



CHICAGO'S PLAN 2.0

A Home for Everyone

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LETTER FROM MAYOR RAHM EMANUEL

Dear Friends:

I am proud to endorse Chicago's Plan 2.0 and want to thank everyone who contributed to developing this set of new strategies to advance our city's efforts to prevent and end homelessness.

Developed in 2002, Chicago's first Plan to End *Homelessness, Getting Housed, Staying Housed*, outlined three core strategies that have guided our progress: preventing homelessness whenever possible; rapidly rehousing individuals and families who become homeless; and providing wrap-around services to promote housing stability and self-sufficiency.

Over the last decade, Chicago has made significant strides in expanding its homelessness prevention and rental assistance resources, nearly doubling its stock of permanent supportive housing, and developing many innovative projects to house and assist some of our most vulnerable residents. Despite these gains, homelessness remains a reality for too many in our city.

To refocus our efforts, in October 2011 I asked a Steering Committee of key stakeholders to oversee the development of Chicago's next plan. Through their efforts, more than 500 stakeholders participated in a process that identified opportunities to enhance Chicago's homeless assistance system.

Chicago's Plan 2.0 is a broad-ranging, seven-year action plan that reaffirms and builds on the strategies of our first plan and outlines seven strategic priorities that will help improve access to housing and services, strengthen our efforts to end youth homelessness and help more people secure employment.

I look forward to working with you to achieve the objectives of Plan 2.0 and improving the quality of life for all Chicagoans.

Sincerely,

Rahm Emanuel
Mayor

Plan 2.0: A Home for Everyone articulates a vision for Chicago, a vision that everyone in Chicago can share. In this great city that gave us the pioneering Jane Addams, the innovative Frank Lloyd Wright, and the current President of the United States Barack Obama, we believe great things can happen. We believe that ending homelessness is possible and that, in Chicago, everyone should have a home.

Chicago's original Plan to End Homelessness, *Getting Housed, Staying Housed*, made impressive strides since being introduced in 2003. Plan 2.0 reaffirms the ambitious goals of *Getting Housed, Staying Housed*, while expanding our scope and commitment to housing Chicago's most vulnerable residents. Against the backdrop of the worst economic downturn since the Great Depression and with more of our neighbors at risk, homelessness is a pressing community need requiring our urgent attention. A new mayor in City Hall, new direction from Washington, D.C., and a recently-released evaluation of Chicago's Plan also provided a great catalyst for creating Plan 2.0. It was a timely opportunity for all the stakeholders in Chicago – policymakers, providers, consumers, funders, and advocates – to reflect on successes and challenges over the past decade and to plan for new, innovative strategies.

Plan 2.0 is divided into seven strategic priorities that represent the most cutting-edge thinking on preventing and ending homelessness from across the country. It was developed over eight months of extensive community dialogue and feedback, with participation from over 500 stakeholders, including 150 people who have experienced homelessness themselves. Plan 2.0's strategic priorities and goals are:

THE CRISIS RESPONSE SYSTEM	1
Create an effective crisis response system that prevents homelessness whenever possible and rapidly returns people who experience homelessness to stable housing.	
ACCESS TO STABLE AND AFFORDABLE HOUSING	2
Create and maintain stable and affordable housing for households who are experiencing or at risk of homelessness.	
YOUTH HOMELESSNESS	3
Create a comprehensive, developmentally appropriate menu of services for youth who experience homelessness in order to prevent homeless youth from becoming the next generation of homeless adults.	
EMPLOYMENT	4
Increase meaningful and sustainable employment opportunities for people experiencing or most at risk of homelessness.	
ADVOCACY AND CIVIC ENGAGEMENT	5
Engage all of Chicago in a robust plan that creates a path to securing a home for everyone in our community.	
CROSS-SYSTEMS INTEGRATION	6
Work across public and private systems of care to ensure ending homelessness is a shared priority.	
CAPACITY BUILDING	7
Ensure a strong homeless assistance system capable of implementing Plan 2.0 goals and HEARTH Act performance standards.	



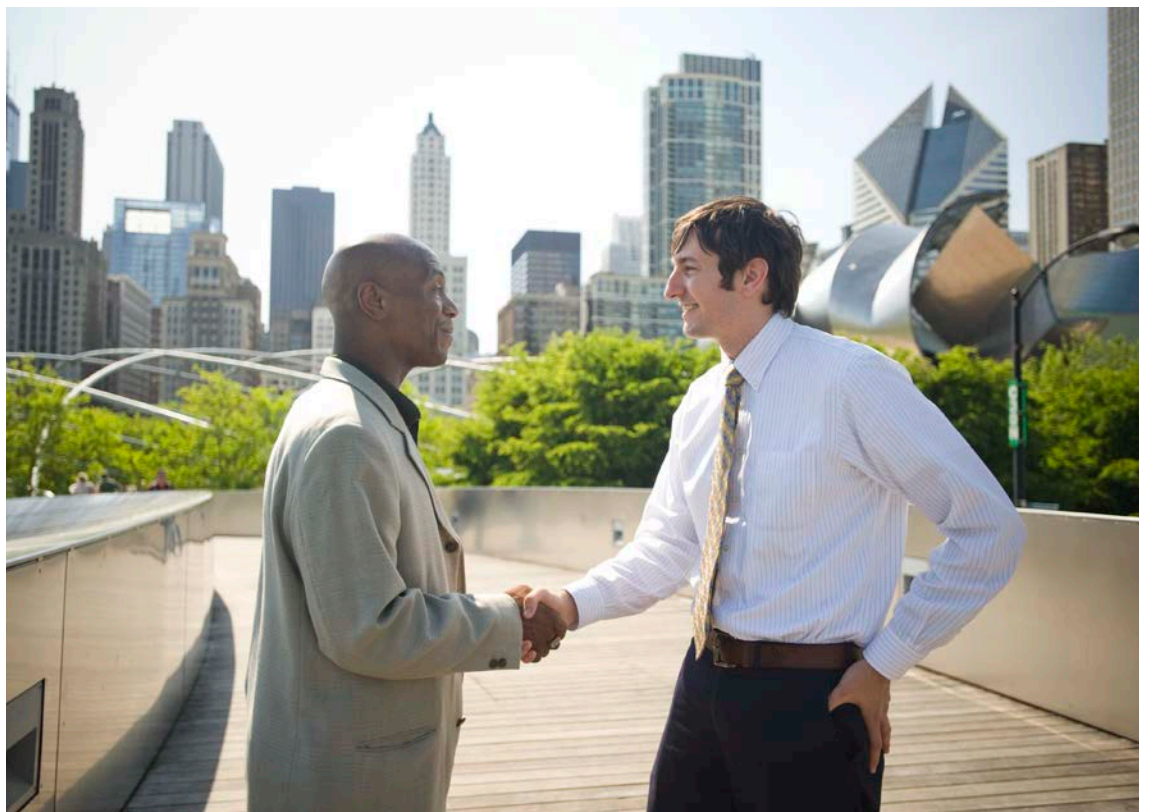
Home is the foundation from which we build our lives and our community. Together, in implementing Plan 2.0, we will create a Chicago in which everyone has a home.

Ten years ago, Chicago was the first major city to create an ambitious Plan to End Homelessness. Our goals were – and continue to be – to prevent homelessness whenever possible and to provide an integrated array of housing and services in an effective and cost-efficient manner for the greatest number of Chicagoans in need.

Today, we re-commit to creating solutions for the most vulnerable citizens of Chicago. Together, we – housing and service providers, city and county government, formerly and currently homeless consumers, business leaders, philanthropic partners, faith communities, and many other committed Chicagoans – will build momentum, promote new ideas, and meet the needs of those without stable housing.

When every Chicagoan has access to a safe, decent, and affordable home – homelessness ends in Chicago. Our vision is that, in our community, everyone has a home.

In 2011, the Chicago Planning Council on Homelessness – in partnership with the City of Chicago and the Chicago Alliance to End Homelessness – launched a process to redevelop Chicago’s Plan to End Homelessness. The Planning Council is the governing body for Chicago’s homeless assistance system. The 23-member volunteer board embodies the public-private partnership that is central to Chicago’s success: membership is divided among government entities, homeless service providers, consumers of homeless services, private funders, and the Chicago Alliance to End Homelessness. The Planning Council oversees Chicago’s Plan, with the Chicago Department of Family and Support Services and the Chicago Alliance managing its implementation.





As the major private sector partner advancing Chicago's Plan, the Chicago Alliance works to identify and strengthen critical system needs, to implement best practices, and to advocate for and secure public funding for Chicago's homeless assistance system. The Chicago Alliance is guided by front-line experts via two advisory boards: the Service Providers Commission and the Consumers Commission, which provide a strong voice for agencies and for people who have experienced homelessness in Plan implementation.

As guided by the Planning Council, the development of Plan 2.0 was inclusive of as many stakeholders as possible; driven by data; attentive to federal performance measures; and mindful of the current and foreseeable resources, risks, and external opportunities. The process had four stages:

- 1** *Kick-off Community Meetings and Discussion of Top Issue Areas*
In November 2011, 137 individuals and 16 stakeholder committees met to review the principles of the planning process and identify top issue areas to be included in Plan 2.0.
- 2** *Community Planning Charrette and Public Feedback*
In January 2012, 445 individuals, including local and national experts, gathered at a week-long community planning session to identify actionable recommendations for each top issue area.¹
- 3** *Preparing Plan 2.0 with Public Input*
From March to June 2012, eight community decision-making bodies reviewed and provided feedback on draft priorities and goals of Plan 2.0. The Interim Housing and Rapid Rehousing Task Force, with participation from 19 providers, consumers, and funders, also met to develop additional Plan 2.0 recommendations.
- 4** *Planning Council Ratification*
In June 2012, the Chicago Planning Council on Homelessness reviewed and approved Plan 2.0.

¹ The Final Charrette Report is available online at www.thechicagoalliance.org.

OUTCOMES AND ACHIEVEMENTS OF *Getting Housed, Staying Housed*

Chicago achieved significant outcomes under the first Plan to End Homelessness: *Getting Housed, Staying Housed*. Developed through a comprehensive community process and endorsed by Mayor Richard M. Daley in 2003, the Plan called for a fundamental shift from an emergency shelter-based strategy to a housing-focused strategy in order to not simply manage homelessness but to end it. Chicago's innovative Plan won a 2004 award from the National Alliance to End Homelessness in Washington, D.C., whose president called it "the most comprehensive and cutting-edge 10-year plan in the country." As figure 1 illustrates, the Plan was successful in converting Chicago's resources from the temporary solution of emergency shelter to the permanent solution of housing. The ratio of emergency shelter to permanent housing has flipped since implementation of the Plan, even while increasing the overall number of housing options available to people experiencing homelessness.

Figure 1: Chicago Housing Inventory by Program Type 2002-2012

(Source: *Housing Inventory Chart, 2002-2012*²)



² Short-Term Housing includes interim housing, second stage housing (a former program model no longer in use), permanent housing with short-term supports, youth transitional housing, and permanent housing for youth – project-based, age appropriate. Permanent Supportive Housing also includes Safe Haven.

The three core tenets of *Getting Housed, Staying Housed* were homeless prevention, Housing First, and wraparound services. These strategies required a comprehensive and deliberate reorientation of Chicago's homeless assistance system. It also required innovations in service delivery, the gradual redeployment of existing resources, increased public and private investments, and significant cross-systems collaboration. Through this process, Chicago has provided a national example of how a major city can make incremental, intentional change and see positive outcomes toward our goal of ending homelessness. Plan 2.0 will build off the many successes of the past decade and stay committed to the guiding principles of *Getting Housed, Staying Housed* which are outlined below.

TENET 1: HOMELESS PREVENTION

Prevention is an essential component of any effort to end homelessness. Homeless prevention is both a cost-efficient intervention and one that yields better outcomes for at-risk individuals and families. Prevention strategies include targeting households so they never enter the emergency shelter system and working strategically with other systems of care to prevent discharge into homelessness. Under *Getting Housed, Staying Housed*, Chicago:

- ▶▶ Created the Homeless Prevention Call Center in 2007. The call center is accessible to any Chicagoan in need through 311 and fields 70,000 calls per year. The multi-lingual, well-trained call center staff provide a one-stop approach to information and referrals to local, state, and federal homeless prevention resources.

- ▶▶ Delivered over \$49 million in homeless prevention resources since 2003. Resources include the federal Homeless Prevention and Rapid Rehousing Program, the federal Emergency Shelter Grant, the State Homeless Prevention Fund, and private contributions.

- ▶▶ Maximized the opportunities provided by the American Recovery and Reinvestment Act to pilot innovative homeless prevention strategies, including serving doubled up families and eviction prevention, reaching over 3,000 households.

- ▶▶ Piloted interventions targeted at frequent users of the corrections and health care systems. Both the Corporation for Supportive Housing and the AIDS Foundation of Chicago created new programs to provide housing and services to the most vulnerable users of other systems of care in order to prevent discharge into homelessness and recidivism.



TENET 2: HOUSING FIRST

For those who do become homeless, *Getting Housed, Staying Housed* adopted a Housing First approach that centered on providing people experiencing homelessness with housing as quickly as possible and then providing services as needed. The main premise of this approach is that services previously delivered in emergency shelter which promote self-sufficiency and enhance well-being are more effective when people are stably housed. Under *Getting Housed, Staying Housed*, Chicago:

▶ Nearly doubled the stock of permanent supportive housing for those who are homeless and/or disabled from 3,304 units to 6,472 units. For the past six years in a row, Chicago has competed successfully for new federal HUD funding to create additional permanent housing, totaling \$26 million.

▶ Converted over 3,000 beds of emergency shelter and transitional housing into interim housing, a best practice unique to Chicago. The goal of interim housing is to provide short-term stable housing and services targeted at moving individuals and families into appropriate permanent housing quickly. Interim housing serves nearly 5,000 households per year.



▶ Advocated successfully for the creation of the Illinois Rental Housing Support Program, the nation's largest state rental assistance program, which provides rental support to house over 2,500 "rent burdened" households across the state.

▶ Focused on moving Chicago's most vulnerable adults off the street and into permanent housing through Chicago's innovative Street to Home Initiative and as part of the 100,000 Homes Campaign, a national campaign to house 100,000 medically vulnerable individuals who are homeless across the country.

▶ Led the nation in studying the cost-effectiveness and efficacy of permanent supportive housing, with published reports from the AIDS Foundation of Chicago's Chicago Housing for Health Partnership, the Supportive Housing Providers Association, and Heartland Alliance's Social IMPACT Research Center.

TENET 3: WRAPAROUND SERVICES

Getting Housed, Staying Housed was committed to ensuring that households have access to a full range of fundamental resources and services – including physical and mental health care, substance use treatment, child care, employment, and connection to mainstream resources. These wraparound, individualized, comprehensive services protect the stability of housing, especially in times of crisis. Under *Getting Housed, Staying Housed*, Chicago:

▶▶ Provided state-of-the-art services to special populations, including young mothers and their children, veterans, and youth through a network of committed and talented providers.

▶▶ Increased the use of harm reduction and low threshold interventions within the homeless assistance system in order to reduce the harmful consequences of high-risk activities and maintain housing stability. In 2004, Heartland Health Outreach's Midwest Harm Reduction Institute was established to provide training and technical assistance on implementing harm reduction services.

▶▶ Advocated successfully to increase service funding for permanent supportive housing programs in Illinois by over \$20 million annually.

▶▶ Created cross-systems integration specialists through two pilot projects that encouraged collaboration between providers, funders, and mainstream resources to ensure the best outcomes for families experiencing homelessness and to reduce systemic barriers.

While Chicago – like the entire country – has not yet achieved its ultimate goal of ending homelessness, *Getting Housed, Staying Housed* provided the infrastructure, capacity, and resiliency to capitalize on the opportunities and survive the challenges of the past decade. Despite the most severe economic downturn since the Great Depression, Chicago's homeless assistance system has held steady. We have been able to prevent sharp increases in the number of individuals and families facing homelessness and have successfully rehoused thousands of the most vulnerable Chicagoans.

EVALUATION OF *Getting Housed, Staying Housed*

Chicago was also the first major city to conduct a formal evaluation of its Plan to End Homelessness. Starting in 2009, the City of Chicago and private foundations provided generous support to researchers from Loyola University Chicago and the University of Chicago to determine how well the Plan was working to achieve its ambitious goals.

The evaluation of Chicago's Plan to End Homelessness had four main research components:

- 1 A longitudinal survey of 550 people as they navigated Chicago's homeless system;
- 2 Focus groups to determine how well the current system met client needs;
- 3 Qualitative interviews with youth experiencing homelessness; and
- 4 An analysis of system entry through participant observation and an assessment of 311.

Results of the evaluation suggest that there was considerable progress made toward the Plan's goals, while also suggesting a number of next steps to improve client outcomes and the operation of Chicago's homeless assistance system. For the 550 people tracked over the course of a year in the homeless assistance system, figure 2 provides a snapshot of how the three primary types of housing interventions compared at achieving positive outcomes.

Figure 2: Success Rate of Moving to Permanent Housing Based on Housing of Origin

(Source: Loyola University and the University of Chicago, 9/11)

	For those that started in emergency shelter	For those that started in interim housing	For those that started in permanent supportive housing
Percentage of people who were still living in their starting location at the end of a year	44%	15%	81%
Percentage of people who made it to, or were still living in, permanent supportive housing at the end of a year	12%	19%	82%
Percentage of people who made it to market-rate housing at the end of a year	22%	47%	14%
Total percentage of people permanently housed at the end of a year	34%	66%	96%

Key findings from the evaluation are listed below and have been used to inform the strategic priorities and goals of Plan 2.0.³

KEY FINDINGS

- ▶▶ **Permanent supportive housing (PSH)** successfully ends a client’s homelessness by providing stable and secure affordable housing coupled with supportive services. PSH programs are serving clients with just as many challenges as clients in other parts of the system and are thus not selecting clients based on their ability to succeed.
- ▶▶ **The new interim housing model** yields better outcomes than traditional emergency shelter. 66% of interim housing clients found permanent housing by the final interview point. Most maintained market-rate housing successfully through a combination of earned income, federal disability benefits, and income supports.
- ▶▶ **Emergency shelter** has the most challenges in helping clients end their homelessness and move to permanent housing. 44% of the clients surveyed in emergency shelter remained in emergency shelter for the length of the evaluation (approximately one year).
- ▶▶ **Access to the homeless system** is neither coordinated nor efficient. 311 operators (separate from the Homeless Prevention Call Center) do not provide referrals, but rather tell callers to go to the nearest police station or emergency room, where consumers routinely wait long hours for transport to an emergency shelter. City street outreach teams are also not well-informed about housing and emergency shelter resources.
- ▶▶ **Supportive services** are critical in ending homelessness. In interviews, consumers praised highly-knowledgeable case managers as essential in helping them navigate the homeless system. The success of interim housing and PSH is predicated on strong service delivery.
- ▶▶ **Employment services** were especially important in ending homelessness, but in low supply in the homeless assistance system. Only 18% of consumers interviewed reported receiving job related services, while 38% reported a lost job or lost income as their primary reason for becoming homeless.
- ▶▶ **Homeless youth**, due to their transitional life stage and chaotic home of origin, face different challenges and require different services than adults experiencing homelessness. Programs dedicated to homeless youth are successful at providing developmentally-appropriate services; connections to education and job training; and a sense of guidance, belonging, and community.

BASELINE DATA

Homelessness is often a hidden tragedy in our community. Therefore, defining what we mean by “homeless” and providing an authoritative count of how many households experience homelessness in Chicago is no easy task. Figure 3 outlines the results of Chicago’s bi-annual Point in Time (PIT) count or one-day census of people who are homeless. This count is based on the U.S. Department of Housing and Urban Development’s (HUD) definition of homelessness: “when an individual lacks a fixed, regular and adequate place to sleep or who regularly spends the night in an emergency shelter, similar institution, or a place not meant for human habitation.”

Figure 3: Baseline Homeless Population Data

(Source: Point in Time Counts, 2005 – 2011)

	2005	2007	2009	2011
Singles Unsheltered	1,701	1,511	794 ⁴	1,655
Singles Sheltered	2,337	2,359 ⁵	2,548	2,598
Total Singles	4,038	3,870	3,342	4,253
Persons in Families Unsheltered	26	65	90	25
Persons in Families Sheltered	2,651	1,987	2,808	2,268
Total Persons in Families	2,677	2,052	2,898	2,293
Total Persons	6,715	5,922	6,240	6,546

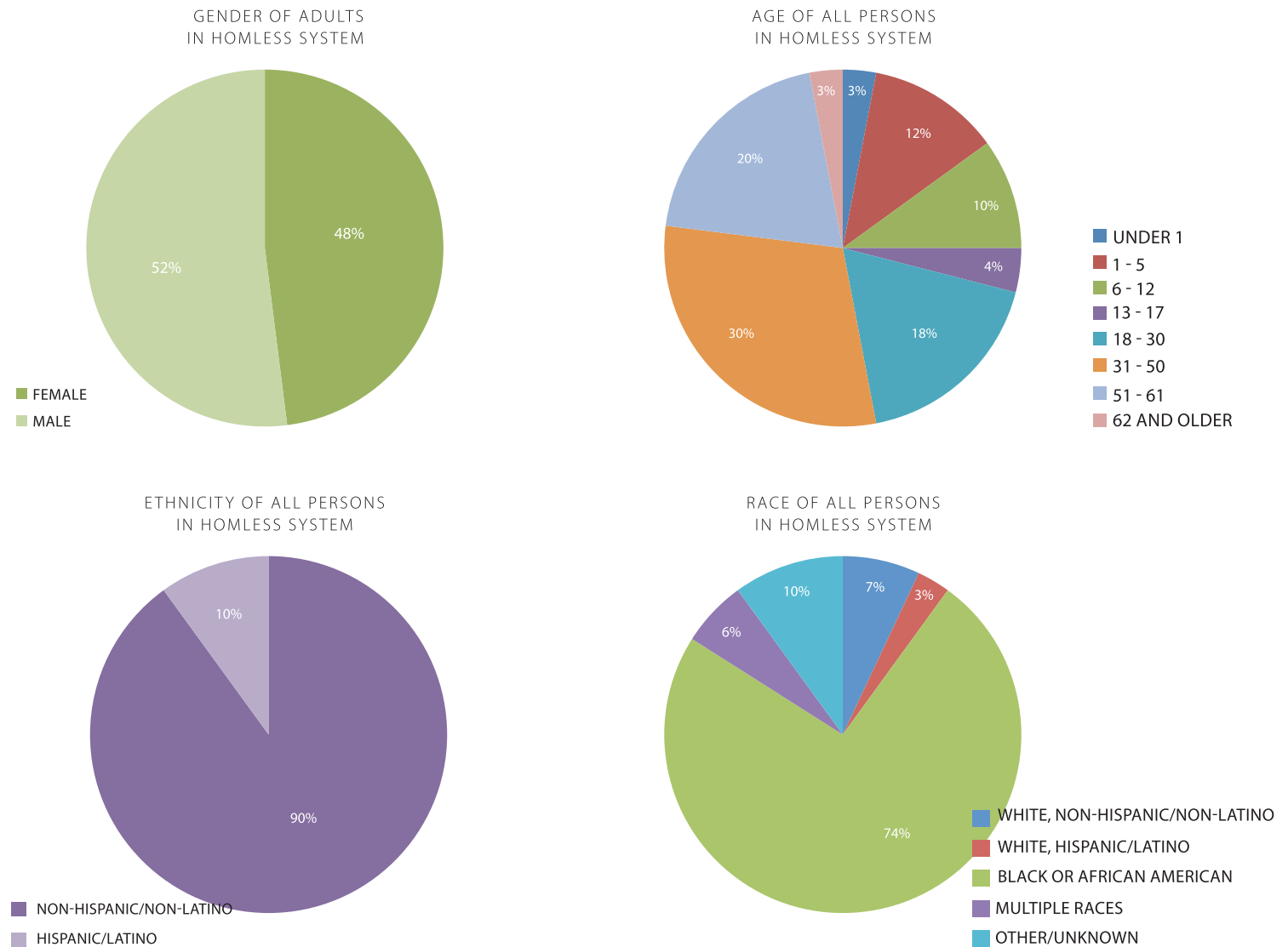
According to the one-day census, approximately 6,500 people were homeless in Chicago in January 2011. In Chicago, our rate of homelessness is 0.2% of the overall population – similar rates to Miami and Minneapolis, but lower than New York City or Los Angeles.

The figures on the next page illustrate the demographic characteristics of the people served in Chicago’s homeless assistance system. In addition to the information below, over 1,000 veterans and 5,000 people with disabilities were served by the homeless assistance system in 2011, representing 8% and 39% of the total adult population served respectively.

⁴ Count did not include persons on the Chicago Transit Authority.

⁵ Count did not include people living in permanent housing with short-term supports.

Figures 4 – 7: Demographic Characteristics of People Served by Chicago’s Homeless Assistance System⁶
 (Source: Homeless Management Information System, 10/1/10 – 9/30/11)



In addition to those served by the homeless assistance system or those who are sleeping on the streets, many households are precariously housed or living doubled up with family or friends. This is a challenging population to measure, but one benchmark is the data collected by Chicago Public Schools (CPS). In comparison to HUD, the U.S. Department of Education uses a broader definition of homelessness that includes living doubled up: “sharing the housing of other persons due to loss of housing or economic hardship.”

Recently, there has been a dramatic increase in the number of children and youth identified as homeless and/or precariously housed by CPS: over 16,600 students were identified as living doubled up or experiencing homelessness in the 2011-2012 school year, rising 35% in the previous three years alone. That means that 1 in 25 children and youth in the Chicago Public Schools system (and many of their families) are living doubled up or experiencing homelessness.

For Plan 2.0, Chicago has based its assumptions on the best data available with the intention that improved data collection and quality will strengthen our projections in years to come. Therefore, the key objectives outlined in Plan 2.0 are the minimum needed to reach our goal of a home for everyone.

⁶ Figures include people served in emergency shelters, a range of short-term housing programs, and permanent supportive housing. In contrast, figure 3 does not include persons served in permanent supportive housing.

⁷ Chicago Public Schools estimates that 89% of the identified homeless students are living doubled-up.

AN ENVIRONMENTAL SCAN FOR PLAN 2.0

The ambitious goals of Plan 2.0 do not exist in a vacuum. Our ability to create a community in which everyone has a home hinges on the resources, risks, and opportunities of the world around us. External forces such as the foreclosure crisis and trends in federal spending will directly impact our ability to successfully implement Plan 2.0. As the need for homeless services increases and available resources decrease, Plan 2.0 attempts to be both ambitious and pragmatic in setting goals for our community. We are using this scan of the current environment to inform and improve our planning efforts.

RISING POVERTY AND UNEMPLOYMENT

Too many Chicagoans live in poverty and are unable to find living wage jobs; these factors contribute to the number of people at risk of or experiencing homelessness. According to the U.S. Census Bureau, 23% of Chicagoans or approximately 600,000 people lived below the federal poverty line in 2010. Ten percent of Chicagoans live in extreme poverty (below 50% of the federal poverty line).⁸ Over the last decade, Chicago's poverty rate has risen 14%.⁹ While unemployment has improved since the height of the recession in 2009, Chicago's unemployment rate stands at 9.0%, slightly exceeding the national rate of 8.1%.¹⁰

AFFORDABLE HOUSING SHORTAGE AND FORECLOSURE CRISIS

Affordable housing is the solution to many people's homelessness. Unfortunately, Chicago has a severe shortage of affordable rental housing and it is out of reach for too many Chicagoans. According to the National Low Income Housing Coalition, a person in Cook County would have to earn \$18.42 an hour to afford a two-bedroom apartment.¹¹ According to a study by the Institute of Housing Studies at DePaul University, there was a shortage of 180,000 affordable rental units in Cook County in 2009, and this gap is likely to grow by an estimated 44,000 units by 2020.¹² To put the need for affordable housing in perspective, in 2008, when the Chicago Housing Authority opened up its waiting list for federally subsidized housing, 232,200 people applied for only 40,000 slots.¹³

⁸ Clary, Jennifer, et. al. 2011 Report on *Illinois Poverty*. Chicago: Social IMPACT Research Center, 2011.

⁹ Berube, Alan, et. al. *Chicago in Focus: A Profile from Census 2000*. Washington, DC: The Brookings Institution Center on Urban and Metropolitan Policy, 2003.

¹⁰ "Economy at a Glance: Chicago-Joliet-Naperville, IL." [Bureau of Labor Statistics](http://www.bls.gov/eag/eag.il_chicago_md.htm). Retrieved May 22, 2012.

¹¹ "Out of Reach 2012: Illinois." [National Low Income Housing Coalition](http://nlihc.org/oor/2012/IL). Retrieved June 16, 2012.

¹² Institute of Housing Studies. *The State of Rental Housing in Cook County*. Chicago: DePaul University, 2011.

¹³ "Public Housing Waiting List to Reopen After 10 Years." [Chicago Tribune](http://articles.chicagotribune.com/2010-05-10/news/ct-met-cha-waiting-list-20100510_1_chicago-housing-authority-public-housing-cha-housing). Retrieved June 16, 2012.

http://articles.chicagotribune.com/2010-05-10/news/ct-met-cha-waiting-list-20100510_1_chicago-housing-authority-public-housing-cha-housing

Chicago has also been one of the major U.S. cities most affected by the foreclosure crisis. Since 2008, Cook County has experienced 40,000 home foreclosures *every year*.¹⁴ According to the Lawyers' Committee for Better Housing, in 2009 and 2010, 12,334 apartment buildings went into foreclosure, affecting 37,726 rental units and destabilizing thousands of renters who lack the resources to relocate quickly.¹⁵

REDUCED GOVERNMENT SUPPORT

As the United States recovers from the worst economic downturn since the Great Depression, all levels of government are facing unprecedented fiscal challenges, including soaring budget deficits and significant health care and retirement liabilities. In response, the federal, state, and city governments may further weaken the nation's social safety net through painful budget cuts. With funding for critical programs already sharply reduced, it will be increasingly difficult to meet the needs of low-income individuals and families, especially those at risk of or experiencing homelessness.

ILLINOIS CONSENT DECREES

In 2010 and 2011, Illinois began implementing three Consent Decrees in response to class action lawsuits on behalf of persons with mental illness and physical or developmental disabilities residing in institutions. In implementing the three Consent Decrees, Illinois will become compliant with the Americans with Disabilities Act and the Supreme Court decision in *Olmstead v. L.C.* (1999) which affirm that people with disabilities should live in the least restrictive setting possible. In the next five years, over 11,000 persons in Illinois will have the option of moving out of institutionalized care and into a community-based setting. As scarce state resources for housing and services are dedicated to implementing the Consent Decrees, Chicago's homeless assistance system must advocate for Illinois to provide support for all who need it, including people experiencing homelessness.

THE END OF THE FEDERAL STIMULUS

The American Recovery and Reinvestment Act of 2009 included an unprecedented \$1.5 billion for the Homeless Prevention and Rapid Rehousing Program (HPRP). HPRP helped communities across the country manage the growing number of families and individuals in a housing crisis due to the recession. In Chicago, this time-limited infusion of \$34 million allowed us to provide short-term housing subsidies and case management to 5,400 homeless and at-risk people over the course of three years. While the lessons learned from HPRP implementation are included in Plan 2.0's strategies, this much-needed resource from the federal government is ending right at the time Plan 2.0 is beginning.

¹⁴ Bianchi, Nicholas. *No End in Sight: Home Foreclosures in Cook County, IL*. Chicago: National People's Action, 2011.

¹⁵ Swartz, Mark and Patricia Fron. *Tenants in Foreclosure Intervention Project 2010 Report*. Chicago: Lawyer's Committee for Better Housing, 2011.

SIGNIFICANT NEW INITIATIVES

Recent legislation and federal initiatives will have a considerable impact on the resources available to house and serve people experiencing homelessness and we must work to include these new programs in our planning. The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 amends and reauthorizes the McKinney-Vento Homeless Assistance Act, which provides \$54 million to Chicago annually – the single largest source of funding for Chicago’s homeless system. HEARTH Act implementation and the introduction of new performance measures will have significant implications for how our community works to prevent and end homelessness.

Implementation of the Patient Protection and Affordable Care Act (commonly known as health care reform) will also increase the resources available to meet the physical and mental health care needs of people experiencing homelessness. Starting January 1, 2014, Medicaid will expand to include all single individuals who are at or below 133% of the federal poverty level. Health and Disability Advocates, a national policy leader on Medicaid issues, estimates that 330,000 adults in Cook County will become newly eligible for Medicaid. Our community will need to be vigilant to ensure that the enrollment process is free of barriers for people experiencing homelessness and to advocate for Illinois to adopt comprehensive Medicaid benefits for the most vulnerable people. In addition, as Illinois works to coordinate health care for seniors and adults with disabilities using alternative models, homeless service providers will have the opportunity to incorporate housing and supportive services into the coordination of health care for at-risk populations.

In 2010, the U.S. Interagency Council on Homelessness and its 19 member agencies launched *Opening Doors*, the nation’s first-ever comprehensive strategic plan to prevent and end homelessness. The bold and measurable goals of *Opening Doors* are meant to catalyze change at the local and state level and improve the use of resources and cross-system collaboration. Many of the goals of Chicago’s Plan 2.0 are modeled on those of *Opening Doors*, and we will continue to align our strategies with the nation’s leading efforts in the field.

Also in 2010, the Obama Administration set a bold goal of ending veteran homelessness in five years. In response, the U.S. Department of Veterans Affairs’ budget for homeless assistance programs has grown dramatically over the past few years to support prevention, rapid rehousing, and permanent supportive housing for veterans experiencing homelessness. In Chicago, the Jesse Brown VA Medical Center launched a campaign called One Team Chicago in 2011 to focus the local VA’s energy on ending veteran homelessness and integrating with Chicago’s homeless assistance system. For the over 1,000 homeless veterans in Chicago, these initiatives and new resources will be a valuable addition to our toolbox of solutions.

ESSENTIALS TO MAKE HOMELESS INTERVENTIONS SUSTAINABLE

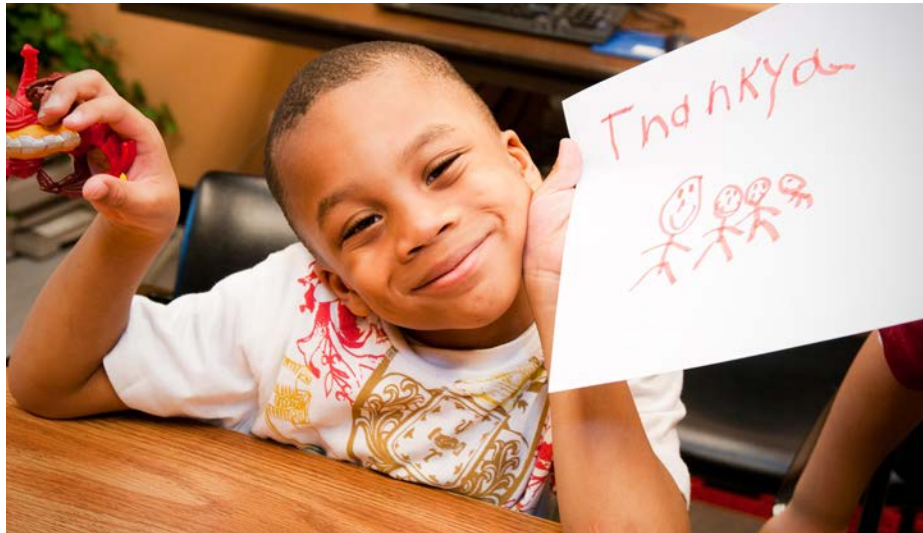
The issue of homelessness is relatively small compared to the scale of those living in poverty. While Plan 2.0 cannot end poverty, nor always stop our neighbors from losing their homes, the Plan can put us on a path toward becoming a city in which everyone has a home. Our ability to make progress will rest on the degree to which we are able to braid together the efforts of the homeless assistance system with the world around us. These are just a few of the essential components that will make Plan 2.0 a success:

- ▶ *Restoring, preserving, and increasing the resources of the homeless assistance system*, including homeless prevention, a range of housing options, and supportive services.
- ▶ *Increasing the supply of and increasing access to affordable housing* so that all Chicagoans can afford a stable home of their own.
- ▶ *Ensuring a well-functioning safety net* so that all households who are at risk of or experiencing homelessness have access to shelter, mainstream resources, public benefits, and quality health care.
- ▶ *Reaching all homeless populations* to ensure the unique and multiple needs of each person are recognized and addressed in a holistic way. Special populations include but are not limited to families, youth, victims of domestic violence, seniors, persons who have been convicted of a crime, persons with a disability, persons who are chronically homeless, persons with HIV/AIDS, persons who are LGBTQ, veterans, persons with limited English proficiency, and persons who are undocumented.
- ▶ *Ensuring harm reduction, trauma-informed, and asset-based principles are embraced system-wide* in order to provide housing and services with care, dignity, and respect to all people.
- ▶ *Holding the homeless system accountable to the highest quality of services* to ensure that consumers are provided with respect, support, and advocacy that empowers the consumer to be his or her own agent of change.
- ▶ *Putting the safety and well-being of consumers and providers first* by working to locate housing and services in places where consumers feel comfortable and safe.
- ▶ *Improving efforts to prevent public and private institutions from discharging individuals into homelessness.*
- ▶ *Expanding cultural competency and consumer choice* to respect the unique situation and aspirations of each individual who interacts with the homeless assistance system.

Plan 2.0 represents an updated and refined approach to preventing and ending homelessness in Chicago, driven by community need and input. Plan 2.0 reaffirms and builds on the strategies outlined in the city's 2003 Plan, *Getting Housed, Staying Housed*:

- 1 Preventing individuals and families from becoming homeless in the first place;
- 2 Placing individuals and families in permanent housing as quickly as possible when they do become homeless; and
- 3 Providing wraparound services to promote housing stability and self-sufficiency.

The efforts of the last ten years have helped thousands of individuals and families move from homelessness into safe, stable housing – a significant achievement. Implementation of Chicago's Plan has also transformed the homeless assistance system from *managing* homelessness with temporary solutions to working to *end* homelessness with permanent, holistic



solutions. These successful efforts will continue under Plan 2.0, alongside new strategies that incorporate the lessons of the last ten years, the best thinking from around the country and in our own backyard, and the realities of the world around us.

Plan 2.0 proposes seven strategic priorities to advance the efforts of Chicago's homeless assistance system. It covers the breadth and depth of what it will take to prevent and end homelessness in our community. Plan 2.0 proposes creating a state-of-the-art coordinated access system, increasing investments in permanent housing, giving homeless youth and employment services the attention they deserve, and much more. Action items are divided into short-term strategies to be worked on during the next two years (through 2014) and long-term/ongoing strategies to be worked on during the next seven years (through 2019) with progress reports to the community on a semi-annual basis.

Plan 2.0 is designed to be a living document that requires ongoing planning and collaboration to ensure successful implementation. We are committed to implementing Plan 2.0 in the most transparent and inclusive manner possible, with extensive community involvement every step of the way. We call on all the stakeholders of Chicago's homeless assistance system – policymakers, providers, consumers, funders, community partners, and advocates – to join us in working together to achieve the vision of Plan 2.0: a *home for everyone*.

THE CRISIS RESPONSE SYSTEM

STRATEGIC PRIORITY 1

GOAL

Create an effective crisis response system that prevents homelessness whenever possible and rapidly returns people who experience homelessness to stable housing.

OVERVIEW

Chicago needs a clear, consistent, and targeted crisis response system that quickly and compassionately assesses a household's needs and provides tailored resources to individuals and families in crisis. We must move beyond our decentralized approach to a set of more strategic and efficient interventions that reduces the number of people entering the homeless system and quickly stabilizes people who are already experiencing homelessness. We can achieve this goal by targeting prevention and diversion resources to those most at risk of entering emergency shelter; equipping emergency shelter and interim housing providers with the necessary resources to quickly re-house people; and coordinating outreach for those currently on the streets.

KEY OBJECTIVES

- ▶▶ Create a coordinated access system for prevention, emergency shelter, and interim housing by the end of 2013.
- ▶▶ Double the prevention and diversion resources for families and singles from \$2.2 million annually to \$4.4 million annually by 2019 to reduce the number of new households experiencing homelessness.

SHORT TERM ACTION ITEMS

- 1 Develop a method for targeting homeless prevention assistance to households most at-risk of entering emergency shelter.
- 2 Conduct a universal assessment for all persons requesting assistance and connect households to the appropriate intervention. Transfer all emergency shelter request calls made to 311 to the coordinated access system for assessment and referral.
- 3 Create system capacity for real-time bed management and the electronic transfer of client information for seamless continuity of care.
- 4 Allow the existing interim housing system to provide client-centered services while working to progressively reduce the amount of time people spend homeless without imposing uniform time frames.
- 5 Test shelter diversion models to assess the effectiveness of providing temporary housing alternatives instead of shelter placement.
- 6 Coordinate and expand outreach and engagement resources to create a universal approach and coverage throughout the city, including outreach to people who are chronically homeless and living on the street.
- 7 Ensure all housing programs support family preservation for children of all ages and genders, partners, and families without children. Provide training, technical assistance, and capital as necessary to providers to make the changes required by the HEARTH Act regarding age of children.

LONG TERM/ONGOING ACTION ITEMS

- 8 Provide adequate resources to maintain the physical infrastructure and facility operations of emergency shelter and interim housing programs.
- 9 Blend public and private resources to ensure Chicago's emergency shelter and interim housing system has the capacity to meet the needs of all households in crisis.
- 10 Maintain and increase the housing safety net for victims of domestic violence and their children, while also increasing the capacity of all housing programs to sufficiently address safety needs.
- 11 Increase the amount of mental health and substance use services available to consumers. Ensure services can continue as needed after exit from emergency shelter and interim housing in order to maintain housing stability.
- 12 Expand resources for tenants and landlords who are facing eviction or need immediate services, so they can be connected to homeless prevention and housing stability resources. Eviction prevention efforts should include all forms of permanent housing, including permanent supportive housing and other subsidized housing.
- 13 Provide family mediation services and temporary financial assistance, when appropriate, to mitigate discord between families living doubled up, while also working to connect families to other permanent housing resources in order to prevent homelessness.

ACCESS TO STABLE AND AFFORDABLE HOUSING

GOAL

Create and maintain stable and affordable housing for households who are experiencing or at risk of homelessness.

OVERVIEW

A stable and affordable home for everyone is the vision of Plan 2.0. In order to realize this vision, a range of permanent housing options is needed for Chicagoans experiencing or at risk of homelessness. For many people, a short-term housing subsidy and stabilizing case management is all that is needed to regain stable housing. For people who are disabled and require additional time and supports, permanent supportive housing has proven to be a cost-efficient and effective intervention. For the rest who are struggling with high rents and low-paying jobs, subsidized, affordable housing will end their homelessness. We must invest in a range of permanent and affordable housing options in order to create strong families and strong neighborhoods.

KEY OBJECTIVES

- ▶ Increase the number of rapid rehousing units from 737 to 2,768 (2,031 units/275% increase) to meet projected need.¹⁶
- ▶ Increase the number of permanent supportive housing units from 6,842 to 8,814 (1,972 units/29% increase) to meet projected need.
- ▶ Harness funding from all levels of government to expand affordable housing options for extremely low-income households (households earning 15% or below of area median income) in order to meet the projected need of 3,515 units.

¹⁶ See Appendix A for a thorough explanation of the projected need calculations.

SHORT TERM ACTION ITEMS

- 1 Increase rapid rehousing opportunities to enable non-disabled households with income to locate housing and exit homelessness quickly. Blend federal, city, and private resources to scale intervention up to the maximum number of households eligible.
- 2 Target new resources for short-term rental subsidies and housing-related case management toward homeless households living in emergency shelters and interim housing to reduce length of homelessness, increase placement rate into stable housing, and improve housing retention.
- 3 Develop a supportive housing initiative to combine city, federal, and private resources to strategically create a pipeline of new supportive housing.
- 4 Implement a central referral system for permanent supportive housing that prioritizes access by level of vulnerability and length of homelessness, and connects to the coordinated access system.
- 5 Work with the Chicago Housing Authority (CHA) to effectively assist people experiencing homelessness through the establishment of a special designation and prioritization on the CHA waiting list and/or utilization of a central referral system for its supportive housing portfolio.
- 6 Implement “Moving On” efforts to assist people in supportive housing to move on to affordable housing in the community when appropriate, freeing up the supportive housing unit for the next, most vulnerable community member.

LONG TERM/ONGOING ACTION ITEMS

- 7 Work with public and community partners, including the Chicago Department of Housing and Economic Development and the Illinois Housing Development Authority, to develop new affordable housing opportunities, including additional rent subsidies and preservation of affordable rental units.
- 8 Work with the CHA to develop new ways of serving persons with criminal backgrounds, including through the Property Rental Assistance program.
- 9 Improve access to permanent supportive housing for interim housing and emergency shelter clients including ex-offenders. Reduce documentation barriers and limit barriers to entry to solely reflect minimum requirements of funders.
- 10 Develop and implement a coordinated, citywide landlord outreach strategy to recruit new rental partners.
- 11 Create a citywide affordable housing initiative that transforms foreclosures into affordable housing, using a combination of federal and local funds.
- 12 Explore innovative solutions for increasing permanent housing options for ex-offenders, including landlord incentives and protections, and master leasing.
- 13 Explore successful community housing models, i.e. home sharing, host home programs, or roommate matching for low-income households and youth.

YOUTH HOMELESSNESS

STRATEGIC PRIORITY 3

GOAL

Create a comprehensive, developmentally appropriate menu of services for youth who experience homelessness in order to prevent homeless youth from becoming the next generation of homeless adults.

OVERVIEW

Unaccompanied youth, disconnected from a trusted adult, face unique developmental challenges and dangers on the street. Youth need a full range of comprehensive, accessible services in order to become stably housed and successful in adulthood. Plan 2.0 will bring these effective, evidence-based services to scale and widen their reach to more neighborhoods. We will do a better job of providing resources for the 1,500 youth between the ages of 16 and 24 who currently access Chicago's homeless assistance system each year and the thousands more we have yet to reach.

KEY OBJECTIVE

- ▶ Triple the capacity of the youth housing system by 2019 from 266 beds to 800 beds.

SHORT TERM ACTION ITEMS

- 1 Appoint the City of Chicago Task Force on Homeless Youth, which includes homeless youth providers, youth consumers, and youth advocates, as the key advisory body to inform interventions, policies, and investments.
- 2 Conduct an accurate annual count of youth experiencing homelessness to inform plan implementation and resource allocation, and to set targets for the reduction of youth experiencing homelessness.
- 3 Implement positive youth development, harm reduction, trauma-informed, and culturally competent service models in all homeless programs that serve youth.
- 4 Increase the capacity of certain adult-serving emergency shelter and interim housing programs to provide youth-centered services. Ensure such programs have appropriate facilities and well-trained staff and that youth are never placed in adult programs that present safety concerns.
- 5 Work with Chicago Public Schools to increase support for homeless youth through its Students in Temporary Living Situations (STLS) program; enhance training for school-based liaisons; and provide specialized resources for students in a housing crisis.
- 6 Request that the Illinois Department of Children and Family Services (DCFS) report on the number of emancipations, transitions out of child protective care, and disrupted permanent placements that result in homelessness. Develop joint prevention and housing efforts.

LONG TERM/ONGOING ACTION ITEMS

- 7 Develop new youth housing, including low-demand emergency shelter beds, developmentally appropriate transitional housing, and permanent housing. Ensure new housing is available in each area of the city.
- 8 Provide a comprehensive array of services and interventions, as well as a safe alternative to the street, at 24/7 drop-in centers on the north, south, and west sides of the city.
- 9 Improve crisis intervention and family mediation services, when appropriate, to prevent youth from becoming homeless. Increase collaborations with Comprehensive Community Based Youth Services (CCBYS) agencies – the state-funded providers of family reunification for minor youth.
- 10 Connect pregnant and parenting youth to housing and services that address the developmental needs of both the parent and the child.
- 11 Advocate for the Chicago Public Schools system to adopt and integrate the runaway prevention curriculum developed by the National Runaway Switchboard.
- 12 Work with the City Colleges of Chicago and other public and private colleges to count the number of homeless college students and provide specialized resources for students in a housing crisis.

EMPLOYMENT

STRATEGIC PRIORITY 4

GOAL

Increase meaningful and sustainable employment opportunities for people experiencing or most at risk of homelessness.

OVERVIEW

For many non-disabled people, finding living wage employment is an essential part of moving on from homelessness – and usually one of the biggest challenges. In 2011, only 24% of households were employed at exit from the homeless assistance system. In the evaluation of Chicago's first Plan, employment services were cited as one of the resources in greatest demand but shortest supply. To make significant progress on this issue, the homeless assistance and employment systems will need to cooperate as they have never done before. We must expand the capacity and flexibility of the workforce development system to better meet the needs of people experiencing homelessness; to better equip homeless providers with tools to assess and connect clients for whom employment is appropriate to the most suitable resources; and to develop innovative approaches to creating career opportunities for the most vulnerable Chicagoans.

KEY OBJECTIVE

- ▶▶ Increase the number of households employed at exit.

SHORT TERM ACTION ITEMS

- 1 Conduct an assessment of the current workforce system in Chicago and Cook County to determine the most effective strategies for connecting people experiencing homelessness to employment opportunities.
- 2 Improve data collection on the employment needs and outcomes of people experiencing homelessness in order to set targets for the increase in number of households employed at exit.
- 3 Build and strengthen connections with the existing workforce system to create more pathways to employment for people experiencing homelessness, including more intentional partnerships between workforce programs, emergency shelters, and interim housing programs to provide income-building opportunities for participants.
- 4 Work closely with the new Chicago Cook Workforce Partnership to ensure federal workforce resources and job training opportunities are made available to people experiencing homelessness.
- 5 Develop and implement a standard employment readiness assessment that is consistent with the workforce system and leads to appropriate linkages with employment services.
- 6 Increase resources within homeless programs to conduct employment readiness assessments, link to appropriate services, and provide job retention case management.

LONG TERM/ONGOING ACTION ITEMS

- 7 Expand programming to engage long-term unemployed homeless people in building personal work history and meeting basic financial needs.
- 8 Expand employment and housing opportunities for ex-offenders by increasing clemency and expungement legal services and advocating to ban employment discrimination based on criminal history.
- 9 Create career opportunities for consumers within supportive and affordable housing developments, including expanded use of the Property Management Curriculum at the City Colleges of Chicago and within new housing initiatives focused on rehabilitating foreclosed properties.
- 10 Prioritize more employment opportunities for youth including seasonal, full-time, and part-time jobs. Explore hiring peer mentors for homeless youth at schools and service agencies.
- 11 Ensure basic financial literacy and credit- and asset-building services are provided to all households within the homeless assistance system.
- 12 Explore entrepreneurial innovations such as micro-lending programs for individuals who are homeless or have had past experiences of homelessness.

ADVOCACY AND CIVIC ENGAGEMENT

STRATEGIC PRIORITY 5

GOAL

Engage all of Chicago in a robust plan that creates a path to securing a home for everyone in our community.

OVERVIEW

Successful implementation of Plan 2.0 will require the commitment and sustained advocacy of all community partners. From government agencies to corporate boardrooms to neighborhood providers and consumer advocates, we must all be united behind the same vision and goals. We must continue to be strong advocates for the homeless assistance system in order to increase resources and maximize policy opportunities, and we must raise the profile and urgency of the issue in order to inspire change.

KEY OBJECTIVES

- ▶ Advocate for additional resources to meet the needs of people experiencing homelessness.
- ▶ Increase civic participation and commitment to the goal of ending homelessness.

SHORT TERM ACTION ITEMS

- 1 Support a strong Chicago Planning Council on Homelessness to continue Chicago's robust public-private partnership, monitor the Plan's progress, and ensure a comprehensive and effective homeless assistance system.
- 2 Advocate for increased local, state, federal, and private resources to fund solutions and successfully implement Plan 2.0.
- 3 Convene private partners (including foundation, corporate, and individual donors) in order to coordinate and increase investments in Plan 2.0 goals.

LONG TERM/ONGOING ACTION ITEMS

- 4 Tell the story of the Plan to all of Chicago through semi-annual reports to the community on outcomes, successes, and items that remain unaddressed.
- 5 Advocate for Illinois to provide a critical safety net to people at risk of or experiencing homelessness by fully funding the Homeless Prevention, Emergency and Transitional Housing, Homeless Youth, Homeless Education, and Supportive Housing programs.
- 6 Advocate for safety net programs to remove disincentives to employment and training in order to help people work toward self-sufficiency without losing access to supportive services and resources.
- 7 Conduct outreach to a wide range of faith communities in order to educate congregations on the goals of Plan 2.0 and increase their level of engagement in the homeless assistance system.
- 8 Share Plan successes at the national level through conferences, peer sharing, and updates to Chicago's Congressional delegation, promoting Chicago's progress and performance on key national goals.

CROSS-SYSTEMS INTEGRATION

STRATEGIC PRIORITY 6

GOAL

Work across public and private systems of care to ensure ending homelessness is a shared priority.

OVERVIEW

The people at the heart of Plan 2.0 are much more than a label of “homeless.” They are families, learners, survivors, and job seekers. Sometimes they are ill, sometimes they are in recovery, and sometimes they are building a new life after incarceration. Each person is unique and each person touches multiple systems of care in our community beyond the homeless assistance system. To truly meet our goals, we must work more creatively and more efficiently across systems of care to ensure everyone – regardless of their situation – has a home. Successful cross-systems integration will lead to lasting change by improving access to comprehensive services and continuity of care, by reducing duplication and inefficiency, and by establishing greater accountability for meeting our shared goals.

KEY OBJECTIVES

- ▶▶ Foster sustained, high-level coordination among government agencies on the issue of ending homelessness by establishing a Chicago Interagency Council on Homelessness by the end of 2013.
- ▶▶ Ensure rapid assessment and connection to mainstream resources for all households experiencing or at risk of homelessness.

SHORT TERM ACTION ITEMS

- 1 Design and implement the Chicago Interagency Council on Homelessness. Secure commitments from key stakeholder agencies¹⁷ to actively participate in the Council. Through this process, work to ensure that the planning processes and priorities of key stakeholder agencies are aligned so that the needs of people experiencing or at risk of homelessness are addressed.
- 2 Dedicate Plan 2.0 staff to cross-systems integration in order to provide consistent direction across government agencies and partners and to ensure shared accountability.
- 3 Increase resources for the SSI Outreach, Access, and Recovery (SOAR) program to increase the number of people with serious mental illness experiencing homelessness who are able to access Social Security disability benefits and Medicaid.
- 4 Explore all opportunities under implementation of the Affordable Care Act to provide comprehensive physical and behavioral health care to people experiencing homelessness, including care coordination with housing and services.

LONG TERM/ONGOING ACTION ITEMS

- 5 Increase collaboration with the U.S. Department of Veterans Affairs and the Jesse Brown VA Medical Center through integrated homeless outreach and improved access to veteran-specific homeless programs.
- 6 Partner with the Illinois Department of Corrections to implement homeless prevention and rapid rehousing programs in order to prevent homelessness upon discharge and recidivism.
- 7 Increase access to public assistance programs (including Temporary Assistance for Needy Families, Supplemental Nutrition Assistance Program, and child care assistance) by connecting households to benefit applications at the point of access and by providing referrals to legal advocacy services in order to appeal if necessary.
- 8 Provide comprehensive services and innovative programming to homeless students and their families via their connection to Chicago Public Schools and the Students in Temporary Living Situations (STLS) program. Work with STLS staff, homeless service providers, and other systems of care to provide access to housing opportunities, mobile case management, early intervention services, and/or on-site childcare for parenting youth.
- 9 Increase the accessibility and affordability of public transportation for people experiencing homelessness.

¹⁷Stakeholder agencies may include: Chicago Housing Authority; Chicago Public Schools; City Colleges of Chicago; Chicago Department of Housing and Economic Development; Chicago Department of Family and Support Services; Chicago Department of Public Health; Chicago Transit Authority; Chicago Planning Council on Homelessness; Illinois Housing Development Authority; Illinois Department of Corrections; Illinois Department of Juvenile Justice; Illinois Department of Children and Family Services; Divisions of Family and Community Services, Mental Health, and Alcohol and Substance Abuse within the Illinois Department of Human Services; Illinois Department of Healthcare and Family Services; U.S. Department of Veterans Affairs; and Early Intervention and Early Childhood Systems.

CAPACITY BUILDING

GOAL

Ensure a strong homeless assistance system capable of implementing Plan 2.0 goals and HEARTH Act performance standards.

OVERVIEW

Chicago's homeless assistance system is comprised of hundreds of tireless providers and volunteers working across the city; dozens of advocates and systems-level professionals striving to improve our chances at ending homelessness; and most of all, the thousands of people who might need help today, but also want an opportunity to give back tomorrow. Ensuring the strength, resiliency, and creativity of this system will allow all of Plan 2.0's ambitious goals to be realized.

KEY OBJECTIVE

- ▶ Increase Chicago's outcome achievements in relation to Plan 2.0 and HEARTH Act performance measures.

Figure 8: HEARTH Act Performance Measures

(Source: Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009)

FEDERAL GOAL

Ensure that individuals and families who become homeless return to permanent housing within 30 days.

PERFORMANCE MEASURES

1. The length of time individuals and families remain homeless;
2. The extent to which individuals and families who leave homelessness experience additional spells of homelessness;
3. The thoroughness of grantees in the geographic area in reaching individuals and families experiencing homelessness;
4. Overall reduction in the number of individuals and families experiencing homelessness;
5. Jobs and income growth for individuals and families experiencing homelessness; and
6. Success at reducing the number of individuals and families who become homeless for the first time.

SHORT TERM ACTION ITEMS

- 1 Set annual system-wide performance benchmarks based on Plan 2.0 objectives and HEARTH Act performance measures.
- 2 Increase bed coverage and data quality in the Homeless Management Information System (HMIS) in order to regularly identify system gaps that need to be addressed.
- 3 Make better use of all available data sets and identify additional sources of data necessary in order to determine housing and service gaps in our homeless assistance system. In addition, work to collect all local data sets in a clearinghouse for ease of performance analysis and advocacy.
- 4 Create logical, direct linkages between online housing search tools in order to maximize system capacity: www.direct2housing.org, www.ilhousingsearch.org, and www.chicagohousingoptions.org.

LONG TERM/ONGOING ACTION ITEMS

- 5 Create an open HMIS system able to connect with multiple data systems in order to reduce provider time entering data and to provide quality system-level reports on usage. Ensure all applicable laws protecting confidentiality are followed.
- 6 Provide training and technical assistance on leading, evidence-based practices and innovative pilots in order to ensure implementation of high-quality homeless services.
- 7 Provide training and support to all homeless service providers on common standards of harm reduction in order to more effectively serve people who are engaging in high-risk behavior.
- 8 Provide training and support to all programs that serve families to ensure that the educational, developmental, and health care needs of children are being met.
- 9 Support providers of homeless services by ensuring sufficient training, skill development, and compensation for staff, as well as the long-term sustainability of programs and agencies.
- 10 Create a private funding pool to incentivize successful implementation of HEARTH Act performance measures.
- 11 Fundraise for system improvement planning grants that create opportunities for programs to coordinate and implement strategic change.
- 12 Ensure adequate capacity within the homeless assistance system to appropriately serve people who speak languages other than English.
- 13 End any discriminatory practices within the homeless system to ensure equitable access to housing and services.

We would like to extend our deepest thanks to the community leaders who lent their time and energy to creating Plan 2.0 and who work every day to create a community in which everyone has a home. The Chicago Planning Council on Homelessness oversaw the planning process and it was led by Nicole Amling at the Chicago Alliance and John Pfeiffer at the Chicago Department of Family and Support Services.

We are grateful for the feedback and direction provided by the Planning Council, the Service Providers Commission, and the Consumers Commission throughout the planning process. Over 500 stakeholders participated in the planning process, including 150 people who have experienced homelessness themselves and representatives from at least 67 service providers and 14 government agencies. The Plan 2.0 Steering Committee provided guidance and insight throughout the journey and we appreciate their dedication:

Nicole Amling	Nancy Radner
Nicole Bahena	Susan Reyna
Nonie Brennan	Debbie Reznick
Andrea Dakin	Alisa Rodriguez
Ceandra Daniels	Richard Rowe
Julie Dworkin	Britt Shawver
Matt Fischler	Mike Simmons
Ann Marie Grimberg	Dorothy Yancy
John Pfeiffer	

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A final thank you to the team at the Corporation for Supportive Housing, led by Liz Drapa and Betsy Benito, who helped shape the planning process and led us to a Plan 2.0 that can be embraced citywide.

DESIGN & LAYOUT
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PHOTOGRAPHY

Bernadette Aguilar, fotoFANATIK Photography (Cover, pages 4, 5, 8)
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Bruce Powell, Photography By Bruce Powell (Page 6)
Heidi Jo Brady (Page 9)
Angela Garbot, Photos by Garbot (Page 18)

APPENDIX A: PROJECTED NEED CALCULATIONS

The Chicago Alliance and the Chicago Department of Family and Support Services based the following calculations on the best data available at this time. However, we acknowledge that successful implementation of Plan 2.0 will require us to improve data collection and quality, as well as regularly analyze system trends, in order to strengthen our ability to project the number of housing options needed. The projections here are the minimum needed as of June 2012 and we are committed to regularly recalculating the number of housing options needed in order to plan for growth. Plan 2.0 housing projections will be updated annually and shared broadly with our community of stakeholders.

The calculations of projected need are based on the following four housing options:

- ▶▶ **Permanent supportive housing (PSH)**, a long-term subsidy with wraparound services, primarily for households with a disability;
- ▶▶ **Rapid rehousing (RRH)**, a short-term subsidy with housing stability case management (including subsidies funded by the federal Emergency Solutions Grant and units of Permanent Housing with Short-Term Supports);
- ▶▶ **Subsidized, affordable housing** targeted at households earning 15% or below of area median income; and
- ▶▶ Households that make it to **unsubsidized, permanent housing** without a permanent housing option provided by our system.

In estimating the projected need for permanent supportive housing, we added the number of households currently being served and the estimated number of homeless people (unsheltered, sheltered, and doubled up) who could be successful in this housing option based on previous outcome data. The doubled up estimate is derived from data from Chicago Public Schools on the number of children and youth identified as homeless. Unfortunately, there is no data source available to identify the number of single individuals who may be living doubled up.

Figures 9 – 13: 2012 Projections of Housing Availability and Need

(Source: Chicago Alliance to End Homelessness, 6/12 – data key is available on page 37)

	Family Units	Individual Units	Total Units
Number of households served in PSH over the course of a year (AHAR 2011)	1,036	5,250	6,286
Number of chronically homeless unsheltered people (PIT 2011)	6	717	723
Number of severely mentally ill sheltered people (PIT 2012)	188	666	854
On average, 12% of interim housing clients move on to PSH (HMIS 2011)	267	379	646
Number of doubled up families in need of PSH (Estimate) ¹⁸	305	No data	305
Total number of PSH units needed	1,802	7,012	8,814

¹⁸ As of April 30, 2012, Chicago Public Schools counted 14,764 students as living doubled up. The National Alliance to End Homelessness estimates that the odds of a doubled up household experiencing homelessness are one in twelve, meaning an estimated 1,230 doubled up students may experience homelessness in Chicago. Based on the average family size and the age of children in Chicago's homeless system, we estimate that 25% of those students may be siblings in the same household. Therefore, we estimate that at least 923 doubled up households would require a housing intervention per year. Since we do not have any demographic data on these families, we assumed they had the same characteristics as other families in the homeless system and would need the same interventions at the same rate.

To calculate the number of available permanent supportive housing units, we added the number of current units and those under development, the average turnover, and those households that are currently living in PSH but have gained the skills to live independently, minus the average number of units vacant or in transition at any given time. The projected unmet need for permanent supportive housing is **1,972 units**.

	Family Units	Individual Units	Total Units
Current PSH units plus units under development (<i>HIC 2012</i>)	1,027	5,919	6,946
Average PSH turnover (<i>AHAR 2011</i>)	50	752	802
"Moving On" Initiative for 2% of units annually (<i>Proposed</i>)	20	116	136
Average 15% vacancy in PSH at any given time (<i>AHAR 2011</i>)	(154)	(888)	(1,042)
Total number of available PSH units	943	5,899	6,842
Total number of PSH units needed	1,802	7,012	8,814
Projected need for permanent supportive housing	859	1,113	1,972

In estimating the projected need for rapid rehousing, we used Chicago's experience of implementing the Homeless Prevention and Rapid Rehousing Program to predict that households with income would be most successful in this housing option and should therefore be targeted by income level at entry. As the federal Emergency Solutions Grant expands to fund rapid rehousing in 2012 and 2013, we will analyze program-level data in order to test this hypothesis and inform our projections in future years. Since we do not have similar income level data for households in emergency shelter and because there is not different criteria for entry between the two program types, we assumed the same income rates as for those in interim housing. Since we do not have demographic or income data on doubled up families, we assumed they would have the same characteristics as families in interim housing.

	Family Units	Individual Units	Total Units
28% of individual households enter interim housing with income of \$500 or more <i>(HMIS 2011)</i>	0	885	885
20% of family households enter interim housing with income of \$500 or more <i>(HMIS 2011)</i>	555	0	555
Number of households entering emergency shelter with income <i>(Estimate)</i>	146	997	1,143
Number of doubled up families in need of RRH <i>(Estimate)</i>	185	<i>No data</i>	185
Total number of RRH units needed	886	1,882	2,768

To calculate the number of available units, we added the number of units to be funded by the Emergency Solutions Grant in 2012 and 2013 and the number of Permanent Housing with Short-Term Support units currently available. Permanent Housing with Short-Term Supports is the program model currently in use in Chicago that most closely aligns with rapid rehousing. The projected unmet need for rapid rehousing is **2,031 units**.

	Family Units	Individual Units	Total Units
Emergency Solution Grant units <i>(Con Plan)</i>	99	120	219
Permanent Housing with Short-Term Support units <i>(HIC 2012)</i>	275	243	518
Total number of available RRH units	374	363	737
Total number of RRH units needed	886	1,882	2,768
Projected need for rapid rehousing	512	1,519	2,031

We estimate that Chicago needs **19,125 housing options** over the course of a year in order to meet the current need of all individuals and families who experience homelessness. In order to project the number of housing options needed over the course of a year, we combined:

- ▶ Chicago’s Point in Time Count of unsheltered individuals and families;
- ▶ An annualized, extrapolated count of the number of households served by Chicago’s homeless assistance system; and
- ▶ An estimation of the number of doubled up households that may become homeless based on Chicago Public Schools data and national estimates.

We used the findings of the Plan evaluation to estimate that **4,028 households** (21%) stabilize on their own by either moving into private, unsubsidized housing or by living in a permanent, doubled up situation.¹⁹ However, we know that many households move into unaffordable, unsustainable housing because no better option exists. It is our intention to continuously refine our methodology in order to estimate the amount of subsidized housing options needed by these households in the coming years.

We project that the balance, **3,515 households**, will require subsidized, affordable housing targeted at households earning 15% or below of area median income. This level of targeting is based on the average income level for households leaving the homeless assistance system.

	Homeless Families	Doubled Up Families	Homeless Individuals	System Goal	% of Total
Goal for Permanent Supportive Housing Units	1,497	305	7,012	8,814	46%
<i>Number of Units Needed to Reach Goal</i>		859	1,113	1,972	
Goal for Rapid Rehousing Units	701	185	1,882	2,768	15%
<i>Number of Units Needed to Reach Goal</i>		512	1,519	2,031	
Make It On Their Own	1,464	295	2,269	4,028	21%
Balance that Need Affordable Housing	907	138	2,470	3,515	18%
Total Housing Options Needed	4,569	923	13,633	19,125	100%

Data Key

AHAR	Annual Homeless Assessment Report, 10/1/10 – 9/30/11
Con Plan	Substantial Amendment to Chicago's FY11 Consolidated Annual Action Plan, 5/15/12
HIC	Housing Inventory Chart, Updated 5/13/12
HMIS	Homeless Management Information System, 1/1/11 – 12/31/11
PIT	Point in Time Count: Unsheltered Count 1/25/11 and Sheltered Count 1/26/12

¹⁹ According to the evaluation of Chicago's Plan, 22% of emergency shelter households and 47% of interim housing households were living in market-rate, unsubsidized housing at the end of the evaluation. Here, we have applied those ratios to the number of households in emergency shelter and transitional housing to estimate how many households will make it out of the homeless assistance system on their own without a subsidy.

APPENDIX B: GLOSSARY OF KEY TERMS

Annual Homeless Assessment Report (AHAR): Report to the U.S. Congress on the extent and nature of homelessness.

Area Median Income (AMI): Midpoint in the family-income range for a metropolitan statistical area. In 2012, the AMI in Chicago for a family of four is \$75,800 and 15% of AMI is \$11,370.

Asset-Based Services: An approach that values the capacity, skills, knowledge, connections, and potential in individuals and works to build upon people's assets in order to move toward self-sufficiency.

Chronically Homeless: Individual or family who has been continuously homeless for a year or more, or has had at least four episodes of homelessness in the past three years, and usually has a disabling condition.

Emergency Shelter: Low-demand, site-based, short-term housing designed to remove individuals and families from the imminent danger of being on the street.

Harm Reduction: A range of policies and services designed to reduce the harmful consequences associated with drug use and other high-risk activities in order to maintain housing stability.

HEARTH Act: The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 reauthorized the McKinney-Vento Homeless Assistance Act which provides \$54 million to Chicago annually – the single largest source of funding for Chicago's homeless assistance system.

Homeless Management Information System (HMIS): Computerized data collection system designed to capture client-level information on characteristics and service needs.

Homeless Prevention: Short-term (0-3 months) and medium-term (4-18 months) financial assistance and stabilization services to prevent shelter entrance and promote housing retention.

Housing First: Rather than moving homeless individuals and families through different "levels" of housing until they are "housing ready," this strategy moves households immediately from the streets, emergency shelter, or interim housing into their own housing with wraparound services.

Housing Inventory Chart (HIC): Annually-updated collection of the number of housing units and beds dedicated to serve individuals and families experiencing homelessness.

Interim Housing: Short-term housing program that provides housing-focused services aimed at quickly re-housing persons who are homeless into appropriate permanent housing.

Mainstream Resources: Services made available to the general population including mental health services, substance use treatment, income supports, health care, education, job training, and child care.

Permanent Housing with Short-Term Supports: Short-term housing subsidy (up to two years) with wraparound supportive services. At the end of the subsidy, client can transition to assume the lease.

Permanent Supportive Housing (PSH): Long-term rental assistance with supportive services. Majority of programs serve people with disabilities, but requirements vary by subsidy source.

Point in Time Count (PIT): A HUD-required count during the last 10 days in January of all individuals and families in shelter and on the streets.

Rapid Rehousing (RRH): Short-term housing subsidy and strategic case management provided to persons who are homeless in order to reduce the length of time households spend homeless and increase the rate at which households are placed into permanent housing.

Shelter Diversion: At the point of shelter entry, providing temporary alternative housing options when appropriate in order to divert households away from homelessness.

Systems Integration: A strategy to identify barriers to resources and then develop, coordinate, and improve the availability, quality, and comprehensiveness of resources. The goal is to improve consumer outcomes through greater access to resources within and across multiple service systems.

Trauma-Informed Care: An approach to engaging people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives.



To learn how you can help us Make Homelessness History, visit our website at www.thechicagoalliance.org