

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: IL-510 - Chicago CoC

1A-2. Collaborative Applicant Name: All Chicago Making Homelessness History

1A-3. CoC Designation: CA

1A-4. HMIS Lead: All Chicago Making Homelessness History

1B. Continuum of Care (CoC) Engagement

Instructions:

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1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	Yes	Yes
Hospital(s)	Yes	Yes
EMS/Crisis Response Team(s)	No	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Mental Illness Advocates	Yes	Yes
Substance Abuse Advocates	Yes	Yes

Other:(limit 50 characters)		
HIV Housing Advocates	Yes	Yes

1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 2,000 characters)

The Chicago CoC's structure includes an elected Board of Directors, the Service Providers Commission (SPC), the Persons with Lived Experience Commission (LEC), and the CoC's Project Management Implementation team that manages over 30 committees and work groups throughout the CoC. The SPC is made up of organizations that represent a range of services vital to ending homelessness: mental health, substance use, youth services, domestic violence services, outreach, housing & health.

In 2018 the CoC created the Project Management Implementation team and developed work plans. Completing these work plans involves creating committees and workgroups with representation from critical voices on a particular issue and/or deliverable. This has allowed our CoC to expand the number of agencies and voices at these meetings to extend far beyond our CoC membership and to those with an interest and expertise in preventing and ending homelessness. In 2018 we have seen a 20% increase in new agencies participating in CoC committees and work groups. Committee and workgroups are charged with planning and decision making that solicit and incorporate a variety of opinions from these critical voices. For example, the Diversion work group brought critical voices from the City of Chicago's eviction court including a judge to develop and test a project to assist Chicagoans in avoiding eviction and preventing homelessness. Outside of these meetings, the CoC solicits, considers & draws from the feedback and expertise within the community through its e-newsletters, surveys, and feedback sessions/focus groups, as necessary.

**1B-2.Open Invitation for New Members. Applicants must describe:
(1) the invitation process;
(2) how the CoC communicates the invitation process to solicit new members;
(3) how often the CoC solicits new members; and
(4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.
(limit 2,000 characters)**

1)The CoC has an open invitation process. The CoC Membership Application is available on All Chicago's website, interested members complete the application and send it to All Chicago. Then, the Membership Committee of the CoC responds to all membership inquiries. The Membership Committee then encourages new members to attend our bi-annual All CoC meetings.

2)The CoC solicits new members throughout the year. Information about the

CoC and membership information is available on All Chicago's website and through our monthly eNewsletter. The membership committee recruits new members during the bi-annual All CoC Meetings.

3)The CoC solicits new members on an on-going basis.

4)The CoC has several examples of targeted outreach at least annually for persons currently or formally experiencing homelessness. The Lived Experience Commission (LEC) creates and executes a targeted outreach plan to solicit new members. The LEC ensures that their constituency has a voice on all committees of the CoC Board. The Youth Advisory Board recruits members throughout the year with their application process available on the All Chicago website. Project Leads of the Action Agenda form workgroups with critical voices. For example, work groups around youth homelessness always have at least 3-4 youth and Coordinated Entry has focus groups of those experiencing homelessness that have been housed through coordinated entry.

1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals. (limit 2,000 characters)

After the CoC determined it would accept new projects, a request for letters of interest (LOI) was distributed community-wide thru the CoC that includes non-HUD CoC funded entities via email on 6/8/2018 and a reminder on 6/14/2018. When the CoC realized it had significantly more funding through reallocation, the CoC issued a request for qualifications (RFQ) on 7/14/2018 for new expansion projects and new RRH targeting youth. This RFQ was open to all organizations regardless of whether they currently receive CoC funding. The CoC encourages non-HUD funded organizations to apply & become CoC members; join committees; & participate in an orientation which includes an overview of the CoC structure & HUD/local funding priorities. All Chicago provides a CoC 101 training at least quarterly for non-CoC members, non-HUD funded agencies and the community at large, which includes information on how to apply for CoC membership and funding.

The CoC's Project Prioritization Work Group develops a scoring rubric to evaluate & select new projects regardless of current HUD funding. The rubric includes such components as: experience working with homeless sub-populations; organizational capacity; public grants experience; ability to address local goals to end homelessness; & demonstrate an effective start-up plan. An agency with no previously HUD CoC-funded project is asked to speak to similar experience. Projects chosen meeting CoC criteria, regardless of HUD experience, are included on the Priority Listing.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:
 (1) consulted with ESG Program recipients in planning and allocating ESG funds; and
 (2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.
 (limit 2,000 characters)

The Commissioner of the City’s Dept. of Family & Support Services (DFSS), the City department that administers ESG funding for the City, sits on the CoC Board and DFSS staff lead/participate in CoC workgroups. The CoC data and integration of CoC objectives informs the City’s ESG funding allocations.

Additionally, the CoC may comment on the City of Chicago's (ESG recipient) allocation of ESG funding through the public comment process for the Annual Action Plan.

The City and CoC established standard performance measures for the program models consistent with Chicago's Plan 2.0 (inclusive of ESG funded models). These standards are approved by the CoC Board. Each program model has performance measures that contribute to broader HEARTH system performance goals. The City uses subsets of these measures in contracts/scopes for ESG subrecipients. The HMIS Lead reviews HMIS data quality performance of all CoC & ESG programs. DFSS incorporates HMIS compliance & program performance into monitoring & funding application review criteria for ESG funded programs. The City & Collaborative Applicant release quarterly system performance dashboards to the CoC. The CoC Board reviews overall system performance through Chicago's Dashboard to End Homelessness and a newly created System Goals Dashboard that visualizes data from HMIS.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area? Yes to both

1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)? No

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:

- (1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and**
 - (2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.**
- (limit 2,000 characters)**

1.The Chicago CoC is concerned about the safety of those who are victims of domestic violence, dating violence, sexual assault, or stalking. In accordance with VAWA, housing providers (HP) allow participants to request an emergency transfer from one's unit in instances where the participant reasonably believes there is a threat of imminent harm from further violence if the participant remains within the same unit. The ability of the HP to honor such requests for tenants may depend on whether the HP has another unit that is available and safe to offer the tenant for temporary or permanent occupancy. The HP will act as quickly as possible to move the tenant subject to availability and safety of a unit. If the HP has no safe and available units for which the participant is

eligible, the HP will assist the participant in identifying other HPs who may have safe and available units by working with the crisis response system and by following the CES transfer policy. All approved CES transfer requests are prioritized for the next available opening. HPs will maintain the participants confidentiality and will also ensure the participant is offered referrals to local organizations offering assistance to victims.

2. All participants are provided an opportunity to decline completing the CES standardized housing assessment. Participants may not be prevented from accessing CES because of any barriers including but not limited to income, substance use, domestic violence history, lack of interest in services, disability condition, evictions, criminal record, etc. Participants may refuse to answer assessment questions. However, doing so may limit the participants possible permanent housing and service opportunities if the questions that are not answered are related to eligibility criteria for specific programs. The assessment process also allows the client to answer exclusionary questions, such as areas of the city they are unable to live due to safety concerns.

1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

CoC works w/Chicago Battered Women’s Network to incorporate Illinois’ statewide DV HotLine (HL), overseen DFSS, & its safety/security protocols into the CES. The DV HL is the central referral source for DV victims and available 24 hours per day and 7 days per week. The HL is state-wide and available via text. In 2017, the HL had 27,022 calls state wide and 14,208 or 53% in Chicago. DFSS has the annual goals of increasing call numbers statewide including outreach efforts such as billboards and police role calls. DFSS is one of the largest funders of DV services in Chicago. In 2017 DFSS had 34 delegate agencies and served over !6,000 clients.

The HL makes direct transfers to 30 victim service providers funded by the CoC, ESG, Department of Justice, Department of Health and Human Services, IL Dept. of Human Services, Attorney General and IL Criminal Justice Authority that provide housing, counseling services, court advocacy, children’s services and 500+ non victim service providers. All DV staff are required to be certified through a 40 credit hour training. The HL uses de-identified info & callers are assigned a unique ID so no personal information is used for referrals. If a victim of DV presents in the homeless system, the CES assessment includes 5 DV questions that trigger referral options, based on client choice.

The CoC prioritizes victims of DV for transitional housing. Victim Services Providers report aggregate data & programs that use HMIS for referrals use secure alternate methods like encrypted emails or fax. Non-Victim Services Providers follow CES SOPs for identified victims of DV.

All Chicago partners with experts in best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking to provide at least annual trainings for CoC direct service providers. Best practices in servings this population are also including in training of skilled assessors for CE.

1C-3b. Applicants must describe the data the CoC uses to assess the

scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)

The Chicago CoC has assessed the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking by combining data in HMIS; data directly provided from CoC-funded DV providers, who are not entering into a comparable database, the annual Point in Time Count (PIT) and data provided from DFSS through the statewide DV HotLine and their delegate DV agencies. In 2017, DFSS served over 16,000 clients through 34 delegate DV agencies for DV and receives quarterly reports from these agencies. These data are used to determine the number of survivors accessing services in the city of Chicago, number of those in need of housing services and unmet need in our community in regard to housing and services for survivors. For example, in 2017, 53% of calls to the statewide hotline were from Chicago and 25% of called stated they needed shelter.

Ideally, we would incorporate additional data from the State of Illinois's INFONET database system, however, the State has been redoing this database so there have been challenges in accessing their data on a regular basis. The CoC is working with the State of Illinois to improve access and coordination of this data source.

**1C-4. DV Bonus Projects. Is your CoC Yes
 applying for DV Bonus Projects?**

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

SSO Coordinated Entry	<input checked="" type="checkbox"/>
RRH	<input checked="" type="checkbox"/>
Joint TH/RRH	<input checked="" type="checkbox"/>

1C-4b. Applicants must describe:

- (1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;**
 - (2) the data source the CoC used for the calculations; and**
 - (3) how the CoC collected the data.**
- (limit 2,000 characters)**

- 1.The CoC is currently serving 2189 DV survivors this includes those on the CoC OneList and those in housing interventions. Through the 2018 PIT count an additional 491 unsheltered Chicagoans were counted, who were currently experiencing DV. On the night of the count 20.3% of those counted in shelter were currently experiencing DV.
- 2.The CoC used HMIS data and survey data through the PIT to calculate these numbers.
- 3.PIT data is collected through surveys completed during the count with those unsheltered. HMIS data is collected through Coordinated Entry (CE) assessments with skilled assessors and at intake with case managers or intake

coordinators. The CE assessment asks three questions concerning DV, which determines if a homeless person is current experiencing DV or when their experience with DV occurred, which is entered into HMIS. At intake, case managers or intake coordinators ask questions regarding DV history, which are also recorded in HMIS. When asking these questions, assessors, case managers and intake coordinators ensure confidentiality and safety for all participants.

1C-4c. Applicants must describe:

- (1) how many domestic violence survivors need housing or services in the CoC's geographic area;**
- (2) data source the CoC used for the calculations; and**
- (3) how the CoC collected the data.**
(limit 2,000 characters)

1. There are between 1033 - 3555 in need of housing or services in the CoC's geographic area.
2. The data source was from HMIS through the CoC's OneList and the DFSS statewide DV Hot Line.
3. The HMIS data was collected as mentioned in question 1C-4b (3). We took the total number experiencing DV in HMIS, 2189, then subtracted those currently in a permanent housing intervention. DFSS HotLine data, is collected from callers who utilize the Hot Line. The CoC looked at the total number of calls for Chicago. We then computed the percentage of callers statewide, who requested housing assistance, 25% and applied this percentage to the number of Chicago calls.

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:

- (1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;**
- (2) quantify the unmet need for housing and services for DV survivors;**
- (3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and**
- (4) describe how the CoC determined the unmet need for housing and services for DV survivors.**
(limit 3,000 characters)

1. Heartland Alliance's Social IMPACT Research Center published the Domestic Violence Needs Assessment of Chicago (DVNAC) in 2017. They found that among service providers surveyed, the top five requests for services that could not be met were: 1. counseling (27%); 2. emergency housing (27%); 3. legal services and/or legal representation; (25%), 4. economic resiliency (23%); and 5. permanent housing (20%). One of the most consistent unmet needs identified by stakeholders was safe and affordable housing and shelter. Survivors also stated help finding permanent housing was identified as a need by 31% of survivors six months after initial service receipt. 27% of DV service providers reported that counseling was a top need they could not meet, either due to capacity or service offering. The Chicago CE system is currently inadequate to address the needs of DV survivors because of the linkage between the homeless and DV systems is weak. To receive housing and services in the housing system, a DV survivor

must present themselves to the homeless system even if they are already engaged in services within the DV system. Our CE system is in need of culturally competent skilled assessors either at access points or as a call-in option. Our CE prioritization also does not have DV as a primary or secondary prioritization. This imposes undue challenges for those experiencing domestic violence because many DV survivors may not have a disability which would qualify them as chronically homeless, our current primary prioritization and will therefore not be matched quickly to a permanent housing intervention.

2.As mentioned in question, 1C-4C(1), the CoC calculates the unmet need to be between 1033-3555 individuals and families in need of housing or services in the CoC's geographic area.

3.The data source was from HMIS though the CoC's OneList and the DFSS statewide DV Hot Line.

4. We took the total number experiencing DV in HMIS, 2189, then subtracted those currently in a permanent housing intervention. The CoC looked at the total number of calls for Chicago. We then computed the percentage of callers statewide, who requested housing assistance, 25% and applied this percentage to the number of Chicago calls. We also know through the PIT that on that night there were 808 current DV survivors both sheltered and unsheltered. Our system has 140 dedicated DV shelter beds. At that moment in time we know that 668 individuals and families were not able to receive the dedicated DV shelter services, this shows an unmet need for our DV population because they are in a homeless shelter. Additionally, Heartland's DVNAC analyzed DFSS hotline data. In 2016,in total, 1,001 clients spent a total of 36,067 days in Chicago-based domestic violence shelters. Clients that used shelter services spent, on average, 36 days in shelter in 2016. These data demonstrate that the demand for safe housing outweighs the current supply in Chicago.

1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)

The DV Bonus projects being applied for will address the unmet needs in two ways first by improving access to services and housing by enhancing Coordinated Entry and by providing additional permanent housing solution for DV survivors. As mentioned in the previous response, the DV Bonus project for coordinated entry will improve our coordinated entry system (CES) by improving and enhancing access for survivors and increasing coordination with the DV system of shelter and services. Survivors who access the Chicago CoC's CE system will not only have access more housing options but can be connected to income resources such as employment resources and SOAR through the CE. DFSS data shows at least 50% of those fleeing DV have no income. Adding a RRH and a Joint Component TH PH-RRH project will meet the need of additional permanent housing options. We see through DFSS DV shelter data that less than 30% of families in shelter are placed in permanent housing within 120 days of entering the DV shelter and 2% are placed with 180 days of entry. This highlights the unmet need for a permanent housing exit out of shelter. DV survivors, as mentioned above, lack access to income to pay for rent and are therefore in need of rental assistance to obtain permanent housing. Heartland's DVNAC found in 2016, the majority of survivors receiving services from domestic violence agencies reported a monthly income of \$1,000 or less; 43.8% of survivors reported a monthly income of \$500 or less in 2016. Current DV transitional housing providers have stated the one of the biggest challenges

for survivors entering TH is a lack of available permanent housing options. As the income data above supports, RRH's focus on income generation and a rental subsidy is the most effective solution for this population.

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:

- (1) rate of housing placement of DV survivors;**
 - (2) rate of housing retention of DV survivors;**
 - (3) improvements in safety of DV survivors; and**
 - (4) how the project applicant addresses multiple barriers faced by DV survivors.**
- (limit 4,000 characters)**

Family Rescue(FR) (Joint TH PH-RRH) operates a HUD CoC-funded DV transitional housing program.

- 1)FR's permanent housing placement rate for participants has been 94%
- 2)FR's housing retention rate has been 95%.
- 3)90% percent of the survivors who resided in their TH program did so safely with no further incidents of DV. They conduct 6-month, post-exit checks for housing retention, and inquire about their violence-free status. 95% indicated that they were also safely housed at the 6 month check in, post-program exit.
- 4)DV survivors face multiple barriers, among them: financial instability; need for further education or vocational training; little work history or few work skills; residual impact of the domestic violence on the head-of- household or children; and mental health or substance abuse challenges. FR addresses challenges faced by survivors through assigning a trained Advocate to each participant to develop a service and safety plan, provide counseling, advocacy, case management; emergency assistance; provision of additional support by a licensed clinician if needed; and linkage to community- based substance abuse services, vocational training and job placement programs, and/or other needed community resources. These services and emotional support often make the difference between success and failure for survivors.

Heartland Human Care Services (HHCS) (RRH) operates a variety of permanent housing project including both PSH and RRH as well as one of the largest anti-trafficking projects in Chicago.

- 1) HHCS has a 100% rate of housing placement of DV survivors.
- 2)HHCS has an 80% retention rate for DV survivors placed into housing.
- 3)HHCS ensures and improves safety for DV survivors through targeted person-centered services for participants. HHCS works with participants to understand the specifics of where participants could and couldn't live and locating appropriate housing. HHCS ensure participants are currently living in a place where they do feel safe and also assists participants with identifying schools for their children to attend, HHCS meets regularly with participants' other service providers to ensure safety and develop service plans to help ensure safety.
- 4)HHCS addresses multiple barriers by collaborating with agencies that specialize in helping providing trauma informed care to victims/survivors of human trafficking and domestic violence. HHCS address participants barriers by meeting the PP where they are. HHCS either provides or works with a partner agency to provide the services to participants such as: legal status referrals; transportation; household needs; employment leads; furniture; utilities; and medical appointments.

CSH: CE-SSO has been the lead entity for CE since 2017.

- 1) Since April 2017, 37% of recent DV survivors (those experiencing within 3 months of CE assessment) were placed into housing. This is higher than for other populations. CSH works continually to improve housing placement rate across all populations.
- 2) DV survivors have a 73% housing retention rate. For exits, 86% exited to a permanent destination.
- 3) CSH has ensured and improved safety for DV survivors through policies and training. The current standard housing assessment has questions on DV or human trafficking. If the answers to those questions are yes, the assessor is directed to call the DV HL to access immediate crisis services. CE Policies & Procedures ensure DV survivors are able to access a housing assessment even though their DV provider does not use HMIS. DV survivor files in HMIS are locked so that it is only seen by the CE system referral agency and receiving housing provider.
- 4) CSH has a proven record in providing capacity building and technical assistance to PSH providers to address clients with multiple barriers including DV. CSH has ensured that CE Policies and Procedures address populations with multiple barriers and they provide on-going training to skilled assessors on working with these clients.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC’s geographic areas:

- (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;**
- (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and**
- (3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Chicago Housing Authority	14.96%	Yes-HCV	Yes

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)

The Chicago Housing Authority has adopted a limited homeless admission preference for HCV and a general homeless admission preference for PH (which was enacted after FY2017 so not reported above).

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? Yes

**Move On strategy description.
(limit 2,000 characters)**

The Chicago Housing Authority launched "Moving On," a pilot program with the Chicago CoC, for persons living in PSH who no longer need intensive services and want to move to other affordable housing in the community utilizing a Housing Choice Voucher (HCV). When program participants move out of supportive housing, the units they vacate must be targeted to a priority population identified through Chicago's Coordinated Entry System (CES). In addition, residents living in a building funded through CHA's Property Rental Assistance (PRA) program who establish residency for at least a year may then apply for a HCV. If available and accepted, the resident can utilize the HCV to move out of the PRA building. The vacated PRA unit may then take a new individual or family from the CoC's CES.

**1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness.
(limit 2,000 characters)**

The CoC addresses the needs of the LGBT community by ensuring that CoC funded agencies and the Coordinated Entry System (CES) are utilizing gender appropriate language on assessments; service providers provide information to the clients on how to report housing discrimination; the City of Chicago DFSS has a family preservation policy inclusive of all same sex couples and the HMIS system collects all types of gender identity responses. The Youth Advisory Board advised CES on the language and questions on the assessment to ensure it was appropriate for all including LGBT.

All Chicago conducts a CoC wide training on implementation of the Equal Access to Housing at least twice annually. In June, All Chicago coordinated participation for CoC partners to participate the True Colors Fund's Pride Challenge. The Chicago CoC was one of 4 communities participating in the challenge. During the month of June, 259 individuals expanded their knowledge about LGBTQ youth experiencing homelessness. They learned about topics such as oppression, facts about LGBTQ youth homelessness, gender pronouns, unique experiences of transgender youth, and creating inclusive environments. 49 service providers across the CoC participated regardless of population, project type or funding source. All Chicago has shared

resources developed by the True Colors Fund to all participating agencies. All Chicago is currently developing additional trainings on this topic for the community.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	No
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders:	<input type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1C-8. Centralized or Coordinated Assessment System. Applicants must:
 (1) demonstrate the coordinated entry system covers the entire CoC geographic area;
 (2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;
 (3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
 (4) attach CoC's standard assessment tool.
 (limit 2,000 characters)

1) Access points (AP) cover the entire city and are affirmatively marketed to persons regardless of race, color, national origin, religion, sex, age, familial status, or disability. AP operate M-F, 9am-5pm. Various AP accommodate subpopulations: youth, Veterans, families, & survivors of DV to ensure fair & equal access for all populations. Chicago has 5 youth AP & 4 adult AP with full geographic coverage. All AP are accessible and accommodate any person.

2) Chicago has a coordinated outreach strategy to ensure those least likely to apply for assistance are assessed. Key components are written goals, trained skilled assessors (SA), data oversight, & System Integration Team (SIT) meetings. All outreach teams have trained SA that are expected to assess 90% of participants. Currently, 78% of those unsheltered and connected to outreach have completed an assessment. Of those unassessed, the outreach coordination team utilizes HMIS data at SIT meetings to target & develop strategies to engage & assess participants. Specialized outreach workers complete an Observational Assessment with people impacted by SMI who are unable to complete the standard assessment. This allows us to house people who would not otherwise participate in the process of applying for assistance based on barriers.

3) The CES Standardized Housing Assessment process targets those experiencing literal homelessness and includes diversion and prevention screenings aimed at lowering inflow into our system. The CE System Prioritization Chart reflects CoC priorities which determines the order of referrals from the OneList to housing openings. Prioritization is based on the household's chronic homeless (CH) status by subpopulation, with secondary prioritization in order of veteran status, vulnerability score, length of time homeless, & date of assessment. Households with the highest vulnerability and CH are matched first. Referrals are sent via HMIS to housing providers within 2 business days of a request.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

Foster Care:	<input type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:

- (1) objective criteria;**
- (2) at least one factor related to achieving positive housing outcomes;**
- (3) a specific method for evaluating projects submitted by victim services providers; and**
- (4) attach evidence that supports the process selected.**

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	No

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:

- (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and**
- (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.**

(limit 2,000 characters)

The CoC prioritized projects primarily based on an average of 2017-2018 local evaluation scores. The local evaluation scored all renewal projects on their ability to serve specific populations with high severity of needs and vulnerabilities, such as chronically homeless individuals and families, as well as youth heads of households and those with disabilities. For example, agencies serving chronically homeless households or youth heads of households received more points through the local evaluation scoring methodology. All projects were also assessed on participation in the Coordinated Entry System (CES), which prioritizes referrals based on history of high utilization of emergency services, length of time homelessness, and vulnerability. Projects were also scored higher (given more points) on the extent to which they utilize the Housing First approach and their ability to serve participants with high severity of needs with few barriers to obtaining and retaining housing which includes serving individuals and families with no income; active or prior substance use and/or mental health issues; criminal/justice involved backgrounds; and experiences/victimization of domestic violence. Selection criteria for new projects included the utilization of Housing First and being able

to serve vulnerable populations such as chronic homeless, youth, families and victims of domestic violence.

- 1E-3. Public Postings. Applicants must indicate how the CoC made public:**
- (1) objective ranking and selection process the CoC used for all projects (new and renewal);**
 - (2) CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and**
 - (3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.**

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	<input checked="" type="checkbox"/>	CoC or other Website	<input checked="" type="checkbox"/>
Email	<input checked="" type="checkbox"/>	Email	<input checked="" type="checkbox"/>
Mail	<input type="checkbox"/>	Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>	Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>	Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>	Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between the FY 2014 and FY 2018 CoC Program Competitions.

Reallocation: No

1E-4a. If the answer is “No” to question 1E-4, applicants must describe how the CoC actively reviews performance of existing CoC Program-funded projects to determine the viability of reallocating to create new high performing projects. (limit 2,000 characters)

The CoC annually reviews performance of existing CoC Program-funded projects through its local evaluation process which includes the required submission of individual project Annual Progress Reports (APR); HMIS data related to performance outcomes in the previous calendar year; project spenddown/recapture amounts; and review of annual financial audits. In addition, on-site monitoring is conducted by All Chicago to ensure projects are accepting referrals only through the Coordinated Entry System; incorporating Housing First into policies and practices; and reviewing client eligibility documentation to ensure projects are housing households based on the CoC's priority populations. All Chicago works with the local HUD office to provide TA for project HUD has identified as low-performers or with unresolved HUD findings.

Projects voluntarily reallocate a percentage of their grant amount based on the last three years of recapture amounts. Under-performing projects, based on not meeting threshold criteria (Housing First, agency financial viability, not utilizing CES for referrals, etc.) can be recommended for involuntarily reallocation. Organizations are given the opportunity to appeal involuntary reallocation to the CoC Board of Directors. New projects created through voluntary or involuntary reallocation are given priority through the CoC's ranking policies.

1E-5. Local CoC Competition. Applicants must indicate whether the CoC:
(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline—attachment required;
(2) rejected or reduced project application(s)—attachment required; and
(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline—attachment required. :

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required. Yes

2A-1a. Applicants must: (1) pages 4-6 (2) MOU
(1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and
(2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).

2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required. Yes

2A-3. HMIS Vender. What is the name of the HMIS software vendor? Mediware

2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area. Single CoC

2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:
(1) total number of beds in 2018 HIC;
(2) total beds dedicated for DV in the 2018 HIC; and

(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	3,850	161	3,579	97.02%
Safe Haven (SH) beds	41	0	41	100.00%
Transitional Housing (TH) beds	1,391	122	1,072	84.48%
Rapid Re-Housing (RRH) beds	1,121	0	1,092	97.41%
Permanent Supportive Housing (PSH) beds	10,452	0	6,822	65.27%
Other Permanent Housing (OPH) beds	257	0	257	100.00%

2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months. (limit 2,000 characters)

Transitional Housing Beds: The Chicago CoC converted a significant portion of the TH beds to ES. While we significantly reduced the number of TH, the HMIS lead realized that 38 of 91 new TH beds in 2018 are currently not participating in HMIS. We will be working with the programs with the new beds on an onboarding plan

Additionally, after submitting the HIC data an error has been identified that 50 beds on the HIC did not indicate participation in HMIS. However, the project and these 50 beds do participate in HMIS. The Chicago CoC and the HMIS Lead will work with HUD to correct this data moving forward. If these beds had been included, we would meet the TH threshold and have 88% bed coverage.

PSH Beds: 163 of the PSH beds represent HOPWA Beds, which are reported on the HIC but are not in HMIS. The CoC is currently working with the Chicago Department of Public Health and HOPWA funded agencies to include these projects in HMIS and Coordinated Entry System (CES). CES and HMIS has been presented to the HOPWA leadership at CDPH and discussions have begun regarding a timeline for implementation.

Of the remaining 3,400 beds almost all of them are HUD VASH Beds. The CoC and VA have been working on including these beds in HMIS for the past 2 years. The CoC has approximately 1100 VASH units. Many of these are legacy units, which have been in existence for many years with long-term program participants. Bringing all of these units into HMIS would require having all participants sign the HMIS consent form. The CoC is working with the VA to determine the appropriate solution to ensure consent is given by all participants as well as ensure that any new VASH units begin with having the HMIS consent signed.

2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept? 12

2A-7. CoC Data Submission in HDX. 01/25/2018
Applicants must enter the date the CoC

**submitted the 2018 Housing Inventory Count
(HIC) data into the Homelessness Data
Exchange (HDX).
(mm/dd/yyyy)**

2B. Continuum of Care (CoC) Point-in-Time Count

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy). 01/25/2018

2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy). 04/30/2018

2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC’s sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC’s sheltered PIT count results.
 (limit 2,000 characters)**

Chicago conducted its shelter count using the same paper method of tallying all persons and randomly surveying 10% of beds. HMIS data was used to validate the total number; however, surveys were used to determine subpopulation characteristics. The CoC PIT Subcommittee presented the methodology to the CoC Board and helped review the survey questions and training tools. Specifically, the training materials were refined to ensure accurate collection of chronic and other data points by shelter providers. The PIT Subcommittee oversight yielded greater response rates to questions regarding chronic status, benefits, and barriers to housing. Improved training on the chronic questions assisted shelter providers to engage with the person and determine their duration and number of episodes of homelessness. The result is that 20.2% of sheltered persons were found to be chronic as compared to 7% in 2017. While there may have been an increase of chronic in shelter based on street outreach efforts, the increase is also attributed to better training. The updated survey also included HUD requirements regarding domestic violence (DV). The data reflects a shift from persons who have ever been a victim to persons currently experiencing intimate partner violence or fleeing their abuser. Although it resulted in a sharp decrease, 10% of sheltered persons are currently being impacted by DV in 2018 which is a greater number than the number of available DV beds in Chicago.

2C-2. Did your CoC change its provider coverage in the 2018 sheltered count? Yes

2C-2a. If “Yes” was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

Beds Added:	42
Beds Removed:	33
Total:	9

2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC’s 2018 sheltered PIT count? No

2C-3a. If “Yes” was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable. Yes

2C-4a. If “Yes” was selected for question 2C-4, applicants must:
 (1) describe any change in the CoC’s unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018; and
 (2) specify how those changes impacted the CoC’s unsheltered PIT count results.
 (limit 2,000 characters)

1. Chicago made minimal changes to the methodology of its PIT unsheltered count. The PIT Subcommittee was given more oversight of the unsheltered data collection tools, training materials and data review. The survey instrument for 2018 was refined slightly for the general PIT and a youth-specific survey was developed with the assistance of the Subcommittee and input from youth with lived experience and the Youth Advisory Board. The PIT Subcommittee encouraged participation by a more diverse group of members that included numerous lived experience, outreach providers, emergency shelter, and researchers. The survey was not only updated to meet HUD requirements, but much time was spent ensuring the language and flow of the questions would enable interviews to illicit responses that were accurate. Much emphasis was spent on the chronic questions as well as the organization and order of the questions. The changes were then used to strengthen the focus during the training materials on these special areas.
2. As a result, the interviewers received more information and guidance on how to present the questions to the homeless persons and how to translate their responses into data points that researchers could use to determine chronic status. The change in the flow of questions also improved response rates on the

more important areas.

To count the homeless on transit lines in 2018, Chicago relied on volunteers to count at the ends of the line as in 2017. However, in 2017 Chicago Transit Authority staff conducted the count and also started and ended later than street volunteers. In 2018 fewer homeless persons were counted. Since it is unknown whether the change in time or experience of the enumerators contributed to the result, for 2019 volunteer training for transit teams will be improved and those teams will be required to begin and end their counts later.

2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count? Yes

2C-5a. If “Yes” was selected for question 2C-5., applicants must describe: (1) how stakeholders serving youth experiencing homelessness were engaged during the planning process; (2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and (3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count. (limit 2,000 characters)

1. The PIT is organized with homeless providers that act as co-leads in 9 geographical areas, one being a homeless youth provider, The Night Ministry. Prior to the night of the count, the PIT Subcommittee developed a youth specific PIT survey incorporating questions from the Voices of Youth count participation in 2013. This draft was presented to program participants at The Night Ministry as well as to the CoC Youth Advisory Board for input and feedback.

2. Additionally, youth providers developed a youth specific plan to canvas the city and was shared with the PIT subcommittee. Youth did not have to be a client to participate or could have been a former client. 3. Agency staff acted as a team guide but was instructed to allow freedom to let the team decide where and when to approach. Youth teams from over 5 agencies were given some areas to search based on outreach and other known information but were also encouraged to spend some time during the training to develop a search area that would be used. The purpose was to allow the youth team members more autonomy of where they would likely find other homeless youth.

3. Youth-led specific teams were recruited by all homeless youth service providers. Each team was accompanied by an agency adult team guide and youth were provided with a stipend for participation in the PIT training and administration of the youth PIT survey. The result was teams found 132 unaccompanied youth, which is an increase of 22% from 2018. Based on feedback received from youth when developing the survey and at team trainings, using a youth-specific survey made approaching other youth more amenable. This is apparent when you compare the data that in 2018 the youth teams found 14 homeless youth under age 18 whereas it was zero in 2017. In 2018, 11% reported being transgender whereas in 2018 it was under 3%. Therefore, the youth-specific survey was more likely to entice more honest responses.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:

- (1) individuals and families experiencing chronic homelessness;**
- (2) families with children experiencing homelessness; and**
- (3) Veterans experiencing homelessness.**

(limit 2,000 characters)

1. The 2018 PIT included additional input from PIT Subcommittee members on the refinement of the survey instrument. They were given response rates on all the questions and allowed to modify the wording and order of questions for better data collection. The final survey was then used to improve both the service provider training for shelter staff conducting interviews and the volunteer training for team members that would be canvassing the streets. Focusing more attention on the chronic questions and providing more guidance on how to illicit better responses helped gather better quality data. Chicago attributes, in part, the increase of chronic in the shelter and decrease of chronic on the street to the improved training on asking survey questions.

2. 2018 marks the lowest number of families in shelter. But specifically, the number of parenting youth has also decreased from 26% of households in shelter to 20% in 2018. Chicago has continued use of paper tallying and surveying in PIT counts, but has a sound method in identifying households. Identifying the characteristics of that household is where methods of improvement have focused. The refinements on the questions related to chronic status have allowed Chicago to better determine the number of chronic individuals and families.

3. In 2018, the number of homeless veterans on the street was its lowest since 2005. This is remarkable given the number veterans on the One List and the accuracy of that number. Although the percentage of veterans in shelter has increased since 2017, Chicago considers that increase as a success. Veterans receive specialized services from providers that have more resources and housing options for them. On the night of the PIT, local VA staff was assigned to hot spot teams to assist any veterans found to come into shelter. During the PIT, the determination of a veteran's eligibility was made available on the spot and connections are made to shelter or housing provider.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.	12,439
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3A-1a. Applicants must:

- (1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;**
- (2) describe the CoC’s strategy to address individuals and families at risk of becoming homeless; and**
- (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)**

1. The CoC determined which risk factors to identify persons becoming homeless through the data from the Homeless Prevention Call Center (HPCC), Coordinated Entry Assessments in HMIS and the CoC’s two existing diversion projects and the work of the Diversion Work Group. Additionally, this year the CoC identified risk factors for families through the Ending Family Homelessness Initiative research project that focused on doubled up families in the Chicago Public School System and factors in these families becoming literally homeless. The CoC also interviews with program participants & lived experience to identify risk factors for becoming homeless
2. From FY2016 and FY2017, the Chicago CoC reduced first time homelessness by 537 persons. The CoC has two well established diversion projects in place one at Catholic Charities for youth and one at Salvation Army for families. Diversion Work Group is working on strategies to expand diversion activities and bring them to scale in the community. This work group has developed a strategy around eviction prevention and will be launching a new project in partnership with the City of Chicago’s eviction court. This work group continues to maximize efficiency of resources through a previously developed a crosswalk of prevention resources. A pre-screener was developed and implement to identify and serve populations based on their eligibility for restricted HP public and private funds.
3. The City of Chicago Department of Family and Supportive Services and All Chicago oversee the CoC’s strategy.

3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must: (1) provide the average length of time individuals and persons in families

remained homeless (i.e., the number);
(2) describe the CoC’s strategy to reduce the length-of-time individuals and persons in families remain homeless;
(3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
(4) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the length of time individuals and families remain homeless.
(limit 2,000 characters)

- 1.The average LOT homeless for individuals and families experiencing homelessness in ES and SH is 112 days. From FY2016 to FY2017 the Chicago CoC saw a reduction in both the average and median number of days for LOT homeless.
- 2.The CoCs strategy to reduce length of time individuals and families remain homeless includes the following elements: creating new PH beds; implemented Housing System Navigation, which connects vulnerable clients to their housing provider & prioritized PSH placements for those experiencing chronic homelessness. We have improved the data quality for ESG and CoC projects. Through HMIS we can now see where the longest stays are & exits from the system. This data is regularly reviewed by various CoC committees where system-wide recommendations are formulated and moved to the Board for approval.
- 3.The CoC identifies, prioritizes and houses those with the longest length of time homeless through the Coordinated Entry System. We created standardized documentation in HMIS for chronic homelessness which has led to faster receipt of information and reduced admin burden. The CoC’s CE Prioritization chart utilized length of time homeless as a secondary prioritization factor throughout the chart for all populations.
- 4.This strategy is the joint responsibility of CSH, the lead entity for Coordinated Entry, DFSS and All Chicago, who monitors systems and project performance.

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:

- (1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and**
- (2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.**

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	26%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	97%

3A-3a. Applicants must:

- (1) describe the CoC’s strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and**
- (2) describe the CoC’s strategy to increase the rate at which individuals**

**and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.
 (limit 2,000 characters)**

1.From FY2016 to FY2017 the Chicago CoC has seen an increase in the percent of exits to permanent destinations. Our on-going strategy to increase the rate at which individuals and families exit to permanent destinations include the creation of new PH beds; implementation of Housing System Navigation, which connects vulnerable clients to their housing provider; prioritized PSH placements for those experiencing chronic homelessness; and on-going refinement of the Coordinate Entry system through data analysis. The CoC utilized monthly System Integration Team (SIT) meetings to discuss clients progress through coordinated entry and their retention in housing. We have improved the data quality for ESG and CoC projects. Through HMIS we can now see system effectiveness from housing match to placement & retention in housing. All Chicago launched its Dashboard to End Homelessness in 2017. This dashboard is updated weekly and is regularly reviewed by various CoC work groups where system changes are formulated, piloted and implemented.

2.The CoC has had a very high retention rate and maintained a 97% rate of retention between FY2016 and FY2017. We continually strategies to improve this rate. Our strategy includes transparent communication through dashboards and providing on-going technical support for providers. The Collaborative Applicant, All Chicago, has presented community wide retention and exit data to PSH provider for the last year at their CoC Quarterly Meetings. This also gives projects the opportunity to discuss trends, challenges and solutions. All Chicago provides capacity building through technical assistance and training. All Chicago offers monthly housing first trainings, cohort training for supervisors, on Motivational Interviewing and quarterly trainings on other evidence-based practices such as harm reduction and trauma informed care.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	6%

3A-4a. Applicants must:

- (1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;**
 - (2) describe the CoC’s strategy to reduce the rate of additional returns to homelessness; and**
 - (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the rate individuals and persons in families returns to homelessness.**
- (limit 2,000 characters)**

1.The CoC identifies common factors of individuals and families who return to homelessness through Coordinated Entry Assessment data and interviews with participants. The CoC and Urban Labs conducted an analysis of returns to homelessness among veterans. Common factors among veterans include no

having a source of income, number of times previously experiencing homelessness, type of previous housing placements, amount of time to be placed in housing and service provider of prior placements.

2.The CoC's strategy to reduce the rate of returns to homelessness is to ensure that provider's discharge policies are compliant with Housing First; CE reviews and discusses and transfer or exits that are not in alignment with housing first; developing, and piloting and expanding employment interventions to increase income of participants especially those in RRH and TH. For RRH, projects follow up with clients to ensure they remained housed at different intervals. Additionally, our strategy utilizes flexible prevention funds for vets and the chronic homeless to reduce returns to homelessness, enhancing eviction strategies including working with the City of Chicago's Eviction Court. The Collaborative Applicant, All Chicago, has a training curriculum to build agency capacity to more effectively implement housing first and harm reduction.

3.Oversight of the CoC's strategy to reduce the rate of returns homelessness is All Chicago, who oversees system and project performance.

3A-5. Job and Income Growth. Applicants must:

- (1) describe the CoC's strategy to increase access to employment and non-employment cash sources;**
 - (2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**
 - (3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.**
- (limit 2,000 characters)**

1.The CA and Employment Task Group (ETG) have implemented the following strategies to increase access to employment and benefits; development of a cross-systems asset map for workforce & homeless service provider use; piloting an Employment Navigator model; and expanding SOAR. The Collaborative Applicant has implemented a cohort model for SOAR training and has continued to expand the number of trained providers to more than 40 in the CoC. This fall SOAR will be expanded to have more dedicated SOAR workers through an internship pilot. The SOAR internship pilot will include 5 agencies and interns will assist 50 households obtain SSI/SSDI. The CE assessment has employment questions and data has been collected for over a year. In 2017, 67% of those assessed through CE were interested in employment resources and of those 64% were contacted. Based on this data an analysis, several new employment interventions are being developed for those in housing interventions as well as those who need an employment intervention for resolution. This work is completed within the Employment and Income line of work for the Action Agenda. ETG continues to develop and implement trainings for homeless and employment agencies to expand access to information and resources.

2.Several mainstream employment organizations are part of the CoC and the are members of the Employment Task Force. These organizations have been critical in developing the previously mentioned interventions. The Chicago Cook Workforce Partnership is also an active member of the ETF and has assisted in developing relationships with mainstream employment organizations.

3.The CoC's Employment Task Force and All Chicago, who coordinates SOAR

for the community, oversee this strategy for the CoC.

3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy) 05/31/2018

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:**
- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and**
 - (2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.**

Total number of beds dedicated as DedicatedPLUS	6,714
Total number of beds dedicated to individuals and families experiencing chronic homelessness	0
Total	6,714

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required. Yes

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>
Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input type="checkbox"/>
Bad credit or rental history	<input type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

3B-2.2. Applicants must:

- (1) describe the CoC’s current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;**
 - (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and**
 - (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.**
- (limit 2,000 characters)**

1.The coordinated entry system assesses families within 36 days of becoming homeless and refers within 85 days to a permanent housing provider. Once matched, families are housed on average within 45 days. ESG RRH projects have increased focus on serving families and ensure 60% of HH served be families. Chicago recognizes areas for improvement and has used data to inform additional strategies such as funding family-specific housing system navigators. The family housing navigators began operating in Aug 2017 and to date served 43 HHs. The goal is to ensure families successfully obtain housing services by assisting with documentation, transportation, emotional support and serve as a liaison between housing provider and family. In addition, Chicago is in the process of hiring a centralized Housing Locator designed to quickly locate appropriate housing for families. 2.Chicago is continuously monitoring outcomes and problem-solving issues as they arise. If project is successful, Chicago will seek funding to bring to scale. The CES established prioritization and matching criteria to ensure families are prioritized for all interventions. Standards implemented ensure unsheltered families are placed into shelter and CES assessments are completed within 2 days of shelter entry. Local performance outcomes expect 50% of families to be housed within 30 days of referral and the remaining 50% housed within 60 days. Collaborative strategies around landlord outreach & recruitment are led by coordinated entry lead entity & housing providers. Chicago has also established a working group that meets monthly to provide a platform for case conference challenging situations and collaboratively discuss strategies to assist households and ensuring families successfully maintain housing once assistance ends. Finally, the local new project process prioritized family projects and Chicago has applied for new projects in the FY17 & FY18 NOFA. 3.AC is responsible for overseeing the strategy.

3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	<input checked="" type="checkbox"/>

CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	<input checked="" type="checkbox"/>
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	<input checked="" type="checkbox"/>

3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied homeless youth includes the following:

Human trafficking and other forms of exploitation	Yes
LGBT youth homelessness	Yes
Exits from foster care into homelessness	Yes
Family reunification and community engagement	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input type="checkbox"/>

**3B-2.6. Applicants must describe the CoC's strategy to increase:
 (1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and
 (2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.
 (limit 3,000 characters)**

1. In early 2018, Chicago organized to develop a system level strategy to address youth homelessness. Private funds were identified to contract a consultant who led community conversations that developed into 6 core areas of focus for a 2-year strategic workplan: improvements in current housing and services for youth, coordinated entry integration, increase housing resources, develop diversion, creating data driven improvements to system performance

and creating effective bridges to other systems. Chicago's 2-year workplan includes identifying the need for missing youth specific interventions such as interim housing, respite care, RRH and system navigator models and obtaining funding for the interventions. These conversations have led Chicago to engage funders (private and federal partners) on how to create funds for the identified need and have obtained funding for Youth navigators (only one of missing interventions identified). Youth navigators will support chronic homeless youth matched to current interventions to ensure a successful connection is made and serve as a liaison between housing, supportive service provider, and youth. 2. Chicago implemented CE for youth in 2017 and identified the need of a youth typology to inform Chicago's matching process to reflect the need of a young person based on characteristics and unique vulnerabilities displayed while experiencing homelessness. AC contracted the University of Chicago's research entity, Chapin Hall and will assist with the development, as well as, analysis HMIS data to inform the decision-making process. Chicago recognizes current funded youth programs are supported via various funding sources and recognized the need to standardizing youth models (for both sheltered and unsheltered) and review efficiencies as well as provide additional supports to support providers and youth experiencing homelessness. Finally, Chicago was able to obtain new funding for the new HUD model, Joint TH/RRH, in the FY2017 HUD competition which will be dedicated to serve youth. AC has met with the provider to provide individualized technical assistance and will work closely during the project startup phase. Chicago will continue to monitor data and determine if changes made are impacting youth homelessness in real time. By reviewing data and maximizing efficiencies, Chicago has been in continuous conversations with funders and are exploring innovative methods on obtaining new resources. In addition, the CoC governing board currently has appropriate representation from federal and non-federal funding partners attend and understand the need for new resources while report outs of the improvements in current practices. By having the appropriate representation, Chicago has a CoC governing board composed of entities that may bring in additional resources to support gaps in our youth sector.

3B-2.6a. Applicants must:

(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;

(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and

(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.

(limit 3,000 characters)

1. In early 2018, Chicago organized to develop a system level strategy to address youth homelessness. Private funds were identified to contract a consultant who led community conversations that developed into 6 core areas of focus for a 2-year strategic workplan: improvements in current housing and services for youth, coordinated entry integration, increase housing resources, develop diversion, creating data driven improvements to system performance and creating effective bridges to other systems. Chicago's 2-year workplan includes identifying the need for missing youth specific interventions such as interim housing, respite care, RRH and system navigator models and obtaining funding for the interventions. These conversations have led Chicago to engage

funders (private and federal partners) on how to create funds for the identified need and have obtained funding for Youth navigators (only one of missing interventions identified). Youth navigators will support chronic homeless youth matched to current interventions to ensure a successful connection is made and serve as a liaison between housing, supportive service provider, and youth. 2. Chicago implemented CE for youth in 2017 and identified the need of a youth typology to inform Chicago's matching process to reflect the need of a young person based on characteristics and unique vulnerabilities displayed while experiencing homelessness. AC contracted the University of Chicago's research entity, Chapin Hall and will assist with the development, as well as, analysis HMIS data to inform the decision-making process. Chicago recognizes current funded youth programs are supported via various funding sources and recognized the need to standardizing youth models (for both sheltered and unsheltered) and review efficiencies as well as provide additional supports to support providers and youth experiencing homelessness. Finally, Chicago was able to obtain new funding for the new HUD model, Joint TH/RRH, in the FY2017 HUD competition which will be dedicated to serve youth. AC has met with the provider to provide individualized technical assistance and will work closely during the project startup phase. Chicago will continue to monitor data and determine if changes made are impacting youth homelessness in real time. By reviewing data and maximizing efficiencies, Chicago has been in continuous conversations with funders and are exploring innovative methods on obtaining new resources. In addition, the CoC governing board currently has appropriate representation from federal and non-federal funding partners attend and understand the need for new resources while report outs of the improvements in current practices. By having the appropriate representation, Chicago has a CoC governing board composed of entities that may bring in additional resources to support gaps in our youth sector.

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:

- (1) youth education providers;**
 - (2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);**
 - (3) school districts; and**
 - (4) the formal partnerships with (1) through (3) above.**
- (limit 2,000 characters)**

1-3.) The Chicago CoC, local education agency (LEA) and youth education providers collaborate in multiple forms. The Chicago Task Force on Youth Homelessness has a voting member from the LEA as well as representation from youth education providers. In addition, the CA and youth service providers attend and provide trainings at the annual city-wide trainings mandated for the Students in Temporary Living Situations (STLS) program staff to assist school district staff connect with resources available to students experiencing homelessness. STLS coordinators provide shelter staff trainings prior to the school year start & visit shelters throughout the year to train & promote collaboration regarding the STLS program. In 2018, the CoC and Public Child Welfare Agency (PCWA) provided a cross training to the community in which the LEA provided a training to both sectors on available resources and general information on STLS program. Chicago had over 100 CoC and PCWA representatives attend this cross-training event. In addition, a formal partnership has been established to pilot a program among 6 local elementary schools to

help house families with children experiencing housing instability. Representation from the City of Chicago colleges (higher education institutions) also attend the Task Force meetings to participate in planning discussions impacting youth experiencing homelessness. 4.) The Chicago CoC has a formalized partnership with the Chicago Public schools (LEA) and City of Colleges (higher education provider), in addition to 3 youth education providers. Each entity provides representation to the Chicago Task Force on Youth Homelessness. In addition, these partners will be engaged in upcoming discussions of strategical alignment between the homeless sector and education system.

3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services. (limit 2,000 characters)

Based on the collaboration listed in 3B-2.7 between STLS and sheltered programs, individuals and families are informed and connected with educational services. During the STLS and sheltered program trainings, the STLS liaisons provide a notice of rights of homeless students document. The sheltered programs in turn use this document during the intake process and have it readily accessible for families with children in the Chicago Public School. In addition, the local program models chart establishes education related outcomes for programs that serve families with children.

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select “Yes” or “No”. Applicants must select “Yes” or “No”, from the list below, if the CoC has written formal agreements, MOU/MOA’s or partnerships with providers of early childhood services and support.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
Head Start	No	Yes
Early Head Start	No	Yes
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	No	Yes
Birth to 3 years	No	Yes
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		

3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources

**such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 2,000 characters)**

The CoC works with Jesse Brown VAMC, GPD & SSVF through its Ending Veteran Homelessness Initiative. All outreach staff (VA & CoC) utilize the CES housing assessment in HMIS to screen Veterans for eligibility for VA services, including VASH, GPD & SSVF, by asking about military service. The CoC also screened Veterans during the PIT. Veterans engaged overnight may go to the VAMC Emergency Department, where they are connected to CRRC for assessment/shelter/GPD placement. Skilled assessment teams are paired with emergency shelters so all Veterans entering shelter are assessed. HMIS & the VA's SQUARES program confirm Veteran status. Confirmed Veterans are placed on the CES by-name list, prioritized using the CoC's prioritization standards, and matched to VASH/SSVF if eligible. Eligible Veterans are only matched to non-VA services & housing when resources are unavailable or they prefer not to connect with the VA. CES matches Veterans to housing daily and holds weekly system-integration teams with VA & non-VA agencies to coordinate housing plans.

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC? Yes

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness? Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach? Yes

3B-5. Racial Disparity. Applicants must: No
(1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;
(2) if the CoC conducted an assessment, attach a copy of the summary.

4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:**
- (1) assists persons experiencing homelessness with enrolling in health insurance; and**
 - (2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.**

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	No	No
Other: (limit 50 characters)		

- 4A-1a. Mainstream Benefits. Applicants must:**
- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;**
 - (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and**
 - (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy for mainstream benefits. (limit 2,000 characters)**

1. In our program model chart, all projects are evaluated on their ability to connect clients to mainstream benefits. The metric is that 85% of project participants across model types will maintain or increase mainstream benefits. The CoC works with mainstream benefits programs through state partners: the IL Department of Human Services, IL Department of Health Care & Family Services and Get Covered Illinois and Illinois Department of Public Health. Homeless providers work closely with the City of Chicago’s Community Centers to ensure client access to mainstream benefits. The CoC has also expanded SOAR training for the community. The CoC added the Recipient Identification Number into HMIS so providers can appropriately assist clients.
2. Information and trainings about mainstream benefits including open

enrollment are shared in All Chicago's monthly newsletter circulated to CoC members and in Lived Experience and Service Provider Commission meetings.
3. All Chicago, who is over system and project performance, is responsible for overseeing the CoC's strategy for mainstream benefits.

4A-2.Housing First: Applicants must report:

- (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and**
- (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.**

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	169
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	169
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

4A-3. Street Outreach. Applicants must:

- (1) describe the CoC's outreach;**
- (2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;**
- (3) describe how often the CoC conducts street outreach; and**
- (4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)**

The goal of Chicago's CoC Street Outreach work plan developed by the Project Management Implementation Team is to work actively with the Coordinated Entry System (CES) to identify individuals who have not been assessed, continue to engage clients who have been assessed & be intentional in reaching out to individuals who are totally disengaged from the system & are in need of higher levels of care. Identify outreach plans & resources to support targeted populations.

Street outreach services in the CoC through its work plan are targeted in the following ways:

- 1. A City-funded team responds to 311, police, aldermanic or other community concerns about the well-being of individuals in specific locations.
- 2. Working through the CES, the Center for Housing & Health serves as the Outreach Coordinator and ensures that individuals not currently engaged with outreach providers and are prioritized for housing are assigned to specific outreach teams for housing navigation if needed.
- 3. The CoC has specialized teams that address special needs such as Polish language proficiency, alcohol/substance use, accessible vans that can transport individuals using wheelchairs. With all of these strategies, the CoC has full geographic coverage. Teams visit known hotspots weekly at minimum. The

CoC through its Action Agenda brings together outreach partners bi-weekly to address system level outreach plans as well as organize city-wide outreach surge events to assess and engage hotspots and identify new spots.

4A-4. Affirmative Outreach. Applicants must describe:
(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and
(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above.
(limit 2,000 characters)

A standardized assessment is done by skilled assessors, applying consistent process to achieve fair, equitable, and equal access to services. Our CES Policies and Procedures describe the assessment process, including an observational assessment (for SMI), access and matching criteria used for uniform decision making. Access points cover & are accessible throughout CoC are affirmatively marketed to eligible persons regardless of race, color, national origin, religion, sex, age, gender identity, sexual orientation, familial status, disability. 83% of our access points are wheelchair accessible and most can provide American Sign Language for hard of hearing clients. For those with limited English proficiency, 83% of access points have bilingual staff, utilize a language interpretation service or both. CES Policies and Procedures prohibit screening people out due to perceived barriers to housing. Coordinated outreach efforts are used to ensure skilled assessors are assessing our most vulnerable.

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	1,107	1,121	14

4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? Yes

4A-6a. If “Yes” was selected in question 4A-6, applicants must provide a description of the activities and the project(s) that will be undertaken by project applicants that receive CoC funding to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD’s implementing rules at 24 CFR part 135 to provide employment and training opportunities for low-and very -low income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low-and very-low

**income persons.
(limit 2,000 characters)**

Interfaith Housing Development Corporation (IHDC) will comply with these rules by ensuring that all federal hiring requirements, including Section 3, will be adhered to through all phases of the rehabilitation and lease-up of Ogden Park Apartments. IHDC receives HUD and other federal funding in all of its development, and therefore, is very familiar with the local hiring and local empowerment requirements under federal law. The general contractor selected for this development is registered as a Minority Based Enterprise and will be tasked with ensuring that all federal, state, and local hiring requirements are followed.

In addition to the governmental hiring requirements for construction staff, IHDC has a policy of trying to hire property management and maintenance staff from the community where the housing is located. Over the years, IHDC has found that local hires tend to be more vested in the developments and often take pride in their work in the community. As a practical matter, IHDC benefits when staff are located in close proximity to the project site. If issues arise on evenings or over the weekend, it is much easier to staff to respond if they live close to the project site.

All Chicago provides technical assistance to all new projects and will monitor the adherence to these rules through all phases of the project.

4A-7. Homeless under Other Federal Statutes. No
Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other Federal statutes?

Attachment Details

Document Description: CHA Admin Letter - Homeless Preference

Attachment Details

Document Description: CHA Admin Plan - Moving On

Attachment Details

Document Description: Chicago Coordinated Assessment Tool

Attachment Details

Document Description: IL-510 Objective Criteria - Rate, Rank, Review,
Selection Criterial

Attachment Details

Document Description: Public Posting Evidence

Attachment Details

Document Description: Public Posting Evidence

Attachment Details

Document Description: Chicago CoC Reallocation Process

Attachment Details

Document Description: Chicago Notification outside of e-snaps

Attachment Details

Document Description: Chicago Reduced or Rejected

Attachment Details

Document Description: Public Posting - Local Competition

Attachment Details

Document Description: IL-510 CoC and HMIS MOU

Attachment Details

Document Description: IL-510 HMIS Policies and Procedures

Attachment Details

Document Description: IL-510 HDX 2018 CoC Competition

Attachment Details

Document Description: IL-510 Orders of Priority

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. Identification	09/17/2018
1B. Engagement	09/17/2018
1C. Coordination	09/17/2018
1D. Discharge Planning	09/17/2018
1E. Project Review	09/17/2018
2A. HMIS Implementation	09/17/2018
2B. PIT Count	09/17/2018
2C. Sheltered Data - Methods	09/17/2018
3A. System Performance	09/17/2018
3B. Performance and Strategic Planning	09/17/2018
4A. Mainstream Benefits and Additional Policies	09/17/2018
4B. Attachments	09/17/2018

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Submission Summary

No Input Required