



As part of the 2019 POINT-IN-TIME COUNT, the Tehama County Continuum of Care is required to collect Housing Inventory Count data for the Transitional Housing projects in which individuals included in the count are being served. All providers of **Transitional Housing** are asked to complete this form to ensure that we have an accurate count of the available beds. Fillable copies of this form are available at: www.tehamacoc.org/hic-forms.html

Please complete this form as it applies to your Transitional Housing project on the night of JANUARY 29, 2019 and submit it according to the instructions provided at the end of page 2 or with the surveys completed by the participants at your Transitional Housing project. Thank you!

Agency: _____

Program Name: _____

Contact Person: _____

Phone: _____ Email: _____

Address: _____

Does this program receive funding from any of the following sources (check all that apply):

- Continuum of Care (CoC)
- Emergency Solutions Grants (ESG)
- Supportive Services for Veteran Families (SSVF)
- Other (specify): _____

Please indicate which of the following populations are served at this project (check all that apply):

- Single Men, alone Single men with children Single Women, alone Single women with children
- Couples with children Other: _____

Does this project target one of the following populations (at least 75% of clients):

- Victims of domestic violence Veterans People with HIV/AIDS

Housing type:

- Single-Site, facility-based Scattered-site, facility-based Other _____

Does this project enter client data into the community-wide Homeless Management Information System (HMIS) or a HUD-approved comparable system for Victims Services Providers?

- Yes No (If no, you may be asked to provide additional data regarding the persons served in your project on the night of the January 29, 2019 in aggregate form or through surveys administered to participants.)

How many REGULAR beds (do not count Overflow Beds) does your Transitional Housing Project have? _____

How many OVERFLOW BEDS does this Project have available when needed? _____

What is the maximum Length of Stay for participants at this Project? _____

Please complete the Bed Inventory Chart on page 2.

2019 HOUSING INVENTORY COUNT:

Transitional Housing

Bed Inventory Chart

On the Bed Inventory chart below, please enter the number of beds that were AVAILABLE on **January 29, 2019**, whether they were filled or not. **DO NOT INCLUDE OVERFLOW BEDS IN THIS CHART.**

* If beds are not designated exclusively for a particular type of household and are available to be used for any person, regardless of household type or subpopulation type, please enter the total number of beds here _____ and do not complete the rest of the Bed Inventory Chart.

| Bed Inventory Chart | # of beds for Families | # of units for families | # of beds for single adults | # of beds for households of only children |
|--|-------------------------------|--------------------------------|------------------------------------|--|
| Transitional Beds: | | | | |
| Of your total beds in use, how many beds are dedicated for: | | | | |
| Veterans | | | | |
| Youth under age 18 only | | | | |
| Youth age 18-24 only | | | | |
| Youth up to age 24 (under 18 and 18-24) | | | | |

Please submit your completed form to Andrea Curry by email at andrea@empowertehama.org, by fax at 530-528-9339 or by mail or in-person at 1805 Walnut St, Red Bluff, CA 96080 no later than January 30, 2019.

If you have questions about how to complete this form, please contact Andrea by email at andrea@empowertehama.org or by phone at 530-528-0300.

DEFINITION OF TERMS:

Transitional Housing provides temporary housing and supportive services for individuals and families experiencing homelessness for 12 to 24 months.

Beds for Families are designated for households of adults and children.

Units for Families are separate rooms, units, or buildings designated to one family per unit.

Beds for Adults are designated for households in which everyone is an adult age 18 or over (single adults, adult couples without children, adults with adult sons/daughters).

Beds for Households of Only Children are designated for households in which everyone is under 18 (unaccompanied children, adolescent parents and their children, adolescent siblings, etc.)

If beds are not designated exclusively for a particular type of household, record the beds according to how they were used on the night of the PIT. If the program is not at full capacity on the night of the PIT, pro rate the empty beds based on the distribution of the beds that were occupied.

Overflow Beds are available on an ad hoc or temporary basis in response to demand that exceeds planned bed capacity. They can include cots, roll-aways, etc. that are only used when the "regular" beds are full. Record the total number of overflow beds available on the night of the PIT Count. If there is no fixed number, record the number of overflow beds that were occupied.

Beds dedicated to veterans are beds that are reserved for homeless veterans (and their families, if applicable). These beds must be filled by veterans unless there are no homeless veterans within the program's service area.

Beds dedicated to youth are beds that are reserved for homeless youth up to age 24. These beds must be filled by youth unless there are no homeless youth within the program's service area. In the Bed Inventory chart, the program must indicate if the dedicated beds are reserved only for youth under age 18, only for youth ages 18-24, or for all youth up to age 24.