

**CITY OF CHICAGO**



**REQUEST FOR INFORMATION (RFI) FOR  
FLEXIBLE HOUSING POOL**

**ISSUED BY:  
CITY OF CHICAGO DEPARTMENT OF FAMILY AND SUPPORT SERVICES**

**JANUARY 26, 2018**

**All proposals shall be submitted via email to:**

Maura McCauley,  
Director of Homelessness Prevention, Policy and Planning  
Department of Family and Support Services  
1615 W. Chicago Ave, 3<sup>rd</sup> Floor West  
Chicago, Illinois 60622

**RAHM EMANUEL  
MAYOR**

**LISA MORRISON BUTLER  
COMMISSIONER**

## REQUEST FOR INFORMATION

### **SUBJECT: Flexible Housing Pool**

**INQUIRIES:** All inquiries or questions must be directed to Maura McCauley, Director of Homeless Prevention, Policy & Planning, City of Chicago Department of Family and Support Services, (312) 746- 7447, or by email at [maura.mccauley@cityofchicago.org](mailto:maura.mccauley@cityofchicago.org).

Questions must be received no later than 4:00 p.m. Central Standard Time, Thursday, February 15, 2018. If a determination is made that a clarification or change to the RFI document is required, a written addendum will be posted on the Department of Family and Support Services website. Respondents are responsible for obtaining all RFI materials.

### **Deadline and Procedures for Submitting Responses**

Responses must be received by the City of Chicago via email no later than 5: 00 p.m. Central Standard Time on Thursday, February 22, 2018. Responses must be delivered to the following email address: [maura.mccauley@cityofchicago.org](mailto:maura.mccauley@cityofchicago.org)

**Please return this sheet with completed information below as a part of your submittal documents.**

**Responding to this RFI is not a pre-requisite for responding to any subsequent solicitations relating to this project.**

**Response submitted by:**

Organization Name	Authorized Officer Signature
Address	Title
City/State/Zip	Telephone number
Date	Email

## **Flexible Housing Pool Request for Information**

### **Introduction**

The City of Chicago (City) is pleased to issue this Request for Information (RFI) related to the development of a Flexible Housing Pool (FHP). The FHP's goals are threefold: First, the FHP aims to create more effective ways to connect individuals who have been homeless with high behavioral health and physical health needs who are frequently using crisis systems (e.g. emergency rooms, shelters or jail) to supportive housing and the services necessary to stabilize them. Second, the FHP aims to create new supportive housing. The third goal is centered around implementing these resources in a new way that increases efficiency in housing identification and placement, centralizes the housing coordination function, provides funding flexibility to overcome barriers to housing for this population and ultimately reduces the length of time to housing for FHP participants.

This Request for Information is being issued by the City as part of its continued efforts to partner with organizations and citizens across professional areas of expertise. This RFI does not provide funding nor will responding guarantee funding in the future. To this end, the City is seeking responses from a variety of organizations, including social service providers, housing providers, real-estate organizations and any others with related expertise. Responses to this RFI will inform the City's design of an initial implementation phase of the FHP model – as envisioned by City and its partners - to help between 50 and 100 individuals identified by health systems and the homeless system, referred through a coordinated process to quickly access affordable, permanent supportive housing.

The FHP seeks ways to re-orient the current crisis system response – from crisis to stability - to high utilizers of crisis systems with high behavioral health needs and frequently detained in the jail system resulting from untreated mental health and homelessness. While the initial phase will focus on testing the model with approximately 50 individuals, the project is planning a larger scale of at least 750 persons and addresses the following goals:

- Improvement in overall health of participants, increased use of appropriate preventive health services, and corresponding reduction in use of crisis care such as hospital emergency rooms
- Fewer days in Cook County jail, court, or police custody and reduced utilization of inappropriate medical services
- Reduced utilization of homeless crisis response system
- Increase stability and length of residency in supportive housing or other permanent housing

We are seeking input from interested parties on strategies to:

1. Administer a coordinated housing placement approach that provides access to rental housing in less than two weeks. The Flexible Housing Pool envisions a housing subsidy administrator that will build and maintain a quality housing inventory with 50 units coming online in mid-late 2018, with plans to scale to 750 units by 2020. Housing subsidy administration responsibilities can be found in Attachment A.
2. Deliver Housing Tenancy and Pre-Tenancy Supports (Defined in Attachment B) that focus on engagement into housing, leasing process, move-in, housing retention, and coordination with other medically necessary services as well as employment and income. The FHP envisions that provision of these services can be done directly by the housing subsidy administrator, through sub-contract relationships managed by the housing subsidy administrator, or provided by qualified agencies that are managed and funded directly from other sources. Housing Tenancy and Pre-tenancy supports must be delivered to all individuals referred to the program along with ensuring completion of annual housing plans, and connection to care coordination and clinical services. All references in this document to tenancy supports include both Housing Tenancy and Pre-tenancy Supports.
3. Program Management focused on streamlining leasing process for tenants and landlords, with responsibilities including paying rent to landlords, data collection, reporting, and ensuring services, tenancy supports and referral systems collaborate and function effectively as overseen by the City and other community partners the City may select. The FHP envisions that existing data collection systems may not be sufficient to track and report desired outcomes and therefore multiple systems may be used, data collaborations may be needed and new data tracking systems may need to be created.
4. Research and evaluate the intervention and outcomes with a third party, external evaluator. In other communities that have pursued the FHP or similar model, evaluation of outcomes including changes in costs associated with services has been a key factor to increase investments. The FHP envisions developing the evaluation in the early phase of the implementation to have concurrent research conducted with FHP participant records.
5. Other innovative uses of the FHP that would advance the City's goals.

### **The Problem**

It is well documented that supportive housing – which offers both permanent affordable housing and linkages to services for physical and mental health, substance abuse and other issues– can reduce long-term spending on emergency services such as shelter, emergency hospital services, police, court and jail services, and emergency medical care, while improving outcomes for chronically homeless individuals. An evaluation of the Los Angeles County Department of Health- Housing for Health

program shows that for every dollar invested in the program saved \$1.20 in public spending. Prior to housing, program participants received public services costing \$38,146 person, which decreased to \$15,358 after one year in supportive housing<sup>1</sup>. Other findings concluded that supportive housing interventions reduced ER visits by 57% and inpatient days by 75%<sup>2</sup>. This not only represents a shift in costs, but a shift in where individuals are accessing care and reducing the burden on the community's crisis system of care.

Despite mounting evidence of effectiveness, local governments often have trouble securing the necessary investments for supportive housing. In addition to insufficient affordable housing inventory, individuals with complex needs often experience additional barriers to accessing supportive housing, including long waitlists, difficulty navigating the system, and ineligibility under HUD guidelines. Individuals experiencing homelessness in Chicago average a 110-day process from the time the individual/household is matched to a housing provider to when they are housed<sup>3</sup>. This RFI is seeking input on a new way to address this problem.

### **Proposed Program**

The City of Chicago, in consultation with public and private hospitals, not-for-profit leaders, community partners and other governmental entities, is working to design a new model for funding supportive housing that better meets the needs of individuals who frequently use crisis services and who have high behavioral health needs, high rates of detention in jail, and are experiencing homelessness or long-term housing instability. The FHP will provide funding for housing subsidies as well as housing tenancy supports when there is no other alternative payer (i.e. Medicaid) for these supports. This new initiative provides an opportunity for health care investment in supportive housing and prioritization of those resources for the target population. Through the RFI, the City invites feedback on the proposed program as well as new ideas on how to structure or approach this program.

To help establish and test initial processes, procedures, data collection methods, and outcomes for a new FHP model, an initial phase is being planned to serve approximately 50 individuals. This phase, the focus of the RFI, will refine the model as it is brought to scale in subsequent phases. The FHP baseline goal is to create 750 supportive housing units of operating subsidy by 2020. This volume of units of

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<sup>1</sup> [https://www.rand.org/content/dam/rand/pubs/research\\_briefs/RB10000/RB10000/RAND\\_RB10000.pdf](https://www.rand.org/content/dam/rand/pubs/research_briefs/RB10000/RB10000/RAND_RB10000.pdf)

<sup>2</sup> <https://corpsh1.sharepoint.com/programdelivery/central/il/ProjectsOther/Forms/AllItems.aspx?id=%2Fprogramdelivery%2Fcentral%2Fil%2FProjectsOther%2Fflexible%20housing%20pool%2Fnational%20research%2FHFH%20Progress%20Report%202013%2D2017%2Epdf&parent=%2Fprogramdelivery%2Fcentral%2Fil%2FProjectsOther%2Fflexible%20housing%20pool%2Fnational%20research>

<sup>3</sup> <https://www.allchicago.org/dashboard-to-end-homelessness>

housing is a scale that is projected to significantly impact and shift the level of care from the crisis response system to this subpopulation and result in cost shifting that can sustain future investments from health, emergency services, and criminal justice.

The initial phase of the FHP will be funded through a grant from the City of Chicago. In this initial phase all housing subsidies will be for units in the City and care coordination and clinical services are anticipated to be provided through partnership with Cook County Health and Hospitals System (CCHHS) and CountyCare. CCHHS and CountyCare are anticipated to be responsible for needed clinical services including care coordination, primary care, behavioral health, and mental health services such as ACT. CCHHS is anticipated to identify members of the target population for engagement in the initial phase.

As the project is expected to expand, FHP fund growth is anticipated to be through increased public funds as well as private funds through foundation, hospital, and managed care commitments. As funding sources grow to include other sources, subsidies may be available for housing throughout Cook County from sources other than the City.

## **Key Program Elements**

### ***Target Population***

The flexible housing pool will target high utilizers of crisis services who have high behavioral health needs, high rates of detention in jail, and are experiencing homelessness. Based on data and analysis from Collaborative Research Unit at Cook County Health and Hospitals System (CCHHS), each year since 2015, over 1000 detainees with serious mental illness risk and co-occurring substance use disorder were identified as homeless during jail intake<sup>4</sup>.

. As the project increases in scale, the target population may be adjusted in order to best meet community needs. For the initial phase of the FHP, the program will identify individuals in the target population that reside in the City and meet eligibility criteria as informed by health, behavioral health, and criminal justice data, after which a collaborative assessment and referral process will occur. Through the real-time referral and data review it may be determined the person is involved in other health and housing systems. Eligible individuals will be confirmed through an efficient coordinated assessment and referral process.

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<sup>4</sup> Collaborative Research Unit, CCHHS, 26 January 2018

### ***Administration and Systems Collaboration***

The FHP requires a highly collaborative environment across government and nongovernmental entities. Administratively, an organization providing subsidy administration and tenancy supports will need to work closely with multi-sector partners as overseen by the City and other community partners that may become part of a collective oversight structure. Data collection and reporting will be crucial to the project's success. Programmatically, the organization will need to work in collaboration with the referral system and services model of clinical services and care coordination that is anticipated to be managed through CCHHS and other health systems as identified.

### ***Evaluation***

FHP participants and partners will be required to participate in an impact and cost-benefit evaluation conducted by an independent research partner. As part of this evaluation, partners, and participants will work with the research team to obtain research consent forms and participate in surveys associated with the evaluation as well as maintain records and documentation that support and evaluation.

### ***Bridge and Permanent Supportive Housing***

This initiative seeks to identify and provide affordable, permanent supportive housing to the target population. Eligibility is intended to reach many of our most vulnerable community members and those who may not be eligible for traditional HUD-funded programs. Key aspects of this model include determining specific ways to increase flexibility in how funds are used, increased efficiency in ensuring individuals are matched to quality housing, improved access to tenancy supports, which may result in improved connection and retention in terms of care coordination and clinical services. This new model is not intended to replicate existing Permanent Supportive Housing models in Chicago, as defined in Attachment C. The City is interested in models building on and inspired by the success of the Los Angeles County Flexible Housing Subsidy Pool.<sup>5</sup>

The FHP model includes subsidies as well as housing tenancy supports and is likely going to include bridge units during a brief waiting period until a long term leased home is secured. The housing subsidy administrator will be responsible for securing bridge units as well. Housing may be in a single site or scattered-site models<sup>6</sup>. We are particularly interested in:

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<sup>5</sup> [http://file.lacounty.gov/SDSInter/dhs/218377\\_FHSP082614\(bleed--screenview\).pdf](http://file.lacounty.gov/SDSInter/dhs/218377_FHSP082614(bleed--screenview).pdf)

<sup>6</sup> <http://www.csh.org/wp-content/uploads/2015/05/integrated-models-matrix-final.pdf>

1. Existing properties that are currently serving the target population (or a similar population) or where the property manager and owner are willing to set aside units to serve the target population.
2. Other existing affordable housing units that could be linked to supportive services in the community.
3. Units coming online in 2018 designed to serve the target (or a similar) population or where the property manager and owner are willing to set aside units to serve the target population.
4. Using housing that meets the definition of Permanent Supportive Housing (Defined in Attachment C).
5. Use of best practices in housing location (Defined in Attachment C)

### **Key Model Components**

The City has identified the following best practices (Defined in Attachment C), including:

- Housing First
- Harm Reduction
- Person-Centered Care
- Assertive outreach and engagement
- Quality Housing<sup>7</sup>
- Landlord Engagement and Retention

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<sup>7</sup>[http://www.csh.org/wpcontent/uploads/2013/07/CSH\\_Dimensions\\_of\\_Quality\\_Supportive\\_Housing\\_guidebook.pdf](http://www.csh.org/wpcontent/uploads/2013/07/CSH_Dimensions_of_Quality_Supportive_Housing_guidebook.pdf)



## **Request for Information Response Guidelines**

### ***RFI Purpose***

The purpose of this RFI is to gather information to inform a subsequent Request for Proposals as well as encourage program design considerations for the City. While the program concept is outlined above, the City is interested in feedback that may inform program elements and operations. Respondents to the RFI are not required to answer all questions, but may instead determine the information it is most equipped to provide. Additionally, respondents may submit information that represents expertise of multiple partners who may represent similar or distinct roles outlined in this RFI. This document is not intended as a formal offering for the award of a contract or participation in any future solicitation.

The City reserves the right, at its sole discretion, to withdraw the RFI as well as to use the ideas or proposals submitted in any manner deemed to be in the best interest of the City or undertaking the prescribed work in a manner other than that which is set forth herein. The issuer may contact respondents for clarification on the RFI submission.

### ***Eligible Respondents***

The City of Chicago seeks responses from a variety of organizations, including social service providers, housing providers, real-estate organizations and others with related expertise. Organizations may respond individually or as part of a team.

### ***Submission Instructions & Timeline***

As stated previously, the City is seeking input and feedback from interested parties on strategies, capacities, and considerations for all components detailed above that would inform project planning and a Request for Proposals for the FHP. Respondents are not required to answer all questions below. **Please respond to questions/elements that are appropriate and on which your organization has expertise or feedback. Respondents may choose to limit the focus of their feedback to specific questions or sections.** The City is requesting feedback regarding potential roles and partnerships, organizational capacity, financial capacity, and fiscal and performance management.

Submissions can be made using any method or structure the organization prefers. Submissions will be reviewed by the City and may be shared with not-for-profit leaders, community partners and other governmental entities for the purpose of consultation on program design.

Responses to this RFI are due no later than 5 pm Thursday, February 22<sup>nd</sup> via email to Maura McCauley, [maura.mccauley@cityofchicago.org](mailto:maura.mccauley@cityofchicago.org). Any questions on the RFI can be directed to: Maura McCauley, [maura.mccauley@cityofchicago.org](mailto:maura.mccauley@cityofchicago.org) or 312.746.7447.

**An information session about this RFI will be held on Tuesday, February 6<sup>th</sup> from 9:30 am to 11:30 am. The information session will be held at 1615 W. Chicago Avenue, Conference Room 249A.**

### ***Submission Questions***

Given the FHP framework provided above, the City is interested in responses to the following questions:

#### **1. Organizational Background (All Respondents)**

- a. Please provide a brief summary of your organization's background and expertise as it relates to the FHP.

#### **2. Framework Feedback**

- a. Given the framework provided above, do you think the FHP will achieve the stated goals? What improvements or changes would you suggest?
- b. As the project expands and scales up, are there any additional target populations you would recommend, and why?

#### **3. Roles and Partnership**

- a. What kinds of partnerships do you think would be necessary to design a successful FHP? What barriers might exist to creating such partnerships? What potential solutions or incentives could be offered to overcome those barriers? Consider the geographic needs of the long-term program as it expands.
- b. The City is interested in innovative practices and collaboration with non-traditional partners. What innovative partners would you recommend? What organizational skills and expertise are necessary to implement a successful FHP? What actions could the city take to encourage or facilitate innovation with non-traditional partners?
- c. How can the City use the FHP to align with [Healthy Chicago 2.0](#) and advance health equity goals? How can the program ensure that community areas and populations with the greatest needs are a focus of FHP?
- d. What innovative ways would you suggest the City and partners ensure people with lived experience have agency and leadership in this program?
- e. Cook County Health Systems is anticipated to use its data to help identify FHP participants and also provide clinical services including care coordination, primary care, behavioral health, and mental health services such as ACT. What are your recommendations to ensure effective connections and referrals to services eligible individuals are identified? What best practices would you recommend to ensure individuals are quickly and effectively connected to the tenancy support provider? How should the referral be initiated? What information should be communicated? How can the tenancy support provider ensure good communication with the clinical team and

ensure the tenant is continuously engaged in necessary services before and after they stably housed?

- f. If one organization were not providing both tenancy supports and subsidy administration, what kind of partnerships would you recommend? What would be potential challenges and strengths to this approach?

#### **4. Capacity**

##### **a. Organizational Capacity**

1. Does one organization have the capacity to provide subsidy administration and tenancy supports in all geographic areas of Chicago (in the initial phase solely within Chicago, and as anticipated eventually outside City boundaries with non-City funds)? What are potential challenges and strengths of one organization providing both?
2. What best practices would you recommend to ensure the program has a robust housing inventory and effective landlord engagement strategies?
3. What best practices would you recommend in order to eliminate barriers to tenants accessing apartments quickly? What practices will reduce and eliminate wait times and other barriers? What would you recommend in order to create an efficient and effective inspection process? What recommendations do you have for designing a model that meets geographic preferences of participants in tight housing markets?
4. What type of staffing and roles would be necessary to implement this model? Why?
5. Are there any capacity building needs in order to implement the FHP? This might be data infrastructure, customer relationship management software, or accounting and financial supports. Include type of support needed as well as cost required to build capacity or resources in the areas you identify.

##### **b. Financial Capacity**

1. What are the benefits and challenges to leveraging Medicaid resources to finance tenancy supports? Are there any other funding streams that can be used to finance tenancy services?
2. Given the description of services provided in this RFI, what factors would influence how you calculate compensation necessary to provide housing subsidy administration services?
3. Are there any mitigating factors that could impact rate reasonableness, such as geography? Can increased economic efficiency be achieved through scaling up? At what point?

**c. Fiscal and Performance Management**

1. What capacity and infrastructure will be needed to track outcomes, analyze program performance, and measure results? Will there be capacity building needs? As an example, FHP system outcomes that may be monitored may include:

Stable tenancy
Emergency Room visit
Hospitalization
Hospital bed days
Ambulance trip
Detox visit
Jail bed day
Parole
Added: Number of arrests
Added: Outpatient encounters
Added: Nursing home/IMD days
Streets and Sanitation
Police, Fire, Ambulance
Emergency shelter days

## Attachment A

<b>Housing Subsidy Administrator Functions</b>	
<b>Function</b>	<b>Description</b>
Landlord Engagement	This includes landlord recruitment and retention, as well as capacity to engage new landlords using creative and flexible approaches in Chicago and all of Cook County.
Master Leasing	Capacity to recruit and manage landlords with potential for master leasing multiple units within one property or location and subleasing to program tenants
Scattered Site Leasing	Recruit landlords and manage subsidy administration responsibilities for units in diverse areas matching tenant needs and choice. Must be able to manage oversight of scattered site leasing throughout the city of Chicago and Cook County.
Subleasing Management	Sublease to tenants facing barriers to traditional leasing arrangements
Housing portfolio management	Ensure monthly rental subsidies are paid to owners/operators in a timely fashion within lease parameters. Responsible for managing deposit payments or other move in costs.
Process housing applications	Complete intake and application process for potential tenants, including collecting any required documentation such as proof of income
Data collection and reporting	Ensure reporting on housing retention, stability, and services provided are provided on a monthly basis. Reporting capacity needs to include ability to refine data by referring source
24/7 crisis availability for landlord issues	Provision of a crisis line available to landlords and property managers in case of tenant emergency
Housing inspection	Ensuring quality standards for housing are met
Managing additional housing costs and activities	Manage and distribute funds for additional housing costs including move in, deposits, and furniture

## Attachment B

Pre-tenancy Supports	
Service	Description
Conducting a screening and assessment of housing preferences/barriers related to successful tenancy	This involves working with an individual to assess the type of housing, location and other factors that they prefer and could meet their needs. This also identifies possible housing transition and retention barriers, such as accessibility needs, criminal background, ability to pay rent, and needed supports.
Developing an individualized housing support plan based on assessment	The plan should identify the types of housing-related services and supports an individual will need based on the assessment, and include short- and long-term measurable goals, interventions to address identified barriers/needs, and roles and responsibilities for the tenant and support staff.
Assisting with rent subsidy application/certification and housing application processes	This includes 1) assisting an individual with obtaining, completing and submitting applications to secure rental assistance and apply for housing options (e.g. apartment complexes), 2) collecting required documentation that may be needed to apply and be eligible for housing, including personal identification, proof of income, and credit history, 3) requesting a reasonable accommodation related to one's disability. For example, the need for a service pet in a complex that does not permit pets, or requesting a first floor apartment due to mobility issues.
Assisting with housing search process	This includes assisting the individual to search for housing, including reviews of housing resources (e.g. newspapers, housing search databases) and accompanying individual to visit potential housing options and make choices among options.
Identifying resources to cover start-up expenses, moving costs and other one-time expenses	Includes assistance identify various types of expenses related to housing move-in and start up, such as security and utility deposits, adaptive aides, environmental modifications, moving company costs, furniture/furnishings, and household supplies.
Ensuring housing unit is safe and ready for move in	This includes conducting or facilitating an inspection to ensure that the housing meets federal, state or other rental assistance and related quality standards (e.g. HUD HQS).
Assisting in arranging for and supporting the details of move-in	This includes assisting the individual to schedule activities such as the moving company, turning on utilities, change of address, and purchasing furniture/furnishings and household supplies.
Developing an individualized housing support crisis plan	This includes identifying emergent situations that could jeopardize housing, appropriate intervention services to respond early to these, and related roles and responsibilities.

Excerpt of Document from Centers for Medicare & Medicaid Services Technical Assistance on Creating a Housing Tenancy Support in Medicaid<sup>8</sup>

<b>Housing Tenancy Sustaining Supports</b>	
<b>Service</b>	<b>Description</b>
Providing early identification/intervention for behaviors that may jeopardize housing	This may include working with the individual to manage and reduce behaviors that jeopardize housing, such as late rental payment or other lease violations such as use of illicit substances, excessive noise, problems with cleanliness, exacerbation of mental health symptoms, etc. and providing or coordinating necessary crisis or other interventions as necessary.
Education/training on the role, rights and responsibilities of the tenant and landlord	This includes periodically reviewing lease agreements and related documents that establish the rights and responsibilities of the tenant and landlord and ongoing training regarding the consequences of not meeting lease obligations.
Coaching on developing/maintaining relationships with landlords/property managers	This includes coaching and assisting an individual to self-advocate with the landlord/property manager to maintain positive relationships and foster successful tenancy.
Assisting in resolving disputes with landlords and/or neighbors	This includes coaching and assisting an individual to manage/resolve disputes with landlords and/or neighbors, or at times, advocating directly with the landlord on the individual's behalf, to address potential lease compliance issues (e.g. complaints from neighbors, late rent payments) to reduce the risk of eviction or other adverse action.
Advocacy/linkage with community resources to prevent eviction	This may include assisting the individual to engage legal services or applying for resources to pay rent or utility arrears to prevent eviction.
Assisting with the housing recertification process	This includes assisting an individual to identify and secure necessary paperwork for completing a housing recertification, and assistance in completing applications, in a timely manner so as not to jeopardize one's housing.
Coordinating with tenant to review/update/modify housing support and crisis plan	This includes reviewing and updating the housing and crisis support plans on a regular basis to reflect current needs and address existing or recurring housing retention barriers.
Continuing training on being a good tenant and lease compliance	This includes ongoing support, coaching, motivational interviewing, and behavioral interventions to support an individual in being a good tenant. This also includes ongoing support with activities related to household management, such as training on IADLs, maintaining a clean apartment, minimizing fire and other safety hazards, money management, and paying rent and utilities.
Housing Plan Completion	A housing plan includes an housing specific assessment, reviewing all options for affordable housing, ensuring applications are completed, and

<sup>8</sup> Additional information on CMS technical assistance and Housing Tenancy Supports can be found <https://www.medicaid.gov/state-resource-center/innovation-accelerator-program/iap-downloads/track-1-sht-slides.pdf> [https://www.illinois.gov/hfs/SiteCollectionDocuments/1115%20Waiver%20for%20CMS%20Submission\\_final.pdf](https://www.illinois.gov/hfs/SiteCollectionDocuments/1115%20Waiver%20for%20CMS%20Submission_final.pdf)

	regular updating to maximize opportunities to connect with traditional subsidy programs or market rate housing when appropriate
Connection to Services and ongoing communication for service planning	Ensure successful ongoing connection to clinical care team and care coordination services, and ongoing communication for service planning and coordination



## Attachment C

Definitions	
Crisis Services	Emergency shelter, emergency room, courts and jail, police, crisis mental health services, EMT and ambulance
Target Population	Individuals who frequently use crisis services, have high behavioral health needs, have high rates of detention in jail, and are experiencing homelessness
Permanent Supportive Housing	<ul style="list-style-type: none"> <li>• Housing that is affordable, meaning the tenant household ideally pays no more than 30% of their income toward rent that can be located in a single site or scattered in multiple locations in the community. The fund will be used to pay for the subsidy.</li> <li>• Housing that provides tenant households with a lease or sublease identical to non-supportive housing — with no limits on length of tenancy, as long as lease terms and conditions are met.</li> <li>• Housing and tenancy supports that proactively engages residents in a flexible and comprehensive array of supportive services, without requiring participation in services as a condition of ongoing tenancy. A crucial component of tenancy supports is successfully linking individuals to needed clinical services and care coordination.</li> </ul>
Housing First	The goal of "housing first" is to immediately house people who are homeless. Housing comes first no matter what is going on in one's life, and the housing is flexible and independent so that people get housed easily and stay housed. Housing first can be contrasted with a continuum of housing "readiness," which typically subordinates access to permanent housing to other requirements. Housing first is a low-barrier entrance process that supports moving persons quickly into housing of their choice from settings such as the streets or shelters, without preconditions of treatment acceptance or compliance.
Harm Reduction	A model of substance-use intervention that focuses on helping people who use substances to better manage their use and reduce the harmful consequences to themselves and others, including actively working to prevent evictions. In conjunction with housing first and supportive housing, using the harm reduction philosophy means that individuals do not have to sober to be eligible to enter housing and are not evicted solely for a failure to maintain sobriety.
Person-Centered Care	Where services are voluntary, customized and comprehensive, reflecting the individual needs of tenants, and tenants have meaningful opportunities to engage in the community.
Assertive outreach and engagement	Programs conduct assertive outreach to engage and recruit members of the target population. Programs will engage target population members and offer them the opportunity to obtain affordable housing along with health and social services.
Quality Supportive Housing	Supportive Housing at the highest level of quality as outlined in the CSH Dimensions of Quality, found at <a href="http://www.csh.org/wpcontent/uploads/2013/07/CSH_Dimensions_of_Quality_Supportiv">http://www.csh.org/wpcontent/uploads/2013/07/CSH_Dimensions_of_Quality_Supportiv</a>

	<a href="#">e Housing guidebook.pdf</a>
Landlord Engagement and Retention	Program ensures the highest level of responsiveness, engagement and accountability with community landlords, including prompt payment, excellent customer service, and ensuring 24/7 response to the emergency phone line for landlords.
Housing Location Best Practices	<ul style="list-style-type: none"> <li>• Landlord partnerships with flexible tenant screening criteria</li> <li>• Promote Fair Housing Practices and Reasonable Accommodation requests during the housing application process</li> <li>• Provide a standard Memorandum of Understanding to participating landlords outlining roles and responsibilities of the housing subsidy administrator and relevant payment request protocols for FHP</li> <li>• Secure Master-Leasing arrangements where housing subsidy administrator manages a multi-unit, multi-year lease to then manage subleases with tenants</li> <li>• Provide appropriate unit selection process that balances tenant choice and timely housing placement</li> <li>• Partner with larger real estate companies that have units available in a portfolio that can be made available to the program</li> <li>• Locating housing that meets quality standards</li> <li>• Develop a streamlined housing location and application process that mirrors the private market as closely as possible for applicants and landlords.</li> </ul>