

Continuum of Care 2008

Instructions for filling out bed count and homeless point-in-time count charts.

This year's point-in-time count is greatly simplified and is based directly on the charts that must be completed in the CoC application's exhibit 1 section.

The survey to fill out is contained in the attached excel file, "2008 Knoxville-Knox County Bed and Population Counts.xls"

The survey is divided into three charts, one each for Emergency Shelter, Transitional Housing, and Permanent Supportive Housing. Going from left to right on each chart, there are three sections: bed count, population count, and subpopulation count. All of your agency's information can be filled out on these three pages.

Please fill out the excel charts as appropriate for your agency, and return them to Michael Dunthorn by email at mdunthorn@cityofknoxville.org by Friday, February 1, 2008. (The information on the charts should be accurate for the night of January 24, 2008.) If you need to print out the document and fill it out by hand, you may fax the results to 215-2962. If you have any difficulties or questions, feel free to contact Michael Dunthorn at the email address above or by phone at 215-3103.

Instructions:

Emergency Shelter – *Fill out this sheet if your agency has any emergency shelter programs.*

(Open the excel file and click on the tab at the bottom called "Emergency Shelter" to get to the correct excel sheet.)

Contact information: Please enter the contact information for the person filling out the sheet.

Provider Name – list the name of your agency.

Facility or Program Name – Name each distinct program or facility your agency operates.

Target Population – If the listed program serves a distinct population listed at the bottom of the chart, choose the appropriate designation by clicking on the cell and selecting the appropriate designation from the pull-down menu. The *Primary Characteristic* column identifies if eligibility for that program is based on sex, age, or familial status. If your program doesn't exclusively serve one of the categories in the menu, select "M" for "mixed." The *Secondary Characteristic* column identifies if your program exclusively serves victims of domestic violence, veterans, or persons with HIV/AIDS. If your program does not exclusively serve one of those three categories, leave that column blank.

Year-Round Beds – This section deals with beds and facilities each of your program regularly has available. The numbers you enter here will reflect what is available, not necessarily what was actually used on the night of January 24th.

Family Units – enter the number of families your program could serve at one time, under normal circumstances. If your program does not serve families as separate units, leave this

column blank.

Family Beds – Enter the number of beds available for families. *(For instance, if your program has three apartments, one with four beds in it, and two apartments with three beds each, you would have entered “3” under ‘Family Units,’ and “10” under ‘Family Beds.’)* Again, if your program does not serve families, leave this column blank.

Individual Beds – Enter the number of beds available for individuals. Do not enter beds already counted under ‘Family Beds.’

Total Year-Round Beds – This is the total of ‘Family Beds’ and ‘Individual Beds.’

Other Beds – Enter the number of temporary or additional beds or bunks available under seasonal or extenuating circumstances. Use the ‘Seasonal’ column for extra beds that are made available on a seasonal basis. Use the ‘Overflow’ column for extra beds, cots or other accommodations that are made available on a very temporary basis.

New Inventory and Inventory Under Development – In these two sections, please enter information on programs or beds that your agency plans to make available during the remainder of this calendar year or that is planned for the following years. Use the column headers from above to indicate target populations, etc.

Point-In-Time Count

Actual Occupancy on the night of January 24, 2008 – In this section you will indicate the actual number of individuals who were accommodated in each of your listed facilities or programs on the night of January 24, 2008. Enter occupancy numbers for each program by continuing along the same line for each program listed in the bed count section of the chart. It is important to reflect the numbers you served only on the night of January 24 in order to avoid the double-counting of people who may stay at different facilities on different nights. (You may indicate in the box below these columns whether or not your occupancy numbers for January 24th are typical.)

Families with Children – In the first column, indicate how many families that include children stayed in your facility or program on January 24th. In the second column, enter the total number of people who were in the families you listed in the first column, counting both the adults and the children.

Single Individuals or Families without children – In these two columns, you will count single individuals as well as couples or adult family members who are not accompanied by children. In the first column indicate the number of households for this category. *(For example, a solitary individual would count as one household. Likewise, a married couple with no accompanying children would be counted in this section as one household.)* In the second column, enter the total number of people who were part of the households listed in the first column.

Sub-populations – The third section of this chart identifies the various subpopulations represented in the occupancy section discussed above. Each person could be represented by more than one sub-population category. Please count all sub-population categories that would apply for each person included in the count. *(For instance, if you served 13 people on the night of January 24th, ten of them may have been mentally ill, five may have chronic substance abuse problems, and all thirteen were*

veterans. You would reflect 10 in the 'mentally ill' column, 5 in the 'substance abuse' column, and 13 in the veterans' column.)

“Chronically Homeless,” for the purposes of this chart is defined “an unaccompanied disabled individual who has been continuously homeless for over one year or who has had at least four episodes of homelessness in the past three years.” There are many other possible ways to define chronically homeless, but for the purposes of this chart, enter the number of people your agency served who meet this definition.

Was this a typical night? Please check yes or no to indicate whether or not the occupancy numbers for your facilities reported on each sheet were normal for this time of year or not.

Transitional Housing – *Fill out this sheet if your agency has any transitional housing programs.*

(Open the excel file if you haven't already done so, and click on the tab at the bottom called "Transitional Housing" to get to the correct excel sheet.)

Contact information: Please enter the contact information for the person filling out the sheet.

Provider Name – list the name of your agency.

Facility or Program Name – Name each distinct program or facility your agency operates.

Target Population – If the listed program serves a distinct population listed at the bottom of the chart, choose the appropriate designation by clicking on the cell and selecting the appropriate designation from the pull-down menu. The *Primary Characteristic* column identifies if eligibility for that program is based on sex, age, or familial status. If your program doesn't exclusively serve one of the categories in the menu, select "M" for "mixed." The *Secondary Characteristic* column identifies if your program exclusively serves victims of domestic violence, veterans, or persons with HIV/AIDS. If your program does not exclusively serve one of those three categories, leave that column blank.

Year-Round Beds – This section deals with beds and facilities each of your program regularly has available. The numbers you enter here will reflect what is available, not necessarily what was actually used on the night of January 24th.

Family Units – enter the number of families your program could serve at one time, under normal circumstances. If your program does not serve families as separate units, leave this column blank.

Family Beds – Enter the number of beds available for families. *(For instance, if your program has three apartments, one with four beds in it, and two apartments with three beds each, you would have entered "3" under 'Family Units,' and "10" under 'Family Beds.'*) Again, if your program does not serve families, leave this column blank.

Individual Beds – Enter the number of beds available for individuals. Do not enter beds already counted under 'Family Beds.'

Total Year-Round Beds – This is the total of 'Family Beds' and 'Individual Beds.'

New Inventory and Inventory Under Development – In these two sections, please enter information on programs or beds that your agency plans to make available during the remainder of this calendar year or that is planned for the following years. Use the column headers from above to indicate target populations, etc.

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different facilities on different nights. (You may indicate in the box below these columns whether or not your occupancy numbers for January 24th are typical.)

Families with Children – In the first column, indicate how many families that include children stayed in your facility or program on January 24th. In the second column, enter the total number of people who were in the families you listed in the first column, counting both the adults and the children.

Single Individuals or Families without children – In these two columns, you will count single individuals as well as couples or adult family members who are not accompanied by children. In the first column indicate the number of households for this category. *(For example, a solitary individual would count as one household. Likewise, a married couple with no accompanying children would be counted in this section as one household.)* In the second column, enter the total number of people who were part of the households listed in the first column.

Sub-populations – The third section of this chart identifies the various subpopulations represented in the occupancy section discussed above. Each person could be represented by more than one sub-population category. Please count all sub-population categories that would apply for each person included in the count. *(For instance, if you served 13 people on the night of January 24th, ten of them may have been mentally ill, five may have chronic substance abuse problems, and all thirteen were veterans. You would reflect 10 in the ‘mentally ill’ column, 5 in the ‘substance abuse’ column, and 13 in the veterans’ column.)*

“Chronically Homeless,” for the purposes of this chart is defined “an unaccompanied disabled individual who has been continuously homeless for over one year or who has had at least four episodes of homelessness in the past three years.” There are many other possible ways to define chronically homeless, but for the purposes of this chart, enter the number of people your agency served who meet this definition.

Was this a typical night? Please check yes or no to indicate whether or not the occupancy numbers for your facilities reported on each sheet were normal for this time of year or not.

Permanent Supportive Housing – *Fill out this sheet if your agency has any permanent supportive housing programs.*

(Open the excel file if you haven't already done so, and click on the tab at the bottom called "Permanent Supportive Housing" to get to the correct excel sheet.)

Contact information: Please enter the contact information for the person filling out the sheet.

Provider Name – list the name of your agency.

Facility or Program Name – Name each distinct program or facility your agency operates.

Target Population – If the listed program serves a distinct population listed at the bottom of the chart, choose the appropriate designation by clicking on the cell and selecting the appropriate designation from the pull-down menu. The *Primary Characteristic* column identifies if eligibility for that program is based on sex, age, or familial status. If your program doesn't exclusively serve one of the categories in the menu, select "M" for "mixed." The *Secondary Characteristic* column identifies if your program exclusively serves victims of domestic violence, veterans, or persons with HIV/AIDS. If your program does not exclusively serve one of those three categories, leave that column blank.

Year-Round Beds – This section deals with beds and facilities each of your program regularly has available. The numbers you enter here will reflect what is available, not necessarily what was actually used on the night of January 24th.

Family Units – enter the number of families your program could serve at one time, under normal circumstances. If your program does not serve families as separate units, leave this column blank.

Family Beds – Enter the number of beds available for families. *(For instance, if your program has three apartments, one with four beds in it, and two apartments with three beds each, you would have entered "3" under 'Family Units,' and "10" under 'Family Beds.')* Again, if your program does not serve families, leave this column blank.

Individual Beds – Enter the number of beds available for individuals that are not reserved specifically for the chronically homeless. Do not enter beds already counted under 'Family Beds.'

Chronically Homeless Individual Beds – Enter the number of beds that are specifically reserved to serve the chronically homeless. Do not enter beds already counted under 'Family Beds' or 'Individual Beds.'

Total Year-Round Beds – This is the total of 'Family Beds' and 'Individual Beds.'

New Inventory and Inventory Under Development – In these two sections, please enter information on programs or beds that your agency plans to make available during the remainder of this calendar year or that is planned for the following years. Use the column headers from above to indicate target populations, etc.

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