**Central Sierra Continuum of Care CA-526 Point-in-Time Count Form for Night of Count - January 24, 2024**

Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Page 1 of 3

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| # | **Question** | **Unsheltered** | **Sheltered** |
| 1. | *[If canvassing on Wednesday pm, ask]:*Where are you sleeping tonight?*[If canvassing on Thursday am, ask]:*Where did you sleep last night? |  Outside on the Street, in a park,  under a bridge, woods or outdoor  encampment etc. Vehicle (car, van, RV, truck) Abandoned building Church property Couch-surfing / staying with friend  or relative \* Other location (specify) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Emergency shelter, including  domestic violence shelter. Transitional Housing Motel paid for by other agency (agency): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Jail, hospital, or treatment  Program\* Motel paid for by self \* Own house or apartment \* |
| 2. | Did another volunteer already ask you these same questions about where you are staying? |  Yes “(Thank you for your time.” There is no need to continue.)  No  Don't Know / Refused |
| 3. | Including yourself, how many adults and children are there in your household, who are staying in the same location with you tonight *(last night)*? | \_\_\_\_\_ Adults (Age 18 and older) \_\_\_\_\_ Children (Age 17 and younger) |
|  |  | Person 1 | Person 2 | Person 3 | Person 4 |
| 4a. | What are your initials |  |
| 4b. | What are the initials of other people staying in the same place, from oldest to youngest? |  |  |  |  |
| 5. | How is *[fill initials]* related to you? | SELF |  Child Spouse Non-married  partner Other family Other non-family:\_\_\_\_\_\_\_\_\_\_\_ |  Child Spouse Non-married  partner Other family Other non-family:\_\_\_\_\_\_\_\_\_\_\_ |  Child Spouse Non-married  partner Other family Other non-family:\_\_\_\_\_\_\_\_\_\_\_ |
| 6.a | How old are you? |  |  |  |  |
| 6.b | [If hesitant, ask:] “Are you...” |  Under age 18 18-24 years 25-34 years 35-44 Years 45-54 years 55-64 years 65 and older  DK / Ref. |  Under age 18 18-24 years 25-34 years 35-44 Years 45-54 years 55-64 years 65 and older  DK / Ref. |  Under age 18 18-24 years 25-34 years 35-44 Years 45-54 years 55-64 years 65 and older  DK / Ref. |  Under age 18 18-24 years 25-34 years 35-44 Years 45-54 years 55-64 years 65 and older  DK / Ref. |
| 7. |  “To which gender identity do you most identify?”  |  Woman (girl if child) Man (Boy if child) Culturally Specific Identity (Two -Spirit) Different IdentityNon-BinaryTransgenderQuestioning Client does not know.Client prefers not to answer.Data not collected. |  Woman (girl if child) Man (Boy if child) Culturally Specific Identity (Two -Spirit) Different IdentityNon-BinaryTransgenderQuestioningClient does not know.Client prefers not to answer.Data not collected. |  Woman (girl if child) Man (Boy if child) Culturally Specific Identity (Two -Spirit) Different IdentityNon-BinaryTransgenderQuestioningClient does not know.Client prefers not to answer.Data not collected. |  Woman (girl if child) Man (Boy if child) Culturally Specific Identity (Two -Spirit) Different IdentityNon-BinaryTransgenderQuestioningClient does not know.Client prefers not to answer.Data not collected. |
| 8. | What is your race? You can select one or more races.[READ CATEGORIES]  |  American Indian Alaska Native, or Indigenous Asian or Asian American Black, African American, or Black Native Hawaiian or  Pacific Islander White Hispanic/Latina/e/o Middle Eastern or North African Client does not know. Client prefers not to answer. Date not collected. Other\_\_\_\_\_\_\_\_\_\_\_\_ |  American Indian Alaska Native, or Indigenous Asian or Asian American Black, African American, or Black Native Hawaiian or  Pacific Islander White Hispanic/Latina/e/o Middle Eastern or North African Client does not know. Client prefers not to answer. Date not collected. Other\_\_\_\_\_\_\_\_\_\_\_\_ |  American Indian Alaska Native, or Indigenous Asian or Asian American Black, African American, or Black Native Hawaiian or  Pacific Islander White Hispanic/Latina/e/o Middle Eastern or North African Client does not know. Client prefers not to answer. Date not collected. Other\_\_\_\_\_\_\_\_\_\_\_\_ |  American Indian Alaska Native, or Indigenous Asian or Asian American Black, African American, or Black Native Hawaiian or  Pacific Islander White Hispanic/Latina/e/o Middle Eastern or North African Client does not know. Client prefers not to answer. Date not collected. Other\_\_\_\_\_\_\_\_\_\_\_\_ |

**[GO BACK TO QUESTION 5, COMPLETE COLUMNS FOR PERSONS 2-4 FOR ALL OTHER HOUSEHOLD MEMBERS IN ORDER OF OLDEST TO YOUNGEST, THEN ASK QUESTIONS 10-14 FOR ADULTS ONLY.]**

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|  | **Following questions for Adults Only** | **Person 1** | **Person 2** | **Person 3** | **Person 4** |
| 9. | Have you served in the U.S. Armed Forces?  |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |
| 10. | Including this time, how many separate times have you stayed in shelters or on the streets in the past 3 years? Was it less than 4 times or at least 4 or more times?  |  Less than 4 4 or more  DK / Ref. |  Less than 4 4 or more  DK / Ref. |  Less than 4 4 or more  DK / Ref. |  Less than 4 4 or more  DK / Ref. |
| 11.a | In total, how long did you stay in shelters or on the streets for those [*NUMBER FROM Q11*] times? |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |
| 11b. | What county did you live in before this episode of homelessness?*(If Other, please write name of county below, if known.)*Other: |  Amador Calaveras Mariposa Tuolumne Other |  Amador Calaveras Mariposa Tuolumne Other |  Amador Calaveras Mariposa Tuolumne Other |  Amador Calaveras Mariposa Tuolumne Other |
| 11c. | How long have you lived in this county? |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |  < 1 month 1-6 months 6-12 months 1 year or more DK / Ref. |
| 12.a |  Do you / does person [2-4] have a disability keeping you / them from holding a job or living in stable housing? |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |
| 12b. |  If yes, can you tell me what type of disability? Is it related to a physical condition, mental health disorder, alcohol or drug use, HIV/AIDS, or something else? *(May check more than one box)* |  Alcohol use Drug use Mental Health Physical dis. HIV/AIDS Other  DK / Ref. |  Alcohol use Drug use Mental Health Physical dis. HIV/AIDS Other DK / Ref. |  Alcohol use Drug use Mental Health Physical dis. HIV/AIDS Other DK / Ref. |  Alcohol use Drug use Mental Health Physical dis. HIV/AIDS Other DK / Ref. |
| 13a. | Have you / person [2-4] been a victim of domestic violence? |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |
| 13b. | If yes, are you / they currently fleeing a domestic violence situation? |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |  Yes  No DK / Ref. |
| 14. | What would it take for you to acquire or sustain housing? |  |
|  | **Following Question only for youth led households and unaccompanied youth age 24 and under.**  |
| 15. | Did you ever lose your housing or become homeless for any of the following reasons? *(Check all that apply)* |  Ran away / kicked out from my family home Ran away / kicked out from a group home or foster home Violence at home between family members Differences with parents about religious belief Sexual orientation or gender identity Because of some other reason (please specify) |