

Coordinated Entry Leadership Team Agenda

August 17, 2020

- I. Welcome and Introductions
- II. Coordinated Entry Leadership, Stephanie Sideman (CSH)
 - a. Please see attached roster of nominated leaders for the CE Leadership Team
 - i. The two people who stepped down from the CE LT represented housing (Pam McKenzie with Mercy Housing) and outreach (Nicole Richardson with Thresholds)
 - b. CoC Line of Action Leadership
- III. CoC Related Updates, Beth Horwitz (All Chicago) and Karen Kowal (All Chicago)
 - a. Data Dashboard
 - b. Expedited Housing Initiative and Accelerated Moving Events
 - c. Other Business
- IV. Prioritization Updates Bridget Doveatt (All Chicago), Ben Darby (Center for Housing and Health)
 - a. The expanded prioritization plan for survivors of domestic violence and/or human trafficking was implemented on August 3, 2020
 - b. Prioritization Data
 - i. Please see attached on pages 2 and 3
 - c. Activating Short-Term Workgroups
 - i. CE Transfer Workgroup
 - ii. CE Housing Assessment Workgroup
 1. Determining assessment strategy with prioritized households
 2. HUD Data Standards input
- V. Preview of the Collaborative of Child Homelessness Recommendation, Laura Bass (Facing Forward)
 - a. Please see the attached draft proposal
- VI. Leadership Team Feedback/Questions
- VII. Adjourn

Coordinated Entry Temporary Prioritization Data

Prioritization Overview

- Households at High Risk for Serious Illness due to COVID-19 and Tested Negative, as recommended by the Chicago Department of Public Health
- 10% Set-Aside for Youth (Ages 18-24, with or without children)
- 10% Set-Aside for Unsheltered Households
- 20% Set-Aside for Families

Matching Protocols

People at high risk of serious illness due to COVID-19 and tested negative are matched from the shielding hotel called Hotel 166. People not in this category including Veterans, families with children, and youth are matched from the One List or by name registry of people experiencing homelessness based on their length of homelessness with an unsheltered status as the first tie-breaker.

Demographics of Matched Participants

Week	Number of Matches
May 11 – 15	60
May 18-22	40
May 25-29	58
June 1 – 5	38
June 8 -12	100
June 15-19	56
June 22 – 26	40
June 29 – July 3	51
July 6 – July 10	64
July 12- July 17	57
July 20 – July 24	31
July 27 – July 31	47
August 3 – August 7	23
August 10 - 14	65
Total	730

Race of Matched Participants	Number	Percentage
American Indian or Alaska Native	5	Less than 1%
Asian	3	Less than 1%
Black (93)	551	75%
Native Hawaiian or Other Pacific Islander	2	Less than 1%
White	141	19%
Did Not Answer	28	4%

Age of Matched Participants	Number	Percentage
18-24	119	16%
25-59	336	46%
60 and Above	270	37%

Gender of Matched Participants	Number	Percentage
Female	232	32%
Male	477	65%
Gender Fluid	4	Less than 1%
Transgender	11	1.5%

Veteran Status	Number	Percentage
Non-Veteran	540	74%
Veteran	185	25%

Set-Asides within CE Temporary Prioritization Plan

Set-Aside Population	Set-Aside %	Actual Number	Actual %
Youth	10%	119	16%
Families	20%	70	*10%
Unsheltered	10%	271	37%

*The number of families matched reflects the number of openings that could accommodate families during this timeframe.

Hotel 166 Housing Update

As of August 19, there are 66 people at Hotel 166:

- 60 have a housing plan
- 57 households are currently matched to CE housing providers
- 3 have a housing plan outside of CE
- Of the 6 without housing plans, 5 people were matched and require a rematch
 - o Of the 6 without housing plans, 5 people are experiencing chronic homelessness
- 71 moved out of Hotel 166 into housing
 - o 35 to RRH properties through EHI
 - o 18 to PSH properties
 - o 4 to other affordable housing
 - o 4 to CHA properties
 - o 6 to a family member's or friend's home
 - o 4 to Front Door Diversion

DRAFT Maternal and Child Health and Housing Proposal to the Chicago Continuum of Care

From: ICAAP, Facing Forward to End Homelessness, The Ounce of Prevention

Presented to: Coordinated Entry Leadership Team

August 25, 2020

Proposals:

- To create a set aside of XX Family Rapid Rehousing slots for households where someone is pregnant or has recently delivered a child.
- To create a system to track how many individuals are experiencing homelessness while pregnant.

Purpose:

- Homelessness and housing instability during pregnancy contributes to poor parent and child health outcomes, including premature births, low birth weight, intensive care admissions, and ventilator use (see Critical Facts handout from ICAAP attached). Pregnant people experiencing homelessness (with or without other children or household members) should be a priority population for housing support. Without a system to track data related to pregnancy and homelessness, the scope of the problem is unclear.

Eligibility:

- Households of any composition, experiencing literal homelessness (in emergency shelter or living in a place not meant for human habitation), where a household member is pregnant or has recently delivered a child.

Services:

- A short- or medium-term rental assistance through Rapid Rehousing
- Assistance in locating housing
- Housing case management, including the development of a plan for long-term housing stability
- Referral to Early Childhood Home Visiting Services via a partner agency
- Additional supports provided by non-CoC partners
- Outcome reporting including follow up after rental assistance has ended

Description:

- Rapid Rehousing Assistance will provide families with a safe and stable place to live during pregnancy and after delivery, facilitate better access to pre-natal and post-partum health care, and will reduce the negative impact of homelessness and unstable housing on pregnant women and infants.
- Rapid Rehousing Case Managers will work with families to create a plan for long-term housing stability, which may include referrals to mainstream affordable housing, supports to increase income, or safe and stable shared housing arrangements.

- Partners from outside the CoC will provide additional resources to ensure that families are connected to appropriate supports for health care and early childhood services.
- Better tracking the # of pregnant people experiencing homelessness will allow the CoC and other stakeholders to better understand the scale of the problem.