

119TH CONGRESS
2D SESSION

S. _____

To improve the point-in-time count conducted by the Department of Housing and Urban Development, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. BARRASSO (for himself, Ms. LUMMIS, Mr. PETERS, and Mr. SULLIVAN) introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To improve the point-in-time count conducted by the Department of Housing and Urban Development, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. IMPROVEMENTS TO POINT-IN-TIME COUNT.**

4 (a) IN GENERAL.—Section 427(b)(3) of the McKin-
5 ney-Vento Homeless Assistance Act (42 U.S.C.
6 11386a(b)(3)) is amended—

7 (1) by striking “The Secretary” and inserting
8 the following:

1 “(A) LIMITATION ON SCOPE.—The Sec-
2 retary”; and

3 (2) by adding at the end the following:

4 “(B) ANNUAL POINT-IN-TIME COUNT.—

5 “(i) DEFINITION.—In this subpara-
6 graph, the term ‘annual point-in-time
7 count’ means the annual point-in-time
8 count of homeless individuals required
9 under clause (ii).

10 “(ii) REQUIREMENT.—

11 “(I) IN GENERAL.—The Sec-
12 retary shall require each recipient to
13 participate in an annual point-in-time
14 count of homeless individuals during
15 the last 10 days of April of each year
16 beginning after the date of enactment
17 of this subparagraph

18 “(II) SUPPLEMENTAL COUNTS.—

19 Authorization from the Secretary shall
20 not be required in order for a recipi-
21 ent to conduct a supplemental point-
22 in-time count of homeless individuals
23 during a different time of year than
24 the annual count described in sub-
25 clause (I).

1 “(iii) USE OF STANDARDIZED
2 TOOLS.—In conducting the annual point-
3 in-time count, a recipient shall use a com-
4 munity-wide homeless management infor-
5 mation system (commonly known as an
6 ‘HMIS’) for client-level data collection.

7 “(iv) TECHNICAL ASSISTANCE AND
8 SUPPORT FOR RURAL AND RESOURCE-LIM-
9 ITED CONTINUUMS OF CARE.—The Sec-
10 retary shall provide training in HMIS inte-
11 gration to rural or resource-limited recipi-
12 ents for purposes of conducting the annual
13 point-in-time count.

14 “(v) REPORTING AND COMPLIANCE.—

15 “(I) CONTINUUM OF CARE
16 STANDARDIZED HMIS REPORTING RE-
17 QUIREMENTS.—The Secretary shall
18 establish standardized HMIS report-
19 ing requirements for recipients con-
20 ducting the annual point-in-time
21 count with respect to the geographic
22 scope and spatial analysis of
23 unsheltered and sheltered populations.

1 “(II) HUD REPORT.—The Sec-
2 retary shall submit an annual report
3 to Congress on—

4 “(aa) compliance by recipi-
5 ents with the data collection,
6 HMIS reporting, and annual
7 point-in-time count requirements
8 under this subparagraph;

9 “(bb) technical assistance
10 and guidance provided by the
11 Secretary to recipients to support
12 implementation of the require-
13 ments described in item (aa); and

14 “(cc) improvements in the
15 consistency, accuracy, and quality
16 of data collected through the an-
17 nual point-in-time count.

18 “(vi) ROLLING HMIS UPDATES AND
19 MIDPOINT HMIS DATA.—

20 “(I) HMIS UPDATES.—A recipi-
21 ent shall maintain up-to-date HMIS
22 data year-round regarding participa-
23 tion in homelessness assistance
24 projects funded by the Secretary, in-
25 cluding entries into and exits from

1 emergency shelters, homeless street
2 outreach programs, transitional hous-
3 ing, and other eligible activities under
4 this subtitle.

5 “(II) MIDPOINT HMIS DATA.—A
6 recipient shall collect and maintain
7 HMIS data on unsheltered and shel-
8 tered homeless populations as of the
9 midway point between each annual
10 point-in-time count (in this subpara-
11 graph referred to as ‘midpoint HMIS
12 data’).

13 “(III) PURPOSES.—The purposes
14 of the midpoint HMIS data collected
15 under subclause (II) are to—

16 “(aa) track seasonal or
17 emerging trends;

18 “(bb) inform planning for
19 programs carried out under this
20 subtitle; and

21 “(cc) supplement, but not
22 replace, the annual point-in-time
23 count.

24 “(vii) GUIDANCE FOR RURAL AND RE-
25 SOURCE-LIMITED CONTINUUMS OF CARE.—

1 The Secretary shall provide guidance for
2 rural or resource-limited recipients regard-
3 ing—

4 “(I) standardized data collection
5 methodologies for the annual point-in-
6 time count;

7 “(II) implementation and inte-
8 gration of HMIS tools for mapping
9 sheltered and unsheltered populations;

10 “(III) midpoint HMIS data col-
11 lection and spatial mapping require-
12 ments under this subparagraph; and

13 “(IV) staffing, training, and
14 technology best practices necessary to
15 comply with the requirements of this
16 subparagraph.

17 “(viii) FUNDING FLEXIBILITY.—The
18 Secretary may—

19 “(I) allow a recipient to use as-
20 sistance received under subtitle B to
21 support the training of employees or
22 volunteers in HMIS integration; and

23 “(II) provide guidance on ensur-
24 ing that the use of assistance under

1 subclause (I) does not disrupt service
2 delivery to homeless shelters.”.

3 (b) GAO STUDY.—

4 (1) DEFINITION.—In this subsection, the term
5 “Continuum of Care” means a recipient, as that
6 term is defined in section 401 of the McKinney-
7 Vento Homeless Assistance Act (42 U.S.C. 11360).

8 (2) STUDY.—Not later than 1 year after the
9 date of enactment of this Act, the Comptroller Gen-
10 eral of the United States shall—

11 (A) conduct a study of the annual point-in-
12 time count conducted by the Department of
13 Housing and Urban Development (in this sub-
14 section referred to as the “Department”), in-
15 cluding the methodology used by the Depart-
16 ment; and

17 (B) submit to Congress a report that con-
18 tains—

19 (i) the results of the study conducted
20 under subparagraph (A); and

21 (ii) as appropriate, recommendations
22 on how to modernize the annual point-in-
23 time count in a way that leads to greater
24 accuracy in counting the homeless, includ-
25 ing how the Department can—

1 (I) standardize collection method-
2 ology across Continuums of Care; and
3 (II) increase consistency, mod-
4 ernization, and efficiency of data col-
5 lection and reporting processes with
6 respect to the annual point-in-time
7 count within each Continuum of Care.