

# WI Balance of State HIC Guide

### Introduction

The Housing Inventory Chart (HIC) is a requirement of HUD for the Continuum of Care (CoC) to have. It is essentially a live inventory of all beds and units in the CoC dedicated for those experiencing homelessness at any given time. The HIC includes the following project types: Emergency Shelter, Transitional Housing, Permanent Supportive Housing, Other Permanent Housing (this is permanent housing for those experiencing homelessness but without the requirement of disability), Safe Haven, and Rapid Rehousing. The HIC does not include Prevention projects or projects that do not require homelessness as an eligibility requirement. If a project has some beds that are dedicated to those experiencing homelessness (meaning homelessness is an eligibility requirement) and some beds that are not, the beds that are dedicated to those experiencing homelessness should be included on the HIC.

The WI BOS creates the HIC for the coalitions in its geography, as well as the other CoCs in Wisconsin. While the BOS takes the responsibility of creating it, each coalition has a responsibility to make sure the HIC for their coalition is up to date and accurate. Each coalition must have a HIC Lead. This person is the one who manages the HIC each month. They ensure that the projects on the HIC have the number of people served on the fourth Wednesday of the month entered into the PIT section of the HIC. HIC Leads also add new projects that should be added and delete projects that no longer operate and should be taken off. Coalitions should have ownership over their HIC because Balance of State staff may not be aware of changes in what projects are operating or which aren't in each coalition. If there are areas that are highlighted yellow on your coalition's HIC, they need to be addressed. It means that column/row needs more information or to be completed and it is part of the HIC Lead's responsibility to ensure all highlighted errors are fixed.

The HIC is used for a variety of things including the Point in Time (PIT), community presentations around capacity and inventory of projects, and in funding calculations by the State. The Division of Energy, Housing and Community Resources (DEHCR) uses the utilization rate identified on each monthly HIC for each coalition to factor into the allocation formula for EHH annually.

This guide will go through the first two tabs of the HIC-The Key and Geocode-and then a coalition tabs in detail. The purpose of this guide is to ensure there is a resource for those who are responsible for completing the HIC for each coalition.

**HIC Tabs** 

### KEY Tab

The Key Tab is the very first tab and gives detailed instructions about how to fill out each column. It is always there to refer to, but at the end of this guide, there are screenshots of each section so it can be referred to as a whole word document, hopefully making it easier to refer to when completing the coalition tab each month. This may be more convenient than having to switch from tab to tab.

Along with information about each column, it also gives information about the different roles in the coalition, so when filling the section out on the HIC about who is the contact person for each role, it is clear who should be included.



HIC/PIT lead = Identify the name of the person from the coalition that is responsible for the monthly Housing Inventory Chart (HIC) and reporting Point-in-time (PIT) data and the agency the person works for. This includes ensuring that the inventory for the agencies are accurate, the projects that should be included are, the projects that should be removed are, and the data for the 4th Wednesday of each month is reported for all the projects. This is the person that will receive the google link for the HIC each month. **Coalition lead** = Identify the name of the person from the coalition that runs the local coalition meeting and the agency the person works for. **EHH lead** = Identify the name of the person from the coalition that is the lead for DEHCR's EHH grant and the agency the person works for. **BOS Board member** = Identify the name of the person from the coalition that was elected to serve as the Balance of State CoC SoO grant and the agency the person works for. **SSO Statf/CE Lead** = Identify the name of the person from the coalition that is funded through the Balance of State CoC SSO grant and the agency the person works for.

Throughout this guide, screen shots from the Key will be included.

#### Geocode Tab

Every project on the HIC must have a geocode assigned to it. Larger cities within the state may have their own geocode. For example, Appleton, Kenosha, Wausau are big enough cities to have their own. Any city that has their own geocode will be highlighted. The rest of the geocodes are by county. If the city in which the project operates in is not in the highlighted list of cities, then use the county geocode. If a project operates in more than one county, the geocode should reflect the location of the project's principle site or, for municipal site projects, the location in which the majority of the project's clients are housed.

Geocode	Name						
550216	APPLETON						
550568	BELOIT						
551920	EAU CLAIRE						
552264	FOND DU LAC						
552664	GREEN BAY						
553224	JANESVILLE						
553316	KENOSHA						
553428	LA CROSSE						
553944	MADISON						
554340	MILWAUKEE						
554588	NEENAH						
554960	OSHKOSH						
555424	RACINE						
556000	SHEBOYGAN						
556492	SUPERIOR						
556948	WAUKESHA						
556980	WAUSAU						
557008	WAUWATOSA						
557056	WEST ALLIS						
559001	Adams County						
559003	Ashland County						
559005	Barron County						
559007	Bayfield County						
559009	Brown County						
559011	Buffalo County						
559013	Burnett County						
559015	Calumet County						
559017	Chippewa County						
559019	Clark County						
559021	Columbia County						
559023	Crawford County						
559025	DANE COUNTY						
559027	Dodge County						
559029	Door County						
559031	Douglas County						
559033	Dunn County						
559035	Eau Claire County						
559037	Florence County						
559039	Fond du Lac County						
559041	Forest County						



### Coalition Tab

Each coalition has their own tab and the HIC Lead for each coalition should ensure that the information for their coalition is only put on their coalition's tab.

### Coalition Role

The first section gives information about coalition contacts. The HIC Lead must ensure that someone is listed for each of the roles:

- 1. HIC/PIT Lead: this can be two people (one for HIC and one for PIT), but they would need to work closely together for the purpose of the PIT during January and July. Please list both if there are two people.
- 2. Coalition Lead
- 3. EHH Lead
- 4. BOS Board Member
- 5. SSO Staff

Please list the names and the organization in the gray box and make sure the contact information is updated.

HIC/PIT Lead:	
Coalition Lead:	
EHH Lead:	
BOS Board Member:	
SSO Staff/CE Lead:	

### Project Type

Each coalition tab is separated by project type. Remember these include all projects that have beds available for those experiencing homelessness, regardless of funding. They are found in the following order.

- 1. Emergency shelter (ES): this is the first section and is highlighted Blue. This includes motel vouchers, brickand-mortar shelters, and seasonal shelters.
- 2. Transitional Housing (TH): this is second and is highlighted an orange color. This includes site based as well as scattered site TH.
- 3. Permanent Supportive Housing (PSH): this is the third section and is highlighted in yellow. PSH includes any long-term permanent housing project that has disability and chronic homelessness as a requirement for eligibility.
- 4. Other Permanent Housing (OPH): this is the fourth section and is highlighted in a lighter blue. This includes any long-term permanent housing for those who are experiencing homelessness that does not require disability or chronic homelessness as eligibility criteria. Examples can include Section 8 vouchers dedicated to those experiencing homelessness, Family Unification Vouchers (FUP) and Emergency Housing Vouchers (EHV)
- 5. Safe Haven (SH)-there is only one Safe Haven project in the WI BOS and it is under Waukesha. No other coalition besides Waukesha will have a Safe Haven section.
- 6. Rapid Re-Housing (RRH): This is the last section and is highlighted green. This includes short and medium-term housing assistance and is considered permanent housing.
- 7. Below the project type sections is a notes section. When changes are made to the HIC, those changes should be noted in the notes section.

### HIC Columns

Regardless of the project type, the information collected for the HIC is the same. The first three columns are asking for Agency Name, Homeless Management Information System (HMIS) Provider ID and HMIS Project Name.



Agency Name (Organization): Emergency Shelter, Seasonal Shelters, Motel Vouchers	HMIS Provider ID#	HMIS Project Name
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Regardless of the funding source or if the projects enter data into the HMIS, every project on the HIC must be created in HMIS. It is part of the requirement of the Longitudinal Systems Analysis (LSA), which is a large report that the HMIS Lead must generate annually to go to Congress. It is important that the HIC Lead communicate with their HMIS System Administrators from Institute for Community Alliances (ICA), who is the HMIS Lead, when new projects are added to the HIC so they can gather the necessary information to create the project in HMIS.

The Agency Name is the overall Agency Name, it is not the name of the project. The HMIS Provider ID# is information that will come from your HMIS System Administrator once they have created the project. The HMIS Project Name will also need to come from your HMIS System Administrator but will have been created in conjunction with the agency.

An Example:

Agency Name	HMIS Project ID#	HMIS Project Name		
ABC Homeless Services Agency	1234	ABC Singles Shelter		

The next set of columns asks for more information about the project including how it is funded and who it is serving.

Geo Code	Status	Target Pop.	Victim Service Provider	Shelter & Housing Type (Letter)	HUD McKinne y-Vento Funding (Letter)	Other Federal Funding Sources (Letter)
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*Geocode*: can be found on the Geocode Tab. Again, the geocode could be for the city or for the county in which the project's main offices are located. If the city has its own geocode, you must use the city geocode.

*Status*: This is referring to whether the project had beds available the night of the PIT, which is the fourth Wednesday of every month. Information about how to answer this is found on the Key.

### Column E: Status (of the Project)

Type the letter "C" in Column E if the project was available for occupancy on the night of the PIT.

Type the letter "U" in Column E if the project was not available for occupancy as of the night of the PIT (not in operation yet).

If the project was available on the fourth Wednesday of the month, put a C under status. If it was not available, put a U.



This will be a column that will need to be updated. For example, if it is a new project and the beds were not available on the fourth Wednesday of May but will be available in June, that will need to be changed from a U to a C on the June's HIC.

Another example, if there are repairs to a shelter or unit, or it is a seasonal project, that will need to be updated on the HIC and changed as needed.

*Target Population*: If the project is targeted to Domestic Violence Survivors, veterans, or those living with HIV/AIDS, then that needs to be specified on the HIC under this column. The Key tells you how to answer this column.

Column F: Target Population

If 75% or more of the clients in the project are survivors of Domestic Violence, type the letters "DV" in Column F. All projects that serve people currently experiencing homeless because they are fleeing domestic violence, dating violence, sexual assault, or stalking.

If 75% or more of the clients in the project are Veterans, type the letters "VET" in Column F.

If 75% or more of the clients in the project have HIV/AIDS, type the letters "HIV" in Column F.

Domestic Violence survivors, veterans and those living with HIV/AIDS are the only target populations HUD wants specified.

*Victim Service Provider*: If the provider is a victim service provider (VSP), then the comparable database the project uses needs to be entered in the Victim Service Provider column. VSPs are not allowed to enter their data into the same HMIS as other homeless service providers, but they are required to enter data into a comparable database that captures all the required Universal Data Elements (UDEs) and can pull the HUD required reports such as APR or CAPER. If the agency is a VSP they need to put a Y and the name of the comparable database.

### Column G: Victim Service Provider \*NEW in 2022

Victim service providers are prohibited by VAWA from entering data into HMIS. CoCs must report whether victim service providers in their geogrpahy are participating in a comparable database. All CoC and ESG program funded projects operated by a victim service provider are required to collect data in a comparable database. For more information about comparable databases, please refer to the HMIS Comparable Database Manual at

https://www.hudexchange.info/resource/6305/hmis-comparable-databa se-manual

In Column G, write Y or N to indicate whether the organization uses a comparable database. In addition, write the name of the database next to the "Y."



**Shelter & Housing Type (Letter):** This column asks about the configuration of the project; is it site based-single site, site based-multiple sites, or tenant based scattered site. The key explains what each of those are.

### Column H: Shelter & Household Type

Type the letter "A" in Column H if the project is: <u>Site-based - Single</u> <u>Site</u>. All clients are housed in a single project facility. This can include cots or mats, or 1 buildling with separate units. For Emergency shelters, this would be considered "facility-based."

Type the letter "B" in Column H if the project is: <u>Site-based -</u> <u>clustered/multiple sites.</u> All clients are housed in more than one project facility, but more than one client is housed in each project facility. The facility locations are owned, operated, or sponsored by the project. This can include PBRA and may include SBRA, if multiple clients are housed in several separate sponsored facility locations. For Emergency Shelter, this would also be considered "facility-based."

Type the letter "C" in Column H if the project is: <u>Tenant-based</u> -<u>scattered site</u>. Clients have leases or other occupancy agreements and are housed in market-rate, scattered-site residences. This includes TBRA and may include SBRA, if clients are housed in sponsored units where each unit has a distinct mailing address. For Emergency Shelter, this would be considered "voucher" and includes the use of hotel/motels.

**HUD McKinney-Vento Funding (Letter):** This column asks about the funding source for the project. McKinney-Vento funding includes the HUD Federal funding for homeless housing projects. If the project is not funded by one of the below funding sources, that would be indicated by NONE. If it was funded by a different Federal funding source, that would be indicated in column J. It is possible for a project to have multiple funding sources, but remember, this is for the project not the agency.



Column I: HUD McKinney-Vento Funded
Type the letter "A" in Column I if the project receives: Emergency Solution Grant Program (ESG) - Emergency Shelter (ES). This DOES <u>NOT</u> INCLUDE CV funds.
Type the letter "B" in Column I if the project receives: Emergency Soluation Grant Program (ESG) - Rapid Re-Housing (RRH). This does NOT include CV. This does <u>NOT</u> include projects only funded with HPP funds.
Type the letter "C" in Column I if the project receives: Continuum of Care Program (COC) - Safe Haven (SH)
Type the letter "D" in Column I if the project receives: Continuum of Care Program (COC) - Transitional Housing (TH)
Type the letter "E" in Column I if the project receives: Continuum of Care Program (COC) - Perm Supp Housing (PSH)
Type the letter "F" in Column I if the project receives: Continuum of Care Program (COC) - Rapid Re-housing (RRH)
Type the letter "G" in Column I if the project receives: Emergency Solution Grant Program (ESG) COVID (CV) - Emergency Shelter (ESG-CV ES). This includes motel vouchers.
Type the letter "H" in Column I if the project receives: Emergency Solution Grant Program (ESG) COVID (CV) - Rapid Re-housing (ESG-CV RRH).
Type the word "NONE" in Column I if the project receives none of the funding listed in option A-H.

**Other Federal Funding Sources (Letter):** This column asks about different federal funding sources than HUD funding. See the chart below for the options to choose from. Again, if the project has multiple sources of funding please list all that support the project. If the project does not receive any federal funding sources, you would write NONE in both Column I and J and that would indicate the project is funded through Non-Federal funding sources. Those funding sources do not need to be specified on the HIC.



Column J: Other Federal Funding Sources (	iden	tify all funding sources that the project receives)
Type the letter "A" in Column J if the project receives: HUD/VA Supportive Housing (HUD-VASH) funding. These projects are considered Permanent Supportive Housing (PSH).		Type the letter "K" in Column J if the project receives: HHS RHY Basic Center Programs (BCP) funding.
Type the letter "B" in Column J if the project receives: Supportive Services for Families Program (SSVF) funding. These projects are considered Rapid Re-Housing (RRH).		Type the letter "L" in Column J if the project receives: HHS RHY Transitional Living Program (TLP) funding.
Type the letter "C" in Column J if the project receives: VA Grant per Diem Program (GPD) - Bridge Housing funding		Type the letter "M" in Column J if the project receives: HHS RHY Maternity Group Homes for Pregnant and Parenting Youth (MGH)
Type the letter "D" in Column J if the project receives: VA Grant per Diem Program (GPD) - Low Demand funding.		Type the letter "N" in Column J if the project receives: HHS RHY Demonstration Project funding.
Type the letter "E" in Column J if the project receives: VA Grant per Diem Program (GPD) - Hospital to Housing (HH). These projects are considered Transitional Housing (TH).		Type the letter "O" in Column J if the project receives: HUD Housing Opportunities for Persons with AIDS (HOPWA) programs. This includes the following- Hotel/Motel Vouchers (ES), Permanent Housing (facility based or TBRA), Short-Term Housing (STH), and Transitional Housing funding.
Type the letter "F" in Column J if the project receives: VA Grant per Diem Program (GPD) - Clinical Treatment (CT). These projects are considered Transitional Housing (TH).		Type the letter "P" in Column J if the project receives: HUD Public and Indian Housing (PIH) programs (non-VASH). This includes a set aside or preference (including limited) for people who are homeless; family unification program (FUP) and fostering youth independence (FYI) vouchers; move on vouchers for people experineincg homelesness; and mainstream vouchers for those experiencing homelenssness. This includes both public housing and housing choice vouchers. This does <u>not</u> inclue EHV. These projects are considered Other Permanent Housing (OPH).
Type the letter "G" in Column J if the project receives: VA Grant per Diem Program (GPD) - Service Intensive (SI). These projects are considered Transitional Housing (TH).		Type the letter "Q" in Column J if the project receives some other type of funding not listed in A-P. This can include: CSBG, CDBG, EFSP, VOCA/VOWA. In addition to typing the letter "Q", identify what the funding source is as well.
Type the letter "H" in Column J if the project receives: VA Grant per Diem Program (GPD) - Transition in Place (TP). These projects are considered Other Permanent Housing (OPH).		Type the letter "R" in Column J if the project receives Emergency Housing Vouchers (EHV). These projects are considered Other Permanent Housing (OPH).
Type the letter "I" in Column J if the project receives: VA CRS Contract Residential Services funding.		Type the letter "S" in Column J if the project receives HOME funding. Type the letter "T" in Column I if the project receives HOME-ARP funding.
Type the letter "J" in Column J if the project receives: VA Community Contract Safe Haven Program (HCHV/SH) funding.		Type the word "NONE" in Column J if the project receives no Federal Funding.

**Year Round Beds and Units**: These columns are where each project specifies how many beds and units are available within the project to serve those experiencing homelessness. The tables are broken out into Year-Round beds (meaning they are available all year and every day), Seasonal Beds (meaning they are only available parts of the year), and Overflow & Voucher (meaning either the project has exceeded capacity of their project, or they are motel voucher projects). If they are seasonal beds, the availability starts and end date need to be added in columns AC and AD.



12						1						1		1		-	
							ear Rou	nd Bed	ls &	Uni	ts						
With Children							Without Children						With Only Children <18				
	Beds	Units	HMIS Beds	Veteran Beds	Youth Beds	Chronic Beds	Beds	HMIS Beds	Vete Be	eran eds	Youth Beds	Chronic Beds	Beds	HMIS Beds	Chronic Beds	Total Year-Ro und Beds	Total Year-Ro und Units
		ş	Seaso	onal Be	ds		Over Vor	Overflow & Voucher									
	Beds	HN	AIS	Availabili Start Dat	ty Ava	ailability ad Date	Beds	HM	IS ds	то	OTAL PIT						

<u>Unit</u> refers to the number of rooms/apartments/houses the project has available. Units only need to be determined for households with children. <u>Beds</u> refers to the actual number of sleeping spaces total in the project. For example, a shelter might have 20 rooms available for families and there are 2 beds in each room. The units would be 20, the beds would be 40.

\*Note: For Rapid Rehousing (RRH) projects, the bed and unit inventory must be filled out each month to show who is housed in the project at the time of the PIT. The inventory for RRH Projects should always be accurate to who is housed in the project. For example, in March you had 3 households in apartments with a total of 9 people. The bed and unit inventory for March would be 3 units and 9 beds. Then in April, the project housed another household with 4 people in it. Now the inventory would be 4 units and 13 beds.

\*\*Note: For RRH projects, only those who are housed should be included on the HIC. Participants are enrolled in RRH at the time they are deemed eligible, so that means they might be in a shelter and would be counted in the shelter section of the HIC in those PIT numbers. We do not want to duplicate counts, so until someone is housed in a unit and has a housing Move In Date in HMIS, they would not be included in the RRH inventory.

As stated, the inventory is divided into Year-Round, Seasonal and Overflow& voucher. It is then divided further into households with children, without children and with only children. With children means that there are children under the age of 18 in the household. There may be adult children with parents, but they would be counted in the without children section, unless there was a child under the age of 18. Without children means any household made up of all people 18 and over. Households with only children are households where all of the members are under the age of 18.

Some projects have dedicated beds for a specific sub-population. This means that those beds are specifically for Veterans, Youth, and/or Chronically Homeless. Each section is also divided up between veteran beds, youth beds and chronic homeless beds. This means these are beds dedicated to and held for those populations. You may have a veteran in the project, but that does not mean that the project has dedicated veteran beds.

\*\*\*Note: Again, the only place you will need to indicate units is for households with children. Households without children and only children, beds and units are considered a 1:1 relationship. 1 person = 1 bed = 1 unit.

The only other column that has not been discussed is the HMIS beds. This is where the project will indicate if they enter data into HMIS. As we saw above, if it is a VSP, they cannot enter into the general HMIS that other homeless service providers enter data and their information is gathered in column G. Any project that receives state or federal



funding must enter data into HMIS and that would be indicated in Columns M, R, W, AB or AF, unless it is a VSP and must enter their data into a comparable database.

Anywhere there is grey on the HIC means there is a formula. Please be careful not to overwrite the formulas. Another clue there are formulas, is if it says Total there is a formula to total things automatically. If a formula is overwritten, there are several ways to fix it.

1. You can always hit the undo button or CTRL Z.



- 2. If that does not work, you can always look at other cells in the same column and either pull the formula down by clicking the pointer in the box, go to the bottom right corner of that cell and hover until you see a + sign and then grab and pull the formula down. This will change the cells, so they match with the correct row in the formula.
- 3. The other way is to copy the formula from another cell or another coalition page and make sure you are changing the row numbers/column letters to make it calculate properly.

In the Appendix, there is a copy of each formula for the columns that have them, so you can copy and paste, but you will need to adjust those row numbers and column letters to make sure you are pulling the correct data into the formula. This section also explains what data each formula is grabbing and how they are calculated.

If you see columns blacked out, it means that the column does not pertain to that project type. For example, you will see that the seasonal beds information for the housing projects is blacked out and that is because there cannot be seasonal housing projects. There are only Year-Round housing projects.

**Point In Time Section**: The section below is where each agency (or the HIC Lead on behalf of each agency) will enter the number of people served on the fourth Wednesday of each month.

		Househ				
	With Only Children	Without Children	With Cl	hildren		
TOTAL PIT COUNT	# people	# people	# people	# house-h olds	Bed Utilization Rate	Unit Utilization Rate

The Total PIT Count section is a formula that should be left alone. The numbers will populate automatically. <u>Data</u> <u>should only be entered into # people for households with only children, without children and with children, and # <u>households.</u> Remember that to be a household, there must be at least 2 people and one of them needs to be under the age of 18. A data error would be 6 households with 9 people. There would need to be at least 12 people for that to make be correct.</u>



Bed Utilization and Unit Utilization Rate are also formulas and should be left alone. Below in the Appendix, the explanation for all formulas are written out so if there is an error or something doesn't seem correct, you can refer to that section to fix the issue. The HIC Lead or Balance of State staff should be the only ones fixing formulas.

**Contact Information**: This section was added per DEHCR's request, but it is used by HIC Leads, DEHCR staff and BOS Staff to get in touch with projects if there are questions. This section should be kept as up to date as possible.

Contact Information - Name Email Phone #
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**Notes Section**: At the bottom of the HIC, there is a section for notes. The HIC Lead, or the person making the change, should indicate if a project is deleted or added, if inventory changes, contact information changes, or any other changes are made to the HIC. Each change should be initiated so if there are questions, it is clear who to contact.

### HIC Change Form

If there are changes that need to be made to the HIC, either the HIC Lead or the BOS staff support person for your coalition can make the changes for you. If the request for changes is going to the BOS staff, there is a HIC Change Form that must be filled out. The form must be filled out completely for BOS staff to add delete a project. Specifically for adding a project, all information is necessary. As stated above, if there are cells that are highlighted yellow, it means there is either an error or that cell needs to be completed and BOS staff will not add a project without complete information. There is a copy of the HIC Change Form in the Appendix.

### APPENDIX

Formula Breakdown HIC Change Form Key Tab (in a Word doc)

### Formula Breakdown:

- Totals Row (this is different on every coalitions page because it depends how many projects, but each section (ES, TH, PSH, SH, OPH, RRH) has a Totals Row.: =SUM(K29:K36)
  - This is adding up all the rows in that column to get the total Beds, units, HMIS Beds, Veteran beds, Youth beds, and Chronic beds for each household type.



Agency Name (Organization): Emergency Shelter, Seasonal Shelters, Motel Vouchers	HMIS Provider ID#	HMIS Project Name	Beds	
Family Promise of Washington County	196	Family Promise of Washington County - Emergency Shelter	22	$\bigcap$
Family Promise of Washington County	246	Family Promise of Washington County - Karl's Place Emergency Shelter	0	
Family Promise of Washington County	291	Family Promise of Washington County - ESG Emergency Motel Voucher	0	7
FRIENDS, Inc.	1277	Friends Inc Emergency Shelter	20	_
TOTALS			42	

### • Column Y Total Year-Round Beds: =SUM(K7+Q7+V7)

• This is looking at column K, Q and V and totaling this information. Remember that for single people (households without children and children only, beds= units)

	All Year Round Beds & Units														
	With Children					Without Children					With Only Children <18				
	Beds	Units	HMIS Beds	Veteran Beds	Youth Beds	Chronic Beds	Beds	HMIS Beds	Veteran Beds	Youth Beds	Chronic Beds	Beds	HMIS Beds	Chronic Beds	Total Year-Ro und Beds
/	22	6	22	0	0	0		0	0	0	0		0	0	22
							$\smile$					$\bigcirc$			

• Column Z Total Year-Round Units: =SUM(L7+Q7+V7)

• This is looking at column L, Q and V and totaling this information together. Remember that for single people (households without children and children only, beds= units)

All Year Round Beds & Units															
With ChildrenWithout ChildrenWith Only Children															
Beds	Units	HMIS Beds	Veteran Beds	Youth Beds	Chronic Beds	Beds	HMIS Beds	Veteran Beds	Youth Beds	Chronic Beds	Beds	HMIS Beds	Chronic Beds	Total Year-Ro und Beds	Total Year-Ro und Units
22	6	22	0	0	0		0	0	0	0		0	0	22	6

### • Column AG Total PIT Count: =SUM(AH7:AJ7)

• This is looking at the PIT numbers of people, so you will notice that the # of households is not taken into account in this total. It is looking at columns AH, AI and AJ.



			Househo				
		With Only Children	Without Children				
	TOTAL PIT COUNT	# people	# people	# people	# house-h olds	Bed Utilization Rate	Unit Utilization Rate
(	0	0	0	0	0	0%	0%

### • Column AL Bed Utilization Rate: =AG7/SUM(AE7+AA7+Y7)

• This is taking the total PIT count (so again, number of people-does not include number of households) and dividing it by total year round beds, total seasonal beds and total overflow & voucher beds.

											Househ	olds			
				Seasonal Beds			Seasonal Beds Overflow & Voucher				With Only Children	Without Children	With C	hildren	
	Total Year-Ro und Beds	Total Year-Ro und Units	Beds	HMIS Beds	Availability Start Date	Availability End Date	Beds	HMIS Beds	TOTAL PIT COUNT	# people	# people	# people	# house-h olds	Bed Utilization Rate	
(	22	6	0	0	0	0	0	0	0	0	0	0	0	0%	
		+			+			/			•		•	-	

• Column AM Unit Utilization Rate: =SUM(AH7:AI7,AK7)/SUM(AE7+AA7+Z7)

• This is taking the sum from the PIT numbers of only children, without children and number of households (columns AH, AI, and AK) and dividing it by Total overflow & voucher beds, Total Seasonal Beds, and the Total year round units (columns AE, AA and Z).



If the project has zeros for columns K, L, Q, or V, there will be this error: #DIV/0!. This just means there are no units or beds to divide against. This error is acceptable for motel voucher projects if there was no one enrolled or RRH projects who have no one housed. For brick-and-mortar shelters, Transitional Housing Projects (TH), Permanent Supportive Housing (PSH), Other Permanent Housing (OPH) and RRH projects with people in housing, this means there is data missing and it needs to be filled in.



**HIC Change Form** 



# WI BOS Housing Inventory Chart Change Form

This form is to be filled out anytime there is a change on the HIC. If you are adding a new project, please refer to the Key Tab on the HIC to assist in answering the questions below. Please submit to <u>Carrie.poser@wibos.org</u> when you have completed the form.

Name	
Agency	
Coalition	
Date	

### Please indicate which of the following reasons for completing this form:

### 1. Removing a Project

 $\Box$  I am removing a project from the Housing Inventory Chart

 If you are removing a project, what is the name of the project?\_\_\_\_\_\_

### 2. Adding a Project

 $\Box$  I am adding a project to the Housing Inventory chart

• If you are adding a project, please complete the questions 1-31 below that pertain to your new project.

### 3. Modifying or Changing a Project

 $\Box$  I am modifying an existing project

• If you are modifying an existing project, please answer the questions 1-31 below that pertain to the modification of your project.

### For all changes please answer the following:

For removals, additions and modifications, what is the reason for the change?	
When does the change take effect (month/year)?	

### Additions or Modifications



If you are **adding or modifying a project**, you must answer the following questions. Again, please refer to the Key tab on the HIC for specific information on how to answer these questions.

1. Agency Name	
2. HMIS Provider ID	
3. HMIS Project Name	
4. Geocode (please see HIC for	
Geocode Tab)	
5. Status	
6. Target Pop.	DV Vet HIV
7. Shelter and Housing Type	
8. HUD McKinney Vento	□ A □ B □ C □ D □ E □ F □ G □ H □ None
Funded	
9. Other Federal Funding	
Sources (identify all funding	□ K □ L □ M □ N □ O □ P □ Q □ None
sources the project receives)	
10. How many beds for	
households with children does	
the project have?	
11. How many units for	
households with children does	
the project have?	
12. How many of those beds	
for households with children	
are entered into HMIS?	
13. How many of the beds for	
Households with children are	
veteran beds?	
14. How many of the beds for	
Nouseholds with children are	
15 How many of the bads for	
Households with children are	
dedicated to those	
experiencing chronic	
homelessness?	
16. How many beds for	
households without children	
does the project have?	
17. How many of those beds	
for households without	
children are entered into	
HMIS?	
18. How many of the beds for	
Households without children	
are veteran beds?	
19. How many of the beds for	
Households without children	
are Youth only beds?	



20. How many of the beds for	
Households without children	
are dedicated to those	
experiencing chronic	
homelessness?	
21. How many beds for	
households with <b>only</b> children	
does the project have?	
22. How many of those beds	
for households with <b>only</b>	
children are entered into	
HMIS?	
23. How many of the beds for	
Households with <b>only</b> children	
are dedicated to those	
experiencing chronic	
homelessness?	
24. What is the number of	
seasonal beds covered in	
HMIS?	
25. What is the availability	
start date for seasonal beds?	
26. What is the availability end	
date for seasonal beds?	
27. How many overflow beds	
does the project have?	
28. How many overflow beds	
are covered in HMIS?	



### Key Tab (in a Word version)

### **HIC Instructions**

Instructions: Remember, select the tab at the bottom of this document that corresponds with your local coalition/CoC. This document was formatted to print.

Beds and units included on the HIC are considered part of the CoC homeless assistance system. Beds and units in the HIC must be dedicated to serving people who are homeless, or for permanent housing projects, dedicated for persons who were homeless at entry. A project with dedicated beds/units is one where: (a) the primary intent of the proejct is to serve people who are homeless; (b) the project verifies homeless status as part of its eligibility determination; and (c) the actual project clients are predominately homeless (or for permanent housing, were homeless at entry). Beds in institutional settings not specifically dedicated for persons who are homeless (such as detox facilities, emergency rooms, jails, acute crisis or treatment centers) should not be included in the HIC. HUD considres extreme weather shelters as dedicated homeless inventory and should be included in the HIC. CoCs are required to include in the HIC all projects that are categorized as one of the identified project types (emergency shelter, transitional housing, safe haven, permanent housing) and that provide dedicated beds for persons who are homeless. Projects are included regardless of funding source and regardless of whether they enter into HMIS.

HIC/PIT lead = Identify the name of the person from the coalition that is responsible for the monthly Housing Inventory Chart (HIC) and reporting Point-in-time (PIT) data and the agency the person works for. This includes ensuring that the inventory for the agencies are accurate, the projects that should be removed are, and the data for the 4th Wednesday of each month is reported for all the projects. This is the person that will receive the google link for the HIC each month.

Coalition lead = Identify the name of the person from the coalition that runs the local coalition meeting and the agency the person works for.

EHH lead = Identify the name of the person from the coalition that is the lead for DEHCR's EHH grant and the agency the person works for.

BOS Board member = Identify the name of the person from the coalition that was elected to serve as the Balance of State CoC board member and the agency the person works for.

SSO Staff/CE Lead = Identify the name of the person from the coalition that is funded through the Balance of State CoC SSO grant and the agency the person works for. For East Central & Jefferson, identify the name of the person from the coalition that is the CE lead and the agency the person works for.

### \*just this screen shot needs to be updated (remove CE lead)

#### There are 6 separate sections on the chart for each type of project.

(1) Emergency Shelter, Seasonal Shelter, Motel Voucher Programs

(2) Transitional Living/Housing Programs

- (3) Permanent Supportive Housing Programs
- (4) Other Permanent Housing Programs
- (5) Safe Haven Programs (only on Waukesha Tab)
- (6) Rapid Re-Housing Programs



To be considered PSH, the project must provide longterm housing to homeless individuals with disabilities and families in which the adult in the household has a disability, and supportive services that are designed to meet the needs of the program participants must be available to the household.

To be considered OPH, the provider must provide longterm housing that is not otherwise considered permanent supportive housing or rapid re-housing. HUD's HMIS Data Standards defines two project types that represent the other permanent housing inventory – PH: Housing with Services and PH: Housing Only. PH: Housing with Services projects provide long-term housing and supportive services for homeless persons, but do not limit eligibility to persons with a disability. PH: Housing Only projects provide long-term housing for homeless persons, but do not make supportive services available as part of the project. It is critical to note that the CoC should look at the entire service package of these permanent housing projects, as opposed to what is funded by certain funding streams. CoCs should remember that these OPH beds should only be reported if they are dedicated to homeless persons, as outlined in the first paragraph of this section.

To be considered a RRH bed and unit, the project must provide short-term or medium-term assistance (up to 24 months), the lease for units must be between the landlord and the program participant, the program participant must be able to select the unit they lease, and the provider cannot impose a restriction on how long the person may lease the unit, though the provider can impose a maximum length of time the grant funds will be used to assist the program participant in the unit.



### Household Types

Household without children - serving households that include one or more adults with no children under the age of 18

Household with children - serving households that include at least 1 adult and 1 child (under 18)

Household with only children - serving households composed exclusively of persons under age 18, including one-child households, multi-child households, or other configurations composed only of children

### NOTES

The NOTES Section is found at the end of the chart (remember to scroll all the way down). Please write down any changes made to the HIC inventory (Columns A-AF) from month-tomonth. This includes a reduction in units available because of construction, lack of heat or power, and COVID. Please identify when projects are added to the chart and when they are removed and why.

**NOTE:** SBRA = Sponsor-based Rental Assistance; TBRA = Tenant Based Rental Assistance; PBRA Project-based Rental Assistance



#### Column A: Agency Name (Organization)

For every project, write the agency or organization's name in Column A.

#### Column B: HMIS Provider ID#

All projects (even those that do not use HMIS for recording data) are assigned an HMIS ID# in the NEW system (Clarity). Write the NEW number that corresponds with the project in Column B.

#### Column C: HMIS Project Name

All projects (even those that do not use HMIS for recording data) are assigned an HMIS Project Name. The name should be written exactly in Column C.

#### Column D: Geocode

Type the geocode number from the tab labeled "Geocode Guide" in Column D. The number should reflect the location of the project's principal site or, for multiple site projects, the location in which the majority of the project's clients are housed.

### Column E: Status (of the Project)

Type the letter "C" in Column E if the project was available for occupancy on the night of the PIT.

Type the letter "U" in Column E if the project was not available for occupancy as of the night of the PIT (not in operation yet).



### Column F: Target Population

If 75% or more of the clients in the project are survivors of Domestic Violence, type the letters "DV" in Column F. All projects that serve people currently experiencing homeless because they are fleeing domestic violence, dating violence, sexual assault, or stalking.

If 75% or more of the clients in the project are Veterans, type the letters "VET" in Column F.

If 75% or more of the clients in the project have HIV/AIDS, type the letters "HIV" in Column F.

### Column G: Victim Service Provider \*NEW in 2022

Victim service providers are prohibited by VAWA from entering data into HMIS. CoCs must report whether victim service providers in their geogrpahy are participating in a comparable database. All CoC and ESG program funded projects operated by a victim service provider are required to collect data in a comparable database. For more information about comparable databases, please refer to the HMIS Comparable Database Manual at <u>https://www.hudexchange.info/resource/6305/hmis-comparabledatabase-manual/.</u>

In Column G, write Y or N to indicate whether the organization uses a comparable database. In addition, write the name of the database next to the "Y."



Column I: HUD McKinney-Vento Funded
Type the letter "A" in Column I if the project receives: Emergency Solution Grant Program (ESG) - Emergency Shelter (ES). This DOES <u>NOT</u> INCLUDE CV funds.
Type the letter "B" in Column I if the project receives: Emergency Soluation Grant Program (ESG) - Rapid Re-Housing (RRH). This does NOT include CV. This does <u>NOT</u> include projects only funded with HPP funds.
Type the letter "C" in Column I if the project receives: Continuum of Care Program (COC) - Safe Haven (SH)
Type the letter "D" in Column I if the project receives: Continuum of Care Program (COC) - Transitional Housing (TH)
Type the letter "E" in Column I if the project receives: Continuum of Care Program (COC) - Perm Supp Housing (PSH)
Type the letter "F" in Column I if the project receives: Continuum of Care Program (COC) - Rapid Re-housing (RRH)
Type the letter "G" in Column I if the project receives: Emergency Solution Grant Program (ESG) COVID (CV) - Emergency Shelter (ESG- CV ES). This includes motel vouchers.
Type the letter "H" in Column I if the project receives: Emergency Solution Grant Program (ESG) COVID (CV) - Rapid Re-housing (ESG-CV RRH).

Type the word "NONE" in Column I if the project receives none of the funding listed in option A-H.



Column J: Other Federal Funding Sources	(ider	ntify all funding sources that the project receives)
Type the letter "A" in Column J if the project receives: HUD/VA Supportive Housing (HUD-VASH) funding. These projects are considered Permanent Supportive Housing (PSH).		Type the letter "K" in Column J if the project receives: HHS RHY Basic Center Programs (BCP) funding.
Type the letter "B" in Column J if the project receives: Supportive Services for Families Program (SSVF) funding. These projects are considered Rapid Re-Housing (RRH).		Type the letter "L" in Column J if the project receives: HHS RHY Transitional Living Program (TLP) funding.
Type the letter "C" in Column J if the project receives: VA Grant per Diem Program (GPD) - Bridge Housing funding. These Type the letter "D" in Column J if the project receives: VA Grant per Diem Program (GPD) - Low Demand funding. These		Type the letter "M" in Column J if the project receives: HHS RHY Maternity Group Homes for Pregnant and Parenting Youth (MGH) Type the letter "N" in Column J if the project receives: HHS RHY Demonstration Project funding.
Type the letter "E" in Column J if the project receives: VA Grant per Diem Program (GPD) - Hospital to Housing (HH). These projects are considered Transitional Housing (TH).		Type the letter "O" in Column J if the project receives: HUD Housing Opportunities for Persons with AIDS (HOPWA) programs. This includes the following- Hotel/Motel Vouchers (ES), Permanent Housing (facility based or TBRA), Short-Term Housing (STH), and Transitional Housing funding.
Type the letter "F" in Column J if the project receives: VA Grant per Diem Program (GPD) - Clinical Treatment (CT). These projects are considered Transitional Housing (TH).		Type the letter "P" in Column J if the project receives: HUD Public and Indian Housing (PIH) programs (non-VASH). This includes a set aside or preference (including limited) for people who are homeless; family unification program (FUP) and fostering youth independence (FYI) vouchers; move on vouchers for people experineincg homelesness; and mainstream vouchers for those experiencing homelenssness. This includes both public housing and housing choice vouchers. This does <u>not</u> inclue EHV. These projects are considered Other Permanent Housing (OPH).
Type the letter "G" in Column J if the project receives: VA Grant per Diem Program (GPD) - Service Intensive (SI). These projects are considered Transitional Housing (TH).		Type the letter "Q" in Column J if the project receives some other type of funding not listed in A-P. This can include: CSBG, CDBG, EFSP, VOCA/VOWA. In addition to typing the letter "Q", identify what the funding source is as well.
Type the letter "H" in Column J if the project receives: VA Grant per Diem Program (GPD) - Transition in Place (TP). These projects are considered Other Permanent Housing (OPH).		Type the letter "R" in Column J if the project receives Emergency Housing Vouchers (EHV). These projects are considered Other Permanent Housing (OPH).
Type the letter "I" in Column J if the project receives: VA CRS Contract Residential Services funding.		Type the letter "S" in Column J if the project receives HOME funding. Type the letter "T" in Column I if the project receives HOME-ARP funding.
Type the letter "J" in Column J if the project receives: VA Community Contract Safe Haven Program (HCHV/SH) fundi	ng.	Type the word "NONE" in Column J if the project receives no Federal Funding.



### All Year Beds & Units (Column K - Z)

#### Households with Children

Write the number of <u>beds</u> for people in households with children in Column K.

Write the number of <u>units</u> (i.e. rooms, apartments) for people in households with children in Column L.

Write the number of beds for people in households with children that are reported (data entered) in <u>HMIS</u> in Column M. This should be 0 (if the project does not enter into HMIS) or equal to the number in Column K.

Write the number of beds that are dedicated to house or shelter homeless <u>veterans</u> and their household members in Column N. If there are no Veteran beds, write "0." This number should be equal or less than the number in Column K.

Write the number of beds that are dedicatd to house or shelter homeless <u>youth</u>, including parenting youth and unaccmpanied youth and their household members (if applicable) in Column O. These beds must all be youth beds. If there are no Youth beds, write "0." This number should be equal or less than the number in Column K.

Write the number of beds that are dedicated to house or shelter <u>chronically</u> homeless persons and their household members in Column P. If there are no Chronic beds, write "0." This number should be equal or less than the number in Column K.



#### Households without Children

Write the number of <u>units</u> (i.e. rooms, apartments) for people in households without children in Column Q.

Write the number of beds for people in households without children that are reported (data entered) in <u>HMIS</u> in Column R. This should be 0 (if the project does not enter into HMIS) or equal to the number in Column Q.

Write the number of beds that are dedicated to house or shelter homeless <u>veterans</u> and their household members (if applicable) in Column S. If there are no Veteran beds, write "0." This number should be equal or less than the number in Column Q.

Write the number of beds that are dedicatd to house or shelter homeless <u>youth</u>, including unaccmpanied youth and their household members (if applicable) in Column T. These beds must all be youth beds. If there are no Youth beds, write "0." This number should be equal or less than the number in Column Q.

Write the number of beds that are dedicated to house or shelter <u>chronically</u> homeless persons and their household members (if applicable) in Column U. If there are no Chronic beds, write "0." The number should be equal or less than the number in Column Q.

#### Households only Children

Write the number of <u>beds</u> for people in households with only children in Column V.

Write the number of beds for people in households with only children that are reported (data entered) in <u>HMIS</u> in Column W. This should be 0 (if the project does not enter into HMIS) or equal to the number in Column V.

Write the number of beds that are dedicated to house or shelter <u>chronically</u> homeless persons and their household members (if applicable) in Column X. If there are no Chronic beds, write "0." The number should be equal or less than the number in Column V.

### TOTAL

This column will automatically calculate the total number of year round beds in Column Y.

This column will automatically calculate the total number of year round units in Column Z.



### Seasonal Beds (Column AA - AD)

Write the number of seasonal beds in Column AA. These beds are not available year-round, but instead are available on a planned bsis with set start and end dates. Identify only the total number of seasonal beds available for occupancy on the night of the PIT.

Write the number of seasonal beds that are reported (data entered) in HMIS in Column AB. This should be 0 (if the project does not enter into HMIS) or equal to the number in Column AA.

Write the date that the seasonal beds will become available (START) in Column AC. Please use this format -MM/DD/YYYY.

Write the date that the seasonal beds will stop being available (END) in Column AD. Please use this format - MM/DD/YYYY.

### Overflow/Voucher Beds (Column AE & AF)

Write the number of overflow or voucher (motel/hotel) beds in Column AE. 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. Only identify the number of beds occupied on the night of the count.

Write the number of overflow or voucher (motel/hotel) beds that are reported (data entered) in HMIS in Column AF. This should be 0 (if the project does not enter into HMIS) or equal to the number in Column AE.

NOTE	1 11	 	 

NOTE: a bed is considered "an HMIS participating bed" if the project makes a reasonable effort to record all universal data elements on all clients served in that bed.



### Point-in-Time (PIT) (Column AG - AM)

This column will automatically calculate the total number of people for the PIT in Column AG.

Write the total number of <u>people in households with only children</u> on the night of the count in Column AH. Remember, the night of the count is the 4th Wednesday overnight of each month.

Write the total number of <u>people in households without children</u> on the night of the count in Column AI. Remember, the night of the count is the 4th Wednesday overnight of each month.

Write the total number of <u>people in households with children</u> on the night of the count in Column AJ. Remember, the night of the count is the 4th Wednesday overnight of each month.

Write the total number of <u>households (not people) with children</u> on the night of the count in Column AK. Remember, the night of the count is the 4th Wednesday overnight of each month.

This column will automatically calcuate the bed utilization for this project on the night of the count in Column AL.

This column will automatically calcuate the unit utilization for this project on the night of the count in Column AM.

HIC Instructions, updated 2.1.2022 (CP)

Contact Information (Column AO-AQ)

Type the name of the project's contact person(s) in Column AO.

Type the contact person's email address in Column AP. If there is more than one person, please include everyone's email address.

Type the contact person's phone number in Column AQ. If there is more than one person, please inclue everyone's phone number.



# 2023 Looker Reports in Clarity

HIC Supplement Report (Under Data Analysis/WI Clarity Reports)

Run this report for the following program types: Permanent Supportive Housing, Other Permanent Housing, and Rapid Re-Housing

Report Prompts:					
PIT Date	4th Wednesday of the Month				
PIT Date Plus one Day	One day after the PIT Date				
Program CoC					
Programs Name	Select your programs				
Local Coalition	LEAVE BLANK				
PIT Report (Under Data Analysis/WI Clarity Reports)					

Run this report for the following program types: Emergency Shelter/Motel Vouchers, Transitional Housing and Safe Havens

Report Prompts:				
PIT Date	4th Wednesday of the Month			
PIT Date Plus one Day	One day after the PIT Date			
Program CoC				
Programs Name	Select your programs			