

Survey Response Set: ES-FAM: Emergency Shelters for Families**Total Counts****ES-FAM Question 1: Total Number of Persons in Families Who Used Emergency Shelters During Covered Time Period**

	<i># of Persons / Beds</i>
Unduplicated number of Persons in Families ^a that used Emergency Shelters participating in HMIS	a. <input type="text" value="10"/>
Number of emergency, year-round equivalent shelter beds ^b in HMIS that are designated for Persons in Families (i.e., bed capacity for participating providers) ^c	b. <input type="text" value="0.00"/>
Number of emergency, year-round equivalent shelter beds ^b at providers not participating in HMIS that are designated for Persons in Families (i.e., bed capacity for non-participating providers) ^c	c. <input type="text" value="0.00"/>
Number of Persons in Families who used more than one HMIS participating emergency shelter as part of a family	d. <input type="text" value="2"/>

ES-FAM Question 2: How many Persons in Families were using Emergency Shelters ...

	<i># of Persons</i>
... on average per night during covered time period?	a. <input type="text" value="0.00"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="1"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="1"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="1"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="2"/>

Demographics

ES-FAM Question 3: Age*

Age of Adults:		# of Persons
18 to 30	a.	<input type="text" value="4"/>
31 to 50	b.	<input type="text" value="6"/>
51 to 61	c.	<input type="text" value="0"/>
62 or older	d.	<input type="text" value="0"/>
Total:		10

Missing this information	e.	<input type="text" value="0"/>
--------------------------	----	--------------------------------

Persons Reported:	10
--------------------------	-----------

ES-FAM Question 4: Gender*

		# of Veterans
Female	a.	<input type="text" value="4"/>
Male	b.	<input type="text" value="6"/>
Transgendered male to female	c.	<input type="text" value="0"/>
Transgendered female to male	d.	<input type="text" value="0"/>
Other	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		10

Persons Reported:	10
--------------------------	-----------

ES-FAM Question 5: Ethnicity

		# of Persons
Non-Hispanic/Non-Latino	a.	<input type="text" value="7"/>
Hispanic/Latino	b.	<input type="text" value="3"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		10

ES-FAM Question 6: Race

		<i># of Persons</i>
White, Non-Hispanic/Non-Latino	a.	<input type="text" value="5"/>
White, Hispanic/Latino	b.	<input type="text" value="3"/>
Black or African-American	c.	<input type="text" value="2"/>
Asian	d.	<input type="text" value="0"/>
American Indian or Alaska Native	e.	<input type="text" value="0"/>
Native Hawaiian or Other Pacific Islander	f.	<input type="text" value="0"/>
Multiple races	g.	<input type="text" value="0"/>
Missing this information	h.	<input type="text" value="0"/>
Total:		10

ES-FAM Question 7: Total Number of Persons who are Veterans within Households

		<i>Total Number of Veterans</i>
1 Veteran per Household	a.	<input type="text" value="10"/>
2 Veterans per Household	b.	<input type="text" value="0"/>
3 Veterans per Household	c.	<input type="text" value="0"/>
4 Veterans per Household	d.	<input type="text" value="0"/>
5 or more Veterans per Household	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		10

ES-FAM Question 8: How Many Persons in Families are Disabled (Adults Only)?

		<i># of Persons</i>
Yes, disabled	a.	<input type="text" value="3"/>
Not disabled	b.	<input type="text" value="7"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		10

Prior Living Situation**ES-FAM Question 9: Living Arrangement the Night Before Program Entry for veterans in families in emergency shelters**

		<i># of Persons</i>
Emergency shelter	a.	<input type="text" value="0"/>
Transitional housing	b.	<input type="text" value="0"/>
Permanent supportive housing	c.	<input type="text" value="0"/>
Psychiatric facility	d.	<input type="text" value="1"/>
Substance abuse treatment center/detox	e.	<input type="text" value="0"/>
Hospital (non-psychiatric)	f.	<input type="text" value="0"/>
Jail, prison, or juvenile detention	g.	<input type="text" value="0"/>
Rental by client (VASH subsidy)	h.	<input type="text" value="0"/>
Rental by client (other subsidy)	i.	<input type="text" value="0"/>
Rental by client (no subsidy)	j.	<input type="text" value="1"/>
Owned by client (with subsidy)	k.	<input type="text" value="0"/>
Owned by client (no subsidy)	l.	<input type="text" value="0"/>
Staying with family	m.	<input type="text" value="0"/>
Staying with friends	n.	<input type="text" value="0"/>
Hotel or motel (no voucher)	o.	<input type="text" value="4"/>
Foster care home	p.	<input type="text"/>
Place not meant for habitation	q.	<input type="text" value="4"/>
Safe Haven	r.	<input type="text" value="0"/>
Other living arrangement	s.	<input type="text" value="0"/>
Missing this information	t.	<input type="text" value="0"/>
Total:		10

ES-FAM Question 10: How long did veterans stay in their living arrangements the night before program entry?

		<i># of Persons</i>
One week or less	a.	<input type="text" value="5"/>
More than one week, but less than a month	b.	<input type="text" value="2"/>
One to three months	c.	<input type="text" value="2"/>
More than three months, but less than a year	d.	<input type="text" value="1"/>
One year or longer	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		10

ES-FAM Question 11 (Optional): Location of last permanent residence for adults in families in emergency shelter

		<i># of Persons</i>
Zip code is within jurisdiction**	a.	<input type="text" value="7"/>
Zip code is not within jurisdiction	b.	<input type="text" value="3"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		10

Length of Stay

ES-FAM Question 12: Number of Nights in Emergency Shelter for Veterans in Families

		# of FEMALES	# of MALES	# of MISSING GENDER
1 to 7 nights	a.	<input type="text" value="1"/>	<input type="text" value="4"/>	<input type="text" value="0"/>
8 to 30 nights	b.	<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
31 to 60 nights	c.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
61 to 90 nights	d.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
91 to 120 nights	e.	<input type="text" value="1"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
121 to 150 nights	f.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
151 to 180 nights	g.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
181 to 210 nights	h.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
211 to 240 nights	i.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
241 to 270 nights	j.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
271 to 300 nights	k.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
301 to 330 nights	l.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
331 to 360 nights	m.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
361 to 365 nights	n.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Missing this Information	o.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		4	6	0

Household Counts**ES-FAM Question 13: How Many Veteran Family Households Stayed in Emergency Shelters**

	<i># of Households</i>
... at any time during the covered time period?	a. <input type="text" value="10"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="1"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="1"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="1"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="2"/>

Survey Response Set: ES-IND: Emergency Shelters for Individuals

Total Counts**ES-IND Question 1: Total Number of Individuals Who Used Emergency Shelters During Covered Time Period**

	<i># of Persons / Beds</i>
Unduplicated number of Individuals ^a that used Emergency Shelters participating in HMIS	a. <input type="text" value="307"/>
Number of emergency, year-round equivalent shelter beds ^b in HMIS that are designated for Veteran Individuals (i.e., bed capacity for participating providers) ^c	b. <input type="text" value="0.00"/>
Number of emergency, year-round equivalent shelter beds ^b at providers not participating in HMIS that are designated for Veteran Individuals (i.e., bed capacity for non-participating providers) ^c	c. <input type="text" value="19.00"/>
Number of Individuals who used more than one HMIS participating emergency shelter as an individual	d. <input type="text" value="43"/>

ES-IND Question 2: How many Individuals were using Emergency Shelters ...

	<i># of Persons</i>
... on average per night during covered time period?	a. <input type="text" value="22.00"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="27"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="26"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="23"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="23"/>

Demographics

ES-IND Question 3: Age*

Age of Adults:	# of Persons
18 to 30	a. <input type="text" value="50"/>
31 to 50	b. <input type="text" value="121"/>
51 to 61	c. <input type="text" value="99"/>
62 or older	d. <input type="text" value="37"/>
Total:	307

Missing this information	e. <input type="text" value="0"/>
--------------------------	-----------------------------------

Persons Reported:	307
--------------------------	------------

ES-IND Question 4: Gender*

	# of Veterans
Female	a. <input type="text" value="21"/>
Male	b. <input type="text" value="285"/>
Transgendered male to female	c. <input type="text" value="1"/>
Transgendered female to male	d. <input type="text" value="0"/>
Other	e. <input type="text" value="0"/>
Missing this information	f. <input type="text" value="0"/>
Total:	307

Persons Reported:	307
--------------------------	------------

ES-IND Question 5: Ethnicity

	# of Persons
Non-Hispanic/Non-Latino	a. <input type="text" value="295"/>
Hispanic/Latino	b. <input type="text" value="12"/>
Missing this information	c. <input type="text" value="0"/>
Total:	307

ES-IND Question 6: Race

		<i># of Persons</i>
White, Non-Hispanic/Non-Latino	a.	<input type="text" value="215"/>
White, Hispanic/Latino	b.	<input type="text" value="11"/>
Black or African-American	c.	<input type="text" value="63"/>
Asian	d.	<input type="text" value="2"/>
American Indian or Alaska Native	e.	<input type="text" value="9"/>
Native Hawaiian or Other Pacific Islander	f.	<input type="text" value="4"/>
Multiple races	g.	<input type="text" value="3"/>
Missing this information	h.	<input type="text" value="0"/>
Total:		307

ES-IND Question 7: Total Number of Persons who are Veterans within Households

		<i>Total Number of Veterans</i>
1 Veteran per Household	a.	<input type="text" value="307"/>
2 Veterans per Household	b.	<input type="text" value="0"/>
3 Veterans per Household	c.	<input type="text" value="0"/>
4 Veterans per Household	d.	<input type="text" value="0"/>
5 or more Veterans per Household	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		307

ES-IND Question 8: How Many Individuals are Disabled (Adults Only)?

		<i># of Persons</i>
Yes, disabled	a.	<input type="text" value="207"/>
Not disabled	b.	<input type="text" value="100"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		307

Prior Living Situation**ES-IND Question 9: Living Arrangement the Night Before Program Entry for Individuals in Emergency Shelters**

		<i># of Persons</i>
Emergency shelter	a.	<input type="text" value="31"/>
Transitional housing	b.	<input type="text" value="2"/>
Permanent supportive housing	c.	<input type="text" value="0"/>
Psychiatric facility	d.	<input type="text" value="5"/>
Substance abuse treatment center/detox	e.	<input type="text" value="5"/>
Hospital (non-psychiatric)	f.	<input type="text" value="18"/>
Jail, prison, or juvenile detention	g.	<input type="text" value="11"/>
Rental by client (VASH subsidy)	h.	<input type="text" value="0"/>
Rental by client (other subsidy)	i.	<input type="text" value="1"/>
Rental by client (no subsidy)	j.	<input type="text" value="25"/>
Owned by client (with subsidy)	k.	<input type="text" value="0"/>
Owned by client (no subsidy)	l.	<input type="text" value="2"/>
Staying with family	m.	<input type="text" value="14"/>
Staying with friends	n.	<input type="text" value="39"/>
Hotel or motel (no voucher)	o.	<input type="text" value="33"/>
Foster care home	p.	<input type="text" value=""/>
Place not meant for habitation	q.	<input type="text" value="117"/>
Safe Haven	r.	<input type="text" value="1"/>
Other living arrangement	s.	<input type="text" value="3"/>
Missing this information	t.	<input type="text" value="0"/>
Total:		307

ES-IND Question 10: How long did individuals stay in their living arrangements the night before program entry?

	<i># of Persons</i>
One week or less	a. <input type="text" value="220"/>
More than one week, but less than a month	b. <input type="text" value="29"/>
One to three months	c. <input type="text" value="18"/>
More than three months, but less than a year	d. <input type="text" value="22"/>
One year or longer	e. <input type="text" value="18"/>
Missing this information	f. <input type="text" value="0"/>
Total:	307

ES-IND Question 11 (Optional): Location of last permanent residence

	<i># of Persons</i>
Zip code is within jurisdiction**	a. <input type="text" value="177"/>
Zip code is not within jurisdiction	b. <input type="text" value="130"/>
Missing this information	c. <input type="text" value="0"/>
Total:	307

Length of Stay

ES-IND Question 12: Number of Nights in Emergency Shelter for Veterans

		# of FEMALES	# of MALES	# of MISSING GENDER
1 to 7 nights	a.	<input type="text" value="9"/>	<input type="text" value="111"/>	<input type="text" value="0"/>
8 to 30 nights	b.	<input type="text" value="5"/>	<input type="text" value="99"/>	<input type="text" value="0"/>
31 to 60 nights	c.	<input type="text" value="6"/>	<input type="text" value="47"/>	<input type="text" value="0"/>
61 to 90 nights	d.	<input type="text" value="1"/>	<input type="text" value="16"/>	<input type="text" value="0"/>
91 to 120 nights	e.	<input type="text" value="1"/>	<input type="text" value="8"/>	<input type="text" value="0"/>
121 to 150 nights	f.	<input type="text" value="0"/>	<input type="text" value="3"/>	<input type="text" value="0"/>
151 to 180 nights	g.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
181 to 210 nights	h.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
211 to 240 nights	i.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
241 to 270 nights	j.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
271 to 300 nights	k.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
301 to 330 nights	l.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
331 to 360 nights	m.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
361 to 365 nights	n.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Missing this Information	o.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		22	285	0

Survey Response Set: TH-FAM: Transitional Housing for Families

Total Counts**TH-FAM Question 1: Total Number of Persons in Families Who Used Transitional Housing During Covered Time Period**

	<i># of Persons / Beds</i>
Unduplicated number of Persons in Families ^a that used Transitional Housing participating in HMIS	a. <input type="text" value="3"/>
Number of transitional housing beds in HMIS that are designated for Persons in Families (i.e., bed capacity for participating providers) ^c	b. <input type="text" value="0.00"/>
Number of transitional housing beds at providers not participating in HMIS that are designated for Persons in Families (i.e., bed capacity for non-participating providers) ^c	c. <input type="text" value="0.00"/>
Number of Persons in Families who used more than one HMIS participating transitional housing program in a family	d. <input type="text" value="0"/>

TH-FAM Question 2: How many Persons in Families were using Transitional Housing ...

	<i># of Persons</i>
... on average per night during covered time period?	a. <input type="text" value="1.00"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="1"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="1"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="2"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="0"/>

Demographics

TH-FAM Question 3: Age*

Age of Adults:		# of Persons
18 to 30	a.	<input type="text" value="1"/>
31 to 50	b.	<input type="text" value="2"/>
51 to 61	c.	<input type="text" value="0"/>
62 or older	d.	<input type="text" value="0"/>
Total:		3

Missing this information	e.	<input type="text" value="0"/>
--------------------------	----	--------------------------------

Persons Reported:	3
--------------------------	----------

TH-FAM Question 4: Gender*

		# of Veterans
Female	a.	<input type="text" value="3"/>
Male	b.	<input type="text" value="0"/>
Transgendered male to female	c.	<input type="text" value="0"/>
Transgendered female to male	d.	<input type="text" value="0"/>
Other	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		3

Persons Reported:	3
--------------------------	----------

TH-FAM Question 5: Ethnicity

		# of Persons
Non-Hispanic/Non-Latino	a.	<input type="text" value="2"/>
Hispanic/Latino	b.	<input type="text" value="1"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		3

TH-FAM Question 6: Race

		<i># of Persons</i>
White, Non-Hispanic/Non-Latino	a.	<input type="text" value="2"/>
White, Hispanic/Latino	b.	<input type="text" value="0"/>
Black or African-American	c.	<input type="text" value="0"/>
Asian	d.	<input type="text" value="1"/>
American Indian or Alaska Native	e.	<input type="text" value="0"/>
Native Hawaiian or Other Pacific Islander	f.	<input type="text" value="0"/>
Multiple races	g.	<input type="text" value="0"/>
Missing this information	h.	<input type="text" value="0"/>
Total:		3

TH-FAM Question 7: Total Number of Persons who are Veterans within Households

		<i>Total Number of Veterans</i>
1 Veteran per Household	a.	<input type="text" value="3"/>
2 Veterans per Household	b.	<input type="text" value="0"/>
3 Veterans per Household	c.	<input type="text" value="0"/>
4 Veterans per Household	d.	<input type="text" value="0"/>
5 or more Veterans per Household	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		3

TH-FAM Question 8: How Many Persons in Families are Disabled (Adults Only)?

		<i># of Persons</i>
Yes, disabled	a.	<input type="text" value="1"/>
Not disabled	b.	<input type="text" value="2"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		3

Prior Living Situation**TH-FAM Question 9: Living Arrangement the Night Before Program Entry for Adults in Families using Transitional Housing**

		<i># of Persons</i>
Emergency shelter	a.	<input type="text" value="0"/>
Transitional housing	b.	<input type="text" value="0"/>
Permanent supportive housing	c.	<input type="text" value="0"/>
Psychiatric facility	d.	<input type="text" value="0"/>
Substance abuse treatment center/detox	e.	<input type="text" value="0"/>
Hospital (non-psychiatric)	f.	<input type="text" value="0"/>
Jail, prison, or juvenile detention	g.	<input type="text" value="0"/>
Rental by client (VASH subsidy)	h.	<input type="text" value="0"/>
Rental by client (other subsidy)	i.	<input type="text" value="0"/>
Rental by client (no subsidy)	j.	<input type="text" value="1"/>
Owned by client (with subsidy)	k.	<input type="text" value="0"/>
Owned by client (no subsidy)	l.	<input type="text" value="0"/>
Staying with family	m.	<input type="text" value="0"/>
Staying with friends	n.	<input type="text" value="0"/>
Hotel or motel (no voucher)	o.	<input type="text" value="0"/>
Foster care home	p.	<input type="text"/>
Place not meant for habitation	q.	<input type="text" value="0"/>
Safe Haven	r.	<input type="text" value="2"/>
Other living arrangement	s.	<input type="text" value="0"/>
Missing this information	t.	<input type="text" value="0"/>
Total:		3

TH-FAM Question 10: How long did veterans stay in their living arrangements the night before program entry?

	<i># of Persons</i>
One week or less	a. <input type="text" value="0"/>
More than one week, but less than a month	b. <input type="text" value="0"/>
One to three months	c. <input type="text" value="2"/>
More than three months, but less than a year	d. <input type="text" value="0"/>
One year or longer	e. <input type="text" value="1"/>
Missing this information	f. <input type="text" value="0"/>
Total:	3

TH-FAM Question 11 (Optional): Location of last permanent residence for adults in families in transitional housing

	<i># of Persons</i>
Zip code is within jurisdiction**	a. <input type="text" value="3"/>
Zip code is not within jurisdiction	b. <input type="text" value="0"/>
Missing this information	c. <input type="text" value="0"/>
Total:	3

Length of Stay

TH-FAM Question 12: Number of Nights in Transitional Housing for Veterans in Families

		# of FEMALES	# of MALES	# of MISSING GENDER
1 to 7 nights	a.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
8 to 30 nights	b.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
31 to 60 nights	c.	<input type="text" value="1"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
61 to 90 nights	d.	<input type="text" value="1"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
91 to 120 nights	e.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
121 to 150 nights	f.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
151 to 180 nights	g.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
181 to 210 nights	h.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
211 to 240 nights	i.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
241 to 270 nights	j.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
271 to 300 nights	k.	<input type="text" value="1"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
301 to 330 nights	l.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
331 to 360 nights	m.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
361 to 365 nights	n.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Missing this Information	o.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		3	0	0

Household Counts**TH-FAM Question 13: How Many Veteran Family Households Stayed in Transitional Housing**

	<i># of Households</i>
... at any time during the covered time period?	a. <input type="text" value="3"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="1"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="1"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="2"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="0"/>

Survey Response Set: TH-IND: Transitional Housing for Individuals

Total Counts**TH-IND Question 1: Total Number of Individuals Who Used Transitional Housing During Covered Time Period**

	<i># of Persons / Beds</i>
Unduplicated number of Individuals ^a that used Transitional Housing participating in HMIS	a. <input type="text" value="21"/>
Number of transitional housing beds in HMIS that are designated for Veteran Individuals (i.e., bed capacity for participating providers) ^c	b. <input type="text" value="3.00"/>
Number of transitional housing beds at providers not participating in HMIS that are designated for Veteran Individuals (i.e., bed capacity for non-participating providers) ^c	c. <input type="text" value="16.00"/>
Number of Individuals who used more than one HMIS participating transitional housing provider as an individual	d. <input type="text" value="1"/>

TH-IND Question 2: How many Individuals were using Transitional Housing ...

	<i># of Persons</i>
... on average per night during covered time period?	a. <input type="text" value="9.00"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="13"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="8"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="7"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="8"/>

Demographics

TH-IND Question 3: Age*

Age of Adults:		# of Persons
18 to 30	a.	<input type="text" value="1"/>
31 to 50	b.	<input type="text" value="11"/>
51 to 61	c.	<input type="text" value="9"/>
62 or older	d.	<input type="text" value="0"/>
Total:		21

Missing this information	e.	<input type="text" value="0"/>
--------------------------	----	--------------------------------

Persons Reported:	21
--------------------------	-----------

TH-IND Question 4: Gender*

		# of Veterans
Female	a.	<input type="text" value="3"/>
Male	b.	<input type="text" value="18"/>
Transgendered male to female	c.	<input type="text" value="0"/>
Transgendered female to male	d.	<input type="text" value="0"/>
Other	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		21

Persons Reported:	21
--------------------------	-----------

TH-IND Question 5: Ethnicity

		# of Persons
Non-Hispanic/Non-Latino	a.	<input type="text" value="20"/>
Hispanic/Latino	b.	<input type="text" value="1"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		21

TH-IND Question 6: Race

		<i># of Persons</i>
White, Non-Hispanic/Non-Latino	a.	<input type="text" value="16"/>
White, Hispanic/Latino	b.	<input type="text" value="1"/>
Black or African-American	c.	<input type="text" value="3"/>
Asian	d.	<input type="text" value="0"/>
American Indian or Alaska Native	e.	<input type="text" value="0"/>
Native Hawaiian or Other Pacific Islander	f.	<input type="text" value="0"/>
Multiple races	g.	<input type="text" value="1"/>
Missing this information	h.	<input type="text" value="0"/>
Total:		21

TH-IND Question 7: Total Number of Persons who are Veterans within Households

		<i>Total Number of Veterans</i>
1 Veteran per Household	a.	<input type="text" value="21"/>
2 Veterans per Household	b.	<input type="text" value="0"/>
3 Veterans per Household	c.	<input type="text" value="0"/>
4 Veterans per Household	d.	<input type="text" value="0"/>
5 or more Veterans per Household	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		21

TH-IND Question 8: How Many Individuals are Disabled (Adults Only)?

		<i># of Persons</i>
Yes, disabled	a.	19
Not disabled	b.	2
Missing this information	c.	0
Total:		21

Prior Living Situation

TH-IND Question 9: Living Arrangement the Night Before Program Entry for Individuals using Transitional Housing

		# of Persons
Emergency shelter	a.	9
Transitional housing	b.	0
Permanent supportive housing	c.	0
Psychiatric facility	d.	0
Substance abuse treatment center/detox	e.	0
Hospital (non-psychiatric)	f.	0
Jail, prison, or juvenile detention	g.	0
Rental by client (VASH subsidy)	h.	0
Rental by client (other subsidy)	i.	0
Rental by client (no subsidy)	j.	2
Owned by client (with subsidy)	k.	0
Owned by client (no subsidy)	l.	0
Staying with family	m.	2
Staying with friends	n.	4
Hotel or motel (no voucher)	o.	2
Foster care home	p.	
Place not meant for habitation	q.	1
Safe Haven	r.	0
Other living arrangement	s.	1
Missing this information	t.	0
Total:		21

TH-IND Question 10: How long did individual stay in their living arrangements the night before program entry?

	<i># of Persons</i>
One week or less	a. <input type="text" value="5"/>
More than one week, but less than a month	b. <input type="text" value="7"/>
One to three months	c. <input type="text" value="5"/>
More than three months, but less than a year	d. <input type="text" value="3"/>
One year or longer	e. <input type="text" value="1"/>
Missing this information	f. <input type="text" value="0"/>
Total:	21

TH-IND Question 11 (Optional): Location of last permanent residence

	<i># of Persons</i>
Zip code is within jurisdiction**	a. <input type="text" value="17"/>
Zip code is not within jurisdiction	b. <input type="text" value="4"/>
Missing this information	c. <input type="text" value="0"/>
Total:	21

Length of Stay

TH-IND Question 12: Number of Nights in Transitional Housing for Veterans

		# of FEMALES	# of MALES	# of MISSING GENDER
1 to 7 nights	a.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
8 to 30 nights	b.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
31 to 60 nights	c.	<input type="text" value="0"/>	<input type="text" value="3"/>	<input type="text" value="0"/>
61 to 90 nights	d.	<input type="text" value="0"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
91 to 120 nights	e.	<input type="text" value="0"/>	<input type="text" value="3"/>	<input type="text" value="0"/>
121 to 150 nights	f.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
151 to 180 nights	g.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
181 to 210 nights	h.	<input type="text" value="0"/>	<input type="text" value="3"/>	<input type="text" value="0"/>
211 to 240 nights	i.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
241 to 270 nights	j.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
271 to 300 nights	k.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
301 to 330 nights	l.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
331 to 360 nights	m.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
361 to 365 nights	n.	<input type="text" value="3"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
Missing this Information	o.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		3	18	0

Survey Response Set: PSH-FAM: Permanent Supportive Housing for Families

Total Counts**PSH-FAM Question 1: Total Number of Persons in Families Who Used Permanent Supportive Housing (PSH) During Covered Time Period**

	<i># of Persons / Beds</i>
Unduplicated number of Persons in Families ^a that used a PSH program participating in HMIS	a. <input type="text" value="43"/>
Number of PSH beds in HMIS that are designated for Persons in Families (i.e., bed capacity for participating providers) ^c	b. <input type="text" value="147.00"/>
Number of PSH beds at providers not participating in HMIS that are designated for Persons in Families (i.e., bed capacity for non-participating providers) ^c	c. <input type="text" value="0.00"/>
Number of Persons in Families who used more than one HMIS participating PSH program as part of a family	d. <input type="text" value="0"/>

PSH-FAM Question 2: How many Persons in Families were using Permanent Supportive Housing ...

	<i># of Persons</i>
... on average per night during covered time period?	a. <input type="text" value="40.00"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="39"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="39"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="41"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="41"/>

PSH-FAM Question 3: How many Persons in Families used Permanent Supportive Housing at some time during covered period and...

- # of Persons*
- ... were also served as an individual in an emergency shelter during covered time period? **a.**
- ... were also served as a person in a family in an emergency shelter during covered time period? **b.**
- ... were also served as an individual in transitional housing during covered time period? **c.**
- ... were also served as a person in a family in transitional housing during covered time period? **d.**
- ... were also served as an individual in permanent supportive housing during covered time period? **e.**

Demographics

PSH-FAM Question 4: Age*

Age of Adults:		<i># of Persons</i>
18 to 30	a.	<input type="text" value="7"/>
31 to 50	b.	<input type="text" value="25"/>
51 to 61	c.	<input type="text" value="11"/>
62 or older	d.	<input type="text" value="0"/>
Total:		43

Missing this information	e.	<input type="text" value="0"/>
--------------------------	----	--------------------------------

Persons Reported:	43
--------------------------	-----------

PSH-FAM Question 5: Gender*

		<i># of Veterans</i>
Female	a.	<input type="text" value="18"/>
Male	b.	<input type="text" value="25"/>
Transgendered male to female	c.	<input type="text" value="0"/>
Transgendered female to male	d.	<input type="text" value="0"/>
Other	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		43

<i>Persons Reported:</i>	43
---------------------------------	-----------

PSH-FAM Question 6: Ethnicity

		<i># of Persons</i>
Non-Hispanic/Non-Latino	a.	<input type="text" value="38"/>
Hispanic/Latino	b.	<input type="text" value="5"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		43

PSH-FAM Question 7: Race

		<i># of Persons</i>
White, Non-Hispanic/Non-Latino	a.	<input type="text" value="16"/>
White, Hispanic/Latino	b.	<input type="text" value="3"/>
Black or African-American	c.	<input type="text" value="18"/>
Asian	d.	<input type="text" value="1"/>
American Indian or Alaska Native	e.	<input type="text" value="2"/>
Native Hawaiian or Other Pacific Islander	f.	<input type="text" value="1"/>
Multiple races	g.	<input type="text" value="2"/>
Missing this information	h.	<input type="text" value="0"/>
Total:		43

PSH-FAM Question 8: Total Number of Persons who are Veterans within Households

		<i>Total Number of Veterans</i>
1 Veteran per Household	a.	<input type="text" value="43"/>
2 Veterans per Household	b.	<input type="text" value="0"/>
3 Veterans per Household	c.	<input type="text" value="0"/>
4 Veterans per Household	d.	<input type="text" value="0"/>
5 or more Veterans per Household	e.	<input type="text" value="0"/>
Missing this information	f.	<input type="text" value="0"/>
Total:		43

PSH-FAM Question 9: How Many Persons in Families are Disabled (Adults Only)?

		<i># of Persons</i>
Yes, disabled	a.	<input type="text" value="37"/>
Not disabled	b.	<input type="text" value="6"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		43

PSH-FAM Question 10: How Many Persons in Families had the Following Disability Types (Adults Only)

		<i># of Persons</i>
Physical disability	a.	<input type="text" value="20"/>
Developmental disability	b.	<input type="text" value="0"/>
HIV/AIDS	c.	<input type="text" value="0"/>
Mental health ^a	d.	<input type="text" value="13"/>
Substance abuse ^a	e.	<input type="text" value="3"/>
Both mental health and substance abuse ^b	f.	<input type="text" value="3"/>
Missing this information ^c	g.	<input type="text" value="1"/>
Total:		40

Prior Living Situation**PSH-FAM Question 11: How Many Persons in Families Entered Permanent Supportive Housing During the AHAR Reporting Period**

Unduplicated count of persons who entered **a.**

PSH-FAM Question 12: Living Arrangement the Night Before Program Entry for veterans in families in permanent supportive housing

	<i># of Persons</i>
Emergency shelter a.	<input type="text" value="3"/>
Transitional housing b.	<input type="text" value="9"/>
Permanent supportive housing c.	<input type="text" value="0"/>
Psychiatric facility d.	<input type="text" value="0"/>
Substance abuse treatment center/detox e.	<input type="text" value="0"/>
Hospital (non-psychiatric) f.	<input type="text" value="0"/>
Jail, prison, or juvenile detention g.	<input type="text" value="1"/>
Rental by client (VASH subsidy) h.	<input type="text" value="0"/>
Rental by client (other subsidy) i.	<input type="text" value="0"/>
Rental by client (no subsidy) j.	<input type="text" value="10"/>
Owned by client (with subsidy) k.	<input type="text" value="0"/>
Owned by client (no subsidy) l.	<input type="text" value="1"/>
Staying with family m.	<input type="text" value="10"/>
Staying with friends n.	<input type="text" value="5"/>
Hotel or motel (no voucher) o.	<input type="text" value="1"/>
Foster care home p.	<input type="text"/>
Place not meant for habitation q.	<input type="text" value="2"/>
Safe Haven r.	<input type="text" value="0"/>
Other living arrangement s.	<input type="text" value="1"/>
Missing this information t.	<input type="text" value="0"/>

Total:

PSH-FAM Question 13: How long did veterans stay in their living arrangements the night before program entry?

	<i># of Persons</i>
One week or less	a. <input style="width: 50px; text-align: center;" type="text" value="2"/>
More than one week, but less than a month	b. <input style="width: 50px; text-align: center;" type="text" value="3"/>
One to three months	c. <input style="width: 50px; text-align: center;" type="text" value="13"/>
More than three months, but less than a year	d. <input style="width: 50px; text-align: center;" type="text" value="16"/>
One year or longer	e. <input style="width: 50px; text-align: center;" type="text" value="9"/>
Missing this information	f. <input style="width: 50px; text-align: center;" type="text" value="0"/>
Total:	43

PSH-FAM Question 14 (Optional): Location of last permanent residence for adults in families in permanent supportive housing

	<i># of Persons</i>
Zip code is within jurisdiction**	a. <input style="width: 50px; text-align: center;" type="text" value="40"/>
Zip code is not within jurisdiction	b. <input style="width: 50px; text-align: center;" type="text" value="3"/>
Missing this information	c. <input style="width: 50px; text-align: center;" type="text" value="0"/>
Total:	43

PSH-FAM Question 15: How Many Persons in Families *Exited* Permanent Supportive Housing During the AHAR Reporting Period

Unduplicated count of persons who exited	a. <input style="width: 50px; text-align: center;" type="text" value="2"/>
--	--

PSH-FAM Question 16: What was the Destination of Persons in Families in Permanent Supportive Housing Who Exited the Program During the AHAR Period?

Emergency shelter	a.	<input type="text" value="0"/>
Transitional housing	b.	<input type="text" value="0"/>
Permanent supportive housing	c.	<input type="text" value="0"/>
Psychiatric facility	d.	<input type="text" value="0"/>
Substance abuse treatment or detox	e.	<input type="text" value="0"/>
Hospital (non-psychiatric)	f.	<input type="text" value="0"/>
Jail, prison or juvenile detention	g.	<input type="text" value="0"/>
Rental by client (VASH subsidy)	h.	<input type="text" value="0"/>
Rental by client (other subsidy)	i.	<input type="text" value="0"/>
Rental by client (no subsidy)	j.	<input type="text" value="1"/>
Owned by client (with subsidy)	k.	<input type="text" value="0"/>
Owned by client (no subsidy)	l.	<input type="text" value="0"/>
Staying with family, temporary tenure	m.	<input type="text" value="1"/>
Staying with family, permanent tenure	n.	<input type="text" value="0"/>
Staying with friends, temporary tenure	o.	<input type="text" value="0"/>
Staying with friends, permanent tenure	p.	<input type="text" value="0"/>
Hotel or motel (no voucher)	q.	<input type="text" value="0"/>
Foster care home	r.	<input type="text" value="0"/>
Place not meant for habitation	s.	<input type="text" value="0"/>
Safe Haven	t.	<input type="text" value="0"/>
Deceased	u.	<input type="text" value="0"/>
Other living arrangement	v.	<input type="text" value="0"/>
Missing this information	w.	<input type="text" value="0"/>
Total:		2

Length of Stay

PSH-FAM Question 17: Number of Nights in Permanent Supportive Housing for Veterans in Families During the AHAR Reporting Period

		# of FEMALES	# of MALES	# of MISSING GENDER
1 to 7 nights	a.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
8 to 30 nights	b.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
31 to 60 nights	c.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
61 to 90 nights	d.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
91 to 120 nights	e.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
121 to 150 nights	f.	<input type="text" value="0"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
151 to 180 nights	g.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
181 to 210 nights	h.	<input type="text" value="0"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
211 to 240 nights	i.	<input type="text" value="1"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
241 to 270 nights	j.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
271 to 300 nights	k.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
301 to 330 nights	l.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
331 to 360 nights	m.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
361 to 365 nights	n.	<input type="text" value="17"/>	<input type="text" value="19"/>	<input type="text" value="0"/>
Missing this Information	o.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		18	25	0

PSH-FAM Question 18: Total Length of Stay for Veterans in Permanent Supportive Housing for the *Most Recent Consecutive Stay* During the AHAR Reporting Period

		# of FEMALES	# of MALES	# of MISSING GENDER
0 to 6 months (or 1 to 180 nights)	a.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
7 to 12 months (or 181 to 365 nights)	b.	<input type="text" value="1"/>	<input type="text" value="4"/>	<input type="text" value="0"/>
13 to 18 months (or 366 to 545 nights)	c.	<input type="text" value="4"/>	<input type="text" value="3"/>	<input type="text" value="0"/>
19 to 24 months (or 546 to 730 nights)	d.	<input type="text" value="5"/>	<input type="text" value="7"/>	<input type="text" value="0"/>
2 to 5 years (or 731 to 1,825 nights)	e.	<input type="text" value="8"/>	<input type="text" value="10"/>	<input type="text" value="0"/>
More than 5 years (1,826 nights or greater)	f.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Missing this information	g.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		18	25	0

Household Counts

PSH-FAM Question 19: How Many Veteran Family Households Stayed in Permanent Supportive Housing

		# of Households
... at any time during the covered time period?	a.	<input type="text" value="43"/>
... on Wednesday of the last week in October (October 30, 2013)?	b.	<input type="text" value="39"/>
... on Wednesday of the last week in January (January 29, 2014)?	c.	<input type="text" value="39"/>
... on Wednesday of the last week in April (April 30, 2014)?	d.	<input type="text" value="41"/>
... on Wednesday of the last week in July (July 30, 2014)?	e.	<input type="text" value="41"/>

Survey Response Set: PSH-IND: Permanent Supportive Housing for Individuals

Total Counts**PSH-IND Question 1: Total Number of Individuals Who Used Permanent Supportive Housing (PSH) During Covered Time Period**

	<i># of Persons / Beds</i>
Unduplicated number of Individuals ^a that used a PSH program participating in HMIS	a. <input type="text" value="120"/>
Number of PSH beds in HMIS that are designated for Veteran Individuals (i.e., bed capacity for participating providers) ^c	b. <input type="text" value="100.00"/>
Number of PSH beds at providers not participating in HMIS that are designated for Veteran Individuals (i.e., bed capacity for non-participating providers) ^c	c. <input type="text" value="0.00"/>
Number of Individuals who used more than one HMIS participating permanent supportive housing as an individuals	d. <input type="text" value="0"/>

PSH-IND Question 2: How many Individuals were using Permanent Supportive Housing ...

	<i># of Persons</i>
... on average per night during covered time period?	a. <input type="text" value="102.00"/>
... on Wednesday of the last week in October (October 30, 2013)?	b. <input type="text" value="107"/>
... on Wednesday of the last week in January (January 29, 2014)?	c. <input type="text" value="106"/>
... on Wednesday of the last week in April (April 30, 2014)?	d. <input type="text" value="103"/>
... on Wednesday of the last week in July (July 30, 2014)?	e. <input type="text" value="97"/>

PSH-IND Question 3: How many Individuals used Permanent Supportive Housing at some time during covered period and...

- # of Persons*
- ... were also served as an individual in an emergency shelter during covered time period? **a.**
- ... were also served as a person in a family in an emergency shelter during covered time period? **b.**
- ... were also served as an individual in transitional housing during covered time period? **c.**
- ... were also served as a person in a family in transitional housing during covered time period? **d.**
- ... were also served as a person in a family in permanent supportive housing during covered time period? **e.**

Demographics

PSH-IND Question 4: Age*

Age of Adults:		<i># of Persons</i>
18 to 30	a.	10
31 to 50	b.	33
51 to 61	c.	66
62 or older	d.	11
Total:		120

Missing this information	e.	0
--------------------------	----	---

Persons Reported:	120
--------------------------	------------

PSH-IND Question 5: Gender*

		<i># of Veterans</i>
Female	a.	11
Male	b.	109
Transgendered male to female	c.	0
Transgendered female to male	d.	0
Other	e.	0
Missing this information	f.	0
Total:		120

<i>Persons Reported:</i>	120
---------------------------------	------------

PSH-IND Question 6: Ethnicity

		<i># of Persons</i>
Non-Hispanic/Non-Latino	a.	105
Hispanic/Latino	b.	15
Missing this information	c.	0
Total:		120

PSH-IND Question 7: Race

		<i># of Persons</i>
White, Non-Hispanic/Non-Latino	a.	<input type="text" value="78"/>
White, Hispanic/Latino	b.	<input type="text" value="15"/>
Black or African-American	c.	<input type="text" value="25"/>
Asian	d.	<input type="text" value="0"/>
American Indian or Alaska Native	e.	<input type="text" value="0"/>
Native Hawaiian or Other Pacific Islander	f.	<input type="text" value="1"/>
Multiple races	g.	<input type="text" value="1"/>
Missing this information	h.	<input type="text" value="0"/>
Total:		120

PSH-IND Question 8: Total Number of Persons who are Veterans within Households

		<i>Total Number of Veterans</i>
1 Veteran per Household	a.	120
2 Veterans per Household	b.	0
3 Veterans per Household	c.	0
4 Veterans per Household	d.	0
5 or more Veterans per Household	e.	0
Missing this information	f.	0
Total:		120

PSH-IND Question 9: How Many Individuals are Disabled (Adults Only)?

		<i># of Persons</i>
Yes, disabled	a.	<input type="text" value="102"/>
Not disabled	b.	<input type="text" value="18"/>
Missing this information	c.	<input type="text" value="0"/>
Total:		120

PSH-IND Question 10: How Many Individuals had the Following Disability Types (Adults Only)

		<i># of Persons</i>
Physical disability	a.	<input type="text" value="62"/>
Developmental disability	b.	<input type="text" value="12"/>
HIV/AIDS	c.	<input type="text" value="1"/>
Mental health ^a	d.	<input type="text" value="32"/>
Substance abuse ^a	e.	<input type="text" value="18"/>
Both mental health and substance abuse ^b	f.	<input type="text" value="25"/>
Missing this information ^c	g.	<input type="text" value="1"/>
Total:		151

Prior Living Situation

PSH-IND Question 11: How Many Individuals Entered Permanent Supportive Housing During the AHAR Reporting Period

Unduplicated count of persons who entered **a.**

PSH-IND Question 12: Living Arrangement the Night Before Program Entry for individuals in permanent supportive housing

	<i># of Persons</i>
Emergency shelter a.	<input type="text" value="22"/>
Transitional housing b.	<input type="text" value="20"/>
Permanent supportive housing c.	<input type="text" value="0"/>
Psychiatric facility d.	<input type="text" value="0"/>
Substance abuse treatment center/detox e.	<input type="text" value="0"/>
Hospital (non-psychiatric) f.	<input type="text" value="0"/>
Jail, prison, or juvenile detention g.	<input type="text" value="1"/>
Rental by client (VASH subsidy) h.	<input type="text" value="2"/>
Rental by client (other subsidy) i.	<input type="text" value="0"/>
Rental by client (no subsidy) j.	<input type="text" value="15"/>
Owned by client (with subsidy) k.	<input type="text" value="0"/>
Owned by client (no subsidy) l.	<input type="text" value="1"/>
Staying with family m.	<input type="text" value="11"/>
Staying with friends n.	<input type="text" value="15"/>
Hotel or motel (no voucher) o.	<input type="text" value="1"/>
Foster care home p.	<input type="text"/>
Place not meant for habitation q.	<input type="text" value="31"/>
Safe Haven r.	<input type="text" value="1"/>
Other living arrangement s.	<input type="text" value="0"/>
Missing this information t.	<input type="text" value="0"/>

Total:

PSH-IND Question 13: How long did individuals stay in their living arrangements the night before program entry?

	<i># of Persons</i>
One week or less	a. <input type="text" value="7"/>
More than one week, but less than a month	b. <input type="text" value="15"/>
One to three months	c. <input type="text" value="31"/>
More than three months, but less than a year	d. <input type="text" value="27"/>
One year or longer	e. <input type="text" value="40"/>
Missing this information	f. <input type="text" value="0"/>
Total:	120

PSH-IND Question 14 (Optional): Location of last permanent residence

	<i># of Persons</i>
Zip code is within jurisdiction**	a. <input type="text" value="112"/>
Zip code is not within jurisdiction	b. <input type="text" value="8"/>
Missing this information	c. <input type="text" value="0"/>
Total:	120

PSH-IND Question 15: How Many Individuals *Exited* Permanent Supportive Housing During the AHAR Reporting Period

Unduplicated count of persons who exited	a. <input type="text" value="22"/>
--	------------------------------------

PSH-IND Question 16: What was the Destination of Individuals in Permanent Supportive Housing Who Exited the Program During the AHAR Period?

Emergency shelter	a.	<input type="text" value="0"/>
Transitional housing	b.	<input type="text" value="0"/>
Permanent supportive housing	c.	<input type="text" value="2"/>
Psychiatric facility	d.	<input type="text" value="0"/>
Substance abuse treatment or detox	e.	<input type="text" value="1"/>
Hospital (non-psychiatric)	f.	<input type="text" value="1"/>
Jail, prison or juvenile detention	g.	<input type="text" value="0"/>
Rental by client (VASH subsidy)	h.	<input type="text" value="0"/>
Rental by client (other subsidy)	i.	<input type="text" value="1"/>
Rental by client (no subsidy)	j.	<input type="text" value="9"/>
Owned by client (with subsidy)	k.	<input type="text" value="0"/>
Owned by client (no subsidy)	l.	<input type="text" value="0"/>
Staying with family, temporary tenure	m.	<input type="text" value="1"/>
Staying with family, permanent tenure	n.	<input type="text" value="0"/>
Staying with friends, temporary tenure	o.	<input type="text" value="2"/>
Staying with friends, permanent tenure	p.	<input type="text" value="1"/>
Hotel or motel (no voucher)	q.	<input type="text" value="0"/>
Foster care home	r.	<input type="text" value="0"/>
Place not meant for habitation	s.	<input type="text" value="0"/>
Safe Haven	t.	<input type="text" value="0"/>
Deceased	u.	<input type="text" value="1"/>
Other living arrangement	v.	<input type="text" value="1"/>
Missing this information	w.	<input type="text" value="2"/>
Total:		22

Length of Stay

PSH-IND Question 17: Number of Nights in Permanent Supportive Housing for Veterans During the AHAR Reporting Period

		# of FEMALES	# of MALES	# of MISSING GENDER
1 to 7 nights	a.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
8 to 30 nights	b.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
31 to 60 nights	c.	<input type="text" value="0"/>	<input type="text" value="5"/>	<input type="text" value="0"/>
61 to 90 nights	d.	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
91 to 120 nights	e.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
121 to 150 nights	f.	<input type="text" value="0"/>	<input type="text" value="6"/>	<input type="text" value="0"/>
151 to 180 nights	g.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
181 to 210 nights	h.	<input type="text" value="0"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
211 to 240 nights	i.	<input type="text" value="1"/>	<input type="text" value="5"/>	<input type="text" value="0"/>
241 to 270 nights	j.	<input type="text" value="0"/>	<input type="text" value="5"/>	<input type="text" value="0"/>
271 to 300 nights	k.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
301 to 330 nights	l.	<input type="text" value="0"/>	<input type="text" value="3"/>	<input type="text" value="0"/>
331 to 360 nights	m.	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>
361 to 365 nights	n.	<input type="text" value="9"/>	<input type="text" value="78"/>	<input type="text" value="0"/>
Missing this Information	o.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		11	109	0

PSH-IND Question 18: Total Length of Stay for Veterans in Permanent Supportive Housing for the *Most Recent Consecutive Stay* During the AHAR Reporting Period

		# of FEMALES	# of MALES	# of MISSING GENDER
0 to 6 months (or 1 to 180 nights)	a.	<input type="text" value="1"/>	<input type="text" value="5"/>	<input type="text" value="0"/>
7 to 12 months (or 181 to 365 nights)	b.	<input type="text" value="0"/>	<input type="text" value="10"/>	<input type="text" value="0"/>
13 to 18 months (or 366 to 545 nights)	c.	<input type="text" value="1"/>	<input type="text" value="6"/>	<input type="text" value="0"/>
19 to 24 months (or 546 to 730 nights)	d.	<input type="text" value="0"/>	<input type="text" value="27"/>	<input type="text" value="0"/>
2 to 5 years (or 731 to 1,825 nights)	e.	<input type="text" value="8"/>	<input type="text" value="48"/>	<input type="text" value="0"/>
More than 5 years (1,826 nights or greater)	f.	<input type="text" value="1"/>	<input type="text" value="13"/>	<input type="text" value="0"/>
Missing this information	g.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total:		11	109	0

Survey Response Set: Summary: Summary of the reporting categories

Summary

Summary Question 1: Number of persons in your HMIS who appeared in...*

	# of Persons	ESFAM	ESIND	THFAM	THIND
All four program-household types:	a. <input type="text"/>	ESFAM	ESIND	THFAM	THIND
<ul style="list-style-type: none"> Individual in emergency shelter (ESIND), Family member in emergency shelter (ESFAM), Individual in transitional housing (THIND), and Family member in transitional housing (THFAM). 					
...these 3 program-household types only: ESIND, ESFAM, and THIND	b. <input type="text"/>	ESFAM	ESIND	THFAM	THIND
					0
...these 3 program-household types only: ESIND, ESFAM, and THFAM	c. <input type="text"/>	ESFAM	ESIND	THFAM	THIND
					0
	<input type="text"/>				

...these 3 program-household types only: ESIND, THIND, and THFAM	d.	<input type="text"/>	ESFAM	ESIND	THFAM	THIND
			0			
...these 3 program-household types only: ESFAM, THIND, and THFAM	e.	<input type="text"/>	ESFAM	ESIND	THFAM	THIND
				0		
...these 2 program-household types only: ESIND and ESFAM	f.	<input type="text"/>	ESFAM	ESIND	THFAM	THIND
					0	0
...these 2 program-household types only: ESIND and THIND	g.	<input type="text" value="4"/>	ESFAM	ESIND	THFAM	THIND
			0	4	0	4
...these 2 program-household types only: ESIND and THFAM	h.	<input type="text"/>	ESFAM	ESIND	THFAM	THIND
			0			0
...these 2 program-household types only: ESFAM and THIND	i.	<input type="text"/>	ESFAM	ESIND	THFAM	THIND
				0	0	
...these 2 program-household types only: ESFAM and THFAM	j.	<input type="text" value="1"/>	ESFAM	ESIND	THFAM	THIND
			1	0	1	0
...these 2 program-household types only: THIND and THFAM	k.	<input type="text"/>	ESFAM	ESIND	THFAM	THIND
			0	0		
...one program-household type only: ESIND	l.	<input type="text" value="303"/>	ESFAM	ESIND	THFAM	THIND
			0	303	0	0
...one program-household type only: ESFAM	m.	<input type="text" value="9"/>	ESFAM	ESIND	THFAM	THIND
			9	0	0	0
...one program-household type only: THIND	n.	<input type="text" value="17"/>	ESFAM	ESIND	THFAM	THIND
			0	0	0	17
...one program-household type only: THFAM	o.	<input type="text" value="2"/>	ESFAM	ESIND	THFAM	THIND
			0	0	2	0

Total:

	ESFAM	ESIND	THFAM	THIND	
Reporting Category Totals:		10	307	3	21