

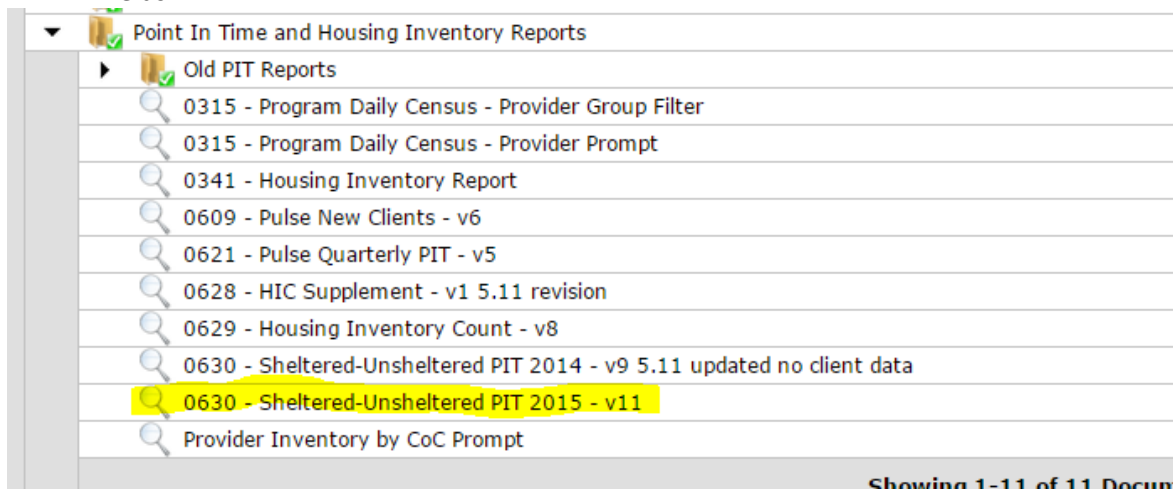
Point-in-Time Related Service Point Reports

Emergency Shelter, Homeless Motel Voucher Programs, & Transitional Housing Programs

Each continuum must complete a census for the last Wednesday of the month for all emergency shelters (including motel voucher programs) and transitional housing programs. This information is reported on the Housing Inventory Chart (HIC) maintained by the HMIS Lead in partnership with the HUD recognized Continuum of Care. The data is required of all agencies with the above-referenced program types regardless of funding or participation in HMIS.

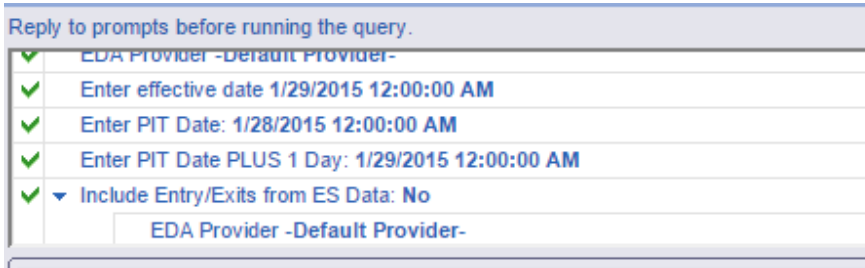
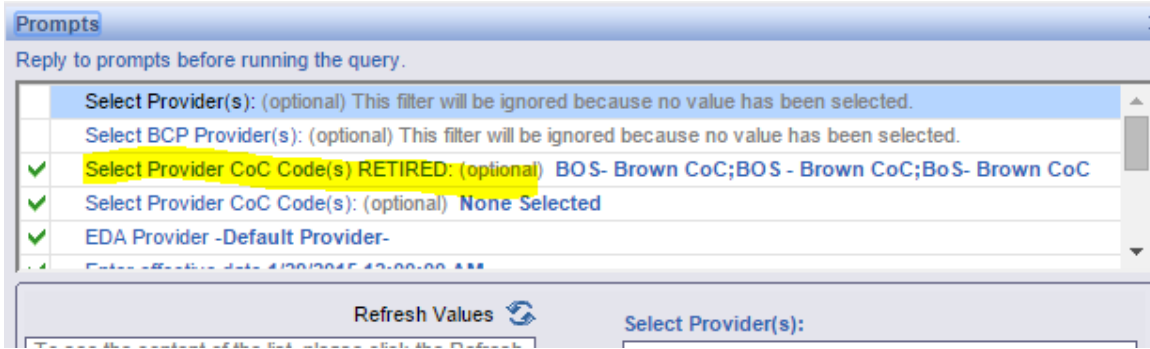
Ensuring updated and accurate units and beds on the HIC is critical for determining unit and bed utilization for each continua. The HIC is used for the yearly HUD Homeless Data Exchange (HDX) submission required by the Continuum of Care Competition.

- (1) HMIS participating agencies will run ART report **0630 – Sheltered-Unsheltered PIT 2015 – v11** to generate the point-in-time data needed to complete the Housing Inventory Chart (HIC). This report has been updated following the HMIS Data Standards and includes the new HUD required fields.



- a. To run the report, click the magnifying glass and complete the prompts as follows:

Select Provider(s)	You can run the report by provider. OR
Select BCP Provider(s)	<i>Skip it</i>
Select Provider CoC Code(s) RETIRED	You can run the report for an entire continuum of care (COC).
Select Provider CoC Code(s)	<i>Skip it</i>
EDA Provider	<i>Skip it</i>
Enter Effective Date	This should be the same date as "Enter PIT Date PLUS 1 Day."
Enter PIT Date	Last Wednesday of the month
Enter PIT Date PLUS 1 Day	Last Thursday of the month
Include Entry/Exits from ES Data	Set as "No" - <i>Skip it</i>
Include Services/Shelters from ES Data	Set as "Yes" - <i>Skip it</i>



(2) The report provides the following information in 7 tabs:

a. Tab A – Homeless Population

- i. Household demographics for Emergency Shelter, Transitional Housing, Safe Haven, Unsheltered, and Total that includes total number of households and people, age, gender, ethnicity, and race.
- ii. Demographics for Households with children, households without children, and households with only children.

ALL HOUSEHOLDS

Households with at least one Adult and one Child	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total Number of Households	13	21	0	34
Total Number of Persons (Adults and Children)	48	73	0	121
Number of Children (Under Age 18)	22	49	0	71
Number of Young Adults (Age 18-24)	3	0	0	3
Number of Adults (Over Age 24)	20	24	0	44
Number of Persons with Missing DOB	3	0	0	3

b. Tab B – Veteran Households

- i. Veteran Household demographics for Emergency Shelter, Transitional Housing, Safe Haven, Unsheltered, and Total that includes total number of households and people, number of veterans, age, gender, ethnicity, and race.
- ii. Demographics for Veteran Households with children and Veteran households without children.

VETERAN HOUSEHOLDS ONLY

Veteran Households with at least one Adult and one Child	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total Number of Households	3	0	0	3
Total Number of Persons (Adults and Children)	10	0	0	10
Total Number of Veterans	3	0	0	3
Gender (veterans only)				
Female	2	0	0	2
Male	1	0	0	1
Transgender: male to female	0	0	0	0
Transgender: female to male	0	0	0	0
Other	0	0	0	0
Client Doesn't Know / Client Refused	0	0	0	0
Missing / Non-HUD	0	0	0	0

c. Tab C – Youth Households

- i. Youth Household demographics for Emergency Shelter, Transitional Housing, Safe Haven, Unsheltered, and Total that includes total number of households, total number of parenting youth households, total number of unaccompanied youth households, as well as the total number of people (parenting youth, unaccompanied young adult, unaccompanied youth).
- ii. Gender, ethnicity, and race are included for only the parenting youth and unaccompanied youth adult and youth.
- iii. Demographics differentiate between:
 - 1. Parenting Youth = youth parent under 18 or between the ages of 18-24 with a child under the age of 18 and no one over the age of 24 in the household.
 - 2. Unaccompanied young adult = single person ages 18-24
 - 3. Unaccompanied youth = single person under the age of 18

YOUTH HOUSEHOLDS ONLY

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	2	2	0	0	4
Number of Parenting Youth Households	0	0	0	0	0
Number of Unacc Youth Households	2	2	0	0	4
Total Number of Persons	2	2	0	0	4
Total Number Persons in Parenting Youth HH	0	0	0	0	0
Number Parenting Youth (parents only)	0	0	0	0	0
Number Parenting Youth (under 18)	0	0	0	0	0
Number Parenting Youth (18 - 24)	0	0	0	0	0
Number Children with Parenting Youth (under 18 with parents under 25)	0	0	0	0	0
Total Number of Unacc Youth	2	2	0	0	4
Number of Unacc Children (under 18)	0	0	0	0	0
Number of Unacc Young Adults (18 - 24)	2	2	0	0	4

Gender (youth parents and unacc only)

d. Tab D – Homeless Subpopulation

- i. Chronic homeless individuals and families in Emergency Shelter, Safe Haven, and Total. This includes number of households as well as number of people.
- ii. Chronic Homeless Veteran individuals and families in Emergency Shelter, Safe Haven, and Total. This includes number of households as well as number of people.
- iii. Other homeless subpopulations including adults with serious mental illness, substance abuse disorder, HIV/AIDS, and Domestic Violence in Emergency Shelter, Transitional Housing, Safe Haven, Total, and Unsheltered.

Homeless Subpopulations

	Sheltered		Sheltered Total	Unsheltered
	Emergency	Safe Haven		
Chronically Homeless Individuals	2	0	2	0
Chronically Homeless Families	0			0
Persons in Chronically Homeless Families (Total Persons in Household)	0			0
Chronically Homeless Veteran Individuals	0	0	0	0
Chronically Homeless Veteran Families	0			0
Persons in Chronically Homeless Veteran Families	0			0

	Sheltered			Sheltered Total	Unsheltered
	Emergency	Transitional	Safe Haven		
Adults with a Serious Mental Illness	16	19	0	35	0
Adults with a Substance Use Disorder	7	10	0	17	0
Adults with HIV/AIDS	0	0	0	0	0
Victims of Domestic Violence (Optional)	13	16	0	29	0

e. Tab E – Client Detail (if you selected the report with client detail)

- i. The client detail tab provides client-level data entered and included in the report.
- ii. This includes age, gender, ethnicity, primary and additional races, disability, veteran status, DV, and chronic homeless status.
- iii. Additionally, the report breaks down singles versus family members.
- iv. This tab also has INPUT CONTROLS.

A	D	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
HH Group	Client Id	Age	Gender	Ethnicity	Primary Race	2nd Race	3rd Race	4th Race	5th Race	Dis b Y/N	Vet	DV	Chronic Homeless Status	FYS B Y/N	BCP Date	Ex	Provider
115	203	35	Female	Non-Hispanic	White	null	null	null	null	Y	N	Y					West CAP Transitional Housing-Polk(3400)
		8	Male	Non-Hispanic	White	null	null	null	null	N	N	Y					West CAP Transitional Housing-St. Croix(3401)
		6	Female	Non-Hispanic	White	null	null	null	null	N	N	Y					West CAP Transitional Housing-St. Croix(3401)
		37	Female	Non-Hispanic	White	null	null	null	null	N	N	Y					West CAP Transitional Housing-St. Croix(3401)
		37	Female	Non-Hispanic	White	null	null	null	null	N	N	Y					West CAP Transitional Housing-St. Croix(3401)
		14	Male	Non-Hispanic	White	null	null	null	null	N	N	Y					West CAP Transitional Housing-St. Croix(3401)
		12	Male	Non-Hispanic	White	null	null	null	null	N	N	Y					West CAP Transitional Housing-St. Croix(3401)
		27	Female	Non-Hispanic	White	null	null	null	null	N	N	Y					West CAP Transitional Housing-Polk(3400)

Chronic Homelessness

This question is based on the new HMIS Data Standards. An individual or family will be marked as chronic if the following is true:

- (1) Does the client have a disability condition? **Marked yes**
- and**
- (2) Continuously homeless for at least one year? **Marked yes**
- or**
- (3) Number of times the Client has been Homeless in Past Three years? **4 or more**

As an example, this is a single that is pulling into the report as chronic:

FOR ALL FOLLOWING QUESTIONS - THE NIGHT PRIOR TO PROJECT ENTRY:

Housing Status	Category 1 - Homeless (HUD)
Residence Prior to Project Entry	Place not meant for habitation (HUD)
If Other Type of Residence, specify	
Length of Stay in Previous Place	More than one week, but less than one month (HUD)
Client Location	WI-500
For this Section - Only includes length of time on Street, in an Emergency Shelter, or Safe Haven	
Continuously Homeless for at Least One year	Yes (HUD)
Number of Times the Client has been Homeless in the Past Three Years	4 or more
If 4 or more, Total Number of Months Homeless in the Past Three Years	Client doesn't know
Total number of months continuously homeless immediately prior to project entry	6
Length of Time Homeless - Status Documented?	Yes
To determine Chronic Homeless - Use above questions if Disability is Yes	
Is Client Chronically Homeless?	Yes

f. Tab F – Disability Detail

- i. The detail tab on disability provides client-level data entered and included in the report. This includes the age, whether the disability question is marked yes or no in the assessment, the disability start date, and the program type.
- ii. This tab also has INPUT CONTROLS.

Client Id	Client Unique Id	Age	Disa b	Disability	Disab Start	Disab End	Prog Type
42	42	48	Y	Mental Health Problem (HUD)	4/21/2006		TH
		42	Y	Mental Health Problem (HUD)	10/20/2009		TH
		42	Y	Mental Health Problem (HUD)	10/21/2009		TH
		35	Y	Alcohol Abuse (HUD)	3/30/2012		ES
		35	Y	Drug Abuse (HUD)	6/30/2011		ES
		35	Y	Mental Health Problem (HUD)	8/14/2008		ES
		56	N	Both Alcohol and Drug Abuse (HUD)	8/19/2009		TH
		38	Y	Mental Health Problem (HUD)	1/21/2014		ES
		55	Y	Mental Health Problem (HUD)	11/10/2014		ES
		55	Y	Mental Health Problem (HUD)	8/3/2012		TH
		46	Y	Mental Health Problem (HUD)	9/15/2011		ES

g. Tab G – Additional Information

- i. Shows the answers to the prompts selected when the report was run.
- ii. Breakdown by program regarding household types.

User Prompt Field	Value(s) Selected
Select Provider(s):	-None Selected (Optional)-
Select BCP Provider(s):	-None Selected (Optional)-
Select Provider CoC Code(s):	None Selected
Select Provider CoC Code(s) RETIRED:	BOS - West Central CoC
EDA Provider:	-Default Provider-
Enter Effective Date:	1/29/2015
Enter PIT Date:	1/28/2015
Enter PIT Date PLUS 1 Day:	1/29/2015
Include Entry/Exits from ES Data:	No
Include Services/ Shelters from ES Data:	Yes

Prog Type	Providers Reporting Information in this Report	#Households Adult/Child	#Clients AC HH	#Clients A Only HH	#Clients C Only HH	Client Unique Id
TH	West CAP Transitional Housing-Barron(9395)	1	4	1	0	5
	West CAP Transitional Housing-Chippewa(9396)	4	12	0	0	12
	West CAP Transitional Housing-Dunn(9397)	1	2	0	0	2
	West CAP Transitional Housing-Pepin(9398)	1	7	0	0	7

- (3) Non-HMIS participating agencies will utilize the Non-WISP PIT form to gather the same information that is required from the HMIS participating agencies to complete the HIC.

Rapid Re-Housing Programs and Permanent Supportive Housing Programs

Each continuum must complete a rapid re-housing census and a permanent supportive housing program census for the month and report the information on the Housing Inventory Chart (HIC) referenced above. The data is required of all agencies with a rapid re-housing program and/or permanent supportive housing program regardless of funding or participation in HMIS.

*As a reminder, the only clients that will come up in this report are those clients enrolled in the Rapid Rehousing program **AND** received rental assistance during the reporting month.*

Ensuring updated and accurate units and beds on the HIC is critical for determining unit and bed utilization for each continua. The HIC is used for the yearly HUD Homeless Data Exchange (HDX) submission required by the Continuum of Care Competition.

- (1) HMIS participating agencies will run ART report **0628 - HIC Supplement – v1 5.11 revision** to generate the monthly census data needed to complete the Housing Inventory Chart (HIC). This report has not yet been updated following the HMIS Data Standards.

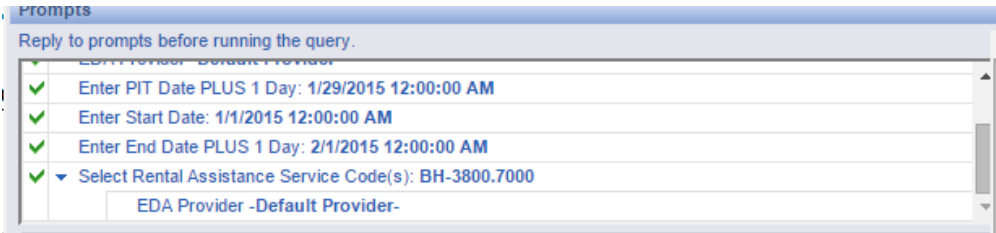
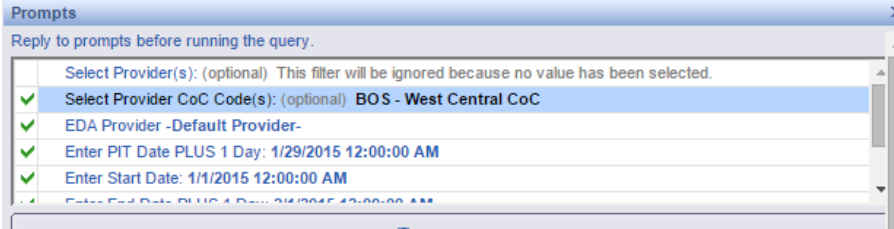
Point In Time and Housing Inventory Reports

- Old PIT Reports
 - 0315 - Program Daily Census - Provider Group Filter
 - 0315 - Program Daily Census - Provider Prompt
 - 0341 - Housing Inventory Report
 - 0609 - Pulse New Clients - v6
 - 0621 - Pulse Quarterly PIT - v5
 - 0628 - HIC Supplement - v1 5.11 revision**
 - 0629 - Housing Inventory Count - v8
 - 0630 - Sheltered-Unsheltered PIT 2014 - v9 5.11 updated no client data
 - 0630 - Sheltered-Unsheltered PIT 2015 - v11
 - Provider Inventory by CoC Prompt

Showing 1-11 of 1

- a. To run the report, click the magnifying glass and complete the prompts as follows:

Select Provider(s)	You can run the report by provider. OR
Select Provider CoC Code(s)	You can run the report for an entire continuum of care (COC).
EDA Provider	<i>Skip it</i>
Enter PIT Date PLUS 1 Day	Last Thursday of the month
Enter Start Date	First day of the month
Enter End Date PLUS 1 Day	First day of the following month
Select Rental Assistance Service Code(s)	<i>Skip it</i>



(2) The report provides the following information in 6 tabs:

a. Tab A – HIC Client Count

- i. Client and household count by household type: household with children, household without children, and household with only children.
- ii. The table groups together PSH programs and RRH programs.

Prog Type	Providers Reporting Information in this Report	Adult Child		Adult Only		Child Only		Count Client Unique Id
		Count Households	Count Clients	Count Households	Count Clients	Count Households	Count Clients	
PSH	West CAP Permanent Supportive Housing for Men Chippewa(9166)	0	0	1	1	0	0	1
	West CAP Permanent Supportive Housing for Women Chippewa(9167)	6	14	4	4	0	0	18
PSH		16	48	30	32	0	0	80
RRH	West CAP ETH Rapid Re-Housing - Chippewa(9315)	2	7	2	2	0	0	9
	West CAP ETH Rapid Re-Housing Program - Barron(9363)	1	2	3	3	1	3	8
	West CAP ETH Rapid Re-Housing Program - Dunn(9364)	3	9	1	1	0	0	10
	West CAP ETH Rapid Re-Housing Program - Pierce(9366)	2	8	0	0	0	0	8
	West CAP ETH Rapid Re-Housing Program - Dink(9367)	2	6	0	0	0	0	8

b. Tab B – Population

- i. Household demographics by project type and total that includes total number of households and people, gender, ethnicity, and race.
- ii. Demographics for Households with children, households without children, households with only children, veteran households with children, veteran households without children.

ALL HOUSEHOLDS				
Households with at least one Adult and one Child	Project Type			Total
	Permanent Housing	Permanent Supportive Housing	Rapid Re-Housing	
Total Number of Households	0	16	11	27
Total Number of Persons (Adults and Children)	0	48	34	82
Number of Persons (Under Age 18)	0	28	21	49
Number of Persons (Age 18-24)	0	4	0	4
Number of Persons (Over Age 24)	0	16	13	29
Number of Persons with Missing DOB	0	0	0	0
Gender (adults and children)				

c. Tab C – Subpopulations

- i. Chronic homeless individuals and families in Emergency Shelter, Safe Haven, and Total.
- ii. Other homeless subpopulations including adults with serious mental illness, substance abuse disorder, HIV/AIDS, and Domestic Violence in Emergency Shelter, Transitional Housing, Safe Haven, Total, and Unsheltered.

Homeless Subpopulations

	Project Type		
	Permanent Housing	Permanent Supportive Housing	Rapid Re-Housing
Chronically Homeless Individuals	0	12	0
Chronically Homeless Families	0	8	0
Persons in Chronically Homeless Families (Total Persons in Household)	0	23	0

	Project Type		
	Permanent Housing	Permanent Supportive Housing	Rapid Re-Housing
Veterans	0	11	1
Adults with a Serious Mental Illness	0	35	1
Adults with a Substance Use Disorder	0	20	1
Adults with HIV/AIDS	0	0	0
Victims of Domestic Violence	0	9	12

d. Tab D – Client Detail

- i. The client detail tab provides client-level data entered and included in the report.
- ii. This includes age, gender, ethnicity, primary and additional races, disability, veteran status, DV, and chronic homeless status.
- iii. Additionally, the report breaks down singles versus family members.

HH Group	Client Id	Age	Gender	Eth	Primary Race	Secondary Race	CH	Disa	Vet	DV	EE Provider	EE Start	EE Exit	Prog Type	Fam Type	HC
3	64	123	15	M	Non-Hisp	White (HUD)		Y	N	N	West CAP Permanent Supportive Housing for Womc	5/6/2013		PSH	AC	Ca
4			41	F	Non-Hisp	White (HUD)		Y	Y	N	West CAP Permanent Supportive Housing for Womc	5/6/2013		PSH	AC	Ca
5			42	F	Non-Hisp	White (HUD)		N	Y	N	West CAP Permanent Supportive Housing for Womc	7/3/2013		PSH	AC	Ca
5			16	M	Non-Hisp	White (HUD)		N	N	N	West CAP Permanent Supportive Housing for Womc	7/3/2013		PSH	AC	Ca
7			5	F	Non-Hisp	White (HUD)		N	N	N	West CAP Permanent Supportive Housing for Womc	7/3/2013		PSH	AC	Ca
8			42	F	Non-Hisp	White (HUD)		N	Y	N	West CAP Permanent Supportive Housing for Womc	5/10/2013		PSH	AC	Ca
9			18	M	Non-Hisp	White (HUD)	Black or African American	N	N	N	West CAP Permanent Supportive Housing for Womc	5/10/2013		PSH	AC	Ca
0			15	M	Non-Hisp	White (HUD)	Black or African American	N	N	N	West CAP Permanent Supportive Housing for Womc	5/10/2013		PSH	AC	Ca
1			31	F	Non-Hisp	White (HUD)		N	N	N	West CAP ETH Rapid Re-Housing - Chippewa(9315	1/29/2014	1/31/2015	RRH	AC	Ca
2			37	M	Non-Hisp	White (HUD)		N	N	N	West CAP ETH Rapid Re-Housing - Chippewa(9315	1/29/2014	1/31/2015	RRH	AC	Ca
3			3	M	Non-Hisp	White (HUD)		N	N	N	West CAP ETH Rapid Re-Housing - Chippewa(9315	1/29/2014	1/31/2015	RRH	AC	Ca
4			0	M	Non-Hisp	White (HUD)		N	N	N	West CAP ETH Rapid Re-Housing - Chippewa(9315	1/29/2014	1/31/2015	RRH	AC	Ca
5			39	F	Non-Hisp	White (HUD)		Y	Y	N	West CAP Permanent Supportive Housing for Womc	4/18/2014		PSH	AC	Ca
5			14	F	Non-Hisp	White (HUD)		Y	N	N	West CAP Permanent Supportive Housing for Womc	4/18/2014		PSH	AC	Ca

e. Tab E – Disability Detail

- i. The detail tab on disability provides client-level data entered and included in the report. This includes the age, whether the disability question is marked yes or no in the assessment, the disability start date, and the program type.

Client Id	Client Unique Id	Age	Disability	Disab Start	Disab End	Prog Type
45	45	30	Mental Health Problem (HUD)	3/7/2012		PSH
		41	Alcohol Abuse (HUD)	5/7/2009		PSH
		41	Drug Abuse (HUD)	10/1/2012		PSH
		41	Mental Health Problem (HUD)	11/1/2012		PSH
		36	Alcohol Abuse (HUD)	8/13/2005		PSH
		36	Mental Health Problem (HUD)	8/13/1988		PSH
		33	Alcohol Abuse (HUD)	11/26/2014		PSH
		33	Drug Abuse (HUD)	11/26/2014		PSH

f. Tab F – Additional Information

- i. Shows the answers to the prompts selected when the report was run.
- ii. Breakdown by program regarding household types.

User Prompt Field	Value(s) Selected
Select Providers:	-None Selected (Optional)-
Select Provider CoC Code(s):	BOS - West Central CoC
EDA Provider:	-Default Provider-
Enter PIT Date PLUS 1 Day:	1/29/2015
Enter Start Date:	1/1/2015
Enter End Date PLUS 1 Day:	2/1/2015
Select Rental Assistance Service Code(s)	

Prog Type	Providers Reporting Information in this Report	Client Unique Id
PSH	West CAP Permanent Supportive Housing for Men Chippewa(9166)	1
	West CAP Permanent Supportive Housing for Women Chippewa(9167)	18
PSH		80

RRH	West CAP ETH Rapid Re-Housing - Chippewa(9315)	9
	West CAP ETH Rapid Re-Housing Program - Barron(9363)	8
	West CAP ETH Rapid Re-Housing Program - Dunn(9364)	10
	West CAP ETH Rapid Re-Housing Program - Pierce(9366)	8
	West CAP ETH Rapid Re-Housing Program - Sully(9367)	8

- (3) Non-HMIS participating agencies will utilize the Non-WISP PIT form to gather the same information that is required from the HMIS participating agencies to complete the HIC.