

CES Prioritization Workgroup

April 22nd, 2022

Welcome & Introductions

- Name
- Organization
- Pronouns
- Stakeholder group you are representing
- Ice Breaker: 1st job/volunteer position you ever held.



CES Prioritization Workgroup Composition

- Representation from the following groups
 - The 8 CoC Affinity Groups
 - CE Leads (CSH and The Center for Housing & Health)
 - CES Leadership Team
 - CES Racial Equity Workgroup
 - CoC HMIS Data Lead
 - CES Skilled Assessors
 - CES Call Center Representation
 - Chicago CoC Lived Experience Commission
 - Chicago CoC Youth Advisory Board
 - Chicago Coalition for the Homeless
 - Other Sector Stakeholders*
 - Healthcare/Medical Provider
- * The CES Prioritization Workgroup will determine other sector stakeholders want to be involved.

CES Prioritization Workgroup

Value Statement

- The Chicago Continuum of Care needs to make a very difficult decision due to not having enough housing inventory to support all those who are experiencing homelessness. We look to work together to make the best possible decision for our CoC. We also look to have a workgroup that is inclusive, transparent, and accountable to our goal.

Goal

- The Workgroup will decide if we want to continue to utilize our current (temporary) plan, to go back to our Pre-Covid Prioritization, or create a new one moving forward.

Workgroup Expectations

Understand that there is no perfect solution!

Respect the perspective of our stakeholders

Transparency

- Open meetings to the Chicago CoC community
- Meetings are recorded
- Meeting will be posted
 - CSH CES & All Chicago website
 - Other?

Schedule time to review materials

Schedule time to communicate with your stakeholder groups

Others?

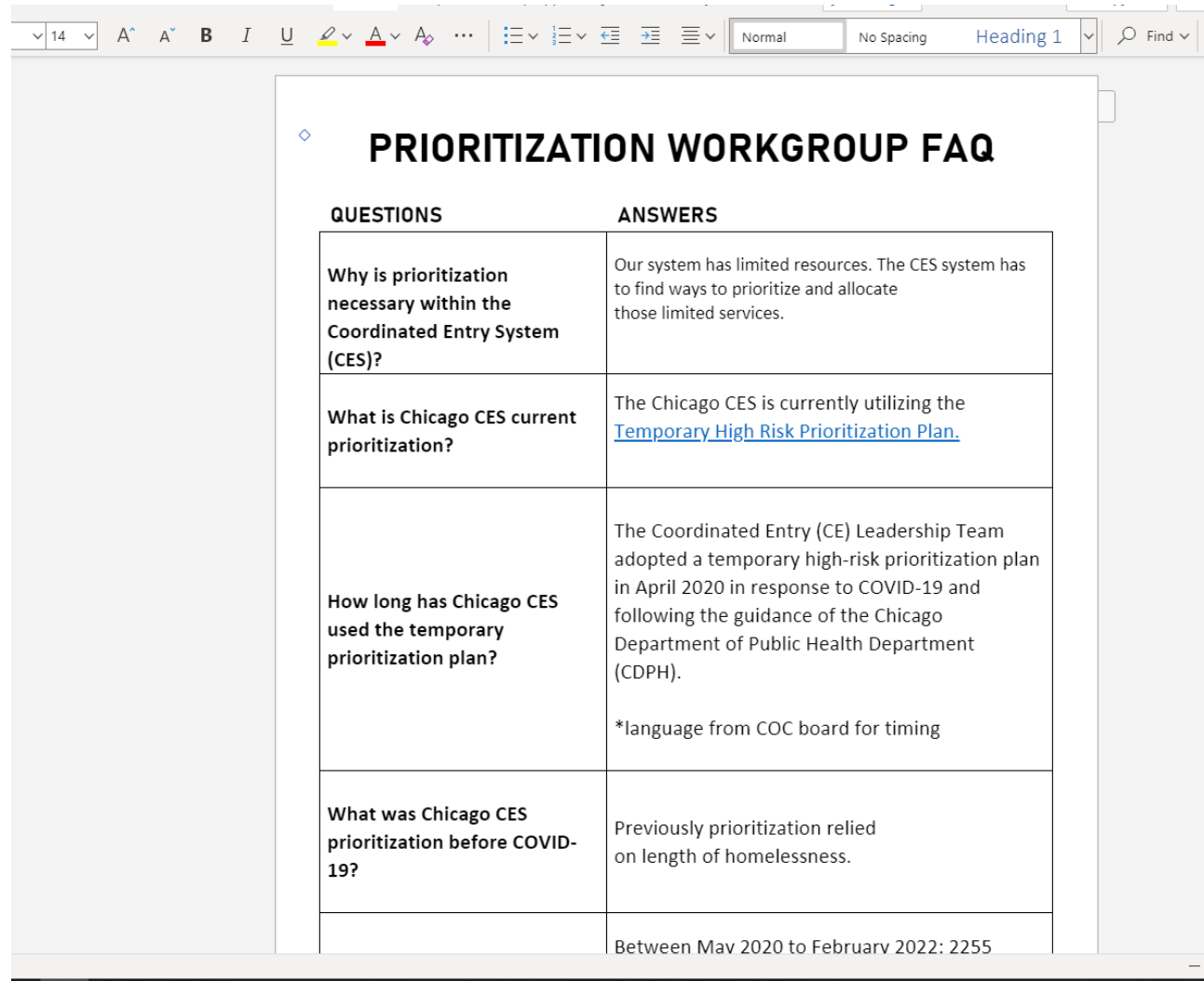
Other Stakeholders to include:

Chicago Department of Public Health?

Healthcare/Medical Provider?



Frequently Asked Questions (FAQ) One Pager



QUESTIONS	ANSWERS
Why is prioritization necessary within the Coordinated Entry System (CES)?	Our system has limited resources. The CES system has to find ways to prioritize and allocate those limited services.
What is Chicago CES current prioritization?	The Chicago CES is currently utilizing the Temporary High Risk Prioritization Plan .
How long has Chicago CES used the temporary prioritization plan?	<p>The Coordinated Entry (CE) Leadership Team adopted a temporary high-risk prioritization plan in April 2020 in response to COVID-19 and following the guidance of the Chicago Department of Public Health Department (CDPH).</p> <p>*language from COC board for timing</p>
What was Chicago CES prioritization before COVID-19?	Previously prioritization relied on length of homelessness.
	Between May 2020 to February 2022: 2255

"Pre-Work"

CES and CoC work that focused on Prioritization and our tool
in Chicago



HUD's Racial Equity Demonstration

- [HUD Racial Equity Demo - CSH](#)
- HUD's Goal
 - In partnership with BIPOC and people with lived experience, 8 CoCs nationwide will identify system disparities through local data, agree upon focus area(s) and engage in a rapid iteration improvement project to test racially equitable assessment questions and related Coordinated Entry processes.
- Chicago Racial Equity Goals
 - Replace the Single Individual Vulnerability Index
 - Improve Housing Outcomes for Justice-Involved People
- Work conducted 2020

HUD's Racial Equity Demonstration

IF:

Racial Equity Demo Project Theory of Change

- Communities use a racial equity lens to examine their local data and context to identify racial disproportionalities and map biases in their systems;
- Communities bring BIPOC and those with lived (current and past) experience of homelessness to the design table;
- Communities engage in an improvement project cycle to test racially equitable assessment questions and related processes;
- Communities engage in trainings in cultural humility and implicit bias made explicit.

HUD's Racial Equity Demonstration

Racial Equity Demo Project Theory of Change

THEN:

Communities will:

- Develop more racially equitable assessment & prioritization product = questions + processes related to their specific homeless disproportionalities and local conditions;
- Shift coordinated entry systems in the direction of racial equity and supporting racial equity goals;
- Lay the groundwork for future ongoing racial equity work and understand what skills (training) and design structures are necessary to make racially equitable changes;
- Learn how to interrogate their entire homeless services system in a way that leads to dismantling systemic racism

HUD's Racial Equity Demonstration Test Questions

- 1. Have you ever in your life, spent any amount of time in a juvenile or adult correctional facility, jail, prison, or detention center?
- 2. Growing up, did your family experience housing instability such as frequently moving due to financial reasons, living with other families, relatives, (also known as doubling up), living in a shelter, living in nightly or monthly rentals, or anything like that?
- 3. Have you ever been discriminated against because of your sexual orientation or gender identity?
- 4. Do you identify as a Black, Indigenous/Native, and/or a Person of Color who has been discriminated against because of your race or ethnicity?
- 5. Have you experienced violence in a home where you lived or seen others experience violence in a home where you lived?
Violence can be physical or emotional
- 6. Are you currently being hurt or experiencing violence on the streets or in a shelter or attempting to avoid people who have hurt you since experiencing homelessness?

Acuity Workgroup

- Work in 2020
- Value Statement
 - Vulnerability is defined as the state of being exposed to the possibility of harm or trauma. Therefore, everyone who is experiencing homelessness or who is at risk of homelessness is vulnerable. The specific kind of harms are numerous, interrelated, and serious and occur at both the individual and system level.
 - Furthermore, housing is a human right: decent, safe, and sanitary housing is one of the fundamental provisions necessary for wellbeing. Operating on this belief and the above definition of vulnerability, the below considerations need to be taken into account in the overall system prioritization and the creation of a new vulnerability tool.
 - 1. The causes and effects of homelessness are complex and difficult to disentangle. This includes medical vulnerability, as well as social and economic factors that impact overall wellbeing, past traumas, and experiences that promote the potential for a person to experience further traumas.
 - 2. Certain groups, particularly the Black/African American community, have been intentionally marginalized and oppressed and have experienced traumas in the past that greatly affect the likelihood of that population experiencing continued trauma. Furthermore, these traumas have, in many cases, been state sanctioned, which requires a responsibility to account for this when allocating state resources.
 - 3. Allowing a path to housing for those who are not chronically homeless is important. Those who have recently begun experiencing homelessness, are not chronic, but are highly vulnerable, should have a path to housing through the Chicago Continuum of Care.

Question/Topic	Points	Question/Topic	Points
Foster Care History	1 point for Self, if any child; addition 1 point	Mental Health	1 point
Exposure to community violence	1 point	Substance Use	1 point
Exposure to family and intimate partner violence	1 point	History of overdose	1 point
Justice System Involvement	1 point	Physical Health	1 point
Zip code or neighborhood of origin	1 point	Developmental Disability	1 point
Highest level of education; Less than high school degree	1 point	Frequent use of systems	1 point
History of family homelessness		Employment history	TBD
Experience of discrimination based on sexual or gender identity	1 point	History of exiting CoC resources back to homelessness	1 point
Age	1 point	History of episodic homelessness	1 point

Meeting Frequency

- Monthly?

Open Forum



Need for Next Steps

- Data Needs?
- HUD T.A Support?
- Other communities to assess?