



The Community Partnership
For The Prevention
of Homelessness

Quarterly Performance Plans Severe Weather for Families

Provider Name:	
Program Name:	
HMIS Program Name:	
Contact Person	
Families Served	
<i>Estimate the number of families that will utilize your program in each quarter. Note: remember that seasonal changes might effect the number of families served at different intervals.</i>	
December 1, 2007 - February 29, 2008	
March 1, 2008 - May 31, 2008	
June 1, 2008 - August 31, 2008	
September 1, 2008 - November 30, 2008	
<i>Also provide an estimated unduplicated count of families served for the entire year.</i>	
Total unduplicated number of families served (annually).	
Occupancy:	
<i>Estimate the approximate occupancy rate of your program for each quarter. Occupancy is the percentage of units in your program occupied homeless persons. Note: remember to account for seasonal changes and their affect on shelter occupancy.</i>	
December 1, 2007 - February 29, 2008	%
March 1, 2008 - May 31, 2008	%
June 1, 2008 - August 31, 2008	%
September 1, 2008 - November 30, 2008	%
<i>Also provide an estimated percentage occupancy rate for the entire year.</i>	
Annual Estimate	%



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Engagement:

Estimate the number of families in your program that you expect to be engaged in case management each quarter. Note: case management will be tracked through a new question in the 12 Hour Assessment in the HMIS. Record whether a family is engaged in case management with a Yes/No question in that assessment.

December 1, 2007 - February 29, 2008	
March 1, 2008 - May 31, 2008	
June 1, 2008 - August 31, 2008	
September 1, 2008 - November 30, 2008	

Based on your annual unduplicated estimate of Families Served, provide an annual estimated count of families engaged in case management throughout the year.

Annual Estimate

Destinations:

Estimate the number of families that will exit your program to both positive and negative destinations during the quarter. Note: fill out an Exit Sheet in the HMIS for each family when you are certain they have permanently ended their current stay in your program. Be specific in noting the family's destination; please be advised that an expanded list of positive destinations are available on the Exit Sheet.

	Positive	Negative
December 1, 2007 - February 29, 2008		
March 1, 2008 - May 31, 2008		
June 1, 2008 - August 31, 2008		
September 1, 2008 - November 30, 2008		

Based on your annual unduplicated estimate of Families Served, provide an annual estimated count of families exiting to positive and negative destinations.

Annual Estimates

Complete and return to Tom Fredericksen at tfredericksen@community-partnership.org

This is a Tier 2 deliverable.