**2024 Connecticut Point-in-Time Count and Housing Inventory Chart Methodology (HIC/PIT)**

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# **Section 1: Purpose of this Document**

# On **Tuesday, January 23, 2024,** the State of Connecticut will conduct its annual statewidePoint-in-Time (PIT) Count of people experiencing homelessness. This document outlines a methodology proposed for use in the 2024 PIT Count across the State of Connecticut. As required by HUD, the CT Balance of State (CT BOS) and Opening Doors Fairfield County (ODFC) Continuums of Care (CoCs) must approve the final methodology. This document proposes methodologies for the following:

● PIT Count of people experiencing unsheltered homelessness;

● PIT Count of people experiencing sheltered homelessness; and

● Housing Inventory Chart

This document will be updated as necessary to conform with federal requirements as new information is released by the U.S. Department of Housing and Urban Development (HUD). HUD provides information to CoCs on what information to collect via Notice. For more information regarding the HUD data collection requirements for the 2024 count, see: [HUD PIT Requirements](https://www.hud.gov/sites/dfiles/CPD/documents/2022_HIC_and_PIT_Data_Collection_Notice.pdf).

HUD strongly encourages CoCs to use approved software, Homeless Management Information System (HMIS), known as Caseworthy in CT, to generate HIC/PIT count data for projects with 100 percent of their beds participating in HMIS. Before submitting HIC/PIT data, HUD urges CoCs using this method to verify with project staff that HMIS data are complete and correct for the night of the PIT count and that exit dates have been entered for all persons who exited the project on or before the date of the PIT count to ensure data quality and accuracy.

# **Section 2: Count History**

The State of Connecticut has been conducting an annual PIT Count of people experiencing homelessness since 2007. Until recently, the methodology for that count had remained relatively consistent. However, due to the global COVID-19 pandemic, in 2021, HUD offered flexibility to communities in how or whether they conduct an unsheltered count. Connecticut used this flexibility and significantly altered its methodology for conducting the unsheltered count in 2021, while the sheltered count methodology remained relatively consistent.

**Section 3: Changes in Methodology:**

**Changes in Methodology for 2024:**

All Non-HMIS PSH and RRH programs will not be required to enter demographics. They will only need to provide total households and total persons – this is similar to the VASH change from 2023

BNLv2 no longer includes Unaccompanied Minor data. This means that if there are any who meet the definition of chronic homeless they will not be counted. To resolve this Nutmeg will query records counted on the night of PIT for any Unaccompanied Minors who’s data calculates to chronic homeless. If any records are found they will be added to the Chronic Homeless count.

Chronic Homeless client records cross-reference - To ensure that any chronic homeless record found on the BNLv2 is being counted for PIT. If the record is not counted for PIT then it will be removed from the chronic homeless count.

**Changes in Methodology for 2023 and Carryover to 2024**

VASH programs only collected Household and Person counts - no demographics

HMIS Participating Hotel/Motel programs used a service specific for PIT night to help reduce overlapping enrollment incidents – this service helped identify clients who were being counted in more than one location on the night of PIT

DOH Non-HMIS warming and outreach smart sheet intake and import – A form was created in smart sheets where Non-HMIS warming centers and outreach programs could enter PIT specific count information that could then be imported into the PIT database to populate the PIT tables for those programs. This allowed for a duplicate client check against all clients being counted on the night of PIT as long as first, last, DOB and SSN information were provided.

Overlapping Enrollment - ES and SO - auto fix SO to ES on 1/24/2023 – when client records were confirmed as being in ES on the night of PIT then the Street Outreach Current Living Situation Assessment was auto-updated in HMIS and the Street Outreach data refreshed in the PIT database – this reduced overlap between ES and SO programs.

Overlapping Enrollment – PSH/RRH - CoC's provided a list of programs and counts to subtract from HDX Specific HIC total persons column to clean up overlaps in PSH and/or RRH programs.

Section 4: Key Differences in the Unsheltered Count Methodology

Prior to 2021, CT used hundreds of volunteers to canvas the State on the “night of the count.” Volunteers canvassed all census tracts identified by street outreach teams and the previous years’ count data as “high probability” (i.e., volunteers were likely to find people experiencing unsheltered homelessness in that area). A random sample of the remaining census tracts was also selected for canvassing. Based on the number of people experiencing unsheltered homelessness counted in those “low probability” areas, a weighting factor was applied to the areas not canvassed. That weighting factor was used to estimate the number of people experiencing unsheltered homelessness in all “low probability” areas.

In 2021, the CT Unsheltered PIT Count:

● Discontinued canvassing of low and high-probability census tracts;

● Discontinued administration of a survey to collect self-reported data that had previously been used to gather demographic and subpopulation data required by HUD;

● Used data compiled regularly in HMIS by outreach teams serving people experiencing unsheltered homelessness to compile the unsheltered count and the unsheltered demographic and subpopulation data required by HUD;

● Supplemented those data by gathering data from outreach teams that do not typically enter information into HMIS;

● Used data from these sources rather than surveys of people experiencing unsheltered homelessness encountered during canvassing to gather the demographic and subpopulation data required by HUD.

In 2023, the changes described above were continued. In 2024, this document proposes:

● To continue the changes described above that were originally adopted in 2021

For more information about previous years’ data see [PIT Count Reports](https://cthmis.com/pit/) on CTHMIS.com

# The State of Connecticut uses a PIT database, a web-based platform, to collect and confirm Housing Inventory Chart (HIC) and PIT data. Each project for which homelessness is part of the criteria for entry is listed in the database and data is entered regarding the numbers and types of units and beds, funding type, etc. for the HIC. For the PIT, aggregate data (sex, race, ethnicity, type of household, etc.) is captured for persons enrolled in the program on the night of the count.

# **Section 5: Unsheltered Count Methodology**

The components of the unsheltered count methodology outlined above are further detailed in this section:

1) **HMIS data** from HMIS participating outreach teams – In advance of the count, by no later than 1/10/2024, the PIT Leadership Team will work with all HMIS participating outreach teams to ensure that all participants are correctly captured in HMIS. This includes, for example:

a. Verifying that all participants are enrolled.

b. All participants who are no longer receiving services have been exited with the correct date.

C. All participants who have moved into any sort of permanent housing have an accurate move-in date entered.

Nutmeg will provide outreach teams with detailed instructions for these activities. The PIT database will be used to aggregate the HMIS participating outreach client data into the PIT population tables. The PIT Database will use the HUD Current Living Situation Assessment as the validation to count the household on the night of the PIT count. For a person to be counted, the user will need to confirm in the assessment that the household’s current location is a homeless setting, and the assessment needs to be dated on the night of the count.

The PIT Database will also provide a view of all HMIS unsheltered enrollments who do not have any services in the past 90 days to help determine what the actual universe of clients should be. If there are no services in the past 90 days users will need to exit them from HMIS.

The PIT Leadership Team will monitor the report view showing unsheltered enrollments

without a service in the last 90 days throughout the PIT process starting in November of

2023.

2) Data from **outreach teams that do not participate in HMIS** – In advance of the count, by no later than 1/10/2024, The PIT Leadership Team will work with all non-HMIS participating outreach teams to ensure that all participants are correctly captured in the PIT database.

3) **Verification of unsheltered homelessness** - On 1/24/2024, Nutmeg will generate and provide to each participating outreach team a list of all clients who were reported as unsheltered on the night of the count. Each CAN will ensure that they have a feasible strategy for outreach workers to verify within 7 days of the night of the count (i.e., by 01/30/2024) that all clients who are on those lists were, in fact, experiencing unsheltered homelessness on the night of 1/23/2024. This means that they were staying in a location not intended for human habitation and were not, for example, staying with friends or family, in a hospital, in a correctional facility, a hotel, or in any other setting that does not qualify as unsheltered under the HUD requirements. At least 4 weeks in advance of the count, Nutmeg will provide additional guidance for CANs and outreach workers regarding how to complete these verifications and report the results to enable the removal of people who were not experiencing unsheltered homelessness on 1/23/2024 from the unsheltered count. Following the count, the PIT Leadership Team will review the actual living situation verification data submitted to determine how to count people enrolled in an unsheltered project but not verified on the night of the count.

# **Section 6: Sheltered Count Methodology**

The Sheltered Count includes three main components:

1)The collection of client population counts by household type among shelters, transitional housing, safe havens, rapid rehousing programs, permanent supportive housing, and other permanent housing projects designated to serve people experiencing homelessness. This includes projects that participate in HMIS, those that provide data via the statewide comparable DV database, and those that do not participate in either system;

2) The collection of the HUD required subpopulation data (see Section 7); and

3)The collection of HUD required demographic data (e.g., race, ethnicity, age, gender, etc.) on persons in emergency shelters, transitional housing programs, and safe havens, including projects dedicated to survivors of domestic violence. As necessary, where the relevant data are missing/refused/unknown, Nutmeg will estimate the data by using an extrapolation process.

In the event that a natural disaster or other emergency results in evacuees experiencing homelessness being sheltered in CT, counting protocols will be put into place to include this population. The level of detail in the data received from FEMA or other government agencies involved with the evacuee population will determine the capacity to provide extrapolated estimates of subpopulation data, i.e. chronic, veteran, severe mental illness, chronic substance use, HIV/AIDS, and domestic violence.

For HMIS-participating projects, HMIS data will be used to populate the PIT database with sheltered data. In advance of the count, by no later than 1/10/2024 The PIT Leadership Team will work with Regional Coordinators and all HMIS participating program teams relevant for the sheltered homeless count (Emergency Shelter (ES), Transitional Housing (TH), & Safe Haven (SH)) to ensure that all participants are correctly captured in HMIS. Nutmeg will provide programs with detailed instructions for these activities.

For DV ES and TH programs entering data into a comparable database, the procedure will continue as in previous years. Data from the comparable database will be input, in aggregate form, into the PIT database by providers. For ES and TH programs that do not enter into HMIS or a comparable database, similarly, aggregate data will be input into the PIT database by providers.

# **Section 7: Extrapolation**

HMIS will be the primary source for reporting PIT data. However, subpopulation and demographic estimates will be determined via program descriptor data when available. For example, if a project is dedicated to serving Veterans or people fleeing Domestic Violence (DV), then the people in the project will be counted in the applicable subpopulation even if related HMIS data are missing. As necessary, where no useful program descriptor data exist, estimates will be calculated using an extrapolation process to account for any missing HMIS data. A rate will be determined based on available data by component type and then applied at the CoC Level to estimate the count where data are missing. For example, if available HMIS data indicate that 15% of people living in the emergency shelters in CT BOS or ODFC are Hispanic, this rate will be applied to all missing, refused, or unknown records in emergency shelters. For additional details regarding extrapolation methodologies see Section 7.

# **Section 8: Subpopulation Methodologies**

HUD requires CoCs to report PIT count data on various subpopulations. CoCs must report data for People Experiencing Chronic Homelessness, Veterans, and Youth (unaccompanied and parenting) broken down by:

● Number of Households and People

●Household Type: Households with at Least One Adult and One Child, Households without Children, and Households with Only Children

● Location: Sheltered (Emergency, Transitional, Safe Haven) and Unsheltered

In addition, CoCs must report data for Veterans and Youth (unaccompanied and parenting) broken down by:

▪ Demographics: Gender, Age, Race, Ethnicity

Based on the HUD requirements, Veterans, parenting youth, and unaccompanied youth data are a **subset** of the “All Households” data and must still be included in the “All Households” data.

HUD requires CoCs to report data on adults only, meeting the criteria for these additional subpopulations: Adults with Serious Mental Illness, Substance Use Disorder, and HIV/AIDS. In addition, CT BOS and ODFC report optional data on adult survivors of Domestic Violence. CoCs must report these data broken down by:

● Location: Sheltered (ES, TH, and SH) and Unsheltered

**A: Chronically Homeless**

**Who to count**

HUD requires CoCs to use the following definition for A person experiencing chronic homelessness:

a) Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

b) Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least four separate occasions in the last 3 years where the combined length of time homeless in those occasions is at least 12 months; and

c) Has a disability (see below).

When a household with one or more members includes an adult or minor head of household who qualifies as chronically homeless, then all members of that household are counted as chronically homeless persons in the applicable household type table. For example, if one adult in a two-adult household is identified as chronically homeless, both adults are counted as a chronically homeless person in the households without children category of the PIT count.

**Disability**

An individual with one or more of the following conditions:

a) A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that:

1. Is expected to be long-continuing or of indefinite duration;

2. Substantially impedes the individual's ability to live independently; and

3. Could be improved by the provision of more suitable housing

conditions.

b) A developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or

c) The disease of Acquired Immunodeficiency Syndrome (AIDS) or any condition arising from the etiologic agency for Acquired Immunodeficiency Syndrome (HIV+ with a history of one or more opportunistic diseases or AIDS defining comorbidities).

**HUD Defined Reporting Categories**:

As required by HUD, all Chronic Homeless data must be broken down by:

● Number of Households and People

●Household Type:Households with at Least One Adult and One Child, Households

without Children, and Households with Only Children

● Location: Sheltered (Emergency, Transitional, Safe Haven) and Unsheltered

HUD also requires CoCs to report the number of chronically homeless households and chronically homeless persons in each household type for “All Households,” “Veteran Households,” and “Youth Households.” Veterans and youth who are chronically homeless are also a subset of “All Households” and should still be included in the “All Households” data.

For purposes of the PIT count, persons living in transitional housing at the time of the PIT count are not counted as chronically homeless.

**By Name List (BNLv2)**

BNLv2 data will be used to determine both the sheltered and unsheltered chronic homelessness subpopulation counts. The PIT Leadership Team will work with the CANs in advance of the count to confirm the criteria described below:

●The chronic subpopulation PIT count will include both sheltered and unsheltered people who were indicated as “verified” and “potential chronic” on the BNL Version 2 aka BNLv2 on the night of the count

● Chronic homelessness status as indicated on the BNLv2 is based on the data from the HUD Universal Assessment in HMIS Chronic Homeless calculation.

Chronic homelessness status as indicated on the BNLv2 is based on disabling condition(s) and length of time homeless (i.e., at least 12 months) and episodes of homelessness (i.e., 4 episodes of qualified homelessness in 3 years that aggregate cumulatively to at least 12 months in length).

● “Verified Chronic” means that the person has met the length of time criteria and has been verified in accordance with CoC protocols to have a qualifying disabling condition.

●“Potential Chronic” means that the person has met the length of time criteria and is likely to meet the disabling condition criteria but the disabling condition has not been verified.

● The BNLv2 does not determine where the persons on the BNLv2 actually slept on the night of the count, which is critical to determining whether they should be counted as chronic. The PIT Leadership team will cross reference all the clients counted out of HMIS on the night of the count vs. those identified as Chronic Homeless on the BNLv2.

* If a client is being counted as Chronic on the BNLv2 but does not show as being counted on the night of PIT, then those records will be evaluated to determine if the record is accurate and should be either counted or not counted as chronic
* If a client is being counted as Chronic on the BNLv2 and is also being counted as homeless on the night of PIT, then the record will be counted as Chronic on the night of PIT

**B. Veterans**

**Who to Count**

As per HUD requirements, this subpopulation category of the PIT includes only adults who have served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty. It also does not include other adults or children who live with a Veteran but who do not themselves meet the above criteria for military service.

**HUD Defined Reporting Categories**:

As required by HUD all types of Veterans data detailed below must be broken down by:

● Number of Households and People

● Household Type: Households with at Least One Adult and One Child, Households without Children, and Households with Only Children

● Location: Sheltered (Emergency and Transitional) and Unsheltered

● Demographics: Gender, Age, Race, Ethnicity

Please note that, per HUD requirements, data for the gender, race, and ethnicity of non-veterans in veteran households are only reported under “All Households” population data.

**Designated Veteran Projects**

CT has projects included in the HIC and designated specifically for Veterans. As such program descriptor data will be used to determine Veteran status for adults when applicable. The program descriptor data will come from the HUD funding source section of HMIS. Any program with a funding source of GPD or SSVF will be included. For example:

▪ If an emergency shelter is dedicated to serving single adult Veterans, then 100% of adults in the project will be counted in the Veterans subpopulation.

▪ If a transitional housing project is dedicated to serving Veteran families, then one adult per household will be counted in the Veterans subpopulation, unless HMIS data otherwise indicate that more than one adult in the household are veterans, in which case all adult Veterans will be counted as such.

**HMIS Data**

For people experiencing unsheltered homelessness and people living in Emergency Shelters, Transitional Housing, and Safe Havens not designated for Veterans, users will use HMIS data to determine Veteran status using the veteran status field in HMIS. The PIT Database will provide a Veteran report showing the veterans being counted on the night of PIT in both sheltered and unsheltered locations. Nutmeg will work with the VA to confirm their veteran status. Nutmeg will update HMIS to reflect confirmed veteran status as determined by the VA.

**Extrapolation**

As necessary, where the relevant HMIS data are missing/refused/unknown, Nutmeg will estimate the Veterans count using an extrapolation process as described below. Since military service is significantly more common among cisgender men, extrapolation rates will be calculated by gender. Distinct extrapolation rates will also be calculated for the sheltered and unsheltered populations.

Sheltered Veterans

1. Calculate the Veterans rate among sheltered cisgender men:

o NMSV/NMS = R; NMSV= number of veteran cisgender sheltered men; NMS = number of cisgender sheltered men with relevant HMIS Veteran status data available R=estimated Veterans rate among sheltered cisgender men

1. Apply that rate to the number of sheltered cisgender men without relevant HMIS Veteran status data available as follows:
   1. R \* NMSND = ENMSV; NMSND=number of cisgender sheltered men without relevant HMIS Veteran status data available; ENMSV = estimated number of male sheltered Veterans
2. Add the estimated number of male sheltered Veterans
   1. NCB + NCUS = Total number of male sheltered Veterans
3. Repeat the same concepts defined in steps 1 to 3 to calculate the number of sheltered Veterans identifying as all genders other than cisgender men.

Unsheltered Veterans

1. Repeat the same concepts defined in steps 1 to 4 to calculate the number of unsheltered Veterans identifying as cisgender men and all genders other than cisgender men.

**C: Youth**

In 2021 and 2022, in response to the global COVID-19 pandemic, CT did not conduct a week-long Youth Outreach and Count (YOC) effort, and, although there will not be a specific YOC in 2023, CT commits to an unsheltered count that includes consultation and participation from youth-serving organizations and youth with lived experience. The PIT Leadership Team will solicit and collect information from youth-serving organizations and youth with lived experience to ensure that youth experiencing homelessness are captured and reported, ensuring that programs are added to the PIT database as necessary and that any persons outside of a program are captured via Smartsheet or other avenues.

**Who to Count**

As required by HUD, the 2024 PIT will include any youth (under age 25) found either sheltered or unsheltered on the night of the count, and the required demographic and subpopulation data for youth based on the following HUD definitions:

● **Parenting Youth -** A youth who identifies as the parent or legal guardian of one or more children who are present with or sleeping in the same place as that youth parent, where there is no person age 25 or older in the household. Parenting youth is either a subset of households with at least one adult and one child if the parenting youth is between 18 and 24, or households with only children if the parenting youth is under 18.

● **Unaccompanied Youth -** Unaccompanied youth are persons under age 25 who are not accompanied by a parent or guardian or any other household member age 25 or older, and who is not a parent presenting with or sleeping in the same place as his/her child(ren). Unaccompanied youth are single youth, youth couples, and groups of youth presenting together as a household. Unaccompanied youth may be a subset of any household type: they are a subset of households without children if all household members are 18 to 24. They are a subset of households with at least one adult and one child if the household includes at least one household member under 18, at least one member between 18 and 24, and no members over age 24. They are a subset of households with only children if all household members are under 18.

**HUD Defined Reporting Categories**:

As required by HUD all types of Youth data must be broken down by:

● Number of Households and People

● Household Type: Households with at Least One Adult and One Child, Households

without Children, Households with Only Children; Unaccompanied Youth Households,

and Parenting Youth Households

● Location: Sheltered (Emergency and Transitional) and Unsheltered

● Demographics: Gender, Age, Race, Ethnicity

While gender, race, and ethnicity are reported for all unaccompanied youth, HUD requires CoCs to only report the gender, race, and ethnicity of the parents in the parenting youth households data set.

**Designated Youth Projects**

While CT has dedicated youth projects, these projects typically require that all youth meet age eligibility only at project entry. As a result, all youth residing in these projects over time may not necessarily be under 25 years of age. Consequently, the PIT Count will not rely on program descriptor data to inform youth PIT count data. The PIT Leadership Group will reach out to the Youth Action Hub and any other youth organization and youth advisory boards to ensure as many youth as possible are counted on the night of the Point In Time.

**HMIS Data**

The PIT Count will primarily rely on HMIS to inform youth PIT count data. The PIT Database will identify households where the Head of Household (HoH) is under 25 and no other members of the household are over 25. The data from HMIS will populate the appropriate youth tables in the PIT Database. This data will then be extracted and populated in the tables for the HDX report.

**Extrapolation**

As necessary, where the relevant HMIS data are missing/refused/unknown Nutmeg will estimate the youth count data using an extrapolation process.

**D: Other Subpopulation Methodologies (DV, SMI, SUD, HIV/AIDS)**

HUD requires CoCs to report PIT count data on adults only, meeting the criteria for these additional subpopulations: Adults with Serious Mental Illness, Substance Use Disorder, and HIV/AIDS. In addition, CT BOS and ODFC report optional data on adult survivors of Domestic Violence. CoCs must report these data broken down by location:

· Sheltered (Emergency, Transitional, and Safe Haven)

· Unsheltered

**Domestic Violence:**

**Who to Count**

HUD requires CoCs to report only the number of survivors of domestic violence who are currently experiencing homelessness because of domestic violence, dating violence, sexual assault, or stalking (referred to collectively as DV below), as opposed to reporting on survivors who have ever experienced these circumstances.

**Designated DV Projects**

CT has projects included in the HIC designated specifically for people fleeing DV. As such program descriptor data will be used to determine DV status for adults when applicable. The DV data will be compiled by including the counts from the Non-HMIS participating agency data identified in the PIT App as a DV program along with the HMIS data where the response to the fleeing DV questions is yes.

**HMIS Data**

The PIT Count will primarily rely on HMIS to inform DV subpopulation data for people living in projects not designated for DV survivors.

**Extrapolation**

As necessary, where the relevant HMIS data are missing/refused/unknown Nutmeg will estimate the DV subpopulation data using an extrapolation process. Because rates of DV are significantly different for cisgender women and people who identify as transgender, a gender other than singularly female or male (e.g., non-binary, genderfluid, agenda, culturally specific gender) or questioning, extrapolation rates will be calculated separately by gender as follows:

● Rate will be calculated for cisgender sheltered females

● Rate will be calculated for cisgender unsheltered females

● Rate will be calculated for cisgender sheltered males

● Rate will be calculated for cisgender unsheltered males

● Rate will be calculated for sheltered people identifying as transgender, a gender other than singularly female or male (e.g., non-binary, genderfluid, agenda, culturally specific gender) or questioning if the total number of such people counted statewide is greater than 30.

● Rate will be calculated for unsheltered people identifying as transgender, a gender other than singularly female or male (e.g., non-binary, genderfluid, agenda, culturally specific gender) or questioning if the total number of such people counted statewide is greater than 30.

● To the extent that the sample sizes are not greater than 30, people identifying as transgender, a gender other than singularly female or male (e.g., non-binary, genderfluid, agenda, culturally specific gender) or questioning will be included in the extrapolation with people identifying as cisgender female.

**DV Sub Pop Extrapolation:**

Emergency Shelter, Transitional Housing and Safe Haven Programs Only

Programs classified as serving DV are excluded from the HMIS Assessment used for the **Rate** calculation and the population is added back at 100%. The DV counts for the non-participating DV programs are based on the DV counts from the PIT database.

**Female & Trans Calculation**

**HMIS Assessments Included** (Numerator):

HMIS Assessment that meets the following criteria:

● Are you experiencing homelessness because you are fleeing Domestic Violence, Sexual Assault, or Stalking?

● Answered the question “How do you identify your GENDER?” as Female or Transgender

**Assessments Useable** (Denominator):

● Have a Yes or No answer to the question “Are you experiencing homelessness because you are fleeing Domestic Violence, Sexual Assault, or Stalking?”

● Answered the question “How do you identify your GENDER?” as Female or Transgender

**The rate** for extrapolation:

**Assessments Included** / **Assessments Useable**

**Male Calculation:**

**Assessments Included** (Numerator):

Assessments that meet the following criteria:

● Are you experiencing homelessness because you are fleeing Domestic Violence, Sexual Assault, or Stalking?

● Answered the question “How do you identify your GENDER?” as Male

**Assessments Useable** (Denominator)

● Have a Yes or No answer to the question “Are you experiencing homelessness because you are fleeing Domestic Violence, Sexual Assault, or Stalking?”

● Answered the question “How do you identify your GENDER?” as Male

**The rate** for extrapolation:

**Assessments Included** / **Assessments Useable**

**Extrapolation**:

(**Rate** \* Number of Female & Transgender (from PIT population count excluding DV programs)) + **Rate** \* Number of Male (from PIT population count excluding DV programs)) The number of Adults from the PIT population counted in DV Programs

**SMI Adults with a Serious Mental Illness (SMI)**

**Who to Count**

Per HUD requirements, this subpopulation category of the PIT includes adults with a severe and persistent mental illness or emotional impairment that seriously limits a person's ability to live independently. Adults with SMI must also meet the qualifications identified in the HUD definition of disability (See Section on Chronic Homelessness’ e.g., “is expected to be of long-continuing or indefinite duration”).

**Designated SMI Projects**

CT has projects included in the HIC and designated specifically for people with SMI. Typically, those projects are Permanent Supportive Housing and serve people who are housed. Consequently, the PIT Count will not rely on program descriptor data to inform the SMI subpopulation count.

**HMIS Data**

The PIT Count will primarily rely on HMIS to inform SMI subpopulation data. The count will include extrapolated records where SMI was yes and of long duration for all adults

**Extrapolation**

As necessary, where the relevant HMIS data are missing/refused/unknown, Nutmeg will estimate the SMI subpopulation count using an extrapolation process as described below. Since SMI may be more common among people experiencing unsheltered homelessness, distinct extrapolation rates will be calculated for the sheltered and unsheltered populations.

**Mental Illness Sub Pop Extrapolation:**

Emergency Shelter, Transitional Housing and Safe Haven Programs Only

**HMIS Assessments Included** (Numerator):

Have a Yes answer to the questions:

● Do you have a Mental Health Problem?

● If yes, is this a long-term Mental Health Problem that impairs your ability to hold a job or live independently?

**Assessments Useable** (Denominator):

Have a Yes or No answer to the questions:

● Do you have a Mental Health Problem?

● If yes, is this a long-term Mental Health Problem that impairs your ability to hold a job or live independently?

**The rate** for extrapolation:

**Assessments Included** / **Assessments Useable**

**Extrapolation**:

**Rate** \* Number of Adults (from PIT population count)

**SUD Adults with a Substance Use Disorder**

**Who to Count**

Per HUD requirements, this subpopulation category of the PIT includes adults with a substance abuse problem (alcohol abuse, drug abuse, or both). Adults with a substance use disorder must also meet the qualifications identified in the HUD definition of disability (See Section on Chronic Homelessness’ e.g., “is expected to be of long-continuing or indefinite duration”).

**Designated SUD Projects**

CT has a few projects included in the HIC and designated specifically for people with SUD. Consequently, the PIT Count will not rely on program descriptor data to inform the SUD subpopulation count.

**HMIS Data**

The PIT Count will primarily rely on HMIS to inform SUD subpopulation data. The count will include extrapolated records where SUD was yes and of long duration for all adults

**Extrapolation**

As necessary, where the relevant HMIS data are missing/refused/unknown, Nutmeg will estimate the SUD subpopulation count using an extrapolation process as described below. Since SUD may be more common among people experiencing unsheltered homelessness, distinct extrapolation rates will be calculated for the sheltered and unsheltered populations.

**Substance Abuse Sub Pop Extrapolation:**

Emergency Shelter, Transitional Housing and Safe Haven Programs Only

**HMIS Assessments Included** (Numerator):

Assessment that meets the following criteria:

● Answered the question “Do you have any Substance Abuse Issues?” as any of Yes, Alcohol Abuse, Drug Abuse, Both Alcohol and Drug

● Have a Yes answer to the question “If yes, is this a long-term Substance Abuse Problem that impairs your ability to hold a job or live independently?”

**Assessments Useable** (Denominator):

Assessment that meets the following criteria:

● Answered the question “Do you have any Substance Abuse Issues?” as any of Yes, Alcohol Abuse, Drug Abuse, Both Alcohol and Drug, No

**The rate** for extrapolation:

**Assessments Included** / **Assessment Useable**

**Extrapolation**:

**Rate** \* Number of Adults (from PIT population count)

**Adults with HIV/AIDS**

**Who to Count**

Per HUD requirements, this subpopulation category of the PIT includes adults who have been diagnosed with AIDS and/or have tested positive for HIV.

**Designated HIV/AIDS Projects**

CT has projects included in the HIC designated specifically for people living with HIV/AIDS (PLWHA). As such program descriptor data will be used to determine HIV/AIDS status for adults when applicable. The HMIS program descriptor used will be the target population and/or HOPWA type.

**HMIS Data**

The PIT Count will rely primarily on HMIS data to inform HIV/AIDS subpopulation data for people living in projects not designated for PLWHA

**Extrapolation**

As necessary, where the relevant HMIS data are missing/refused/unknown Nutmeg will estimate the HIV/AIDS subpopulation count using an extrapolation process as described below. Distinct extrapolation rates will be calculated for the sheltered and unsheltered populations.

**HIV Sub Pop Extrapolation:**

Emergency Shelter, Transitional Housing and Safe Haven Programs Only

Programs classified as serving HIV are excluded from the Assessments used for the **Rate** calculation and the population is added back at 100%

**HMIS Assessment Included** (Numerator):

Assessment that meets the following criteria - Has a Yes answer to the questions Do you have HIV or AIDS?

**Assessments Useable** (Denominator):

Assessments that meet the following criteria - Have a Yes or No answer to the question “Do you have HIV or AIDS?”

**The rate** for extrapolation:

**Assessments Included** / **Assessment Useable**

**Extrapolation**:

(**Rate** \* Number of Adults (from PIT population count excluding HIV programs)) + Number of Adults from PIT population counted in HIV Programs

# **Section 9: Housing Inventory Count (HIC) Methodology**

Per HUD requirements, beds and units included on the HIC are considered part of the CoC homeless assistance system. ***Beds and units in the HIC must be dedicated to serving homeless persons, or for permanent housing projects, dedicated for persons who were homeless at entry.*** For the purposes of the HIC, a project with dedicated beds/units is one where:

A. The primary intent of the project is to serve homeless persons;

B. The project verifies homeless status as part of its eligibility determination; and

C. The actual project clients are predominantly homeless (or, for permanent housing, were homeless at entry).

Beds in institutional settings not specifically dedicated for persons who are homeless such as detox facilities, emergency rooms, jails, and acute crisis or treatment centers should not be included in the HIC.

The PIT Leadership Team will lead efforts to collect all data required by HUD in the Housing Inventory Chart for all emergency shelters, transitional housing, safe havens, permanent supportive housing, rapid rehousing and other permanent housing projects designated to serve people experiencing homelessness. This includes those that participate in HMIS, those that provide data via the statewide comparable DV database, and those that do not participate in either system. The PIT Leadership Team will provide, organize, and schedule specific guidance and training to providers who will be responsible for entering these data into the web-based Point-in-Time Database. A three-step process will continue to be used:

1) The PIT Leadership Team will ensure that the PIT Database is updated as necessary to reflect current HUD requirements;

2) In advance of the PIT count, the PIT Leadership Team will work with providers and Regional Coordinators to update and deliver to CoCs accurate HIC data that reflects the current inventory information as anticipated on the night of the count, including all fields required by HUD; RRH projects will not update their HIC data prior to the count; and

3) The PIT Leadership Team will work with providers and Regional Coordinators to verify and update RRH and all other HIC data, as necessary, on the night of the count, and deliver to CoCs accurate final HIC data.

# **Section 10: Data Quality Assurance Strategies**

The Data Quality Assurance Plan will be as follows:

1) The PIT Leadership Team will regularly provide CoCs with updates on which providers have not completed their HIC and/or PIT data entry and/or confirmations.

2) Deduplication – Nutmeg will ensure that people experiencing homelessness are not counted more than once. They will propose a specific deduplication methodology that includes at a minimum:

a. Unsheltered Data – Nutmeg will do a comparison using all available sheltered client data vs. clients being reported as unsheltered. Nutmeg will remove any duplicates as well as any clients with data showing they slept in a sheltered setting on the night of the count. (including a shelter, transitional housing, safe haven, or permanent housing)

b. Duplicate Records – Nutmeg will compare among all data sources detailed above, personally identifying information (PII), such as name, date of birth, and Social Security Number, and unique client identifiers to ensure that people are not counted more than once.

c. Duplicate Records Continued - The PIT Database will provide a duplicate client report showing the number of clients who are identical in the system but have different client IDs and are being counted more than once on the night of PIT. Nutmeg will address the duplicates by merging duplicate records.

d. Subpopulations – Nutmeg will ensure that people are included in the chronic homelessness and other subpopulation counts only once.

e. Overlapping Enrollments - The PIT Database will provide an overlapping enrollment report to uncover households who were counted in more than one program on the night of PIT. The CoCs can outreach to the appropriate agencies to determine which enrollment is valid for the PIT count.

3) The PIT Leadership Team will compare all HIC, population, and subpopulation data collected on the night of the count to the previous year’s count and identify quality concerns prior to delivering data to CoCs;

4) The PIT Leadership Team will ensure that all data required in the Homeless Data Exchange (HDX) is collected, reviewed for quality, and available for prompt entry into HDX in a manner that meets HUD requirements; this includes the use of data validation strategies to ensure that data will not trigger errors in HDX and that data matches across the required data sets; and will ensure that all data quality concerns are promptly remediated.