

# 2024 Point-in-Time Count – Volunteer Training

Presented by:

Daniella Jordán Gonzales, *HMIS Data Analyst*

David Boltz, *HMIS Data Analyst*

Jesse Vanhooser and Abby Kornberger, *HHID  
Analysts*

Jeanne Hidalgo, *Youth Program Manager*

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# AGENDA

1. Definition and Timing of the PIT
2. PIT Coordinators Role
3. Your Role as a Volunteer
4. What You Can Expect
5. Locations
6. How to Use the Point-in-Time Survey During the Count
7. Youth Supplemental Survey
8. Safety Guidelines
9. Aftercare
10. Interacting with the Media

# WHAT IS THE PIT AND WHEN IS IT HAPPENING?



Every January, a count of people experiencing homelessness takes place across the state with the use of surveys and the Homeless Management Information System.

This year, the count will be on **Wednesday, January 24<sup>th</sup>, 2024**, in all 16 regions of the Indiana Balance of State. That is 91 out of the 92 counties. Marion County conducts their own count.



The results of the count are reported to HUD at the end of April. Communities and the Indiana Balance of State use this information to plan for efficient allocation of resources to help people become stably housed.



# YOUR ROLE AS A VOLUNTEER

- Coordinate efforts with the PIT Coordinator in the region you are volunteering
  - What you are comfortable with and what you are not
  - Time availability
  - Any skills you can bring to the table
    - Language skills
    - Medical training
    - Street outreach experience
- Administer the Point-in-Time survey
  - Become familiar with the survey
  - Attend all required trainings
- Return all collected Point-in-Time surveys to the Point-in-Time Coordinator or designee
- Protect the clients' information and privacy

# WHAT YOU CAN EXPECT

- To be assigned a time and location(s) by your regional PIT Coordinator to conduct surveys
- To get blank paper surveys along with a pen and clipboard (this may vary from region to region)
- To go out to the assigned location(s) with at least one more person
- To go out in shifts either at night or in the morning
- Cold weather
- To dress warm and consider bringing a flashlight with you
- Having conversations not limited to the survey with people you interview
- Walking

# LOCATIONS

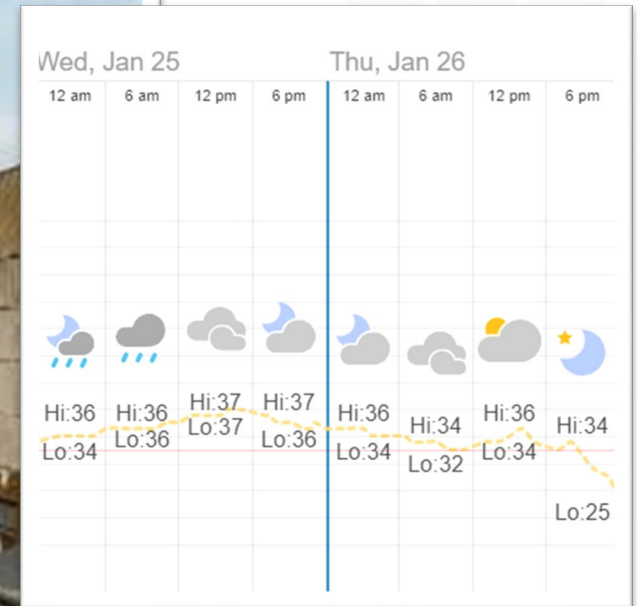
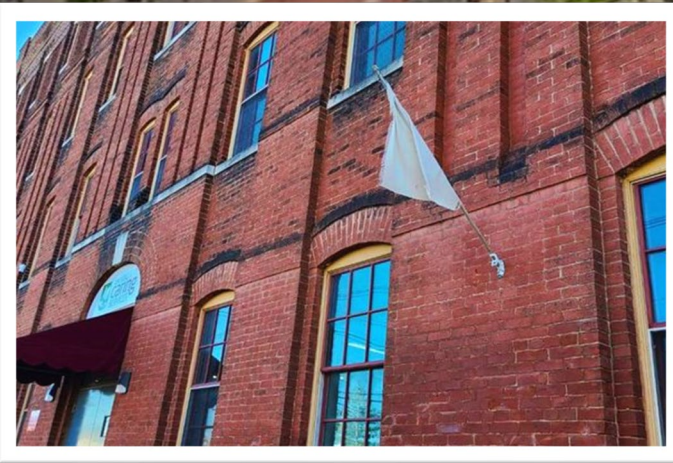
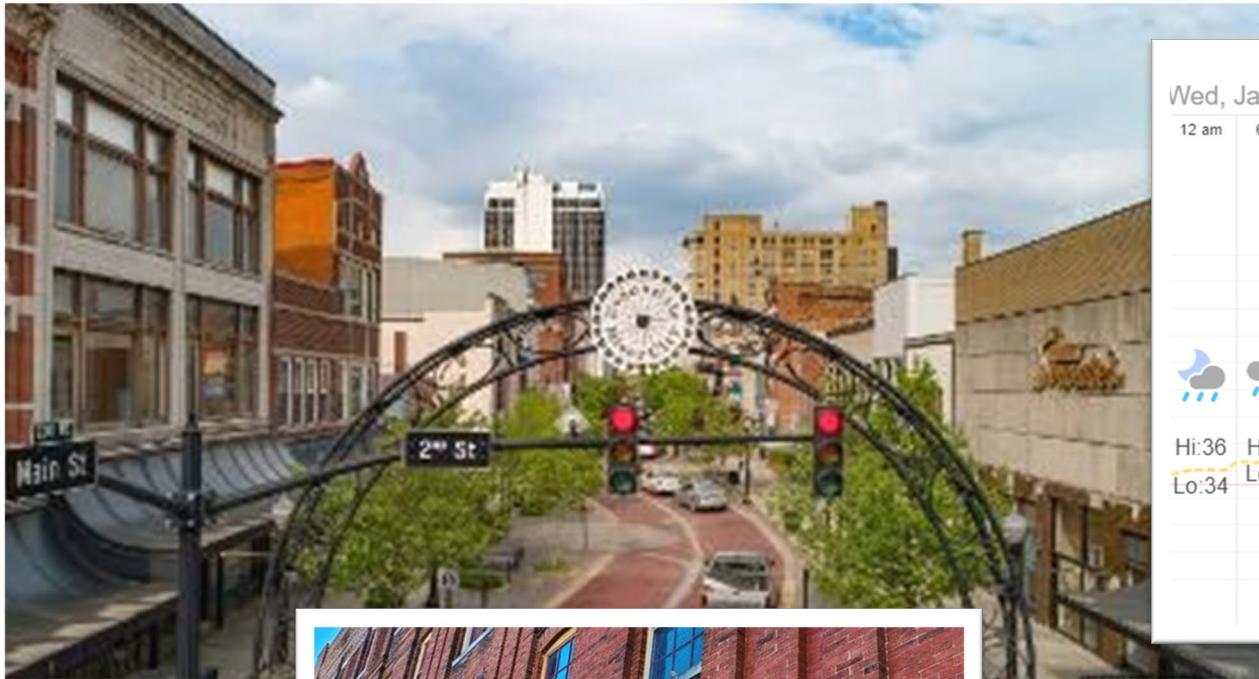


You can expect to survey people at emergency shelters, transitional housing projects, food pantries, service provider agencies, community centers, libraries etc.



You can also expect to go to locations such as parks, under bridges, encampments, out on the street, abandoned buildings, etc.

# PERSONAL EXPERIENCE – JESSE VANHOOSER

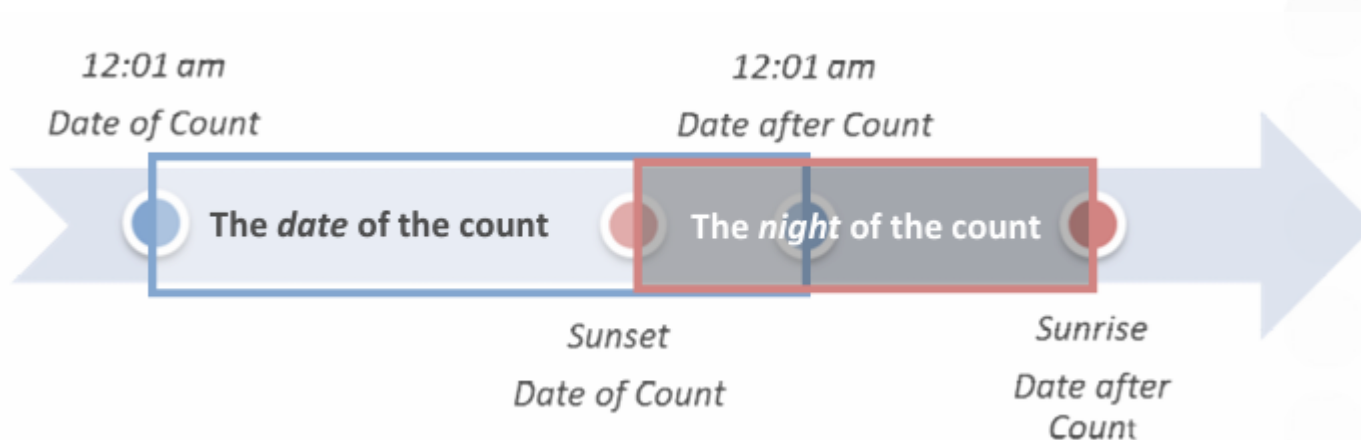




# USING THE PAPER SURVEYS

The most important question you will ask is:

**Where did you sleep on the night of January 24<sup>th</sup>, 2024?**



# A QUICK SURVEY OVERVIEW

- The survey has questions about living situation, demographics, veteran status, disabling condition, and domestic violence.
- Up to 5 people of the same household can be interviewed using one survey
- The survey can be printed in black and white
- PIT Coordinators have provided feedback to make the survey easy to read
- Spanish version available
- Automated survey alternative

# INTRODUCING THE SURVEY

“Hello, I am with [John] with [agency] and we are out in the community asking questions about housing instability. Could I ask you a few questions?”

- The survey is self-reported
- You can skip questions if you do not feel comfortable answering them
- Your information will only be shared with people directly working on the count
- Thank the person for their time if they choose not to take the survey

County: \_\_\_\_\_ Interviewer's Name: \_\_\_\_\_

Have you been interviewed about your housing situation today?  Yes (If "Yes". [STOP HERE](#))  No

Prior Living Situation – Where did/will you sleep on the night of Wednesday, January 24<sup>th</sup>, 2024?

- Emergency Shelter (Name): \_\_\_\_\_
- Transitional Housing (Name): \_\_\_\_\_
- Motel/hotel paid by provider (Name of provider): \_\_\_\_\_

- Place not meant for habitation (street, car, abandoned building, etc.)
- None of the above (If "None of the above" AND between the ages 14 – 24, then see supplemental youth survey).

How long did you sleep in this place?

- One night or less
- Two to six nights
- One week or more, but less than one month
- One month or more, but less than 90 days
- 90 days or more, but less than one year
- One year or longer
- Client doesn't know
- Client prefers not to answer

What is the approximate date this episode of homelessness started?

- Month: \_\_\_\_\_ Year: \_\_\_\_\_
- Client Doesn't know
  - Client prefers not to answer

Regardless of where you stayed on January 24<sup>th</sup>, how many times have you been on the streets, in an emergency shelter, or a [safe haven](#) in the past three years including today?

- One time
- Two times
- Three times
- Four or more times
- Client doesn't know
- Client prefers not to answer

How many months have you been homeless on the streets, in an emergency shelter, or safe haven in the past three years? \_\_\_\_\_

- Client doesn't know
- Client prefers not to answer

What is your first and last name? If you do not feel comfortable sharing this information, could I have your initials? First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

What are the last 4 digits of your social? \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

What is your date of birth or age: \_\_\_\_\_

What is your race and ethnicity? *Select all that apply.*

- American Indian, Alaska Native, or Indigenous
- Asian or Asian American
- Black, African American, or African
- Hispanic/Latina/e/o
- Middle Eastern or North African
- Native Hawaiian or Pacific Islander
- White
- Client doesn't know
- Client prefers not to answer

What is your gender?

- Woman (Girl, if child)
- Male (Boy, if child)
- Culturally Specific Identity (e.g., Two-Spirit)
- Transgender
- Non-Binary
- Questioning
- Different Identity \_\_\_\_\_
- Client doesn't know
- Client prefers not to answer

Have you served in the US Armed Forces (Army, Navy, Air Force, Marines, Coast Guard), in the National Guard or Reserves and been called to active duty by the president? *Active duty begins when a military member reports to a duty station after completion of training.*

- Yes
- No
- Client doesn't know
- Client prefers not to answer

Do you currently have a condition that is long-term and that is keeping you from living independently?

- Yes
- No
- Client doesn't know
- Client prefers not to answer

Have you experienced or are you experiencing any of the following?

- Alcohol Use Disorder
- Drug Use Disorder
- Mental Health
- Chronic Health Condition
- Developmental Disability
- HIV/AIDS
- Physical Disability
- None of the above

Have you ever been a victim of domestic violence?

- Yes
- No
- Client doesn't know
- Client Prefers not to answer

If "Yes" to previous question, how long ago did the domestic violence experience occurred?

- Less than 3 months
- Between 3 months, but less than 6 months

# SURVEY DEMO

Let's look at each question of the 2024 Point-in-Time Survey and how to ask each question.

# LIVING SITUATION

IHCDA POINT-IN-TIME SURVEY, (01/24/2024)

County: \_\_\_\_\_ Interviewer's Name: \_\_\_\_\_

It helps avoid duplication



- “Did/will” depending on when you ask the question
- If the answer is “None of the above”, ask the person if they are between 14-24 years of age
  - If so, offer the person to take the Youth Supplemental Survey
  - If not, thank the person and end the survey



**Have you been interviewed about your housing situation today?**  Yes (If “Yes”. STOP HERE)  No

**Prior Living Situation – Where did/will you sleep on the night of Wednesday, January 24<sup>th</sup>, 2024?**

Emergency Shelter (Name): \_\_\_\_\_

Transitional Housing (Name): \_\_\_\_\_

Motel/hotel paid by provider (Name of provider):  
\_\_\_\_\_

Place not meant for habitation (street, car, abandoned building, etc.)

None of the above (*If “None of the above” AND between the ages 14 – 24, then see supplemental youth survey*).

# CHRONIC HOMELESSNESS

## How long did you sleep in this place?

- One night or less
- Two to six nights
- One week or more, but less than one month
- One month or more, but less than 90 days
- 90 days or more, but less than one year
- One year or longer
- Client doesn't know
- Client prefers not to answer

## What is the approximate date this episode of homelessness started?

Month: \_\_\_\_\_ Year: \_\_\_\_\_

- Client Doesn't know
- Client prefers not to answer

## Regardless of where you stayed on January 24<sup>th</sup>, how many times have you been on the streets, in an emergency shelter, or a safe haven in the past three years including today?

- One time
- Two times
- Three times
- Four or more times
- Client doesn't know
- Client prefers not to answer

## How many months have you been homeless on the streets, in an emergency shelter, or safe haven in the past three years? \_\_\_\_\_

- Client doesn't know
- Client prefers not to answer

- After asking the question, read the possible answers
- Note that when asking about the “episode of homelessness” you specify THIS episode of homelessness
- These four questions help determine chronic homelessness
- “Client doesn't know” or “Client prefers not to answer” are perfectly valid answers

# APPROXIMATE DATE THIS EPISODE OF HOMELESSNESS STARTED

“Have the client look back to the date of the last time the client had a place to sleep that was not on the streets, ES, or SH.

Including the situation, the client was in right before entering, plus any continuous time moving around between the streets, an emergency shelter, or a Safe Haven, determine the date this period of the client's experience of “literal” homelessness began.

The look back time would not be broken by a stay of less than 7 consecutive nights in any permanent or temporary housing situation nor would it be broken by an institutional stay of less than 90 days (i.e., jail, substance abuse or mental health treatment facility, hospital, or other similar facility). Approximations are permitted.”

[2024 HMIS Data Standards p. 72](#)

# REGARDLESS OF WHERE YOU STAYED LAST NIGHT, HOW MANY TIMES HAVE YOU BEEN ON THE STREETS, IN AN EMERGENCY SHELTER, OR A SAFE HAVEN IN THE PAST THREE YEARS INCLUDING TODAY?

Including today, count all the different times the client was on the streets, in an emergency shelter, or in a Safe Haven in the last 3 years where there are full breaks in between (i.e., breaks that are 90 days or more in an institution or 7 nights or more in permanent or transitional housing).

[2024 HMIS Data Standards Manual p 73](#)



# HOW MANY MONTHS HAVE YOU BEEN HOMELESS ON THE STREETS, IN AN EMERGENCY SHELTER OR SAFE HAVEN IN THE PAST THREE YEARS?

“Count the cumulative number of months in which a person was on the streets, in an ES, or SH in the last 3 years, including stays in an institution less than 90 days or in permanent or transitional housing less than 7 days. The current month, even if a partial month, should be counted as a full month.”

[2024 HMIS Data Standards Manual p 73](#)

# DEMOGRAPHICS

- Answers are self-reported
- Clients have the right to refuse to answer a question
- Explain that we need at least one of the three to avoid duplication
  - First and Last name or initials
  - Date of birth
  - Last four digits of their SSN
- For race and ethnicity and gender, clients can select all the answers that apply to them.

What is your first and last name? If you do not feel comfortable sharing this information, could I have your initials? First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

What are the last 4 digits of your social? \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_  
What is your date of birth or age: \_\_\_\_\_

What is your race and ethnicity? *Select all that apply.*

- American Indian, Alaska Native, or Indigenous
- Asian or Asian American
- Black, African American, or African
- Hispanic/Latina/e/o
- Middle Eastern or North African
- Native Hawaiian or Pacific Islander
- White
- Client doesn't know
- Client prefers not to answer

What is your gender? *Select all that apply.*

- Woman (Girl, if child)
- Male (Boy, if child)
- Culturally Specific Identity (e.g., Two-Spirit)
- Transgender
- Non-Binary
- Questioning
- Different Identity \_\_\_\_\_
- Client doesn't know
- Client prefers not to answer

# VETERAN STATUS AND DISABILITY

Have you served in the US Armed Forces (Army, Navy, Air Force, Marines, Coast Guard), in the National Guard or Reserves and been called to active duty by the president? *Active duty begins when a military member reports to a duty station after completion of training.*

- Yes
- Client doesn't know
- No
- Client prefers not to answer

Do you currently have a condition that is long-term and that is keeping you from living independently?

- Yes
- Client doesn't know
- No
- Client prefers not to answer

Have you experienced or are you experiencing any of the following?

- Alcohol Use Disorder
- Drug Use Disorder
- Mental Health
- Chronic Health Condition
- Developmental Disability
- HIV/AIDS
- Physical Disability
- None of the above

- Make sure you read the definition of active duty.
- **Veteran status only applies to 18+ year olds**
- Mention to clients that they can select all the answers that apply to them under the question *“Have you experienced or are you experiencing any of the following?”*

# DOMESTIC VIOLENCE

**Have you ever been a victim of domestic violence?**

- Yes
- Client doesn't know
- No
- Client Prefers not to answer

**If "Yes" to previous question, how long ago did the domestic violence experience occurred?**

- Less than 3 months
- Between 3 months, but less than 6 months
- Between 6 months, but less than 1 year
- One year or more
- Client doesn't know
- Client prefers not to answer

**Are you currently fleeing domestic violence?**

- Yes
- Client doesn't know
- No
- Client prefers not to answer

- If the person has never been a victim of domestic violence, you can leave the next two questions blank.
- Ask your PIT Coordinator if there are any specific guidelines or resources you can provide when encountering people who are fleeing domestic violence

# ADDITIONAL HOUSEHOLD MEMBERS

Excluding yourself, how many adults (18+ yrs. old) and children (17 yrs. old or less) are there in your household who are sleeping/slept with you on 01/24/2024?

Number of adults \_\_\_\_\_ Number of children \_\_\_\_\_

If no additional adults or children were staying with the person being interviewed on the night of the count, then there would be 0 adults and 0 children.

# ADDITIONAL HOUSEHOLD MEMBERS (CONT.)

- These questions require you to enter the number of the answer for each person. For example, if there is a P2 (i.e., person 2) who has not been interviewed by their housing situation, you would enter “2.” as the answer for P2.

- There are other questions where you will be asked to enter first or last name, initials, number of months, numbers, etc. These responses will be individual for each client.

Excluding yourself, how many adults (18+ yrs. old) and children (17 yrs. old or less) are there in your household who are sleeping/slept with you at the same location on 01/24/2024?  
Number of adults \_\_\_\_\_ Number of children \_\_\_\_\_

*If there is more than one person in this household, please read the prompts carefully and complete the fields below. Write the number of the response as their response. For example, if the person said “Yes” to the question below, you would write “1” next to P2/P3/etc. for the question it applies.*

Have you been interviewed about your housing situation today? (If “Yes” STOP HERE for that person)

1. Yes
2. No
3. Client doesn’t know
4. Client prefers not to answer.

P2: \_\_\_\_\_ P3: \_\_\_\_\_ P4: \_\_\_\_\_ P5: \_\_\_\_\_

What is your relationship to the head of household?

1. Daughter
2. Son
3. Dependent Client
4. Grandchild
5. Spouse
6. Grandparent
7. Family Member
8. Other Non-family Member

P2: \_\_\_\_\_ P3: \_\_\_\_\_ P4: \_\_\_\_\_ P5: \_\_\_\_\_

Only for 18+ year olds – How long have you been sleeping in this place?

1. One night or less
2. Two to six nights
3. One week or more but less than a month
4. One month or more but less than 90 days
5. 90 days or more but less than one year
6. One year or longer
7. Client Doesn’t Know

Only for 18+ year olds – Regardless of where you stayed last night, how many times have you been on the streets, in an emergency shelter, or a safe haven in the past three years including today?

1. One time
2. Two times
3. Three times
4. Four or more times
5. Client doesn’t know
6. Client prefers not to answer

P2: \_\_\_\_\_ P3: \_\_\_\_\_ P4: \_\_\_\_\_ P5: \_\_\_\_\_

Only for 18+ year old – How many months have you been homeless on the streets, in an emergency shelter, or safe haven in the past three years?

P2: \_\_\_\_\_ P3: \_\_\_\_\_ P4: \_\_\_\_\_ P5: \_\_\_\_\_

What are your first and last names or Initials?

P2: \_\_\_\_\_ P3: \_\_\_\_\_ P4: \_\_\_\_\_ P5: \_\_\_\_\_

What is your date of birth or age?

P2: \_\_\_\_\_ P3: \_\_\_\_\_ P4: \_\_\_\_\_ P5: \_\_\_\_\_

What are the last four digits of your Social Security Number?

P2: \_\_\_\_\_ P3: \_\_\_\_\_ P4: \_\_\_\_\_ P5: \_\_\_\_\_

What is your race and ethnicity?

1. American Indian, Alaska Native, or Indigenous
2. Asian or Asian American
3. Black, African American, or African
4. Hispanic/Latina/e/o
5. Middle Eastern or North African
6. Native Hawaiian or Pacific Islander

# ASKING QUESTIONS TO MINORS



The survey specifies what questions are for 18 years old and older



Have the parent or guardian help you answer the questions on behalf of younger children



It is preferable to record initials and year of birth for minors instead of full first and last name and date of birth

# YOUTH SUPPLEMENTAL SURVEY

- Only use it if the person did not sleep in an ES, TH, SH, or unsheltered locations AND they are between 14-24 years old
- Catch the number of youth without stable housing
- Demographic questions
  - Date of birth
  - Race and Ethnicity
  - Gender
- DV questions-review definition
- Answers are self-reported, but if someone doesn't want to answer, move on to next question.
- Read all answer options
- **Note last question.** This can help recruit YYA with lived experience to serve on the YAB!

IHCDA POINT-IN-TIME YOUTH SUPPLEMENTAL SURVEY,  
(01/24/2024)

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

Interviewer's Name: \_\_\_\_\_

**Have you been interviewed about your housing situation today?**

Yes (If "Yes". STOP HERE)

No

**Are you between 14 -24 years of age?**

Yes

No (STOP Survey here and thank them for their time).

**Where you in a doubled-up situation on the night of Wednesday, January 24th?** *Doubled-up meaning you were staying with family and friends because you did not have a place you or your family own or rent.*

Yes

No

Other \_\_\_\_\_

**How long did you sleep in this place?**

One night or less

Two to six nights

One week or more, but less than one month

One month or more, but less than 90 days

90 days or more, but less than one year

One year or longer

I don't know

I prefer not to answer

**What is your date of birth?** (mm/dd/yyyy)

\_\_\_\_/\_\_\_\_/\_\_\_\_

**What is your race and ethnicity? Select all that apply.**

American Indian, Alaska Native, or Indigenous

Asian or Asian American

Black, African American, or African

Hispanic/Latina/e/o

Middle Eastern or North African

Native Hawaiian or Pacific Islander

White

I don't know

I prefer not to answer

**What is your gender?**

Woman (Girl, if child)

Male (Boy, if child)

Culturally Specific Identity (e.g., Two-Spirit)

Transgender

Non-Binary

Questioning

Different Identity \_\_\_\_\_

I don't know

I prefer not to answer

**Have you experienced or are you experiencing any of the following? Select all that apply.**

Alcohol Use Disorder  Developmental Disability

Drug Use Disorder  HIV/AIDS

Mental Health  Physical Disability

Juvenile Justice System  Foster Care

Chronic Health Condition  None of the above

**Have you ever been a victim of domestic violence?**

*"Domestic violence is a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner. Domestic violence can be physical, sexual, emotional, economic, psychological, or technological actions or threats of actions or other patterns of coercive behavior that influence another person within an intimate partner relationship. This includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone."*

Yes

I don't know

No

I prefer not to answer

**If "Yes" to previous question, how long ago did the domestic violence experience occur?**

Less than 3 months

Between 3 months, but less than 6 months

Between 6 months, but less than 1 year

One year or more

I don't know  I prefer not to answer

**Are you currently fleeing domestic violence?** *"Fleeing or attempting to flee includes: domestic violence, dating / violence, sexual assault, stalking, or other dangerous life-threatening conditions (including human trafficking?) that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence."*

Yes

I don't know

No

I prefer not to answer

**Would you like to receive emails regarding how you can get involved with the Youth Advisory Board of Indiana to help support youth with unstable housing? If so, what is your email?**



# RETURNING THE YOUTH SUPPLEMENTAL SURVEYS

Scan and email in an encrypted message all youth supplemental surveys to Jeanne Hidalgo at [Jhidalgo@ihcda.IN.gov](mailto:Jhidalgo@ihcda.IN.gov) by **February 15<sup>th</sup>, 2024**. Any surveys received after that date will not be considered.

# QUICK GUIDE: OUTREACH TEAMS – STAYING SAFE DURING RESPIRATORY SEASON



Indiana Housing & Community Development Authority



Quick Guide: Outreach Teams - Staying Safe During Respiratory Season  
Homeless Health Infectious Disease (HHID)

## General Guidance

Outreach teams connecting with the community throughout the winter months are encouraged to:

- Wear appropriate clothing for the weather forecast - "bundle up" if necessary!
  - Several layers of loose fitting, lightweight, warm clothing will provide **more protection** than one layer of heavy clothing.
- Utilize a hat and / or head covering.
  - Heat loss is proportional to the amount of exposed surface area of the body.
- Utilize gloves and scarves for additional protection.
  - Scarves can be used to protect the lungs from cold wind exposure that may lead to irritation and / or cough.
- Stay as dry as possible.
  - Water resistant outerwear** acts as the best protection for cold and precipitate conditions.
- Utilize proper footwear (socks / boots/ shoes) as appropriate.



- Greet person(s) from a distance of 3-6 feet.
  - Teams are encouraged to maintain distance throughout conversation for visibly symptomatic persons or those who report symptomatic.

- Clearly identify yourself and your agency.
  - Example: "Hello, my name is (insert name) and I am with (insert agency)."
- Conduct "1 Minute Respiratory Symptom Screening" Tool.
  - Respiratory symptom screening aims to identify Influenza Like Illness (ILI) or similar symptom producing respiratory illnesses. (See below)
- Maintain good hand hygiene by regularly washing hands or utilizing hand sanitizer throughout the outreach shift. (See below)
  - Wear gloves if you come into contact with individual belongings.

Teams are **highly** encouraged to review stress management and coping resources following outreach shifts!

Interacting with unsheltered individuals and families:



- Never "sneak up" or "corner" someone.
  - Respect the person(s) personal space, physical space where they live, and the community in which they live.

Always call 9-1-1 if you suspect an immediate health crisis!



Indiana Housing & Community Development Authority



Quick Guide: Outreach Teams - Staying Safe During Respiratory Season  
Homeless Health Infectious Disease (HHID)

## General Guidance

Respiratory hygiene / cough etiquette



Encourage individuals to:

- Cover their mouth and nose when coughing or sneezing.
- When available – use tissues and throw them away.
- Wash their hands or use hand sanitizer every time they touch their mouth or nose.

- Rub hands together, making sure that all surfaces of hands and fingers are covered.
- Rub hands together until they are dry (usually around 20seconds).
- Do not rinse or wipe off hand sanitizer before it is dry.**

Hand washing with soap and water



- Wet hands first with water.
- Apply soap to hands.
- Rub vigorously for at least 20 seconds, covering all surfaces of hands and fingers.
- Rinse hands with water and dry thoroughly with a paper towel.

Hand hygiene

Alcohol- based or non-alcohol-based hand sanitizer

- Dispense an amount the size of a quarter directly into the palm of one hand.

1 Minute Respiratory Symptom Screening Tool

**Initial Question:** "In an effort to keep everyone healthy, we want to start with a few questions about how you've been feeling recently."

**Over the past 14 days, have you had any of these symptoms?**

1. Dry cough (change from baseline)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Sore throat	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Fever? What may feel / may have felt like a fever?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Close contact with anyone who has COVID-19? (Close contact is defined as any distance less than 6ft for more than 10min)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If yes to any question 1-4, outreach worker is encouraged to maintain 3-6 ft distance and / or wear a mask.



Indiana Housing & Community Development Authority

# QUICK GUIDE: RECOGNIZING HYPOTHERMIA AND FROSTBITE



Indiana Housing & Community Development Authority



## Quick Guide: Recognizing Hypothermia and Frostbite Homeless Health Infectious Disease (HHID)

### General Guidance

#### Homeless Service Providers are encouraged to:

- Advise person(s) to seek shelter inside as much as possible, especially for sleeping during the winter months and/or cold temperatures.
- Remind person(s) about the importance of dressing in layers to increase their protection from the elements.
  - Several layers of loose fitting, lightweight, warm clothing will provide **more protection** than one layer of heavy clothing.
- Provide/recommend the use of a hat or head covering.
  - Heat loss is proportional to the amount of exposed surface area of the body.
- Provide/recommend glove and scarf usage.
  - Scarves can be used to protect the lungs from cold wind exposure that may lead to irritation and / or cough.
- Advise person(s) to stay as dry as possible.
  - **Water resistant outerwear** acts as the best protection for cold and precipitate conditions.
- Provide/recommend proper footwear use (socks/boots/shoes) as appropriate.



- Provide high – energy foods such as protein bars and snacks.
- Provide hearty soups and stews with high carbohydrate and protein contents.
- Encourage hydration (tea, water, and/or warmed juices).
- Alcohol consumption exacerbates heat loss.
  - Consumption may slow down circulation causing a loss of body heat in the hands and feet.

Misconception: Alcohol consumption “warms you up.”

If you believe someone may have hypothermia or frostbite, they should be referred for medical evaluation.

#### For person(s) coming in from the cold:

- Remove wet clothing – replace with dry clothing.
- Provide warm beverages (tea, water, and/or juice) avoiding those containing caffeine if possible.
- Assess person(s) for any of the following symptoms below – develop of these symptoms requires medical attention.

#### Additional Measures:

- Provide clothing items discussed above and additional loose layers as available.

Quick Guide: Shelter Providers, Warming Center Staff, Outreach Staff and/or Volunteers: Recognizing Hypothermia and Frostbite - October 2023



Indiana Housing & Community Development Authority

## Quick Guide: Recognizing Hypothermia and Frostbite Homeless Health Infectious Disease (HHID)



### General Guidance

#### Hypothermia Risk Factors

Person(s) at higher risk of developing hypothermia include those who:

- May be spending long periods of time outside.
- Are “underdressed” for the weather.
- May be consuming alcohol and/or using substances.
- Have an underlying or pre-existing condition.
- Are over 55 years of age.
- Are undernourished.
- Have a mental health disorder.
- Experiencing an illness or active infection.
- Have mobility restraints.

A person(s) may develop Hypothermia before outdoor temperatures reach what is considered “cold.” Hypothermia occurs when the body loses heat faster than it can produce heat.

Weather conditions such as wind and moisture can cause the body to lose heat.

#### Hypothermia Symptoms:

- Confusion.
- Slurred or delayed speech.
- A lack of coordination.
- Slowed response time.
- Sleepiness.

Quick Guide: Shelter Providers, Warming Center Staff, Outreach Staff and/or Volunteers: Recognizing Hypothermia and Frostbite - October 2023

- Shivering.

The signs and symptoms of Hypothermia are similar to those caused by alcohol consumption.

#### Frostbite Symptoms:

- Frost bitten areas may look dusky, dark.
- Immersion foot may look waxy, blanched, grayish/whitish in color.
- Skin may feel numb, prickly, or itchy to the person.
- As the area thaws, the skin may become red and painful.
- Encourage client to not walk on frostbitten feet or toes.

#### Person(s) with symptoms of Hypothermia or Frostbite should be referred for medical evaluation.

While person(s) are awaiting medical evaluation, staff are encouraged to:

- Provide warm, dry clothing.
- Warm – not hot – liquids.
- Avoid direct exposure to heaters or attempts to rapidly warm the person – these interventions can be harmful.



Indiana Housing & Community Development Authority

# GENERAL HEALTH TIPS

For Volunteers:

Dress appropriately for weather, walking distance, and comfortability for standing.

Refer to the Quick Guides shown for tips on staying safe during respiratory season as well as tips on recognizing Hypothermia and Frostbite.

HHID Quick Guides can be found [here](#)

For the people you interview:

Do they have enough layers to stay warm given current weather, if staying out?

Are they dry/in a dry area? (see Hypothermia quick guide for more risk factors of Hypothermia)

Can you see the rise and fall of their breathing?

In an emergency, contact 9-1-1.

# HOW TO APPROACH

Do not assume that the person you are approaching is experiencing homelessness

Be respectful of their space, privacy, and time

Approach the person without judgment of their appearance

Use an approachable/friendly tone of voice

Be aware of your safety and surroundings

Working in groups is best, but be mindful to not overwhelm an interviewee with too many interviewers

# WHAT IF...?

## The person I am interviewing goes off topic or is incoherent?

Be patient and respectful

Try to refocus

Reword questions into yes/no prompts

Do not take pictures with people you survey

Strive to listen without judgment

De-Center from interviewee frustration



# RESOURCES

## The person I am interviewing asks me for resources I don't have?

Direct people to resource providers in your community who may be able to meet their need(s), if known.

Discuss with your local PIT Coordinator for access to resource lists or specific resource recommendations.



# AFTERCARE

After volunteering for the PIT Count:

- Utilize self-care and stress management techniques
- Understand that this may be a stressful experience for both you and the interviewees
- Be proud of the work you've done





# INTERACTING WITH THE MEDIA

- Do not share identifying information of persons experiencing homelessness that you are meeting/interviewing
- Keep personal stories that have been shared with you vague – do not disclose specific locations of where people are staying
- It's okay to say that you don't know! Offer to follow-up or direct them to your PIT Coordinator/IHCDA
- Do not use acronyms or jargon known only by people in your field
- Take time to think about your answer before you respond
- Never say anything you don't want to read in print

# MEDIA INQUIRIES

- We hope that members of the local media have interest in reporting on this year's Point-in-Time Count.
- It is your job to provide accurate information about the count.
- If you are not comfortable answering questions, or feel you do not know the answer to a question, reach out to:  
[communications@ihcda.IN.gov](mailto:communications@ihcda.IN.gov)

# PIT COORDINATORS CONTACT INFORMATION

Region 1: Edward Seal and Abby Johnson [eseal@NWI-CA.org](mailto:eseal@NWI-CA.org); [ajohnson@NWI-CA.org](mailto:ajohnson@NWI-CA.org)

Region 1a: Abby Johnson [ajohnson@NWI-CA.org](mailto:ajohnson@NWI-CA.org)

Region 2: Mary Bales [mary.bales@oaklawn.org](mailto:mary.bales@oaklawn.org)

Region 2a: Brendan Devitt, [bdevitt@cfh.net](mailto:bdevitt@cfh.net)

Region 3: Erin Ness(temp), [erin@stjosephmissions.org](mailto:erin@stjosephmissions.org)

Region 4: Jennifer Layton, [jlayton@lthc.net](mailto:jlayton@lthc.net)

Region 5: Angela Ciski, [angelac@fsahc.org](mailto:angelac@fsahc.org)

Region 6: WaTasha Barnes-Griffin, [wgriffin@ywcacenin.org](mailto:wgriffin@ywcacenin.org)

Region 7: Danielle Elkins [delkins@ccthin.org](mailto:delkins@ccthin.org)

Region 8: Amber Gordon, [amber.gordon@aspireindiana.org](mailto:amber.gordon@aspireindiana.org)

Region 9: Jessica Burton and Donielle Harleman, [Jessica.Burton@meridianhs.org](mailto:Jessica.Burton@meridianhs.org) and [Donielle.Harleman@centerstone.org](mailto:Donielle.Harleman@centerstone.org)

Region 10: Forrest Gilmore(temp)- [forrest@beaconinc.org](mailto:forrest@beaconinc.org)

Region 11: Elaine Breeck, [ebreeck@hsi-indiana.com](mailto:ebreeck@hsi-indiana.com)

Region 12: Danette Romines [dromines@auroraevansville.org](mailto:dromines@auroraevansville.org)

Region 13: Brandi Pirtle, [bpirtle@soinhomeless.org](mailto:bpirtle@soinhomeless.org)

Region 14: Mike Creech and Brian Niese [mike.creech@cmhcinc.org](mailto:mike.creech@cmhcinc.org) and [brian.niese@cmhcinc.org](mailto:brian.niese@cmhcinc.org)

\*[IHCD Regional Structure](#)