



# Kitsap County Annual Point-in-Time Count

2020 | JANUARY 23RD



# WELCOME!

Thank you for joining us, we are excited that you are willing to help us with the Annual Kitsap County Point-in-Time Count. The Point-in-Time (PIT) Count is important to give us a snapshot of the population of people living without stable housing or experiencing homelessness during a particular time each year in Kitsap County.

The information collected by this survey is important to the people we serve, our service providers, legislators, and our community. Volunteers are an important piece of collecting this information by getting community members like you involved in reaching out and talking directly to people experiencing homelessness.



# History and Background

## History

- What is the Point-in-Time Count?
- Who participates in the Count?
- Why do we perform a Count?
- When is the Count?

## Goals

- What are the goals of the Count?

## Benefits

- What does the collected data do for our county?



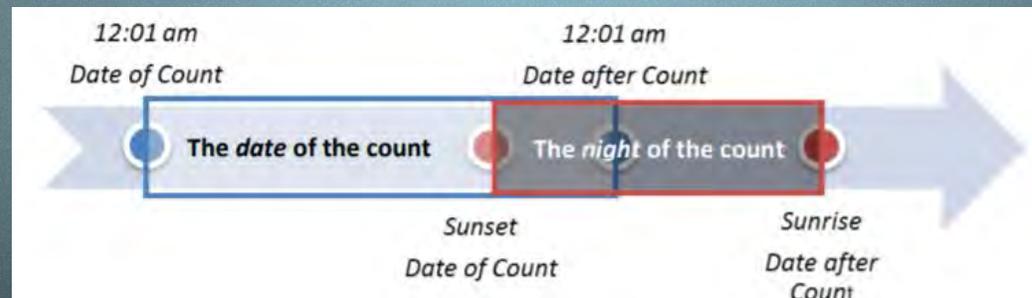
# Brief History

- ▶ The Point-in-Time (PIT) Count is a federal Housing and Urban Development (HUD) mandate.
- ▶ In Washington State The Homeless Housing and Assistance Act requires that each county in Washington State conduct an annual point in time count of sheltered and unsheltered homeless persons.
- ▶ These are requirements for communities receiving federal and state dollars that serve homeless families and individuals.



# When is the Count?

- ▶ The count signifies a single period of time from sunset to sunrise which spans two actual dates.
- ▶ The Count is required to be held within the last 10 days of January. In Washington this is typically planned for the last Thursday of the month.
- ▶ We are seeking to know where people were staying Wednesday night into Thursday morning.



Wednesday Thursday



# Goals

- ▶ The goal of the Point-in-Time (PIT) Count is to help identify and capture information about individuals and families in Kitsap County that are experiencing homelessness.



# Benefits

- ▶ The PIT Count helps to capture critical data about our community to help adjust our social services delivery system.
- ▶ Helps to understand demographics of households experiencing homelessness, including groups such as veterans, children & youth, and chronic homelessness.
- ▶ Helps the community when applying for federal, state, and local grants.
- ▶ The better we do our count, the better case we can make to receive the assistance needed to help people experiencing homelessness.



# Who is Counted?

## Sheltered

- Emergency Shelters and Transitional Housing
- Doubled-up – People Temporarily Staying with Friends or Family
- People residing in institutions e.g. Hospital, Detox, and Jail (not included in official count)

## Unsheltered

- People staying out of doors, on the streets, in tents, etc.
- People living in abandoned buildings
- People living in vehicles
- People living in RVs and boats that may not be in working condition or lacking any of the following amenities (drinking water, restrooms, heat, ability to cook hot food, ability to bathe)



# Places to Count People Living Unsheltered



Parks	Alleys	Downtown Streets
Under Overpasses and Bridges	Waterfront Areas	Parking Lots
Libraries and Post Offices	Busy Intersections Where People Hold Signs Asking for Donations	Food Banks
On Buses and at Transit Centers	Campgrounds	Encampments and Tent Cities
Emergency rooms	Abandoned Buildings	Areas Outlying Cities
Large Retail Stores and Malls	Gas Stations and Mini Marts	24-hour Establishments



# Temporarily Staying with Friends/Family and Institutions

- ▶ Persons living temporarily with family or friends due to loss of housing or economic hardship (doubled-up or couch surfing) do not meet the HUD definition of homelessness, but in Kitsap County we collect this information to help identify the needs for housing and services.
- ▶ Persons that are in hospitals, detox facilities, other facilities, and the jail are not considered homeless per HUD definition, but we also collect information from these groups wherever possible.



# Who is Counted?

- ▶ The count does not require rigorous screening to determine if a person is homeless. Persons who self-identify as living without stable housing should be counted.

# Who is Not Counted?

- ▶ Individuals or families that rent or own their own home, are paying for their own motel stay, or are living in a functioning RV or boat with facilities.



# What to Expect

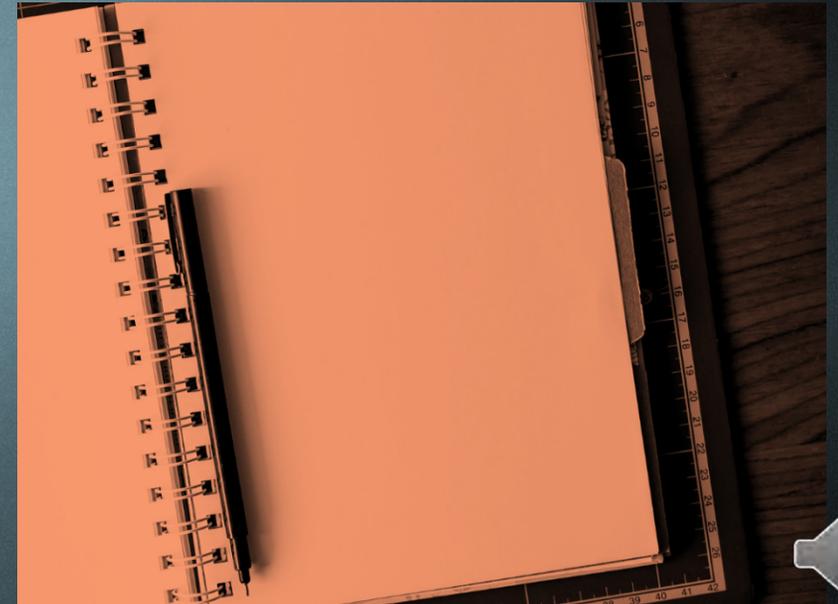
- ▶ You may be a bit apprehensive if you are going into places where people are living, and not sure how they will respond.
- ▶ Many people are willing to share their story and want to be heard. A few individuals may not be willing to speak with you, and we need to be respectful.
- ▶ If you approach people with respect and dignity they will usually respond positively and want to help.





# Collecting Information

- ▶ Approach every person with courtesy and respect. Look them in the eyes. Ask for their help.
- ▶ Safety is the most important. Stay with your team. If you feel unsafe in a situation STOP and get to safety as quickly as possible.
- ▶ Do not hand people the surveys to fill out. Volunteers should ask questions and fill in each survey. This helps us to collect accurate, legible and consistent information.  
(You can show the survey to the person being interviewed)



# Collecting Information

- ▶ Gather as much information as possible.
  - ▶ If someone refuses to answer questions for the survey, please thank the person, step away, and fill in a survey with at least the following:

- ▶ Location

- ▶ Living Situation

- ▶ Gender

- ▶ Estimated age or year of birth

Required fields on the Unsheltered/Living with Family or Friends PIT forms are bordered with thick double-line borders

- ▶ Make every effort to collect names and birthdays. Names and birthdays help us to ensure that we count each person only once, even if they happen to complete more than one survey.



# Sign for Consent

- ▶ Information from these forms are entered into the Washington State Homeless Management Information System (HMIS).
  - ▶ This database has strict security policies to protect privacy.
  - ▶ Client's name and personal identifying information will not be included in any reports or publications. Information is only aggregated for analysis.
- ▶ Clients must sign the release in Section E to include their information for the Count purposes.
  - ▶ *If clients do not give consent, or if the signature is forgotten, the survey will be entered without identifying information. This will include only approximated year of birth, gender, and location of the survey.*



# Sample Greeting Dialogue

*"Hello, my name is \_\_\_\_\_"*

*I'm a volunteer working with our community to collect information about people living without stable housing so that we can do a better job providing the kinds of housing and services that are needed.*

*Would you be willing to talk with me for a few minutes as I fill out this survey form?"*



# Sample Greeting Dialogue

## ▶ IF YES

- ▶ *"Thank you. Have you already completed a survey with another volunteer earlier this week?"*
- ▶ *"Where (did you/will you) stay on the night of Wednesday January 22<sup>nd</sup>?"*
- ▶ *"Have you (or anyone in your household) been continuously without housing for a year or more?"*

## ▶ IF NO

- ▶ Thank them for their help and fill out a survey with the following information:
  - ▶ Location (A&B)
  - ▶ Name of Surveyor (A)
  - ▶ Gender (D.iv.)
  - ▶ Estimated age or Year of Birth (D.v.)



# Clarification Questions

- ▶ **A. Location where survey was given**
  - ▶ Note the location where the household took the survey. Businesses, landmarks, cross streets, etc.
  - ▶ Outreach teams will have maps. If it is too difficult to describe the location, indicate on the map and return the map with surveys.
  - ▶ Name of Surveyor – Please write clearly so that we may contact you if there are any questions or clarifications needed.

**Kitsap Point In Time Count / WINTER – Use Form Jan 20 – 24, 2020**

## ***UNSHELTERED/LIVING WITH FAMILY OR FRIENDS***

- Is the household actively fleeing domestic violence? If yes, do not sign this form.
- If individual/household is staying at an emergency shelter, do not use this form, the shelter will collect this information.

**Return forms by 1/31/20 to:**

Cory Derenburger

Housing & Homelessness Division, Kitsap County

345 6<sup>th</sup> Street, Suite 400, Bremerton WA 98337

**A. Location survey was given:** \_\_\_\_\_

**City/Town survey given:** \_\_\_\_\_ **Name of Surveyor:** \_\_\_\_\_



# Clarification Questions

## ▶ B. Location Staying the Night of the Count

- ▶ Check or circle the answer that best matches their description.
- ▶ Where did the person stay Wednesday night into Thursday morning.
- ▶ Note: Jail and Shelter are provided here if needed, but are not considered meeting the criteria for being unsheltered for the purposes of the PIT Count.

### B. \*Location: Where did/will you stay the night of Wednesday, Jan 22<sup>nd</sup>? (choose one, applies to entire household)

- |   |  |
|---|--|
| <input type="radio"/> <b>Out of Doors (street, tent, etc.)</b>  | <input type="radio"/> Temp. Living w/ Family or Friends † _____ (how long) |
| <input type="radio"/> <b>Vehicle</b>  | <input type="radio"/> Hospital/Detox/Other facility † _____ (which one)    |
| <input type="radio"/> <b>Abandoned Building</b>   | <input type="radio"/> Jail † _____ (which jail/prison)                     |
| <input type="radio"/> <b>RV/Boat Lacking Any of the Following Amenities</b><br>Drinking water, restroom, heat, ability to cook hot food, ability to bathe | <input type="radio"/> Shelter † _____ (which shelter)                      |
- †Not considered homeless for PIT by HUD; Optional



# RV/Boat Lacking Amenities

- ▶ RV/Boats can be considered living unsheltered if they lack basic amenities such as drinking water, restrooms, heat, ability to cook hot food, or the ability to bathe.
- ▶ For RV/s Boats the distinguishing factor as to whether the RV or boat is designed to be lived in, and if those facilities are degraded to the point that the RV or boat would not be distinguishable from living in a car.
- ▶ We don't want to get into asking about if the RV or boat is fully functional for living.
- ▶ Only if the RV or boat looks severely degraded or non-functional should it be considered unsheltered.



# Clarification Questions

## ▶ C. Length of Time Without Stable Housing

- ▶ Ask each question to determine if the person meets the criteria of chronic homelessness.

### C. \*Length of Time Without Stable Housing

**i. Have you or anyone in the household been continuously without housing for a year or more?**

Yes (skip to iv)    No. Approximately how long? \_\_\_\_\_

**ii. Have you or anyone in the household been without housing 4 or more times in the last 3 years?**

Yes    No (skip to Section D)

**iii. Do these times without housing, added together, amount to a year or more?**       Yes    No

**iv. Does any person who answered yes for either i, or iii. have a disability?**       Yes    No



# Clarification Questions

- ▶ **D. Household Information** – Each member of a household should be listed in the Household Information section. A single person is considered a household (i.e. “a household consisting of one person”), so single individuals should complete the household Information section.
  - ▶ i. Household Makeup – Mark if the household is without Children, with Adults & Children, or Only Children
  - ▶ ii. Last known Permanent City or Zip Code
    - ▶ “What is the last place you had a stable home?” If person is unable to remember zip code leave it blank.

<b>D. *Household (HH) Information</b>		
<small>(Please enter each HH member below. Use additional form if household has more than four members.) Please check a HH type in the next box.</small>		
i.	<input type="checkbox"/> Household without Children	<input type="checkbox"/> Household with Adults & Children
		<input type="checkbox"/> Households with only Children
ii.	Last known permanent City, State	Zip



# Clarification Questions

## ▶ D. Household Information – Continued

- ▶ iii. **First Name & Last Name** – PLEASE print CLEARLY. Generally the first person you survey is the Head of Household, but it does not really matter which adult.
- ▶ iv. **Birth Date** – If full birthdate is refused then year of birth is okay, or surveyor can make an estimate on the person's age.

Relation to Head of Household (if applicable) Spouse/ Partner/ Child/Etc.	iii.		iv.
	First Name	Last Name	Birth Date (or if DOB refused, year of birth, or est. age)
<i>Self</i>			



# Clarification Questions

- ▶ **v. Population Data** – Indicate Gender, Race & Ethnicity
  - ▶ Gender – Ask: “*What gender do you identify as?*” Enter M, F, T (transgender), or D (Gender Nonconforming)
  - ▶ Race – Ask: “*What race or races do you identify as?*” Enter all that apply
  - ▶ Ethnicity – Ask: “*Do you consider yourself to be Hispanic?*” Ethnicity may only be entered as (H) Hispanic or (N) Non-Hispanic. NOTE: We are required to use these federal definitions and they can sometimes be offensive to individuals who don’t identify this way.
  - ▶ Fleeing Domestic Violence– Ask: “*Are you a fleeing domestic violence?*” If anyone in the household says “Yes” then DO NOT have them sign the release at the bottom in Section E. Mark Y/N.
  - ▶ Veteran – Ask: “*Have you ever served in the US military?*” Anyone who has served in the US military is considered a veteran. Mark Y/N.



v. Population Data				
Gender <sup>1</sup>	Race <sup>2</sup> (enter all that apply)	Ethnicity (Hispanic (H) or Non-Hispanic (N))	Fleeing Domestic Violence	Veteran (ever served in the military)



# Clarification Questions

- ▶ **vi. Disabilities** – Ask: *“Do any of these apply to you? Chronic Substance Abuse, Permanent Physical Disability, Developmental Disability, Substantial & Long-Term Mental Health Condition, or a Chronic Health Condition which is Permanently Disabling?”*
  - ▶ Enter all that apply. Answer Y/N.
  - ▶ If a household member has no disabilities please check NONE APPLY. If these questions are left blank we will assume that the answers were not asked or the client refused to answer.



vi. Disabilities					
Check <b>all</b> that apply to each client					
Chronic Substance Abuse	Physical Disability (Permanent)	Developmental Disability	Mental Health (Substantial & Long-Term)	Chronic Health Condition (Permanently Disabling)	NONE APPLY



# Clarification Questions

- ▶ Flip the page and complete sections F & G
- ▶ **F. Circumstances leading to your housing status**
  - ▶ Ask the circumstance options aloud and record the person's responses. Check all that apply.

<b>F. Circumstances leading to your housing status</b> (check <b>all</b> that apply)		<input type="checkbox"/> Refused	<input type="checkbox"/> Don't Know
Housing & Economic	System & Legal	Health Issues	Family Conflict
<input type="checkbox"/> Job Loss/unemployment	<input type="checkbox"/> Discharged from hospital or other medical facility	<input type="checkbox"/> Mental Illness	<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Eviction/Loss of housing	<input type="checkbox"/> Discharged from criminal/juvenile justice system	<input type="checkbox"/> Physical health/disability	<input type="checkbox"/> Guardian mental health/substance abuse
<input type="checkbox"/> Lack of job training/ unable to work	<input type="checkbox"/> Aged out of foster care	<input type="checkbox"/> Alcohol/substance abuse	<input type="checkbox"/> Family Rejection/Kicked out
<input type="checkbox"/> Lack of childcare	<input type="checkbox"/> Medical costs	<input type="checkbox"/> Illness	<input type="checkbox"/> Abuse/Neglect



# Clarification Questions

## ▶ G. Source(s) of Household Income and Benefits

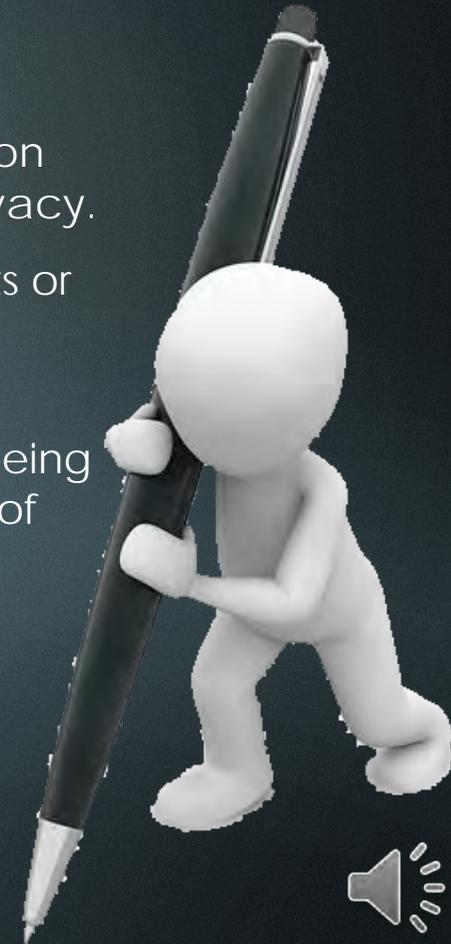
- ▶ Ask the person if the person receives any public assistance like TANF, SSI/SSDI, Disability, VA, Unemployment, or Medicaid or Medicare. Check all that apply.
- ▶ Ask the person if they are employed. If so, is it full time, part time, or farm work/seasonal?
- ▶ Ask if the person has other income.
- ▶ Note: If the person describes income or benefits not included in the list, write them on the form.

<b>G. Source(s) of Household Income and Benefits</b> (check <b>all</b> that apply)		<input type="checkbox"/> Refused	<input type="checkbox"/> Don't Know
Public Assistance/Benefits		Employment	Other
<input type="checkbox"/> TANF	<input type="checkbox"/> VA	<input type="checkbox"/> Part time	<input type="checkbox"/> None
<input type="checkbox"/> SSI/SSDI	<input type="checkbox"/> Unemployment	<input type="checkbox"/> Full time	<input type="checkbox"/> Panhandling
<input type="checkbox"/> Temporary Disability/ABD/HEN	<input type="checkbox"/> Medicare/Medicaid/WA Apple Health	<input type="checkbox"/> Farm/seasonal	<input type="checkbox"/> Relative/friends



# Sign for Consent

- ▶ Ask the person to look over the Kitsap Client Release of Information on the back of the form.
  - ▶ *"We'd like to include your information in a database that helps us collect information into reports for our funders. We will never release your name or personally identifying information to the public. Would you be willing to help by signing this release?"*
  - ▶ The survey information will be entered into the Washington State Homeless Information Management System (HMIS). This database has strict security policies to protect privacy.
  - ▶ Client's name and personal identifying information will not be included in any reports or publications. Information is only aggregated for analysis.
  - ▶ They may refuse to sign the release form if they do not want personally identifying information entered into the database. They should **NOT** sign if they are currently fleeing from domestic violence, sexual assault or a stalking situation, OR are under 13 years of age.
- ▶ The surveyed person must sign the release in Section E to include their information for the Count purposes.
  - ▶ *If the person does not give consent, or if the signature is forgotten, the survey will be entered without identifying information. This will include only approximated year of birth, gender, and location of the survey.*



# Kitsap Local Questions

- ▶ Included is an additional sheet of questions to ask the Head of Household.
- ▶ These questions are voluntary, but help our County to collect more useful information about families and individuals experiencing homelessness.
- ▶ Questions 1-3 can be filled out by the surveyor, these are included in the event that these questions are separated from their PIT form.
- ▶ You may write notes in the margins.
- ▶ **Question 11a and 11b** – Fill out *either* 11a or 11b, but please do not fill out both.



# FINISHED!

- ▶ You have now completed your survey. Please do the following:

## Thank You!

- Thank the person for their time and help.

## Handouts

- Offer the individual or family handouts
- Sally's Guide
- Veteran's Resource Guide (if appropriate)

## Return Forms

- At the completion of surveying hand in your completed forms to your team leader
- OR return to the Housing and Homelessness Program ASAP



# THANK YOU!!!!

- ▶ Thank you for volunteering your time and efforts to help Kitsap County conduct the Annual Point-in-Time Count.
- ▶ We hope that you will find this to be a rewarding experience, and hope that you will join us again in the future.

Thank  
You!



# Questions?

CONTACT CORY DERENBURGER  
[CDERENBU@CO.KITSAP.WA.US](mailto:CDERENBU@CO.KITSAP.WA.US) OR (360) 337-7287