



Chicago Continuum of Care Board of Directors

Voting Item Briefing with Supporting Documentation

Expanding Emergency Housing Vouchers (EHV) Referral Sources

Voting Item

The CoC Board approves the recommended change to the referral sources for Emergency Housing Vouchers (EHV) from CoC Programs to add program types that meet the following criteria:

- CoC-funded Rapid Rehousing programs
- Transitional Housing programs

Programs in these program types, like the program types already approved, will meet the following criteria:

- Participated in the Housing Inventory Chart process in 2021
- Replace the opening created by moving someone on to an EHV with another participant/household from the CoC's Coordinated Entry system and processes;
- Able to utilize the Homeless Management Information System (HMIS) (except for agencies which are prohibited from using HMIS such as domestic violence agencies);
- Agree to use the CoC's Housing Transition Assessment tool to guide decision about whether EHV is appropriate for the household.

Public Comments

Public comments were solicited prior to this email vote and are included at the end of this document.

Background

On September 3, 2021, the CoC Board approved the initial referral sources for the Emergency Housing Vouchers. As part of that vote, the CoC Board requested that the Leadership Team of the System Analysis and Resource Development (SARD) Line of Action establish a working group to monitor EHV referrals and make suggestions to the Leadership Team and CoC Board if any changes are needed to the EHV referral criteria.

The EHV Working Group membership was identified in the following ways:

- The SARD Leadership Team was invited to participate;
- Affinity Groups were invited to participate, with encouragement to review the Relief Funding Working Group membership from which to select representatives; and
- YAB and LEC were invited to participate.

The EHV Working Group includes the following individuals:

- Maura McCauley, DFSS, Relief Funding Working Group*
- Tedd Peso, The Night Ministry, Youth Affinity Group, SARD Leadership Team
- Laura Bass, Facing Forward, Families Affinity Group, SPC, SARD Leadership Team
- Kathy Booton Wilson, Deborah's Place, Women's Affinity Group, Relief Funding Working Group*
- Chris O'Hara, LEC, SARD Leadership Team, Relief Funding Working group*
- Doug Schenkelberg, Chicago Coalition for the Homeless, SARD Leadership Team
- Jessica Smith, CSH, Veterans Affinity Group, Relief Funding Working Group*
- Johnna Lowe, CSH, CE Lead, EHV staff support*
- Katy Russell, Heartland Human Care Services, interested provider
- Colleen Mahoney, CDPH, Relief Funding Working Group*

Individuals with an asterisk after their name participated in the CoC Relief Funding Working Group which established the original recommendations for EHV referral criteria.

Current EHV Referral Status

- 994 applications have been received from eligible program models and have been sent to CHA for review.

Rationale

This rationale was drafted by All Chicago and is based on All Chicago staff's interpretation of the various conversations and feedback related to the EHV program thus far. The CoC Board Executive Committee requested that this information can be helpful to CoC Board members as they consider their vote.

In the Relief Funding Working Group's initial recommendation, the goal was to prioritize as many EHV's to help move participants on that would result in a new unit opening. Thus, the focus was primarily on PSH, which would allow for a one to one match, with a small number of units earmarked for ESG RRH in recognition of the scale of participants who might otherwise face a subsidy cliff. When the CoC Board met in August and learned that CHA was exploring other referral mechanisms because of concerns over the speed of referrals, the Board removed the limits on the number of referrals to reduce barriers.

When the EHV Working Group met to review data on the referrals to date, they identified this expansion for the following reasons:

- Given that projects can make any number of referrals, it now seems odd to exclude clients in TH and CoC RRH who have case management support to assess service need and support them in accessing EHV's;
- PSH referral requests remain low (~25% of referrals) and the other existing referral projects may not have sufficient clients to make use of all remaining vouchers (~340)

Reasons in favor of this recommendation:

- This will create more parity within the CoC that allows all participants in similar program models to access EHV's;
- This will expand the referral pathways to ensure the CoC is able to make use of all of the current EHV allocation;
- The new program models being added will be able to take new clients on a one-to-one basis for all clients who are transitioned to EHV's.

Reasons against this recommendation:

- More referral pathways may further reduce the pressure on PSH projects to refer participants, thus limiting how many PSH units open up for the system;
- More participants may be eligible and interested in vouchers than there are vouchers available, which could necessitate making a prioritization process that could delay access to the vouchers.

Implementation

The full list of program types that could make referrals to EHV's if the EHV criteria is expanded is:

- Rapid Rehousing
- Transitional Housing
- Permanent Supportive Housing
- Flexible Housing Pool
- Any youth-specific program with youth-dedicated beds on the Housing Inventory Chart
- Permanent Housing - Housing with Services
- Domestic Violence Rapid Rehousing and Joint Transitional Housing – Rapid Rehousing Programs or come from the Domestic Violence Coordinated Entry System

Public Comments

Of the 42 responses received, 92.9% were in favor of expanding the EHV referral criteria to include CoC-funded rapid rehousing programs, and 90.5% were in favor of expanding the EHV referral criteria to include transitional housing programs.

38 responses were submitted in response to this question, "What would you like the CoC Board to consider regarding their vote to expand EHV referral criteria to include CoC-funded RRH and TH programs?" Responses are below:

- Consider the absolute necessity of housing those at-risk as soon as possible
- Yes
- consider CHA has many buildings sitting empty in need of repair for way too long!
- If less than 75% of the vouchers have been utilized by the existing eligible programs, than expansion should occur for the RRH and TH programs.

- As many households in the CoC as possible should be able to access these vouchers, and if we use them all in time, we may be eligible for more down the line
- Make awareness publicly so the homeless or the needy will know how , who and where to begin to get help tv,radio,news,ads on billboards ,social media etc, lets make awareness make sure the places thats helping the homeless are helping my daughter been on indiana waitlist for help for almost 2yrs she has 3kids other just join the get help
- Please consider that under the EHI there were households who were placed in RRH despite their VI scores indicating they were a better fit for PSH. There is a great possibility that there are residents in these programs (and in Transitional Housing) who will never be able to gain and maintain steady employment income, and who can still live independently with minimal Community-Based support. These are the ideal candidates for EHV, and will likely be more successful than someone who would otherwise be prioritized for PSH. Chronic Homelessness should absolutely NOT be the criteria for an EHV.
- Relevant outplacement scores for successful transition from such programs to PSH or stable housing outside the system
- Yes because the persons in my program with Supportive Services did not get a chance to get one of those vouchers
- I would like them to have a better outreach team to recruit eligible participants. Also to focus on younger adults that are aging out of youth services. As well as an emphasis on returning citizens and participants that have had justice involvement.
- Use the vouchers to get people permanently housed and get the vouchers used up-pretty simple.
- I would like for the CoC Board to broaden the areas for which the EHV is allocated.
- The emergent need and benefit to all who are in great need of housing and the benefits it will have to increasing and sustaining their mental health.
- Individuals in transitional programs that can become homeless again within months should be included in the EV program.
- Vouchers alone will not guarantee someone is placed into the housing they need. If someone is receiving a voucher through the expansion of the EHV, please consider wrap around services needed/permanent supportive housing arrangements with said vouchers.
- Day after day, my staff talks with tenants at imminent risk of homelessness or living in poor conditions. The pandemic has laid bare the reality that we already knew -- that many Chicagoans are substantially rent-burdened. We understand that much thought went into the process of choosing from which programs agencies could draw potential EHV awardees; however, the experience since then tends to show that the categories were drawn too narrowly. Anyone in RRH should have been considered a potential EHV participant from the outset. Right now, I am representing a woman with children facing eviction because her RRH funding stopped and she has no way to pay market rent. In my experience as a legal aid attorney, too many people cycle through RRH and back to precarious housing o homelessness.
- Yes if it would help the people that really need it .
- Yes, I would
- COC -Funded RRH

- To include families that have experienced homelessness or currently experiencing homelessness.
- Please consider individuals that do not have a chronic homeless status for EHV's.
- That EHV's are a longer term of assistance to those populations. It could lead to a greater chance of stability for those in need of it. Transitional housing and rapid rehousing do help a good deal of individuals but they are both shorter term solutions that do have services attached. Some people need more assistance in finding places for their budgets though. There are also folks with limited incomes to consider that may not be able to obtain market rate apartments on their income only. Thanks for your time. I think this flexibility will help those that need it. Also, it's worth noting the more vouchers Chicago is able to navigate in the near future will offer the chance at additional vouchers from other areas.
- Having options where to move people from RRH has always been a problem. The end of a client's time in RRH has landed such a large percentage of participants back to homelessness that this is a way to correct that injustice of referring people to a housing type that is inadequate to meet their needs.
- There needs to be further eligibility criteria to avoid placing individuals or families who may not be successful in this program considering it is only semi-permanent.
- The most immediate need of people in RRH & Transitional Housing to have vouchers for a long enough period of time to ensure that they are stable and able to manage with minimal support. Many RRH residents are not going to be in this position at the end of the RRH funding period. Expanding the EHV to CoC-funding RRH gives the time needed to work with folks to stabilize.
- Individuals in both RRH and TH could benefit greatly and become housed through approval of the request. Also, it will help our CoC distribute EHV's quickly and equitably.
- St. Leonard's has a transitional housing program 12 units that funded by IDOC. The residents live here for one year. At the end of one year they need assistance in obtaining affordable housing or will be homeless again. I believe that residents such as these should be eligible for the emergency voucher. Our residents in the transitional program are listed in HMIS and come from a CoC funded emergency shelter.
- Consider single Fathers with criminal backgrounds. It's hard for us to spend quality time with our children because of housing regulations. Bad enough we can't really get the jobs we want. Housing will ease the burden on single Fathers. We matter too.
- Additional consideration for homeless HIV+ persons housed via projects outside of the CoC funded programs.
- I would like them to also consider expanding to Support Services Only programs (Drop-in Centers) which are often the first encounter someone who is experiencing homelessness or at-risk access services. For those who are at-risk of homelessness it may provide opportunity for stabilization, with or without relocation, while addressing one of the root causes of homelessness, which is poverty.
- The dire need for more appropriate housing in this population.
- These programs do not provide adequate stability. Once the time limit is reached the participant may become homeless again.
- RRH should be prioritized because due to AME's many of these participants are at risk of being homeless because they do not understand the process, they may not have the resources to pay

rent after the year ends, many RRH CM's are new to their role which may cause many of the participants to fall through the cracks.

- There are very few options for households with zero or low income to secure permanent housing and move on from CoC-RRH and transitional housing, especially for clients who have lost their homeless status while in transitional housing. I do not believe, however, that the allocation of EHV's to CoC-RRH and transitional housing should mean that ESG-RRH/EHI stop receiving additional EHV's -- EHV's are a vital component of the success of the EHI and preventing participants from returning to homelessness. It is inevitable that some EHI participants will return to homelessness at the end of their RRH assistance without resources like EHV's.
- The more people linked to stable housing, the closer we move towards our goal to end homelessness.
- Good morning my name is Catrice Malone I participate in Building Stable Communities which is a 2 year housing program through Heartland Alliance. I am providing my public comment to expand the EHV to programs such as Building Stable Communities because this would help my family in more ways than one. As a single mother of four who has been experiencing homelessness since 2017 and finally in 2021 coming to a temporary solution to housing it leaves me with a lingering pain and worry that once the program ends I will be back in the same predicament of having to deal with homelessness again. My children ages 11,7,5, and 4 months are all too familiar with the pain of suffering from homelessness. As I stated before as a single mother of 4, even having a full-time job does not provide my family any solution to permanent housing. Landlords expect me to furnish checks that are 3 times the rent which is impossible for me provide. So ...who will rent to me? All too often their are voices such as mine that go unheard and cycles that could be broken are continued. I want so much more for my kids but not having stable housing does not allow me to better myself for my children. Being provided with an EHV allows me to focus on things such as my health, it would allow me to better myself and more importantly it eased the anxiety of my children wondering where we go next. A stable home is key for a bright future for my children. I hope my comment is taken into consideration. I am just one of many voices that go unheard of but I speak on behalf of all single mothers who suffer from homelessness that are provided with just a temporary solution thank you so much for the opportunity to be heard.
- Housing 1st continues to be a #1 crisis. Although Rapid Rehousing programs have helped many, more housing support is necessary due to the ongoing of the Covid crisis, domestic violence, and the formerly incarcerated. Securing suitable housing remains to be a challenge for our participants.
- Include people like myself who have been waiting since 2015 for their voucher to be activated by CHA!