

Iowa Family Development and Self Sufficiency (FaDSS) Case Management System Data Dictionary

TABLE OF CONTENTS

Table Name: Intake	1
Table Name: History.Intake	2
Table Name: IntakeMatrixEntry	3
Table Name: IntakeMatrixExit	12
Table Name: IntakeTransfer	22
Table Name: IntakeFormExit	23
Table Name: IntakeFormExit	25
Table Name: IntakeFamilyMember	26
Table Name: IntakeEmployment	27
Table Name: IntakeContact	28
Table Name: IntakeActivity	29
Table Name: GranteeInvestment.....	31
Table Name: GranteeCapacity	32
Table Name: GranteeAssessment.....	33
Table Name: Grantee	34
Table Name: ApplicationUserRole	35
Table Name: FipUpload	36
Table Name: MatrixDomain	37
Table Name: AuditFipEligibilityStatus	38
Table Name: ApplicationIdentityRole	39
Table Name: ApplicationUser	40
Appendix: User Interfaces.....	42
Create New Record Form	42
Search Family Records Form	43
Edit Header Form.....	44
Family Information at Enrollment	45
Edit Family Member	46

Exit Matrix: Housing	47
Exit Matrix: Transportation	48
Exit Matrix: Mental Health	49
Exit Matrix: Substance Abuse	50
Exit Matrix: Health	51
Exit Matrix: Income.....	52
Exit Matrix: Employment	53
Exit Matrix: Nurturing and Attachment	54
Exit Matrix: Child Care	55
Exit Matrix: Support of Child Development	56
Exit Matrix: Adult Education	57
Exit Matrix: Language	58
Exit Matrix: Support Network	59
Exit Matrix: Relationship with Partner	60
Exit Matrix: Housing	61
Exit Matrix: Transportation	62
Exit Matrix: Mental Health	63
Exit Matrix: Substance Abuse	64
Exit Matrix: Health	65
Exit Matrix: Income.....	66
Exit Matrix: Employment	67
Exit Matrix: Nurturing and Attachment	68
Exit Matrix: Child Care	69
Exit Matrix: Support of Child Development	70
Exit Matrix: Adult Education	71
Exit Matrix: Language	72
Exit Matrix: Support Network	73
Exit Matrix: Relationship with Partner	74
Edit Contact.....	75
Edit Employment Record	76
Activity Outcomes	77
Family Exit Information	78
Edit Employment Record	79
Edit Grantee: General Information	80
Edit Grantee: Create Grantee	81
Edit Grantee: Edit Narrative>Info	82
Edit Grantee: Edit Narrative > Narratives	83
Edit Grantee: Edit Narrative > Ratings.....	84
Edit Grantee: Assessment Information	85
Edit Grantee: Edit Investment Record	86

Edit Grantee: Edit Staff 87

Appendix B: Lookup Tables 88

Lookup Table Contents: TL_Carrier 88

Lookup Table Contents: TL_Gender 88

Lookup Table Contents: TL_YesNoReceivingSupport 88

Lookup Table Contents: TL_State 88

Lookup Table Contents: TL_YesNoSelfReportNa 90

Lookup Table Contents: TL_Assessment 90

Lookup Table Contents: TL_AssessmentType 90

Lookup Table Contents: TL_Scale5 91

Lookup Table Contents: TL_YesNo 91

Lookup Table Contents: TL_ContactType 91

Lookup Table Contents: TL_ExitSituation 91

Lookup Table Contents: TL_LeaveReason 91

Lookup Table Contents: TL_Transition 92

Lookup Table Contents: TL_YesNoNa 92

Lookup Table Contents: TL_EducationStaff 92

Lookup Table Contents: TL_Language 92

Lookup Table Contents: TL_Race 93

Lookup Table Contents: TL_Relationship 93

Lookup Table Contents: TL_Education 93

Lookup Table Contents: TL_Employment 94

Lookup Table Contents: TL_County 94

Lookup Table Contents: TL_EnrollmentStatus 96

Lookup Table Contents: TL_FamilyType 96

Lookup Table Contents: TL_ChildDevScreen 97

Lookup Table Contents: TL_ReferralSource 97

Lookup Table Contents: TL_ContactMethod 97

Lookup Table Contents: TL_FiscalYearIowa 97

Lookup Table Contents: TL_InboxType 99

Lookup Table Contents: Grantee 99

TABLE NAME: INTAKE

Table Description: Family Record table.

RELEVANT USER INTERFACE SCREENS

[Create new Family Record](#)

[Search Family Records](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Intake ID
2	GranteeId	int			Grantee	Grantee ID
3	DhsCaseNumber	nvarchar	✓			DHS Case number
4	CountyId	int	✓		TL_County	County ID
5	StateId	nvarchar	✓			State Id
6	FamilyTypeId	int	✓		TL_FamilyType	Type of family
7	ReferralSourceId	int	✓		TL_ReferralSource	Source of referral
8	SpecialistId	int			ApplicationUser	Specialist Id
9	DateEnrollUtc	datetime	✓			Date enrolled
10	TwoAdultFiald	int	✓		TL_YesNo	Two adults in family
11	EnrollmentStatusId	int			TL_EnrollmentStatus	Enrollment status
12	OfferedServicesId	int	✓		TL_YesNo	Were services offered
13	Comments	nvarchar	✓			General Comments
14	DateHOHChangedUTC	datetime	✓			Date head of household changed
15	DateReferralUtc	datetime	✓			Date referred
17	AdditionalStateId1	nvarchar	✓			Additional state ID
18	AdditionalStateId2	nvarchar	✓			Additional state ID
19	AdditionalStateId3	nvarchar	✓			Additional state ID
20	AdditionalStateId4	nvarchar	✓			Additional state ID
21	AdditionalStateId5	nvarchar	✓			Additional state ID
22	ReceiveFIP	int	✓		TL_YesNo	Does the family receive FIP?
23	MandatoryPJ	int	✓		TL_YesNo	Mandatory PJ participant?
24	ReceiveFIPEffectiveDate	datetime	✓			FIP Effective date

TABLE NAME: HISTORY.INTAKE

Table Description: Record of enrollments in the FADSS program, prior to the HZA's implementation of the new web app.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Intake ID
2	HohNameLast	nvarchar	✓			Head of household Last Name
3	HohNameFirst	nvarchar	✓			Head of household First Name
4	Granteeld	int				Grantee Id
5	SpecialistName	nvarchar	✓			Name of specialist
6	DhsCaseNumber	nvarchar	✓			DHS Case Number
7	StateId	nvarchar	✓			State Id
8	DateEnrollUtc	datetime	✓			Date enrolled
9	DateExitUtc	datetime	✓			Date Exited

TABLE NAME: INTAKEMATRIXENTRY

Table Description: Family Record Entry Matrix. This table contains data SSM measurements recorded at entry/intake.

RELEVANT USER INTERFACE SCREENS

[Entry Matrix: Housing](#)

[Entry Matrix: Income](#)

[Entry Matrix: Adult Education](#)

[Entry Matrix: Transportation](#)

[Entry Matrix: Employment](#)

[Entry Matrix: Language](#)

[Entry Matrix: Mental Health](#)

[Entry Matrix: Nurturing and Attachment](#)

[Entry Matrix: Support Network](#)

[Entry Matrix: Substance Abuse](#)

[Entry Matrix: Child Care](#)

[Entry Matrix: Relationship with Partner](#)

[Entry Matrix: Health](#)

[Entry Matrix: Support of Child development](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Intakeld	int		✓	Intake	Intake Id
2	IsFinalized	bit				Indicates if the matrix has been finalized or not
3	Unlocked	bit				Indicates if the matrix is locked or unlocked
4	Housing_Head_A	bit	✓			Is the household homeless, living in substandard or unsafe housing, or living with friends or relatives?
5	Housing_Head_B	bit	✓			Is the household in a safe and secure but transitional or temporary housing? Or is rent unaffordable?
6	Housing_Head_C	bit	✓			Is the household in safe and secure subsidized or affordable housing, rental apartment or public housing?
7	Housing_Head_D	bit	✓			Is the household in safe and secure non subsidized housing, but choices are limited due to income of renter or home owner?
8	Housing_Head_E	bit	✓			Is the housing non subsidized home ownership or rental?
9	Transportation_Head_A	bit	✓			The head of household or other adult has no transportation options through public transportation, car or a regular ride?
10	Transportation_Head_B	bit	✓			Do head of household or other adult members rarely (less than half the time) have transportation needs met through public transportation, car or a regular ride?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
11	Transportation_Head_C	bit	✓			Do head of household or other adult members have some (about half the time) transportation needs met through public transportation, car or a regular ride?
12	Transportation_Head_D	bit	✓			Do head of household or other adult members have most (over half the time) transportation needs met through public transportation, car or a regular ride?
13	Transportation_Head_E	bit	✓			Do head of household or other adult members always have transportation needs met through public transportation, car or a regular ride?
14	MentalHealth_Head_A	bit	✓			Are there severe symptoms of Mental Illness with or without diagnosis/treatment/medications, including severe problems with Adult Daily Living Skills, parenting, and insight/self-perception?
15	MentalHealth_Head_B	bit	✓			Are there symptoms of mental illness with diagnosis but treatment is inconsistent or ineffective, including moderate problem with Adult Daily Living Skills, parenting, insight/self-perception?
16	MentalHealth_Head_C	bit	✓			Are symptoms under control and the person is receiving treatment and there are some problems with Adult Daily Living Skills, parenting, insight/self-perception?
17	MentalHealth_Head_D	bit	✓			Is mental illness situational, short term or has the person recovered without relapse and Adult Daily Living Skills, parenting, insight/self-perception are adequate?
18	MentalHealth_Head_E	bit	✓			Are there no observed symptoms of mental illness?
19	SubAbuse_Head_A	bit	✓			Is there a chronic history of drug or alcohol abuse with addiction?
20	SubAbuse_Head_B	bit	✓			Is there drug/alcohol bingeing or intermittent use, without apparent addiction?
21	SubAbuse_Head_C	bit	✓			Is there rare or experimental use of drugs or evidence of currently being clean or in a recovery program?
22	SubAbuse_Head_D	bit	✓			Is there occasional use of legal substances; stops using if pregnant?
23	SubAbuse_Head_E	bit	✓			There is no history or current use or abuse
24	Health_Head_A	bit	✓			Does the family have a member with an acute/chronic physical condition without diagnosis/treatment and no medical home?
25	Health_Head_B	bit	✓			Does the family seek care only when very ill or uses emergency room for care and has no medical home?
26	Health_Head_C	bit	✓			Does the family seek care inconsistently, including inconsistent treatment follow up, medical home may be unstable?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
27	Health_Head_D	bit	✓			Does the family seek care appropriately, follow treatment recommendations and have a medical home?
28	Health_Head_E	bit	✓			Does the family seek care appropriately and cure and control obtained and has a medical home?
29	Income_Head_A	bit	✓			Is family income between 0% - 100% of poverty by family size?
30	Income_Head_B	bit	✓			Is family income between 100% - 125% of poverty by family size?
31	Income_Head_C	bit	✓			Is family income between 126% - 175% of poverty by family size?
32	Income_Head_D	bit	✓			Is family income between 176% - 200% of poverty by family size?
33	Income_Head_E	bit	✓			Is family income greater than 200% of poverty by family size?
34	Employment_Head_A	bit	✓			Are family members/heads of household unemployed?
35	Employment_Head_B	bit	✓			Is family employment temporary, part-time or seasonal and pay is inadequate with no benefits?
36	Employment_Head_C	bit	✓			Is family employed full time but pay is inadequate with few or no benefits?
37	Employment_Head_D	bit	✓			Is the family employed for less than three months full time with adequate pay and benefits?
38	Employment_Head_E	bit	✓			Has the family maintained employment for three months or more?
39	Parenting_Head_A	bit	✓			Is the parent(s) hostile, unable to nurture, bond, or love child(ren) in the home and is their responsiveness very limited?
40	Parenting_Head_B	bit	✓			Is the parent(s) indifference, apathy, depression, or developmental disability impairing the ability for them to nurture the child(ren)?
41	Parenting_Head_C	bit	✓			Does the parent(s) lack information/modeling of love or are they afraid nurturing "spoils" the child(ren)? Marginal connectedness to the child(ren) is present.
42	Parenting_Head_D	bit	✓			Has the parent(s) bonded with the child, but loves and responds inconsistently? There are some reciprocal connections between parent and child.
43	Parenting_Head_E	bit	✓			Is the parent(s) loving, responsive, and praise child(ren) and are they able to regulate child(ren) well? There are reciprocal connections.
44	ChildCare_Head_A	bit	✓			Does the family need childcare, but none is available/accessible and/or child is not eligible?
45	ChildCare_Head_B	bit	✓			Is the family's childcare unreliable or unaffordable, or inadequate supervision is a problem for childcare that is available?
46	ChildCare_Head_C	bit	✓			Is childcare available that is affordable and subsidized, but limited?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
47	ChildCare_Head_D	bit	✓			Is childcare available that is affordable and reliable and there is no need for subsidy but choices are limited?
48	ChildCare_Head_E	bit	✓			Is the family able to select quality childcare of choice?
49	ChildDevSupport_Head_A	bit	✓			Do parent(s) have poor knowledge of child development including unrealistic expectations? Parent(s) may ignore or refuse information.
50	ChildDevSupport_Head_B	bit	✓			Does the parent(s) have little knowledge or interest of child development? Parent(s) may take a passive role.
51	ChildDevSupport_Head_C	bit	✓			Is the parent(s) open to learning about child development and provide age appropriate activities?
52	ChildDevSupport_Head_D	bit	✓			Does the parent(s) apply child development ideas, and is interested in child's development skills, interests and activities
53	ChildDevSupport_Head_E	bit	✓			Is the parent(s) able to anticipate child development changes and use appropriate interactions and activities with child daily?
54	AdultEdu_Head_A	bit	✓			Does the head of household or other adult have less than 12th grade education?
55	AdultEdu_Head_B	bit	✓			Has the head of household or other adult graduated with GED or High School diploma and are not currently attending a job training program, community college or college?
56	AdultEdu_Head_C	bit	✓			Does the head of household or other adult attend college, community college or job/technical training program?
57	AdultEdu_Head_D	bit	✓			Has the head of household or other adult graduated from college, community college or job training program?
58	AdultEdu_Head_E	bit	✓			Has the head of household or other adult graduated from graduate school?
59	Language_Head_A	bit	✓			Does the head of household or other adult have low or no literacy in any language?
60	Language_Head_B	bit	✓			Is the head of household or other adult literate in their primary language with some verbal English skills?
61	Language_Head_C	bit	✓			Is the head of household or other adult taking ESL/ELL classes and verbal ESL/ELL established?
62	Language_Head_D	bit	✓			Is the head of household or other adult taking ESL/ELL classes with written ESL/ELL established?
63	Language_Head_E	bit	✓			Is the head of household or other adult fully bi-lingual?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
64	Support_Head_A	bit	✓			Does the family lack of necessary formal and informal resources (includes family friends and community)?
65	Support_Head_B	bit	✓			Are the family's formal and informal supports supportive, but lack ability/financial resources to help?
66	Support_Head_C	bit	✓			Does the family have some support from formal and informal sources that are able to help?
67	Support_Head_D	bit	✓			Does the family have strong support from formal and informal sources that are able to help?
68	Support_Head_E	bit	✓			Does the family have a healthy support network that is reciprocal?
69	Relationship_Head_A	bit	✓			Is the head of household's partner hostile, violent, or physically abusive? Are there multiple partners or uncertain paternity?
70	Relationship_Head_B	bit	✓			Is the head of household separated with no contact? Is the partner unavailable to provide support?
71	Relationship_Head_C	bit	✓			Is the head of household's relationship with the partner conflicted, critical, or verbally abusive with frequent arguments and a reluctance to support in crisis?
72	Relationship_Head_D	bit	✓			Is the head of household's partner's support inconsistent or conditional? They may be emotionally distant but available.
73	Relationship_Head_E	bit	✓			Is the head of household's partner very supportive, loving, and committed?
74	Housing_Other_A	bit	✓			Is the household homeless, living in substandard or unsafe housing, or living with friends or relatives?
75	Housing_Other_B	bit	✓			Is the household in a safe and secure but transitional or temporary housing? Or is rent unaffordable?
76	Housing_Other_C	bit	✓			Is the household in safe and secure subsidized or affordable housing, rental apartment or public housing?
77	Housing_Other_D	bit	✓			Is the household in safe and secure non subsidized housing, but choices are limited due to income of renter or home owner?
78	Housing_Other_E	bit	✓			Is the housing non subsidized home ownership or rental?
79	Transportation_Other_A	bit	✓			The head of household or other adult has no transportation options through public transportation, car or a regular ride?
80	Transportation_Other_B	bit	✓			Do head of household or other adult members rarely (less than half the time) have transportation needs met through public transportation, car or a regular ride?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
81	Transportation_Other_C	bit	✓			Do head of household or other adult members have some (about half the time) transportation needs met through public transportation, car or a regular ride?
82	Transportation_Other_D	bit	✓			Do head of household or other adult members have most (over half the time) transportation needs met through public transportation, car or a regular ride?
83	Transportation_Other_E	bit	✓			Do head of household or other adult members always have transportation needs met through public transportation, car or a regular ride?
84	MentalHealth_Other_A	bit	✓			Are there severe symptoms of Mental Illness with or without diagnosis/treatment/medications, including severe problems with Adult Daily Living Skills, parenting, and insight/self-perception?
85	MentalHealth_Other_B	bit	✓			Are there symptoms of mental illness with diagnosis but treatment is inconsistent or ineffective, including moderate problem with Adult Daily Living Skills, parenting, insight/self-perception?
86	MentalHealth_Other_C	bit	✓			Are symptoms under control and the person is receiving treatment and there are some problems with Adult Daily Living Skills, parenting, insight/self-perception?
87	MentalHealth_Other_D	bit	✓			Is mental illness situational, short term or has the person recovered without relapse and Adult Daily Living Skills, parenting, insight/self-perception are adequate?
88	MentalHealth_Other_E	bit	✓			Are there no observed symptoms of mental illness?
89	SubAbuse_Other_A	bit	✓			Is there a chronic history of drug or alcohol abuse with addiction?
90	SubAbuse_Other_B	bit	✓			Is there drug/alcohol bingeing or intermittent use, without apparent addiction?
91	SubAbuse_Other_C	bit	✓			Is there rare or experimental use of drugs or evidence of currently being clean or in a recovery program?
92	SubAbuse_Other_D	bit	✓			Is there occasional use of legal substances; stops using if pregnant?
93	SubAbuse_Other_E	bit	✓			There is no history or current use or abuse
94	Health_Other_A	bit	✓			Does the family have a member with an acute/chronic physical condition without diagnosis/treatment and no medical home?
95	Health_Other_B	bit	✓			Does the family seek care only when very ill or uses emergency room for care and has no medical home?
96	Health_Other_C	bit	✓			Does the family seek care inconsistently, including inconsistent treatment follow up, medical home may be unstable?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
97	Health_Other_D	bit	✓			Does the family seek care appropriately, follow treatment recommendations and have a medical home?
98	Health_Other_E	bit	✓			Does the family seek care appropriately and cure and control obtained and has a medical home?
99	Income_Other_A	bit	✓			Is family income between 0% - 100% of poverty by family size?
100	Income_Other_B	bit	✓			Is family income between 100% - 125% of poverty by family size?
101	Income_Other_C	bit	✓			Is family income between 126% - 175% of poverty by family size?
102	Income_Other_D	bit	✓			Is family income between 176% - 200% of poverty by family size?
103	Income_Other_E	bit	✓			Is family income greater than 200% of poverty by family size?
104	Employment_Other_A	bit	✓			Are family members/heads of household unemployed?
105	Employment_Other_B	bit	✓			Is family employment temporary, part-time or seasonal and pay is inadequate with no benefits?
106	Employment_Other_C	bit	✓			Is family employed full time but pay is inadequate with few or no benefits?
107	Employment_Other_D	bit	✓			Is the family employed for less than three months full time with adequate pay and benefits?
108	Employment_Other_E	bit	✓			Has the family maintained employment for three months or more?
109	Parenting_Other_A	bit	✓			Is the parent(s) hostile, unable to nurture, bond, or love child(ren) in the home and is their responsiveness very limited?
110	Parenting_Other_B	bit	✓			Is the parent(s) indifference, apathy, depression, or developmental disability impairing the ability for them to nurture the child(ren)?
111	Parenting_Other_C	bit	✓			Does the parent(s) lack information/modeling of love or are they afraid nurturing "spoils" the child(ren)? Marginal connectedness to the child(ren) is present.
112	Parenting_Other_D	bit	✓			Has the parent(s) bonded with the child, but loves and responds inconsistently? There are some reciprocal connections between parent and child.
113	Parenting_Other_E	bit	✓			Is the parent(s) loving, responsive, and praise child(ren) and are they able to regulate child(ren) well? There are reciprocal connections.
114	ChildCare_Other_A	bit	✓			Does the family need childcare, but none is available/accessible and/or child is not eligible?
115	ChildCare_Other_B	bit	✓			Is the family's childcare unreliable or unaffordable, or inadequate supervision is a problem for childcare that is available?
116	ChildCare_Other_C	bit	✓			Is childcare available that is affordable and subsidized, but limited?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
117	ChildCare_Other_D	bit	✓			Is childcare available that is affordable and reliable and there is no need for subsidy but choices are limited?
118	ChildCare_Other_E	bit	✓			Is the family able to select quality childcare of choice?
119	ChildDevSupport_Other_A	bit	✓			Do parent(s) have poor knowledge of child development including unrealistic expectations? Parent(s) may ignore or refuse information.
120	ChildDevSupport_Other_B	bit	✓			Does the parent(s) have little knowledge or interest of child development? Parent(s) may take a passive role.
121	ChildDevSupport_Other_C	bit	✓			Is the parent(s) open to learning about child development and provide age appropriate activities?
122	ChildDevSupport_Other_D	bit	✓			Does the parent(s) apply child development ideas, and is interested in child's development skills, interests and activities
123	ChildDevSupport_Other_E	bit	✓			Is the parent(s) able to anticipate child development changes and use appropriate interactions and activities with child daily?
124	AdultEdu_Other_A	bit	✓			Does the head of household or other adult have less than 12th grade education?
125	AdultEdu_Other_B	bit	✓			Has the head of household or other adult graduated with GED or High School diploma and are not currently attending a job training program, community college or college?
126	AdultEdu_Other_C	bit	✓			Does the head of household or other adult attend college, community college or job/technical training program?
127	AdultEdu_Other_D	bit	✓			Has the head of household or other adult graduated from college, community college or job training program?
128	AdultEdu_Other_E	bit	✓			Has the head of household or other adult graduated from graduate school?
129	Language_Other_A	bit	✓			Does the head of household or other adult have low or no literacy in any language?
130	Language_Other_B	bit	✓			Is the head of household or other adult literate in their primary language with some verbal English skills?
131	Language_Other_C	bit	✓			Is the head of household or other adult taking ESL/ELL classes and verbal ESL/ELL established?
132	Language_Other_D	bit	✓			Is the head of household or other adult taking ESL/ELL classes with written ESL/ELL established?
133	Language_Other_E	bit	✓			Is the head of household or other adult fully bi-lingual?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
134	Support_Other_A	bit	✓			Does the family lack of necessary formal and informal resources (includes family friends and community)?
135	Support_Other_B	bit	✓			Are the family's formal and informal supports supportive, but lack ability/financial resources to help?
136	Support_Other_C	bit	✓			Does the family have some support from formal and informal sources that are able to help?
137	Support_Other_D	bit	✓			Does the family have strong support from formal and informal sources that are able to help?
138	Support_Other_E	bit	✓			Does the family have a healthy support network that is reciprocal?
139	Relationship_Other_A	bit	✓			Is the head of household's partner hostile, violent, or physically abusive? Are there multiple partners or uncertain paternity?
140	Relationship_Other_B	bit	✓			Is the head of household separated with no contact? Is the partner unavailable to provide support?
141	Relationship_Other_C	bit	✓			Is the head of household's relationship with the partner conflicted, critical, or verbally abusive with frequent arguments and a reluctance to support in crisis?
142	Relationship_Other_D	bit	✓			Is the head of household's partner's support inconsistent or conditional? They may be emotionally distant but available.
143	Relationship_Other_E	bit	✓			Is the head of household's partner very supportive, loving, and committed?
145	NotApplicable_ChildCare	bit	✓			Indicates if Childcare is applicable to this case
147	NotApplicable_Language	bit	✓			Indicates if Language is applicable to this case
148	NotApplicable_Relationship	bit	✓			Indicates if Relationship is applicable to this case
149	NotApplicable_Employment	bit	✓			Indicates if Employment is applicable to this case

TABLE NAME: INTAKEMATRIXEXIT

Table Description: Family Record Exit Matrix. This table contains data SSM measurements recorded at exit/discharge.

RELEVANT USER INTERFACE SCREENS

[Exit Matrix: Housing](#)

[Exit Matrix: Income](#)

[Exit Matrix: Adult Education](#)

[Exit Matrix: Transportation](#)

[Exit Matrix: Employment](#)

[Exit Matrix: Language](#)

[Exit Matrix: Mental Health](#)

[Exit Matrix: Nurturing and Attachment](#)

[Exit Matrix: Support Network](#)

[Exit Matrix: Substance Abuse](#)

[Exit Matrix: Child Care](#)

[Exit Matrix: Relationship with Partner](#)

[Exit Matrix: Health](#)

[Exit Matrix: Support of Child development](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	IntakeId	int		✓	Intake	
2	IsFinalized	bit				Indicates if the matrix has been finalized or not
3	Unlocked	bit				Indicates if the matrix is locked or unlocked
4	Housing_Head_A	bit	✓			Is the household homeless, living in substandard or unsafe housing, or living with friends or relatives?
5	Housing_Head_B	bit	✓			Is the household in a safe and secure but transitional or temporary housing? Or is rent unaffordable?
6	Housing_Head_C	bit	✓			Is the household in safe and secure subsidized or affordable housing, rental apartment or public housing?
7	Housing_Head_D	bit	✓			Is the household in safe and secure non subsidized housing, but choices are limited due to income of renter or home owner?
8	Housing_Head_E	bit	✓			Is the housing non subsidized home ownership or rental?
9	Transportation_Head_A	bit	✓			The head of household or other adult has no transportation options through public transportation, car or a regular ride?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
10	Transportation_Head_B	bit	✓			Do head of household or other adult members rarely (less than half the time) have transportation needs met through public transportation, car or a regular ride?
11	Transportation_Head_C	bit	✓			Do head of household or other adult members have some (about half the time) transportation needs met through public transportation, car or a regular ride?
12	Transportation_Head_D	bit	✓			Do head of household or other adult members have most (over half the time) transportation needs met through public transportation, car or a regular ride?
13	Transportation_Head_E	bit	✓			Do head of household or other adult members always have transportation needs met through public transportation, car or a regular ride?
14	MentalHealth_Head_A	bit	✓			Are there severe symptoms of Mental Illness with or without diagnosis/treatment/medications, including severe problems with Adult Daily Living Skills, parenting, and insight/self-perception?
15	MentalHealth_Head_B	bit	✓			Are there symptoms of mental illness with diagnosis but treatment is inconsistent or ineffective, including moderate problem with Adult Daily Living Skills, parenting, insight/self-perception?
16	MentalHealth_Head_C	bit	✓			Are symptoms under control and the person is receiving treatment and there are some problems with Adult Daily Living Skills, parenting, insight/self-perception?
17	MentalHealth_Head_D	bit	✓			Is mental illness situational, short term or has the person recovered without relapse and Adult Daily Living Skills, parenting, insight/self-perception are adequate?
18	MentalHealth_Head_E	bit	✓			Are there no observed symptoms of mental illness?
19	SubAbuse_Head_A	bit	✓			Is there a chronic history of drug or alcohol abuse with addiction?
20	SubAbuse_Head_B	bit	✓			Is there drug/alcohol bingeing or intermittent use, without apparent addiction?
21	SubAbuse_Head_C	bit	✓			Is there rare or experimental use of drugs or evidence of currently being clean or in a recovery program?
22	SubAbuse_Head_D	bit	✓			Is there occasional use of legal substances; stops using if pregnant?
23	SubAbuse_Head_E	bit	✓			There is no history or current use or abuse

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
24	Health_Head_A	bit	✓			Does the family have a member with an acute/chronic physical condition without diagnosis/treatment and no medical home?
25	Health_Head_B	bit	✓			Does the family seek care only when very ill or uses emergency room for care and has no medical home?
26	Health_Head_C	bit	✓			Does the family seek care inconsistently, including inconsistent treatment follow up, medical home may be unstable?
27	Health_Head_D	bit	✓			Does the family seek care appropriately, follow treatment recommendations and have a medical home?
28	Health_Head_E	bit	✓			Does the family seek care appropriately and cure and control obtained and has a medical home?
29	Income_Head_A	bit	✓			Is family income between 0% - 100% of poverty by family size?
30	Income_Head_B	bit	✓			Is family income between 100% - 125% of poverty by family size?
31	Income_Head_C	bit	✓			Is family income between 126% - 175% of poverty by family size?
32	Income_Head_D	bit	✓			Is family income between 176% - 200% of poverty by family size?
33	Income_Head_E	bit	✓			Is family income greater than 200% of poverty by family size?
34	Employment_Head_A	bit	✓			Are family members/heads of household unemployed?
35	Employment_Head_B	bit	✓			Is family employment temporary, part-time or seasonal and pay is inadequate with no benefits?
36	Employment_Head_C	bit	✓			Is family employed full time but pay is inadequate with few or no benefits?
37	Employment_Head_D	bit	✓			Is the family employed for less than three months full time with adequate pay and benefits?
38	Employment_Head_E	bit	✓			Has the family maintained employment for three months or more?
39	Parenting_Head_A	bit	✓			Is the parent(s) hostile, unable to nurture, bond, or love child(ren) in the home and is their responsiveness very limited?
40	Parenting_Head_B	bit	✓			Is the parent(s) indifference, apathy, depression, or developmental disability impairing the ability for them to nurture the child(ren)?
41	Parenting_Head_C	bit	✓			Does the parent(s) lacks information/modeling of love or are they afraid nurturing "spoils" the child(ren)? Marginal connectedness to the child(ren) is present.
42	Parenting_Head_D	bit	✓			Has the parent(s) bonded with the child, but loves and responds inconsistently? There are some reciprocal connections between parent and child.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
43	Parenting_Head_E	bit	✓			Is the parent(s) loving, responsive, and praise child(ren) and are they able to regulate child(ren) well? There are reciprocal connections.
44	ChildCare_Head_A	bit	✓			Does the family need childcare, but none is available/accessible and/or child is not eligible?
45	ChildCare_Head_B	bit	✓			Is the family's childcare unreliable or unaffordable, or inadequate supervision is a problem for childcare that is available?
46	ChildCare_Head_C	bit	✓			Is childcare available that is affordable and subsidized, but limited?
47	ChildCare_Head_D	bit	✓			Is childcare available that is affordable and reliable and there is no need for subsidy but choices are limited?
48	ChildCare_Head_E	bit	✓			Is the family able to select quality childcare of choice?
49	ChildDevSupport_Head_A	bit	✓			Do parent(s) have poor knowledge of child development including unrealistic expectations? Parent(s) may ignore or refuse information.
50	ChildDevSupport_Head_B	bit	✓			Does the parent(s) have little knowledge or interest of child development? Parent(s) may take a passive role.
51	ChildDevSupport_Head_C	bit	✓			Is the parent(s) open to learning about child development and provide age appropriate activities?
52	ChildDevSupport_Head_D	bit	✓			Does the parent(s) apply child development ideas, and is interested in child's development skills, interests and activities
53	ChildDevSupport_Head_E	bit	✓			Is the parent(s) able to anticipate child development changes and use appropriate interactions and activities with child daily?
54	AdultEdu_Head_A	bit	✓			Does the head of household or other adult have less than 12th grade education?
55	AdultEdu_Head_B	bit	✓			Has the head of household or other adult graduated with GED or High School diploma and are not currently attending a job training program, community college or college?
56	AdultEdu_Head_C	bit	✓			Does the head of household or other adult attend college, community college or job/technical training program?
57	AdultEdu_Head_D	bit	✓			Has the head of household or other adult graduated from college, community college or job training program?
58	AdultEdu_Head_E	bit	✓			Has the head of household or other adult graduated from graduate school?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
59	Language_Head_A	bit	✓			Does the head of household or other adult have low or no literacy in any language?
60	Language_Head_B	bit	✓			Is the head of household or other adult literate in their primary language with some verbal English skills?
61	Language_Head_C	bit	✓			Is the head of household or other adult taking ESL/ELL classes and verbal ESL/ELL established?
62	Language_Head_D	bit	✓			Is the head of household or other adult taking ESL/ELL classes with written ESL/ELL established?
63	Language_Head_E	bit	✓			Is the head of household or other adult fully bi-lingual?
64	Support_Head_A	bit	✓			Does the family lack of necessary formal and informal resources (includes family friends and community)?
65	Support_Head_B	bit	✓			Are the family's formal and informal supports supportive, but lack ability/financial resources to help?
66	Support_Head_C	bit	✓			Does the family have some support from formal and informal sources that are able to help?
67	Support_Head_D	bit	✓			Does the family have strong support from formal and informal sources that are able to help?
68	Support_Head_E	bit	✓			Does the family have a healthy support network that is reciprocal?
69	Relationship_Head_A	bit	✓			Is the head of household's partner hostile, violent, or physically abusive? Are there multiple partners or uncertain paternity?
70	Relationship_Head_B	bit	✓			Is the head of household separated with no contact? Is the partner unavailable to provide support?
71	Relationship_Head_C	bit	✓			Is the head of household's relationship with the partner conflicted, critical, or verbally abusive with frequent arguments and a reluctance to support in crisis?
72	Relationship_Head_D	bit	✓			Is the head of household's partner's support inconsistent or conditional? They may be emotionally distant but available.
73	Relationship_Head_E	bit	✓			Is the head of household's partner very supportive, loving, and committed?
74	Housing_Other_A	bit	✓			Is the household homeless, living in substandard or unsafe housing, or living with friends or relatives?
75	Housing_Other_B	bit	✓			Is the household in a safe and secure but transitional or temporary housing? Or is rent unaffordable?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
76	Housing_Other_C	bit	✓			Is the household in safe and secure subsidized or affordable housing, rental apartment or public housing?
77	Housing_Other_D	bit	✓			Is the household in safe and secure non subsidized housing, but choices are limited due to income of renter or home owner?
78	Housing_Other_E	bit	✓			Is the housing non subsidized home ownership or rental?
79	Transportation_Other_A	bit	✓			The head of household or other adult has no transportation options through public transportation, car or a regular ride?
80	Transportation_Other_B	bit	✓			Do head of household or other adult members rarely (less than half the time) have transportation needs met through public transportation, car or a regular ride?
81	Transportation_Other_C	bit	✓			Do head of household or other adult members have some (about half the time) transportation needs met through public transportation, car or a regular ride?
82	Transportation_Other_D	bit	✓			Do head of household or other adult members have most (over half the time) transportation needs met through public transportation, car or a regular ride?
83	Transportation_Other_E	bit	✓			Do head of household or other adult members always have transportation needs met through public transportation, car or a regular ride?
84	MentalHealth_Other_A	bit	✓			Are there severe symptoms of Mental Illness with or without diagnosis/treatment/medications, including severe problems with Adult Daily Living Skills, parenting, and insight/self-perception?
85	MentalHealth_Other_B	bit	✓			Are there symptoms of mental illness with diagnosis but treatment is inconsistent or ineffective, including moderate problem with Adult Daily Living Skills, parenting, insight/self-perception?
86	MentalHealth_Other_C	bit	✓			Are symptoms under control and the person is receiving treatment and there are some problems with Adult Daily Living Skills, parenting, insight/self-perception?
87	MentalHealth_Other_D	bit	✓			Is mental illness situational, short term or has the person recovered without relapse and Adult Daily Living Skills, parenting, insight/self-perception are adequate?
88	MentalHealth_Other_E	bit	✓			Are there no observed symptoms of mental illness?
89	SubAbuse_Other_A	bit	✓			Is there a chronic history of drug or alcohol abuse with addiction?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
90	SubAbuse_Other_B	bit	✓			Is there drug/alcohol binging or intermittent use, without apparent addiction?
91	SubAbuse_Other_C	bit	✓			Is there rare or experimental use of drugs or evidence of currently being clean or in a recovery program?
92	SubAbuse_Other_D	bit	✓			Is there occasional use of legal substances; stops using if pregnant?
93	SubAbuse_Other_E	bit	✓			There is no history or current use or abuse
94	Health_Other_A	bit	✓			Does the family have a member with an acute/chronic physical condition without diagnosis/treatment and no medical home?
95	Health_Other_B	bit	✓			Does the family seek care only when very ill or uses emergency room for care and has no medical home?
96	Health_Other_C	bit	✓			Does the family seek care inconsistently, including inconsistent treatment follow up, medical home may be unstable?
97	Health_Other_D	bit	✓			Does the family seek care appropriately, follow treatment recommendations and have a medical home?
98	Health_Other_E	bit	✓			Does the family seek care appropriately and cure and control obtained and has a medical home?
99	Income_Other_A	bit	✓			Is family income between 0% - 100% of poverty by family size?
100	Income_Other_B	bit	✓			Is family income between 100% - 125% of poverty by family size?
101	Income_Other_C	bit	✓			Is family income between 126% - 175% of poverty by family size?
102	Income_Other_D	bit	✓			Is family income between 176% - 200% of poverty by family size?
103	Income_Other_E	bit	✓			Is family income greater than 200% of poverty by family size?
104	Employment_Other_A	bit	✓			Are family members/heads of household unemployed?
105	Employment_Other_B	bit	✓			Is family employment temporary, part-time or seasonal and pay is inadequate with no benefits?
106	Employment_Other_C	bit	✓			Is family employed full time but pay is inadequate with few or no benefits?
107	Employment_Other_D	bit	✓			Is the family employed for less than three months full time with adequate pay and benefits?
108	Employment_Other_E	bit	✓			Has the family maintained employment for three months or more?
109	Parenting_Other_A	bit	✓			Is the parent(s) hostile, unable to nurture, bond, or love child(ren) in the home and is their responsiveness very limited?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
110	Parenting_Other_B	bit	✓			Is the parent(s) indifference, apathy, depression, or developmental disability impairing the ability for them to nurture the child(ren)?
111	Parenting_Other_C	bit	✓			Does the parent(s) lacks information/modeling of love or are they afraid nurturing “spoils” the child(ren)? Marginal connectedness to the child(ren) is present.
112	Parenting_Other_D	bit	✓			Has the parent(s) bonded with the child, but loves and responds inconsistently? There are some reciprocal connections between parent and child.
113	Parenting_Other_E	bit	✓			Is the parent(s) loving, responsive, and praise child(ren) and are they able to regulate child(ren) well? There are reciprocal connections.
114	ChildCare_Other_A	bit	✓			Does the family need childcare, but none is available/accessible and/or child is not eligible?
115	ChildCare_Other_B	bit	✓			Is the family's childcare unreliable or unaffordable, or inadequate supervision is a problem for childcare that is available?
116	ChildCare_Other_C	bit	✓			Is childcare available that is affordable and subsidized, but limited?
117	ChildCare_Other_D	bit	✓			Is childcare available that is affordable and reliable and there is no need for subsidy but choices are limited?
118	ChildCare_Other_E	bit	✓			Is the family able to select quality childcare of choice?
119	ChildDevSupport_Other_A	bit	✓			Do parent(s) have poor knowledge of child development including unrealistic expectations? Parent(s) may ignore or refuse information.
120	ChildDevSupport_Other_B	bit	✓			Does the parent(s) have little knowledge or interest of child development? Parent(s) may take a passive role.
121	ChildDevSupport_Other_C	bit	✓			Is the parent(s) open to learning about child development and provide age appropriate activities?
122	ChildDevSupport_Other_D	bit	✓			Does the parent(s) apply child development ideas, and is interested in child's development skills, interests and activities
123	ChildDevSupport_Other_E	bit	✓			Is the parent(s) able to anticipate child development changes and use appropriate interactions and activities with child daily?
124	AdultEdu_Other_A	bit	✓			Does the head of household or other adult have less than 12th grade education?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
125	AdultEdu_Other_B	bit	✓			Has the head of household or other adult graduated with GED or High School diploma and are not currently attending a job training program, community college or college?
126	AdultEdu_Other_C	bit	✓			Does the head of household or other adult attend college, community college or job/technical training program?
127	AdultEdu_Other_D	bit	✓			Has the head of household or other adult graduated from college, community college or job training program?
128	AdultEdu_Other_E	bit	✓			Has the head of household or other adult graduated from graduate school?
129	Language_Other_A	bit	✓			Does the head of household or other adult have low or no literacy in any language?
130	Language_Other_B	bit	✓			Is the head of household or other adult literate in their primary language with some verbal English skills?
131	Language_Other_C	bit	✓			Is the head of household or other adult taking ESL/ELL classes and verbal ESL/ELL established?
132	Language_Other_D	bit	✓			Is the head of household or other adult taking ESL/ELL classes with written ESL/ELL established?
133	Language_Other_E	bit	✓			Is the head of household or other adult fully bi-lingual?
134	Support_Other_A	bit	✓			Does the family lack of necessary formal and informal resources (includes family friends and community)?
135	Support_Other_B	bit	✓			Are the family's formal and informal supports supportive, but lack ability/financial resources to help?
136	Support_Other_C	bit	✓			Does the family have some support from formal and informal sources that are able to help?
137	Support_Other_D	bit	✓			Does the family have strong support from formal and informal sources that are able to help?
138	Support_Other_E	bit	✓			Does the family have a healthy support network that is reciprocal?
139	Relationship_Other_A	bit	✓			Is the head of household's partner hostile, violent, or physically abusive? Are there multiple partners or uncertain paternity?
140	Relationship_Other_B	bit	✓			Is the head of household separated with no contact? Is the partner unavailable to provide support?
141	Relationship_Other_C	bit	✓			Is the head of household's relationship with the partner conflicted, critical, or verbally abusive with frequent arguments and a reluctance to support in crisis?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
142	Relationship_Other_D	bit	✓			Is the head of household's partner's support Inconsistent or conditional? They may be emotionally distant but available.
143	Relationship_Other_E	bit	✓			Is the head of household's partner very supportive, loving, and committed?
144	Goal_Housing	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
145	Goal_Transportation	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
146	Goal_MentalHealth	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
147	Goal_SubAbuse	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
148	Goal_Health	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
149	Goal_Income	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
150	Goal_Employment	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
151	Goal_Parenting	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
152	Goal_ChildCare	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
153	Goal_ChildDevSupport	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
154	Goal_AdultEdu	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
155	Goal_Language	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
156	Goal_Support	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
157	Goal_Relationship	bit	✓			Was this a goal for the family while they were enrolled in FaDSS?
159	NotApplicable_ChildCare	bit	✓			Indicates if Childcare is applicable to this case
161	NotApplicable_Language	bit	✓			Indicates if Language is applicable to this case
162	NotApplicable_Relationship	bit	✓			Indicates if Relationship is applicable to this case
163	NotApplicable_Employment	bit	✓			Indicates if Employment is applicable to this case

TABLE NAME: INTAKETRANSFER

Table Description: Family Record transfers. This table contains a record for each time a Family Record is transferred between specialists or Grantees. This is used to create a historical record of who was assigned to the family at any given time.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	IntakeId	int			Intake	Intake ID
3	GranteeId	int			Grantee	Grantee ID
4	SpecialistId	int			ApplicationUser	Specialist GUID
5	ActiveDateUtc	datetime	✓			Active Date

TABLE NAME: INTAKEFORMEXIT

Table Description: Family Record Exit Form. This table contains data elements recorded once at exit/discharge.

RELEVANT USER INTERFACE SCREENS

Family Exit Information

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	IntakeId	int		✓	Intake	Intake Id
2	HeadEducationId	int	✓		TL_Education	Head of Household Education
3	HeadEmploymentId	int	✓		TL_Employment	Head of Household Employment
4	HeadWeeklyHours	int	✓			Head of Household Weekly Hours
5	HeadHourlyWage	decimal				Head of Household Hourly Wage
6	TotalIncomeMonthly	int				Family Total Monthly Income
7	HeadIncomeFIP	int	✓			Head of Household FIP Income
8	HeadIncomeWages	int				Head of Household Monthly Wages
9	HeadIncomeChildSupport	int				Head of Household Child support Income
10	HeadIncomeSSI	int				Head of Household SSI/SSDI Income
11	HeadIncomeOther	int				Head of Household Other Income
12	OtherEducationId	int	✓		TL_Education	Other Adult Education
13	OtherEmploymentId	int	✓		TL_Employment	Other Adult Employment
14	OtherWeeklyHours	int				Other Adult Weekly Hours
15	OtherHourlyWage	decimal				Other Adult Hourly Wage
16	OtherIncomeFIP	int	✓			Other Adult FIP Income
17	OtherIncomeWages	int				Other Adult Monthly Wages
18	OtherIncomeChildSupport	int				Other Adult Child support Income
19	OtherIncomeSSI	int				Other Adult SSI/SSDI Income
20	OtherIncomeOther	int				Other Adult Other Income
21	FipEligibleAdults	int	✓			Number of Family Investment Program (FIP) eligible adults that have submitted application for SSI/SSDI:
22	FipChildCareId	int	✓		TL_YesNoNa	Family employed and addressed lack of safe, reliable childcare:
23	FipChildAbuseCaseId	int	✓		TL_YesNo	Family has active child abuse case (since enrollment):

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
24	FipExitDateUtc	datetime	✓			Exit date
25	FipExitSituationId	int	✓		TL_ExitSituation	FIP Exit Situation
26	FipExitSituationIdExplain	nvarchar	✓			Other Exit Situation if not listed in Drop down
27	FipTransitionId	int	✓		TL_Transition	Length of Transition in FaDSS after FIP Ends:
28	FipLeaveReasonId	int	✓		TL_LeaveReason	Reason for leaving Family Investment Program (FIP):
29	FipLeaveReasonIdExplain	nvarchar	✓			Other reason for leaving if not listed in drop down
30	ExitFamilyTypeId	int	✓		TL_FamilyType	Family Type (only enter if the family type has changed)

TABLE NAME: INTAKEFORMEXIT

Table Description: Family Record Exit Form. This table contains data elements recorded once at Exit/intake.

RELEVANT USER INTERFACE SCREENS

Family Exit Information

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	IntakeId	int		✓	Intake	Intake Id
2	HeadEducationId	int	✓		TL_Education	Head of Household Education
3	HeadEmploymentId	int	✓		TL_Employment	Head of Household Employment
4	HeadWeeklyHours	int				Head of Household Weekly Hours
5	HeadHourlyWage	decimal				Head of Household Hourly Wage
6	TotalIncomeMonthly	int				Family Total Monthly Income
7	HeadIncomeFIP	int	✓			Head of Household FIP Income
8	HeadIncomeWages	int				Head of Household Monthly Wages
9	HeadIncomeChildSupport	int				Head of Household Child support Income
10	HeadIncomeSSI	int				Head of Household SSI/SSDI Income
11	HeadIncomeOther	int				Head of Household Other Income
12	OtherEducationId	int	✓		TL_Education	Other Adult Education
13	OtherEmploymentId	int	✓		TL_Employment	Other Adult Employment
14	OtherWeeklyHours	int				Other Adult Weekly Hours
15	OtherHourlyWage	decimal				Other Adult Hourly Wage
16	OtherIncomeFIP	int	✓			Other Adult FIP Income
17	OtherIncomeWages	int				Other Adult Monthly Wages
18	OtherIncomeChildSupport	int				Other Adult Child support Income
19	OtherIncomeSSI	int				Other Adult SSI/SSDI Income
20	OtherIncomeOther	int				Other Adult Other Income

TABLE NAME: INTAKEFAMILYMEMBER

Table Description: Family Record household members. This table contains one row for each member of the family.

RELEVANT USER INTERFACE SCREENS

Edit Family Member

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	Intakeld	int			Intake	Intake Id
3	NameFirst	nvarchar				Family member's first name
4	NameLast	nvarchar				Family member's last name
5	DateBirthUtc	datetime	✓			Family member's date of birth
6	GenderId	int	✓		TL Gender	What is the Gender of the family member?
7	Raceld	int	✓		TL Race	What is the Race of the family member?
8	Languageld	int	✓		TL Language	What Language does the family member speak
9	LanguageOther	nvarchar	✓			I language not listed, specify other language
10	DisabledId	int	✓		TL YesNo	Is family member disabled?
11	RelationshipId	int	✓		TL Relationship	Relationship of family member
12	Stateld	nvarchar	✓			DHS State ID

TABLE NAME: INTAKEEMPLOYMENT

Table Description: Family Record employment information. This table contains monthly records of the family employment information.

RELEVANT USER INTERFACE SCREENS

[Edit Employment Record](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	Intakeld	int			Intake	Intake ID
3	RecordDateUtc	datetime				Date of record
4	EmployedId	int	✓		TL_YesNo	Employed?
5	Wages	int	✓			Monthly wages
6	FIPAmt	int	✓			Scheduled Family Investment Program (FIP) Amount
7	FIPAmtNoWage	int	✓			Unpaid employment
8	FIPReceive	bit	✓			Actual Family Investment Program (FIP) Received

TABLE NAME: INTAKECONTACT

Table Description: Family Record contacts. This table contains one row for each contact with the family.

RELEVANT USER INTERFACE SCREENS

[Edit Contact](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	IntakeId	int			Intake	Intake ID
3	ContactDateTimeStartUTC	datetime				Contact Date and Start Time
4	ContactDateTimeEndUTC	datetime				Contact Date and End Time
5	ContactType	int			TL ContactType	Type of Contact:
6	FamFunction	int	✓		TL YesNo	Family functioning assessment completed?
7	DVScreen	int	✓		TL YesNoSelfReportNa	Domestic violence screen conducted?
8	DVScreenRefer	int	✓		TL YesNoReceivingSupport	Referred for domestic violence supports?
9	DVScreenPos	int	✓		TL YesNo	Domestic violence screen positive?
10	ChildDev	int	✓		TL ChildDevScreen	Child development screen conducted?
12	ChildDevPos	int	✓		TL YesNo	Child development screen positive?
13	ChildDevRefer	int	✓		TL YesNoReceivingSupport	Referred for child development supports?

TABLE NAME: INTAKEACTIVITY

Table Description: Family Record activity & outcomes table. This table uses a one-to-one relationship with the primary table.

RELEVANT USER INTERFACE SCREENS

Activity Outcomes

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Intakeld	int		✓	Intake	Intake ID
2	AduMental	int				Number of adult family members with substantiated mental health issues
3	AduMentalTx	int	✓			Number of adult family members with substantiated mental health issues who accessed the available treatment/support
4	AduMentalRefer	int	✓		TL_YesNo	Did FaDSS help family member(s) with substantiated mental health issues access treatment/support?
5	ChildMental	int				Number of children with substantiated mental health issues
6	ChildMentalTx	int	✓			Number of children with substantiated mental health issues who accessed the available treatment/support
7	ChildMentalRefer	int	✓		TL_YesNo	Did FaDSS help children with substantiated mental health issues access treatment/support?
8	AduSubstance	int				Number of adult family members with substantiated substance use issues
9	AduSubstanceTx	int	✓			Number of adult family members with substantiated substance use issues who accessed the available treatment/support
10	AduSubstanceRefer	int	✓		TL_YesNo	Did FaDSS help family member(s) with substantiated substance use issues access treatment/support?
11	ChildSubstance	int				Number of children with substantiated substance use issues
12	ChildSubstanceTx	int	✓			Number of children with substantiated substance use issues who accessed the available treatment/support
13	ChildSubstanceRefer	int	✓		TL_YesNo	Did FaDSS help children with substantiated substance use issues access treatment/support?

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
14	AduChronic	int				Number of adult family members with substantiated chronic and acute physical illness
15	AduChronicTx	int	✓			Number of adult family members with substantiated chronic and acute physical illness who accessed the available treatment/support
16	AduChronicRefer	int	✓		TL YesNo	Did FaDSS help family member(s) with substantiated chronic and acute physical illness access treatment/support?
17	ChildChronic	int				Number of children with substantiated chronic and acute physical illness
18	ChildChronicTx	int	✓			Number of children with substantiated chronic and acute physical illness who accessed the available treatment/support
19	ChildChronicRefer	int	✓		TL YesNo	Did FaDSS help children with substantiated chronic and acute physical illness access treatment/support?
20	NumEarlyChildhood	int				Number of children (0-5) in the home enrolled in early childhood programs
21	FamilyDv	int	✓		TL YesNo	Family experiencing domestic violence
22	FamilyDvHelp	int	✓		TL YesNo	If Yes, did the family receive help?
23	FamilyDvRefer	int	✓		TL YesNo	If Yes, was the family referred?
24	FamilyInvChildEd	int	✓		TL YesNo	Family involved in their children's formal education
25	FamilyWorkPrepare	int	✓		TL YesNo	Family involved in FaDSS activities to increase work preparedness
26	WorkPrepMockInterview	bit				Mock Interview
27	WorkPrepJobLeads	bit				Provide job leads
28	WorkPrepJobFair	bit				Sponsor a job fair
29	WorkPrepClothing	bit				Obtain clothing (work/interview)
30	WorkPrepApplications	bit				Job applications
31	WorkPrepOther	bit				Other work preparedness activity
32	WorkPrepOther_Description	nvarchar	✓			Description of other work preparedness activity

TABLE NAME: GRANTEEINVESTMENT

Table Description: This table contains financial data about how much money is invested into each Grantee.

RELEVANT USER INTERFACE SCREENS

[Edit Grantee: Edit Investment Record](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	Granteeld	int			Grantee	Grantee ID
3	FiscalYearId	int			TL_FiscalYearlowa	Fiscal year
4	Amount	int				Investment amount

TABLE NAME: GRANTEE CAPACITY

Table Description: This table contains the yearly Grantee total capacity values. This data is used to derive usage and capacity measurements.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	Granteeld	int			Grantee	Grantee ID
3	FiscalYearId	int			TL FiscalYearlowa	Fiscal year
4	Capacity	int				Capacity of grantee

TABLE NAME: GRANTEEASSESSMENT

Table Description: Add Grantee Assessments

RELEVANT USER INTERFACE SCREENS

[Edit Grantee: Assessment Information](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	Granteeld	int			Grantee	Grantee ID
3	AssessmentId	int			TL_Assessment	Assessment ID
4	OtherDescription	nvarchar	✓			Assessment description if not listed in TL_Assessment

TABLE NAME: GRANTEE

Table Description: This table contains the list of all 17 Grantees and all attributes associated with the Grantee.

Note: Grantee names listed in [Grantee](#) Appendix

RELEVANT USER INTERFACE SCREENS

[Edit Grantee](#)

[Edit Grantee: Create Grantee](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		
2	NameLegal	nvarchar				Legal name of grantee
3	ExecDirector	nvarchar				Grantee director name
4	FiscalContact	nvarchar				Grantee Fiscal contact
5	Address1	nvarchar				Grantee address line 1
6	Address2	nvarchar	✓			Grantee address line 2
7	AddressCity	nvarchar				Grantee city
8	AddressStateId	int			TL_State	Grantee state Id
9	AddressZip	nvarchar				Grantee zip/postal code
10	Phone	nvarchar				Grantee contact phone
11	ProjectCode	tinyint				Project code

TABLE NAME: APPLICATIONUSERROLE

Table Description: Website membership tables used for authentication and authorization.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	UserId	int		✓	ApplicationUser	User ID
2	RoleId	int		✓	ApplicationIdentityRole	Role Id

TABLE NAME: FIPUPLOAD

Table Description: This table contains a list of Grantee-specific spreadsheets which contain a list of families who are FIP-eligible. The files are uploaded monthly and distributed to each Grantee.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		
2	FileName	nvarchar				Name of upload file
3	FileMIME	nvarchar				Type of upload file
4	FileBytes	varbinary				Size of upload file
5	Timestamp	datetime				Date and time of upload
6	UserId	int			ApplicationUser	User Id of person uploading
7	Granteeld	int			Grantee	Associated grantee
8	RecordDateUtc	datetime				Timestamp plus 6 hours
9	Month	int				Month of upload
10	Year	int				Year of upload
11	Comments	nvarchar	✓			Comments

TABLE NAME: MATRIXDOMAIN

Table Description: This contains a list of all SSM matrix domains & descriptions.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	Description	nvarchar	✓			Domain Description
3	IsRequiredOther	bit				Domain is required

TABLE NAME: AUDITFIPLELIGIBILITYSTATUS

Table Description: This table contains a historical record of all eligibility changes over a family time in the program.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Identity
2	IntakeId	int			Intake	Intake Id
3	ReceiveFIP	int			TL_YesNo	Does the family receive FIP?
4	ReceiveFIPEffectiveDate	datetime	✓			Effective date of record
5	Timestamp	datetime				Date record was updated
6	UserId	int			ApplicationUser	User ID of worker who updated the record
7	MandatoryPJ	int	✓		TL_YesNo	Is the family a mandatory PJ participant?
8	TwoAdultField	int	✓		TL_YesNo	Two or more FIA Responsible Individuals?

TABLE NAME: APPLICATIONIDENTITYROLE

Table Description: Website membership tables used for authentication and authorization.

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	Id	int		✓		Role ID
2	Description	nvarchar				Description of Role permissions
3	Name	nvarchar				Name of Role

TABLE NAME: APPLICATIONUSER

Table Description: Website membership tables used for authentication and authorization.

RELEVANT USER INTERFACE SCREENS

[Edit Grantee: Edit Staff](#)

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
1	UserId	int		✓		User ID
2	NameFirst	nvarchar				User first name
3	NameLast	nvarchar				User last name
4	Title	nvarchar	✓			User's title
5	Address1	nvarchar	✓			User Address Line 1
6	Address2	nvarchar	✓			User Address Line 2
7	AddressCity	nvarchar	✓			User City
8	AddressStateId	int	✓		TL_State	User State ID
9	AddressZIP	nvarchar	✓			User Zip/Postal code
10	StartDateUtc	datetime	✓			User Start Date
11	CertificationDateUtc	datetime	✓			Date user certified to use FaDSS
12	SeparationDateUtc	datetime	✓			Date user access terminated
13	DatePasswordChangedUtc	datetime	✓			Date of last password change
14	EmailConfirmed	bit				Email address confirmed
15	PhoneNumber	nvarchar	✓			User Phone number
16	Email	nvarchar				User email address
17	GranteeId	int	✓		Grantee	Grantee user associated with
18	PasswordHash	nvarchar	✓			Hashed Password
19	SecurityStamp	nvarchar	✓			Security Stamp
20	PhoneNumberConfirmed	bit				User Phone confirmed
21	TwoFactorEnabled	bit				two factor authentication enabled
22	LockoutEndDateUtc	datetime	✓			Date and time to unlock user automatically
23	LockoutEnabled	bit				User account locked
24	AccessFailedCount	int				Number of failed login attempts
25	UserName	nvarchar				Login user name
26	TL_Carrier_Id	int	✓		TL_Carrier	SMS Carrier ID

Order	Field Name	Data Type	Allow Nulls?	PK?	FK Table	Description
27	TL_Gender_Id	int	✓		TL_Gender	User's gender
28	IsReviewed	bit				User data reviewed
29	FaDssPercentFte	decimal	✓			Percent of full time employment
30	Caseload	int				Number of cases assigned to user
31	AssignedServiceArea	nvarchar	✓			Service area user is assigned to
32	EducationLevelId	int	✓		TL_EducationStaff	User education level
33	EducationLevelOther	nvarchar	✓			User Education level if not listed in TL_Educationstaff

APPENDIX: USER INTERFACES

Create New Record Form

Create New Record

Project# / Grantee	<input type="text"/>	GranteeId																		
FaDSS Specialist	<input type="text"/>	SpecialistId																		
Head Of Household, First Name	<input type="text"/>	HeadOfHouseholdNameFirst																		
Head Of Household, Last Name	<input type="text"/>	HeadOfHouseholdNameLast																		
Referral Source	<input type="text"/>	ReferralSourceId																		
Enrollment Status	Enrolled	EnrollmentStatusId																		
Enrollment Date	mm/dd/yyyy	DateEnrollUtc																		
Does the family receive FIP?	Yes	ReceiveFIP																		
Is the family a mandatory PJ participant?	Yes	MandatoryPJ																		
Two or more FIA Responsible Individuals?	Yes	TwoAdultField																		
DHS Case Number	<input type="text"/>	DhsCaseNumber																		
DHS State ID	<input type="text"/>	StateId																		
County	<input type="text"/>	CountyId																		
Family Type	<input type="text"/>	FamilyTypeId																		
Additional FIA Responsible Individuals	<table><thead><tr><th>State ID</th><th>First Name</th><th>Last Name</th></tr></thead><tbody><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></tbody></table>		State ID	First Name	Last Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>																		
<input type="text"/>	<input type="text"/>	<input type="text"/>																		
Comments	<input type="text"/>	Comments																		

Search Family Records Form

Search

Intake Id	<input type="text"/>	Id
Head of Household Last Name	<input type="text"/>	NameLastHead
Project# / Grantee	<input type="text"/>	Granteeld
FaDSS Specialist	<input type="text"/>	SpecialistId
DHS Case Number	<input type="text"/>	Caseld
DHS State ID	<input type="text"/>	StateId
Enrollment date between	<input type="text" value="mm/dd/yyyy"/>	EnrollmentStart
	<input type="text" value="mm/dd/yyyy"/>	EnrollmentEnd
Include	<input type="text" value="Enrolled"/>	EnrolledFilter

Edit Header Form

Edit Header

Project# / Grantee	Community Action Agency of Siouxland	GranteeId
FaDSS Specialist	Antoinette Green	SpecialistId
Referral Source	PJ Worker	ReferralSourceId
Enrollment Status	Enrolled	EnrollmentStatusId
Enrollment Date	1/1/2018	DateEnrollUtc
Eligibility Change Effective Date	1/1/2018	ReceiveFIPEffectiveDate
Does the family receive FIP?	Yes	ReceiveFIP
Is the family a mandatory PJ participant?	Yes	MandatoryPJ
Two or more FIA Responsible Individuals?	No	TwoAdultField
DHS Case Number	S000000001	DhsCaseNumber
DHS State ID	1234567B	StateId
County	Adams County	CountyId
Family Type	Two Parent	FamilyTypeId
Date Head of Household Changed	mm/dd/yyyy	DateHOHChangedUTC
Comments		Comments

Discard Changes Save Changes

Family Information at Enrollment

Family Information at Enrollment | Family Members (4) | FIP History (1) | Self Sufficiency Matrix | Contacts (32) | Employment (11) | Activity Outcomes

Family Exit Information

Entry: Head of Household

Education:

Employment:

Weekly Hours:

Hourly Wage:

Monthly Wages:

Family Investment Program (FIP):

Child Support:

SSI/SSDI:

Other Income:

Total Monthly Income:

Edit Family Member

The image shows a screenshot of a web application window titled "Edit Family Member". The window contains a form with several fields. Each field is annotated with a red box containing a left-pointing arrow and a label, which corresponds to a data dictionary entry. The fields and their labels are:

- First Name**: Text input field with a small icon on the right. Label: `NameFirst`
- Last Name**: Text input field. Label: `NameLast`
- DHS State ID**: Text input field. Label: `StateId`
- Birthdate**: Text input field with a date mask "mm/dd/yyyy". Label: `DateBirthUtc`
- Gender**: Dropdown menu. Label: `GenderId`
- Race**: Dropdown menu with "Other" selected. Label: `RaceId`
- Primary Language**: Dropdown menu with "Other" selected. Label: `LanguageId`
- Other Language:**: Dropdown menu with "None" selected. Label: `LanguageOther`
- Disabled**: Dropdown menu with "Yes" selected. Label: `DisabledId`
- Relationship**: Text input field with "Head of Household" entered. Label: `Relationship`

At the bottom of the form, there are two buttons: "Discard Changes" (white with a border) and "Save Changes" (blue).

Exit Matrix: Housing

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment
Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult
Is the household homeless , living in substandard or unsafe housing, or living with friends or relatives?	Yes <input type="checkbox"/> N/A <input type="checkbox"/> <code>IntakeMatrixEntry.Housing_Head_A</code>	
Is the household in a safe and secure but transitional or temporary housing? Or is rent unaffordable?	Yes <input type="checkbox"/> N/A <input type="checkbox"/> <code>IntakeMatrixEntry.Housing_Head_B</code>	
Is the household in safe and secure subsidized or affordable housing, rental apartment or public housing?	Yes <input type="checkbox"/> N/A <input type="checkbox"/> <code>IntakeMatrixEntry.Housing_Head_C</code>	
Is the household in safe and secure non subsidized housing, but choices are limited due to income of renter or home owner?	Yes <input type="checkbox"/> N/A <input type="checkbox"/> <code>IntakeMatrixEntry.Housing_Head_D</code>	
Is the housing non subsidized home ownership or rental?	Yes <input type="checkbox"/> N/A <input type="checkbox"/> <code>IntakeMatrixEntry.Housing_Head_E</code>	

Exit Matrix: Transportation

Entry Matrix

Housing **Transportation** Mental Health Substance Abuse Health Income Employment Nurturing and Attachment
Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

Entry: Head of Household **Entry: Other Adult**

The head of household or other adult has no transportation options through public transportation, car or a regular ride? Yes No N/A IntakeMatrixEntry.Transportation_Head_A

Do head of household or other adult members rarely (less than half the time) have transportation needs met through public transportation, car or a regular ride? Yes No N/A IntakeMatrixEntry.Transportation_Head_B

Do head of household or other adult members have some (about half the time) transportation needs met through public transportation, car or a regular ride? Yes No N/A IntakeMatrixEntry.Transportation_Head_C

Do head of household or other adult members have most (over half the time) transportation needs met through public transportation, car or a regular ride? Yes No N/A IntakeMatrixEntry.Transportation_Head_D

Do head of household or other adult members always have transportation needs met through public transportation, car or a regular ride? Yes No N/A IntakeMatrixEntry.Transportation_Head_E

Exit Matrix: Mental Health

Entry Matrix

Housing Transportation **Mental Health** Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult Household
Are there severe symptoms of Mental Illness with or without diagnosis/treatment/medications, including severe problems with Adult Daily Living Skills, parenting, and insight/self-perception?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Are there symptoms of mental illness with diagnosis but treatment is inconsistent or ineffective, including moderate problem with Adult Daily Living Skills, parenting, insight/self-perception?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Are symptoms under control and the person is receiving treatment and there are some problems with Adult Daily Living Skills, parenting, insight/self-perception?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Is mental illness situational, short term or has the person recovered without relapse and Adult Daily Living Skills, parenting, insight/self-perception are adequate ?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Are there no observed symptoms of mental illness?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Substance Abuse

Entry Matrix

Housing Transportation Mental Health **Substance Abuse** Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult
Is there a chronic history of drug or alcohol abuse with addiction?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.SubAbuse_Head_A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is there drug/alcohol binging or intermittent use, without apparent addiction?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.SubAbuse_Head_B	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is there rare or experimental use of drugs or evidence of currently being clean or in a recovery program?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.SubAbuse_Head_C	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is there occasional use of legal substances; stops using if pregnant?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.SubAbuse_Head_D	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
There is no history or current use or abuse	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.SubAbuse_Head_E	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Health

Entry Matrix

Housing Transportation Mental Health Substance Abuse **Health** Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult Household
Does the family have a member with an acute/chronic physical condition without diagnosis/treatment and no medical home?	Yes <input type="checkbox"/> <code>IntakeMatrixEntry.Health_Head_A</code>	N/A
Does the family seek care only when very ill or uses emergency room for care and has no medical home?	Yes <input type="checkbox"/> <code>IntakeMatrixEntry.Health_Head_B</code>	N/A
Does the family seek care inconsistently, including inconsistent treatment follow up, medical home may be unstable?	Yes <input type="checkbox"/> <code>IntakeMatrixEntry.Health_Head_C</code>	N/A
Does the family seek care appropriately, follow treatment recommendations and have a medical home?	Yes <input type="checkbox"/> <code>IntakeMatrixEntry.Health_Head_D</code>	N/A
Does the family seek care appropriately and cure and control obtained and has a medical home?	Yes <input type="checkbox"/> <code>IntakeMatrixEntry.Health_Head_E</code>	N/A

Exit Matrix: Income

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health **Income** Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult
Is family income between 0% - 100% of poverty by family size?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Is family income between 100% - 125% of poverty by family size?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Is family income between 126% - 175% of poverty by family size?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Is family income between 176% - 200% of poverty by family size?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Is family income greater than 200% of poverty by family size?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Employment

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income **Employment** Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult
Are family members/heads of household unemployed?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Employment_Head_A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is family employment temporary, part-time or seasonal and pay is inadequate with no benefits?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Employment_Head_B	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is family employed full time but pay is inadequate with few or no benefits?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Employment_Head_C	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is the family employed for less than three months full time with adequate pay and benefits?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Employment_Head_D	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Has the family maintained employment for three months or more?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Employment_Head_E	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

Exit Matrix: Nurturing and Attachment

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment **Nurturing and Attachment**

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult Household
Is the parent(s) hostile, unable to nurture, bond, or love child(ren) in the home and is their responsiveness very limited?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Is the parent(s) indifference, apathy, depression, or developmental disability impairing the ability for them to nurture the child(ren)?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Does the parent(s) lacks information/modeling of love or are they afraid nurturing "spoils" the child(ren)? Marginal connectedness to the child(ren) is present.	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Has the parent(s) bonded with the child, but loves and responds inconsistently? There are some reciprocal connections between parent and child.	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Is the parent(s) loving, responsive, and praise child(ren) and are they able to regulate child(ren) well? There are reciprocal connections.	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Child Care

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

IntakeMatrixEntry.NotApplicable_ChildCare

	Entry: Head of Household	Entry: Other Adult
Does the family need childcare, but none is available/accessible and/or child is not eligible?	Yes <input type="checkbox"/> IntakeMatrixEntry.ChildCare_Head_A	N/A
Is the family's childcare unreliable or unaffordable, or inadequate supervision is a problem for childcare that is available?	Yes <input type="checkbox"/> IntakeMatrixEntry.ChildCare_Head_B	N/A
Is childcare available that is affordable and subsidized, but limited?	Yes <input type="checkbox"/> IntakeMatrixEntry.ChildCare_Head_C	N/A
Is childcare available that is affordable and reliable and there is no need for subsidy but choices are limited?	Yes <input type="checkbox"/> IntakeMatrixEntry.ChildCare_Head_D	N/A
Is the family able to select quality childcare of choice?	Yes <input type="checkbox"/> IntakeMatrixEntry.ChildCare_Head_E	N/A

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Support of Child Development

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care **Support of Child Development** Adult Education Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult
Do parent(s) have poor knowledge of child development including unrealistic expectations? Parent(s) may ignore or refuse information.	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Does the parent(s) have little knowledge or interest of child development? Parent(s) may take a passive role.	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Is the parent(s) open to learning about child development and provide age appropriate activities?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Does the parent(s) apply child development ideas, and is interested in child's development skills, interests and activities	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Is the parent(s) able to anticipate child development changes and use appropriate interactions and activities with child daily?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Adult Education

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development **Adult Education** Language Support Network Relationship with Partner

	Entry: Head of Household	Entry: Other Adult
Does the head of household or other adult have less than 12th grade education?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.AdultEdu_Head_A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Has the head of household or other adult graduated with GED or High School diploma and are not currently attending a job training program, community college or college?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.AdultEdu_Head_B	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Does the head of household or other adult attend college, community college or job/technical training program?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.AdultEdu_Head_C	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Has the head of household or other adult graduated from college, community college or job training program?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.AdultEdu_Head_D	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Has the head of household or other adult graduated from graduate school?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.AdultEdu_Head_E	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

Exit Matrix: Language

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education **Language** Support Network Relationship with Partner

IntakeMatrixEntry.NotApplicable_Language

	Entry: Head of Household	Entry: Other Adult
Does the head of household or other adult have low or no literacy in any language?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Language_Head_A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is the head of household or other adult literate in their primary language with some verbal English skills?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Language_Head_B	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is the head of household or other adult taking ESL/ELL classes and verbal ESL/ELL established?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Language_Head_C	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is the head of household or other adult taking ESL/ELL classes with written ESL/ELL established?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Language_Head_D	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Is the head of household or other adult fully bi-lingual?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A IntakeMatrixEntry.Language_Head_E	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Support Network

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language **Support Network** Relationship with Partner

	Entry: Head of Household	Entry: Other Adult
Does the family lack of necessary formal and informal resources (includes family friends and community)?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Are the family's formal and informal supports supportive, but lack ability/financial resources to help?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Does the family have some support from formal and informal sources that are able to help?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Does the family have strong support from formal and informal sources that are able to help?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>
Does the family have a healthy support network that is reciprocal?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	<input type="radio"/>

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Relationship with Partner

Entry Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network **Relationship with Partner**

IntakeMatrixEntry.NotApplicable_Relationship

Entry: Head of Household Entry: Other Adult

Is the head of household's partner hostile, violent, or physically abusive? Are there multiple partners or uncertain paternity? Yes IntakeMatrixEntry.Relationship_Head_A

Is the head of household separated with no contact? Is the partner unavailable to provide support? Yes IntakeMatrixEntry.Relationship_Head_B

Is the head of household's relationship with the partner conflicted, critical, or verbally abusive with frequent arguments and a reluctance to support in crisis? Yes IntakeMatrixEntry.Relationship_Head_C

Is the head of household's partner's support inconsistent or conditional? They may be emotionally distant but available. Yes IntakeMatrixEntry.Relationship_Head_D

Is the head of household's partner very supportive, loving, and committed? Yes IntakeMatrixEntry.Relationship_Head_E

Previous

Discard Changes Save And Finalize

Exit Matrix: Housing

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment
Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult
Is the household homeless , living in substandard or unsafe housing, or living with friends or relatives?	Yes <input type="checkbox"/> IntakeMatrixExit.Housing_Head_A	N/A
Is the household in a safe and secure but transitional or temporary housing? Or is rent unaffordable?	Yes <input type="checkbox"/> IntakeMatrixExit.Housing_Head_B	N/A
Is the household in safe and secure subsidized or affordable housing, rental apartment or public housing?	Yes <input type="checkbox"/> IntakeMatrixExit.Housing_Head_C	N/A
Is the household in safe and secure non subsidized housing, but choices are limited due to income of renter or home owner?	Yes <input type="checkbox"/> IntakeMatrixExit.Housing_Head_D	N/A
Is the housing non subsidized home ownership or rental?	Yes <input type="checkbox"/> IntakeMatrixExit.Housing_Head_E	N/A

Was this a goal for the family while they were enrolled in FaDSS?

Yes IntakeMatrixExit.Goal_Housing

Next

Discard Changes Save And Finalize

Exit Matrix: Transportation

Exit Matrix

Housing **Transportation** Mental Health Substance Abuse Health Income Employment Nurturing and Attachment
Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult
The head of household or other adult has no transportation options through public transportation, car or a regular ride?	Yes <input type="checkbox"/> N/A <input checked="" type="checkbox"/> IntakeMatrixExit.Transportation_Head_A	N/A
Do head of household or other adult members rarely (less than half the time) have transportation needs met through public transportation, car or a regular ride?	Yes <input type="checkbox"/> N/A <input checked="" type="checkbox"/> IntakeMatrixExit.Transportation_Head_B	N/A
Do head of household or other adult members have some (about half the time) transportation needs met through public transportation, car or a regular ride?	Yes <input type="checkbox"/> N/A <input checked="" type="checkbox"/> IntakeMatrixExit.Transportation_Head_C	N/A
Do head of household or other adult members have most (over half the time) transportation needs met through public transportation, car or a regular ride?	Yes <input type="checkbox"/> N/A <input checked="" type="checkbox"/> IntakeMatrixExit.Transportation_Head_D	N/A
Do head of household or other adult members always have transportation needs met through public transportation, car or a regular ride?	Yes <input type="checkbox"/> N/A <input checked="" type="checkbox"/> IntakeMatrixExit.Transportation_Head_E	N/A

Was this a goal for the family while they were enrolled in FaDSS?

Yes N/A IntakeMatrixExit.Goal_Transportation

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Mental Health

Exit Matrix

Housing Transportation **Mental Health** Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult Household
Are there severe symptoms of Mental Illness with or without diagnosis/treatment/medications, including severe problems with Adult Daily Living Skills, parenting, and insight/self-perception?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Are there symptoms of mental illness with diagnosis but treatment is inconsistent or ineffective, including moderate problem with Adult Daily Living Skills, parenting, insight/self-perception?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Are symptoms under control and the person is receiving treatment and there are some problems with Adult Daily Living Skills, parenting, insight/self-perception?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Is mental illness situational, short term or has the person recovered without relapse and Adult Daily Living Skills, parenting, insight/self-perception are adequate ?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Are there no observed symptoms of mental illness?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Was this a goal for the family while they were enrolled in FaDSS?

Yes No N/A

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Substance Abuse

Exit Matrix

Housing Transportation Mental Health **Substance Abuse** Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult
Is there a chronic history of drug or alcohol abuse with addiction?	Yes <input type="checkbox"/> IntakeMatrixExit.SubAbuse_Head_A	N/A
Is there drug/alcohol binging or intermittent use, without apparent addiction?	Yes <input type="checkbox"/> IntakeMatrixExit.SubAbuse_Head_B	N/A
Is there rare or experimental use of drugs or evidence of currently being clean or in a recovery program?	Yes <input type="checkbox"/> IntakeMatrixExit.SubAbuse_Head_C	N/A
Is there occasional use of legal substances; stops using if pregnant?	Yes <input type="checkbox"/> IntakeMatrixExit.SubAbuse_Head_D	N/A
There is no history or current use or abuse	Yes <input type="checkbox"/> IntakeMatrixExit.SubAbuse_Head_E	N/A
Was this a goal for the family while they were enrolled in FaDSS?	Yes <input type="checkbox"/> IntakeMatrixExit.Goal_SubAbuse	

Previous Next

Discard Changes **Save And Finalize**

Exit Matrix: Health

Exit Matrix

Housing Transportation Mental Health Substance Abuse **Health** Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult Household
Does the family have a member with an acute/chronic physical condition without diagnosis/treatment and no medical home?	Yes <input type="checkbox"/> IntakeMatrixExit.Health_Head_A	N/A
Does the family seek care only when very ill or uses emergency room for care and has no medical home?	Yes <input type="checkbox"/> IntakeMatrixExit.Health_Head_B	N/A
Does the family seek care inconsistently, including inconsistent treatment follow up, medical home may be unstable?	Yes <input type="checkbox"/> IntakeMatrixExit.Health_Head_C	N/A
Does the family seek care appropriately, follow treatment recommendations and have a medical home?	Yes <input type="checkbox"/> IntakeMatrixExit.Health_Head_D	N/A
Does the family seeks care appropriately and cure or control obtained and has medical home?	Yes <input type="checkbox"/> IntakeMatrixExit.Health_Head_E	N/A

Was this a goal for the family while they were enrolled in FaDSS?

Yes IntakeMatrixExit.Goal_Health

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Income

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health **Income** Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult Household
Is family income between 0% - 100% of poverty by family size?	Yes <input type="checkbox"/> IntakeMatrixExit.Income_Head_A	N/A
Is family income between 100% - 125% of poverty by family size?	Yes <input type="checkbox"/> IntakeMatrixExit.Income_Head_B	N/A
Is family income between 126% - 175% of poverty by family size?	Yes <input type="checkbox"/> IntakeMatrixExit.Income_Head_C	N/A
Is family income between 176% - 200% of poverty by family size?	Yes <input type="checkbox"/> IntakeMatrixExit.Income_Head_D	N/A
Is family income greater than 200% of poverty by family size?	Yes <input type="checkbox"/> IntakeMatrixExit.Income_Head_E	N/A

Was this a goal for the family while they were enrolled in FaDSS?

Yes IntakeMatrixExit.Goal_Income

Exit Matrix: Employment

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health Income **Employment** Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult
Are family members/heads of household unemployed?	Yes <input type="checkbox"/> <code>IntakeMatrixExit.Employment_Head_A</code>	N/A
Is family employment temporary, part-time or seasonal and pay is inadequate with no benefits?	Yes <input type="checkbox"/> <code>IntakeMatrixExit.Employment_Head_B</code>	N/A
Is family employed full time but pay is inadequate with few or no benefits?	Yes <input type="checkbox"/> <code>IntakeMatrixExit.Employment_Head_C</code>	N/A
Is the family employed for less than three months full time with adequate pay and benefits?	Yes <input type="checkbox"/> <code>IntakeMatrixExit.Employment_Head_D</code>	N/A
Has the family maintained employment for three months or more?	Yes <input type="checkbox"/> <code>IntakeMatrixExit.Employment_Head_E</code>	N/A

Was this a goal for the family while they were enrolled in FaDSS?

Yes `IntakeMatrixExit.Goal_Employment`

Exit Matrix: Nurturing and Attachment

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment **Nurturing and Attachment**

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult
Is the parent(s) hostile, unable to nurture, bond, or love child(ren) in the home and is their responsiveness very limited?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Is the parent(s) indifference, apathy, depression, or developmental disability impairing the ability for them to nurture the child(ren)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Does the parent(s) lacks information/modeling of love or are they afraid nurturing "spoils" the child(ren)? Marginal connectedness to the child(ren) is present.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Has the parent(s) bonded with the child, but loves and responds inconsistently? There are some reciprocal connections between parent and child.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Is the parent(s) loving, responsive, and praise child(ren) and are they able to regulate child(ren) well? There are reciprocal connections.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Was this a goal for the family while they were enrolled in FaDSS?

Yes No N/A

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Child Care

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language Support Network Relationship with Partner

IntakeMatrixExit.NotApplicable_ChildCare Family

	Exit: Head of Household	Exit: Other Adult
Does the family need childcare, but none is available/accessible and/or child is not eligible?	Yes <input type="checkbox"/> IntakeMatrixExit.ChildCare_Head_A	N/A
Is the family's childcare unreliable or unaffordable, or inadequate supervision is a problem for childcare that is available?	Yes <input type="checkbox"/> IntakeMatrixExit.ChildCare_Head_B	N/A
Is childcare available that is affordable and subsidized, but limited?	Yes <input type="checkbox"/> IntakeMatrixExit.ChildCare_Head_C	N/A
Is childcare available that is affordable and reliable and there is no need for subsidy but choices are limited?	Yes <input type="checkbox"/> IntakeMatrixExit.ChildCare_Head_D	N/A
Is the family able to select quality childcare of choice?	Yes <input type="checkbox"/> IntakeMatrixExit.ChildCare_Head_E	N/A

Was this a goal for the family while they were enrolled in FaDSS?

Yes IntakeMatrixExit.Goal_ChildCare

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Support of Child Development

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care **Support of Child Development** Adult Education Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult
Does the parent(s) have poor knowledge of child development including unrealistic expectations? Parent(s) may ignore or refuse information.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Does the parent(s) have little knowledge or interest of child development? Parent(s) may take a passive role.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Is the parent(s) open to learning about child development and provide age appropriate activities?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Does the parent(s) apply child development ideas, and is interested in child's development skills, interests and activities	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>
Is the parent(s) able to anticipate child development changes and use appropriate interactions and activities with child daily?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	<input type="checkbox"/>

Was this a goal for the family while they were enrolled in FaDSS?

Yes No N/A

Previous Next

Discard Changes Save And Finalize

Exit Matrix: Adult Education

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development **Adult Education** Language Support Network Relationship with Partner

	Exit: Head of Household	Exit: Other Adult
Does the head of household or other adult have less than 12th grade education?	Yes <input type="checkbox"/> No <input type="checkbox"/> <small>N/A</small>	<input type="checkbox"/> <small>N/A</small>
Has the head of household or other adult graduated with GED or High School diploma and are not currently attending a job training program, community college or college?	Yes <input type="checkbox"/> No <input type="checkbox"/> <small>N/A</small>	<input type="checkbox"/> <small>N/A</small>
Does the head of household or other adult attend college, community college or job/technical training program?	Yes <input type="checkbox"/> No <input type="checkbox"/> <small>N/A</small>	<input type="checkbox"/> <small>N/A</small>
Has the head of household or other adult graduated from college, community college or job training program?	Yes <input type="checkbox"/> No <input type="checkbox"/> <small>N/A</small>	<input type="checkbox"/> <small>N/A</small>
Has the head of household or other adult graduated from graduate school?	Yes <input type="checkbox"/> No <input type="checkbox"/> <small>N/A</small>	<input type="checkbox"/> <small>N/A</small>

Was this a goal for the family while they were enrolled in FaDSS?

Yes No N/A

Exit Matrix: Language

Exit Matrix ✕

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education **Language** Support Network Relationship with Partner

IntakeMatrixExit.NotApplicable_Language Family

	Exit: Head of Household	Exit: Other Adult
Does the head of household or other adult have low or no literacy in any language?	Yes <input type="checkbox"/> IntakeMatrixExit.Language_Head_A	N/A
Is the head of household or other adult literate in their primary language with some verbal English skills?	Yes <input type="checkbox"/> IntakeMatrixExit.Language_Head_B	N/A
Is the head of household or other adult taking ESL/ELL classes and verbal ESL/ELL established?	Yes <input type="checkbox"/> IntakeMatrixExit.Language_Head_C	N/A
Is the head of household or other adult taking ESL/ELL classes with written ESL/ELL established?	Yes <input type="checkbox"/> IntakeMatrixExit.Language_Head_D	N/A
Is the head of household or other adult fully bi-lingual?	Yes <input type="checkbox"/> IntakeMatrixExit.Language_Head_E	N/A

Was this a goal for the family while they were enrolled in FaDSS?

Yes IntakeMatrixExit.Goal_Language

Previous Next

Discard Changes **Save And Finalize**

Exit Matrix: Support Network

Exit Matrix ✕

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment

Child Care Support of Child Development Adult Education Language **Support Network** Relationship with Partner

	Exit: Head of Household	Exit: Other Adult Household
Does the family lack of necessary formal and informal resources (includes family friends and community)?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Are the family's formal and informal supports supportive, but lack ability/financial resources to help?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Does the family have some support from formal and informal sources that are able to help?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Does the family have strong support from formal and informal sources that are able to help?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>
Does the family have a healthy support network that is reciprocal?	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/>

Was this a goal for the family while they were enrolled in FaDSS?

Yes No N/A

Exit Matrix: Relationship with Partner

Exit Matrix

Housing Transportation Mental Health Substance Abuse Health Income Employment Nurturing and Attachment
Child Care Support of Child Development Adult Education Language Support Network **Relationship with Partner**

IntakeMatrixExit.NotApplicable_Relationship

	Exit: Head of Household	Exit: Other Adult
Is the head of household's partner hostile, violent, or physically abusive? Are there multiple partners or uncertain paternity?	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_A	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_A
Is the head of household separated with no contact? Is the partner unavailable to provide support?	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_B	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_B
Is the head of household's relationship with the partner conflicted, critical, or verbally abusive with frequent arguments and a reluctance to support in crisis?	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_C	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_C
Is the head of household's partner's support Inconsistent or conditional? They may be emotionally distant but available.	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_D	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_D
Is the head of household's partner very supportive, loving, and committed?	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_E	Yes <input type="checkbox"/> IntakeMatrixExit.Relationship_Head_E

Was this a goal for the family while they were enrolled in FaDSS?

Yes IntakeMatrixExit.Goal_Relationship

Previous

Discard Changes Save And Finalize

Edit Contact

The screenshot shows a web form titled "Edit Contact" with a close button (X) in the top right corner. The form contains several dropdown menus, each with a red callout box pointing to its corresponding field name. The fields and their values are as follows:

Field Label	Value	Field Name
Contact Type	Significant Contacts	ContactType
Contact Date	12/12/2018	ContactDate
Family functioning assessment completed?	Yes	FamFunction
Domestic violence screen conducted?	Yes	DVScreen
Domestic violence screen positive?	Yes	DVScreenPos
Referred for domestic violence supports?	Yes	DVScreenRefer
Child development screen conducted?	Yes	ChildDev
Child development screen positive?	Yes	ChildDevPos
Referred for child development supports?	Yes	ChildDevRefer

At the bottom of the form, there are two buttons: "Discard Changes" (a light gray button) and "Save Changes" (a blue button).

Edit Employment Record

The screenshot shows a web form titled "Edit Employment Record" with a close button (X) in the top right corner. The form contains the following fields and values:

Field Name	Value	Annotation
Record Date	Dec 2018	
Employed?	Yes	EmployedId
Monthly Wages	620	Wages
Scheduled Family Investment Program (FIP) Amount	426	FIPAmt
Actual Family Investment Program (FIP) Received	363	FIPAmtNoWage

At the bottom of the form, there are two buttons: "Discard Changes" and "Save Changes".

Activity Outcomes

Family Information at Enrollment	Family Members (4)	FIP History (1)	Self Sufficiency Matrix	Contacts (32)	Employment (11)	Activity Outcomes
Family Exit Information						
			How many family members had this issue?	How many family member(s) accessed the available treatment/support?	Did FaDSS help family member(s) access treatment/support?	
Adult family members with substantiated mental health issues			<input type="text" value="0"/>	<input type="text" value="IntakeActivity.AduMental"/>	<input type="text" value="IntakeActivity.AduMentalTx"/>	<input type="text" value="IntakeActivity.AduMentalRefer"/>
Children in the family with substantiated mental health issues			<input type="text" value="0"/>	<input type="text" value="IntakeActivity.ChildMental"/>	<input type="text" value="IntakeActivity.ChildMentalTx"/>	<input type="text" value="IntakeActivity.ChildMentalRefer"/>
Adult family members with substantiated substance use issues			<input type="text" value="0"/>	<input type="text" value="IntakeActivity.AduSubstance"/>	<input type="text" value="IntakeActivity.AduSubstanceTx"/>	<input type="text" value="IntakeActivity.AduSubstanceRefer"/>
Children in the family with substantiated substance abuse issues			<input type="text" value="0"/>	<input type="text" value="IntakeActivity.ChildSubstance"/>	<input type="text" value="IntakeActivity.ChildSubstanceTx"/>	<input type="text" value="IntakeActivity.ChildSubstanceRefer"/>
Adult family members with substantiated chronic and acute physical illness			<input type="text" value="0"/>	<input type="text" value="IntakeActivity.AduChronic"/>	<input type="text" value="IntakeActivity.AduChronicTx"/>	<input type="text" value="IntakeActivity.AduChronicRefer"/>
Children in the family with substantiated chronic and acute physical illness			<input type="text" value="0"/>	<input type="text" value="IntakeActivity.ChildChronic"/>	<input type="text" value="IntakeActivity.ChildChronicTx"/>	<input type="text" value="IntakeActivity.ChildChronicRefer"/>
Number of children (0-5) in the home enrolled in early childhood programs			<input type="text" value="0"/>	<input type="text" value="IntakeActivity.NumEarlyChildhood"/>		
Family experiencing domestic violence			<input type="text" value="Yes"/>	<input type="text" value="IntakeActivity.FamilyDv"/>		
If Yes, did the family receive help?			<input type="text" value="Yes"/>	<input type="text" value="IntakeActivity.FamilyDvHelp"/>		
If Yes, was the family referred?			<input type="text" value="Yes"/>	<input type="text" value="IntakeActivity.FamilyDvRefer"/>		
Family involved in their children's formal education			<input type="text" value="Yes"/>	<input type="text" value="IntakeActivity.FamilyInvChildEd"/>		
Family involved in FaDSS activities to increase work preparedness			<input type="text" value="Yes"/>	<input type="text" value="IntakeActivity.FamilyWorkPrepare"/>		
			<input type="checkbox"/>	<input type="text" value="IntakeActivity.WorkPrepMockInter"/>	<input type="text" value="IntakeActivity.WorkPrepJobFair"/>	<input type="text" value="IntakeActivity.WorkPrepApplications"/>
			<input type="checkbox"/>	<input type="text" value="IntakeActivity.WorkPrepJobLeads"/>	<input type="text" value="IntakeActivity.WorkPrepClothing"/>	<input type="text" value="IntakeActivity.WorkPrepOther"/>
				(work/interview)		

Family Exit Information

Family Information at Enrollment	Family Members (4)	FIP History (1)	Self Sufficiency Matrix	Contacts (32)	Employment (11)	Activity Outcomes																																	
Family Exit Information																																							
Number of Family Investment Program (FIP) eligible adults that have submitted application for SSI/SSDI:			-	0	IntakeFormExit.FipEligibleAdults																																		
Family employed and addressed lack of safe, reliable childcare:			Yes		IntakeFormExit.FipChildCareId																																		
Family has active child abuse case (since enrollment):			Yes		IntakeFormExit.FipChildAbuseCaseId																																		
Exit Date																																							
Exit Date			10/31/2019		IntakeFormExit.FipExitDateUtc																																		
Family Type (only enter if the family type has changed)																																							
Family Type			Two Parent		IntakeFormExit.ExitFamilyTypeId																																		
Length of Transition in FaDSS after FIP Ends:																																							
Length of Transition			6 Months		IntakeFormExit.FipTransitionId																																		
Reason for leaving Family Investment Program (FIP):																																							
Reason for leaving			Family chose LBP - (complete additional infor		IntakeFormExit.FipLeaveReasonId																																		
Explain:			Did not turn in paystubs to PJ		IntakeFormExit.FipLeaveReasonIdExplain																																		
<table border="1"> <thead> <tr> <th></th> <th>Exit: Head of Household</th> <th>Exit: Other Adult</th> </tr> </thead> <tbody> <tr> <td>Education:</td> <td>Some college</td> <td>diploma / HiSET</td> </tr> <tr> <td>Employment:</td> <td>Full-time</td> <td></td> </tr> <tr> <td>Weekly Hours:</td> <td>0</td> <td>40</td> </tr> <tr> <td>Hourly Wage:</td> <td>\$ 0</td> <td></td> </tr> <tr> <td>Monthly Wages:</td> <td>0</td> <td></td> </tr> <tr> <td>Family Investment Program (FIP):</td> <td>0</td> <td></td> </tr> <tr> <td>Child Support:</td> <td>0</td> <td></td> </tr> <tr> <td>SSI/SSDI:</td> <td>0</td> <td></td> </tr> <tr> <td>Other Income:</td> <td>0</td> <td></td> </tr> <tr> <td>Total Monthly Income:</td> <td colspan="2">\$ 1200</td> </tr> </tbody> </table>								Exit: Head of Household	Exit: Other Adult	Education:	Some college	diploma / HiSET	Employment:	Full-time		Weekly Hours:	0	40	Hourly Wage:	\$ 0		Monthly Wages:	0		Family Investment Program (FIP):	0		Child Support:	0		SSI/SSDI:	0		Other Income:	0		Total Monthly Income:	\$ 1200	
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Child Support:	0																																						
SSI/SSDI:	0																																						
Other Income:	0																																						
Total Monthly Income:	\$ 1200																																						

Edit Employment Record

Edit Employment Record

Record Date Jun 2019

Employed? Yes ← EmployedId

Monthly Wages ← Wages

Scheduled Family Investment Program (FIP) Amount ← FIPAmt

Actual Family Investment Program (FIP) Received ← FIPAmtNoWage

Edit Grantee: General Information

Edit Grantee: Community Action Agency of Siouxland

General Information Staffing Assessment Information Annual Performance Report Investment Amount Investment Report

Legal Name	<input type="text"/>	◀ NameLegal
Executive Director	<input type="text"/>	◀ ExecDirector
Fiscal Contact	<input type="text"/>	◀ FiscalContact
Address 1	<input type="text"/>	◀ Address1
Address 2	<input type="text"/>	◀ Address2
City	<input type="text"/>	◀ AddressCity
State	<input type="text"/>	◀ AddressStateId
ZIP Code	<input type="text"/>	◀ AddressZip
Phone	<input type="text" value="(ddd) ddd-dddd"/>	◀ Phone
Project Code	<input type="text"/>	

Edit Grantee: Create Grantee

Create Grantee

Legal Name	<input type="text"/>	<input type="button" value="NameLegal"/>
Executive Director	<input type="text"/>	<input type="button" value="ExecDirector"/>
Fiscal Contact	<input type="text"/>	<input type="button" value="FiscalContact"/>
Address 1	<input type="text"/>	<input type="button" value="Address1"/>
Address 2	<input type="text"/>	<input type="button" value="Address2"/>
City	<input type="text"/>	<input type="button" value="AddressCity"/>
State	<input type="text" value="Iowa"/>	<input type="button" value="AddressStateId"/>
ZIP Code	<input type="text"/>	<input type="button" value="AddressZip"/>
Phone	<input type="text" value="(ddd) ddd-dddd"/>	<input type="button" value="Phone"/>
Project Code	<input type="text"/>	

Edit Grantee: Edit Narrative>Info

Edit Narrative

Info Narratives Ratings

Narrative Date	<input type="text" value="mm/dd/yyyy"/>	◀ DateUtc
Report Contact	<input type="text"/>	◀ ReportContact
Total Program Costs	\$ 0.00	◀ TotalProgramCosts
FaDSS Contract	\$ 0.00	◀ FaDSSContract
Local Funds	\$ 0.00	◀ LocalFunds
Flex Funds	\$ 0.00	◀ FlexFunds
In Kind	\$ 0.00	◀ InKind
Service Area	<input type="text"/>	◀ ServiceArea
Capacity	<input type="text"/>	◀ Capacity

Discard Changes Save Changes

Edit Grantee: Edit Narrative > Narratives

Edit Narrative ✕

[Info](#) [Narratives](#) [Ratings](#)

Success Goals	<input type="text"/>	◀ SuccessGoals
Partner Agencies	<input type="text"/>	◀ PartnerAgencies
Success Families	<input type="text"/>	◀ SuccessFamilies
Progress Summary	<input type="text"/>	◀ ProgressSummary
Third Party	<input type="text"/>	◀ ThirdParty
Optional	<input type="text"/>	◀ Optional

Edit Grantee: Edit Narrative > Ratings

Edit Narrative

Info Narratives Ratings

Promise Jobs	<input type="text"/>	RatingPromiseJobs	<input type="text"/>	RatingDhsIM
DHS Services	<input type="text"/>	RatingDhsServices	<input type="text"/>	RatingHOPES
Work Essentials	<input type="text"/>	RatingWorkEssentials	<input type="text"/>	RatingSocialSecurity
Voc Rehab	<input type="text"/>	RatingVocRehab	<input type="text"/>	RatingHsEHS
PAT	<input type="text"/>	RatingPAT	<input type="text"/>	RatingECI
Additional Agencies	<input type="text"/>	Agencies.0__Age	Agencies.0__RatingId	

Add Agency

Discard Changes Save Changes

Edit Grantee: Assessment Information

Add Assessment ✕

Assessment Type AssessmentType

Assessment AssessmentId

Other Description OtherDescription

Edit Grantee: Edit Investment Record

Edit Investment Record ✕

Investment Amount Amount

Edit Grantee: Edit Staff

Edit Staff [Close]

Grantee Assigned Community Action Agency of Siouxland

First Name NameFirst

Last Name NameLast

Title Title

Email [Redacted] [Lock]

Work Phone (ddd) ddd-dddd PhoneNumber

Address 1 Address1

Address 2 Address2

City / State / ZIP AddressCity AddressState AddressZIP

Start Date mm/dd/yyyy StartDateUtc

Certification Date mm/dd/yyyy CertificationDateUtc

Separation Date mm/dd/yyyy SeparationDateUtc

FaDSS % FTE FaDssPercentFte

Caseload Caseload

Assigned Service Area AssignedServiceArea

Education level EducationLevelId

APPENDIX B: LOOKUP TABLES

Lookup Table Contents: TL_Carrier

Value	String
1	AllTel
2	AT&T
3	Boost Mobile
4	Cricket
5	Sprint
6	T-Mobile
7	US Cellular
8	Verizon
9	Virgin Mobile
10	Viaero
11	Union

Lookup Table Contents: TL_Gender

Value	String
1	Male
2	Female
3	Transgender

Lookup Table Contents: TL_YesNoReceivingSupport

Value	String
1	Yes
2	No
3	Receiving Support

Lookup Table Contents: TL_State

Value	String
1	Alabama
2	Alaska
3	Arizona
4	Arkansas
5	California
6	Colorado

- 7 Connecticut
- 8 Delaware
- 9 District of Columbia
- 10 Florida
- 11 Georgia
- 12 Hawaii
- 13 Idaho
- 14 Illinois
- 15 Indiana
- 16 Iowa
- 17 Kansas
- 18 Kentucky
- 19 Louisiana
- 20 Maine
- 21 Maryland
- 22 Massachusetts
- 23 Michigan
- 24 Minnesota
- 25 Mississippi
- 26 Missouri
- 27 Montana
- 28 Nebraska
- 29 Nevada
- 30 New Hampshire
- 31 New Jersey
- 32 New Mexico
- 33 New York
- 34 North Carolina
- 35 North Dakota
- 36 Ohio
- 37 Oklahoma
- 38 Oregon
- 39 Pennsylvania
- 40 Rhode Island
- 41 South Carolina
- 42 South Dakota
- 43 Tennessee
- 44 Texas
- 45 Utah
- 46 Vermont

- 47 Virginia
- 48 Washington
- 49 West Virginia
- 50 Wisconsin
- 51 Wyoming
- 52 Puerto Rico

Lookup Table Contents: TL_YesNoSelfReportNa

Value	String
1	Yes
2	No
3	Self-Reported
4	No - Not Applicable
5	No - Declined

Lookup Table Contents: TL_Assessment

Value	String
1	Ecomap
2	Genogram
3	Measure of Family Wellbeing
4	NC Family Assessment Scale
5	Timeline
6	Other
7	Relationship Asset Tool
8	Other
9	Ages and Stages Questionnaire (ASQ-3)
10	Ages and Stages Questionnaire: Social Emotional (ASQ:SE-2)
11	Other

Lookup Table Contents: TL_AssessmentType

Value	String
1	Family Functioning
2	Domestic Violence
3	Child Development

Lookup Table Contents: TL_Scale5

Value	String
1	1
2	2
3	3
4	4
5	5

Lookup Table Contents: TL_YesNo

Value	String
1	Yes
2	No

Lookup Table Contents: TL_ContactType

Value	String
1	Home visit
2	Quality visit
3	Significant Contacts
4	No Monthly Contact

Lookup Table Contents: TL_ExitSituation

Value	String
1	Moved out of service area/ transfer
2	Began receiving other assistance (SSI/SSDI Child Support)
3	Unable to locate family
4	Voluntary withdrawal
5	Other - (complete additional information)
6	Family exit criteria were met

Lookup Table Contents: TL_LeaveReason

Value	String
1	Increased income
2	Moved out of state
3	Children no longer in the home
4	Family chose LBP - (complete additional information)

- 5 Family denied Hardship - (complete additional information)
- 6 Family reached lifetime limit
- 7 Still receiving FIP
- 8 Voluntarily Left Family Investment Program (FIP) - (complete additional information)
- 9 Other - (complete additional information)

Lookup Table Contents: TL_Transition

Value	String
1	No Transition
2	1 Month
3	2 Months
4	3 Months
5	4 Months
6	5 Months
7	6 Months
8	Greater than 6 Months

Lookup Table Contents: TL_YesNoNa

Value	String
1	Yes
2	No
3	N/A

Lookup Table Contents: TL_EducationStaff

Value	String
1	MA
2	BA
3	BS
4	AA
5	Other

Lookup Table Contents: TL_Language

Value	String
1	English
2	Spanish

- 3 Chinese
- 4 French
- 5 Vietnamese
- 6 German
- 7 Korean
- 8 Other

Lookup Table Contents: TL_Race

Value String

- 1 Native American or Alaskan Native
- 2 Native Hawaiian/Pacific Islander
- 3 African American
- 4 Multi Racial
- 5 Hispanic or Latino
- 6 Asian
- 7 White
- 8 Other
- 9 Not Reported

Lookup Table Contents: TL_Relationship

Value String

- 1 Head of Household
- 2 Other Adult
- 3 Child
- 4 Other Household Member

Lookup Table Contents: TL_Education

Value String

- 1 Less than high school diploma / HiSET
- 2 High School Diploma / HiSET
- 3 Some college
- 4 Trade/Vocational Training
- 5 Two year college degree (Associates)
- 6 Four year college degree (Bachelors)
- 7 Masters degree or above

Lookup Table Contents: TL_Employment

Value	String
1	Not employed
2	Part-time
3	Full-time

Lookup Table Contents: TL_County

Value	String
1	Adair County
2	Adams County
3	Allamakee County
4	Appanoose County
5	Audubon County
6	Benton County
7	Black Hawk County
8	Boone County
9	Bremer County
10	Buchanan County
11	Buena Vista County
12	Butler County
13	Calhoun County
14	Carroll County
15	Cass County
16	Cedar County
17	Cerro Gordo County
18	Cherokee County
19	Chickasaw County
20	Clarke County
21	Clay County
22	Clayton County
23	Clinton County
24	Crawford County
25	Dallas County
26	Davis County
27	Decatur County
28	Delaware County
29	Des Moines County
30	Dickinson County
31	Dubuque County

- 32 Emmet County
- 33 Fayette County
- 34 Floyd County
- 35 Franklin County
- 36 Fremont County
- 37 Greene County
- 38 Grundy County
- 39 Guthrie County
- 40 Hamilton County
- 41 Hancock County
- 42 Hardin County
- 43 Harrison County
- 44 Henry County
- 45 Howard County
- 46 Humboldt County
- 47 Ida County
- 48 Iowa County
- 49 Jackson County
- 50 Jasper County
- 51 Jefferson County
- 52 Johnson County
- 53 Jones County
- 54 Keokuk County
- 55 Kossuth County
- 56 Lee County
- 57 Linn County
- 58 Louisa County
- 59 Lucas County
- 60 Lyon County
- 61 Madison County
- 62 Mahaska County
- 63 Marion County
- 64 Marshall County
- 65 Mills County
- 66 Mitchell County
- 67 Monona County
- 68 Monroe County
- 69 Montgomery County
- 70 Muscatine County
- 71 O'Brien County

- 72 Osceola County
- 73 Page County
- 74 Palo Alto County
- 75 Plymouth County
- 76 Pocahontas County
- 77 Polk County
- 78 Pottawattamie County
- 79 Poweshiek County
- 80 Ringgold County
- 81 Sac County
- 82 Scott County
- 83 Shelby County
- 84 Sioux County
- 85 Story County
- 86 Tama County
- 87 Taylor County
- 88 Union County
- 89 Van Buren County
- 90 Wapello County
- 91 Warren County
- 92 Washington County
- 93 Wayne County
- 94 Webster County
- 95 Winnebago County
- 96 Winneshiek County
- 97 Woodbury County
- 98 Worth County
- 99 Wright County

Lookup Table Contents: TL_EnrollmentStatus

Value	String
1	Enrolled
2	Re-enrolled
3	Non-enrolled

Lookup Table Contents: TL_FamilyType

Value	String
1	Single Parent

- 2 Two Parent
- 3 Minor Parent

Lookup Table Contents: TL_ChildDevScreen

Value	String
1	Yes
2	No
3	No - Declined
4	No - Not Applicable
5	Obtained

Lookup Table Contents: TL_ReferralSource

Value	String
1	PJ Worker
2	Other PJ Activities
3	Self Referrals
4	Referrals from in the Agency
5	Other Outside Agencies

Lookup Table Contents: TL_ContactMethod

Value	String
1	Email
2	Home
3	Mail
4	Office
5	Fax

Lookup Table Contents: TL_FiscalYearIowa

Value	Start of year in UTC	String
1	Jul 1 1999 4:00AM	SFY2000
2	Jul 1 2000 4:00AM	SFY2001
3	Jul 1 2001 4:00AM	SFY2002
4	Jul 1 2002 4:00AM	SFY2003
5	Jul 1 2003 4:00AM	SFY2004
6	Jul 1 2004 4:00AM	SFY2005

7	Jul	1	2005	4:00AM	SFY2006
8	Jul	1	2006	4:00AM	SFY2007
9	Jul	1	2007	4:00AM	SFY2008
10	Jul	1	2008	4:00AM	SFY2009
11	Jul	1	2009	4:00AM	SFY2010
12	Jul	1	2010	4:00AM	SFY2011
13	Jul	1	2011	4:00AM	SFY2012
14	Jul	1	2012	4:00AM	SFY2013
15	Jul	1	2013	4:00AM	SFY2014
16	Jul	1	2014	4:00AM	SFY2015
17	Jul	1	2015	4:00AM	SFY2016
18	Jul	1	2016	4:00AM	SFY2017
19	Jul	1	2017	4:00AM	SFY2018
20	Jul	1	2018	4:00AM	SFY2019
21	Jul	1	2019	4:00AM	SFY2020
22	Jul	1	2020	4:00AM	SFY2021
23	Jul	1	2021	4:00AM	SFY2022
24	Jul	1	2022	4:00AM	SFY2023
25	Jul	1	2023	4:00AM	SFY2024
26	Jul	1	2024	4:00AM	SFY2025
27	Jul	1	2025	4:00AM	SFY2026
28	Jul	1	2026	4:00AM	SFY2027
29	Jul	1	2027	4:00AM	SFY2028
30	Jul	1	2028	4:00AM	SFY2029
31	Jul	1	2029	4:00AM	SFY2030
32	Jul	1	2030	4:00AM	SFY2031
33	Jul	1	2031	4:00AM	SFY2032
34	Jul	1	2032	4:00AM	SFY2033
35	Jul	1	2033	4:00AM	SFY2034
36	Jul	1	2034	4:00AM	SFY2035
37	Jul	1	2035	4:00AM	SFY2036
38	Jul	1	2036	4:00AM	SFY2037
39	Jul	1	2037	4:00AM	SFY2038
40	Jul	1	2038	4:00AM	SFY2039
41	Jul	1	2039	4:00AM	SFY2040
42	Jul	1	2040	4:00AM	SFY2041
43	Jul	1	2041	4:00AM	SFY2042
44	Jul	1	2042	4:00AM	SFY2043
45	Jul	1	2043	4:00AM	SFY2044
46	Jul	1	2044	4:00AM	SFY2045

47	Jul 1 2045 4:00AM	SFY2046
48	Jul 1 2046 4:00AM	SFY2047
49	Jul 1 2047 4:00AM	SFY2048
50	Jul 1 2048 4:00AM	SFY2049

Lookup Table Contents: TL_InboxType

Value String

- 1 Account Notification
- 2 New Website Feature
- 3 Custom Notification

Lookup Table Contents: Grantee

Value String

- 1 Youth and Shelter Services Inc.
- 2 Mid - Iowa Community Action Inc.
- 3 West Central Community Action
- 4 North Iowa Community Action
- 5 Southern Iowa Economic Development Association
- 6 Mid - Sioux Opportunity Inc.
- 7 Northeast Iowa Community Action Corporation
- 8 Upper Des Moines Opportunity Inc.
- 9 Lutheran Services In Iowa
- 10 Polk County Community Family and Youth Services
- 11 Community Action of Southeast Iowa
- 12 Community Action Agency of Siouxland
- 13 Operation Threshold Inc.
- 14 MATURA Action Corporation
- 15 Four Oaks Family and Children's Services
- 16 South Central Iowa Community Action Inc.
- 17 Community Action of Eastern Iowa