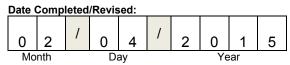
SSVF Priority 1 Community Plan



Continuum of Care (CoC) Name:	CoC # : IL511
CoC Representative: Jennifer Hill	Title: Executive Director
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Person Completing this Plan:	Title:
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Magalie Oscar, Catholic Charities	Department Director -SSVF
Erin Vondrasek, Hines VA	Hines VA SSVF Point of Contact
Phone/Email:	<u> </u>
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1. Primary Planning and Coordination Group: Identify the primary group responsible for planning and coordinating efforts to prevent and end homelessness among Veterans in the CoC. Identify the principal members of this group and their affiliation.

Primary Group Name: Zero: 2016			
Principle Members	Affiliation		
Tracy Emmanuel, LCSW	Hines VA, Zero: 2016 Co-Chair		
Colleen Joyce	New Foundation Center, Zero: 2016 Co-Chair		
Bethany Maynard-Moody	Alliance		
Anna Lunceford	Alliance		
Jennifer Hill	Alliance		
Magalie Oscar	Catholic Charities		
Polly Maschinski	Catholic Charities		
Caroline Ladky	Thresholds		
Julie Durkalec	Pillars		
Merridith Montgomery	South Suburban PADS		
Kimber Tough	West Suburban PADS		
Edilberto Vasquez	Connections		
Corinne Steimer, LCSW	Hines VA		
Dimitia McIntire	CEDA Inc.		
Monica Slavin	Housing Authority of Cook County		

2. Ongoing Review and Coordination: Briefly describe how often (e.g., monthly) the above group or a related review/coordination group meets to review Veterans who are homeless, track progress toward re-housing, and coordinate efforts. Include a summary of what information is reviewed during these meetings.

The SubCook Zero: 2016 team focuses on chronic and vulnerable homeless individuals, some of whom are Veterans. Hines VA and Catholic Charities are both active in this group. In this forum, individuals' cases are discussed regularly in the form of case consultation.

In addition to the Zero: 2016 team monthly meeting, Catholic Charities and Hines VA SSVF staff will meet monthly to discuss Veterans who are homeless but not on the Vulnerable List. These meetings will serve to track progress toward re-housing and continue to coordinate efforts between both organizations and other SSVF providers. The status of current clients, duration of homelessness and outreach efforts will be discussed during these meetings. We will also brainstorm ways to improve outreach.

3. SSVF Grantees Serving CoC Geography: Identify each SSVF funded agency serving Veterans in the CoC geography and each SSVF total grant award amount for FY15, including priority 1 ("surge), 2 (renewals), and 3 (other new) awards. If one agency has multiple awards, list each separately. Pro-rate a grant award amount if the award covers more than one CoC geography. Include the projected annual number of households each grantee can serve and the total number of households across all grantees.

Grantee Agency Name	Grant Amount	Total Annual Projected Households	Total Annual Projected Households: Rapid Re- Housing	% of Total Households to be Assisted with Rapid Re-Housing
Catholic Charities (surge)	\$1,000,000	150	90	60%
Thresholds (renewal)	\$492,574.00	100	60	60%
Volunteers of America (renewal)	\$474,000.00	133	79	60%
Heartland Alliance (renewal)	\$295,825.00	48	36	75%
Featherfist, Inc. (renewal)	\$495,500.00	83	50	60%
Partners in Community Building (renewal)	\$545,140.00	125	75	60%
Catholic Charities (renewal)	\$600,000	100	60	60%
Transitional Living Services, Inc. (renewal)	\$60,000.00	12	7	60%
Bogan Quarters (renewal)	\$10,720.00	15	9	60%
TOTAL	\$3,837,759.00	766	466	61%

- **4. Annual Demand and Need for Rapid Re-Housing Assistance:** Using the *Veterans Demand Analysis and Progress Tracking Tool* or other demand analysis data agreed to by the primary group above, identify:
 - The most recent actual or projected annual unduplicated number of homeless Veterans (on street and/or who access emergency shelter, Safe Havens, or transitional housing, including GPD) in the CoC geography, by household type
 - The number of those Veterans who will need rapid re-housing assistance to exit homelessness
 - The number of Veterans needing rapid re-housing assistance who are projected to be eligible for SSVF RRH assistance.

	Annual Unduplicated Homeless Veteran Households (Added 30% for inflow)	Estimated # of Needing RRH (a)	Projected # to be Assisted with SSVF RRH (b)	Projected # to be Assisted with Other RRH (c)	Gap (a-(b+c))
Households without Children	507	326 (64%)	326	0	0
Households with Children	26	26 (100%)	26	0	0
Total Homeless Veteran Households	533	352 (66%)	352 (150 Catholic Charities +202 other SSVF)	0	0

Explanation for Table 4

Using annual HMIS data that indicated 379 homeless veteran households (365 adult-only households and 14 families with children) and HOMES data that suggested similar totals on an annual basis, the group estimated 390 adults-only households and 20 families with children are homeless between both systems (CoC and VA) each year. To account for inflow, we added 30% to both numbers to get 507 and 26. Using the Hines VA gaps analysis as a basis to decide what proportion needed Rapid Re-housing, we assumed 64% of adult-only households need RRH, while we assumed all families would likely need RRH. Catholic Charities plans to serve 150 households annually with RRH between its two grants, and the other six grantees combined can be expected to serve at least 202 households with RRH, This appears to cover all the projected need for RRH in Suburban Cook County. We initially used the VA gap analysis to come up with our estimate of the proportion of veterans needing RRH (45%). However, we've decided to align our estimate with the national average (66%). Please see chart above.

5. CoC Goals for Ending Homelessness Among Veterans: List the CoC's goals for ending Veteran homelessness by the end of 2015 (fill in additional related goals the CoC has determined, if relevant).

Currently, 35% of homeless veteran households are considered chronically homeless. As a part of its participation in Zero:2016, Suburban Cook County commits to bringing veterans homelessness to virtual zero in time for the January 2016 homeless count.

What are the CoC's goals for the estimated number of Veterans, including chronically homeless Veterans, who will be homeless as of the night of the January 2016 PIT Count?

	All Homeless Veteran Households (including CH)			Chronically Homeless Veteran Households		
	Sheltered	Unsheltered	TOTAL	Sheltered	Unsheltered	TOTAL
Households without Children	0	0	0	0	0	0
Households with Children	0	0	0	0	0	0
Total Households	0	0	0	0	0	0

end of 20	Has the CoC established other goals related to preventing and ending homelessness among Veterans by the end of 2015? X Yes No				
If "Yes",	lease describe:				
on Veter	of Suburban Cook County's participation in the Zero: 2016 initiative, we commit to reach virtual zero an homelessness by December 2015, as measured in January 2016 point-in-time homeless count. ro means the number of homeless Veterans is no greater than the number of Veterans we can house s.				

- **6. SSVF Integration into CoC Coordinated Assessment System:** Briefly describe how Veterans access SSVF assistance (across all SSVF grantees) via the CoC's coordinated assessment system (e.g., "All Veterans who present to the CoC coordinated assessment center are screened for their current situation, needs, and SSVF eligibility. Then). If not yet fully developed, describe your plans and implementation timeframe. Specifically address:
 - a) How Veterans who present for shelter are screened and diverted to SSVF homelessness prevention assistance when they have somewhere safe and appropriate to stay that night.
 - b) How Veterans who become literally homeless are screened and triaged to SSVF rapid re-housing assistance as soon as possible once it is clear the Veteran is unable to resolve their homelessness without assistance.

The approach to coordinated assessment in suburban Cook CoC has two main elements. The Virtual Call Center (VCC) is a telephone resource for community members and residents needing financial assistance to prevent or end homelessness. This centralized access eliminates the need for calling multiple agencies and provides a coordinated approach for homelessness prevention services within the community. Calls to this phone line are answered by volunteer social service agencies within the community. Calls are answered Monday through Friday, 10:00am to 2:00pm. All answered calls are tracked in the community's HMIS (Homeless Management Information System), providing data on unmet need and referrals. Callers are referred to one of several portal agencies in suburban Cook County to complete an in-person assessment. The universal intake form screens for veteran status, and veterans are connected to Hines VA and/or the Catholic Charities SSVF intake line if they are not already connected to those services.

Catholic Charities has a dedicated intake line and two outreach/intake staff for SSVF. This dedicated line and team are publicized in a program brochure and through internal and external partners including but not limited to the area VA hospitals, outpatient VA health clinics; local CoC; local IDHS centers, emergency and transitional shelters. The outreach team targets locations and organizations that serve highly vulnerable populations and customizes the service provision to better serve this population. CC utilizes its SSVF pre-screening form to assess potential clients for services. HP clients will have to meet the required threshold score of 8 to be able to receive TFA funding.

The second element of suburban Cook County's approach to coordinated assessment is encompassed in the Zero: 2016 initiative. The most vulnerable homeless people, who may be unlikely to use a phone line to seek assistance, are prioritized for assistance through the SubCook Zero: 2016 team. Unsheltered persons identified through street outreach and shelter guests who are homeless longer than a week are assessed using the VI-SPDAT to identify their level of vulnerability. Hines VA takes responsibility for engaging vulnerable homeless Veterans, and the VI-SPDAT score factors into HUD-VASH voucher prioritization. Vulnerable homeless veterans who do not receive VASH vouchers are referred to other Permanent Supportive Housing (PSH) providers in the community, where they receive a high priority for housing. SSVF Rapid Re-Housing Assistance may be used in conjunction with other PSH supports for vulnerable homeless veterans.

If a veteran presents for SSVF services and lacks a safe and appropriate place to stay, CC will make sure the vet is housed for the night by tapping into our network of shelters and motels. When feasible, the case manager will accompany the client to the shelter or motel to increase their comfort level in seeking services. Veterans with dependent children who lack a safe and appropriate place to stay will be housed in motels /hotels while working on finding the family permanent housing. For clients not eligible for SSVF funding, CC will offer connection to internal programs or external partners; no person seeking assistance will be left without a sound referral.

- **7. Long-Term System Improvements:** Briefly describe how the CoC plans to utilize SSVF Priority 1 and all other SSVF funding over the next three years to foster long-term system improvements and optimization so that homelessness is prevented whenever possible and when it does occur, it is rare and brief. Specifically address areas for improvement related to:
 - a) Further integrating SSVF assistance into the CoC's planning, oversight processes and coordinated assessment system.
 - b) Ensuring comprehensive coordination with VA systems and other VA funded programs.
 - c) Improving or establishing partnerships with community-based services and public/private housing providers.
 - a) Catholic Charities will play an active role in Zero: 2016 campaign. Catholic Charities will also participate in further conversation regarding better collaboration in Call Center referrals.
 - b) CC will continue coordination with VA hospital and other VA funded programs as well as VA on-site monthly outreach meetings.
 - c) CC will coordinate housing placement for Veterans ineligible for VA healthcare or services, including collaboration with community based services and private/public housing providers as well as our local housing authorities.
- **8. Other Strengths and Challenges:** Briefly describe any additional strengths and/or challenges relevant to your achieving VA and local goals.

Currently, we have one list of chronic and vulnerable Veterans that is managed by the CoC and prioritized for housing through the SubCook Zero: 2016 team. We do not currently have one list that includes non-chronic, non-vulnerable homeless veterans. Since the majority of homeless veterans are engaged with Hines VA, Hines has agreed to maintain a list of all homeless veterans including those not eligible for VA care. Hines and Catholic Charities will have to increase their coordination efforts by cross referencing our client lists on an ongoing basis and getting consent to share client data with each other.

The suburban Cook County CoC is part of the Zero: 2016 campaign to end chronic and veteran homelessness, and we were previously part of the 100,000 Homes Campaign. As a part of the campaign, the community expects additional hands-on assistance with coordinated assessment, data tracking, and adopting proven strategies to reach virtual zero on veteran and chronic homelessness in the next 24 months.