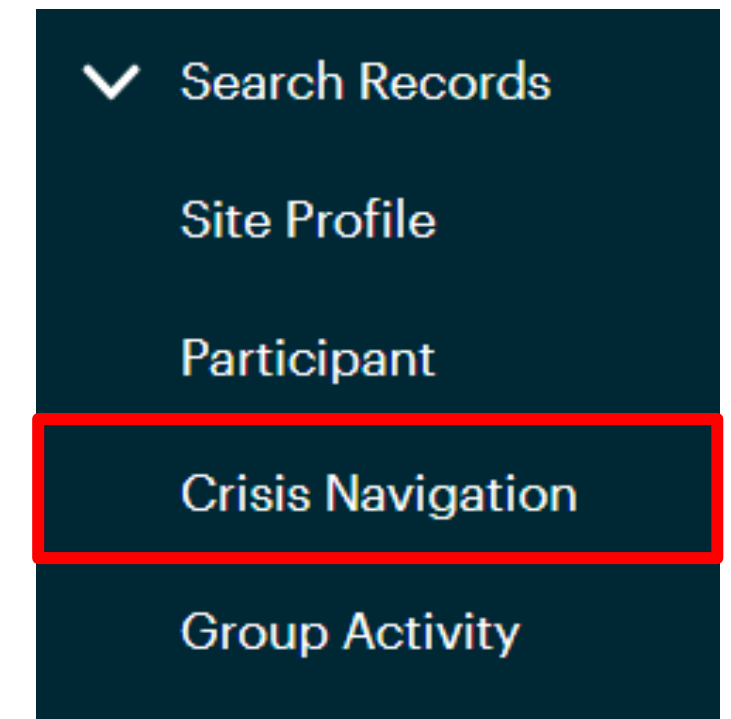
A **family outreach form** should be entered to document outreach to next-of-kin following a homicide. One **family outreach form** should be completed for each homicide.

If a family accepts services, a **participant record** should then be created for the next-of-kin and **service note forms** should be entered to document services delivered.

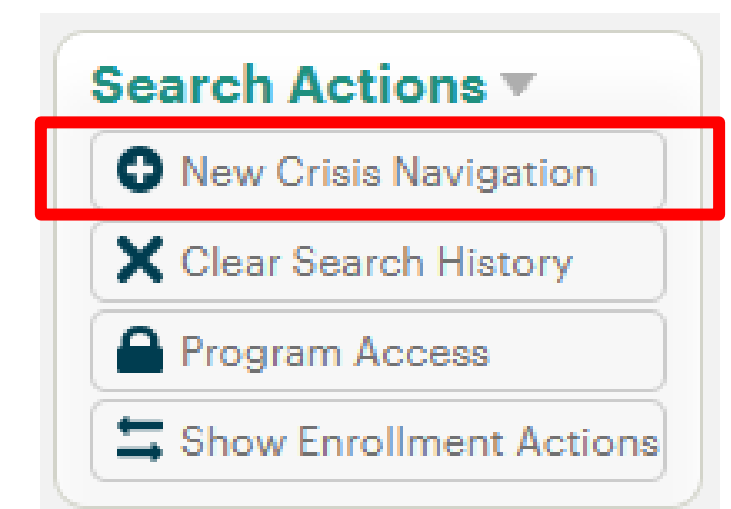


Entering a Family Outreach Form

Step 1: Select “Family Outreach” on the left side of the screen under “Search Records.”



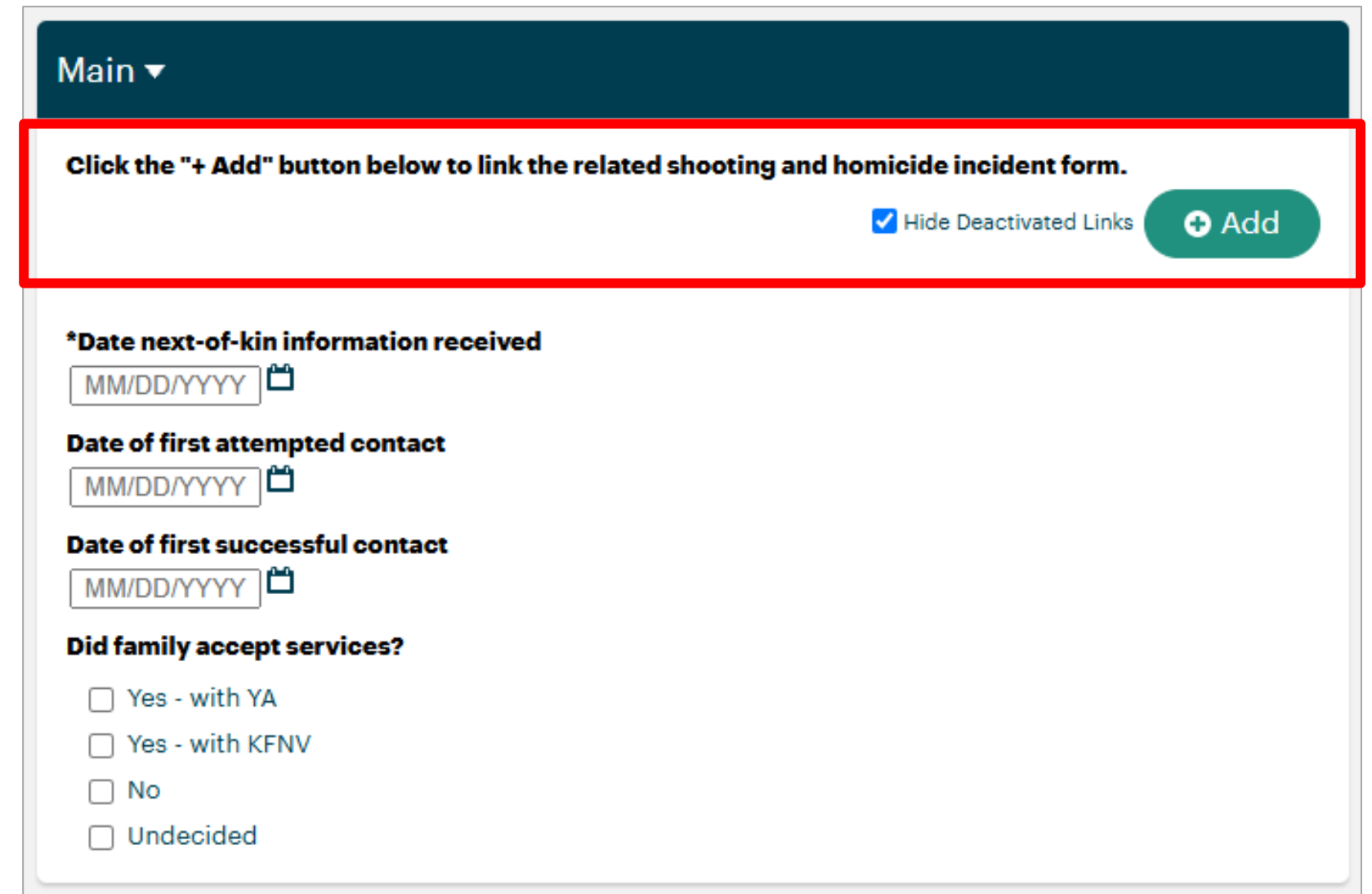
Step 2: Select “+ Family Outreach” on the right side of the screen.



Entering a Family Outreach Form

Step 3: Click the “+ Add” button to link the related shooting and homicide incident form.

If you cannot find the correct shooting and homicide incident form, please contact your DVP planner.



Main ▾

Click the "+ Add" button below to link the related shooting and homicide incident form.

☒ Hide Deactivated Links [+ Add](#)

***Date next-of-kin information received**
MM/DD/YYYY 

Date of first attempted contact
MM/DD/YYYY 

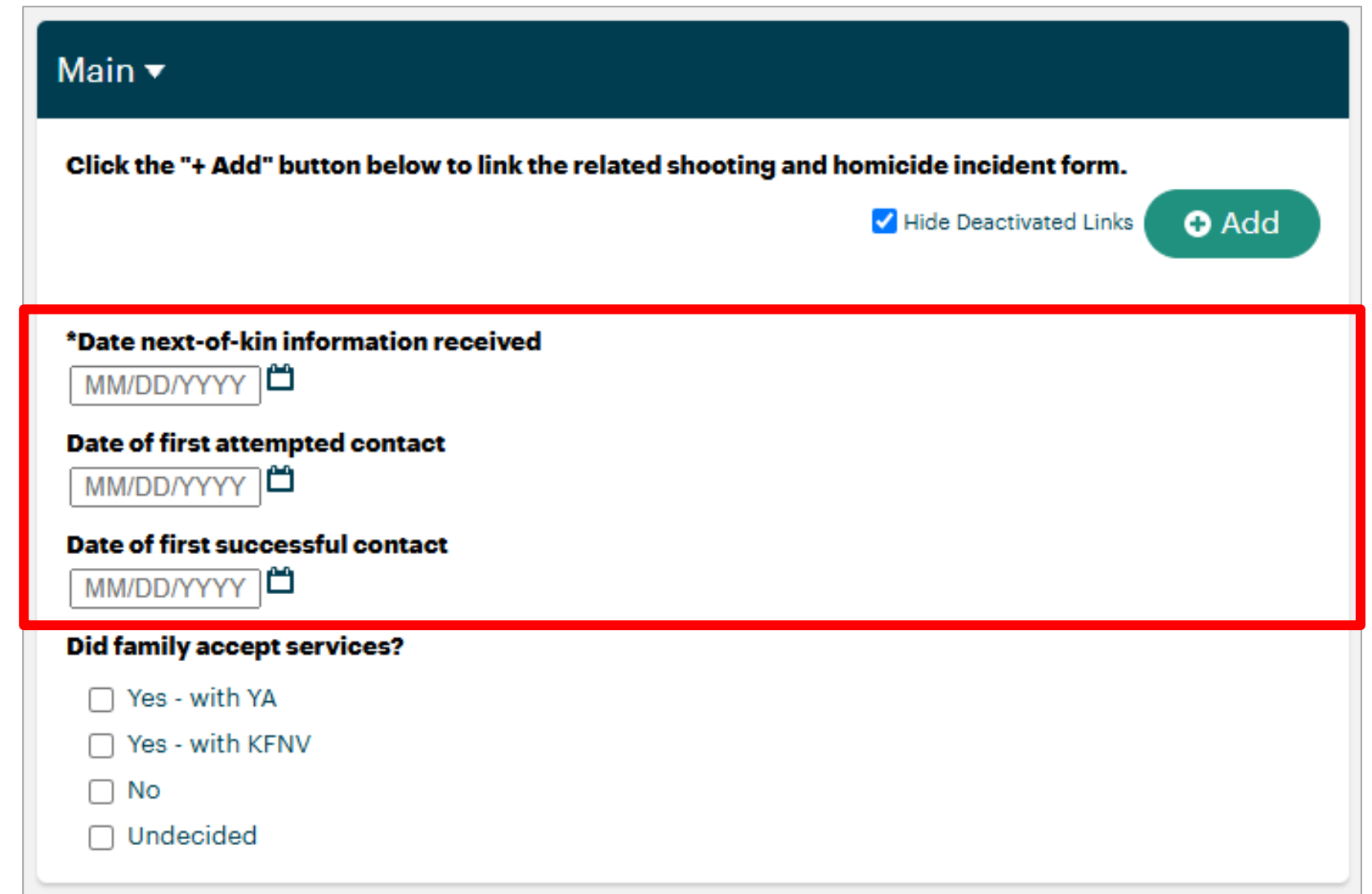
Date of first successful contact
MM/DD/YYYY 

Did family accept services?

- ☐ Yes - with YA
- ☐ Yes - with KFNV
- ☐ No
- ☐ Undecided

Entering a Family Outreach Form

Step 4: Enter the date you received next-of-kin information, as well as dates for your first attempted and first successful contact.



The screenshot shows a web form titled "Main" with a dropdown arrow. Below the title, there is a instruction: "Click the '+ Add' button below to link the related shooting and homicide incident form." To the right of this instruction is a checkbox labeled "Hide Deactivated Links" and a green button with a plus sign and the word "Add".

A red rectangular box highlights the following fields:

- *Date next-of-kin information received**: A date input field with the placeholder "MM/DD/YYYY" and a calendar icon.
- Date of first attempted contact**: A date input field with the placeholder "MM/DD/YYYY" and a calendar icon.
- Date of first successful contact**: A date input field with the placeholder "MM/DD/YYYY" and a calendar icon.

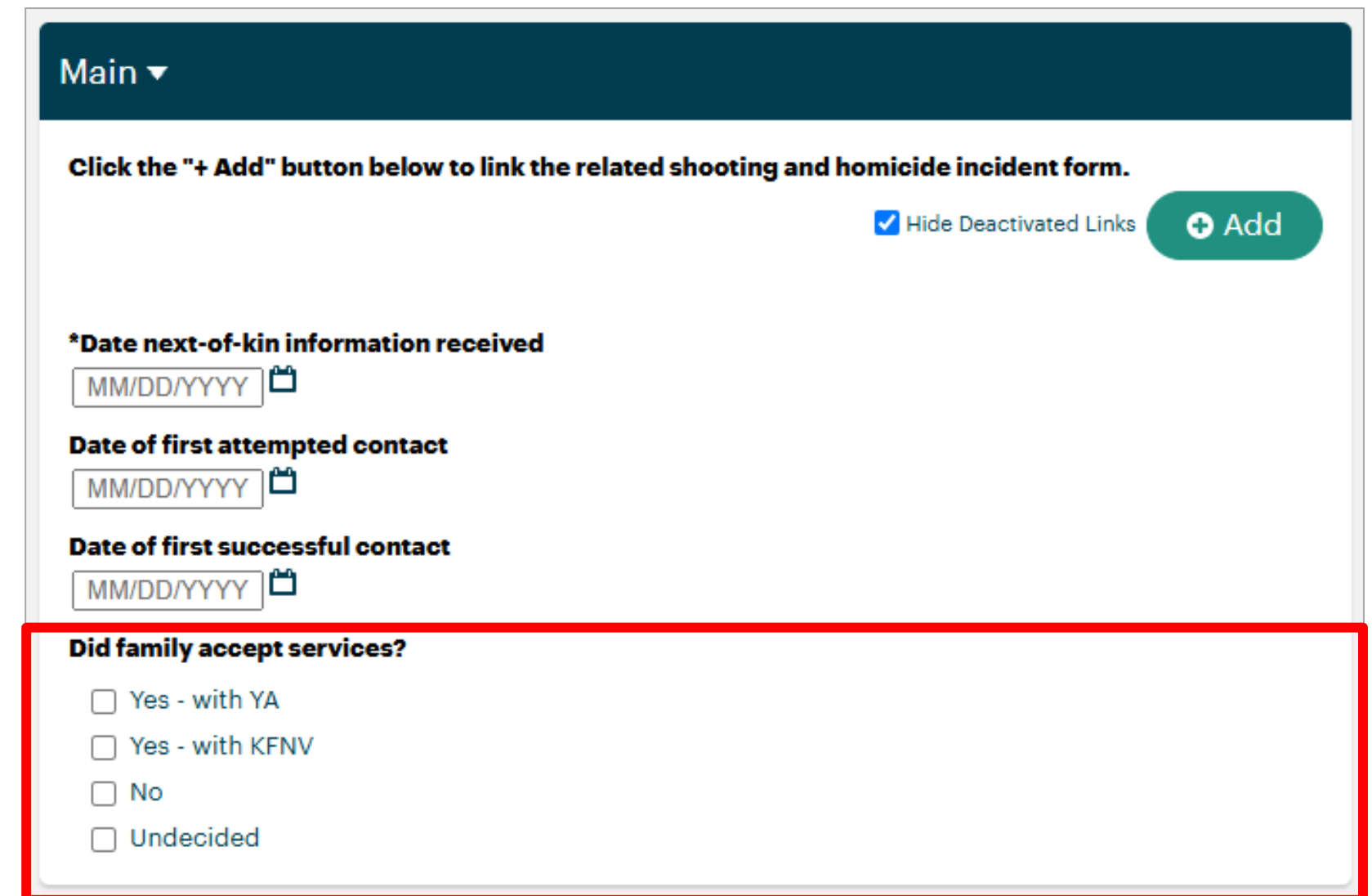
Below the red box, there is a section titled "Did family accept services?" with four radio button options:

- ☐ Yes - with YA
- ☐ Yes - with KFNV
- ☐ No
- ☐ Undecided

Entering a Family Outreach Form

Step 5: Indicate whether family accepted services and, if so, with what agency.

When a family accepts services with your agency, follow the directions in the remaining sections of this training deck to create a **participant record** and document service delivery.



The screenshot shows a web form titled "Main" with a dropdown arrow. Below the title is a instruction: "Click the '+ Add' button below to link the related shooting and homicide incident form." To the right of this instruction is a checkbox labeled "Hide Deactivated Links" and a green "Add" button with a plus icon. Below this are three date fields, each with a calendar icon: "*Date next-of-kin information received", "Date of first attempted contact", and "Date of first successful contact". At the bottom, a section titled "Did family accept services?" is highlighted with a red border. It contains four radio button options: "Yes - with YA", "Yes - with KFNV", "No", and "Undecided".

An aerial photograph of a densely populated residential neighborhood. The houses are mostly two-story structures with various rooflines, interspersed with trees. In the background, a range of mountains is visible under a sky filled with soft, white clouds. The overall tone is slightly desaturated, giving it a calm, documentary feel.

Participant Record



Participant Record

A **participant record** should be entered for:

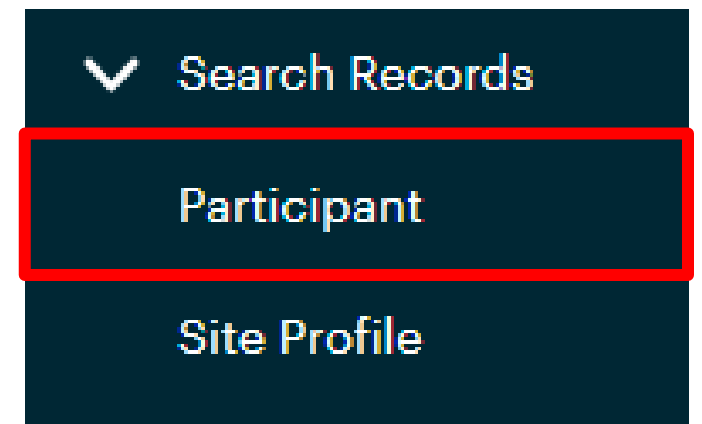
- 1) The next-of-kin for homicide victims to document family support services.
- 2) Any family member receiving individual therapy services.

Participant records should not be created for individuals who participate in group services only.

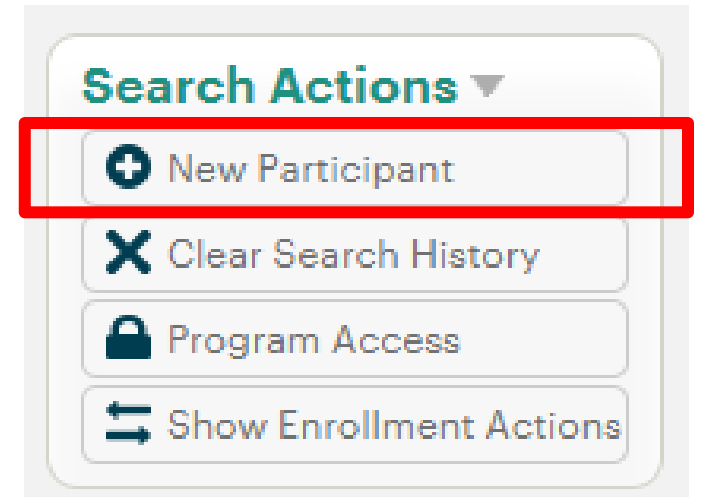


Creating a Participant Record

Step 1: Select “Participant” on the left side of the screen under “Search Records.”



Step 2: Select “+ New Participant” on the right side of the screen.





Creating a Participant Record

Step 3: Complete all fields in the *Participant Details* and *Demographic Information* sections.

Participant Details ▾

*Name ⓘ

First

Middle

Last

Email

customer_care@apricot.info

*Date of Birth ⓘ

MM/DD/YYYY

📅

Primary phone

ext.

Secondary phone

ext.

Emergency contact name

Emergency contact phone

ext.

Address

Clear

Select to map ✕

No results found

Address

Line 1

Line 2

City

City

State

--Please Select--

▼



Duplicate Records

If a person is already in Apricot because they received services from a different agency, a duplicate record message will appear.

You'll need to submit a request to have the person added to your site. The link to submit this request is available [here](#). You can also find it on the Apricot homepage when you log in, or on the *Grantee Corner* section of the DVP's website.

Participant Folder

All service delivery records are stored in a participant's folder.

DOCUMENT FOLDER

LINKS

ENROLLMENTS

APPOINTMENTS

ATTENDANCE

All Documents

☐ Expand Multiline

+

Program Enrollment (1 record)

+

+

Referral (0 records)

+

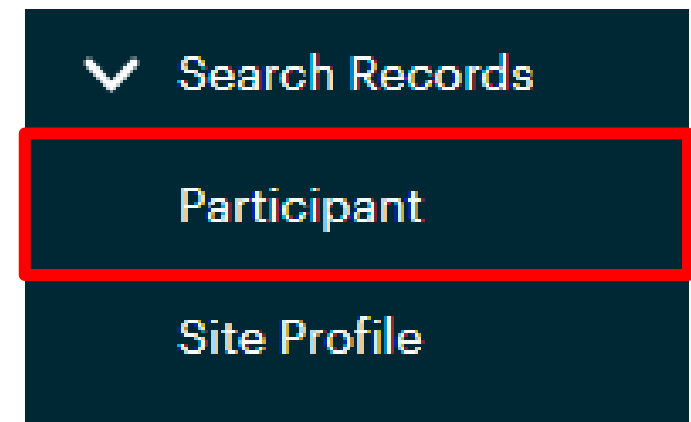
+

Service Note (0 records)

+

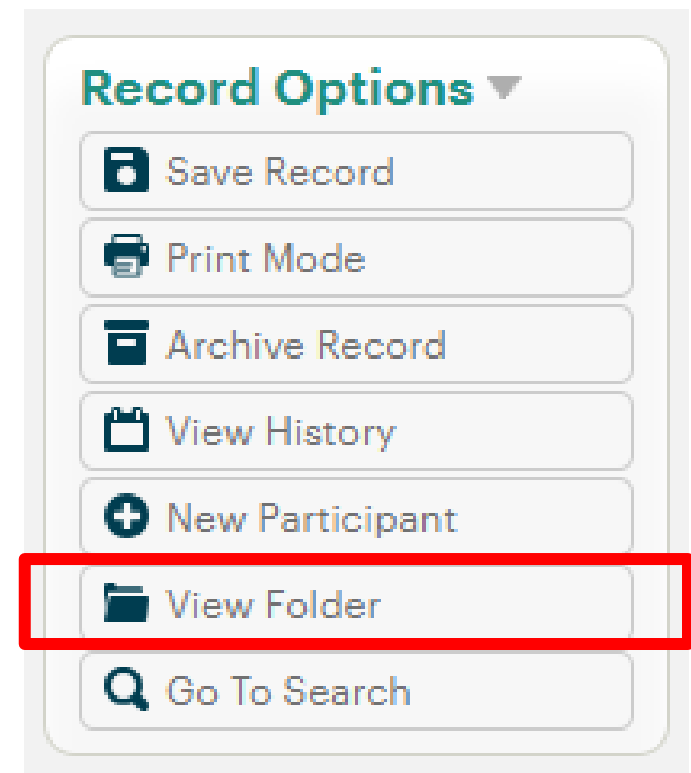
Accessing a Participant's Folder

Step 1: Select “Participant” on the left side of the screen under “Search Records.”



Step 2: Find the participant and click on their name.

Step 3: Select “View Folder” on the right side of the screen.

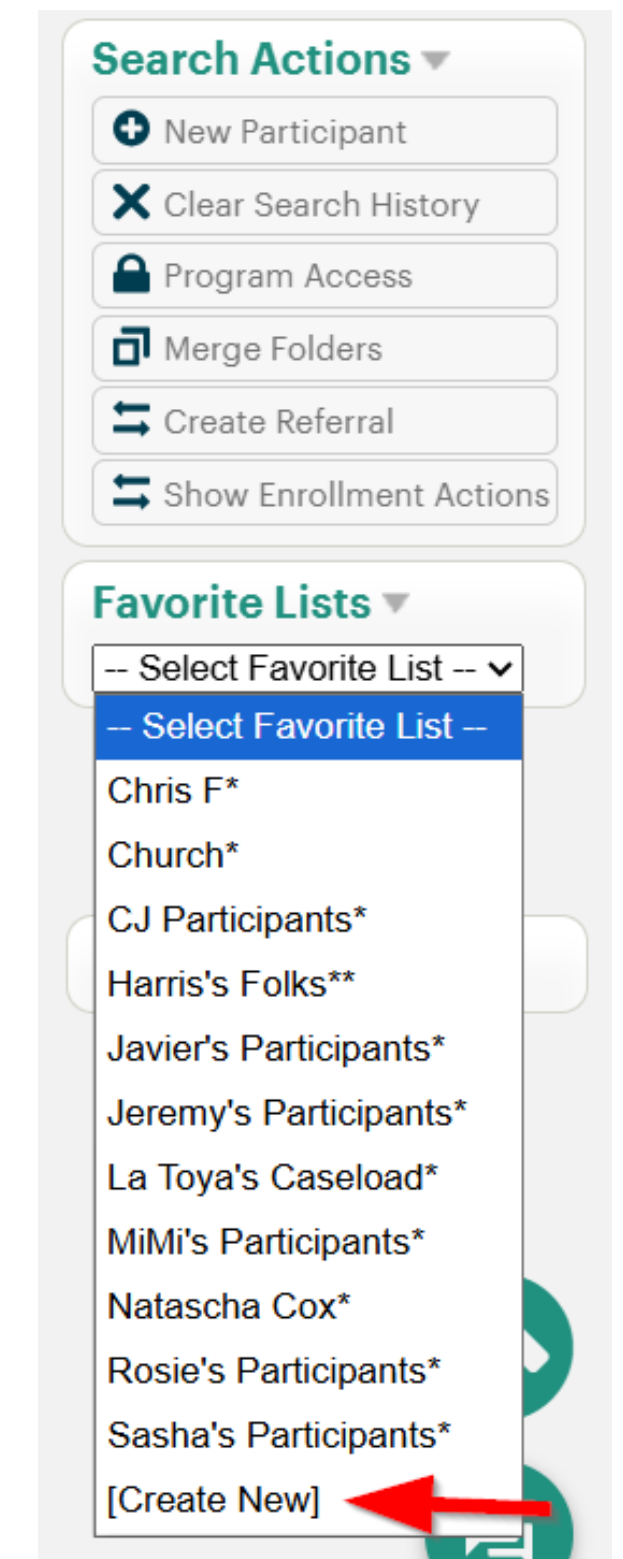


Favorite List

You can create a favorite list to easily locate your participants. To do this, follow the steps below.

Step 1: Click on “Select Favorite List” on the right side of the screen and select “[Create New].”

Step 2: Name your list and click the save button.





Favorite List

Step 3: Find each of your participants in the list of your agency’s participants and click the star button under “Add.”

Record ID ▼	Name ▼	Created By ▼	Assigned Programs ▼	Assigned Life Coach/Case Ma... ▼	Add
286740	TEST	LaSasha Long	- Abode - Housing (GV) - OPIC - Employment (GV) - DVP - Life Coaching (GV) show 1 more	Sasha Long	

↓

Record ID ▼	Name ▼	Created By ▼	Assigned Programs ▼	Assigned Life Coach/Case Ma... ▼	Add
286740	TEST	LaSasha Long	- Abode - Housing (GV) - OPIC - Employment (GV) - DVP - Life Coaching (GV) show 1 more	Sasha Long	

Step 4: The person’s name will now appear in your favorite list, and you can click on their name to access their folder.

An aerial photograph of a densely populated residential neighborhood. The houses are mostly two-story structures with varying rooflines, interspersed with trees. In the background, a range of mountains is visible under a cloudy sky. The overall tone is muted, with a light blue/gray overlay.

Program Enrollment



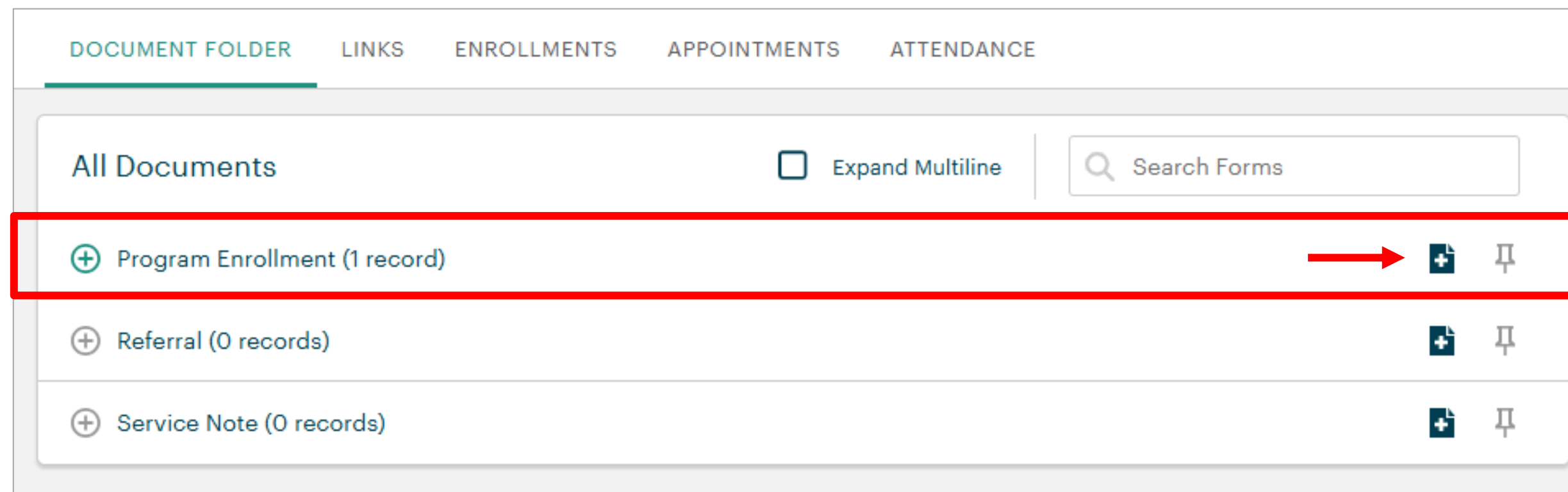
Program Enrollment Form

A **program enrollment form** should be completed to document when an individual begins and ends services with your agency.

It is also where you document a participant's response to the data and evaluation consent form.

Enrolling a Participant

Step 1: Navigate to participant's folder and click the “+” button to the right of “Program Enrollment.”



DOCUMENT FOLDER LINKS ENROLLMENTS APPOINTMENTS ATTENDANCE

All Documents ☐ Expand Multiline

⊕ Program Enrollment (1 record)	➕	📌
⊕ Referral (0 records)	➕	📌
⊕ Service Note (0 records)	➕	📌

Enrolling a Participant

Step 2a: In the *Enrollment* section, document the individual's date of enrollment and referral source.

Enrollment ▼

***Program**
KFNV - Family Support (GV) ▼

***Agency**
--Please Select-- ▼

***Date of enrollment**
MM/DD/YYYY 

***Source of referral**
--Please Select-- ▼

***Click the "+ Add" button below to link the related shooting and homicide incident form.**
☒ Hide Deactivated Links 

This field is required.

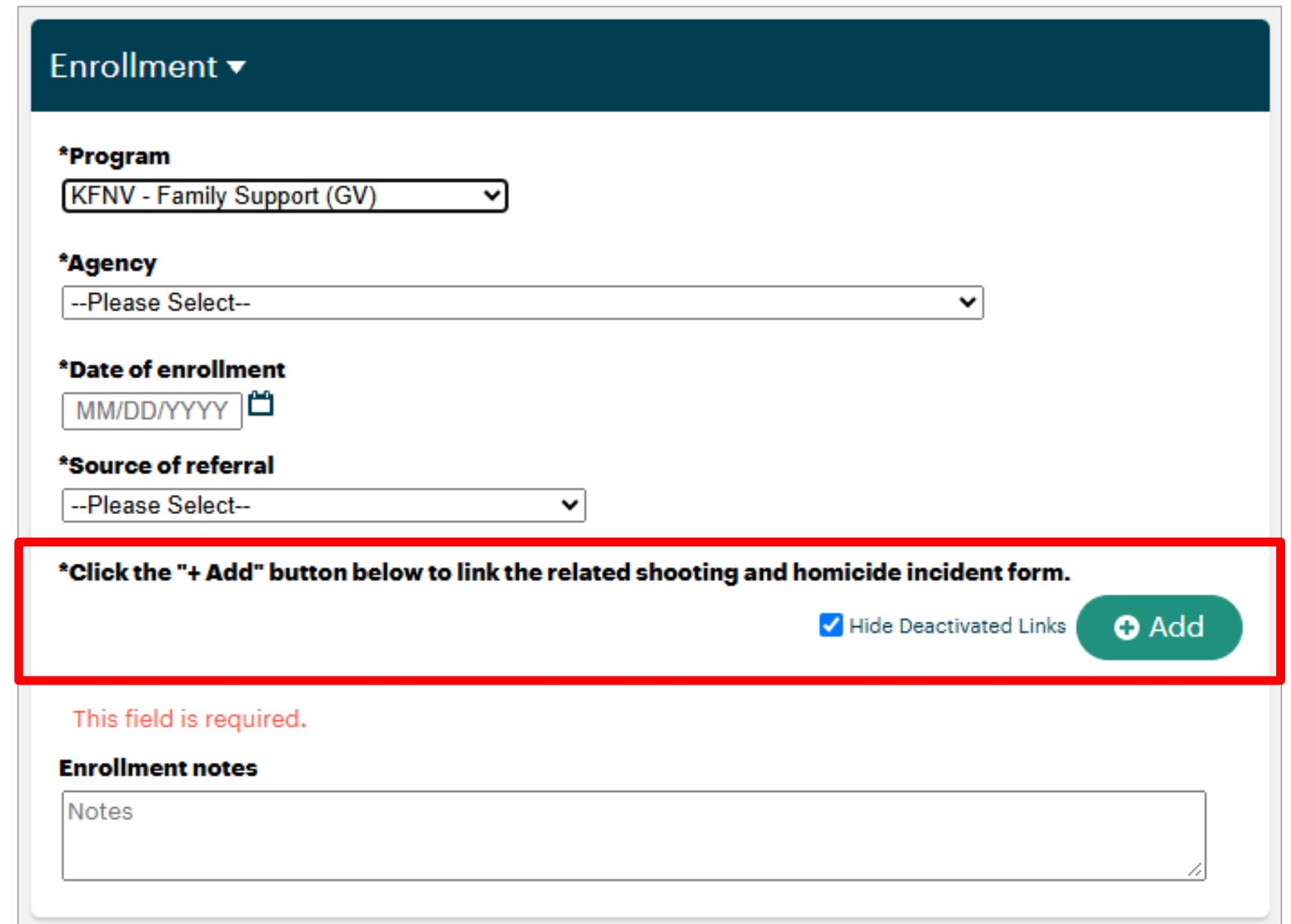
Enrollment notes

Notes

Enrolling a Participant

Step 2b: In the *Enrollment* section, click the “+ Add” button to link to the shooting and homicide incident form.

If the homicide is not documented in Apricot, contact your DVP planner.



The screenshot shows the 'Enrollment' section of a form. It includes several required fields marked with an asterisk: '*Program' (a dropdown menu with 'KFNV - Family Support (GV)' selected), '*Agency' (a dropdown menu with '--Please Select--'), '*Date of enrollment' (a date input field with a calendar icon), and '*Source of referral' (a dropdown menu with '--Please Select--'). Below these fields, a red-bordered box highlights a message: '*Click the "+ Add" button below to link the related shooting and homicide incident form.' To the right of this message is a checkbox labeled 'Hide Deactivated Links' and a green '+ Add' button. Below the red box, there is a red error message 'This field is required.' and a section titled 'Enrollment notes' with a text area labeled 'Notes'.

Enrolling a Participant

Step 3: Provide the individual with the **Data and Evaluation Consent Form** and document their response to evaluation consent. Upload a copy of a paper consent form if one was used.

Data and Evaluation Consent Form ▼

Participants may complete a paper or online version of the data and evaluation consent form.

- To access the **online consent form**, click here:
<https://a115039.socialsolutionsportal.com/apricot-intake/5a63d8e3-5e91-4199-949c-b64481359c1f>
- To download the **paper consent form** and translations, navigate to 'My Shared Files' under 'My Apricot Tools' on the lefthand side of the screen.

***Evaluation consent - Did participant (and their parent/guardian if they are a minor) provide consent for personally-identifiable information to be shared with an external DVP evaluator?**

☐ Yes

☐ No

☐ Not complete yet

☐ Never presented

Use the link below to upload a scanned copy of a paper consent form.

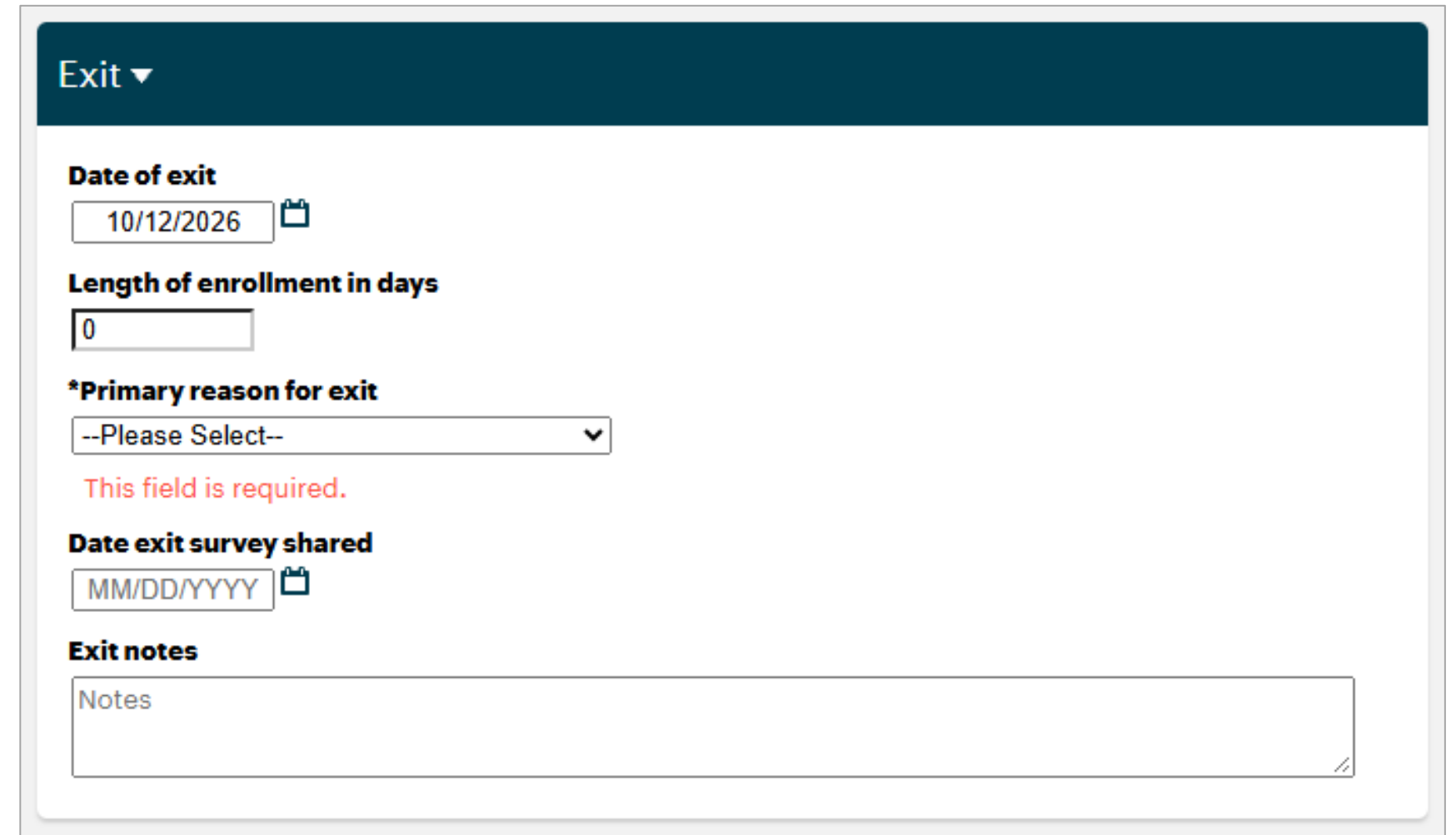
No file chosen

Up to 25 MB

Exiting a Participant

Step 4: Return to the **program enrollment form** when the individual exits services to enter the exit date and reason.

This is also where you will enter the date the exit survey was shared with the participant.

The screenshot shows a web form titled "Exit" with a dropdown arrow. It contains several fields: "Date of exit" with a date picker showing "10/12/2026"; "Length of enrollment in days" with a text input showing "0"; "*Primary reason for exit" with a dropdown menu showing "--Please Select--" and a red error message "This field is required." below it; "Date exit survey shared" with a date picker showing "MM/DD/YYYY"; and "Exit notes" with a large text area containing the word "Notes".

Exit ▼

Date of exit
10/12/2026

Length of enrollment in days
0

***Primary reason for exit**
--Please Select--
This field is required.

Date exit survey shared
MM/DD/YYYY

Exit notes
Notes



Service Note Form

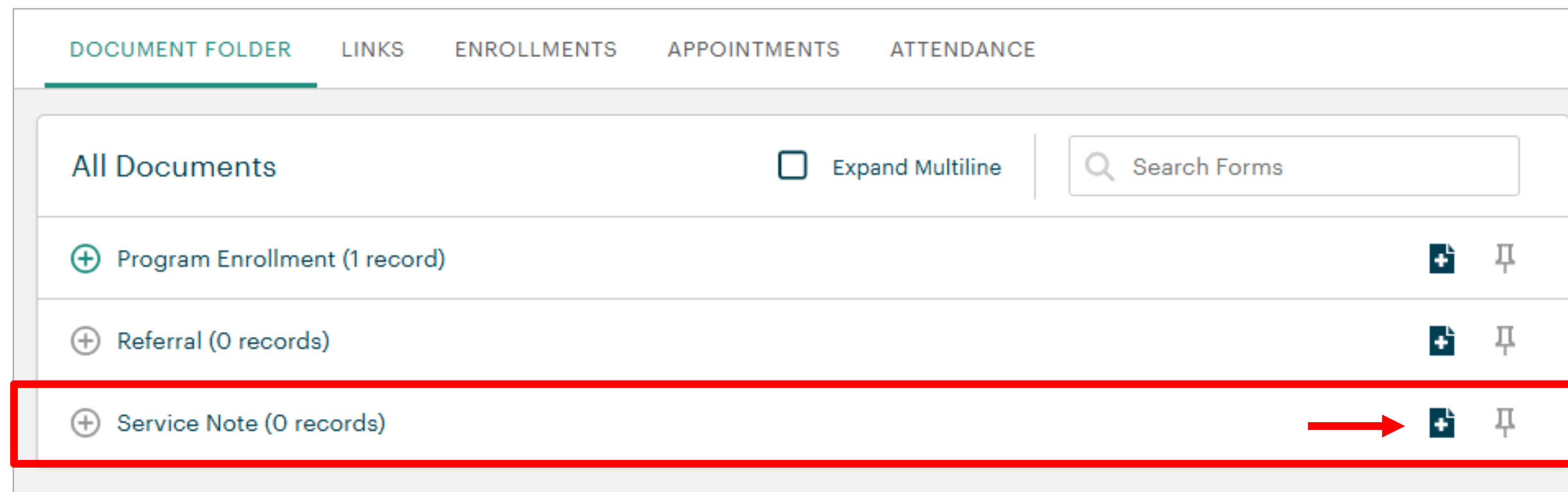


Service Note Form

A **service note form** should be entered to document every contact or attempted contact with a participant.

Entering a Service Note Form

Step 1: Navigate to participant's folder and click the “+” button to the right of “Service Note.”



The screenshot shows a web interface with a top navigation bar containing the following tabs: DOCUMENT FOLDER (selected), LINKS, ENROLLMENTS, APPOINTMENTS, and ATTENDANCE. Below the tabs, there is a section titled 'All Documents' with a search bar labeled 'Search Forms' and a checkbox labeled 'Expand Multiline'. The main content area displays a list of document types:

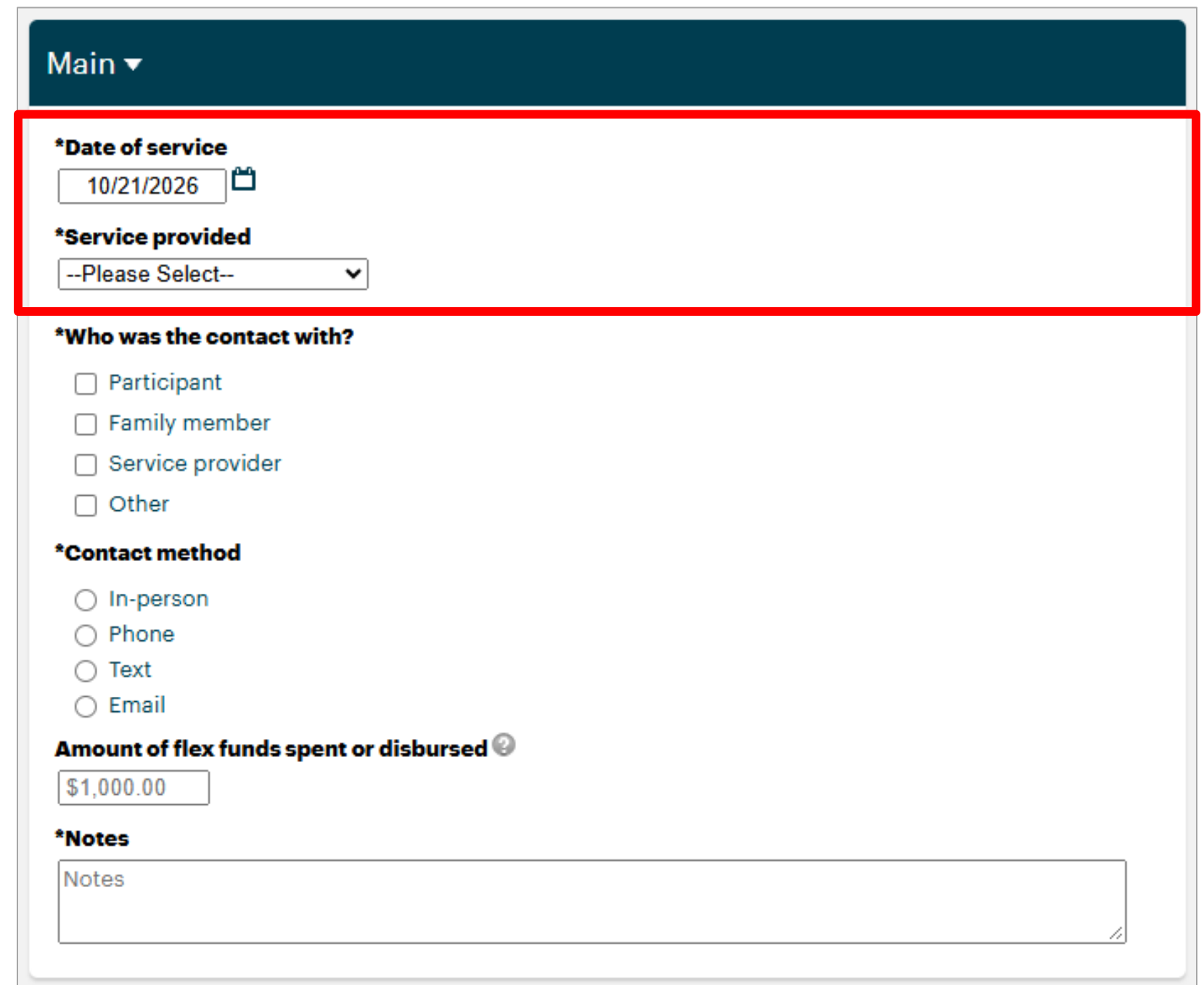
- Program Enrollment (1 record)
- Referral (0 records)
- Service Note (0 records)

The 'Service Note (0 records)' row is highlighted with a red rectangular box. A red arrow points to the blue square icon with a white plus sign (+) located to the right of the text 'Service Note (0 records)'.

Entering a Service Note Form

Step 2: Enter the date of the service and select the service provided.

- Select **family support** for all services other than individual therapy.
- Select **therapy** for clinical therapy sessions.



Main ▾

***Date of service**
10/21/2026 📅

***Service provided**
--Please Select-- ▾

***Who was the contact with?**

☐ Participant
☐ Family member
☐ Service provider
☐ Other

***Contact method**

☐ In-person
☐ Phone
☐ Text
☐ Email

Amount of flex funds spent or disbursed ?
\$1,000.00

***Notes**
Notes

Entering a Service Note Form

Step 2a: If you select **family support**, a field will appear asking you to indicate the type of support provided. You may select more than one option here.

Main ▾

***Date of service**
10/21/2026 

***Service provided**
Family support ▾

***Type of support provided (Check all that apply)**

- ☐ Basic needs
- ☐ Funeral arrangements
- ☐ System navigation and advocacy
- ☐ Victim of crime application
- ☐ Other

This field is required.

***Who was the contact with?**

- ☐ Participant
- ☐ Family member
- ☐ Service provider
- ☐ Other

***Contact method**

- ☐ In-person
- ☐ Phone
- ☐ Text
- ☐ Email

Entering a Service Note Form

Step 3: Select who the contact was with and the contact method.

Main ▾

*Date of service

10/21/2026

*Service provided

--Please Select--

*Who was the contact with?

☐ Participant

☐ Family member

☐ Service provider

☐ Other

*Contact method

☐ In-person

☐ Phone

☐ Text

☐ Email

Amount of flex funds spent or disbursed ?

\$1,000.00

*Notes

Notes

33

An aerial photograph of a densely populated residential neighborhood. The houses are mostly two-story structures with various rooflines, interspersed with trees. In the background, a range of hills or mountains is visible under a cloudy sky. The overall tone is muted, with a light blue/gray overlay.

Referral Form

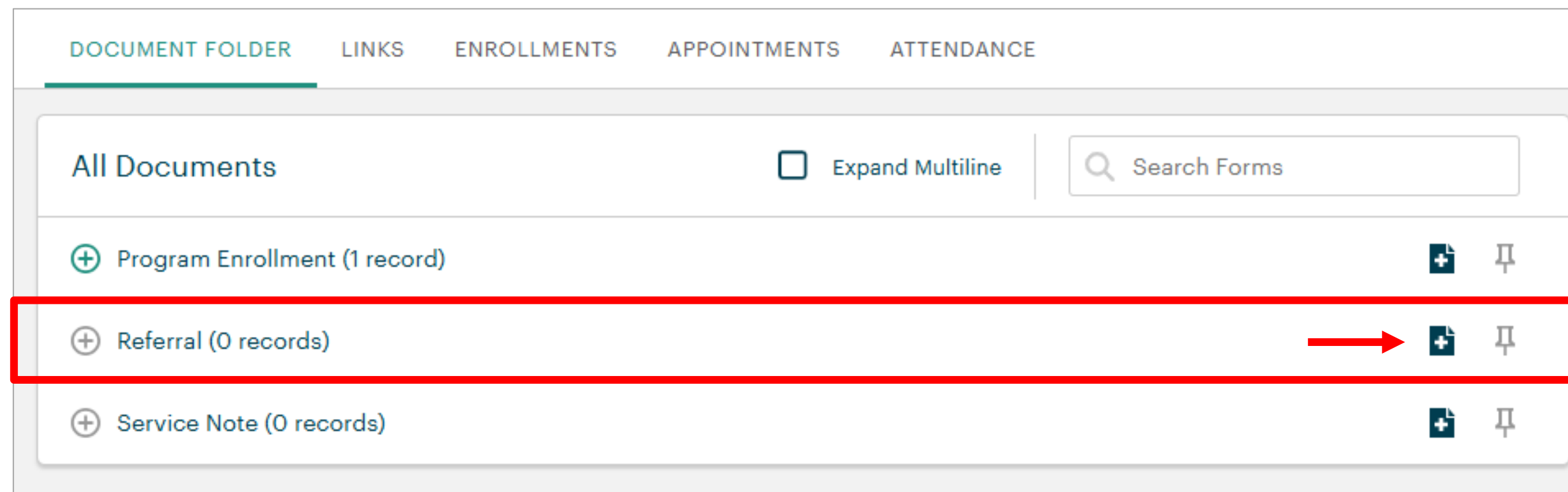


Referral Form

A **referral form** should be entered to document each service referral made for a participant.

Entering a Referral Form

Step 1: Navigate to participant's folder and click the “+” button to the right of “Referral.”



The screenshot shows a web interface with a top navigation bar containing the following tabs: DOCUMENT FOLDER (selected), LINKS, ENROLLMENTS, APPOINTMENTS, and ATTENDANCE. Below the tabs is a section titled 'All Documents'. This section includes a search bar labeled 'Search Forms' and a checkbox labeled 'Expand Multiline'. Below these are three rows of document types, each with a plus icon in a circle, the document name, the number of records, and two icons (a document with a plus and a pushpin) on the right. The 'Referral (0 records)' row is highlighted with a red rectangular box, and a red arrow points to the document icon in this row.

Document Type	Records	Actions
Program Enrollment	1 record	[+ icon] [Pin icon]
Referral	0 records	[+ icon] [Pin icon]
Service Note	0 records	[+ icon] [Pin icon]

Entering a Referral Form

Step 2: Enter the date the referral was made and identify whether the referral was made to:

- 1) An agency funded by the DVP (**Within DVP network**)
- 2) An agency not funded by the DVP (**Outside of DVP network**)

Internal or External Referral ▼

*Date of referral

MM/DD/YYYY 

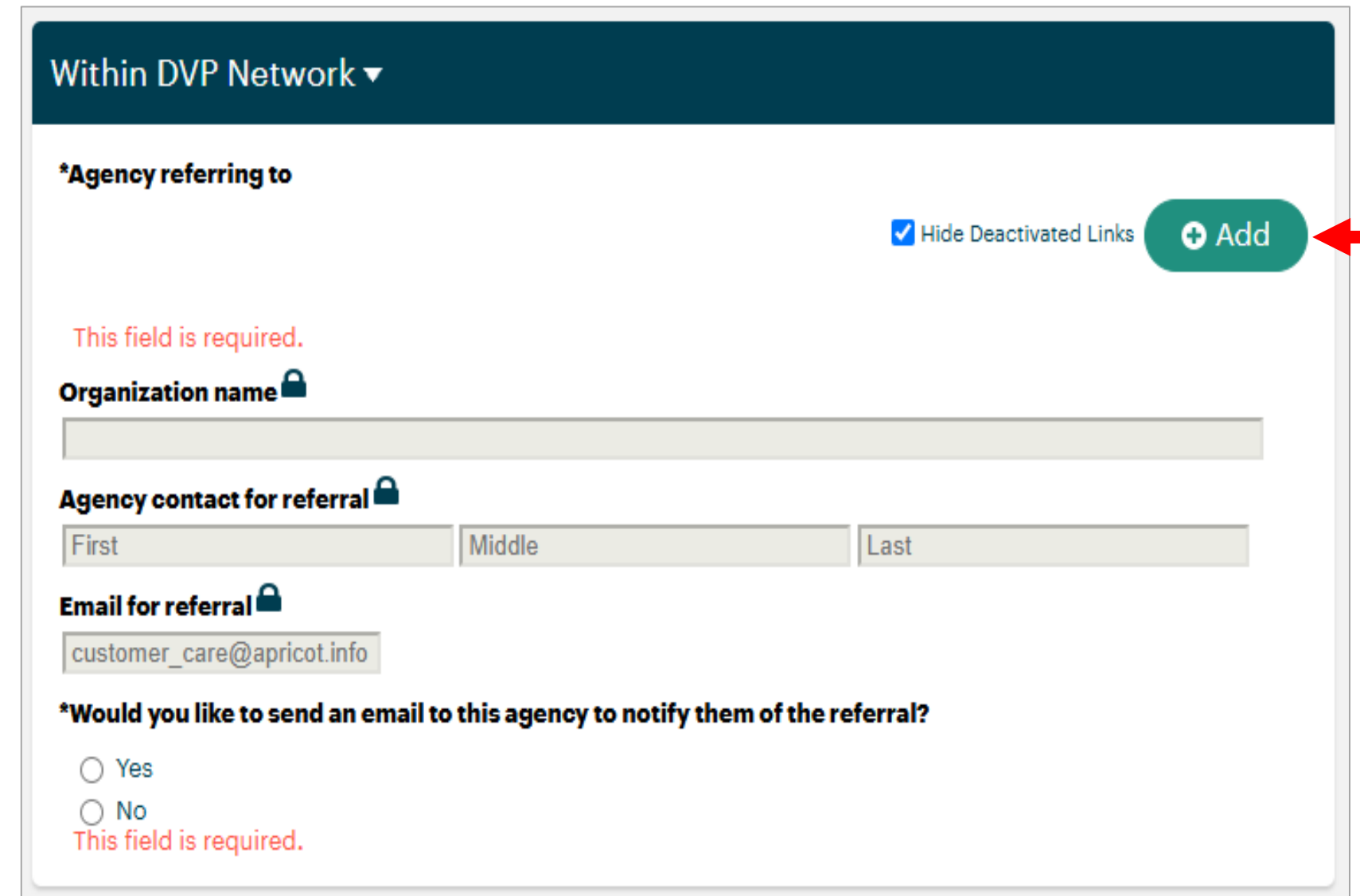
*Is this referral to an agency within the DVP network or outside of the DVP network?

☐ Within DVP network

☐ Outside of the DVP network

Entering a Referral Form

Step 3a: If the referral was made to an agency **within the DVP network**, select the agency and service by clicking the “+ Add” button. Information about the agency will autopopulate.



Within DVP Network ▼

*Agency referring to Hide Deactivated Links + Add

This field is required.

Organization name 

Agency contact for referral 

First Middle Last

Email for referral 

customer_care@apricot.info

*Would you like to send an email to this agency to notify them of the referral?

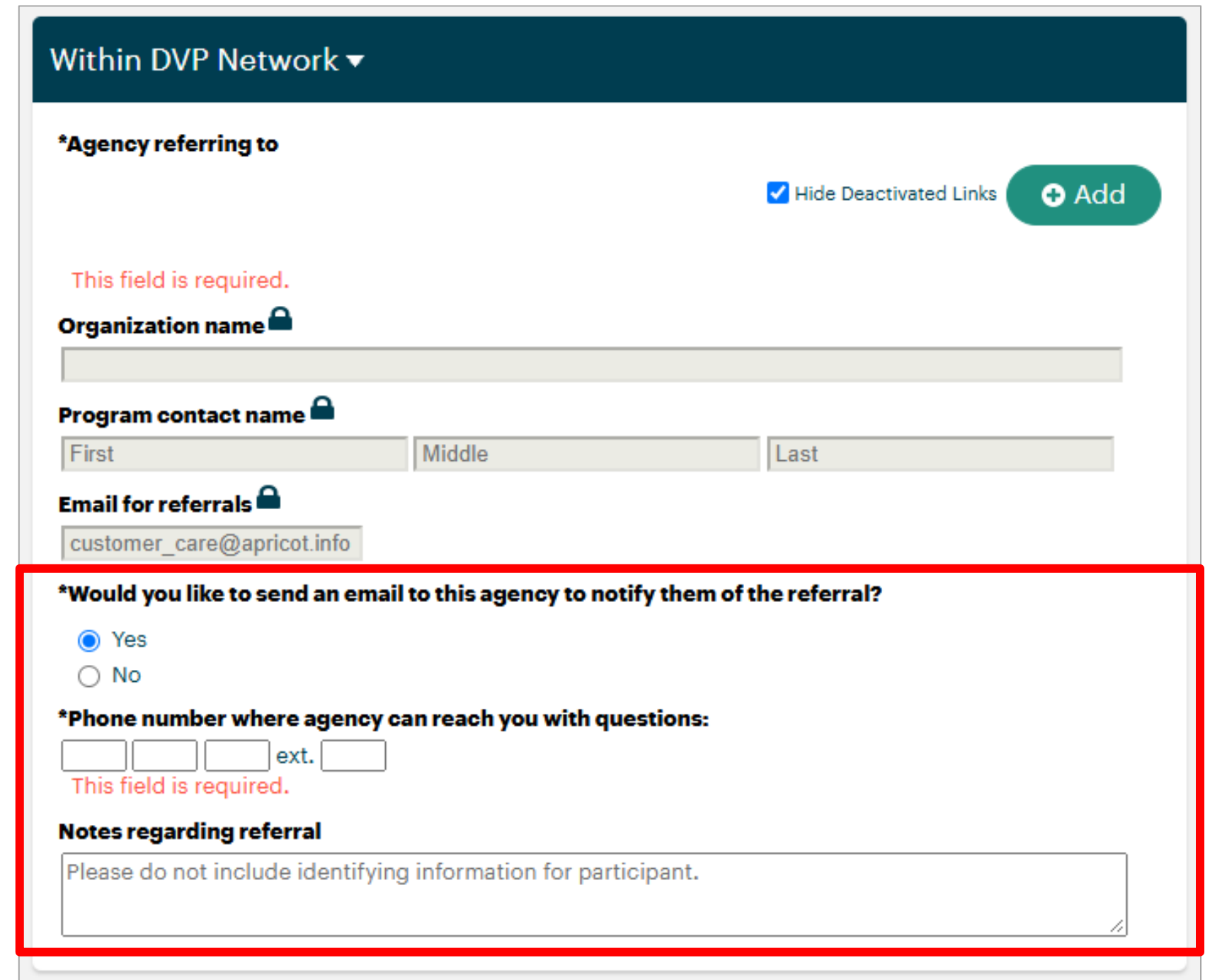
☐ Yes

☐ No

This field is required.

Entering a Referral Form

Step 3a: At the bottom of this form, you have the option of sending an automatic email to the agency notifying them of the referral. If you select yes, you'll be asked to provide your phone number and notes about the referral.



Within DVP Network ▾

***Agency referring to** ☒ Hide Deactivated Links ➕ Add

This field is required.

Organization name 

Program contact name 

First Middle Last

Email for referrals 

customer_care@apricot.info

***Would you like to send an email to this agency to notify them of the referral?**

☒ Yes
☐ No

***Phone number where agency can reach you with questions:**

ext.

This field is required.

Notes regarding referral

Please do not include identifying information for participant.

Entering a Referral Form

Step 3b: If the referral was made to an agency **outside the DVP network**, enter the type of service, name of the agency, and any helpful notes.

Outside of DVP Network ▾

*Type of service

--Please Select-- ▾

This field is required.

*Name of agency referred to (outside the DVP network) ?

This field is required.

Referral notes

Notes