



Butte Countywide Homeless Continuum of Care

Homeless Management Information System / Coordinated Entry Committee

Monday, December 6, 2021 1:00 p.m. – 3:00 p.m.

Butte County Employment and Social Services – Zoom Virtual Meeting

Zoom Link: <https://us02web.zoom.us/j/87643800830?pwd=aUJ3eWhpK3ppVGs0Q3Y5aC8vT3ZXQT09>

Phone: (669) 900-9128 Meeting ID: 876 4380 0830 Passcode: 120212

HMIS/CE COMMITTEE MEMBERS (CHO Administrator, or designee):

Angie Little, HACB	Keesha Hills, OSCIA	Elisa Rawlinson, DESS
Christy Taylan, Caminar	Shelly Watson, Jesus Center	Joy Amaro, True North Housing Alliance
Nancy Jorth, Youth for Change	Josiah Vasey, Butte 211	Annie Terry, Oroville Rescue Mission
Susan Wilson, Safe Space	Rick Jackson, BCDBH	Sara Sweaney, Nation’s Finest
Stephan Spirk, CAA	Carolina Cruz, Catalyst	Masaki Hirayama, Veteran’s Administration
Amanda Gaylord, CHAT	Debbie Villasenor, Consultant	Melissa Jamison, United Way
Laurie Maloney, Point of Contact	Susan Dolan, Ampla	

First Chairperson: Elisa Rawlinson, DESS HH

Second Chairperson: Sarah Frohock, BCDBH

AGENDA

- | | |
|---|-----------------|
| 1. Call to Order | Elisa Rawlinson |
| 2. Approval of Minutes - ACTION | All |
| a. HMIS/CES Committee Meeting, October 11, 2021 | |
| 3. Introductions/Agency Updates | All |
| 4. Updates | Elisa Rawlinson |
| a. Emergency Housing Vouchers | |
| b. Distribution list for all HMIS End Users | |
| c. Ongoing open office hours (starting Dec. 15, 2021) | |
| 5. New Program Request form | Elisa Rawlinson |
| 6. HMIS/CES Training/Office Hours | Elisa Rawlinson |
| a. Group versus Individual Programs | |
| b. Adding members to Individual Programs | |
| 7. Longitudinal Systems Analysis (LSA) | Elisa Rawlinson |
| a. Monthly Checks | |
| 8. Additions to CES enrollment page (VASH eligibility) | Elisa Rawlinson |
| 9. Priority Points and Community Queues - DISCUSSION | Elisa Rawlinson |
| 10. Next Meeting: Monday, January 3rd, 2021; 1:00 – 3:00 p.m. | Elisa Rawlinson |
| 11. Adjourn | |



Butte Countywide Homeless Continuum of Care

BUTTE COUNTYWIDE HOMELESS CONTINUUM OF CARE HMIS/CES COMBINED COMMITTEE MEETING MINUTES MONDAY, October 11th, 2021 at 1pm-3pm Zoom Meeting

COMMITTEE MEMBERS PRESENT:

Debbie Villasenor, Housing Consultant
Elisa Rawlinson, DESS Housing & Homeless
Christy Taylan, Caminar
Shelly Watson, Jesus Center
Carolina Cruz, Catalyst
Nancy Jorth, Youth For Change
Stefan Spirk, CAA
Sarah Frohock, BCDBH

OTHER ATTENDEES:

Isabel Alainz-Alvarado, DESS Housing & Homeless
Renee Devol, DESS APS
Kayla Davis, DESS Housing & Homeless
Melissa Jamison, United Way Northern California
Kyle Prieto, DESS Housing & Homeless
Wendy Lo, DESS Housing & Homeless
Nick Fashing, DESS Adult Services
Jay Coughlin, DESS Housing & Homeless
Lorena Reed, BCDBH
Pahua Thao, DESS Housing & Homeless
Shelly Storkan, BCDBH
Tara Sullivan-Hames, Butte/Glenn 211
Jaymee McLaughlin, CUSD, Homeless and Foster
Liasion TOSA
Rachel DeLeon, DESS Eligibility
Crystal Hutchinson, DESS CSD
Susan Wilson, Safe Space
Javi Pinedo, Housing Authority- Butte County

Angie Little, Housing Authority – Butte County

COMMITTEE MEMBERS NOT PRESENT:

Amanda Gaylord, CHAT
Keesha Hills, OSCIA
Trishalana Ott, BCDBH
Joaquin Jordan, True North Housing Alliance
Annie Terry, Oroville Rescue Mission
Sara Sweaney, Nation's Finest
Masaki Hirayama, Veteran's Administration
Lauren Kohler, Safe Space
Tracy Stogsdill Gillihan, 2-1-1 Help Central

RECORDING SECRETARY:

Kyle Prieto

ORDER OF BUSINESS:

1. **CALL TO ORDER:** The meeting was called to order by Chair Elisa Rawlinson at 1:03 P.M.
Roll call taken
2. **APPROVAL OF MINUTES - ACTION:** The minutes for the HMIS/CES Committee Meetings for September 13th, 2021, were approved with no corrections.

Motion to approve: Stefan Spirk
Seconded: Debbie Villasenor

3. **AGENCY UPDATES:** Debbie Villasenor announced she is waiting to hear back from the State of California regarding the release of “No Place Like Home” round four funding. She is hoping to have a project identified to be able to submit an application for permanent supportive housing, noting coordinated entry will be utilized for tenant referral.

Christy Taylan of Caminar, reported that Scott Walker who used to be the manager of Base Camp has moved to a new career, Cody McCormac will be replacing him.

Stefan Spirk, of CAA, announced the celebration of Esplanade House’s 30th anniversary.

Jay Coughlin, of DESS, informed the group HDAP has added two new Housing Navigators, Isabel Alaniz-Alvarado and Michael Wright, and new funding for the HDAP program has just been received from the state. This will be discussed more in next week’s CoC meeting. The HDAP team is hoping to start adding clients from the waiting list as well as CES to the program.

Nancy Jorth, with Youth for Change, stated that her agency has downloaded the Heart annual report from HMIS and uploaded it into the Fisby system and was pleased with the quality and functionality of the process.

Shelly Storkan, of BH, announced the Chronically Homeless Committee will be meeting virtually next week and invited people to join if they are interested, contact information was given in the chat box.

Tara Sullivan-Hanes, with Butte/Glenn 211 provided an update regarding the total number of 211 specialists that input information into CES, that team now consists of ten people. Five of those ten people are contracted through the DESS HSP program. Additionally, Butte 211 are providing information to the public related to scheduled power safety shut-offs.

Carolina Cruz, from Catalyst, reminded the committee that October is Domestic Violence Awareness month and that special events will be happening throughout the month. Catalyst has partnered with 20 local coffee shops in Butte County with a coffee sleeve campaign, providing domestic violence coffee sleeves to the public in an effort to raise awareness. She also reported that the transitional house is still available for a family in need, it is a three bedroom, two bath, vacant home and the application is on the Catalyst website. Angie Little with HACB is currently still working on the emergency housing vouchers with the goal of dispersing all 116 vouchers by November 1st, 2021. Nick Fashing spoke about the Home Safe Program and that they are still waiting to hear what the allocation of funding will be. Elisa discussed the new AB 977 law that was signed into effect by the Governor of California and the potential effect it will have on future housing assistance. Starting January 1st of 2023 all state housing assistance programs will have to start imputing information into HMIS which will expand the system greatly. Debbie Villasenor questioned whether or not this law would also increase funding for the HMIS/CES programs, and it was noted that the law was unclear in that area but different programs within the system would be receiving more funding. Debbie went on to discuss one of the last CoC meetings and the suggestion that the HMIS/CES committee continues to explore funding for programs such as Butte 211. She believes that further exploration of finding funding sources should no longer be at the HMIS/CES committee level, which should be the CoC and Board of Supervisor's responsibility.

4. **Updates:** A) Emergency Housing Vouchers. All 26 coordinated entry clients have been identified and have been contacted by a Housing Navigator. These clients have had their applications and supporting documentation given to HACB, and at least one CE client has attained housing. There were 7 emergency housing vouchers that were direct referrals from agencies that were redistributed because they had not been used. B) Moving contact information from CES enrollment page, there are two people working on this project Kyle Prieto and Kayla Davis. There are currently 2,380 individuals on the coordinated entry list and of those clients there are only 529 names left to move their contact and location information to the client level tabs. It is hoped that within 2-3 weeks this conversion to be completed. Upon completing this project the section on the enrollment page for contact and location information will be removed and all future collected data will be put into those client level tabs resulting in every agency having access to the information.
5. **New HMIS User Request Form:** a) Distribution list for all HMIS End Users. A new request form has been created for agencies to use when they have new users that they would like to onboard into the HMIS system. The form is available on the CoC website under the HMIS/CES page. An overview of what the form consists of and what information will be required was given. It was also noted that user licenses will be affected by the number of staff that are on boarded into HMIS as there is a limited number of licenses available. Butte

County has 120 licenses available of that there are 109 in current use. Please note that the licenses are for individual people and not per agency, being consciences of the number of people are utilizing the licenses is important. If a user leaves an agency, informing the HMIS/CES lead within 24 hours is very important so they can remove that person's license and access to the system. A form is being created for participating agencies to utilize in informing HMIS/CES of that users leaving.

- 6. HMIS/CES Training/Office Hours:** a) Data Quality Reports. There are currently 6 data quality reports that each agencies CHO administrator can run. Examples were shown of a few different types of reports that are available, such as Duplicate Client which can help identify if a client has been imputed into the system more than once. There is a report also that can show the date a client entered into the system and how long it took them to achieve sustainable housing, that report is located under Program Based Reports and called Program Outcome Measures. That report can be used in any program and all agencies. Agency Management reports are also available to agencies, one of those reports is a User Activity Report. This report allows agencies to see how often each user within the agency is logging into the system, this is helpful for identifying users who are not utilizing their access. If a staff member is not active in the system they can have their license deactivated and another user can utilize the license. Any user can run this report. There are data quality reports that administrators can use, Elisa is currently running the reports and she will be reaching out to varying agencies regarding the information in an attempt to get ahead in preparation for the Longitudinal Systems Analysis (LSA).
- 7. Client and CES Workflow Handouts:** A flyer/handout was created with important information for clients regarding how to become enrolled into the Coordinated Entry System. It shows a step by step process of how to become enrolled and which participating agencies have the ability to enroll them as well as a description of what the Coordinated Entry System is. Each CES participating agency should be enrolling their clients into the system at the time of enrollment into that program. Information on the flyer also included how a client can contact a Housing Navigator within Butte County DESS, i.e. phone number and option number, as well as an email address, with a caveat that allows response within one business day. This flyer would be placed on the CoC website as well as in participating agencies lobby's or disseminated on their agency websites for public distribution once the CoC committee has approved its use. Questions were raised about the wording of certain sections of the flyer and concerns raised that the information was not particularly clear and that clients may not glean appropriate meaning of the information. Particular emphasis was placed on the phone number provided, it is a concern that a client viewing this flyer might misunderstand and try to contact a partnering agency using it instead of understanding that it is only for DESS Housing & Homeless. Another issue was raised with the expectation of receiving a call back within one business day, which was explained that it was an internal DESS policy not an expectation for partnering agencies. The addition of the Fair Housing

Logo was requested as an addition to the flyer by D. Villasenor. It was the decision of the committee to not submit this flyer to the CoC committee without making changes to the clarity of information provided. It was again stated, in great detail, that each participating agency should be entering clients into coordinated entry at the time of enrollment and completing the VI-SPDAT, if they are allocated additional funding if possible.

The second flyer that was shown was the Butte Countywide Coordinated Entry Partner Agency Workflow Process. D. Villasenor stated that the Butte County Fair Housing logo needs to be added as it will be distributed to the public. Elisa stated that this flyer was meant to be an internal flyer for users and agencies to utilize as a reminder of the procedure for training purposes. Some of the committee members were uncomfortable with projecting the “No Wrong Door Policy” that was stated on the flyer. Since there are so many possible entry points into HMIS/CES and the volume of staff turnover it was stated that for the right now Butte/Glenn 211 has the best track record for maintaining consistency and there are in fact “wrong doors” that cannot input clients into CES. Due to this it was requested that the “No Wrong Door” policy be removed from the flyer or make it more clearly transparent for the public. Elisa accepted the committee’s decision and will be making the decided upon changes to both of the flyers and she will bring them back to the discussion table at the HMIC/CES committee meeting in 1-2 months for their review before taking them to the CoC committee.

- 8. Additions to CES Enrollment Page (VHA):** There is a coordinated entry list that goes out every week that includes vital statistics for clients, there has been additional questions that have been added to the enrollment page specifically for Veterans. There were questions regarding the difference between the client answering no to a disabling condition but stating that they had a mental health condition, which can be attributed to the client not fully understanding how to appropriately answer these questions. Changes to the system are being made slowly but thoughtfully to correct identified problems and/or potential problems. When a client self-report that they have veterans status follow-up questions are pre-generated such as “Year Entered Military Service” and “Year Exited”. The HMIS/CES team has been working closely with the VA due to the fact that rural counties have on average a higher population of veterans and the need is in demand. One of the highest priorities for this demographic group is health care, the VASH program is highly utilized within our county. These new features within the HMIS/CES enrollment page will increase the effectiveness of connecting the client to veteran specific aid at the time of enrollment. Housing Navigators with Butte County DESS will receive the information and will appropriately determine the best way to assist the client based off their status. The last time that data was retrieved from HDIS, which is the state’s homeless data integration system, the percentage population of homeless veterans was at 11% within the HIMS system in Butte County.

9. Consistent Naming of Programs in HMIS: a) Program Name, Program Type-Agency (Funding). Funding sources are requiring the County to upload information into a variety of State and Federal websites, systems and databases for the purposes of tracking data as it relates to various funding sources. The consistent naming of programs is very important for the tracking of this data, as well as funding, within HMIS. It is being requested by the HMIS/CES lead that the program name always come first, then the program type (agency) come next as to further assist the funding source. No objections were made by the council so this process will take effect immediately within HMIS, with the expressed goal of consistency.

10. ANNOUNCEMENTS/NEXT MEETING: The next CoC meeting is Monday October, 8th, 2021 from 1:00-3:00. The flyer and flow chart will not be submitted to the CoC committee until very necessary changes are made and it has the approval of the HMIS/CES committee.

The next HMIS/CES Committee Meeting will be on November 8th, 2021 at 1:00-3:00

11. ADJOURNMENT: The meeting was adjourned at 2:55 P.M.

Clarity New Program Request Form

Program Name:			
Program Description:			
Operating Start Date:			
Cross Agency Services:			
Program Type:			
Program Applicability:			
Continuum Project:			
Target Population:			
Geo Code:			
HMIS Participating Project:	YES		
Continuum of Care:	CA-519		
Public Listing:	YES		
Goals:	NO		
Auto Service Placement:			
Eligibility:			
Link from History:			
Program Assessments:	YES		
Program Notes:			
Program Files:	NO		
Program Charts:	NO		
Auto Exit due to Inactivity:			
Auto Exit When Housed:			
Cascade Enrollment Data:	YES	If Yes, Threshold of days:	365
Cascade Assessment Data:	YES	If Yes, Threshold of days:	365
Close Services Upon Exit:	YES		
Enrollment Age Warning:		If Yes, age 17 and under:	
Enable All Client Forms:	NO		

Additional Agency Information:

Is this a HOPWA funded Medically Assisted Living Facility:	
Funding Sources:	
Sites:	
Documentation Required:	
Program Assessments:	Status & Annual Assessment

DESS HMIS Administrator:

Funding Sources:	
Funding Source Non-Federal:	
Grant Identifier:	

Enrollment Data Element Sheet Attached: Yes No

When completed, please email form to HMIShelp@buttecounty.net

2021 LSA Toolkit

We are pleased to announce the 2021 LSA Toolkit:

- * Access to four new Clarity Data Analysis dashboards to help dig into LSA errors/warnings (available to users with Data Analysis access)
- * Information on 2022 LSA Programming Specification changes
- * LSA Help Desk Reminders

Additional Resources:

- * [LSA Preparations](#): General steps to prepare for the LSA.
- * [Bitfocus Guide for LSA Flags](#): Resources on how to address specific LSA flags.
- * [FAQ on HUD - Move-in Dates](#): Details reviewing logic around move-in dates.

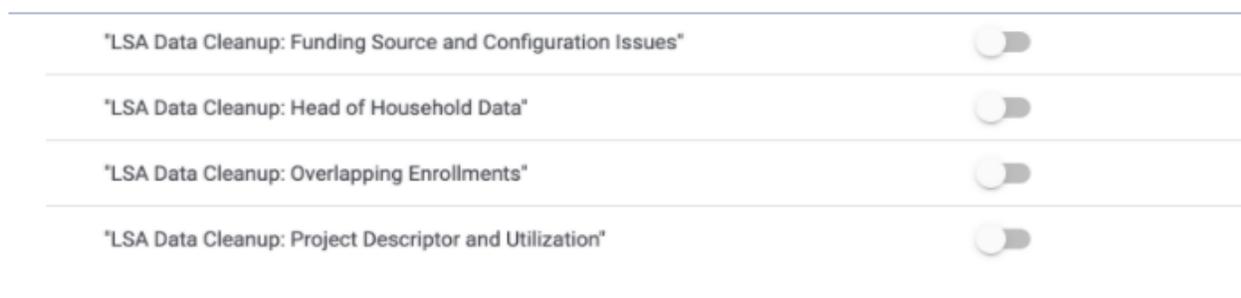
LSA Looker Dashboards

Four new LSA Data Cleanup dashboards were created to assist with LSA preparation. These dashboards can be accessed in two different ways.

Once the dashboards are activated on the Data Analysis tab, all users with Data Analysis access will be able to run the dashboards through the “Built-in Reports” section. The dashboards will automatically adhere to agency privacy controls already set.



Within that folder, the four dashboards can each be independently activated using the toggles and then saving.



The four dashboards include:

LSA Data Cleanup: HoH Data

This dashboard contains looks related to common issues surrounding the head of household (HoH) data including program enrollments without an HoH.

LSA Data Cleanup: Funding Source, Bed Inventory, CoC Configuration

This dashboard contains looks for common LSA errors around funding sources, bed inventory, and potential CoC Configuration issues.

LSA Data Cleanup: Geocode, Project Descriptor, Length of Stay, and Utilization

This dashboard contains looks to help locate errors around geocode, project descriptors, length of stay, and utilization issues.

LSA Data Cleanup: Overlapping Enrollments

The dashboard contains multiple looks to help drill down on overlapping enrollments.

We hope that you will find these dashboards useful as you prepare to address the errors/warnings that are associated with HUD's LSA Report.

LSA Preparations



Getting ready for the LSA takes a concentrated effort year-round with engagement to end-users and taking a closer look at client-level and program-level data quality. In this quick guide, we'll review some common strategies for these efforts.

During the LSA: Targeted Data Cleanup

One month before the LSA is opened by HUD (and earlier if possible), conduct LSA-specific data quality reviews, outreach, and cleanup.

Program Level Data Elements	Resources
<p>Common project-level data issues include:</p> <ul style="list-style-type: none"> • Missing bed/unit inventory • Total inventory ≠ sum of dedicated and non-dedicated beds • Discrepancies between the operating start date and earliest or latest inventory start date • Inconsistencies between project type and project funding source(s) • Inconsistencies between inventory in HMIS and inventory reported on the HIC • Zero enrollments during the LSA reporting period • Inconsistencies between Project CoC and Site CoC 	<p>Helpful resources include:</p> <ul style="list-style-type: none"> • The Bitfocus LSA toolkit lookML dashboards • The Project Descriptor Model in Looker • HMIS Manuals on the HUD Exchange <p>Important notes to remember:</p> <ul style="list-style-type: none"> • Make sure the project type is consistent with the project funding source(s). • Continually review utilization rates as generally, anything below 65% or above 105% utilization is problematic for ES, TH, and PSH project types.
Client Level Data Elements	Resources
<p>Common data quality errors might include:</p> <ul style="list-style-type: none"> • High missing rates for Race; Ethnicity; DV survivor status; Prior living situation; Destination • Sub-populations and dedicated beds, particularly Chronic homelessness • Children enrolled as individuals or in households with only children (for projects that do not specifically serve households with only children) • Missing bed nights (for NBN emergency shelters) • Zero enrollments during the LSA reporting period • Overlapping enrollments 	<p>Helpful canned reports include:</p> <ul style="list-style-type: none"> • [HUDX-225] HMIS Data Quality Report • [HUDX-227] Annual Performance Report • [GNRL-220] Program Details Report <p>Looker models</p> <ul style="list-style-type: none"> • Client Model; Data Quality Model; HMIS Performance

LSA Preparations



After the LSA: Focus on Prevention

Preventing or at least minimizing data quality errors is the most cost-effective way to address data quality. If end users do not make errors, then there is nothing to go back and fix!

Clarity Functionality to Support Data Quality	Resources
<p>Set additional screen warnings</p> <ul style="list-style-type: none"> • Can be set on any screen in Clarity • Can be set to appear based on certain constraints <p>Set fields to required</p> <ul style="list-style-type: none"> • Elements included in the Data Standards are already required on system screens within Clarity but additional required fields can be set 	<p>Help Center resources include:</p> <ul style="list-style-type: none"> • Creating and Editing Screens • Screen Field Editor Overview • Screen Field Editor: Display Constraints
Community Engagement	Resources
<p>Host a Training and Office Hours</p> <ul style="list-style-type: none"> • Emphasize the importance of quality data for federal reporting and appropriate service provision • Connect the dots between accurate & complete client-level data, funding, and providing services to clients 	<ul style="list-style-type: none"> • Bitfocus Blog Post: Using Improved Data Analytics to Address Homelessness • HUD Exchange: HMIS Data Quality Monitoring Toolkit

Year-Round: Making use of Bitfocus Resources

If you can't prevent errors, catching them quickly is the next best way to ensure they get resolved. Quick intervention will reduce the long list of items to clean up when the LSA comes around again.

Clarity Data Analysis Tools	Resources
<ul style="list-style-type: none"> • Continually review the LSA Toolkit LookML dashboards throughout the year to address errors. • Utilize embedded dashboards so other end users can see and address common data quality errors. • Set up schedules for dashboards to be emailed to appropriate parties. 	<p>Help Center resources include:</p> <ul style="list-style-type: none"> • Data Analysis Learning Resources • Embedded Looker: Looker - Clarity Human Services Integration • Dashboard and Look Usage Policies
Clarity Report Library	Resources
<ul style="list-style-type: none"> • Maximize the use of the many Pentaho reports available within Clarity. • Send out scheduled reports to agency managers and set data quality goals for your community. 	<p>Help Center resources include:</p> <ul style="list-style-type: none"> • Report Library • Scheduling Reports

Category	Type	Data Source	Level	Explanation from HUD	Possible Solution	Clarity Resource
LSAPerson File	Warning	LSAPerson	CoC	You reported that there were veterans who were 6-17 years old in their earliest enrollments during the report period. Please confirm.	Review data to find any clients who are minors and have veteran status equals Yes and then correct.	LSA Data Cleanup Dashboard: HoH Data
LSAReport File	Error	LSAReport	CoC	Each distinct HouseholdID must have one and only one client identified as the head of household. Both of the following LSA fields must equal zero for official CoC submissions to HUD: NotOneHoH1 and NotOneHoH3. These fields count the number of household enrollments (distinct HouseholdIDs) active during the report period where there was no designated head of household or where there was more than one designated head of household.	Review data to find any enrollment Households where there is no Head of Household or more than one. Update the enrollment Head of Household.	LSA Data Cleanup Dashboard: HoH Data
LSAPerson/LSAHousehold vs. LSACalculated	Error	LSAPerson and LSACalculated	Other	There is a discrepancy between your LSAPerson and LSACalculated data. You reported different numbers of people active in residence for the following population. These two numbers must be equivalent.	Review enrollment data for Night-by-night shelters for enrollments with no bednights.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization
LSACalculated: Sum of separate ES, SH, TH counts > combined ES/SH/TH count; bed nights	Error	LSACalculated	CoC	All households in ES/SH/TH. The sum of the separate CoC-wide ES, SH, and TH bed nights for people in all households served during the current report period is greater than the unduplicated, combined CoC-wide ES/SH/TH count of bed nights for these people. We expect the sum and the unduplicated, combined count to be equal. If the sum is greater than the combined count, that could indicate either a potential programming error or that people were not exited properly in HMIS and had erroneously overlapping enrollments (e.g., that they were enrolled in an ES project and a TH project simultaneously).	Review and correct overlapping enrollments across all Household types for Emergency Shelter, Safe Haven, and Transitional Housing projects.	LSA Data Cleanup Dashboard: Overlapping Enrollments
LSACalculated: Sum of HHType AO, AC, CO, UN values > all HHs value; bed nights; overall population (CoC level)	Error	LSACalculated	CoC	[Project Type]: The unduplicated total number of bed nights for people served in this project type during the current report period is less than the sum of bed nights for these people reported for AO, AC, CO, and UN (unclassifiable). We expect the sum and the unduplicated total count to be equal. If the sum is greater than the unduplicated count, that could indicate either a potential programming error or that people were not exited properly in HMIS and had erroneously overlapping enrollments (e.g., that they were enrolled in two ES projects simultaneously and in different household types).	Review and correct overlapping enrollments across all Household types for all projects of the listed project type.	LSA Data Cleanup Dashboard: Overlapping Enrollments
LSACalculated: Sum of HHType AO, AC, CO, UN values > all HHs value; bed nights; overall population (project level)	Error	LSACalculated	Project	The unduplicated total number of bed nights for people served in this project during the current report period is less than the sum of bed nights for these people reported for AO, AC, CO, and UN (unclassifiable). We expect the sum and the unduplicated total count to be equal. If the sum is greater than the unduplicated count, that could indicate either a potential programming error or that people were not exited properly in HMIS and had erroneously overlapping enrollments in the same project (which means the clients were enrolled multiple times in the same project without first exiting that project).	Review and correct overlapping enrollments across all Household types for the project listed.	LSA Data Cleanup Dashboard: Overlapping Enrollments

LSACalculated: Project-level sum > CoC total, by project type; bed nights; overall population	Error	LSACalculated	CoC	[Household Type] households in [Project Type]: The sum of the project-level counts of bed nights among all [Project Type] projects is greater than the unduplicated CoC-wide [Project Type] count of bed nights for all people served during the current report period. We expect the sum and the unduplicated count to be equal. If the sum is greater than the unduplicated count, that could indicate either a potential programming error or that people were not exited properly in HMIS and had erroneously overlapping enrollments (e.g., that they were enrolled in two ES projects simultaneously).	Review and correct overlapping enrollments for the Household types and project types listed.	LSA Data Cleanup Dashboard: Overlapping Enrollments
Missing Projects	Error	Project, Inventory, and LSACalculated	Project	The following Project ID was found in your LSACalculated file, but there were no inventory records associated with this project in your Inventory file (with the following parameters in the Inventory data: where the Inventory Start Date is less than or equal to the expected LSA Report End Date, where the Inventory End Date is greater than or equal to the expected LSA Report Start Date, and where the CoC Code in the Inventory file equals your CoC's code in the HDX).	Review projects for missing Inventory records.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration
HMIS Participation	Error	Project and LSACalculated	Project	You reported that this project does NOT participate in HMIS, yet the project appears to have client data entered in your HMIS. Your LSA data indicate that this project served more than zero people during the reporting period. If the project did not participate in HMIS, it should have no client data.	Review non-HMIS Participating projects with client data. The project will either need to be set to "HMIS-participating" or the client data will need to be removed.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization
Inventory File	Error	Project, Inventory, and LSACalculated	Project	You reported that people were served in the following project, yet you reported zero beds active during the report period, in your Inventory file.	Review projects for missing Inventory records or inventory Start/End dates that need to be adjusted.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration
Project vs. Inventory	Error	Project and Inventory	Project	The earliest inventory start date you reported for this project is earlier than the project's operating start date.	Review Inventory record Start and End dates and align with the project's Operating Start and End dates.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration

Project File	Error	Project	Project	This project is missing a Housing Type.	Review and update the missing a Housing Type for the specified project.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration
Geography	Error	ProjectCoC	Project	<p>Description #1: This geocode is unrecognized. It may be invalid or out of date.</p> <p>Description #2: This project's zip code is outside of your CoC's state.</p>	Review project set-up and update the geocode and/or zip code.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization
LSACalculated: DQ counts	Error	LSACalculated	Project	You reported that there were households active in this continuum project but whose enrollment was not associated with any CoC (i.e., the enrollment was missing the client location CoC code). Because of the importance of the client location, this issue could potentially have a large impact on usability.	Review data for Client Location errors or Household errors. If client location errors have been resolved, correct the enrollment household to address these flags.	LSA Data Cleanup Dashboard: HoH Data
LSACalculated: DQ counts	Error	LSACalculated	Project	You reported that there were people exited from this project after its operating end date. Please check the project operating end date and enrollment exit dates.	Review persons exited after the project's Operating End Date. Change program end date or adjust the individual exit dates.	Run the [GNRL-106] Program Roster
LSACalculated: DQ counts	Error	LSACalculated	Project	You reported that there were people in this project with no exit date but with no record of a bed night in the last 90 days of the report period. Please check the enrollment exit dates and bed nights.	Review people in this project with no exit date, but no bed night within the last 90 days of the reporting period. Review enrollment/exit dates and bed nights. Clarity's Autoexit functionality with a 90 day threshold may assist with this flag.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization
LSACalculated: DQ counts	Error	LSACalculated	Project	You reported that there were people in this project with an exit date but with no bed night recorded for the day prior. Please check the enrollment exit dates and bed nights.	Review people with an exit date, but no bed night the day prior. Review enrollment/exit dates and bed nights.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization

Funding Source vs. Project Type	Error	Funder	Project	You reported that this project received [funding source] funding. If so, the project should be classified as [project type].	Review project set up and funding sources.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration
Funding Source vs. Dedicated Beds	Warning	Funder and Inventory	Project	You reported that this project receives funding from VA sources, yet you did not report any dedicated veteran beds among the project's active inventory.	Review bed inventory and funding sources.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration
Funding Source vs. Project Name	Warning	Project, Funder, and Inventory	Project	Based on the project name, this appears to be a possible [program name] project, yet you did not report that this project received [funding source] funding during the report period. Please confirm.	Project name suggests a funding source that has not been reported. Review project name and funding source. Examples include VASH or GPD.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration
Victim Services Providers	Warning	Project, Inventory, and LSACalculated	Project	You reported that this victim services provider participated in HMIS and served people during the report period. Please confirm. Victim services providers are generally prohibited from participating in HMIS.	Review HMIS Participation status and Victim Service Provider status.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization
Comparisons with the HIC/PIT: People Counts	Warning	LSACalculated and HIC	CoC	You have reported fewer people active in residence in [Project Type] projects during the full report period in your LSA (in the LSACalculated file) than you reported among [Project Type] projects fully participating in HMIS on your [year] HIC. Since the LSA report period includes the date on which you conducted your PIT/HIC, there should be at least as many people reported in the LSA as there were in HMIS-participating projects on the HIC.	Check actual/replicated HIC tabs provided. Are some programs missing from the LSA? Were some programs misclassified on the HIC? If the HIC was incorrect, explain the discrepancy and confirm it will be more accurate next year.	Run the [HUDX-123-AD] Housing Inventory Count (HIC)
Comparisons with Prior LSA	Warning	LSACalculated	CoC	[Household Type] households in [Project Type]: There is a large difference in the number of people you reported were active in residence between your [year] and [year] LSA. (For reference, we are not only displaying the number of people served in both years, but also several other measures which may help understand the change: the number of beds reported on your HIC, the LSA average number of people served per night during the report period, and the LSA average length of stay during the report period.	Review the numbers given and determine the reason - <i>more shelters due to COVID</i> etc. This may also include sub-population comparisons, veterans or chronic counts.	System Admins should run APRs ([HUDX-227] Annual Performance Report) for each reporting year by project type to compare data between household types.

Length of Stay	Error/Warning	LSACalculated	CoC	All people in [Household Type] households in [Project Type]: The average length of stay (derived from your LSACalculated file as total bed nights divided by total people) is unusually short for [Project Type] [Household Type] households. Please confirm and explain.	Confirm the calculation provided for accuracy. Provide an explanation according to calculation, expected length of stay, and project use.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization
Utilization	Warning	Inventory and LSACalculated	Project	[Household Type] households: You reported that zero people were served during the entire report period in this HMIS-participating project. Please confirm and explain.	Review project enrollments, give explanation, or update program/inventory dates.	LSA Data Cleanup Dashboard: Geocode, Project Descriptor, LoS, and Utilization
Subpopulations vs. Dedicated Beds	Warning	Inventory and LSACalculated	Project	[Household Type] households: 100% of this project's clients in this household type were people in [sub-population] households, yet you did not report that any of these beds were dedicated to [sub-population] households. Are these beds actually dedicated [sub-population] beds?	Review dedicated beds in inventory -- update any beds that need are dedicated for a particular sub-population.	LSA Data Cleanup Dashboard: Funding Source, Bed Inventory, CoC Configuration
Demographics	Warning	LSAHousehold	CoC	Description #1: We generally expect all households served in PSH to have a disabled member, but you have reported that many of the PSH households active in residence did not have a disabled member. Please confirm. Description #2: Child-Only households in RRH: Children ages 5 and under must be accompanied by an older child, but you have reported zero older children between the ages of 6 and 17 and more than zero children under age 6 in these households.	Review expected demographics based on project type and either correct data or explain. For example, PSH is expected to have at least one disabled HH member and RRH should not have child-only HHs, where the child is under 5-years-old	Run the APR ([HUDX-227] Annual Performance Report) for the specific project type to locate and correct the demographic information.
Data Completeness and Overall Quality	Warning	LSAReport	CoC	You have a high percentage of clients with unknown, invalid, or duplicate Social Security Numbers (among all clients served during the three-year period including the report period plus the prior two years). This makes the de-duplication of clients more difficult and may cause your total client counts to be inflated. Please (a) confirm whether this high percentage is correct, (b) indicate whether this number can be improved, and (c) give us your assessment of the quality of de-duplication in your HMIS.	Review SSN error rate and number of duplicates. Resolve data issues where possible, and then explain the unresolved SSN error rate.	APR or other standard report to locate SSN data quality issues. Review and merge duplicate client records.
Comparisons with the HIC: Bed Counts	Warning	Inventory and HIC	CoC	The number of HMIS year-round beds for [Household Type] households you reported as available (i.e., in operation) in [Project Type] projects on the night of your [year] PIT count (as computed from the Inventory file you submitted for the LSA) differs from what you reported on your [year] HIC. Please verify and explain, and see the worksheet titled Note on HIC Comparisons for more details about this comparison.	Compare specified bed type on Actual/Replicated HIC. Explain the difference - did new programs open/some programs close etc?	Run the [HUDX-123-AD] Housing Inventory Count (HIC)

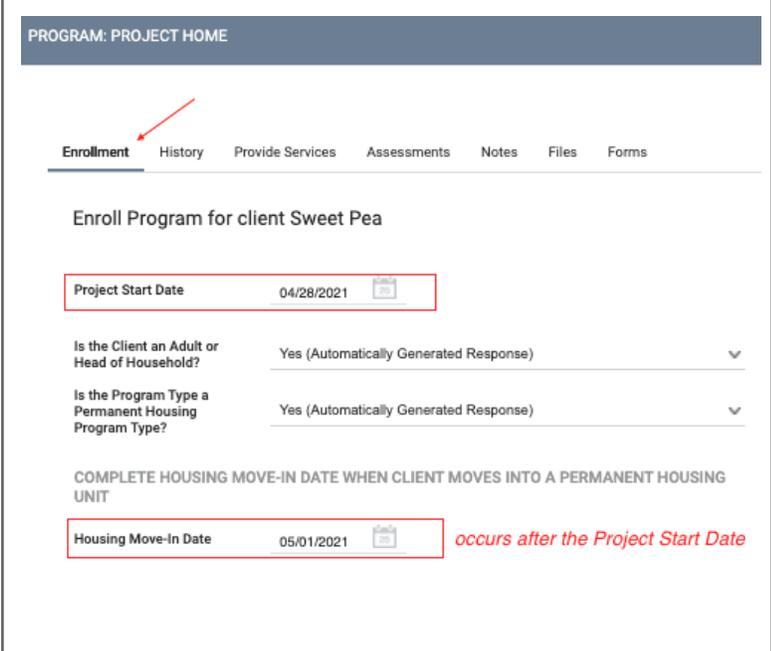
Quick Guide: FAQ on HUD - Move-in Dates

Housing and Urban Development (HUD) expanded the Move-in Date field (3.20) in 2017 to include all permanent housing types (Permanent Housing Only, Permanent Supportive Housing, Permanent Housing with Services, Rapid Re-Housing.) The intent of this field is to document the date that a household admitted into a Housing Project moves into housing and physically occupies the unit. This is critical point-in-time data that differentiates those that have already moved into permanent housing from households who are enrolled into a permanent housing project but are still literally homeless (i.e. in emergency shelter, safe haven, transitional housing or outside), i.e. accepted into the program but not yet moved in.

Why Does This Matter?

Overlapping and Missing Move-in Dates cause errors on our Federal Reports and decrease our reliability on the data for our system.

- Missing Move-in Date Error - This can show that they were never housed.
- Overlapping Move-in Date Error - This is when someone is showing as having a Move-in Date, but also either an active enrollment in a shelter/transitional program or another housing program during the same period. Overlapping errors create ambiguous data which is unreliable, since someone can physically only occupy one space at a time.

<p>Before entering a Move-in Date, check these first:</p> <ul style="list-style-type: none"> → Does the Move-in Date fall before your Program Enrollment Date? → Does the Move-in Date after the exit date? → Is there already a Move-in Date in the system in another Housing Program? → Does the Housing Move-in Date fall during a Transitional Housing or Emergency Housing Program Enrollment? <p>How to complete the Move-in Date:</p> <p>Once a client has a Project Start Date in a housing project, record the date a client moves into the permanent housing unit on the Head of Household’s program enrollment screen.</p>	 <p>PROGRAM: PROJECT HOME</p> <p>Enroll Program for client Sweet Pea</p> <p>Project Start Date: 04/28/2021</p> <p>Is the Client an Adult or Head of Household? Yes (Automatically Generated Response)</p> <p>Is the Program Type a Permanent Housing Program Type? Yes (Automatically Generated Response)</p> <p>COMPLETE HOUSING MOVE-IN DATE WHEN CLIENT MOVES INTO A PERMANENT HOUSING UNIT</p> <p>Housing Move-In Date: 05/01/2021 <i>occurs after the Project Start Date</i></p>
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Move-in Date FAQ

What happens when the client is moving from one PSH building to another PSH building?

Exit the client from the first building. Enter a new program enrollment for the new building. The Program start date for the new program and the Move-in Date will be the same, the date they moved in.

Is the Move-in Date the same as the “lease date”?

Sometimes it can be, but sometimes not. HUD defines Move-in Date as the date the household is physically located in the unit.

What happens if the household never moves into housing?

In some situations, the household never moves into the housing, this may be more common with RRH. In those cases, do not enter a Move-in Date, and you will exit the client from the program.

What should I do if the Move-in Date I want to enter is during a shelter enrollment?

Contact the program who enrolled the client to find out if they can double check their records and update as necessary to avoid an overlapping enrollment.

What happens if the client loses their housing and then finds a new unit?

This can happen with RRH programs when a lease situation doesn't work out. If there were no days in homelessness in between the two units, no data entry requirement is needed. If the client lost housing and became homeless, you will exit the client with the accurate exit destination, and then create a new program enrollment. Never delete a Move-in Date already captured in HMIS. You will exit the client from the program, create a new enrollment, and then record the new Move-in Date.

Running Reports to Track Move-in Date

Monitoring and correcting Move-in Date Errors is everyone's responsibility. The following reports can be run by all HMIS users. They are easy and straightforward to complete, and can be run at any time. Below are instructions and best practices.

[GNRL - 106] Program Roster

This Program-based report lists program stay information for selected programs and status according to specified report dates. Run can be run for those “Active within report date range”, “Enrolled within report date range”, and those “Exited within report date range”. Select the parameters and the date range that you want to review.

REPORT LIBRARY

Program Based Reports > [GNRL-106] Program Roster

Program(s)

- All
- Home Agency Front Door Program
- Path to Home RAP Program
- Project HOME

Status

- Active within Report Date Range
- Enrolled within Report Date Range
- Exited within Report Date Range

Report Date Range

Report Output Format Web Page PDF Excel

The report will give you a list of clients, and their Move-in Date. If their Move-in Date is either invalid (i.e. occurring before program start) or missing, you will have an “undefined” text in the description. Move-in Date needs to be added for the Head of Household only.

Program Roster Report **[KC] Home Agency**
Active within 01/01/2021 thru 05/31/2021

Housing Move-in: Undefined = Unknown HoH or adjusted Move-in is Null, = Non PH Project, **A:** Assessments, **S:** Services, **CN:** Case Notes
 You can find more information about adjusted Move-In Date at the [Help Center Article](#)

Client	Unique Identifier	Birth Date	Age At Entry	Current Age	Enroll Date	Exit Date	LOS	Housing Move-in	A	S	CN	Assigned Staff
Program: Project HOME												
	247097728	01/01/1980	40	41	04/30/2020	-	397	04/30/2020	0	0	0	
	CDE3AD375	12/12/2000	20	20	12/14/2020	-	169	undefined	1	0	0	
	DC112F4C9	09/09/1999	21	21	01/07/2021	-	145	04/06/2021	0	2	2	
	4737368B3	12/12/2011	9	9	04/08/2021	-	54	04/08/2021	0	0	0	
	021ED9109	12/12/1960	60	60	04/08/2021	-	54	04/08/2021	0	0	0	
	B3AD5EECB	11/12/1956	64	64	04/08/2021	-	54	04/08/2021	0	0	0	
	F876D1AE5	01/01/2013	8	8	04/28/2021	-	34	undefined	0	0	0	
	DABAE0F39	01/01/2000	21	21	04/28/2021	-	34	undefined	0	0	0	
	8FBA4A86C	12/14/2000	20	20	05/07/2021	-	25	05/07/2021	0	0	0	

Number of Clients: 9

Number of Households: 6

Total Number of Clients: 9

Review these regularly and add Move-in Dates on the enrollment screens for any that are missing, ensuring they occur on or after the program start date.

Are you currently employed as a Housing Navigator with Butte County Department of Employment and Social Services?



Veterans Healthcare Administration (VHA) Eligible?

Yes



VASH_GDP_SSVFEligibleOnly



Unique ID	Enrollment Start Date	Age	Veteran Status	Disabling Condition	Receiving Services for Mental Health Condition	Are you a fire survivor?	SPDAT Score	Chronically Homeless	Household with Children	Unaccompanied Homeless Youth	Priority Point Total	Veterans Healthcare Administration (VHA) Eligible	VASH_GDP_SSVF Eligible Only
	05/06/2020	24	No	Yes			14	On	On	On	79		
	07/24/2020	20	No	Yes	No		12	On	On	On	77		
	05/03/2021	23	No	Yes	No		12	On	On	On	77		
	06/28/2021	23	No	Yes	Yes		12	On	On	On	77		
	04/29/2020	22	No	Yes	Yes	No	11	On	On	On	76		
	09/16/2020	19	No	No	Yes	No	8	On	On	On	73		

Phase 5: VI-SPDAT

Once the client is settled and able to provide the required information, the appropriate VI-SPDAT Assessment will be conducted with the client. This entire assessment will be entered into Clarity and will calculate their VI-SPDAT score. The provider staff with access to the Coordinated Entry Program will open the clients Initial Assessment and enter this score into the appropriate field, which should be done within 7 days of Coordinated Entry enrollment.

Priority points will be utilized to prioritize persons experiencing Chronic Homelessness and other vulnerable homeless persons in CoC funded permanent supportive housing, Homeless Households with Children; and prioritization of Unaccompanied Homeless Youth for Housing Services.

Priority points will be utilized. Priority points will be assigned to individuals/families within the above noted classifications as follows:

<i>Prioritization of Chronically Homeless</i>	25 Points
<i>Prioritization of At-Risk of Chronic Homelessness</i>	23 Points
<i>Prioritization of Homeless Households with Children</i>	20 Points
<i>Prioritization of Unaccompanied Homeless Youth</i>	20 Points

Clients that are categorized as multiple subpopulations would stack points for each classification up to a maximum range of 63- 65 preference points for prioritization. For clients who are not being considered for permanent supportive housing options the prioritization will not be based solely on the vulnerability score. In those cases the vulnerability score will be a lesser factor than the extent to which the client qualifies for the program. In cases of rapid re-housing programs the primary prioritization factors will include: an assessment with households that will develop into a housing plan. The assessment will include the identification of housing needs, preferences, strengths and barriers to housing. The assessment will also seek to identify possible alternatives and resources. The assessment should be primarily focused on housing needs rather than service needs and can be used to determine if rapid re-housing alone is the most appropriate intervention or if longer-term assistance is needed and desired. The initial assessment also provides the basis for the initial level of financial assistance and/or supportive services to be provided by the intervention. The housing plan should include re-assessments to determine adjustments or discontinuation of financial assistance once households enter permanent housing.

INTRODUCTION

The No Place Like Home Program (NPLH) provides funding and tools that allow the California Department of Housing and Community Development (Department) to address affordability issues associated with creating housing units that are specifically set aside for persons with serious mental illness who are chronically homeless, homeless, or at-risk of being chronically homeless.

NOTE: Authority cited: Section 5849.5, Welfare and Institutions Code. Reference cited: Section 5849.5, Welfare and Institutions Code.

Section 101. Definitions

All terms not defined below shall, unless their context suggests otherwise, be interpreted in accordance with the meaning of terms described in Part 3.9 of Division 5 of the Welfare and Institutions Code (commencing with Welfare and Institutions Code Section 5849.1).

- (a) “At-Risk of Chronic Homelessness” for this Program means an adult or older adult with a Serious Mental Disorder or Seriously Emotionally Disturbed Children or Adolescents who meet one or more of the criteria below. All persons qualifying under this definition must be prioritized for available housing by using a standardized assessment tool that ensures that those with the greatest need for Permanent Supportive Housing and the most barriers to housing retention are prioritized for the Assisted Units available to persons At-Risk of Chronic Homelessness pursuant to the terms of the Project regulatory agreement. Qualification under this definition can be done in accordance with established protocols of the Coordinated Entry System, or other alternate system used to prioritize those with the greatest needs among those At-Risk of Chronic Homelessness for referral to available

Persons qualifying under this definition are persons who are at high-risk of long-term or intermittent homelessness, including:

- (1) Pursuant to Welfare and Institutions Code Section 5849.2, persons exiting institutionalized settings, such as jail or prison, hospitals, institutes of mental disease, nursing facilities, or long-term residential substance use disorder treatment, who were Homeless prior to admission to the institutional setting;
- (2) Transition-Age Youth experiencing homelessness or with significant barriers to housing stability, including, but not limited to, one or more evictions or episodes of homelessness, and a history of foster care or involvement with the juvenile justice system; and others as set forth below;
- (3) Persons, including Transition-Age Youth, who, prior to entering into one of the facilities or types of institutional care listed herein, had a history of being Homeless as defined under this subsection (f)(3): a state hospital, hospital behavioral health unit, hospital emergency room, institute for mental disease, psychiatric health facility, mental health rehabilitation center, skilled nursing facility, developmental center, residential treatment program, residential care facility, community crisis center, board and care facility, prison, parole, jail or juvenile detention facility, or foster care. Having a history of being Homeless means, at a minimum, one or more episodes of homelessness in the 12 months prior to entering one of the facilities or types of institutional care listed herein. The CES (as defined in Section 101(n)), or other local system used to prioritize persons At-Risk of Chronic Homelessness for available Assisted Units may impose longer time periods to satisfy the requirement that persons under this paragraph must have a history of being Homeless.
- (4) The limitations in subsection (w)(a)(iii) pertaining to the definition of “Homeless” shall not apply to persons At-Risk of Chronic Homelessness, meaning that as long as the requirements in subsections (f)(1) - (3) above are met:
 - i. Persons who have resided in one or more of the settings described above in subsection (f)(1) or (f)(3) for any length of time may qualify as Homeless upon exit from the facility, regardless of the amount of time spent in such facility; and
 - ii. Homeless Persons who, in the 12 months prior to entry into any of the facilities or types of institutional care listed above, have resided at least once in any kind of publically or privately operated temporary housing, including congregate shelters, transitional, interim, or bridge housing, or hotels or motels, may qualify as At-Risk of Chronic Homelessness.

- (t) "Homeless" for this Program means adults or older adults with a Serious Mental Disorder or Seriously Emotionally Disturbed Children or Adolescents who meet the criteria below, according to 24 CFR Section 578.3, as that section read on May 1, 2016, which include:
- a. An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - i. An individual or family with a primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground, or
 - ii. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals), or
 - iii. An individual who is exiting an institution where he or she resided for 90 days or less, and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.
 - b. An individual or family who will imminently lose their primary nighttime residence provided that:
 - i. The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance,
 - ii. No subsequent residence has been identified, and
 - iii. The individual or family lacks the resources or support networks, such as family, friends, faith-based or other social networks, needed to obtain other permanent housing.

- c. Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless, but who:
- i. Are defined as homeless under Section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), Section 637 of the Head Start Act (42 U.S.C. 9832), Section 41403 of the Violence Against Women Act of 1994 (U.S.C. 14043e-2), Section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), Section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), Section 17(b) of the Child Nutrition Act of 1966 (42 USC 1786 (b)), or Section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a),
 - ii. Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60-day period immediately preceding the date of application for homeless assistance,
 - iii. Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance, and
 - iv. Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or
- d. Any individual or family who:
- i. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence,
 - ii. Has no other residence, and
 - iii. Lacks the resources or support networks, such as family, friends, and faith-based or other social networks, to obtain other permanent housing.