2012 Housing Inventory Count and Point-in-Time Count of Homeless Persons Data Collection Guidance

US Department of Housing and Urban Development
February 13, 2012

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Revision History

Date	Version	Description
10/20/2011	1.0	First release
12/7/2011	1.1	Revised to include guidance on identifying transitional housing beds as either "facility-based" (i.e., where a client must move upon program exit) or "voucher" (i.e., 'transition-in-place' or where a client may stay in their housing upon program exit); coordinating with program staff; allocating beds/vouchers across CoCs; and to add Frequently Asked Questions (FAQs).
1/3/2012	1.2	Deleted instructions to classify VA Domiciliary Care for Homeless Veterans programs as Transitional Housing; programs should be classified as Emergency Shelter. (pp. 2 and 16)
2/13/2012	1.3	Revised instructions to indicate that VA Healthcare for Homeless Veterans (HCHV) VA Community Contract Residential Treatment Programs (HCHV/RT) beds should be classified as Emergency Shelter. (pp. 2 and 16)

Purpose of this Guidance

This document provides information to Continuums of Care (CoCs) on what information to collect in order to successfully complete their upcoming Housing Inventory Count (HIC) and Point-in-Time (PIT) count. As CoCs begin to organize and plan these activities, staff should review this guidance and use it as a reference to ensure that they are capturing all of the required information.

All CoCs must conduct a HIC and PIT count of sheltered homeless persons during the last ten days in January 2012. CoCs may choose to also conduct a PIT count of unsheltered persons; however, this is not required for 2012. CoCs will submit their HIC and PIT data via HUD's Homelessness Data Exchange (HDX) in spring 2012. Further guidance on the submission process will be released at a later date.

If you have any questions regarding the HIC or the PIT that are not covered in this guidance document, please visit the Virtual Help Desk on HUD's Homelessness Resource Exchange (HRE) (http://www.hudhre.info/helpdesk). You may refer to the Frequently Asked Questions (FAQs) to see if your question has been previously addressed, and if it has not, you may submit a question. To submit a question, select "HDX" for the Program/System under "Your Details," then under "Question Details," choose either HIC or PIT as the topic and subtopic.

Changes to HIC and PIT Requirements in 2012[1]

- Beginning in 2012, the HIC will include categories for beds and units for households with at least one adult and one child, households without children, and households with only children. The addition of the category of households with only children is new in 2012.
- Beginning in 2012, all CoCs will be required to conduct an annual sheltered PIT count. The count must include population and subpopulation data. A count of unsheltered homeless persons is not required in 2012. HUD will continue to require an unsheltered count biennially – the next required count year being 2013.
- Beginning in 2012, CoCs will have to classify beds in transitional housing programs as either facility-based (beds that clients must move out of at the time of program exit) or voucher (beds in units that are subsidized during program enrollment that clients may remain in at the time of program exit).
- Beginning in 2012, VA Healthcare for Homeless Veterans (HCHV) VA Community Contract Residential Treatment Programs (HCHV/RT) will be classified as Emergency Shelter.

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[1] Note that previous versions of this guidance listed a change that specified that VA Domiciliary Care for Homeless Veterans programs should be classified as Transitional Housing; this change has been rolled back and these programs will be classified as Emergency Shelter in 2012, as they were in 2011. See Appendix A for a summary of program types.

Remember, the HIC and the PIT are integrally related to each other. The HIC and the PIT should be conducted on the **same** night during the last 10 days in January. Thus, the total number of persons counted on the HIC in emergency shelter (ES), transitional housing (TH) and Safe Havens (SH) combined (i.e., *sheltered homeless persons*) should equal the total number of sheltered homeless persons included in the PIT count (ES + TH + SH). CoCs will be required to explain any discrepancies if the counts do not match.

Housing Inventory Count Guidance

The HIC is a snapshot of a CoC's housing inventory on a single night during the last ten days in January. It should reflect the number of beds and units available on the night designated for the count that are **dedicated to serve persons who are homeless**. Beds and units included on the HIC are considered part of the CoC homeless system. This section provides guidance for collecting data required for the 2012 HIC.

Types of Homeless Programs to Include in the HIC

For the 2012 HIC, CoCs will collect information about the beds and units in each CoC's homeless system, categorized by the five program types described below. CoCs are required to include in the HIC **all** programs in the CoC that are categorized as one of these program types, not just those contributing client-level data in the local Homeless Management Information System (HMIS) or receiving HUD funding. This includes programs funded by the VA, faith-based organizations, and other public and private funding sources.

The five program types included in the HIC are:

- Emergency Shelter
- Transitional Housing
- HPRP (Rapid Re-housing)
- Safe Haven
- Permanent Supportive Housing

Programs should be assigned a Program Type when they are entered into HMIS. See Appendix A for details of how to categorize programs.

> According to HUD's HMIS Data Standards, updated March 2010, all homeless assistance and homelessness prevention programs that are part of a CoC's homeless system must have Program Descriptor data recorded in the CoC's HMIS. Program Descriptor data recorded in HMIS (e.g., bed and unit inventory data) should be used to complete the HIC and must match HIC data reported by the CoC.

Using HMIS Data for the HIC

Where possible, CoCs are encouraged to use HMIS data to generate the HIC; however, there are elements of the HIC that cannot be derived from

HMIS data based strictly on the HMIS Data Standards[2]. These include identifying whether or not a program receives McKinney-Vento funding and identifying the number of beds designated for households with only children.

CoC leads should coordinate with program staff to review, verify, and update, if necessary, information being collected about their programs for the HIC.

Completing the Bed Inventory

The following sections identify the data elements needed to complete the HIC, along with a brief description. If relevant, the data element number from the March 2010 HMIS Data Standards is included in brackets, e.g. Program Name [2.4]. Note that while not all of these data elements apply to every program or are entered in the HIC for each program, they are all needed in order to generate an accurate HIC.

Organization and Program Information

- *Organization Name [2.2]:* Identify the name of the organization providing shelter or housing to homeless persons.
- *Program Name [2.4]:* Identify the name of the specific program. Only programs that have beds available and/or under development on the night of the count should be included on the HIC. Note that for programs that are funded by VA – even partially – the program name MUST begin with the appropriate prefix (see Appendix A).
- *Program Type [2.8]:* Identify one of the five relevant program types described above (e.g., Emergency Shelter, Transitional Housing).
- *Target Population A [2.10]* (optional): Identify the target population served by each program. A population is considered a "target population" if the program is designed to serve that population and at least three-fourths (75%) of the clients served by the program fit the target group descriptor. Note that a single program may not have more than one Target Population A. Programs that do not target specific populations or that have opted not to track Target Population A may leave this data field blank. The table below details Target Population A categories and their descriptions.

Abbreviation	Description
SM	Single Males
SF	Single Females
SMF	Single Males and Females
CO	Couples Only, No Children

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[2] Homeless Management Information System (HMIS) Data Standards, Revised Notice. US Department of Housing and Urban Development. March 2010.
http://www.hudhre.info/documents/FinalHMISDataStandards_March2010.pdf

HC	Households with Children
SMHC	Single Males and Households with Children
SFHC	Single Females and Households with Children
SMF+HC	Single Males and Females plus Households with Children
YM	Unaccompanied Males under 18 years old
YF	Unaccompanied Females under 18 years old
YMF	Unaccompanied Males and Females under 18 years old

- *Target Population B [2.11]:* Identify the subpopulation served by each program. A population is considered a "target population" if the program is designed to serve that population and at least three-fourths (75%) of the clients served by the program fit the target group descriptor. Note that a single program may not have more than one Target Population B. Programs that do not target specific subpopulations may leave the Target Population B column blank.

Abbreviation	Description
DV	Domestic violence victims
VET	Veterans
HIV	Persons with HIV/AIDS

- *Geocode [2.6C]:* Identify the geocode associated with the geographic location of the principal program service site. Geocodes must be updated annually. Scattered-site housing programs should record the Geocode where the majority of beds are located or where most beds are located as of the inventory update. A list of geocodes can be found at: http://www.hudhre.info/documents/FY2011_PPRNAmts.pdf.
- *HUD McKinney-Vento Funded?:* Identify whether or not the program receives any HUD McKinney-Vento funding. HUD McKinney-Vento programs include: Emergency Shelter Grant (ESG), Shelter plus Care (S+C), Section 8 Moderate Rehabilitation Single-Room Occupancy (SRO), Supportive Housing Program (SHP). HPRP programs are not funded under the McKinney-Vento Act. Note that there was no data element defined for this in the March 2010 HMIS Data Standards; relevant information may need to be tracked outside of HMIS.

Bed and Unit Inventory Information
- *Inventory Type:* Determine if the bed inventory is current (C), new (N), or under development (U).

    o Current inventory (C): Beds or vouchers that were available for occupancy on or before January 31, 2011.

- New inventory (N): Beds or vouchers that became available for occupancy between February 1, 2011 and January 31, 2012.
- Under development (U): Beds that were fully funded but not available for occupancy as of January 31, 2012.

Inventory designated as 'New' should represent an increase in capacity for the program from the previous year. In order to appropriately designate inventory type, it is necessary to first identify the number of beds available at the time of the HIC in 2012, as well as the number of beds available at the time of the HIC in 2011.

- If the number of beds in 2012 is less than or equal to the number of beds in 2011, all available beds should be categorized as 'Current' for 2012.
- If the number of beds in 2012 is greater than the number of beds available in 2011, the number available in 2011 should be categorized as 'Current' and the increase in beds – the difference between the 2011 number and the 2012 number – should be categorized as 'New' for 2012.

If using HMIS data to generate the HIC, inventory that is fully funded but not yet available – i.e., inventory that is under development according to the HIC definition – may be entered into HMIS with an Inventory Start Date [2.9G] in the future that reflects the anticipated availability date; accordingly, inventory that is not yet fully funded either should not be entered into HMIS or could be entered without an Inventory Start Date in order to enable differentiation.

- *Household Type [2.9A]:* Identify the number of beds and units available for each of the following household types:

  - Households without children: Beds and units are intended for households with adults only. This includes households composed of unaccompanied adults and multiple adults.
  - Households with at least one adult and one child: Beds and units intended for households with (at least) one adult and one child.
  - Households with only children: Beds and units intended for households composed exclusively of persons under age 18, including unaccompanied children, adolescent parents and their children, adolescent siblings, or other household configurations composed only of children.

- *Bed Type [2.9B] (Emergency Shelter and Transitional Housing only):* The Bed Type describes the type of program beds based on whether beds are: located in a residential homeless assistance program facility (including cots or mats); provided through a voucher with a hotel

or motel; other types of beds. Although the HMIS Data Standards specify that this data is to be collected for all program types, reporting it on the HIC was previously limited to emergency shelter programs. For 2012, this data will also be reported for transitional housing programs in order to distinguish between beds (and units) that a client must vacate when they exit the program and beds (and units) that a client may continue to occupy after program exit (e.g., conventional rental housing leased by the client). The latter type is often referred to as "transition-in-place." Identify the bed type as follows:

- o *Facility-based:* Beds (including cots or mats) are located in a residential homeless assistance facility dedicated for use by persons who are homeless. For transitional housing programs, the distinguishing characteristic of these beds is that clients must vacate them when they exit the program. Beds may be located in a single facility or multiple facilities, including beds in units that are owned or leased by the program and which a client must leave when they exit the program.

- o *Voucher:* For emergency shelters, beds are located in a hotel or motel and made available by the homeless assistance program through vouchers or other forms of payment. For transitional housing, the voucher bed type should be selected for beds where the program provides a time-limited subsidy in conventional rental housing that clients may continue to occupy after they exit the program (i.e. transition in place or rolling stock transitional housing).

- o *Other:* Beds are located in a church or other facility not dedicated for use by persons who are homeless. For transitional housing programs, this category is not applicable.

- *Bed and Unit Availability [2.9C]:* Identify the number of beds and units that are available on a planned basis year-round, seasonally (during a defined period of high demand), or on an ad hoc or temporary basis as demand indicates.
  - o Year-Round Beds/Units: Year-round beds and units are available on a year-round basis. For all of the relevant programs types other than HPRP, CoCs should record all of the dedicated homeless beds and units available for homeless persons on the date of the annual count (whether new, current, or under development), regardless of whether the program is a Contributory HMIS Program (see definition in Appendix B) or receives HUD funding, and regardless of whether or not the bed was occupied.
  - o Seasonal Beds *(Emergency Shelters Only)*: Seasonal beds are not available during the whole year, but instead are available on a planned basis, with set start and end dates, during an anticipated period of higher demand.

- o Overflow Beds *(Emergency Shelters Only)*: Overflow beds are available on an ad hoc or temporary basis during the year in response to demand that exceeds planned (year round or seasonal) bed capacity. For the HIC, identify only the total number of overflow and voucher beds that were occupied on the date of the annual bed count.

- *Bed Inventory [2.9D]:* The total number of beds available for occupancy on the night of the count.

  For HPRP Homeless Assistance (Rapid Re-housing) programs: the number of beds and units will equal the actual number of persons who meet the following criteria:

  - o HPRP participant's Housing Status at program entry was 'Literally homeless';
  - o HPRP participant is receiving HPRP assistance (financial assistance and/or housing relocation & stabilization services); and
  - o HPRP participant is in conventional housing (apartment, house, etc.) on the night of the count.

  CoCs will typically need to verify HPRP participants' housing arrangements on the night of the count with agencies operating HPRP rapid re-housing programs.

- *Chronically Homeless Beds [2.9E] (Permanent Supportive Housing Only):* Identify the number of permanent supportive housing beds that are readily available **and** targeted to house chronically homeless persons. The number of beds for chronically homeless persons is a subset of the total permanent supportive housing bed inventory for a given program and must be equal to or less than the total bed inventory. (see Appendix B for definitions)
- *Unit Inventory [2.9F]:* Identify the total number of units available for occupancy as of the inventory start date. Programs that do not have a fixed number of units (e.g., a congregate shelter program) may record the bed inventory, the number of residential facilities operated by the program, or the number of rooms used for overnight accommodation as the unit integer. (See HPRP instructions under Bed Inventory above.)
- *Inventory Start Date [2.9G]:* The inventory start date is the date when the bed and unit inventory information first applies. This may represent the date when a change in household type, bed type, availability, bed inventory or unit inventory occurs for a given program. For seasonal beds, this reflects the start date of the seasonal bed inventory. Although this date is not submitted as part of the HIC for other (non-seasonal) bed types, it is needed in order to determine how many beds and units are available at the time of the HIC, as well as the Inventory Type.
- *Inventory End Date [2.9H]:* The inventory end date is the date when the bed and unit inventory information as recorded is no longer applicable (i.e. the day after the last night

when the record is applicable). This may be due to a change in household type, bed type, availability, bed inventory or unit inventory. For seasonal beds, this should reflect the projected end date for the seasonal bed inventory. Although this date is not submitted as part of the HIC for other (non-seasonal) bed types, it is needed in order to determine how many beds and units are available at the time of the HIC, as well as the Inventory Type.

Note that in 2011, the HIC included a category for inventory designated for 'Households with children' and did not differentiate between households with at least one adult and one child and households with only children. In addition, the HMIS Data Standards do not, as of the date of this guidance, include a response category for households with only children for data element 2.9A. Information about the number of beds and units that are designated for households with only children should be obtained from an alternate source. For programs that have inventory designated for use by households with only children, care should be taken to ensure that this inventory is included on the HIC only in the category of households with only children, and not in the category for households with at least one adult and one child.

For programs that serve multiple household types but where a precise number of beds are not designated exclusively for a particular type of household, the total number of beds may be distributed among the household types served by the program using one of the following methodologies:

o Divide the beds based on how the bed(s) were used on the night of the HIC. If the facility is not at full capacity on the night of the count, then extrapolate the distribution based on the pro-rated distribution of those who are served on the night of the count.

o Divide the beds based on average utilization. For example, a program has 100 beds that could be used by either households without children or households with at least one adult and one child. If one-half of the beds are used by persons in households without children on an average night and the other half are used by persons in households with at least one adult and one child, then the program enters two separate Bed and Inventory records, one for the 50 beds for households without children and for the 50 beds for households with at least one adult and one child.

o Programs with a fixed number of units but no fixed number of beds can use a multiplier factor to estimate the number of beds (e.g., a program with 30 family units and an average family size of 3 = 90 beds for households with at least one adult and one child).

- *HMIS Participating Beds [2.9I]:* Identify the number of beds participating in HMIS at the time of the HIC (based on HMIS Participation Start Date and HMIS Participation End Date)

by household type. The number of HMIS participating beds must be identified for year-round, seasonal, and overflow beds. A bed is considered "an HMIS participating bed" if the program makes a reasonable effort to record all universal data elements on all clients served in that bed and discloses that information through agreed upon means to the HMIS Lead Agency at least once annually. For programs that serve a mixed population without a fixed number of beds per household type, record participating beds according to instructions provided under Household Type instructions above.

- *HMIS Participation Start Date [2.9J]:* Identify the date when the HMIS participating bed information first applies (i.e., the date when a change in the number of HMIS participating beds occurs for a program's Bed and Unit inventory record). The HMIS Participation Start Date is the earliest program entry date that could be associated with a client using the bed or unit. The date is not submitted as part of the HIC, but it is needed to determine how many beds were participating in HMIS at the time of the HIC.

- *HMIS Participation End Date [2.9K]:* Identify the date when the HMIS Participation information record is no longer applicable (i.e. the day after the last night when the number of HMIS participating beds is applicable for a program's Bed and Unit Inventory record). The date is not submitted as part of the HIC, but it is needed to determine how many beds were participating in HMIS at the time of the HIC.

Programs That Operate In More Than One CoC

In some cases, a program may operate in more than one CoC. When this occurs, each CoC should have program descriptor data pertaining to that program recorded in the HMIS serving the CoC; beds should be apportioned between the CoCs based on their physical locations as of the inventory update. For scattered-site housing programs operating in a CoC with multiple Geocodes, record the Geocode where the majority of beds are located or where most beds are located as of the inventory update.

Beds with an Inventory Type of 'Under development' should be divided between CoCs based on location of projected use, if that information is available. If information about the location of projected use is not available, all of the beds may be allocated to the CoC in which the program's principal program service site or the program's administrative office is located.

Point-in-Time Counts for Each Program

Each program recorded in the HIC must provide a PIT count. This number should be the unduplicated number of persons served on the night of the count in the beds reported for the program. This includes all persons who entered the program on or before the date of the HIC and PIT count, and who are either still in the program or exited after the date of the count.

As discussed earlier, the HIC and the PIT are integrally related. The number of persons reported in each program type (Emergency Shelter, Safe Havens, and Transitional Housing) on the PIT

should match the sum total of sheltered persons reported in the PIT count on the HIC for programs of that type.

The use of HMIS data to generate these counts for programs with 100% of beds participating in HMIS is strongly encouraged, although CoCs should verify with program staff that HMIS data is complete and correct for the night of the HIC and PIT count, and that Program Exit Dates have been entered for all persons who exited on or before the date of the count.

Unmet Need

Every CoC must report the level of unmet need for homeless assistance that exists in their community. To complete the unmet need estimates, the CoC needs to know the total number of existing emergency shelter, transitional housing, and Safe Haven beds, as well as the number of emergency shelter, transitional housing, and Safe Haven beds that are under development. In addition, the CoC should determine the number of vacant permanent supportive housing beds on the night of the HIC. More guidance on using this information to determine the CoC's unmet need can be found in a separate document on the HUD HRE website.

Note that HUD does not require CoCs to calculate the unmet need for HPRP Homeless Assistance (Rapid Re-housing) programs.

Point-in-Time Count Guidance

CoCs are required to conduct an annual count of homeless persons who are sheltered (i.e., persons in emergency shelter, transitional housing, and Safe Havens on the night of the count). The required sheltered PIT count should be completed using data from the count conducted during the last ten days of January 2012. CoCs that wish to perform a PIT count on a date outside of the last ten days of January 2012 must request a PIT waiver from HUD. CoCs are not required to conduct a count of unsheltered homeless persons in 2012; the next required unsheltered count will be in January 2013. However, CoCs may choose to conduct an unsheltered count in 2012 and submit PIT data for both sheltered and unsheltered persons.

The sheltered PIT count should be completed using statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations on a single night. CoCs will submit their 2012 PIT data through the HUD HDX website. HUD requires that PIT counts will be conducted in compliance with HUD counting standards, as documented in HUD's *A Guide to Counting Sheltered Homeless People*[3] and *A Guide to Counting Unsheltered Homeless People*[4], available on HUD's HRE.

Population Data

During the PIT count, CoCs should collect information on the following household types:

- **Persons in households with at least one adult and one child.** This category includes households with one adult and at least one child under the age of 18.
- **Persons in households without children.** This category includes single adults, adult couples with no children, and groups of adults.
- **Persons in households with only children.** This category includes persons under age 18, including unaccompanied children, adolescent parents and their children, adolescent siblings, or other household configurations composed only of children.

CoCs are required to collect both the number of persons and the number of households for each household type.

Sheltered Homeless Persons

CoCs need to record the number of persons and households sleeping in emergency shelters, transitional housing, and Safe Haven programs on the night designated for the count. All programs in these categories that are included in the HIC should also be included in the PIT count. Please refer to the above HIC instructions for more guidance on which programs should be included on the HIC and how to determine a program's appropriate Program Type.

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[3] http://www.hudhre.info/documents/counting_sheltered.pdf
[4] http://www.hudhre.info/documents/counting_unsheltered.pdf

> The total number of sheltered persons reported on the PIT Homeless Population tab in HDX should match the total persons reported in the Emergency Shelter, Transitional Housing, and Safe Haven categories in the HIC.

Unsheltered Homeless Persons

For 2012, CoCs may collect and report the number of people living in a place not meant for human habitation, such as cars, parks, sidewalks abandoned buildings, or on the street. For CoCs that do not collect unsheltered data in 2012, HUD will use 2011 unsheltered counts for reporting purposes.

Subpopulation Data

HUD requires that CoCs identify counts of specific subpopulations for all sheltered persons. While the unsheltered count is optional in 2012, if a count is submitted, required subpopulation data should also be submitted. The subpopulations are:

- *Chronically Homeless Individuals:* Required for sheltered and unsheltered persons.
- *Chronically Homeless Families:* Required for sheltered and unsheltered persons.
- *Veterans:* Required for sheltered and unsheltered persons.
- *Severely Mentally Ill*: Required for sheltered persons; optional for unsheltered persons.
- *Chronic Substance Abuse*: Required for sheltered persons; optional for unsheltered persons.
- *Persons with HIV/AIDS*: Required for sheltered persons; optional for unsheltered persons.
- *Victims of Domestic Violence*: Required for sheltered persons; optional for unsheltered persons.
- *Unaccompanied Child (under 18)*: Required for sheltered persons; optional for unsheltered persons.

To determine chronic homeless status, CoCs must use HUD's definition of chronically homeless. See Appendix B for definitions of each of the subpopulation categories.

Using HMIS Data for the PIT

Where possible, CoCs are encouraged to use HMIS to generate PIT data for programs with 100% of their beds participating in HMIS. Before submitting data, CoCs should verify with program staff that HMIS data is complete and correct for the night of the PIT count and that exit dates have been entered for all persons who exited the program on or before the date of the PIT.
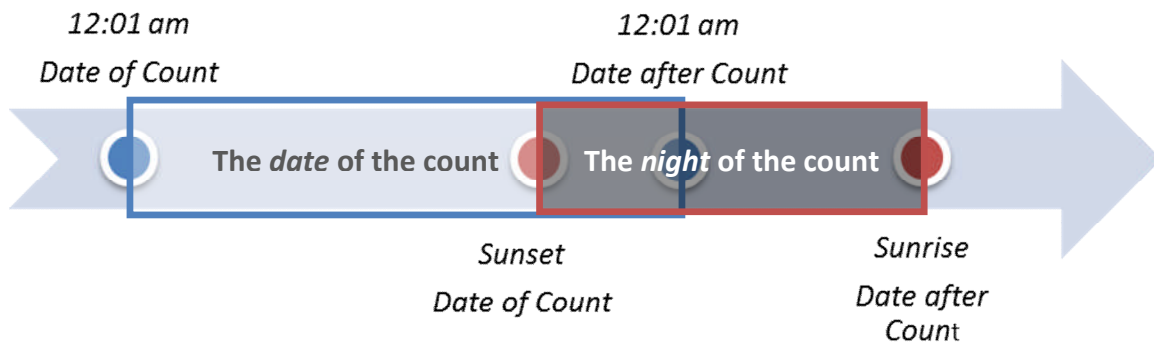
People Who Should be Included in the PIT

For the sheltered count, include all persons who – on the night of the count – were sleeping in beds that are designated for persons who are homeless and are provided or funded by emergency shelter, transitional housing, or Safe Haven programs.

If conducting an unsheltered count, include all homeless persons who were on the street or in a place unfit for habitation on the night of the count.

> **night** /nīt/ (noun) 1.The period of darkness in each twenty-four hours; the time from sunset to sunrise. 2. This as the interval between two days.

HUD requires that CoCs identify the date on which the count was conducted; however, the term 'night' signifies a single period of time from sunset to sunrise that spans two actual dates. The 'night of the count' begins at sunset on the date of the count and ends at sunrise on the following day, as shown in the illustration below.

1 - The Night of the Count - Illustrated

Very often, unsheltered counts are conducted at times that may be collectively referred to as 'the middle of the night.' Before sending the individuals conducting the unsheltered count out at (for example) 3:00 a.m. in January, it is important to identify that if the date identified as 'the date of the count' is January 25th, then 'the night of the count' starts at sunset on January 25th and ends at sunrise on January 26th – so while the night of the count is the 25th, the unsheltered count may actually be conducted on the following date.

For the sheltered count, include all persons who:

- entered on or before the date of the count and
- exited after the date of the count (or have not yet exited).

People Who Should NOT be Included in the PIT

Persons residing in the following settings on the night of the count should not be included in the sheltered PIT count:

- Persons residing in permanent supportive housing programs, including persons housed using Veterans Affairs Supportive Housing (VASH) vouchers
- Persons residing in their own unit with HPRP assistance (e.g., HPRP rental assistance) as part of a Homeless Assistance program (i.e. Rapid Re-housing) or Homelessness Prevention program
- Persons counted in any location not listed on the HIC (e.g., staying in programs with beds/units not dedicated for persons who are homeless or staying with family or friends).

Appendix A – Summary of Program Types

Programs should be assigned a program type in HMIS as shown in the table below. Note that for all U.S. Department of Veterans Affairs (VA) funded programs, program names MUST include the prefixes in parentheses below, even if the program only receives a portion of its funding from VA.

Program Type	Name	Include in HIC?	Include in PIT?
Emergency Shelter	Emergency shelter programs (including those funded by HUD ESG and other federal, state and local public and private sources)	✓	✓
	Hotel/motel vouchers	✓	✓
	VA-funded: Health Care for Homeless Veterans (HCHV) – VA Community Contract Emergency Housing (prefix HCHV/EH),	✓	✓
	Health Care for Homeless Veterans (HCHV) VA Community Contract Residential Treatment Program (prefix HCHV/RT)	✓	✓
	VA-funded: VA Mental Health Residential Rehabilitation Treatment Programs – Domiciliary Care for Homeless Veterans (prefix VADOM)	✓	✓
Transitional Housing	Transitional housing programs (including those funded by HUD SHP and other federal, state and local public and private sources)	✓	✓
	HUD-funded: Rapid Re-Housing Demonstration (RRHD) Program	✓	✓
	VA-funded: VA Grant and Per Diem (prefix GPD)	✓	✓
	VA-funded: VA Compensated Work Therapy – Transitional Residence (prefix CWT/TR)	✓	✓
HPRP Homeless Assistance	HPRP Homeless Assistance (Rapid Re-Housing)	✓	
Safe Haven	HUD-funded: Safe Haven programs	✓	✓
	Health Care for Homeless Veterans (HCHV) VA Community Contract Safe Haven Program (prefix HCHV/SH)	✓	✓
Permanent Supportive Housing	Permanent supportive housing programs (including those funded by HUD S+C, SHP, SRO, and other federal, state and local public and private sources)	✓	
	Veterans Affairs Supportive Housing (prefix VASH)	✓	

Appendix B – Definitions

Chronic Substance Abuse – This category on the PIT includes persons with a substance abuse problem (alcohol abuse, drug abuse, or both) that is expected to be of long-continued and indefinite duration and substantially impairs the person's ability to live independently.

Chronically Homeless Individual - An unaccompanied homeless adult individual (persons 18 years or older) with a disabling condition (see definition below) who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency shelter/Safe Haven during that time. Persons under the age of 18 are not counted as chronically homeless. For purposes of the PIT, persons living in transitional housing at the time of the PIT count should not be included in this subpopulation category.

Chronically Homeless Family – A household with at least one adult member (persons 18 or older) who has a disabling condition (see definition below) and who has either been continuously homeless for a year or more OR has had at least four (4) episodes of homelessness in the past three (3) years. To be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency shelter/Safe Haven during that time. For purposes of the PIT, persons living in transitional housing at the time of the PIT count should not be included in this subpopulation category; the subpopulation count should include all members of the household.

Contributory HMIS Program – A program that contributes Protected Personal Information (PPI) or other client-level data to an HMIS.

Disabling Condition – Any one of (1) a disability as defined in Section 223 of the Social Security Act; (2) a physical, mental, or emotional impairment which is (a) expected to be of long-continued and indefinite duration, (b) substantially impedes an individual's ability to live independently, and (c) of such a nature that such ability could be improved by more suitable housing conditions; (3) a developmental disability as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act; (4) the disease of acquired immunodeficiency syndrome or any conditions arising from the etiological agency for acquired immunodeficiency syndrome; or (5) a diagnosable substance abuse disorder.

Persons with HIV/AIDS – This subpopulation category of the PIT includes persons who have been diagnosed with AIDS and/or have tested positive for HIV.

Protected Personal Information (PPI) – Information about a client: (1) whose identity is apparent from the information or can reasonably be ascertained from the information; or (2) whose identity can, taking into account any methods reasonably likely to be used, be learned by

linking the information with other available information or by otherwise manipulating the information.

Severely Mentally Ill (SMI) – This subpopulation category of the PIT includes persons with mental health problems that are expected to be of long-continued and indefinite duration and substantially impairs the person's ability to live independently.

Unaccompanied Child (under 18) – This subpopulation category of the PIT includes persons under the age of 18 with a household size of one.

Veteran – This subpopulation category of the PIT includes persons who have served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

Victims of Domestic Violence – This subpopulation category of the PIT includes persons who have been victims of domestic violence at any point in the past.

Appendix C – Frequently Asked Questions

1. **Should Shelter Plus Care (S+C) programs be included on the HIC?**

   Yes, all Shelter Plus Care programs should be included in the HIC. S+C programs should be counted as permanent supportive housing, as all S+C beds are required to serve persons who are homeless. Each S+C program must have a program-level PIT count on the HIC, even if they do not participate in the local HMIS.

2. **Do permanent supportive housing programs need to have a program-level point-in-time count in the HIC?**

   Although permanent supportive housing programs are not included in the CoC-wide PIT count, all permanent supportive housing programs must provide a point-in-time count for the HIC. This count should be conducted on the night designated by the CoC for the HIC and CoC-wide PIT count.

3. **Should beds/units that are not dedicated to serving homeless persons, but sometimes serve homeless persons, be included in the HIC?**

   No, only beds/units that are dedicated to serving homeless persons should be included in the HIC. Additionally, only persons staying in emergency shelter, Safe Havens, and transitional housing beds dedicated to serving persons who are homeless should be included in the CoC-wide PIT count.

4. **Should beds that are not occupied on the night of the count be included in the HIC?**

   For year-round and seasonal beds, the CoC should report the total number of beds, not just those that are occupied on the night designated for the count. For overflow beds, CoCs should report only the number of beds occupied on the night designated for the count (see instruction for 2.9C, Bed and Unit Availability).

5. **What is considered a household with only children?**

   A household with only children is any household comprised only of children under 18 years of age. This includes unaccompanied children, adolescent parents and their children, adolescent siblings, and any other household configurations composed only of children.

6. **If a homeless program serves multiple household types and do not have a specific number of beds designated for each specific household type, how should I record this program in the HIC?**

There are two methodologies for designating household types in a program that serves multiple household types without a fixed number of beds for each household type. The beds may be apportioned by household type based on average utilization rates during the year. (This is the methodology described in the 2010 HMIS Data Standards.) Alternatively, the beds may be apportioned based on how they are used on the night designated for the point-in-time count. (This is the methodology described in past HIC guidance.)

7. **Who should I be contacting at our local VA to learn more about VA homeless programs that need to be incorporated into our CoC's HIC and PIT count?**

CoC staff should contact the Homeless Coordinator at their local VA Medical Center to get more information about VA homeless services offered to veterans in your area. A link to a list of Homeless Veteran Program Coordinators by state is available at: http://www.va.gov/homeless/hmls_vet_prog_coord.asp.

8. **How should VASH vouchers be reported on the HIC?**

CoCs should report the total number of VASH vouchers available for use on the designated night of the HIC and PIT count, regardless of whether or not the voucher is presently being used. CoCs should contact their local housing authority or VA medical center that administers the VASH vouchers to determine the total number of vouchers available in the CoC. When a single program operates in multiple CoCs, each CoC should have program descriptor data pertaining to that program in their HMIS; beds should be apportioned according to which CoC they are physically located in. Vouchers are designated for use in a particular geographic location; vouchers that were funded but unused on the night of the HIC should be included within the CoC where they are designated for use.

9. **Should persons being served by HPRP be included in the PIT count?**

HPRP participants (Homelessness Prevention or Rapid Re-housing) who are in conventional housing (i.e. housing in the private rental market) on the night designated for the count should not be included in the PIT count.

10. **Does the unsheltered point-in-time count need to occur only during the overnight hours?**

No. However, most CoCs conduct their PIT count during the nighttime hours to avoid duplication of persons who may be found in places not meant for human habitation during the day, but who were served in a residential homeless facility (emergency shelter, Safe Havens, or transitional housing) on the night of the count. To ensure a thorough count of homeless persons living on the street or places not meant for human habitation, many CoCs also conduct a service-based or known location count in the day(s) following the night

designated for the PIT count. In this approach, persons encountered at service-based or other known locations, such as soup kitchens, drop-in centers, encampments, and libraries, are surveyed to see where they slept on the night designated for the count.

11. Should persons who were recently evicted and are now staying in a motel or hotel for temporary shelter be considered homeless for the purposes of the point-in-time count?

Persons who are staying in a hotel or motel and paying for their stay using their own resources should not be included in the PIT count. However, persons who are staying in a hotel or motel with voucher or other form of payment assistance from a homeless assistance provider should be included in the sheltered PIT count. In addition, these beds/units should be included in the HIC as emergency shelter, with the Bed Type designated as 'voucher'.

12. Does the new definition of homelessness have any impact on who should be included in the 2012 PIT count?

No, per Section 427(b)(3) of the McKinney Vento Act as amended by the HEARTH Act, CoCs will continue to count the same populations and subpopulations on the PIT as they have in the past.   CoCs should be counting sheltered persons who are residing in beds dedicated for homeless persons on the night of the count. This should include persons residing in emergency shelter, transitional housing, and Safe Haven programs. The unsheltered count should include persons who are sleeping outside or in a place not fit for human habitation on the night of the count.