Pre-Housing Inventory Count (HIC) Survey Training

October 31, 2019
Max Burns
House Keeping Rules

• All lines have been muted
• During the presentation, please enter questions in the chat box
• If time allows, I will open up lines for questions
  – Please raise hand
  – If connected via computer, please ensure mic is working. If not, please ask question through the phone call in option
Learning Objectives

• Understand the Housing Inventory Count (HIC) Process and Purpose

• Learn about the new Pre-HIC process.

• Be able to complete the Pre-HIC survey for each program at your agency
Agenda

• HIC History & Purpose
• What is New
  – Pre-HIC Process
  – Pre-HIC Survey
• Due Date
• Helpful Tips
• Resources/Contacts
Housing Inventory Count Common Terms & Acronyms

• Housing Inventory Count (HIC)
• Pre-HIC
• Point-in-Time (PIT)
• U.S Department of Housing Urban Development (HUD)
• Homeless Data Exchange (HDX)
• Chicago Program Model Chart (PMC)
• Continuum of Care (CoC)
What is the Housing Inventory Count?
Housing Inventory Count History (HIC) & Purpose

History
• HUD requirement
• Annually conducted
• Last 10 days in January
• In conjunction with the Point-in-Time Count

Purpose
• Contributes to Annual Homeless Assessment Report (AHAR)
• Bed and Unit inventory utilized for Coordinated Entry
• Contributes to CoC application
• Data informed decisions on funding decisions
Beds vs. Units

**Bed**: a piece of furniture used for sleep (typically a framework with a mattress)

**Unit**: is intended to be considered as a separate living quarter. A single room can be seen as a separate living quarter or an apartment
2020 HIC - 2 Phases

Phase one - the ‘Pre-HIC’ verify data found in 2020 Pre-HIC Reference Report from HMIS

– Must confirm or update data relating to the following elements

• Project information
• Project type
• Target population
• Units (Funded, Over-capacity, Total)
• Beds (Funded, Over-capacity, Total)
• Emergency Shelter Beds (ES Project type only)
• HMIS participation
2020 HIC - 2 Phases

Phase two, will take place starting January 23, until January 27, 2020 will ask questions regarding

• New/Under development inventory
• Unit occupancy
• Bed occupancy
• Dedicated beds
• Other Information (Partnerships, other information)
2020 HIC Timeline

Phase 1 – Pre-HIC
• Pre-HIC Trainings
• Pre-HIC Submissions: November 7 – 12
• Pre-HIC Follow Up: November 12 – December 1

Phase 2 – HIC
• HIC Trainings
• HIC Submissions: January 23 – January 27
• HIC Follow Up: January 28 – March 1
Who Needs to Submit a Pre-HIC Survey

Any project that has beds and units dedicated to serve homeless persons and/or families

1. The project verifies homeless status as part of its eligibility determination

2. The actual project clients are predominantly homeless
Who Needs to Submit a Pre-HIC Survey

• HUD Project Types included in the HIC
  A. Emergency Shelter (ES)
  B. Transitional Housing (TH)
  C. Safe Haven (SH)
  D. Joint Transitional Housing and Rapid Rehousing (J-TH/RRH)
  E. Permanent Housing (PH)
     1.) Permanent Supportive Housing (PSH)
     2.) Rapid Re-housing (RRH)
     3.) Other PH
        – PH – Housing with Services (no disability required)
        – PH – Housing Only
How Many and Due Date

• A separate Pre-HIC survey must be completed for each project within your agency

• Each Pre-HIC survey must be submitted no later than 5:00 PM on Tuesday, November 12, 2019
2020 Pre-HIC Survey Sections

Section 1: Project Information
Section 2: Project Type
Section 3: Target Population
Section 4: Units (Funded, Over-Capacity, Total)
Section 5: Beds (Funded, Over-Capacity, Total)
Section 5 ES: Emergency Shelters Only
Section 6: HMIS Participation
<table>
<thead>
<tr>
<th>Project ID</th>
<th>Provider</th>
<th>Provider Level</th>
<th>HUD Standards Information Program Type Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>239</td>
<td>Franciscan Outreach Association Streets to Home Initiative - Case Management(239)</td>
<td>3</td>
<td>PH - Permanent Supportive Housing (disability required for entry) (HUD)</td>
</tr>
<tr>
<td>239</td>
<td>Franciscan Outreach Association Streets to Home Initiative - Case Management(239)</td>
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</tr>
<tr>
<td>230</td>
<td>Franciscan Outreach Association Streets to Home Initiative - Case Management SUMMARY</td>
<td>3</td>
<td>PH - Permanent Supportive Housing (disability required for entry) (HUD)</td>
</tr>
<tr>
<td>249</td>
<td>Good News Partners New Life Interim Housing (249)</td>
<td>3</td>
<td>Emergency Shelter (HUD)</td>
</tr>
<tr>
<td>250</td>
<td>Healthcare Alternative Systems Transitional Housing (250)</td>
<td>3</td>
<td>Transitional housing (HUD)</td>
</tr>
<tr>
<td>259</td>
<td>Healthcare Alternative Systems Transitional Housing SUMMARY</td>
<td>3</td>
<td>Transitional housing (HUD)</td>
</tr>
</tbody>
</table>
### Chicago Type

**HMIS specific data about project**

Each Inventory Title

<table>
<thead>
<tr>
<th>Chicago Program Type</th>
<th>HUD/HMIS Provider?</th>
<th>Operational?</th>
<th>Users ServicePoint?</th>
<th>Bed and Unit Inventory CoC Code</th>
<th>Inventory Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanent Supportive Housing</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>IL-610</td>
<td>Franciscan Outreach Streets-to-Home (0239)</td>
</tr>
<tr>
<td>Permanent Supportive Housing</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>IL-610</td>
<td>Franciscan Outreach Streets-To-Home (0239) Lakeview YMCA</td>
</tr>
<tr>
<td>Interim Housing</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>IL-610</td>
<td>New Life Interim- FAM</td>
</tr>
<tr>
<td>Interim Housing</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>IL-610</td>
<td></td>
</tr>
<tr>
<td>Interim Housing</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>IL-610</td>
<td>Transition Housing Program-SIN</td>
</tr>
</tbody>
</table>
### Bed and Unit Inventory

<table>
<thead>
<tr>
<th>Inventory Household Type</th>
<th>Inventory Bed Type</th>
<th>Availability</th>
<th>Unit Inventory</th>
<th>Bed Inventory</th>
<th>Inventory Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Households without children</td>
<td>Facility-based</td>
<td>Year-Round</td>
<td>23</td>
<td>23</td>
<td>10/2/2018</td>
</tr>
<tr>
<td>Households without children</td>
<td>Facility-based</td>
<td>Year-Round</td>
<td>10</td>
<td>10</td>
<td>10/2/2018</td>
</tr>
<tr>
<td>Households with at least one adult and one child</td>
<td>Facility-based</td>
<td>Year-Round</td>
<td>33</td>
<td>33</td>
<td>10/2/2018</td>
</tr>
<tr>
<td>Households without children</td>
<td>Facility-based</td>
<td>Year-Round</td>
<td>1</td>
<td>36</td>
<td>1/25/2018</td>
</tr>
<tr>
<td>Households without children</td>
<td>Facility-based</td>
<td>Year-Round</td>
<td>4</td>
<td>16</td>
<td>2/1/2013</td>
</tr>
</tbody>
</table>

**Inventory Household Type**  
**Inventory Bed Type** *(HUD Type – Emergency Shelters only)*  
**Availability** *(HUD Type – Emergency Shelters only)*  
**Unit Inventory**  
**Bed Inventory**  
**Inventory Start Date**
<table>
<thead>
<tr>
<th>HMIS Participating Beds</th>
<th>Bed and Unit Inventory Participation Start Date</th>
<th>Bed and Unit Inventory Participation End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
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<td>36</td>
<td></td>
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</tr>
<tr>
<td>36</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

HMIS Participating Beds
Bed and Unit Inventory Participation Start Date
Bed and Unit Inventory Participation End Date
Helpful tip
Hold “Control” and “F Key” on keyboard to ‘find’ HMIS IDs or Project Names by highlighting the column you wish to search.

<table>
<thead>
<tr>
<th>Project ID</th>
<th>Provider</th>
<th>Provider Level</th>
<th>HUD Standards Information Program Type Code</th>
<th>Chicago Program Type</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1009</td>
<td>New ES Program</td>
<td></td>
<td>Emergency Shelter (HUD)</td>
<td>Update</td>
<td>Update</td>
</tr>
<tr>
<td>210</td>
<td>Franciscan Outreach Association Streets to Home Initiative - Case Management(239)</td>
<td>3</td>
<td>PH - Permanent Supportive Housing (disability required for entry) (HUD)</td>
<td>Update</td>
<td>Update</td>
</tr>
<tr>
<td>239</td>
<td>Franciscan Outreach Association Streets to Home Initiative - Case Management(239)</td>
<td>3</td>
<td>PH - Permanent Supportive Housing (disability required for entry) (HUD)</td>
<td>Permanent Supportive Housing</td>
<td>N/A</td>
</tr>
<tr>
<td>239</td>
<td>Franciscan Outreach Association Streets to Home Initiative - Case Management SUMMARY</td>
<td></td>
<td></td>
<td>Permanent Supportive Housing</td>
<td>N/A</td>
</tr>
<tr>
<td>249</td>
<td>Good News Partners New Life Interim Housing SUMMARY</td>
<td></td>
<td>Emergency Shelter (HUD)</td>
<td>Emergency Shelter (HUD)</td>
<td>N/A</td>
</tr>
<tr>
<td>269</td>
<td>Healthcare Alternative Systems Transitional Housing(269)</td>
<td>3</td>
<td>Transitional Housing (HUD)</td>
<td>Transitional Housing (HUD)</td>
<td>N/A</td>
</tr>
<tr>
<td>259</td>
<td>Healthcare Alternative Systems Transitional Housing SUMMARY</td>
<td></td>
<td></td>
<td>Transitional Housing (HUD)</td>
<td>N/A</td>
</tr>
<tr>
<td>270</td>
<td>Heartland Human Care Services Neon Street Programs(270)</td>
<td>3</td>
<td>Transitional Housing (HUD)</td>
<td>Transitional Housing (HUD)</td>
<td>N/A</td>
</tr>
<tr>
<td>276</td>
<td>Heartland Human Care Services Rafael Center-Shelter Plus Care(276)</td>
<td>3</td>
<td>PH - Permanent Supportive Housing (disability required for entry) (HUD)</td>
<td>Permanent Supportive Housing</td>
<td>N/A</td>
</tr>
<tr>
<td>277</td>
<td>Holy Rock Outreach Ministries Helping Arms Interim Housing Program(277)</td>
<td>3</td>
<td>Emergency Shelter (HUD)</td>
<td>Emergency Shelter (HUD)</td>
<td>N/A</td>
</tr>
</tbody>
</table>
Section 1: Project Information

Login - HIC Information

We have created the [HMIS 2020 Pre HIC Reference Report](#) which will show the Provider/Project SUMMARY and HMIS Project ID as *it is in HMIS*. The Username is entered exactly as it is listed in the [HMIS 2020 Pre HIC Reference Report](#). The password is the HMIS ID associated with the Project.

Username: Provider/Project SUMMARY

Password: HMIS Project ID

*In order for the login to function properly, please copy the Project Name directly from the [HMIS 2020 Pre HIC Reference Report](#) and paste into the Username Box.*
## Section 1: Project Information


<table>
<thead>
<tr>
<th>Project ID</th>
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</tr>
</thead>
<tbody>
<tr>
<td>239</td>
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<td>Healthcare Alternative Systems Transitional Housing SUMMARY</td>
</tr>
</tbody>
</table>
## Section 1: Project Information

2020 Pre-HIC Reference Report – New Projects

<table>
<thead>
<tr>
<th>Project ID</th>
<th>Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>1000</td>
<td>New ES Program</td>
</tr>
<tr>
<td>2002</td>
<td>New PSH Program</td>
</tr>
</tbody>
</table>
Section 1: Project Information

New Projects

4. Is this a new project that is not listed on the HMIS 2020 Pre HIC Reference Report? *

- [ ] Yes - It is a New Project
- [ ] No - It is not a New Project

You indicated this is a new project. To update HMIS 2020 Pre HIC Reference Report, please provide the HMIS ID number (if applicable) and official project name. *

- [ ] HMIS ID
- [ ] Project Name

Please use the most up to date HMIS ID. All Chicago will contact your agency in December.
Section 1: Project Information

- Agency Name
- Primary Contact
  - Full Name
  - Title
  - Email Address
- Secondary Contact
  - Full Name
  - Email Address
- Operating Start Date
- New Project – (Yes / No)
  - If Yes, HMIS ID and Project Name
- Site Address
- Funding Sources
Section 1: Project Information

Project Site Information

5. Enter the Complete Address for this Project.

For Clustered, Multiple Sites, and Scattered Sites projects: Please enter complete address (including zip code) where the majority of beds & units are located OR agency’s complete mailing address.

Domestic Violence - Victim Service Providers (VSP) MUST NOT provide address information, however, the project must include a zip code.

* 

- Site-based/single site Address (include zip code):  
- Site-based/clustered-multiple sites Address (include zip codes):  
- Tenant-based/scattered sites (include zip codes):  
- Domestic Violence - Address Confidential (only zip codes)  
Section 1: Project Information

Funding Sources

7. Please indicate if the Project receives any of the following funding sources.

Please select all funding sources for this project, even if it only funds partial beds.

- [ ] CHA: Chicago Housing Authority
- [ ] CLIHTF: Chicago Low Income Housing Trust Fund
- [ ] Corporate Donations
- [ ] DFSS: Chicago Department of Family and Supportive Services
- [ ] HHS RHY: Health and Human Services Runaway Homeless Youth
- [ ] HUD CDBG: HUD Community Development Block Grant
- [ ] HUD HOPWA: HUD Housing Opportunities for Persons with AIDS
- [ ] HUD/VASH: HUD Veterans Affairs Supportive Housing
- [ ] IDHS: Illinois Department of Human Services
- [ ] Individual/Private Donations
- [ ] PIH/Non-VASH: HUD Public and Indian Housing (PIH) Programs (non-VASH), including public housing and housing choice voucher inventory that is dedicated to homeless persons
- [ ] Program Fees
- [ ] VA: Department of Veterans Affairs
- [ ] N/A: Our agency only receives HUD McKinney-Vento funds.
- [ ] Other - Write In: ____________________________
Section 2: Project Type

Confirm data from HMIS report

If you indicate a correction is needed, additional questions will populate

• You will indicate if correction is related to Chicago Model Type, HUD Type, or both
• Drop down menu to select the correct type
Section 2: Project Type

1. Is the Chicago Program Model and HUD Type as listed on the [HMIS 2020 Pre HIIC Reference Report](#) correct for this Project?

   Please note the [Chicago Program Models Chart](#) was revised on 12/2014. We encourage you to review the [Chicago Program Models Chart](#) to ensure the correct type has been selected for this project. *

   - Yes
   - No

2. Is this Project considered an Emergency Shelter – HUD Type?

   If your project is an Emergency Shelter - HUD Type, please indicate 'Yes - It is an Emergency Shelter'. Future questions in the survey depend on this question to be accurately answered! *

   - Yes - It is an Emergency Shelter
   - No - It is not an Emergency Shelter
**Section 2: Project Type**

**Example - HUD Type correction**

Section 2: Project Type

a. Is the Chicago Program Model and HUD Type as listed on the [HMIS 2020 Pre HIC Reference Report](#) correct for this Project?

Please note the [Chicago Program Models Chart](#) was revised on 12/2014. We encourage you to review the [Chicago Program Models Chart](#) to ensure the correct type has been selected for this project.

- Yes
- No

You indicated either the Chicago Program Model Type or HUD type was incorrect, please select which type must be updated.

- [ ] Chicago Program Model Type
- [x] HUD Type

You indicated the HUD type was incorrect for this project. Please select the correct HUD type for this project.

<table>
<thead>
<tr>
<th>Permanent Housing - Permanent Supportive Housing (PH-PSH): A project that provides long-term housing in which one member of the household has a disability and supportive services are designed to meet the needs of that household.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transitional Housing (TH): A project designed to provide interim stability and support to successfully move to and maintain permanent housing within 24 months or such longer period as HUD determines necessary. The project provides temporary shelter (lodging) for the homeless in general or specific populations of the homeless for a period of 90 days or less.</td>
</tr>
<tr>
<td>Permanent Housing - Permanent Supportive Housing (PH-PSH): A project that provides long-term housing in which one member of the household has a disability and supportive services are designed to meet the needs of that household.</td>
</tr>
<tr>
<td>Permanent Housing - Rapid Rehousing (PH-RRH): A project that provides short-term or medium-term assistance (up to 24 months). The lease for units must be between the landlord and the participant, the participant must be able to afford the rent, and must have access to clinical and social services.</td>
</tr>
<tr>
<td>Permanent Housing - Other Permanent Housing (PH-OPH): A project that provides long-term housing that is not otherwise considered permanent supportive housing or rapid re-housing.</td>
</tr>
</tbody>
</table>
Section 3: Target Population

Confirm data from HMIS report

If you indicate a correction is needed, additional questions will populate

- You will indicate what Target population your project serves.

What does “target population” mean?
Section 3: Target Population

The following section is designed to identify projects who have HUD Target Populations. In order for projects to indicate a HUD Target Population, they must meet the following requirements:

1. The project intends to serve that specific population
2. At least three fourths (75%) of the clients served by the project fit the target group descriptor.

Only one descriptor can be selected for the HUD Target Population per project. If this project doesn’t target a specific population, please select N/A.

Target Population

- DV: Domestic violence victims
- HIV: Persons with HIV/AIDS
- N/A: Not Applicable - Project does not have a HUD Target Population

10. Is the Target Population on the [HMIS 2020 Pre HIC Reference Report](#) correct for the Project? *

   ○ Yes
   ○ No
Section 3: Target Population

Example - Target Population correction

The following section is designed to identify projects who have HUD Target Populations. In order for projects to indicate a HUD Target Population, they must meet the following requirements:

1. The project intends to serve that specific population
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Target Population

- DV: Domestic violence victims
- HIV: Persons with HIV/AIDS
- N/A: Not Applicable - Project does not have a HUD Target Population

10. Is the Target Population on the HMIS 2020 Pre HIC Reference Report correct for the Project? *

  - [ ] Yes
  - [x] No

You indicated the Target Population was incorrect. Please select the correct Target Population for this Project. *

  - [ ] DV: Domestic violence victims
  - [ ] HIV: Persons with HIV/AIDS
  - [ ] N/A: Not Applicable - Project does not have a HUD Target Population
Bed and Unit Calculation Methodology

Funded vs Over-Capacity
  – We identify ‘Over-Capacity’ by subtracting ‘Funded’ from the ‘Total Inventory’

Singles, Families, and Children Only
  – We identify ‘Singles’ by subtracting ‘Families’ and ‘Children Only’ from the ‘Total Inventory’

Please ensure your data is accurate and up to date
Section 4: HIC Units

Confirm data from HMIS report

If you indicate a correction is needed, additional questions will populate

• You will provide the Total number of Units
• How many of them are required by a contract, if any
• How many units serve households with at least 1 adult & 1 child
• How many units serve children only
Section 4: HIC Units

The following section asks about units within this Project. The [HMIS 2020 Pre HIC Reference Report](#) is based on information currently in HMIS. Please review to ensure the total includes all available units in the Project.

For the purpose of the HIC, please review the following definitions when referring to a UNIT.

**Unit:** A unit is intended to be separated living quarters. This could be a single room occupied as separate living quarters or an apartment.

**Funded Unit:** Please indicate the total funded number of units available and is indicated to the funding source for the project.

**Total Unit Inventory:** The number of Funded Units plus the number of Over-Capacity Units will equal the Total Unit Inventory.

1. Does the Unit Inventory for this project listed on the [HMIS 2020 Pre HIC Reference Report](#) match the project's inventory as of November 7, 2019? *
   - [ ] Yes
   - [ ] No
## Section 4: HIC Units

### Example – Updating Units

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the Unit Inventory for this project listed on the <strong>HMIS 2020 Pre HIC Reference Report</strong> match the project's inventory as of November 7, 2019?</td>
<td>Yes</td>
</tr>
<tr>
<td>You indicated the Total Unit Inventory does not match the current inventory of the project. Please provide an up to date total.</td>
<td>78</td>
</tr>
<tr>
<td>Of your new Total Unit Inventory, how many units is your project Funded to operate according to a contract?</td>
<td>78</td>
</tr>
<tr>
<td>Of your project’s new Total Unit Inventory, how many of your units serve households with at least 1 adult and 1 child.</td>
<td>35</td>
</tr>
</tbody>
</table>

*All Chicago*

*making homelessness history*
Section 4: HIC Units

Example – Updating Units cont...

Of your project’s new Total Unit Inventory, how many of your units serve households with at least 1 adult and 1 child.

If your project does not serve any households with at least 1 adult and 1 child, indicate ‘0’. *

Units serving at least 1 adult and 1 child 35

Of your project’s new Total Unit Inventory, how many of your units serve households with only children.

If your project does not serve any households with only children, indicate ‘0’. *

Units serving only children 0

Please provide an explanation for updating your project’s Total Unit Inventory. *

We have 35 families and 43 individuals. Our contract is for 78 units. We serve only families and individuals.
Section 5: HIC Beds

Confirm data from HMIS report

If you indicate a correction is needed, additional questions will populate

- You will provide the Total number of Beds
- How many of them are required by a contract, if any
- How many Beds serve households with at least 1 adult & 1 child, if any
- How many beds serve children only, if any
Section 5: HIC Beds

The following section asks about beds within this Project. The [HMIS 2020 Pre HIC Reference Report](#) is based on information currently in HMIS. Please review to ensure the total includes all available beds in the Project.

For the purpose of the HIC, please review the following definitions when referring to a BED.

**Bed**: A piece of furniture for sleep, typically a frame work with a mattress intended for an individual to sleep in. An example of another type of bed would be a cot or mat. For the purpose of the HIC, a crib should not be counted as a bed and should be counted under the crib category.

**Funded Bed**: The total number of beds available and required by the funding source(s) for the project.

**Total Bed Inventory**: The number of Funded Beds plus the number of Over-Capacity Beds will equal the Total Bed Inventory.

13. **Does the Bed Inventory totals for this project listed on the [HMIS 2020 Pre HIC Reference Report](#) match the project’s inventory as of November 7, 2019?**

  - [ ] Yes
  - [ ] No
Section 5: HIC Beds

Example – Updating Beds

13. Does the Bed Inventory totals for this project listed on the [HMIS 2020 Pre HIC Reference Report](#) match the project’s inventory as of November 7, 2019? *
   - [ ] Yes
   - [ ] No

You indicated the Total Bed Inventory does not match the current inventory of the project. Please provide an updated total.

   Total Bed Inventory: 100

Of your project’s new Total Bed Inventory, how many of your beds serve households with at least 1 adult and 1 child.

If your project does not serve any households with at least 1 adult and 1 child, indicate '0'. *

   Funded Beds: 57
Section 5: HIC Beds

Example – Updating Beds 2 / 2

Of your project’s new Total Bed Inventory, how many of your beds serve households with at least 1 adult and 1 child.

If your project does not serve any households with at least 1 adult and 1 child, indicate ’0’. *

Funded Beds 57

Of your project’s new Total Bed Inventory, how many of your beds serve households with only children.

If your project does not serve any households with only children, indicate ’0’. *

Over-Capacity Beds 0

Please provide an explanation for updating your project’s Total Bed Inventory. *

We have 100 bed total, 57 beds serve families. We serve no youth.
Section 5 ES: Emergency Shelters Only

Will only show if project identified as a ‘HUD - Type Emergency Shelter’ in Section 2

Confirmation of Data

If you indicate a correction is needed, additional questions will populate

- Only choose boxes that require corrections, if any
- Identify what data elements need to be updated
- Identify correct Bed Type, or record correct Bed Availability and Overflow Beds
Section 5 ES: Emergency Shelters Only

The following page is only applicable to projects which are considered as an Emergency Shelter - HUD Type.

Each ES project must indicate the Bed Type, Bed and Unit Availability as well as Overflow Beds. For the purpose of the HIC, please review the following definitions.

**Bed Type:** The following Bed Type describes the types of beds offered by emergency shelter projects:

1. Facility based - Beds (including cots or mats) located in a residential homeless assistance facility dedicated for use by persons who are homeless
2. Voucher: Beds located in a hotel or motel and made available by the homeless assistance project through vouchers or other forms of payment
3. Other: Beds located in a church or other facility not dedicated for use by persons who are homeless

**Bed and Unit Availability**

1. Year-Round: year-round beds and units available on a year-round basis.
2. Seasonal Beds: Seasonal beds are not available year-round but instead are available on a planned basis, with set start and end dates. Please identify only the total number of seasonal beds available for occupancy on the night of the count.

**Overflow Beds:** 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. If there is no fixed number of overflow beds, please report the number of overflow beds that were occupied on the night of the count.

14. Does the Bed Inventory totals for this project listed on the [HMIS 2020 Pre HIC Reference Report](#) match the project’s inventory as of November 7, 2019? *

☐ Yes

☐ No
Section 5 ES: Emergency Shelters Only

Example – Updating Bed Type

14. Does the Bed Inventory totals for this project listed on the [HMIS 2020 Pre HIC Reference Report](#) match the project's inventory as of November 7, 2019? *
   - Yes
   - No

You indicated information listed on the [HMIS 2020 Pre HIC Reference Report](#) does not match your project's current inventory, please indicate what information must be updated. *
   - Bed Type
   - Bed & Unit Availability
   - Overflow Bed Numbers

You indicated the Bed Type (for Emergency Shelters Only) was incorrect, please indicate the correct type of beds offered by the Emergency Shelter.

- **Facility Based**: Beds (including cots or mats) located in a residential homeless assistance facility dedicated for use by persons who are homeless.
- **Voucher**: Beds located in a hotel or motel and made available by the homeless assistance project through vouchers or other forms of payment
- **Other**: Beds located in a church or other facility not dedicated for use by persons who are homeless. *
   - Facility Based
   - Voucher
   - Other (please indicate what types of beds)
Section 5 ES: Emergency Shelters Only

Example – Updating Bed Availability and Overflow

You indicated information listed on the HMIS 2020 Pre HIC Reference Report does not match your project's current inventory, please indicate what information must be updated. *

- [ ] Bed Type
- [x] Bed Availability
- [x] Overflow Bed Numbers

You indicated the Bed Availability was incorrect, please record the correct Bed Availability.

Year-Round Beds: Year-round beds available on a year-round basis.

Seasonal Beds: Seasonal beds are not available year round, but instead are available on a planned basis, with a start and end dates, during an anticipated period of higher demand. Please identify only the total number of seasonal beds available for occupancy on the night of the count.

* Number of Year Round Beds Available

Number of Seasonal Beds Available

You indicated the number of Overflow Beds was not correct, please record an up to date number.

Overflow Beds: 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. If there is no fixed number, please report the number of overflow beds that were occupied on the night of the count. *

Overflow Beds
Section 6: HMIS Participation

Confirm data from HMIS report

If a project is separated into participating HMIS beds/units and non-participating beds/units already, indicate ‘Yes’

If you indicate a correction is needed, additional questions will populate

• Indicate if Units or Beds need to be corrected
• Select what category the change is:
  – All beds/units participate
  – A portion of beds/units does not participate in HMIS
  – None
  – No - This is DV project
• If you select ‘A portion of beds/units does not…’, record the correct amount of non participating beds/units
Section 6: HMIS Participation

This section is related to the Project’s Homeless Management Information System (HMIS) participation.

**HMIS Bed Participating:** If the project makes a reasonable effort to record all universal data elements on all clients served in that bed and discloses that information through the Data Quality Assessment on a quarterly basis.

The Project will be able to identify with 3 levels of HMIS Bed Participation:

1. Yes - All Beds Participate in HMIS
2. A part of this project participates in HMIS and projects will indicate how many units or beds is the correct number
3. No - This Project does not participate in HMIS
4. No - This Project does not participate in HMIS because it is a Domestic Violence Project

Please ensure the Total Beds and Units numbers are correct and if needed, discuss this information with your agency’s Agency Technical Administrator (ATA).

If a part of a project's inventory does not participate in HMIS, it will be separated into two HMIS projects.

If you would like further information on the HMIS system, please contact hmis@allchicago.org.

15. Does the HMIS participation for this project listed on the [HMIS 2020 Pre HIC Reference Report](#) match the project's participation as of November 7, 2019?

- Yes - This Project’s HMIS participating units and/or beds has not changed since the 2019 HIC
- No - This Project’s HMIS participating units and/or beds changed since the 2019 HIC
Section 6: HMIS Participation
Example – Updating Bed and Unit Participation

15. Does the HMIS participation for this project listed on the HMIS 2020 Pre HIC Reference Report match the project's participation as of November 7, 2019? *

☐ Yes - This Project's HMIS participating units and/or beds has not changed since the 2019 HIC
☐ No - This Project's HMIS participating units and/or beds changed since the 2019 HIC

Your project indicated that you must update the HMIS participating units or beds for your project. Please select what type of data you would like to update below.

☐ Units
☐ Beds

You indicated the level of HMIS Unit Participation has changed. Please select the appropriate HMIS Unit Participation for this Project. *

☐ Yes - All units participate in HMIS
☐ A portion of units in this project does not use HMIS - the number of participating HMIS units are: ___
☐ No - None of the units in this project participate in HMIS
☐ No - This project is a Domestic Violence Project

You indicated the level of HMIS Bed Participation has changed. Please select the appropriate HMIS Bed Participation for this Project. *

☐ Yes - All Beds Participate in HMIS
☐ A portion of beds in this project does not use HMIS - the number of participating HMIS beds are: ___
☐ No - None of the Beds in this project participate in HMIS
☐ No - This project is a Domestic Violence Project
Confirmation Page

Thank You Page

Confirmation Email
  – PDF of HIC submission
  – Proof of submission
What if...

I am submitting a Pre-HIC Survey for a new project?

– Use recent HMIS ID and Project Title on the HMIS Report – it will be the same as the ‘2019 NOFA’ process, except if a correction was addressed
Due Date

A separate Pre-HIC survey must be completed for each applicable project within your agency.

Surveys must be submitted via SurveyGizmo (no PDFs will be accepted) – Survey online starting January November 7.

Each Pre-HIC survey must be submitted no later than **5:00 PM on Tuesday, November 12, 2019**.
Helpful Tips

Review the PDF version to view all the questions

Have information available prior to entering into SurveyGizmo

Opportunity to Save and Return

Contact the CoC team if have any questions about SurveyGizmo or HIC Processes
Save and Return Later

Option to Save Progress and Return Later

Be sure email address is correct! Link is unique and cannot be resent

2020 Pre-HIC Survey
Resources

Pre-HIC Webinar Trainings and resources will be posted to the All Chicago website

www.allchicago.org/COC/Updates

OR

http://www.allchicago.org/who-we-are/chicago-alliance/coc-funded-projects
Questions
Who to Contact

Pre-HIC Survey Questions
Max Burns
cocprograms@allchicago.org
312-379-0301 ext. 149

HMIS related Questions
hmis@allchicago.org