2022 Sheltered Point-In-Time Count Instructions for Emergency Shelters, Transitional Housing, Safe Haven, Rapid Re-Housing, and Permanent Supportive Housing Projects

IMPORTANT NOTE: These instructions are intended to provide an overview only. All staff providing data for the sheltered count should participate in the training linked below, which provides additional details.

The count will occur on the night of 1/25-1/26/22. The sheltered count will primarily rely on HMIS data collected by Emergency Shelter (ES), Safe Haven (SH), and Transitional Housing (TH) programs. Those data will be verified by providers in the PIT database. Those data will also be supplemented by data entered into the PIT database by projects that do not participate in HMIS. As required by HUD, the sheltered count will include only people who were staying on the night of the count in a supervised publicly or privately operated shelter designated to provide temporary living arrangements, including congregate shelters, transitional housing, safe havens, and hotels and motels paid for by charitable organizations or by federal, state or local government programs for low-income individuals. In addition, people living in Rapid Re-Housing (RRH) and Permanent Supportive Housing (PSH) will be included in people counts on the Housing Inventory Chart (HIC) but not included in the sheltered count, as they were not experiencing homelessness on the night of the count.

Prior to the Night of the Count all programs should ensure data completeness and accuracy by performing the following:

- 1. **For HMIS Participating Projects**: HMIS will be used to populate the PIT Database with sheltered data. ES, TH, SH, RRH, and PSH projects should ensure that all participants are correctly captured in HMIS including the following: (Refer to Training recorded on ACT Website (https://act-ct.org/hic-pit.html)
 - a. All current participants are entered in HMIS with the correct date.
 - b. Move-in dates for RRH and PSH projects are entered as appropriate.
 - c. Participants no longer staying at the project have been exited in HMIS with the correct date.
- 2. For non-HMIS Participating Projects: The procedure will continue as it did in previous years. Data from a comparable database or other internal data source will be input, in aggregate form, into the PIT database by providers. Programs should ensure that these data sources are accurate and contain the HUD required demographics race, ethnicity, age, and gender as well required HUD sub-population data including:
 - a. Veteran, severe mental illness, chronic substance use, HIV/AIDS, and domestic violence (Refer to Training recorded on ACT Website https://act-ct.org/hic-pit.html)

Night of the Count - Sheltered count verification The following steps are essential to ensure that only people who slept in a qualified sheltered location on the night of the count are included in the sheltered count and that PIT counts listed on the HIC for RRH and PSH projects are accurate (Refer to Training recorded on ACT Website and LINK resource guide https://act-ct.org/hic-pit.html):

1. For HMIS Participating Projects:

a. ES, TH, SH, RRH, and PSH projects will ensure that all clients who stayed at the project on the night of the count are entered in HMIS with the correct entry date.

- b. ES projects will ensure that all clients who did not stay at the project on the night of the count are exited in HMIS with the correct exit date.
- c. TH, SH, RRH, and PSH projects will ensure that all clients who moved out of the project prior to the night of the count are exited in HMIS with the correct exit date.
- d. ES, TH, SH, RRH, PSH projects will either verify that the total number of clients who stayed at the project on the night of the count is reflected in the PIT database or enter the correct number with an explanation.
- e. ES, TH, SH, RRH, and PSH projects will be able to see a utilization rate for their project in the PIT database. That rate will show the % of beds occupied on the night of the count. For example: A project with 100 total beds, 50 of which were occupied on the night of the count, would show a 50% utilization rate. Projects showing an atypical utilization rate will be required to enter an explanation in the PIT database.
- f. Demographic and Subpopulation data (Veteran, serious mental illness, chronic substance use, HIV/AIDS, and domestic violence) will be generated using HMIS and providers should ensure accuracy.

All data should be correctly entered in HMIS and in the PIT database by no later than 2/2/22.

2. For non-HMIS Participating Projects:

- a. ES, TH, SH, RRH, PSH projects will enter the total beds available in the project and the total number of clients who stayed at the project on the night of the count in the PIT database.
- b. ES, TH, SH, RRH, and PSH projects will be able to see a utilization rate for their project in the PIT database. That rate will show the % of beds occupied on the night of the count. For example: A project with 100 total beds 50 of which were occupied on the night of the count would show a 50% utilization rate. Projects showing an atypical utilization rate will be required to enter an explanation in the PIT database.
- Demographic and Subpopulation data (Veteran, serious mental illness, chronic substance use, HIV/AIDS, and domestic violence) will be generated using HMIS and providers should ensure accuracy.

All data should be correctly entered in HMIS and in the PIT database by no later than 2/2/22.