

Before Starting the Exhibit 1 Continuum of Care (CoC) Application

The CoC Consolidated Application has been divided into two sections and each of these two sections REQUIRE SUBMISSION in e-snaps in order for the CoC Consolidated Application to be considered complete:

- CoC Consolidated Application - CoC Project Listings

CoCs MUST ensure that both parts of this application are submitted by the submission due date to HUD as specified in the FY2012 CoC Program NOFA.

Please Note:

- Review the FY2012 CoC Program NOFA in its entirety for specific application and program requirements.
- Use the CoC Application Detailed Instructions while completing the application in e-snaps. The detailed instructions are designed to assist applicants as they complete the information in e-snaps.
- As a reminder, CoCs were not able to import data from the previous year due to program changes under HEARTH. All parts of the application must be fully completed.

For Detailed Instructions click [here](#).

1A. Continuum of Care (CoC) Identification

Instructions:

The fields on this screen are read only and reference the information entered during the CoC Registration process. Updates cannot be made at this time. If the information on this screen is not correct, contact the HUD Virtual Help Desk at www.hudhre.info.

CoC Name and Number (From CoC Registration): (dropdown values will be changed) IL-510 - Chicago CoC

Collaborative Applicant Name: Chicago Alliance to End Homelessness, dba All Chicago Making Homelessness History

CoC Designation: CA

1B. Continuum of Care (CoC) Operations

Instructions:

Collaborative Applicants will provide information about the existing operations of the CoC. The first few questions ask basic information about the structure and operations: name, meeting frequency, and if the meetings have an open invitation process for new members. If there is an open invitation process for new members, the Collaborative Application will need to clearly describe the process. Additionally, the CoC should include homeless or formerly homeless persons as part of the operations process. The Collaborative Applicant will indicate if the CoC structure includes homeless or formerly homeless members and if yes, what the connection is to the homeless community.

Next, indicate if the CoC provides written agendas of the CoC meetings, includes a centralized or coordinated assessment system in the jurisdiction, and if the CoC conducts monitoring of ESG recipients and subrecipients. If the CoC does not provide any of these, explain the plans of the CoC to begin implementation within the next year. For any of the written processes that are selected, specifically describe each of the processes within the CoC.

Finally, select the processes for which the CoC has written and approved documents: establishment and operations of the CoC, code of conduct for the board, written process for board selection that is approved by the CoC membership, and governance charters in place for both the HMIS lead agency as well as participating organizations, especially those organizations that receive HUD funding. For any documents chosen, the CoC must have both written and approved documents on file.

Name of CoC Structure: Chicago Continuum of Care

How often does the CoC conduct open meetings? Monthly

Are the CoC meetings open to the public? Yes

Is there an open invitation process for new members? No

If 'Yes', what is the invitation process? (limit 750 characters)

Are homeless or formerly homeless representatives members part of the CoC structure? Yes

If formerly homeless, what is the connection to the community? Community Advocate

Does the CoC provide

CoC Checks	Response
Written agendas of meeting?	Yes
Centralized assessment?	No
ESG monitoring?	Yes

If 'No' to any of the above what processes does the CoC plan to implement in the next year? (limit 1000 characters)

Chicago will bring a fully operational coordinated access system to Chicago within 2 years. In 2012, the CoC developed an assessment, screening and prioritization process for permanent supportive housing (PSH) units, known as the Central Referral System (CRS). CRS helps target PSH units to those most vulnerable, and new PSH projects coming online must use CRS. The local housing authority is also pulling clients from the list for a subset of their units. The CoC is reallocating existing CoC funds to CRS so that it is operational & sustainable; Catholic Charities was selected to implement/operate the system. CRS coverage is covered in section 4A of this application. In 2013, a community-wide process will determine how CRS can be broadened beyond PSH; this effort will be lead by the CoC Lead Agency with the help of national technical assistance (TA). The CoC Lead Agency & Governing Body will develop a monitoring process to evaluate CRS that will review ease of access and placement rates.

Based on the selection made above, specifically describe each of the processes chosen (limit 1000 characters)

The CoC has established standard performance measures that are reviewed bi-annually and approved by the Chicago Planning Council on Homelessness (CPCH), the CoC Governing Body. Outcomes for ESG projects are evaluated by the City Dept. of Family and Support Services (DFSS) through quarterly reports from each delegate agency, HMIS data quality reports from the HMIS Lead Agency, and during the grant renewal process. DFSS also carries out programmatic and fiscal monitoring for ESG grantees. The CoC establishes agendas for all CoC Governance Meetings prior to the meeting, and the agendas are distributed to all members of that particular committee by the CoC Lead Agency, the Chicago Alliance. Members are encouraged to share agendas with their stakeholder groups to gain feedback as necessary. Agendas are available to the public upon request, though will be posted online as soon as the CoC website is created. Minutes of meetings are posted on the Chicago Alliance's website.

Does the CoC have the following written and approved documents:

Type of Governance	Yes/No
CoC policies and procedures	Yes
Code of conduct for the Board	No
Written process for board selection	Yes
Governance charter among collaborative applicant, HMIS lead, and participating agencies.	No

1C. Continuum of Care (CoC) Committees

Instructions:

Provide information on up to five of the CoCs most active CoC-wide planning committees, subcommittees, and workgroups. CoCs should only include information on those groups that are directly involved in CoC-wide planning activities such as project review and selection, discharge planning, disaster planning, completion of the Exhibit 1 application, conducting the point-in-time count, LGBT homeless issues, and 10-year plan coordination. For each group, briefly describe the role and how frequently the group meets. If one of more of the groups meets less than quarterly, please explain.

Committees and Frequency:

Name of Group	Role of Group (limit 750 characters)	Meeting Frequency
HUD McKinney Vento Committee	The HUD McKinney Vento Committee is a committee of the CPCH. It is made up of service providers, consumers, and is staffed by the Chicago Alliance. It is responsible for the annual HUD Continuum of Care Homeless Assistance Program NOFA process. Annually, the committee develops a calendar for the NOFA process, approves and recommends the project evaluation instrument to the Planning Council, and oversees the application process for new project applications each year. Providers bring a range of knowledge and expertise to the table, including information on evaluating program outcomes and monitoring processes. Consumer participation is critical in helping ensure the evaluation process incorporates client representation.	Monthly or more
HEARTH Funding Opportunities Task Group	The HEARTH Funding Opportunities Task Group is appointed by the CPCH to develop policies for recapturing and/or reallocating CoC funds and to determine potential recipients for funding. Members of this group are representative of the stakeholders that make up our CoC: providers, government, consumers, private funders and the CoC Lead Agency. Several members of this task group are also Planning Council members to address continuity between the two groups. Government, private funders and Chicago Alliance members bring expertise with CoC funding coordination with other sources. Providers and Consumers help ensure any recapture/reallocation processes are fair and transparent, and help determine system impact of the group's decisions.	Bi-monthly
Plan 2.0 Steering Committee	To create Chicago's new plan to end homelessness, the CoC formed a Plan 2.0 Steering Committee to oversee the process. Their goals were to ensure the planning process was data driven and inclusive of all stakeholders, and that the Plan would seek to prevent homelessness whenever possible and provide an array of housing and services to people experiencing homelessness in Chicago. Most members on the steering committee were stakeholders of other entities that create homeless policies in Chicago, including the CPCH, City of Chicago Dept. of Family and Support Services, the Chicago Alliance, consumers and advocacy groups. This ensures the new Plan will influence homeless funding and policy decisions as Plan implementation begins.	Monthly or more

Plan Advisory Committee	The Plan Advisory Committee (PAC) is a committee of the CPCH, and its role is to provide guidance on implementing the Plan to End Homelessness in Chicago. The committee has a diverse membership, including service providers, consumers, government representatives, and the Chicago Alliance. Each constituency group in Chicago elects a representative to sit on PAC, and these members expertise ensure broad representation is maintained during Plan implementation. On an annual basis, they review Plan implementation progress, identify ways to address gaps in housing services, and monitor the work plan for Plan implementation. They also undertake work related to the Plan as delegated by the CPCH.	Monthly or more
Point-in-Time Count Lead Agencies Committee	Annually, the DFSS oversees the annual point-in-time (PIT) count, and convenes a PIT Count Lead Agency Committee to help implement the process. The Lead Agency role in the PIT count is to serve as a hub for the hundreds of volunteers the count requires. They coordinate with DFSS to execute a successful count throughout the city. The Committee meets for several months throughout the year to plan for volunteer recruitment and training, to review the survey and methodology, and, in 2012, seek ways to improve the youth count for future PITs. Most lead agencies have been in this role for many years, and bring specialized expertise to making the PIT count smooth, and ensure adherence to PIT methodology.	quarterly (once each quarter)

If any group meets less than quarterly, please explain (limit 750 characters)

1D. Continuum of Care (CoC) Member Organizations

Click on the icon to enter information for the CoC Member Organizations.

Membership Type
Public Sector
Individual
Private Sector

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Enter the number of public organizations, private organizations, or individuals for each of the categories below. Each section below must have at least one field completed.

Public Sectors: Enter the number of organizations that are represented in the CoC's planning process.

Enter the number of organizations that serve each of the subpopulations listed.

Enter the number of organizations that participate in each of the roles listed.

Private Sectors: Enter the number of organizations that are represented in the CoC's planning process.

Enter the number of organizations that serve each of the subpopulations listed.

Enter the number of organizations that participate in each of the roles listed.

Individuals: Enter the number of individuals that are represented in the CoC's planning process.

Enter the number of individuals that serve each of the subpopulations listed.

Enter the number of individuals who participate in each of the roles listed.

Type of Membership: Public Sector
Click Save after selection to view grids

Number of Public Sector Organizations Represented in Planning Process

	Law Enforcement/Corrections	Local Government Agencies	Local Workforce Investment Act Boards	Public Housing Agencies	School Systems/Universities	State Government Agencies	Other
Total Number	3	4	0	1	1	4	2

Number of Public Sector Organizations Serving Each Subpopulation

	Law Enforcement/Corrections	Local Government Agencies	Local Workforce Investment Act Boards	Public Housing Agencies	School Systems/Universities	State Government Agencies	Other
Subpopulations							
Seriously mentally ill	0	0	0	0	0	1	0
Substance abuse	0	0	0	0	0	1	0
Veterans	0	0	0	0	0	0	1

HIV/AIDS	0	0	0	0	0	0	0
Domestic violence	0	0	0	0	0	0	0
Children (under age 18)	0	1	0	0	1	0	0
Unaccompanied youth (ages 18 to 24)	0	1	0	0	1	0	0

Number of Public Sector Organizations Participating in Each Role

	Law Enforcement/Corrections	Local Government Agencies	Local Workforce Investment Act Boards	Public Housing Agencies	School Systems/Universities	State Government Agencies	Other
Roles							
Committee/Sub-committee/Work Group	3	1	0	0	1	2	0
Authoring agency for consolidated plan	0	1	0	0	0	0	0
Attend consolidated plan planning meetings during past 12 months	1	1	0	1	0	2	0
Attend consolidated plan focus groups/public forums during past 12 months	0	1	0	0	0	0	0
Lead agency for 10-year plan	0	1	0	0	0	0	0
Attend 10-year planning meetings during past 12 months	0	2	0	0	1	1	1
Primary decision making group	0	2	0	1	1	2	2

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Enter the number of public organizations, private organizations, or individuals for each of the categories below. Each section below must have at least one field completed.

Public Sectors: Enter the number of organizations that are represented in the CoC's planning process.

Enter the number of organizations that serve each of the subpopulations listed.

Enter the number of organizations that participate in each of the roles listed.

Private Sectors: Enter the number of organizations that are represented in the CoC's planning process.

Enter the number of organizations that serve each of the subpopulations listed.

Enter the number of organizations that participate in each of the roles listed.

Individuals: Enter the number of individuals that are represented in the CoC's planning process.

Enter the number of individuals that serve each of the subpopulations listed.

Enter the number of individuals who participate in each of the roles listed.

Type of Membership: Individual
Click Save after selection to view grids

Number of Individuals Represented in Planning Process

	Homeless	Formerly Homeless	Other
Total Number	2	15	1

Number of Individuals Serving Each Subpopulation

	Homeless	Formerly Homeless	Other
Subpopulations			
Seriously mentally ill	0	1	0
Substance abuse	0	2	1
Veterans	1	3	0
HIV/AIDS	0	0	0
Domestic violence	0	0	0
Children (under age 18)	0	0	0
Unaccompanied youth (ages 18 to 24)	0	0	0

Number of Individuals Participating in Each Role

	Homeless	Formerly Homeless	Other
Roles			
Committee/Sub-committee/Work Group	2	15	1
Authoring agency for consolidated plan	0	0	0
Attend consolidated plan planning meetings during past 12 months	0	0	0
Attend consolidated plan focus groups/ public forums during past 12 months	0	0	0
Lead agency for 10-year plan	0	0	0
Attend 10-year planning meetings during past 12 months	1	6	0
Primary decision making group	1	6	1

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Enter the number of public organizations, private organizations, or individuals for each of the categories below. Each section below must have at least one field completed.

Public Sectors: Enter the number of organizations that are represented in the CoC's planning process.

Enter the number of organizations that serve each of the subpopulations listed.
 Enter the number of organizations that participate in each of the roles listed.

Private Sectors: Enter the number of organizations that are represented in the CoC's planning process.

Enter the number of organizations that serve each of the subpopulations listed.
 Enter the number of organizations that participate in each of the roles listed.

Individuals: Enter the number of individuals that are represented in the CoC's planning process.

Enter the number of individuals that serve each of the subpopulations listed.
 Enter the number of individuals who participate in each of the roles listed.

Type of Membership: Private Sector
Click Save after selection to view grids

Number of Private Sector Organizations Represented in Planning Process

	Businesses	Faith-Based Organizations	Funder Advocacy Group	Hospitals/ Med Representatives	Non-Profit Organizations	Other
Total Number	0	4	2	2	46	0

Number of Private Sector Organizations Serving Each Subpopulation

	Businesses	Faith-Based Organizations	Funder Advocacy Group	Hospitals/ Med Representatives	Non-Profit Organizations	Other
Subpopulations						
Seriously mentally ill	0	1	0	0	11	0
Substance abuse	0	1	0	0	9	0

Veterans	0	0	0	0	1	0
HIV/AIDS	0	0	0	0	3	0
Domestic violence	0	0	0	0	2	0
Children (under age 18)	0	0	0	0	1	0
Unaccompanied youth (ages 18 to 24)	0	0	0	0	4	0

Number of Private Sector Organizations Participating in Each Role

	Businesses	Faith-Based Organizations	Funder Advocacy Group	Hospitals/ Med Representatives	Non-Profit Organizations	Other
Roles						
Committee/Sub-committee/Work Group	0	2	0	1	39	0
Authoring agency for consolidated plan	0	0	0	0	0	0
Attend consolidated plan planning meetings during past 12 months	0	1	1	1	2	0
Attend Consolidated Plan focus groups/ public forums during past 12 months	0	0	0	0	0	0
Lead agency for 10-year plan	0	0	0	0	1	0
Attend 10-year planning meetings during past 12 months	0	3	1	0	37	0
Primary decision making group	0	0	2	0	9	0

1E. Continuum of Care (CoC) Project Review and Selection Process

Instructions:

The CoC solicitation of project applications and the project application selection process should be conducted in a fair and impartial manner. For each of the following items, indicate all of the methods and processes the CoC used in the past year to assess the performance, effectiveness, and quality of all requested new and renewal project(s). Where applicable, describe how the process works.

In addition, indicate if any written complaints have been received by the CoC regarding any CoC matter in the last 12 months, and how those matters were addressed and/or resolved.

Open Solicitation Methods (select all that apply): c. Responsive to Public Inquiries, b. Letters/Emails to CoC Membership, f. Announcements at Other Meetings, e. Announcements at CoC Meetings

Rating and Performance Assessment Measure(s) (select all that apply): m. Assess Provider Organization Capacity, n. Evaluate Project Presentation, h. Survey Clients, i. Evaluate Project Readiness, p. Review Match, o. Review CoC Membership Involvement, r. Review HMIS participation status, l. Assess Provider Organization Experience, j. Assess Spending (fast or slow), b. Review CoC Monitoring Findings, a. CoC Rating & Review Committee Exists, f. Review Unexecuted Grants, e. Review HUD APR for Performance Results, d. Review Independent Audit, c. Review HUD Monitoring Findings

Describe how the CoC uses the processes selected above in rating and ranking project applications. (limit 750 characters)

The CPCH determines project selection criteria, and the HMV Committee oversees project evaluation. The evaluation includes a review of HUD monitoring findings, grant execution capacity, and agency finances. More points are awarded for full and timely grant expenditures, CoC Membership involvement, match/leverage, HMIS data quality, and the largest emphasis is placed on performance. For new projects, a panel reviews project presentations and project readiness in addition to the items mentioned above. All evaluation and selection criteria are made public. A CPCH committee hears appeals from projects contesting their score. The CPCH establishes ranking criteria that is used with evaluation scores to prioritize projects for the CoC.

Did the CoC use the gaps/needs analysis to ensure that project applications meet the needs of the community? Yes

Has the CoC conducted a capacity review of each project applicant to determine its ability to properly and timely manage federal funds? Yes

Voting/Decision-Making Method(s) (select all that apply): b. Consumer Representative Has a Vote, d. One Vote per Organization, e. Consensus (general agreement), a. Unbiased Panel/Review Committee, f. Voting Members Abstain if Conflict of Interest

Is the CoC open to proposals from entities that have not previously received funds in the CoC process? Yes

If 'Yes', specifically describe the steps the CoC uses to work with homeless service providers that express an interest in applying for HUD funds, including the review process and providing feedback (limit 1000 characters)

The Chicago Alliance operates a robust Service Providers Commission (SPC) that serves as an outreach arm for current and potential providers of homeless services. The SPC holds several meetings per year that provide learning and peer-support opportunities. When the Alliance receives calls from those interested in starting a homeless program, they are encouraged to join the SPC, and to participate in a CoC Orientation, which provides an overview of Chicago's Plan to End Homelessness and governance structure of the CoC. They also have the opportunity to participate in a training on applying for CoC-funds, which focuses specifically on the models acceptable under our Plan, and process for applying. Agencies that apply but are not selected to receive CoC funds are given feedback on their proposal, and may choose to meet with Alliance staff to strategize for future application cycles. Two new providers have received CoC funds in the last few years.

Were there any written complaints received by the CoC regarding any matter in the last 12 months? No

If 'Yes', briefly describe complaint(s), how it was resolved, and the date(s) resolved (limit 1000 characters)

1F. Continuum of Care (CoC) Housing Inventory Count - Change in Beds Available

Instructions:

For each housing type, indicate if there was a change (increase or reduction) in the total number of beds counted in the 2012 Housing Inventory Count (HIC) as compared to the 2011 HIC. If there was a change, describe the reason(s) in the space provided for each housing type. If the housing type does not exist in the CoC, select "Not Applicable" and indicate that in the text box for that housing type.

Indicate if any of the transitional housing projects in the CoC utilized the transition in place method; i.e., if participants in transitional housing units remained in the unit when exiting the program to permanent housing. If the units were transitioned, indicate how many.

Emergency Shelter: Yes

Briefly describe the reason(s) for the change in Emergency Shelter beds, if applicable (limit 750 characters)

The overall number of emergency shelter beds decreased by 45 beds between 2011 to 2012. However, in actuality, the Chicago CoC experienced a loss of 163 beds due to agencies converting emergency shelter beds to transitional housing beds. Even though 163 transitioned from emergency shelter, we added 118 new beds by 1.) an organization was not at full capacity at the time of the HIC in 2011 due to start up reasons became full capacity in the 2012 HIC 2.) additional beds became year round instead of seasonal, 3.) a new program that closed in 2010 re-opened in 2012 4.) an organization remodeled their facility 5.) and increases in family sizes. The net loss of emergency shelter beds became 45 beds.

HPRP Beds: Yes

Briefly describe the reason(s) for the change in HPRP beds or units, if applicable (limit 750 characters)

The HPRP had an increase of 932 beds from 2011 to 2012. During the 2011 year, the program was starting to place participants into units and therefore, the HIC showed an increase. From 2011 to 2012, the HPRP program was reaching full capacity to house clients, representing an increase on the 2012 Housing Inventory of 932 beds.

Safe Haven: No

Briefly describe the reason(s) for the change in Safe Haven beds, if applicable (limit 750 characters)

Transitional Housing: Yes

Briefly describe the reason(s) for the change in Transitional Housing beds, if applicable (limit 750 characters)

The overall number of transitional housing beds between 2011 to 2012 increased by 74 beds. The primary 3 reasons to account for the increase are 1.) two emergency shelter programs converted emergency shelter beds to existing Transitional housing programs resulting in an increase 2.) beds returned online from 2010 due to flood and fire damages, 3.) and an increase in family sizes. However, the Chicago Continuum did lose some transitional beds based on funding losses and facility renovation. 77 beds were lost due funding cuts where agencies reduce the number of staff and beds at facilities. 20 beds were lost due to facility renovation.

Did any projects within the CoC utilize transition in place; i.e., participants in transitional housing units transitioned in place to permanent housing? Yes

If yes, how many transitional housing units in the CoC are considered "transition in place": 1099

Permanent Housing: Yes

Briefly describe the reason(s) for the change in Permanent Housing beds, if applicable (limit 750 characters)

The overall number of Permanent Housing beds increased between 2011 to 2012 by 580 beds. This is due to the addition of 244 beds from new bonus projects awarded in 2011. Shelter Plus Care also awarded 10 new beds to accommodate for increases in the family sizes in a Shelter Plus Care project. The remaining 326 new beds can be explained by increases in family sizes for permanent housing projects across the board. Projects report an average increase of 1.9 beds due to accommodate for the increased family size. We have also increased Chronic Homeless dedicated beds by 119 in 2012.

CoC certifies that all beds for homeless persons were included in the Housing Inventory Count (HIC) as reported on the Homelessness Data Exchange (HDX), regardless of HMIS participation and HUD funding: Yes

1G. Continuum of Care (CoC) Housing Inventory Count - Data Sources and Methods

Instructions:

Complete the following items based on data collection methods and reporting for the Housing Inventory Count (HIC), including Unmet need determination. The information should be based on a survey conducted in a 24 hour period during the last ten days of January 2012. CoCs were expected to report HIC data on the Homelessness Data Exchange (HDX).

Did the CoC submit the HIC data in HDX by April 30, 2012? Yes

If 'No', briefly explain why the HIC data was not submitted by April 30, 2012 (limit 750 characters)

Indicate the type of data sources or methods used to complete the housing inventory count (select all that apply): HMIS plus housing inventory survey, Housing inventory survey

Indicate the steps taken to ensure the accuracy of the data collected and included in the housing inventory count (select all that apply): Follow-up, Updated prior housing inventory information, Training, Instructions, Other, HMIS, Confirmation

Must specify other:

The Chicago Alliance also verified information submitted by agencies with local VA office and DFSS, the agency that serves as the primary funder of emergency shelters and interim housing.

Indicate the type of data or method(s) used to determine unmet need (select all that apply): National studies or data sources, Unsheltered count, Local studies or non-HMIS data sources, HMIS data, Housing inventory, Stakeholder discussion, HUD unmet need formula

Specify "other" data types:

If more than one method was selected, describe how these methods were used together (limit 750 characters)

Chicago's unmet need calculations are based on a combination of methods including local assumptions, data, and research and the HUD unmet need formula. This year, the unmet need calculations were incorporated into the process to create Plan 2.0, and therefore involved broad representation from stakeholders. The Chicago Alliance began with our most recent PIT count and AHAR data to determine who our system serves on an annual basis. Then we used the HUD unmet need formula and housing inventory to assess our current housing stock, and identify our need. We built in assumptions based on local and national data to finalize the gaps analysis.

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

All CoCs are expected to have a functioning Homeless Management Information System (HMIS). An HMIS is a computerized data collection application that facilitates the collection of information on homeless individuals and families using residential or other homeless services and stores that data in an electronic format. CoCs should complete this section in conjunction with the lead agency responsible for the HMIS. All information should reflect the status of HMIS implementation as of the date of application submission.

Select the HMIS implementation coverage area: Single CoC

Select the CoC(s) covered by the HMIS (select all that apply): IL-510 - Chicago CoC

Is there a governance agreement in place with the CoC? No

If yes, does the governance agreement include the most current HMIS requirements?

If the CoC does not have a governance agreement with the HMIS Lead Agency, please explain why and what steps are being taken towards creating a written agreement (limit 1000 characters)

The Chicago Alliance acquired the HMIS project in May 2012. Prior to that, it was managed by DFSS. Since May the Alliance has been working with HUD TA to establish the required policies and procedures to successfully operate an HMIS, including the development of a governance agreement with the CoC. In early 2013, the Chicago CoC will undergo an analysis of its overall governance and structure to align with HEARTH requirements; this was a priority that came from the CoC Check-up Assessment. HMIS governance will be part of this conversation and we expect that the CoC Governing Body will adopt a governance charter for HMIS in 2013.

Does the HMIS Lead Agency have the following plans in place? Data Quality Plan

Has the CoC selected an HMIS software product? Yes

If 'No', select reason:

If 'Yes', list the name of the product: Service Point

What is the name of the HMIS software company? Bowman Systems

Does the CoC plan to change HMIS software within the next 18 months? No

Indicate the date on which HMIS data entry started (or will start): (format mm/dd/yyyy) 10/06/2008

Indicate the challenges and barriers impacting the HMIS implementation (select all the apply): No or low participation by non-HUD funded providers, Lack of MOU between CoC and HMIS administering agency, HMIS is unable to generate data for PIT counts for sheltered persons, Inadequate staffing, Poor data quality

If CoC indicated that there are no challenges or barriers impacting HMIS implementation, briefly describe either why CoC has no challenges or how all barriers have been overcome (limit 1000 characters)

N/A

If CoC identified one or more challenges or barriers impacting HMIS implementation, briefly describe how the CoC plans to overcome them (limit 1000 characters)

To address low staffing the CoC has reallocated HUD funds to increase financial support of HMIS to add at least 2 more staff. The City of Chicago will also allocate ESG funds in 2013 to support HMIS capacity development. This will help increase the amount of support that can be provided to end users of the system, which will improve system performance and data quality. The previously-mentioned HUD TA is helping to develop a plan to approach non-participating shelters in Chicago and we are actively seeking peer support from communities that have had success in bringing non-HUD funded religious providers into HMIS. Finally, the Chicago Alliance is working to improve the reliability of data and reporting so Chicago can use HMIS for future PIT Counts, and we expect to do this as early as 2014. As explained above the Chicago Alliance is working with HUD TA providers to develop an agreement with the CoC.

Does the CoC lead agency coordinate with the HMIS lead agency to ensure that HUD data standards are captured? Yes

2B. Homeless Management Information System (HMIS): Funding Sources

In the chart below, enter the total budget for the CoC's HMIS project for the current operating year and identify the funding amount for each source:

Operating Start Month/Year	April	2012
Operating End Month/Year	March	2013

Funding Type: Federal - HUD

Funding Source	Funding Amount
SHP	\$318,498
ESG	\$0
CDGB	\$0
HOPWA	\$0
HPRP	\$0
Federal - HUD - Total Amount	\$318,498

Funding Type: Other Federal

Funding Source	Funding Amount
Department of Education	\$0
Department of Health and Human Services	\$0
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$0
Other Federal	\$0
Other Federal - Total Amount	\$0

Funding Type: State and Local

Funding Source	Funding Amount
City	\$0
County	\$0
State	\$0
State and Local - Total Amount	\$0

Funding Type: Private

Funding Source	Funding Amount
Individual	\$0
Organization	\$74,415
Private - Total Amount	\$74,415

Funding Type: Other

Funding Source	Funding Amount
Participation Fees	\$0

Total Budget for Operating Year	\$392,913
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Is the funding listed above adequate to fully fund HMIS? No

If 'No', what steps does the CoC Lead agency, working with the HMIS Lead agency, plan to take to increase the amount of funding for HMIS? (limit 750 characters)

As previously stated the CoC has approved the reallocation of funds to help increase HMIS staffing, specifically for user support. The City of Chicago will also allocate ESG funds in 2013 to support HMIS capacity development. The Chicago Alliance also believes that privately raised funds will help to supplement these HUD dollars so that we can continue to improve the manner in which Chicago's HMIS is run.

How was the HMIS Lead Agency selected by the CoC? Agency Volunteered

If Other, explain (limit 750 characters)

2C. Homeless Management Information Systems (HMIS) Bed and Service Volume Coverage

Instructions:

HMIS bed coverage measures the level of provider participation in a CoC's HMIS. Participation in HMIS is defined as the collection and reporting of client level data either through direct data entry into the HMIS or into an analytical database that includes HMIS data on an at least annual basis.

HMIS bed coverage is calculated by dividing the total number of year-round beds located in HMIS-participating programs by the total number of year-round beds in the Continuum of Care (CoC), after excluding beds in domestic violence (DV) programs. HMIS bed coverage rates must be calculated separately for emergency shelters, transitional housing, and permanent supportive housing.

The 2005 Violence Against Women Act (VAWA) Reauthorization bill restricts domestic violence provider participation in HMIS unless and until HUD completes a public notice and comment process. Until the notice and comment process is completed, HUD does not require nor expect domestic violence providers to participate in HMIS. HMIS bed coverage rates are calculated excluding domestic violence provider beds from the universe of potential beds.

Indicate the HMIS bed coverage rate (%) for each housing type within the CoC. If a particular housing type does not exist anywhere within the CoC, select "Housing type does not exist in CoC" from the drop-down menu:

* Emergency Shelter (ES) beds	0-50%
* HPRP beds	86%+
* Safe Haven (SH) beds	86%+
* Transitional Housing (TH) beds	76-85%
* Rapid Re-Housing (RRH) beds	86%+
* Permanent Housing (PH) beds	76-85%

How often does the CoC review or assess its HMIS bed coverage? At least Quarterly

If bed coverage is 0-64%, describe the CoC's plan to increase this percentage during the next 12 months:

We have been working with HUD TA providers on improving Chicago's HMIS since late 2011. Part of our plan for improvement is reaching out to non participating Emergency Shelters to explain the benefits of being more engaged with the CoC and HMIS. We are working to improve our HMIS so it is more user friendly and better able to generate helpful reports so providers are more willing to sign on to use it. Part of this effort involves utilizing ShelterPoint to make entry and exit of clients easier. We have the assistance of our TA providers as well as Beverley Ebersold from the U.S. Interagency Council on Homelessness for this task and we plan to begin on it this Spring.

2D. Homeless Management Information System (HMIS) Data Quality

Instructions:

HMIS data quality refers to the extent that data recorded in an HMIS accurately reflects the extent of homelessness and homeless services in a local area. In order for HMIS to present accurate and consistent information on homelessness, it is critical that all HMIS have the best possible representation of reality as it relates to homeless people and the programs that serve them. Specifically, it should be a CoC's goal to record the most accurate, consistent and timely information in order to draw reasonable conclusions about the extent of homelessness and the impact of homeless services in its local area. Answer the questions below related to the steps the CoC takes to ensure the quality of its data. In addition, the CoC will indicate participation in the Annual Homelessness Assessment Report (AHAR) and Homelessness Pulse project for 2011 and 2012 as well as whether or not they plan to contribute data in 2013.

Does the CoC have a Data Quality Plan in place for HMIS? Yes

What is the HMIS service volume coverage rate for the CoC?

Types of Services	Volume coverage percentage
Outreach	100%
Rapid Re-Housing	100%
Supportive Services	91%

Indicate the length of stay homeless clients remain in the housing types in the grid below. If a housing type does not apply enter "0":

Type of Housing	Average Length of Time in Housing (Months)
Emergency Shelter	6
Transitional Housing	5
Safe Haven	32

Indicate the percentage of unduplicated client records with null or missing values on a day during the last 10 days of January 2012 for each Universal Data Element below:

Universal Data Element	Records with no values (%)	Records where value is refused or unknown (%)
Name	0%	0%
Social security number	1%	13%
Date of birth	0%	0%
Ethnicity	0%	0%

Universal Data Element	Records with no values (%)	Records where value is refused or unknown (%)
Race	0%	0%
Gender	0%	0%
Veteran status	1%	0%
Disabling condition	3%	0%
Residence prior to program entry	1%	7%
Zip Code of last permanent address	1%	24%
Housing status	17%	3%
Destination	0%	13%
Head of household	3%	0%

How frequently does the CoC review the quality of project level data, including ESG? At least Quarterly

Describe the process, extent of assistance, and tools used to improve data quality for agencies participating in the HMIS (limit 750 characters)

Each quarter all providers using HMIS are alerted via email that it's time for the Quarterly Data Quality Review. Reports are run by HMIS staff and shared with agency staff who have a certain amount of time to review the reports and make any necessary corrections. Once the time period for corrections has passed another review is completed to check that all errors have been completed. Agencies are tracked to see if they've made changes to their data in the allotted time and if they've responded to staff requests. Participation in the data quality process is scored during the local evaluation process to determine renewal status.

How frequently does the CoC review the quality of client level data? At least Quarterly

If less than quarterly for program level data, client level data, or both, explain the reason(s) (limit 750 characters)

N/A

Does the HMIS have existing policies and procedures in place to ensure that valid program entry and exit dates are recorded in HMIS? Yes

Indicate which reports the CoC submitted usable data (Select all that apply): 2012 AHAR Supplemental Report on Homeless Veterans, 2012 AHAR

Indicate which reports the CoC plans to submit usable data (Select all that apply): 2013 AHAR Supplemental Report on Homeless Veterans, 2013 AHAR

2E. Homeless Management Information System (HMIS) Data Usage

Instructions:

CoCs can use HMIS data for a variety of applications. These include, but are not limited to, using HMIS data to understand the characteristics and service needs of homeless people, to analyze how homeless people use services, and to evaluate program effectiveness and outcomes.

In this section, CoCs will indicate the frequency in which it engages in the following.

- Integrating or warehousing data to generate unduplicated counts
- Point-in-time count of sheltered persons
- Point-in-time count of unsheltered persons
- Measuring the performance of participating housing and service providers
- Using data for program management
- Integration of HMIS data with data from mainstream resources

Additionally, CoCs will indicate if the HMIS is able to generate program level that is used to generate information for Annual Progress Reports for: HMIS, transitional housing, permanent housing, supportive services only, outreach, rapid re-housing, emergency shelters, and prevention.

Indicate the frequency in which the CoC uses HMIS data for each of the following:

- Integrating or warehousing data to generate unduplicated counts:** Never
- Point-in-time count of sheltered persons:** At least Quarterly
- Point-in-time count of unsheltered persons:** Never
- Measuring the performance of participating housing and service providers:** At least Annually
- Using data for program management:** At least Quarterly
- Integration of HMIS data with data from mainstream resources:** Never

Indicate if your HMIS software is able to generate program-level reporting:

Program Type	Response
HMIS	Yes
Transitional Housing	Yes
Permanent Housing	Yes
Supportive Services only	Yes
Outreach	Yes
Rapid Re-Housing	Yes
Emergency Shelters	Yes
Prevention	No

2F. Homeless Management Information Systems (HMIS) Data, Technical, and Security Standards

Instructions:

In order to enable communities across the country to collect homeless services data consistent with a baseline set of privacy and security protections, HUD has published HMIS Data and Technical Standards. The standards ensure that every HMIS captures the information necessary to fulfill HUD reporting requirements while protecting the privacy and informational security of all homeless individuals.

Each CoC is responsible for ensuring compliance with the HMIS Data and Technical Standards. CoCs may do this by completing compliance assessments on a regular basis and through the development of an HMIS Policy and Procedures manual. In the questions below, CoCs are asked to indicate the frequency in which they complete compliance assessment.

For each of the following HMIS privacy and security standards, indicate the frequency in which the CoC and/or HMIS Lead Agency complete a compliance assessment:

* Unique user name and password	At least Quarterly
* Secure location for equipment	At least Annually
* Locking screen savers	Never
* Virus protection with auto update	Never
* Individual or network firewalls	Never
* Restrictions on access to HMIS via public forums	Never
* Compliance with HMIS policy and procedures manual	Never
* Validation of off-site storage of HMIS data	At least Annually

How often does the CoC Lead Agency assess compliance with the HMIS Data and Technical Standards and other HMIS Notices? At least Annually

How often does the CoC Lead Agency aggregate data to a central location (HMIS database or analytical database)? At least Annually

Does the CoC have an HMIS Policy and Procedures Manual? Yes

If 'Yes', does the HMIS Policy and Procedures manual include governance for:

HMIS Lead Agency	<input checked="" type="checkbox"/>
Contributory HMIS Organizations (CHOs)	<input checked="" type="checkbox"/>

If 'Yes', indicate date of last review or update by CoC: 09/04/2008

If 'Yes', does the manual include a glossary of terms? No

If 'No', indicate when development of manual will be completed (mm/dd/yyyy): 01/01/1900

2G. Homeless Management Information System (HMIS) Training

Instructions:

Providing regular training opportunities for homeless assistance providers that are participating in a local HMIS is a way that CoCs can ensure compliance with the HMIS Data and Technical Standards. In the section below, CoCs will indicate how frequently they provide certain types of training to HMIS participating providers.

Indicate the frequency in which the CoC or HMIS Lead Agency offers each of the following training activities:

* Privacy/Ethics training	At least Quarterly
* Data security training	At least Quarterly
* Data quality training	At least Quarterly
* Using data locally	Never
* Using HMIS data for assessing program performance	Never
* Basic computer skills training	Never
* HMIS software training	At least Monthly
* Policy and procedures	At least Monthly
* Training	At least Monthly
* HMIS data collection requirements	At least Monthly

2H. Continuum of Care (CoC) Sheltered Homeless Point-in-Time (PIT) Count

Instructions:

The point-in-time count assists communities and HUD towards understanding the characteristics and number of people sleeping on the streets, including places not meant for human habitation, emergency shelters, and transitional housing. Beginning in 2012, CoCs are required to conduct a sheltered point-in-time count annually. The requirement for unsheltered point-in-time counts remains every two years; however, CoCs are strongly encouraged to conduct the unsheltered point-in-time count annually. CoCs are to indicate the date of the sheltered point-in-time count and what percentage of the community's homeless services providers participated and whether there was an increase, decrease, or no change between the 2011 and 2012 sheltered counts.

CoCs will also need to indicate the percentage of homeless service providers supplying sheltered information and determining what gaps and needs were identified.

How frequently does the CoC conduct the its sheltered point-in-time count: annually (every year)

Indicate the date of the most recent sheltered point-in-time count (mm/dd/yyyy): 01/26/2012

If the CoC conducted the sheltered point-in-time count outside the last 10 days in January, was a waiver from HUD obtained prior to January 19, 2012? Not Applicable

Did the CoC submit the sheltered point-in-time count data in HDX by April 30, 2012? Yes

If 'No', briefly explain why the sheltered point-in-time data was not submitted by April 30, 2012 (limit 750 characters)

N/A

Indicate the percentage of homeless service providers supplying sheltered population and subpopulation data for the point-in-time count that was collected via survey, interview and HMIS:

Housing Type	Observation	Provider Shelter	Client Interview	HMIS
Emergency Shelters	0%	96%	96%	0%
Transitional Housing	0%	96%	96%	0%
Safe Havens	0%	100%	100%	0%

Comparing the 2011 and 2012 sheltered point-in-time counts, indicate if there was an increase, decrease, or no change and describe the reason(s) for the increase, decrease, or no change (limit 750 characters)

The results of the 2012 sheltered count showed an increase in the total sheltered from 4,873 in 2011 to 4,988 in 2012, an overall increase of 2.3%. We believe that this modest increase reflects the ongoing economic impacts of the prolonged recession. Additionally, in 2012 Chicago's federal HPRP funds ended and State of Illinois homeless prevention fund line item sustained continued reductions from an all-time high of \$11 million in 2008 to \$1.5 million in FY2012. The resulting gap in prevention options likely led to increased shelter entries for both singles and families. Despite the increased census, the count also reflected an increase in households entering service-rich Interim Housing (TH) programs, increasing opportunities to move to PH.

Based on the sheltered point-in-time information gathered, what gaps/needs were identified in the following:

Need/Gap	Identified Need/Gap (limit 750 characters)
* Housing	Chicago projects that we need 2,031 units of rapid rehousing and 1,972 units of permanent supportive housing. As part of the redevelopment of Chicago's Plan to End Homelessness, we compared the number of available units to an estimated number of homeless people (unsheltered, sheltered, and doubled up) who could be successful in various housing options based on previous outcome data. The CoC is committed to creating new housing opportunities with every possible resource available, and also to regularly recalculating the number of housing options needed in order to plan for changes in our community.
* Services	Through the PIT Count, Chicago has identified a variety of services necessary to provide housing stability to people experiencing homelessness. We recognize that additional mental health and substance use services are necessary to serve our population and are actively seeking out new resources in this area. Specialized services for veterans, youth, and families are also critical and have become strategic priorities of our recently revised Plan to End Homelessness. Employment services are an additional focus area of Chicago's Plan 2.0 and will help people build a path out of homelessness.
* Mainstream Resources	The Chicago Continuum of Care is successfully matching the majority of sheltered individuals and families to the mainstream resources to which they are entitled. However, we recognize that additional resources and strategies are always welcome. We plan to increase resources for the SSI Outreach, Access, and Recovery (SOAR) program to increase the number of people who are able to access Social Security disability benefits and Medicaid. We will also include benefit screening and if possible, co-location of services and benefits in our plans for a coordinated access system. Finally, we will be using the opportunity of Medicaid expansion under the Affordable Care Act to provide health care to more people experiencing homelessness.

2I. Continuum of Care (CoC) Sheltered Homeless Population & Subpopulations: Methods

Instructions:

Accuracy of the data reported in the sheltered point-in-time count is vital. Data produced from these counts must be based on reliable methods and not on "guesstimates." CoCs may use one or more method(s) to count sheltered homeless persons. This form asks CoCs to identify and describe which method(s) were used to conduct the sheltered point-in-time count. The description should demonstrate how the method(s) was used to produce an accurate count.

Indicate the method(s) used to count sheltered homeless persons during the 2012 point-in-time count (Select all that apply):

Survey providers:	<input checked="" type="checkbox"/>
HMIS:	<input type="checkbox"/>
Extrapolation:	<input checked="" type="checkbox"/>
Other:	<input type="checkbox"/>

If Other, specify:

N/A

Describe the methods used by the CoC, based on the selection(s) above, to collect data on the sheltered homeless population during the 2012 point-in-time count. Response should indicate how the method(s) selected were used to produce accurate data (limit 1500 characters)

DFSS, the lead on the count, requires participation by a majority of shelter providers through funding contracts. The Chicago Alliance also requires the CoC funded agencies to participate. DFSS encourages participation of non-DFSS funded providers; however, the 5 (out of 121) projects that did not participate were not under contract with DFSS and therefore participation could not be mandated.

Participating providers were required to designate a staff person to attend a training and be responsible for counting on the night of the PIT. Training attendees were given the forms required for the count, written instructions for completing the forms, and instructions on how to return their forms. The forms included a tally sheet for counting people and a survey to be administered to a percentage of clients. The tally and survey forms were sequentially numbered and assigned to providers to ensure a 100% return rate. The tally sheet listed all people at the shelter that night and the corresponding survey number (if applicable). Providers were trained on how to select a random 10% sample of their households to be interviewed. The survey included extensive questions that were used to extrapolate characteristics for the entire sheltered population. A phone number to reach a DFSS staff person during the count hours was printed on all forms in case of questions. Providers were required to return all forms to DFSS within 24 hours.

2J. Continuum of Care (CoC) Sheltered Homeless Population and Subpopulation: Data Collection

Instructions:

CoCs are required to produce data on seven subpopulations. These subpopulations are: chronically homeless, severely mentally ill, chronic substance abuse, veterans, persons with HIV/AIDS, victims of domestic violence, and unaccompanied youth (under 18). Subpopulation data is required for sheltered homeless persons. Sheltered chronically homeless persons are those living in emergency shelters only.

CoCs may use a variety of methods to collect subpopulation information on sheltered homeless persons and may utilize more than one in order to produce the most accurate data. This form asks CoCs to identify and describe which method(s) were used to gather subpopulation information for sheltered populations during the most recent point-in-time count. The description should demonstrate how the method(s) was used to produce an accurate count.

Indicate the method(s) used to gather and calculate subpopulation data on sheltered homeless persons (select all that apply):

	HMIS	<input type="checkbox"/>
	HMIS plus extrapolation:	<input type="checkbox"/>
Sample of PIT interviews plus extrapolation:		<input checked="" type="checkbox"/>
	Sample strategy:	Random Sample
	Provider expertise:	<input type="checkbox"/>
	Interviews:	<input checked="" type="checkbox"/>
	Non-HMIS client level information:	<input type="checkbox"/>
	None:	<input type="checkbox"/>
	Other:	<input type="checkbox"/>

If Other, specify:

N/A

Describe the methods used by the CoC, based on the selection(s) above, to collect data on the sheltered homeless subpopulations during the 2012 point-in-time count. Response should indicate how the method(s) selected were used in order to produce accurate data on all of the sheltered subpopulations (limit 1500 characters)

As mentioned previously, there are 2 forms all providers use for the count. The tally sheet is where all persons in shelter are listed to give us the total count of sheltered persons. The survey is used to interview a subset of clients to gather subpopulation data for extrapolation. The tally form contains a place for the provider to list the corresponding survey number of the households that were surveyed. Chicago requires providers to survey at least 10% of their beds. All providers participate in a training and receive written instructions on how to calculate a 10% sample (at minimum) of the number of beds at their site. Individual providers must sample 10% of their population, while providers with families must survey 10% of households. The method of choosing the random sample is determined by the provider. DFSS provides examples of valid methods such as making a list and selecting every other household, using a lottery, or by pulling names out of a jar. Regardless of method, DFSS emphasized in the training that it must be random. Most providers assign households a number and use a lottery system. DFSS also required providers to return their forms between set hours the day after the count. DFSS staff reviewed all forms returned to ensure that 10% of the beds at the site were surveyed. Providers were required to reconcile such errors the same day.

2K. Continuum of Care (CoC) Sheltered Homeless Population and Subpopulation: Data Quality

Instructions:

The data collected during point-in-time counts is vital for CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level to plan services and programs that will appropriately address local needs and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country and to provide Congress and OMB with information regarding services provided, gaps in service, performance, and funding decisions. It is vital that the quality of data reported accurate and of high quality. CoCs may undertake once or more actions to improve the quality of the sheltered population data.

Indicate the method(s) used to verify the data quality of sheltered homeless persons (select all that apply):

Instructions:	<input checked="" type="checkbox"/>
Training:	<input checked="" type="checkbox"/>
Remind/Follow-up	<input checked="" type="checkbox"/>
HMIS:	<input type="checkbox"/>
Non-HMIS de-duplication techniques:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>
Other:	<input type="checkbox"/>

If Other, specify:

N/A

If selected, describe the non-HMIS de-duplication techniques used by the CoC to ensure the data quality of the sheltered persons count (limit 1000 characters)

The Chicago CoC used several de-duplication techniques to ensure data quality of the sheltered count. Sequentially numbered surveys and tallies were used to create an inventory of data collection documents. The survey and tally numbers issued to a participating shelter during the count were logged and checked against their submission. Further, the unique survey and tally number ensured that no data was entered or used twice. A designated staff person or volunteer was responsible for counting all homeless people staying at the shelter on between 7-9 pm using the tally sheet. A small number of key staff from the Chicago Department of Family and Support Services (DFSS) was trained by the consultant to complete the data entry using a database and entry system created for the 2011 count. Data entry was completed within a few weeks of the count. The research consultant received the original database from DFSS and reviewed contents to correct any mistakes in data entry.

Based on the selections above, describe the methods used by the CoC to verify the quality of data collected on the sheltered homeless population during the 2012 point-in-time count. The response must indicate how each method selected above was used in order to produce accurate data on all of the sheltered populations (limit 1500 characters)

DFSS requires all participating providers to assign a staff person to the count. This staff is the person that must attend the training. DFSS works closely with the provider staff to ascertain the number of beds in the shelter prior to the count. Tools used for the count are distributed based on the number of beds in a given program.

The DFSS training includes both written instructions for the count, confirmation of beds at each site, submission forms, and the packet of forms. The training also includes overview of the types of common errors by providers. Reminders the day of the count was sent to designated provider staff. A hotline number is printed on all forms for providers to call during count hours with DFSS staff available to answer questions or concerns. All providers must phone in the end of their count to DFSS. This allows DFSS to ensure every provider counted that night.

DFSS required providers to return their forms between set hours the next day after the count. DFSS staff reviews all forms returned for completeness and discrepancies regarding the total number of persons listed compared to the number of beds reported. Providers must reconcile such errors the same day.

Constant communication with the provider staff designee reduced the number of errors in counting and data collection. Along with fostering relationships with providers through the counting process, these methods have helped DFSS ensure 100% collection and accurate data.

2L. Continuum of Care (CoC) Unsheltered Homeless Point-in-Time (PIT) Count

Instructions:

The unsheltered point-in-time count assists communities and HUD towards understanding the characteristics and number of people sleeping on the streets, including places not meant for human habitation. CoCs are required to conduct an unsheltered point-in-time count every two years (biennially); however, CoCs are strongly encouraged to conduct the unsheltered point-in-time count annually. CoCs are to indicate the date of the last unsheltered point-in-time count and whether there was an increase, decrease, or no change between the last point-in-time count and the last official point-in-time count conducted in 2011.

How frequently does the CoC conduct an unsheltered point-in-time count? biennially (every other year)

Indicate the date of the most recent unsheltered point-in-time count (mm/dd/yyyy): 01/25/2011

If the CoC conducted the unsheltered point-in-time count outside the last 10 days in January, was a waiver from HUD obtained prior to January 19, 2011 or January 19, 2012? Not Applicable

Did the CoC submit the unsheltered point-in-time count data in HDX by April 30, 2012? Yes

If 'No', briefly explain why the unsheltered point-in-time data was not submitted by April 30, 2011 (limit 750 characters)

N/A

Comparing the 2011 unsheltered point-in-time count to the last unsheltered point-in-time count, indicate if there was an increase, decrease, or no change and describe the reason(s) for the increase, decrease, or no change (limit 750 characters)

In 2011, Chicago's unsheltered count increased to 1,725 from the 2009 count of 884. This can be explained by a change in methodology in the 2009 count, which did not include data from Chicago's public transit system. The 2011 count resumed the inclusion of the public transit system and when comparing the 2011 unsheltered count to the 2007 unsheltered count of 1,576, the increase was only 9%. Based on the data comparison of 2007 and 2011, the unsheltered population on the night of the count could have shown an increase because the weather in 2011 was several degrees warmer. The increase in bed availability in the emergency shelters on the night of the count is also an indication that shelter demand was low due to the weather that night.

2M. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation: Methods

Instructions:

Accuracy of the data reported in point-in-time counts is vital. Data produced from these counts must be based on reliable methods and not on "guesstimates." CoCs may use one or more methods to count unsheltered homeless persons. This form asks CoCs to identify which method(s) they use to conduct their point-in-time counts and whether there was an increase, decrease, or no change between 2011 and the last unsheltered point-in-time count.

Indicate the method(s) used to count unsheltered homeless persons during the 2011 or 2012 point-in-time count (select all that apply):

Public places count:	X
Public places count with interviews on the night of the count:	X
Public places count with interviews at a later date:	
Service-based count:	
HMIS:	
Other:	
None:	

If Other, specify:

N/A

Describe the methods used by the CoC based on the selections above to collect data on the unsheltered homeless populations and subpopulations during the most recent point-in-time count. Response should indicate how the method(s) selected above were used in order to produce accurate data on all of the unsheltered populations and subpopulations (limit 1500 characters)

Chicago conducted a complete canvas of over 234 square miles with the assistance of over 400 city employees, provider staff, and volunteers. All participants were trained the night of the count and issued a handbook with written instructions. Teams were dispatched with census tract maps to avoid teams crossing into territory already searched. All forms provided a hotline number for questions or assistance.

Specialized teams were sent to known locations and public transit. These locations were pre-determined and removed from the areas covered by volunteer teams. The Chicago Transit Authority allowed access to the trains and buses for specifically designated teams. This eliminated the need for CTA staff to perform their duties and count at the same time, producing more accurate data than staff generated reports.

Further, police officers searched abandoned and boarded up buildings. The Park District searched parks that had high incidences of people experiencing homelessness And the Chicago Housing Authority staff counted in their developments.

All forms were numbered and logged. In 2011, DFSS collected 100% of these forms. The data was entered into a database that alerted DFSS for duplicated forms. If clarification was required on the data collected, DFSS reached out to enumerators the same week of the count. This ensured that staff remembered significant details of the interview. These efforts helped collect and produce accurate data.

2N. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation: Level of Coverage

Instructions:

CoCs may utilize several methods when counting unsheltered homeless persons. CoCs need to determine what area(s) they will go to in order to count this population. For example, CoCs may canvas an entire area or only those locations where homeless persons are known to sleep. CoCs are to indicate the level of coverage incorporated when conducting the unsheltered count.

Indicate where the CoC located the unsheltered homeless persons (level of coverage) that were counted in the last point-in-time count: A Combination of Locations

If Other, specify:

20. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation: Data Quality

Instructions:

The data collected during point-in-time counts is vital for CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level to plan services and programs that will appropriately address local needs and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country and to provide Congress and OMB with information regarding services provided, gaps in service, performance, and funding decisions. It is vital that the quality of data reported is accurate and of high quality. CoCs may undertake one or more actions to improve the quality of the sheltered population data.

All CoCs should engage in activities to reduce the occurrence of counting unsheltered persons more than once during the point-in-time count. The strategies are known as de-duplication techniques. De-duplication techniques should always be implemented when the point-in-time count extends beyond one night or takes place during the day at service locations used by homeless persons that may or may not use shelters. CoCs are to describe de-duplication techniques used in the point-in-time count. CoCs are also asked to describe outreach efforts to identify and engage homeless individuals and families.

Indicate the steps taken by the CoC to ensure the quality of the data collected for the unsheltered population count (select all that apply):

Training:	<input checked="" type="checkbox"/>
HMIS:	<input type="checkbox"/>
De-duplication techniques:	<input checked="" type="checkbox"/>
"Blitz" count:	<input checked="" type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey question:	<input checked="" type="checkbox"/>
Enumerator observation:	<input checked="" type="checkbox"/>
Other:	<input type="checkbox"/>

If Other, specify:

N/A

Describe the techniques, as selected above, used by the CoC to reduce the occurrence of counting unsheltered homeless persons more than once during the most recent point-in-time count (limit 1500 characters)

Assigned census tracts and detailed maps helped ensure that no team was assigned to cover the same area. Some areas were canvassed more than once during the count to ensure the area was well searched, however, the methodology contained several ways to avoid duplicate counting. For example, the survey form included a question about whether the person had been approached earlier and teams distributed easily distinguishable hats and gloves to people experiencing homelessness. If a person was found with the hat/gloves, or answered yes to the question, they would not be re-counted. DFSS also dispatched specialized teams to known locations of encampments or large gathering spots. These locations were pre-determined prior to the count and removed from the areas other volunteer teams were assigned. The teams that covered public transit lines conducted their counts in areas that required persons to pay fare or on the trains and buses themselves. Volunteer teams were not given access to public transit and instructed not to count past fare-paying areas.

By requesting the time and precise location of the tallied or surveyed individual, the data entry and review staff could determine whether these teams counted the same individual. Enumerators provided their names and contact information on the form for follow up. Issues resolved within 3 business days after the count were possible since teams recalled significant amounts of information within that short time frame.

Describe the CoCs efforts to reduce the number of unsheltered homeless households with dependent children. Discussion should include the CoCs outreach plan (limit 1500 characters)

The results of the 2011 point-in-time count identified 30 households with children, which was 8 families higher than 2007 and 2009. Studies on homeless youth in Chicago indicate that the point-in-time count may not have included a number of unsheltered homeless youth, and the Chicago Alliance and DFSS are evaluating this to improve upon the methods necessary to ensure unaccompanied youth are included in the 2013 count.

The relatively low number of unsheltered households with dependent children can be attributed to the coordinated and diverse homeless service system, as well as sufficient space in the family shelter system. The DFSS and community-based agencies, as described in the next section, provide continuous city-wide street outreach that seeks to get households off the street immediately, either into shelter or permanent housing. DFSS coordinated a process with the Chicago Public Schools so homeless liaisons in the schools can contact DFSS for immediate assistance if they learn of families living on the street or in their car, etc. Students and families often present their needs first within the schools and so coordination between homeless services and education systems is a logical outreach strategy to prevent unsheltered homelessness among families.

Describe the CoCs efforts to identify and engage persons that routinely sleep on the streets or other places not meant for human habitation (limit 1500 characters)

The Chicago CoC has multiple organizations that conduct outreach to engage unsheltered homeless persons. DFSS operates Mobile Outreach Services and homeless outreach programs that track known locations of homeless persons and attempt to engage them into shelter or connect them with housing. Most of these efforts have concentrated on the airport and public transportation that has, over the past year, seen an increase in the number of homeless persons using these spaces as shelter. Chicago also responds to public calls or well-being checks made on behalf of the homeless. This year, DFSS is developing a coordinated outreach strategy with providers and other city agencies to communicate about new locations where individuals are sleeping and to utilize coordinated resources to engage them in accessing shelter, PH, and services.

Agencies that are supported by the Illinois Department of Human Services Division of Mental Health, and other homeless services funding, deliver clinical services to the homeless and follow individuals over extended periods of time to engage them into permanent housing and treatment programs.

3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 1: Create new permanent housing beds for chronically homeless persons.

Instructions:

Ending chronic homelessness continues to be a HUD priority. CoCs can do this by creating new permanent housing beds that are specifically designated for this population.

CoCs will enter the number of permanent housing beds expected to be in place in 12 months, 5 years, and 10 years. These future estimates should be based on the definition of chronically homeless.

CoCs are to describe the short-term and long-term plans for creating new permanent housing beds for chronically homeless individuals and families who meet the definition of chronically homeless. CoCs will also indicate the current number of permanent housing beds designated for chronically homeless individuals and families. This number should match the number of beds reported in the FY2012 Housing Inventory Count (HIC) and entered into the Homeless Data Exchange (HDX).

How many permanent housing beds are currently in place for chronically homeless persons?	1,819
In 12 months, how many permanent housing beds designated for chronically homeless persons are planned and will be available for occupancy?	2,077
In 5 years, how many permanent housing beds designated for chronically homeless persons are planned and will be available for occupancy?	2,350
In 10 years, how many permanent housing beds designated for chronically homeless persons are planned and will be available for occupancy?	2,500

Describe the CoC's short-term (12 month) plan to create new permanent housing beds for persons who meet HUD's definition of chronically homeless (limit 1000 characters)

Two strategies in 2012 will help bring additional beds for people who are chronically homeless (CH). This year, if funded, Chicago will have 258 new beds dedicated for CH from its selections of PH Bonus projects, which would increase our total stock to 2077 exclusively accessible by CH. Additionally, we are working to retool our PSH stock to prioritize CH for all existing beds through the implementation of CRS to target those with disabilities who are CH for PSH units. CRS uses criteria to rank households by vulnerability (for individuals -- chronic medical condition, age, homeless episodes; for families -- homeless episodes, residential instability, involvement with child welfare and/or informal separation from children, number of children, trauma history). Those most vulnerable will have first access to these PH beds. Of all individuals experiencing homelessness who have applied, 26% would be CH and will be prioritized for PSH.

Describe the CoC's long-term (10 year) plan to create new permanent housing beds for persons who meet HUD's definition of chronically homeless (limit 1000 characters)

Chicago recently developed Plan 2.0 which sets forth priorities to improve outreach coordination to create new permanent housing beds for highly vulnerable, chronically homeless households. As mentioned previously, the CPCH will oversee expansion of CRS to better target all homeless interventions, which will preserve PSH units for CH. The Chicago Alliance will ensure the CoC applies new CoC funds to CH projects. DFSS, the Chicago Housing Authority (CHA), and Chicago Dept. of Housing & Economic Development will continue coordinating plans to increase PSH production via city, state and federal funding streams and maintain a pipeline of PSH to open each year. These entities will review the allocation of resources to CH to ensure new units come online. Finally, the Chicago Alliance will work with CHA to expand "Moving On" initiatives to help free up PH units for CH participants. The work described in this question will be completed in addition to the items in the next question.

Describe how the CoC, by increasing the number of permanent housing beds for chronically homeless, will obtain the national goal of ending chronic homelessness by the year 2015 (limit 1000 characters)

Chicago's Plan 2.0 intentionally aligns with the federal strategic plan to end homelessness. The long-range goal of Plan 2.0 is to create an additional 1,972 units of PSH by 2019, for which CH would be eligible. Chicago's strategies to utilize a coordinated approach to the development of permanent housing beds and outreach to the chronically homeless households that need them will help the CoC obtain the national goal of ending chronic homelessness by the year 2015. As noted above, Chicago has a history of partnership among funders of PSH. Chicago's participation in the HUD/USICH Dedicating Opportunities to End Homelessness initiative will help to expand these coordinated efforts by bringing in new partners, such as the Veterans Administration, establishing short-and-long-term plans to increase the number of permanent housing beds for chronically homeless households and regularly evaluating the impact of those beds on the number of CH households in the CoC.

3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 2: Increase the percentage of participants remaining in CoC funded permanent housing projects for at least six months to 80 percent or more.

Instructions:

Increasing self-sufficiency and stability of permanent housing program participants is an important outcome measurement of HUD's homeless assistance programs. Each CoC-funded permanent housing project is expected to report the percentage of participants remaining in permanent housing for more than six months on its Annual Performance Report (APR). CoCs then use this data from all of its permanent housing projects to report on the overall CoC performance on form 4C. Continuum of Care (CoC) Housing Performance.

In this section, CoCs will indicate the current percentage of participants remaining in these projects, as indicated on form 4C, as well as the expected percentage in 12 months, 5 years, and 10 years. CoCs that do not have any CoC-funded permanent housing projects for which an APR was required should indicate this by entering "0" in the numeric fields and note that this type of project does not exist in the CoC in the narratives. CoCs are then to describe short-term and long-term plans for increasing the percentage of participants remaining in all of its CoC-funded permanent housing projects (SHP-PH or S+C) to at least 80 percent.

What is the current percentage of participants remaining in CoC-funded permanent housing projects for at least six months? 81%

In 12 months, what percentage of participants will have remained in CoC-funded permanent housing projects for at least six months? 82%

In 5 years, what percentage of participants will have remained in CoC-funded permanent housing projects for at least six months? 84%

In 10 years, what percentage of participants will have remained in CoC-funded permanent housing projects for at least six months? 85%

Describe the CoCs short-term (12 month) plan to increase the percentage of participants remaining in CoC-funded permanent housing projects for at least six months to 80 percent or higher (limit 1000 characters)

Chicago consistently exceeds HUD housing retention goals, with an 81% retention rate this year. Chicago's CoC governing body sets outcomes for CoC programs through the Program Models Chart developed through Chicago's original Plan to End Homelessness. The PH goal is that 85% of clients will remain permanently housed for 12 months and 65% of clients for 24 months. The CoC governing body will continue to use these outcome goals to emphasize and evaluate PH retention through its local competition for funding.

Chicago providers have regular access to many resources that promote leading practices in housing retention. The Corp. for Supportive Housing hosts quality improvement trainings for PH providers that emphasize practices like harm reduction and eviction prevention to help keep people in housing. Chicago's Midwest Harm Reduction Institute which focuses on techniques, policies and procedures to keep people housed also provides training and technical assistance to CoC members.

Describe the CoCs long-term (10 year) plan to increase the percentage of participants remaining in CoC-funded permanent housing projects for at least six months to 80 percent or higher (limit 1000 characters)

Chicago has exceeded the HUD goal with an average retention rate of 85% for the past 2 years. Plan 2.0 prioritizes housing retention goals. CAEH and DFSS as implementers of the Plan, will lead efforts to expand resources for eviction prevention efforts, mental health and substance use, and family mediation services and temporary financial assistance to promote housing stability. Through Plan 2.0, Chicago will also expand training and technical assistance on common standards of harm reduction practice to keep people housed. CAEH will continue to review the evaluation of harm reduction practices as part of the local funding competition, which includes PH providers.

Chicago intends to expand the CRS to all PSH. With CRS, Chicago is improving targeting of PSH, and our experience shows that housing retention relates to the match between client and housing/service type. This process will help us maintain a high retention rate, which will be monitored by the CoC governing body.

3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 3: Increase the percentage of participants in CoC-funded transitional housing that move into permanent housing to 65 percent or more.

Instructions:

The transitional housing objective is to help homeless individuals and families obtain permanent housing and self-sufficiency. Each transitional housing project is expected to report the percentage of participants moving to permanent housing on its Annual Performance Report (APR). CoCs then use this data from all of the CoC-funded transitional housing projects to report on the overall CoC performance on form 4C. Continuum of Care (CoC) Housing Performance.

In this section, CoCs will indicate the current percentage of transitional housing project participants moving into permanent housing as indicated on form 4C, as well as the expected percentage in 12 months, 5 years, and 10 years. CoCs that do not have any CoC funded transitional housing projects for which an APR was required should enter "0" in the numeric fields below and note that this type of housing does not exist in the narratives. CoCs are then to describe short-term and long-term plans for increasing the percentage of participants who move from transitional housing projects into permanent housing to at least 65 percent or more.

What is the current percentage of participants in CoC-funded transitional housing projects will have moved to permanent housing? 54%

In 12 months, what percentage of participants in CoC-funded transitional housing projects will have moved to permanent housing? 58%

In 5 years, what percentage of participants in CoC-funded transitional housing projects will have moved to permanent housing? 65%

In 10 years, what percentage of participants in CoC-funded transitional housing projects will have moved to permanent housing? 70%

Describe the CoCs short-term (12 month) plan to increase the percentage of participants in CoC-funded transitional housing projects that move to permanent housing to 65 percent or more (limit 1000 characters)

Chicago is committed to the vision of a home for everyone. We will take aggressive steps in the coming year to increase the percentage of Transitional Housing (TH) residents who move to PH housing. DFSS will allocate supplemental ESG resources to create over 200 units of rapid re-housing in the coming year. These new PH units will be targeted to residents of TH and will help over 400 households a year move from TH to PH. The Chicago Alliance will work with TH and PH providers to identify common barriers to PH and improve access by reducing those documentation barriers. The Alliance also plans on providing training and technical assistance to TH providers on improving data quality to ensure that HMIS is accurately capturing all exits to PH. In addition, CRS expansion to coordinated access will help streamline the transition to PH for TH participants.

Describe the CoCs long-term (10 year) plan to increase the percentage of participants in CoC-funded transitional housing projects that move to permanent housing to 65 percent or more (limit 1000 characters)

The major obstacle to meeting this objective is the lack of PH options in our community to meet the needs of all TH participants. Therefore, Chicago's Plan to End Homelessness sets ambitious, long-term targets for the increase of rapid-rehousing units and permanent supportive housing to address this need. The CoC governing body will be working over the next decade to blend federal, city, and private resources to strategically create a pipeline of new housing and help more TH participants' transition into PH.

The Alliance will also work to expand collaborations with the local PHA, including implementation of "Moving On" initiatives to help free up PH units for TH participants. The Alliance is committed to creating linkages between the online housing search tools in Chicago in order to increase PH accessibility for TH participants. Finally, the Alliance will provide technical assistance to TH programs with low PH placement rates in order to improve their ability to access PH.

3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 4: Increase percentage of participants in all CoC-funded projects that are employed at program exit to 20 percent or more.

Instructions:

Employment is a critical step for homeless persons to achieve greater self-sufficiency, which represents an important outcome that is reflected both in participants' lives and the health of the community. Each CoC-funded project (excluding HMIS dedicated only projects) is expected to report the percentage of participants employed at exit on its Annual Performance Report (APR). CoCs then use this data from all of its non-HMIS projects to report on the overall CoC performance on form 4D. Continuum of Care (CoC) Cash Income.

In this section, CoCs will indicate the current percentage of project participants that are employed at program exit, as reported on 4D, as well as the expected percentage in 12 months, 5 years, and 10 years. CoCs that do not have any CoC-funded non-HMIS dedicated projects (permanent housing, transitional housing, or supportive services only) for which an APR was required should enter "0" in the numeric fields below and note in the narratives. CoCs are to then describe short-term and long-term plans for increasing the percentage of all CoC-funded program participants that are employed at program exit to 20 percent or more.

What is the current percentage of participants in all CoC-funded projects that are employed at program exit? 12%

In 12 months, what percentage of participants in all CoC-funded projects will be employed at program exit? 15%

In 5 years, what percentage of participants in all CoC-funded projects will be employed at program exit? 20%

In 10 years, what percentage of participants in all CoC-funded projects will be employed at program exit? 30%

Describe the CoCs short-term (12 month) plan to increase the percentage of participants in all CoC-funded projects that are employed at program exit to 20 percent or more (limit 1000 characters)

Increasing meaningful and sustainable employment opportunities is one of the key priorities of Chicago's Plan 2.0. We will be working hard in the coming year to help more people find employment and a path out of homelessness. This year, DFSS will be devoting new resources (at least \$500,000) to employment services. Current employment contracts within three DFSS community-based service centers will transition their services to target households that are experiencing or at risk of homelessness. DFSS will also increase contracts of existing providers specializing in targeted employment services for people experiencing homelessness. These programs include a number of innovative job training and social enterprise programs that provide marketable skills in food service, maintenance, and horticulture. These additional employment resources will help more people exit CoC-funded projects with employment income.

Describe the CoCs long-term (10 year) plan to increase the percentage of participants in all CoC-funded projects who are employed at program exit to 20 percent or more (limit 1000 characters)

Over the long term, the Chicago CoC's employment strategy will have three areas of focus: expanding the capacity of the workforce development system; equipping homeless service providers with better tools; and developing innovative approaches to creating career opportunities. The Alliance will create an Employment Task Force with a cross section of workforce development and homeless providers to assess the current system and plan for improvements. By developing new partnerships with the Chicago Jobs Council and the Chicago Cook Workforce Partnership, the Alliance will also ensure federal workforce resources and job training opportunities are made available to people experiencing homelessness. The CPCH will work with key funders to increase resources within the homeless system and expand employment opportunities. Through these comprehensive, multi-year strategies, the CoC will help participants build personal work history and meet their basic financial needs.

3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 5: Increase the percentage of participants in all CoC-funded projects that obtained mainstream benefits at program exit to 20% or more.

Instructions:

Access to mainstream resources is a critical step for homeless persons to achieve greater self-sufficiency, which represents an important outcome that is reflected both in participants' lives and the health of the community. Each CoC-funded project (excluding HMIS dedicated only projects) is expected to report the percentage of participants who received mainstream resources by exit on its Annual Performance Report (APR). CoCs then use this data from all of its non-HMIS projects to report on the overall CoC performance on form 4E. Continuum of Care (CoC) Non-Cash Benefits.

In this section, CoCs will indicate the current percentage of project participants who received mainstream resources by program exit, as reported on 4E, as well as the expected percentage in 12 months, 5 years, and 10 years. CoCs that do not have any CoC-funded non-HMIS dedicated projects (permanent housing, transitional housing, or supportive services only) for which an APR was required should enter "0" in the numeric fields below and note in the narratives. CoCs are to then describe short-term and long-term plans for increasing the percentage of all CoC-funded program participants who received mainstream resources by program exit to 20 percent or more.

- What is the current percentage of participants in all CoC-funded projects that receive mainstream benefits at program exit?** 65%
- in 12 months, what percentage of participants in all CoC-funded projects will have mainstream benefits at program exit?** 66%
- in 5 years, what percentage of participants in all CoC-funded projects will have mainstream benefits at program exit?** 67%
- in 10 years, what percentage of participants in all CoC-funded projects will have mainstream benefits at program exit?** 68%

Describe the CoCs short-term (12 months) plan to increase the percentage of participants in all CoC-funded projects that receive mainstream benefits at program exit to 20% or more (limit 1000 characters)

Chicago's rate of participants accessing benefits at exit (65%) exceeds the HUD goal. Our experience demonstrates that increasing mainstream benefits significantly contributes to housing stability. Eligibility screening/advocacy are essential program elements in Chicago's Program Models Chart, which is used by the CoC governing body to establish performance targets for CoC funded programs in the local evaluation process. The CoC governing body will continue to use these performance targets to emphasize ongoing focus on this element.

CoC members such as Heartland Health Outreach provide SSI/SSDI Outreach, Access, and Recovery (SOAR) training, which increases capacity of providers to assist clients. Health & Disability Advocates provides screening and legal assistance in overcoming barriers to approval for SSI/SSDI. HDA will continue to partner with outreach teams working on housing individuals through CRS, ensuring that benefits are in process when clients are housed.

Describe the CoCs long-term (10-years month) plan to increase the percentage of participants in all CoC-funded projects that receive mainstream benefits at program exit to 20% or more (limit 1000 characters)

Chicago's Plan 2.0 calls for public and private systems of care to work in coordination to end homelessness. A key objective of this strategy is to ensure rapid assessment and connection to mainstream resources. As the Affordable Care Act is implemented locally, state and local Medicaid expansion efforts will create new models of care and expand eligibility. The AIDS Foundation of Chicago's SAMHSA Consortium will work towards goals to enroll people with serious mental illness or health conditions who are experiencing homelessness into coordinated care systems, in partnership with CoC members leading coordinated care pilots. Finally, under the oversight of the CoC Governing body, the CoC will plan and implement a coordinated access system for all homeless resources. One objective of that effort is to increase access to public assistance programs by connecting households to benefit applications at the point of access to the system and provide services to address application barriers.

3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 6: Decrease the number of homeless individuals and families:

Instructions:

Ending homelessness among households with children, particularly for those households living on the streets or other places not meant for human habitation, is an important HUD priority. CoCs can accomplish this goal by creating new beds and/or providing additional supportive services for this population.

In this section, CoCs are to describe short-term and long-term plans for decreasing the number of homeless households with children, particularly those households that are living on the streets or other places not meant for human habitation. CoCs will indicate the current total number of households with children that was reported on their most recent point-in-time count. CoCs will also enter the total number of homeless households with children they expect to report on in the next 12 months, 5 years, and 10 years.

- What is the current total number of homeless households with children as reported on the most recent point-in-time count?** 770%
- In 12 months, what will be the total number of homeless households with children?** 750%
- In 5 years, what will be the total number of homeless households with children?** 500%
- In 10 years, what will be the total number of homeless households with children?** 300%

Describe the CoCs short-term (12 month) plan to decrease the number of homeless households with children (limit 1000 characters)

The Chicago CoC is committed to decreasing the number of homeless families through rapid access to short and long-term housing resources, preventing homelessness in the first place, and increasing child and family supportive services. As Chicago developed the Central Referral System for PSH, family providers worked with the Corp. for Supportive Housing to develop a Family Vulnerability Index. The inclusion of the Family VI in CRS improves targeting of PH resources to the families in most need. For shorter-term options, in 2013 the Department of Family and Support Services allocated ESG resources to create over 200 units of rapid re-housing, helping over 400 households a year move to PH. Finally, DFSS and the FACT Planning Coalition continue to promote cross-training between homeless services, child development services, and child welfare, strengthening resources that promote family stability.

Describe the CoCs long-term (10 year) plan to decrease the number of homeless households with children (limit 1000 characters)

Plan 2.0 utilized data/best practices from local/national family initiatives to create long-term strategies to end family homelessness. These include prioritizing families experiencing frequent or long-term homelessness for permanent supportive housing through CRS, increasing short/medium-term rental assistance, and adding additional services that will focus on follow-up services to prevent shelter recidivism. Another long-term strategy is to increase the CoC's prevention and shelter diversion resources to prevent families from becoming homeless if at all possible. CAEH and DFSS will lead implementation of these plans.

Chicago's homeless families are mainly sheltered; however, CoC strategies encompass unsheltered families. DFSS is developing a coordinated outreach strategy with providers and other city agencies to ensure that homeless individuals and families living on the street access shelter, PH, and services. This strategy will support efforts to reduce family homelessness.

3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 7: Intent of the CoC to reallocate Supportive Services Only (SSO) and Transitional Housing (TH) projects to create new Permanent Housing (PH) projects.

Instructions:

CoCs have the ability to reallocate poor performing supportive services only and transitional housing projects to create new permanent supportive housing, rapid re-housing, or HMIS projects during each competition. Reallocation of poor performing projects can be in part or whole as the CoC determines.

CoCs will indicate if they intend to reallocate projects during this year's competition and if so, indicate the number of projects being reallocated (in part or whole) and if reallocation will be used as an option to create new permanent supportive housing, rapid re-housing, or HMIS projects in the next year, next two years, and next three years. If the CoC does not intend to reallocate it should enter '0' in the first section.

If the CoC does intend to reallocate projects it should clearly and specifically describe how the participants in the reallocated projects (supportive services only and/or transitional housing) will continue to receive housing and services. If the CoC does not intend to reallocate or does not need to reallocate projects to create new permanent supportive housing, rapid re-housing, or HMIS projects it should indicate the each of the narrative sections.

- Indicate the current number of projects submitted on the current application for reallocation:** 102
- Indicate the number of projects the CoC intends to submit for reallocation on the next CoC Application (FY2013):** 2
- Indicate the number of projects the CoC intends to submit for reallocation in the next two years (FY2014 Competition):** 2
- Indicate the number of projects the CoC intends to submit for reallocation in the next three years (FY2015 Competition):** 2

If the CoC is reallocating SSO projects, explain how the services provided by the reallocated SSO projects will be continued so that quality and quantity of supportive services remains in the Continuum (limit 750 characters)

The CoC is planning on reallocating 4% of all SSO projects in order to create coordinated access, as required by the HEARTH Act. We share HUD's goal of funding projects that are effective and high-performing, which is why we place poor-performing projects on funding probation during our local evaluation process. Poor-performing projects receive intensive TA provided by the Chicago Alliance and have all improved their performance. Therefore, we are confident that our SSO projects provide critical services, responsible for over 50% of people who found employment and 46% of those who acquire benefits while enrolled in the program. SSO in Chicago also demonstrate that 83% of those who leave the project are housed in transitional or permanent locations, which we consider a positive outcome. This year, the CoC governing body determined that reallocating any SSO projects to create new PH units would destabilize our system.

If the CoC is reallocating TH projects, explain how the current participants will obtain permanent housing or efforts to move participants to another transitional housing project (limit 750 characters)

The CoC is planning on reallocating a small percentage of 16 TH projects in order to devote new resources to HMIS, a HEARTH Act priority. We share HUD's goal of funding projects that are high-performing. That is why we place poor performing projects on funding probation. Poor-performing projects receive intensive technical assistance provided by the Alliance and have all improved their performance. This year, the CoC governing body determined that reallocating any TH projects, above what might be lost due to potential cuts of projects in Tier 2, would destabilize our system. In the future, the CoC expects our HUD technical assistance to lead to a series of reallocation strategies in line with the priorities of Plan 2.0.

3B. Continuum of Care (CoC) Discharge Planning: Foster Care

Instructions:

The McKinney-Vento Act requires that State and local governments have policies and protocols in place to ensure that persons being discharged from publicly-funded institutions or systems of care are not discharged immediately into homelessness. To the maximum extent practicable, Continuums of Care should demonstrate how they are coordinating with and/or assisting in State or local discharge planning efforts to ensure that discharged persons are not released directly to the streets, emergency homeless shelters, or other McKinney-Vento homeless assistance programs.

Is the discharge policy in place "State" mandated policy or "CoC" adopted policy? State Mandated Policy

If "Other," explain:

Describe the efforts that the CoC has taken to ensure that persons are not routinely discharged into homelessness (limit 1000 characters)

The Chicago CoC supports the Illinois Dept. of Children and Family Services' (DCFS) discharge planning policies for wards of the state that routinely targets youth who are at-risk of becoming homeless. Chicago CoC also assists DCFS to identify and secure other housing resources to benefit youth aging out of foster care to ensure wards of the state are not routinely discharged into homelessness. In partnering with the Chicago CoC, DCFS has appointed staff to serve on the Chicago Planning Council on Homelessness and participates on the CoC's Countywide Discharge Planning Committee that looks at discharge planning practices of institutions across the Chicago region.

If the CoC does not have an implemented discharge plan for foster care, specifically describe the gap(s) in completing a comprehensive discharge plan (limit 1000 characters)

n/a

Specifically, identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness (limit 1000 characters)

DCFS' discharge program targets youth who are at-risk of becoming homeless & other youth aging out of the foster care by providing them with housing options that include Independent Living Programs, Transitional Living Programs & other residential programs. Program goals include preparing the youth's transition to adulthood. Youth who choose to exit foster care prior to turning 21 can be assisted by DCFS' Youth Housing Assistance Program (YHAP) shortly before and after they exit care. YHAP provides housing advocacy & cash assistance to young people ages 18 to 21. Eligible youth receive start-up housing grants, a partial housing subsidy & follow up services. Housing location services are offered by partnering with Chicago CoC service providers experienced with serving youth such as La Casa Norte, Habilitative Systems, Inc. and Lutheran Child and Family Services. Other CoC agencies such as Beacon Therapeutic provide services to young moms who age out of the foster care system.

Specifically indicate where persons routinely go upon discharge other than HUD McKinney-Vento funded programs (limit 1000 characters)

HUD McKinney-Vento funds are not used in the DCFS discharge process for wards of the state. DCFS provides housing to youth through state funded programs until their 21st birthday. These include traditional foster care placement, Independent Living Programs & other residential programs. Wards who are enrolled in the Youth in College Program prior to their 21st birthday can continue to receive a payment while enrolled in a college or employment training program to help with housing payments up until their 23rd birthday. DCFS contracts with community nonprofits to provide the housing location services & most youth live in unsubsidized units from private landlords based on established relationships with DCFS or agencies. Follow-up services are provided for at least 3 months after the youth secures housing. Youth who age out of care but later decide that they want to return prior to turning 21 can do so by contacting DCFS & receive services from Independent or Transition Living Programs.

3B. Continuum of Care (CoC) Discharge Planning: Health Care

Instructions:

The McKinney-Vento Act requires that State and local governments have policies and protocols in place to ensure that persons being discharged from publicly-funded institutions or systems of care are not discharged immediately into homelessness. To the maximum extent practicable, Continuums of Care should demonstrate how they are coordinating with and/or assisting in State or local discharge planning efforts to ensure that discharged persons are not released directly to the streets, emergency homeless shelters, or other McKinney-Vento homeless assistance programs.

**Is the discharge policy in place "State" Other
mandated
policy or "CoC" adopted policy?**

If "Other," explain:

Although Chicago CoC does not have an implemented discharge plan for health care, it has long been a stated priority of the CoC to advocate for and support the need to encourage Chicago's health care system to implement a discharge planning policy that does not routinely discharged homeless persons into homelessness.

Describe the efforts that the CoC has taken to ensure that persons are not routinely discharged into homelessness (limit 1000 characters)

Members of the CoC work with 3 area hospitals to implement discharge planning polices for at-risk patients to prevent homelessness. This work builds off the successful model of Chicago's Housing for Health Partnership (CHHP) run by the AIDS Foundation of Chicago (AFC) which provides coordinated case management to ensure housing placements upon discharge from hospitals. CHHP's findings (published in the Journal of the American Medical Association) prove that hospitals and service providers can work effectively together to prevent homelessness & reduce costly recidivism. AFC is an active member of the CoC & staff sits on the Chicago Planning Council & the Chicago Alliance's Board of Directors. As a CoC partner, AFC is a strong advocate of homeless persons battling serious health care issues. The CoC is optimistic that the CICOH will examine CHHP & make recommendations to the CoC to replicate it in some form to ensure patients being released are not routinely discharged into homelessness.

If the CoC does not have an implemented discharge plan for health care, specifically describe the gap(s) in completing a comprehensive discharge plan (limit 1000 characters)

One of the strategies of Chicago's Plan 2.0 calls for public and private systems of care to work together to ensure ending homelessness is a shared priority. Key to this collaboration is to "foster sustained, high level coordination among government agencies on the issue of ending homelessness by establishing a Chicago Interagency Council on Homelessness (CICOH)". The establishment of this council would bring together policy and decision makers to identify the gaps in completing a comprehensive discharge plan for homeless persons. It can also build on the passing of the Affordable Care Act that calls for providing comprehensive physical & behavioral health care to persons experiencing homelessness which includes care coordination with housing and services. The CoC would like to see the CICOH initiate as one of its first goals to work on developing & implementing a discharge planning policy for homeless persons being discharged from hospitals that would be fully supported by the CoC.

Specifically, identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness (limit 1000 characters)

Currently, AFC is leading a citywide collaboration between 15 healthcare, housing & social service agencies to secure subsidized housing for homeless persons who are discharged from area hospitals. The 3 main hospitals who partner with Chicago CoC are John Stroger Hospital, Mount Sinai Hospital & Advocate Illinois Masonic Hospital. These partnerships are with agencies that are well established & experienced service providers of Chicago CoC who provide housing & support services to prevent homeless persons from being discharge into homelessness. The housing & services are provided by several housing partners including Chicago House, Mercy & Heartland Health Outreach who all accept hospital referrals for persons who are homeless into their programs. The CoC continues to work with state agency officials & the U.S. Interagency Council on Homelessness to identify how implementation of the Affordable Care Act & expansion of Medicaid coverage can supplement services within subsidized housing.

Specifically indicate where persons routinely go upon discharge other than HUD McKinney-Vento funded programs (limit 1000 characters)

As a CoC partner, AFC is closely connected with a number of housing providers and private landlords that accept referrals of homeless patients that are discharged from community health care institutions and facilities. This partnership extends to agencies that are not HUD funded McKinney-Vento programs, that are experienced with providing housing and exceptional wraparound services to homeless clients to keep them stably housed. Among some of these service providers are Housing Opportunities for Women, Christian Community Health Center and Heartland Human Care Services all well qualified to provide appropriate housing and health care services to clients who are homeless.

3B. Continuum of Care (CoC) Discharge Planning: Mental Health

Instructions:

The McKinney-Vento Act requires that State and local governments have policies and protocols in place to ensure that persons being discharged from publicly-funded institutions or systems of care are not discharged immediately into homelessness. To the maximum extent practicable, Continuums of Care should demonstrate how they are coordinating with and/or assisting in State or local discharge planning efforts to ensure that discharged persons are not released directly to the streets, emergency homeless shelters, or other McKinney-Vento homeless assistance programs.

Is the discharge policy in place "State" mandated policy or "CoC" adopted policy? State Mandated Policy

If "Other," explain:

Describe the efforts that the CoC has taken to ensure that persons are not routinely discharged into homelessness (limit 1000 characters)

The Illinois Department of Human Services Division of Mental Health (DMH) has a long established policy that homeless patients of mental health care facilities are not to be discharged into homelessness if at all possible and the Chicago CoC supports this discharge policy. Moreover, as a result of implementing the Williams Consent Decree, DMH also looks to ensure that patients residing in Institutes of Mental Disease (IMD) can be discharged and placed in community-based settings with services & supports. As an active member of Chicago's CoC, DMH stays in close contact with the needs and experiences of people experiencing homelessness who also have mental health needs. DMH staff sits on the Chicago Planning Council on Homelessness, chairs the Homeless Action Constituency Group, and participates on the CoC's Countywide Discharge Planning Committee that looks at discharge planning practices of institutions across the Chicago region.

If the CoC does not have an implemented discharge plan for mental health, specifically describe the gap(s) in completing a comprehensive discharge plan (limit 1000 characters)

n/a

Specifically, identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness (limit 1000 characters)

DMH works closely with service providers of the Chicago CoC to secure placements prior to discharge from the 3 community mental health hospitals, patients residing in IMDs and other health care facilities to place patients who are homeless into appropriate community housing placements upon discharge. Key community stakeholders in the Chicago CoC that receive referrals from state operated facilities as well as community mental health facilities which provide housing and services include Thresholds, Northwestern Memorial Hospital, Heartland Health Outreach (HHO), Trilogy and Circle Family Care. In addition, Chicago's Department of Family and Support Services (DFSS) Interim Housing Programs and community emergency shelters also work to identify and place consumers with mental health conditions obtain permanent housing with support services.

Specifically indicate where persons routinely go upon discharge other than HUD McKinney-Vento funded programs (limit 1000 characters)

DMH works with contracted housing providers to maintain a list of non HUD funded programs who accept referrals of homeless individuals being discharged. This includes partnering with community based service providers as a result of the Williams Consent Decree in their efforts to place persons with mental illnesses from IMDs into community-based settings with services & supports. Thresholds & HHO have extensive experience in providing mental health services & permanent supportive housing along with private landlords that accept patients who are homeless and being discharged from community mental health hospitals. DFSS also funds two Re-entry Support Centers that provide comprehensive information, referral and support to ex-offenders returning to their communities, linking them with housing and shelter, education, employment services, healthcare and other needs. DFFS supports a network of job training and placement programs focusing on the needs of ex-offenders.

3B. Continuum of Care (CoC) Discharge Planning: Corrections

Instructions:

The McKinney-Vento Act requires that State and local governments have policies and protocols in place to ensure that persons being discharged from publicly-funded institutions or systems of care are not discharged immediately into homelessness. To the maximum extent practicable, Continuums of Care should demonstrate how they are coordinating with and/or assisting in State or local discharge planning efforts to ensure that discharged persons are not released directly to the streets, emergency homeless shelters, or other McKinney-Vento homeless assistance programs.

Is the discharge policy in place "State" mandated policy or "CoC" adopted policy? State Mandated Policy

If "Other," explain:

Describe the efforts that the CoC has taken to ensure that persons are not routinely discharged into homelessness (limit 1000 characters)

Chicago's Plan 2.0 has the expressed goal to work across systems of care to ensure ending homeless is a shared priority. The goal is to improve Chicago CoC efforts to prevent institutions from discharging individuals into homelessness. Chicago CoC works with the Illinois Dept. of Corrections & Cook County Jail to ensure successful reentry into the community & to prevent homelessness. Recently, the Chicago Dept. of Public Health began a task group to address the needs of persons who have serious mental illness & are involved with the homeless & criminal justice systems. Areas of focus have been to improve Medicaid benefit access when someone is discharged & looking at funding options to create additional housing and service options to support the discharge process. City, advocates & providers have been part of this work group. The Chicago CoC will partner with IDOC to implement homeless prevention and rapid rehousing programs in order to prevent homelessness upon discharge & recidivism.

If the CoC does not have an implemented discharge plan for corrections, specifically describe the gap(s) in completing a comprehensive discharge plan (limit 1000 characters)

n/a

Specifically, identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness (limit 1000 characters)

At IDOC, the Trained, Reformed, And Capable program begins at prison intake & works to identify the offenders needs in order to be ready with appropriate housing, often in group homes or halfway houses, upon release. Offenders with special needs i.e., substance abuse, mental health, or disability are assigned to staff, that monitor their progress while incarcerated and help locate specialized services and housing in the community upon release. IDOC also works with municipal, state, and federal agencies to connect offenders to Social Security, mental health case management & veterans benefits before release. IDOC also works with city, state & federal agencies to connect offenders to Social Security, mental health care services & veterans benefits before release. To aid in this effort in 2011, IDOC and DMH linked their data systems so they could identify individuals being served in both the corrections & mental health systems to improve discharge planning efforts and reduce recidivism.

Specifically Indicate where persons routinely go upon discharge other than HUD McKinney-Vento funded programs (limit 1000 characters)

Cook County Jail, via the Sheriff's Re-Entry Council and the CoCs Discharge Planning Committee, have worked to better integrate community agencies into the jail via regular resource fairs as well as use their data systems to connect detainees to subsidized housing and services upon release. In 2011, the Jail started using www.reentryillinois.net as a referral source for detainees to locate affordable housing of which some are not supported by HUD McKinney-Vento funds, to secure public benefits and employment for individuals being discharged.

3C. Continuum of Care (CoC) Coordination

Instructions:

A CoC should regularly assess its local homeless assistance system and identify gaps and unmet needs. CoCs can improve their communities through long-term strategic planning. CoCs are encouraged to establish specific goals and implement short-term action steps. Because of the complexity of existing homeless systems and the need to coordinate multiple funding sources and priorities, there are often multiple long-term strategic planning groups. It is imperative for CoCs to coordinate, as appropriate, with each of these existing strategic planning groups to meet local needs.

Does the Consolidated Plan for the jurisdiction(s) that make up the CoC include the CoC strategic plan goals for addressing homelessness? Yes

If 'Yes', list the goals in the CoC strategic plan that are included in the Consolidated Plan:

Crisis Response System: Create an effective crisis response system that prevents homelessness and rapidly returns people who experience homelessness to stable housing.
Access to Stable/Affordable Housing: Create/maintain stable/affordable housing for households experiencing or at risk of homelessness.
Youth: Create comprehensive, developmentally appropriate service options for youth who experience homelessness in order to prevent them from becoming homeless adults.
Employment: Increase meaningful/sustainable employment opportunities for people experiencing or most at risk of homelessness.
Advocacy/Civic Engagement: Engage all of Chicago in a plan that creates a path to securing a home for everyone in our community.
Cross-Systems Integration: Work across public/private systems of care to ensure ending homelessness is a shared priority.
Capacity Building: Ensure a strong homeless assistance system capable of implementing Plan 2.0 HEARTH Act performance standards.

Now that the Homeless Prevention and Rapid Re-housing Program (HPRP) program(s) in the CoC have ended, describe how the CoC is working with service providers to continue to address the population types served by the HPRP program(s) (limit 1000 characters)

Chicago, through Plan 2.0, has committed to significantly increasing prevention and rapid re-housing resources over the next seven years. DFSS contracted with the local Corp. for Supportive Housing to analyze the outcomes of the HPRP program. DFSS utilized this data to inform planning for ESG-funded rapid re-housing and homeless prevention services and continues to fund legal services and prevention case management on a smaller scale. HPRP filled a gap in the CoC services by providing short-medium term rental assistance and established provider competency in these models. As a result, the CoC is working with DFSS to implement ESG rapid re-housing and planning for opportunities to apply for CoC Program rapid re-housing. While we believe that a key barrier to housing is the availability of affordable options, CAEH as the lead CoC agency, is working with interim housing providers to identify barriers to rapidly re-housing clients in an effort to improve access to existing resources.

Describe how the CoC is participating in or coordinating with any of the following: HUD-VASH, HOPWA, Neighborhood Stabilization Programs, Community Development Block Grants, and ESG? (limit 2500 characters)

The Chicago Neighborhood Stabilization (NSP) program is operated by the Department of Housing and Economic Development (DHED). NSP funds were used to acquire and rehabilitate two buildings that will be owned and managed by CoC members. Inspiration Corporation will own and manage 5840 S. King, which will provide four units of permanent supportive housing. The Primo Center will own and manage 4231 W. Division, which will provide 14 units of permanent supportive housing. As additional NSP properties are acquired, DHED will explore all opportunities to incorporate permanent supportive housing.

Chicago's CoC has continued to increase coordination with HUD VASH resources. The Jesse Brown Medical Center (JBMC) staff is working with homeless veteran households to receive VA benefits and engage in the VASH process.

CoC members such as the AIDS Foundation of Chicago provide and manage HOPWA funded programs. AFC leadership serves on both the CoC governing body and Chicago's HIV Housing and Services governing body. The CoC has an AIDS Housing Constituency group which includes providers that receive both CoC and HOPWA funds.

The CoC participates in the development of the Consolidated Plan and Annual Action Plans for CDGB and ESG funding through review and public comment. For ESG, the CoC governing body reviews and approves of substantial amendment submission. As ESG and CDBG also fund a range of housing related services, many CoC members receive these funds through DFSS homeless and workforce contracts.

Indicate if the CoC has established policies that require homeless assistance providers to ensure all children are enrolled in school and connected to appropriate services within the community? Yes

If 'Yes', describe the established policies that are in currently in place: DFSS and the Chicago Alliance require all of its programs to ensure homeless children are enrolled in school and access all McKinney-funded educational services. DFSS requires this in its scopes of services with emergency shelter providers and interim housing providers, and requires that school-aged children are enrolled in school and also that all children aged 0 to 5 receive developmental screenings on a regular basis. DFSS enforces this policy through regular program audits. The CoC local Evaluation Process for HUD-funded agencies required programs for the first time in 2011 to identify whether they had established internal policies and procedures regarding educational assurances for homeless families. This will become a basic threshold question in 2013.

Specifically describe the steps the CoC, working with homeless services providers, has taken to collaborate with local education authorities to ensure individuals and families who become or remain homeless are informed of their eligibility for McKinney-Vento educational services (limit 1500 characters)

To facilitate the implementation of the above-mentioned policies at the agency level, DFSS partners with Chicago Public Schools' (CPS) "Students in Temporary Living Situations (STLS)" Program to administer joint trainings for homeless shelters (including ESG programs) and housing programs, at which providers receive training on McKinney-Vento educational services and procedures for accessing CPS enrollment, school uniforms, supplies, and transportation assistance for Children residing in shelters. Additional trainings or refresher trainings are offered on an as needed basis. At trainings, shelter staff are informed of schools' responsibilities related to homeless students, including enrolling homeless children immediately, regardless of documentation and fees, and providing families with a choice of schools and transportation assistance. Trainings also inform providers of their responsibility for identifying homeless students, ensuring that they are enrolled in school, and coordinating transportation assistance.

Specifically describe how the CoC collaborates, or will collaborate, with emergency shelters, transitional housing, and permanent housing to ensure families with children under the age of 18 are not denied admission or separated when entering shelter or housing (limit 1500 characters)

Ensuring family preservation by housing programs is an important priority of the CoC and the HEARTH Act, and this commitment is reflected as an action item in Plan 2.0. DFSS, in coordination with CAEH, provided trainings on HEARTH Act changes including family preservation in 2012. In the coming year, DFSS and CAEH will continue training and technical assistance for providers around making policy changes to align with this priority, assessing structural changes to facilities that may be needed to accommodate ranges of age and genders in congregate settings, modifying service options for providers who are now serving clients of new ages, and creating action plans for programs that need to improve compliance.

DFSS will also provide ongoing technical assistance to Catholic Charities, the mobile outreach service provider that manages the city's shelter clearinghouse and transportation to shelter, to monitor implementation of these policies and troubleshoot barriers that arise. CAEH, the CoC governing body and DFSS include evaluation of this policy in their respective evaluation/monitoring processes.

Describe the CoC's current efforts to combat homelessness among veterans. Narrative should identify organizations that are currently serving this population, how this effort is consistent with CoC strategic plan goals, and how the CoC plans to address this issue in the future (limit 1500 characters)

The Chicago CoC is committed to the goal of ending veteran homelessness by 2015. Over 1,000 veterans are served by Chicago's homeless system each year, representing 8% of the total adult population served. In addition to the local VA, 9 Chicago agencies take the lead in serving veterans experiencing homelessness: A Safe Haven Foundation, Catholic Charities, Chicago Housing Authority, Featherfist, Heartland Alliance, Inner Voice, Interfaith House, Northside Housing, and Volunteers of America. These programs provide a wide range of services that are supported by our strategic plan, including homeless prevention and rapid re-housing, transitional housing, and permanent supportive housing. Chicago's recently revised Plan to End Homelessness specifically addresses the need to increase collaboration with federally-funded VA programs through integrated homeless outreach and improved access to veteran-specific housing and services. The Chicago Alliance, the CoC lead agency, has established a "No Wrong Door" program to ensure that the CoC and the local VA are working collaboratively to end homelessness among veterans. The Chicago CoC has also been selected to participate in the HUD-USICH "Dedicating Opportunities to End Homelessness" initiative which will help focus our community's resources on housing additional veterans. Through all these initiatives, the CoC is confident that we will be able to contribute to the national goal of ending veteran homelessness.

Describe the CoC's current efforts to address the youth homeless population. Narrative should identify organizations that are currently serving this population, how this effort is consistent with the CoC strategic plan goals, and the plans to continue to address this issue in the future (limit 1500 characters)

The Chicago CoC is making a concerted effort to address the troubling trend of youth homelessness. For the first time, youth homelessness has been identified as a top community priority in Chicago's Plan 2.0. Our goal is to create a comprehensive, developmentally appropriate menu of services in order to prevent homeless youth from becoming the next generation of homeless adults. As part of Plan 2.0 implementation, we are very excited that the City of Chicago is committing \$2 million to create new youth housing and drop-in centers this year.

Seven members of the Chicago CoC take the lead in providing services to homeless youth: Heartland Alliance, La Casa Norte, New Moms, A Safe Haven Foundation, Teen Living Programs, The Night Ministry, and Unity Parenting and Counseling. The services currently provided by these agencies mirror the goals of our strategic plan: intensive street outreach and drop-in centers sensitive to sexual orientation and identity to prevent homelessness; a range of housing options and family reunification strategies to ensure housing first in a safe, stable permanent home; and educational, employment and health services that prepare youth for adulthood.

In addition, recognizing the need for robust data, the Chicago CoC is working to conduct an accurate count of youth experiencing homelessness this year in order to inform our strategic planning efforts and resource allocation.

Has the CoC established a centralized or coordinated assessment system? No

If 'Yes', describe based on ESG rule 576.400 (limit 1000 characters)

n/a

Describe how the CoC consults with the ESG jurisdiction(s) to determine how ESG funds are allocated each program year (limit 1000 characters)

Chicago's original Ten-Year Plan to End Homelessness and recently updated Plan 2.0 was developed by the CoC, CoC governing body and DFSS (ESG recipient). Each year, DFSS establishes funding priorities for the use of ESG funds that align with the priorities of this community plan. DFSS created an ESG Advisory Committee in partnership with CAEH, the lead CoC agency, in developing the City's plan for ESG rapid re-housing and prevention priorities. This committee assisted the City in determining how to allocate ESG funds for eligible activities and establishing performance standards by jointly reviewing an analysis of data regarding Chicago's implementation of HPRP. This plan, as submitted in our substantial amendment, was reviewed and approved by the CoC governing body. In 2013, DFSS and CAEH, along with CoC members, will conduct a systems analysis for HUD CoC, ESG, and other homeless services funding that are part of the broader homeless system to inform future allocation decisions.

Describe the procedures used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to request housing or services in the absence of special outreach (limit 1000 characters)

Chicago is committed to the vision of a home for everyone. To that end, access to housing and supportive services involves a range of strategies to engage all persons in need of services. The CoC has implemented coordinated access systems for prevention and PSH, and will expand to all homeless services in the coming year. These systems utilize standardized application processes, offer multiple languages and accommodation, follow fair housing laws, and can be utilized with or without a provider involved. Street outreach resources are used to identify and engage persons who may not seek resources. Finally, Chicago broadly markets a 311 non-emergency service in multiple languages, connecting callers to shelter transportation, well-being checks, and the coordinated homeless prevention access system. Hospitals emergency rooms and police stations are public locations where individuals can go to contact 311 and request shelter transportation, ensuring multiple entry points to assistance.

3D. Continuum of Care (CoC) Strategic Planning Coordination

Instructions:

CoCs should be actively involved in creating strategic plans and collaborating within the jurisdiction towards ending homelessness. CoCs should clearly and specifically respond to the following questions as they apply to coordination and implantation within the CoC, planning, review, and updates to the local 10-Year plan that includes incorporating the Federal Strategic Plan, "Opening Doors," and coordination with Emergency Solutions Grants within the CoC jurisdiction.

Has the CoC developed a strategic plan? Yes

Does the CoC coordinate the implementation of a housing and service system that meets the needs of homeless individuals and families? (limit 1000 characters)

The Chicago CoC manages a housing and service system comprised of 185 HUD-funded projects serving over 16,000 households per year. The CPCH is responsible for establishing policies and priorities for Chicago's annual HUD funding; analyzing the homeless system to identify needs; monitoring HMIS; and overseeing implementation of Chicago's recently revised Plan to End Homelessness. The Planning Council led the process to update Chicago's Plan to ensure that the housing and services system met the current needs of our community. The robust planning process included multiple opportunities for community stakeholders to weigh in on the strategic direction of Chicago's homeless system. The system is also coordinated through our local Programs Model Chart, which outlines the requirements and expected outcomes of all programs serving homeless individuals and families.

Describe how the CoC provides information required to complete the Consolidated Plan(s) within the CoC's geographic area (limit 1000 characters)

The City of Chicago, which has primary responsibility for developing the Consolidated Plan within our geographic area, is an active player in the CoC. A top city official sits on the CoC governing body and city government takes a leadership role in implementation of Chicago's Plan to End Homelessness. The Chicago Alliance to End Homelessness, the CoC lead agency, regularly provides data, information, and guidance to the city as it completes the Consolidated Plan. In addition, amendments to the Consolidated Plan and opportunities for public comment are distributed widely to the CoC membership to encourage participation in the local planning process. Some decisions concerning the Consolidated Plan, including the recent substantial amendment for ESG, are vetted and approved by the CoC governing body.

Describe how often the CoC and jurisdictional partner(s) review and update the CoC's 10-Year Plan (limit 1000 characters)

In 2011, the CoC governing body launched a process to redevelop Chicago's Plan to End Homelessness. There were multiple catalysts for redeveloping our Plan including: entering the 10th year of the original Plan; a request by the new Mayor Rahm Emanuel; changes brought on by the HEARTH Act and Opening Doors; and a recently released evaluation of Chicago's Plan. The development of Plan 2.0 was designed to be inclusive of as many stakeholders as possible, driven by data, and attentive to federal performance measures. Over 8 months, over 500 stakeholders – including 150 consumers – participated in the development of Plan 2.0. Plan 2.0 is a broad-ranging, 7-year action plan that reaffirms and builds on the strategies of our first plan and outlines 7 strategic priorities. The Alliance will provide semi-annual reports on Plan 2.0 implementation to the CoC governing body and the broader community, providing regular opportunities to review (and revise if necessary) our strategic direction.

Specifically describe how the CoC incorporates the Federal Strategic Plan, "Opening Doors" goals in the CoC's jurisdiction(s) (limit 1000 characters)

One of the primary catalysts for recently redeveloping Chicago's Plan was to align our strategic direction with that of Opening Doors. Plan 2.0 was designed to share many of the same objectives as Opening Doors including: retooling the crisis response system; increasing access to stable and affordable housing; increasing economic security; and increasing civic engagement. Plan 2.0 also shares priority populations with Opening Doors: families, youth, chronic homeless, and veterans. In addition, Plan 2.0 includes an objective of fostering high-level coordination among government agencies by establishing our very own local Interagency Council on Homelessness. The CoC is working closely with our regional representative of the USICH to ensure that implementation of our Plan continues to incorporate the goals of Opening Doors. Our participation in the HUD initiative, Dedicating Opportunities to End Homelessness, will further our ability to incorporate federal goals into local planning.

Select the activities in which the CoC coordinates with the local Emergency Solutions Grant(ESG):

Determines how to allocate ESG grant for eligible activities, Develop standards for evaluating the outcomes of activities assisted by ESG funds, Develop performance standards for activities assisted by ESG funds, None, Develop funding policies and procedures for the operation and administration of HMIS for ESG funded projects

Based on the selections above, describe how the CoC coordinates with the local ESG funding (limit 1000 characters)

As the City of Chicago is the local ESG recipient, city officials make special considerations to coordinate with the CoC on ESG decision-making. As established in the Annual Action Plan for HUD, the city aligns ESG funding priorities and performance standards with Plan 2.0 and the Program Models Chart.

Specifically to plan for the ESG allotment in 2012, the city created an ESG Advisory Committee in partnership with the Chicago Alliance, the CoC lead agency. The committee was made up of Alliance staff, city staff, representatives of four HPRP service providers, and a formerly homeless consumer. Using Chicago's experience of implementing HPRP, the committee assisted the city in determining how to allocate ESG funds and develop performance standards for homeless prevention and rapid re-housing projects. The city also made the ESG substantial amendment to the Consolidated Plan available for public comment and presented its plan to the CoC governing body, which approved the plan.

Does the CoC intend to use HUD funds to serve families with children and youth defined as homeless under other Federal statutes? No

If 'Yes', has the CoC discussed this with the local HUD CPD field office and received approval? No

If 'Yes', specifically describe how the funds will be used to prevent homelessness among families with children and youth who are at the highest risk of becoming homeless (limit 1500 characters)

If 'Yes', specifically describe how the funds will be used to assist families with children and youth achieve independent living (limit 1500 characters)

3E. Reallocation

Instructions:

Reallocation is a process whereby a CoC may reallocate funds in whole or in part from renewal projects to create one or more new permanent housing, rapid re-housing, or dedicated HMIS projects. The Reallocation process allows CoCs to fund new permanent housing, rapid re-housing, or dedicated HMIS projects by transferring all or part of funds from existing grants that are eligible for renewal in FY2012 into a new project.

Does the CoC plan to reallocate funds from one or more expiring grant(s) into one or more new permanent housing, rapid re-housing, or dedicated HMIS project(s) or one new SSO specifically designated for a centralized or coordinated assessment system? Yes

3F. Reallocation - Grant(s) Eliminated

CoCs that choose to reallocate funds into new permanent supportive housing, rapid re-housing, or dedicated HMIS project(s) may do so by eliminating one or more of its expiring grants. CoCs that intend to create a new centralized or coordinated assessment system can only eliminate existing SSO project(s).

Amount Available for New Project: (Sum of All Eliminated Projects)				
Eliminated Project Name	Grant Number Eliminated	Component Type	Annual Renewal Amount	Type of Reallocation
This list contains no items				

3G. Reallocation - Grant(s) Reduced

CoCs that choose to reallocate funds into new permanent housing, rapid re-housing, or dedicated HMIS project(s) may do so by reducing the grant amount for one or more of its expiring grants. CoCs that are reducing projects must identify those projects here. CoCs that intend to create a new centralized or coordinated assessment system can only reduce existing SSO project(s).

Amount Available for New Project (Sum of All Reduced Projects)					
\$391,928					
Reduced Project Name	Reduced Grant Number	Annual Renewal Amount	Amount Retained	Amount available for new project	Reallocation Type
Chronic Homeless ...	IL0395B5T101103	\$303,923	\$302,022	\$1,901	Regular
Low Income Housin...	IL0393B5T101103	\$102,549	\$101,914	\$635	Regular
TLP Project- Belf...	IL0444B5T101102	\$130,818	\$128,864	\$1,954	Regular
Sanctuary Place	IL0199B5T101104	\$292,305	\$290,365	\$1,940	Regular
Case Management a...	IL0104B5T101104	\$67,730	\$65,001	\$2,729	Regular
Pioneer House Tra...	IL0184B5T101104	\$77,941	\$77,442	\$499	Regular
Douglas Villa Sca...	IL0114B5T101104	\$88,947	\$85,269	\$3,678	Regular
Low-Income Housin...	IL0394B5T101103	\$193,810	\$192,172	\$1,638	Regular
St. Leo Residence	IL0207B5T101104	\$109,140	\$97,325	\$11,815	Regular
HUD Supportive Ho...	IL0141B5T101104	\$435,916	\$433,025	\$2,891	Regular
Independence House	IL0145B5T101104	\$78,773	\$78,251	\$522	Regular
Carter House	IL0103B5T101104	\$221,663	\$220,078	\$1,585	Regular
South Loop and We...	IL0206B5T101104	\$375,448	\$372,957	\$2,491	Regular
NPAC SHP Permanen...	IL0173B5T101104	\$322,864	\$320,723	\$2,141	Regular
CaSSA Clustered a...	IL0105B5T101104	\$192,943	\$192,855	\$88	Regular
Holland Families	IL0188B5T101104	\$127,937	\$127,090	\$847	Regular
Eddie Beard Homel...	IL0232B5T101104	\$199,846	\$198,608	\$1,238	Regular
Low-Income Housin...	IL0386B5T101103	\$51,874	\$51,562	\$312	Regular
Low-Income Housin...	IL0161B5T101104	\$39,352	\$39,091	\$261	Regular
Pathways Home Per...	IL0179B5T101104	\$493,955	\$490,678	\$3,277	Regular
NPAC SHP w/Short ...	IL0174B5T101104	\$513,248	\$509,289	\$3,959	Regular
respite/assessment	IL0191B5T101104	\$371,666	\$369,201	\$2,465	Regular
Low-Income Housin...	IL0377B5T101103	\$107,918	\$107,248	\$670	Regular

Harmony Village	IL0128B5T101104	\$507,104	\$507,080	\$24	Regular
Casa Central La P...	IL0155B5T101104	\$391,229	\$391,026	\$203	Regular
Singles Two	IL0203B5T101104	\$473,167	\$469,056	\$4,111	Regular
Antonia Safe Haven	IL0096B5T101104	\$363,973	\$361,559	\$2,414	Regular
Union House	IL0231B5T101104	\$156,776	\$155,989	\$787	Regular
Carlton, Miriam, ...	IL0102B5T101104	\$264,576	\$262,826	\$1,750	Regular
OUTREACH AND COMP...	IL0177B5T101104	\$269,205	\$249,385	\$19,820	Regular
Undomiciled Menta...	IL0230B5T101104	\$59,131	\$56,686	\$2,445	Regular
Psychological Ser...	IL0186B5T101104	\$43,335	\$41,543	\$1,792	Regular
Low-Income Housin...	IL0398B5T101103	\$105,539	\$104,885	\$654	Regular
TRC Permanent Sup...	IL0229B5T101104	\$169,168	\$168,046	\$1,122	Regular
Branch of Hope Ap...	IL0424B5T101101	\$192,600	\$191,328	\$1,272	Regular
Permanent Housin...	IL0499B5T101100	\$300,917	\$300,893	\$24	Regular
Permanent Support...	IL0217B5T101104	\$114,256	\$113,498	\$758	Regular
SSO - Supportive ...	IL0146B5T101104	\$85,052	\$77,368	\$7,684	Regular
Stable Futures	IL0209B5T101104	\$1,563,957	\$1,553,713	\$10,244	Regular
Casa Central La P...	IL0154B5T101104	\$442,712	\$436,893	\$5,819	Regular
Near West Side SHP	IL0402B5T101103	\$99,644	\$98,982	\$662	Regular
Social Services G...	IL0204B5T101104	\$32,742	\$32,524	\$218	Regular
Learning Center (...)	IL0157B5T101104	\$337,921	\$324,131	\$13,790	Regular
Cooperative Livin...	IL0111B5T101104	\$249,707	\$248,061	\$1,646	Regular
Focus Hope II	IL0124B5T101104	\$428,466	\$420,580	\$7,886	Regular
Supportive Housin...	IL0213B5T101104	\$125,434	\$124,730	\$704	Regular
IL-510-REN-REST S...	IL0192B5T101104	\$291,984	\$290,497	\$1,487	Regular
Low-Income Housin...	IL0396B5T101103	\$41,026	\$39,013	\$2,013	Regular
Low-Income Housin...	IL0384B5T101103	\$87,299	\$87,184	\$115	Regular
Shelter Outreach ...	IL0200B5T101104	\$1,002,663	\$961,199	\$41,464	Regular
Rosenthal Family ...	IL0195B5T101104	\$59,273	\$56,823	\$2,450	Regular
Ridgeland Apartme...	IL0194B5T101104	\$582,622	\$578,757	\$3,865	Regular
Lawson Safe Haven	IL0156B5T101104	\$165,787	\$165,734	\$53	Regular
IL-510 - REN - Su...	IL0212B5T101104	\$430,035	\$422,074	\$7,961	Regular
Family Regenerati...	IL0120B5T101104	\$369,519	\$354,295	\$15,224	Regular
Wayne Street Grai...	IL0234B5T101104	\$411,299	\$407,200	\$4,099	Regular
The Phoenix	IL0221B5T101104	\$373,082	\$370,607	\$2,475	Regular
Low-Income Housin...	IL0397B5T101103	\$228,266	\$226,706	\$1,560	Regular

Pathways Home Saf...	IL0180B5T101104	\$966,792	\$960,380	\$6,412	Regular
Transitional Livi...	IL0228B5T101104	\$147,141	\$145,681	\$1,460	Regular
Family Wellness C...	IL0121B5T101104	\$350,930	\$350,676	\$254	Regular
The Studios	IL0222B5T101104	\$336,017	\$330,405	\$5,612	Regular
Violence Recovery...	IL0233B5T101104	\$42,501	\$40,859	\$1,642	Regular
New Home Project	IL0168B5T101104	\$307,661	\$294,971	\$12,690	Regular
Assisted Permanen...	IL0097B5T101104	\$128,740	\$127,942	\$798	Regular
Recovery Belray H...	IL0131B5T101104	\$191,411	\$190,142	\$1,269	Regular
LOW-INCOME HOUSIN...	IL0392B5T101103	\$225,539	\$213,800	\$11,739	Regular
Emerge Program	IL0142B5T101104	\$385,439	\$382,824	\$2,615	Regular
Near North	IL0166B5T101104	\$63,130	\$62,711	\$419	Regular
Low-Income Housin...	IL0378B5T101103	\$126,364	\$125,581	\$783	Regular
Supportive Servic...	IL0126B5T101104	\$36,005	\$35,745	\$260	Regular
Emerald House	IL0115B5T101104	\$204,956	\$203,686	\$1,270	Regular
Washington Park SRO	IL0404B5T101103	\$79,104	\$78,639	\$465	Regular
Low Income Hsg Tr...	IL0375B5T101103	\$181,608	\$180,483	\$1,125	Regular
Low-Income Housin...	IL0383B5T101103	\$66,158	\$66,110	\$48	Regular
Diaconea Homeless...	IL0202B5T101104	\$126,225	\$121,006	\$5,219	Regular
Low Income Housin...	IL0390B5T101002	\$195,143	\$179,366	\$15,777	Regular
Cafe Too	IL0100B5T101104	\$329,393	\$315,343	\$14,050	Regular
First Step Progra...	IL0215B5T101104	\$41,413	\$41,115	\$298	Regular
Breakthrough Supp...	IL0163B5T101104	\$188,534	\$186,474	\$2,060	Regular
IL-510-REN REST SHP2	IL0193B5T101104	\$171,010	\$170,902	\$108	Regular
Rowan Trees Apart...	IL0196B5T101104	\$357,847	\$353,523	\$4,324	Regular
Dolores' Safe Haven	IL0113B5T101104	\$336,584	\$329,737	\$6,847	Regular
Neon Street Dorm	IL0167B5T101104	\$259,804	\$258,081	\$1,723	Regular
Low-Income Housin...	IL0388B5T101103	\$124,010	\$123,950	\$60	Regular
Intensive Case Ma...	IL0147B5T101104	\$62,438	\$59,856	\$2,582	Regular
Life Development ...	IL0159B5T101104	\$235,664	\$234,002	\$1,662	Regular
Supportive Perman...	IL0216B5T101104	\$275,250	\$273,544	\$1,706	Regular
Low-Income Housin...	IL0385B5T101103	\$77,836	\$77,320	\$516	Regular
Supportive Housin...	IL0218B5T101104	\$54,134	\$51,748	\$2,386	Regular
Low-Income Housin...	IL0391B5T101103	\$44,877	\$44,847	\$30	Regular
Pathways Home Out...	IL0178B5T101104	\$326,369	\$312,873	\$13,496	Regular
Leland House	IL0158B5T101104	\$134,808	\$133,153	\$1,655	Regular

Mobile Assessment...	IL0165B5T101104	\$203,289	\$195,482	\$7,807	Regular
Bridges to Home	IL0099B5T101104	\$173,085	\$172,012	\$1,073	Regular
Greenhouse Shelter	IL0127B5T101104	\$24,146	\$23,148	\$998	Regular
Derrick David Sti...	IL0425B5T101101	\$208,650	\$206,980	\$1,670	Regular
IL-510 - NEW - Sc...	IL0463B5T101000	\$156,495	\$153,434	\$3,061	Regular
Families Building...	IL0119B5T101104	\$1,184,619	\$1,177,275	\$7,344	Regular
Low Income Housin...	IL0162B5T101104	\$2,524,019	\$2,502,080	\$21,939	Regular
SHOT 2.0	IL0501B5T101100	\$380,086	\$373,541	\$6,545	Regular

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Chronic Homeless Initiative (Inner Voice)
Grant Number of Reduced Project: IL0395B5T101103
Reduced Project Current Annual Renewal Amount: \$303,923
Amount Retained for Project: \$302,022
Amount available for New Project: \$1,901
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low Income Housing Trust Fund Chronic Homeless Initiative (Heartland Health Outreach)
Grant Number of Reduced Project: IL0393B5T101103
Reduced Project Current Annual Renewal Amount: \$102,549
Amount Retained for Project: \$101,914
Amount available for New Project: \$635
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: TLP Project- Belfort House
Grant Number of Reduced Project: IL0444B5T101102
Reduced Project Current Annual Renewal Amount: \$130,818
Amount Retained for Project: \$128,864
Amount available for New Project: \$1,954
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Sanctuary Place
Grant Number of Reduced Project: IL0199B5T101104
Reduced Project Current Annual Renewal Amount: \$292,305
Amount Retained for Project: \$290,365
Amount available for New Project: \$1,940
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Case Management and Rental of Space
Grant Number of Reduced Project: IL0104B5T101104
Reduced Project Current Annual Renewal Amount: \$67,730
Amount Retained for Project: \$65,001
Amount available for New Project: \$2,729
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Pioneer House Transitional Housing Program
Grant Number of Reduced Project: IL0184B5T101104
Reduced Project Current Annual Renewal Amount: \$77,941
Amount Retained for Project: \$77,442
Amount available for New Project: \$499
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Douglas Villa Scattered Sites SSO
Grant Number of Reduced Project: IL0114B5T101104
Reduced Project Current Annual Renewal Amount: \$88,947

Amount Retained for Project: \$85,269
Amount available for New Project: \$3,678
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund Chronic Homeless (Housing Opportunities for Women)
Grant Number of Reduced Project: IL0394B5T101103
Reduced Project Current Annual Renewal Amount: \$193,810
Amount Retained for Project: \$192,172
Amount available for New Project: \$1,638
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: St. Leo Residence
Grant Number of Reduced Project: IL0207B5T101104
Reduced Project Current Annual Renewal Amount: \$109,140
Amount Retained for Project: \$97,325
Amount available for New Project: \$11,815
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: HUD Supportive Housing for Women
Grant Number of Reduced Project: IL0141B5T101104
Reduced Project Current Annual Renewal Amount: \$435,916
Amount Retained for Project: \$433,025
Amount available for New Project: \$2,891
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Independence House
Grant Number of Reduced Project: IL0145B5T101104
Reduced Project Current Annual Renewal Amount: \$78,773
Amount Retained for Project: \$78,251
Amount available for New Project: \$522
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Carter House
Grant Number of Reduced Project: IL0103B5T101104
Reduced Project Current Annual Renewal Amount: \$221,663
Amount Retained for Project: \$220,078
Amount available for New Project: \$1,585
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: South Loop and Wentworth Combined
Grant Number of Reduced Project: IL0206B5T101104
Reduced Project Current Annual Renewal Amount: \$375,448
Amount Retained for Project: \$372,957
Amount available for New Project: \$2,491
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: NPAC SHP Permanent Housing
Grant Number of Reduced Project: IL0173B5T101104
Reduced Project Current Annual Renewal Amount: \$322,864
Amount Retained for Project: \$320,723
Amount available for New Project: \$2,141
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: CaSSA Clustered and Scattered Site Apartments
Grant Number of Reduced Project: IL0105B5T101104
Reduced Project Current Annual Renewal Amount: \$192,943
Amount Retained for Project: \$192,855
Amount available for New Project: \$88
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Holland Families
Grant Number of Reduced Project: IL0188B5T101104
Reduced Project Current Annual Renewal Amount: \$127,937

Amount Retained for Project: \$127,090
Amount available for New Project: \$847
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Eddie Beard Homeless Veterans' Transitional Housing Program
Grant Number of Reduced Project: IL0232B5T101104
Reduced Project Current Annual Renewal Amount: \$199,846
Amount Retained for Project: \$198,608
Amount available for New Project: \$1,238
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund 2 (Polish American Assn)
Grant Number of Reduced Project: IL0386B5T101103
Reduced Project Current Annual Renewal Amount: \$51,874
Amount Retained for Project: \$51,562
Amount available for New Project: \$312
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund 2
(Ambassadors For Christ)

Grant Number of Reduced Project: IL0161B5T101104

Reduced Project Current Annual Renewal Amount: \$39,352

Amount Retained for Project: \$39,091

Amount available for New Project: \$261
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Pathways Home Permanent Housing

Grant Number of Reduced Project: IL0179B5T101104

Reduced Project Current Annual Renewal Amount: \$493,955

Amount Retained for Project: \$490,678

Amount available for New Project: \$3,277
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: NPAC SHP w/Short Term Support
Grant Number of Reduced Project: IL0174B5T101104
Reduced Project Current Annual Renewal Amount: \$513,248
Amount Retained for Project: \$509,289
Amount available for New Project: \$3,959
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: respite/assessment
Grant Number of Reduced Project: IL0191B5T101104
Reduced Project Current Annual Renewal Amount: \$371,666
Amount Retained for Project: \$369,201
Amount available for New Project: \$2,465
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund 1 (North Side Housing and Supportive Services)
Grant Number of Reduced Project: IL0377B5T101103
Reduced Project Current Annual Renewal Amount: \$107,918
Amount Retained for Project: \$107,248
Amount available for New Project: \$670
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Harmony Village
Grant Number of Reduced Project: IL0128B5T101104
Reduced Project Current Annual Renewal Amount: \$507,104
Amount Retained for Project: \$507,080
Amount available for New Project: \$24
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Casa Central La Posada Scattered Sites
Grant Number of Reduced Project: IL0155B5T101104
Reduced Project Current Annual Renewal Amount: \$391,229

Amount Retained for Project: \$391,026
Amount available for New Project: \$203
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Singles Two
Grant Number of Reduced Project: IL0203B5T101104
Reduced Project Current Annual Renewal Amount: \$473,167
Amount Retained for Project: \$469,056
Amount available for New Project: \$4,111
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Antonia Safe Haven
Grant Number of Reduced Project: IL0096B5T101104
Reduced Project Current Annual Renewal Amount: \$363,973
Amount Retained for Project: \$361,559
Amount available for New Project: \$2,414
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Union House
Grant Number of Reduced Project: IL0231B5T101104
Reduced Project Current Annual Renewal Amount: \$156,776
Amount Retained for Project: \$155,989
Amount available for New Project: \$787
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Carlton, Miriam, Delmar
Grant Number of Reduced Project: IL0102B5T101104
Reduced Project Current Annual Renewal Amount: \$264,576
Amount Retained for Project: \$262,826
Amount available for New Project: \$1,750
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: OUTREACH AND COMPREHENSIVE ASSESSMENT (ORCA)
Grant Number of Reduced Project: IL0177B5T101104
Reduced Project Current Annual Renewal Amount: \$269,205
Amount Retained for Project: \$249,385
Amount available for New Project: \$19,820
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Undomiciled Mentally Ill Substance Abuse (UMISA) Program
Grant Number of Reduced Project: IL0230B5T101104
Reduced Project Current Annual Renewal Amount: \$59,131
Amount Retained for Project: \$56,686
Amount available for New Project: \$2,445
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Psychological Service
Grant Number of Reduced Project: IL0186B5T101104
Reduced Project Current Annual Renewal Amount: \$43,335
Amount Retained for Project: \$41,543
Amount available for New Project: \$1,792
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund Chronic Homeless (Sarah's Circle)
Grant Number of Reduced Project: IL0398B5T101103
Reduced Project Current Annual Renewal Amount: \$105,539
Amount Retained for Project: \$104,885
Amount available for New Project: \$654
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: TRC Permanent Supportive Housing Project
Grant Number of Reduced Project: IL0229B5T101104
Reduced Project Current Annual Renewal Amount: \$169,168

Amount Retained for Project: \$168,046
Amount available for New Project: \$1,122
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Branch of Hope Apartments
Grant Number of Reduced Project: IL0424B5T101101
Reduced Project Current Annual Renewal Amount: \$192,600
Amount Retained for Project: \$191,328
Amount available for New Project: \$1,272
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Permanent Housing Bonus Project
Grant Number of Reduced Project: IL0499B5T101100
Reduced Project Current Annual Renewal Amount: \$300,917
Amount Retained for Project: \$300,893
Amount available for New Project: \$24
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Permanent Supportive Housing Program
Grant Number of Reduced Project: IL0217B5T101104
Reduced Project Current Annual Renewal Amount: \$114,256
Amount Retained for Project: \$113,498
Amount available for New Project: \$758
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: SSO - Supportive Services Only
Grant Number of Reduced Project: IL0146B5T101104
Reduced Project Current Annual Renewal Amount: \$85,052
Amount Retained for Project: \$77,368
Amount available for New Project: \$7,684
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Stable Futures
Grant Number of Reduced Project: IL0209B5T101104
Reduced Project Current Annual Renewal Amount: \$1,563,957
Amount Retained for Project: \$1,553,713
Amount available for New Project: \$10,244
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Casa Central La Posada Interim Housing
Grant Number of Reduced Project: IL0154B5T101104
Reduced Project Current Annual Renewal Amount: \$442,712
Amount Retained for Project: \$436,893
Amount available for New Project: \$5,819
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Near West Side SHP
Grant Number of Reduced Project: IL0402B5T101103
Reduced Project Current Annual Renewal Amount: \$99,644
Amount Retained for Project: \$98,982
Amount available for New Project: \$662
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Social Services GAP Program
Grant Number of Reduced Project: IL0204B5T101104
Reduced Project Current Annual Renewal Amount: \$32,742
Amount Retained for Project: \$32,524
Amount available for New Project: \$218
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Learning Center (SSO)
Grant Number of Reduced Project: IL0157B5T101104
Reduced Project Current Annual Renewal Amount: \$337,921

Amount Retained for Project: \$324,131
Amount available for New Project: \$13,790
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Cooperative Living Program (CLP)
Grant Number of Reduced Project: IL0111B5T101104
Reduced Project Current Annual Renewal Amount: \$249,707
Amount Retained for Project: \$248,061
Amount available for New Project: \$1,646
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Focus Hope II
Grant Number of Reduced Project: IL0124B5T101104
Reduced Project Current Annual Renewal Amount: \$428,466
Amount Retained for Project: \$420,580
Amount available for New Project: \$7,886
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Supportive Housing Program/ Transitional Housing
Grant Number of Reduced Project: IL0213B5T101104
Reduced Project Current Annual Renewal Amount: \$125,434
Amount Retained for Project: \$124,730
Amount available for New Project: \$704
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: IL-510-REN-REST SHP 1
Grant Number of Reduced Project: IL0192B5T101104
Reduced Project Current Annual Renewal Amount: \$291,984
Amount Retained for Project: \$290,497
Amount available for New Project: \$1,487
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund Chronic Homeless (Inspiration Corporation)
Grant Number of Reduced Project: IL0396B5T101103
Reduced Project Current Annual Renewal Amount: \$41,026
Amount Retained for Project: \$39,013
Amount available for New Project: \$2,013
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund 2 (Inspiration Corporation)
Grant Number of Reduced Project: IL0384B5T101103
Reduced Project Current Annual Renewal Amount: \$87,299
Amount Retained for Project: \$87,184
Amount available for New Project: \$115
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Shelter Outreach Services/HUD
Grant Number of Reduced Project: IL0200B5T101104
Reduced Project Current Annual Renewal Amount: \$1,002,663
Amount Retained for Project: \$961,199
Amount available for New Project: \$41,464
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Rosenthal Family Lodge
Grant Number of Reduced Project: IL0195B5T101104
Reduced Project Current Annual Renewal Amount: \$59,273
Amount Retained for Project: \$56,823
Amount available for New Project: \$2,450
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Ridgeland Apartments and Day Care Center
Grant Number of Reduced Project: IL0194B5T101104
Reduced Project Current Annual Renewal Amount: \$582,622
Amount Retained for Project: \$578,757
Amount available for New Project: \$3,865
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Lawson Safe Haven
Grant Number of Reduced Project: IL0156B5T101104
Reduced Project Current Annual Renewal Amount: \$165,787
Amount Retained for Project: \$165,734
Amount available for New Project: \$53
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: IL-510 - REN - Supportive Housing Program (SHP)(IL01B710038)
Grant Number of Reduced Project: IL0212B5T101104
Reduced Project Current Annual Renewal Amount: \$430,035

Amount Retained for Project: \$422,074
Amount available for New Project: \$7,961
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Family Regeneration Project
Grant Number of Reduced Project: IL0120B5T101104
Reduced Project Current Annual Renewal Amount: \$369,519
Amount Retained for Project: \$354,295
Amount available for New Project: \$15,224
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Wayne Street Grais Apartments
Grant Number of Reduced Project: IL0234B5T101104
Reduced Project Current Annual Renewal Amount: \$411,299
Amount Retained for Project: \$407,200
Amount available for New Project: \$4,099
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: The Phoenix
Grant Number of Reduced Project: IL0221B5T101104
Reduced Project Current Annual Renewal Amount: \$373,082
Amount Retained for Project: \$370,607
Amount available for New Project: \$2,475
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund Chronic Homeless (Matthew House)
Grant Number of Reduced Project: IL0397B5T101103
Reduced Project Current Annual Renewal Amount: \$228,266
Amount Retained for Project: \$226,706
Amount available for New Project: \$1,560
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Pathways Home Safe Haven
Grant Number of Reduced Project: IL0180B5T101104
Reduced Project Current Annual Renewal Amount: \$966,792
Amount Retained for Project: \$960,380
Amount available for New Project: \$6,412
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Transitional Living Program at Open Door Shelter West Town
Grant Number of Reduced Project: IL0228B5T101104
Reduced Project Current Annual Renewal Amount: \$147,141
Amount Retained for Project: \$145,681
Amount available for New Project: \$1,460
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Family Wellness Center
Grant Number of Reduced Project: IL0121B5T101104
Reduced Project Current Annual Renewal Amount: \$350,930
Amount Retained for Project: \$350,676
Amount available for New Project: \$254
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: The Studios
Grant Number of Reduced Project: IL0222B5T101104
Reduced Project Current Annual Renewal Amount: \$336,017
Amount Retained for Project: \$330,405
Amount available for New Project: \$5,612
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Violence Recovery Services
Grant Number of Reduced Project: IL0233B5T101104
Reduced Project Current Annual Renewal Amount: \$42,501

Amount Retained for Project: \$40,859
Amount available for New Project: \$1,642
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: New Home Project
Grant Number of Reduced Project: IL0168B5T101104
Reduced Project Current Annual Renewal Amount: \$307,661
Amount Retained for Project: \$294,971
Amount available for New Project: \$12,690
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Assisted Permanent Housing
Grant Number of Reduced Project: IL0097B5T101104
Reduced Project Current Annual Renewal Amount: \$128,740
Amount Retained for Project: \$127,942
Amount available for New Project: \$798
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Recovery Belray Holland Singles
Grant Number of Reduced Project: IL0131B5T101104
Reduced Project Current Annual Renewal Amount: \$191,411
Amount Retained for Project: \$190,142
Amount available for New Project: \$1,269
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: LOW-INCOME HOUSING TRUST FUND
CHRONIC HOMELESS
Grant Number of Reduced Project: IL0392B5T101103
Reduced Project Current Annual Renewal Amount: \$225,539
Amount Retained for Project: \$213,800
Amount available for New Project: \$11,739
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Emerge Program
Grant Number of Reduced Project: IL0142B5T101104
Reduced Project Current Annual Renewal Amount: \$385,439
Amount Retained for Project: \$382,824
Amount available for New Project: \$2,615
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Near North
Grant Number of Reduced Project: IL0166B5T101104
Reduced Project Current Annual Renewal Amount: \$63,130
Amount Retained for Project: \$62,711
Amount available for New Project: \$419
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust 1(Supportive Services Dev Corp)
Grant Number of Reduced Project: IL0378B5T101103
Reduced Project Current Annual Renewal Amount: \$126,364
Amount Retained for Project: \$125,581
Amount available for New Project: \$783
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Supportive Services GAP Program
Grant Number of Reduced Project: IL0126B5T101104
Reduced Project Current Annual Renewal Amount: \$36,005
Amount Retained for Project: \$35,745
Amount available for New Project: \$260
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Emerald House
Grant Number of Reduced Project: IL0115B5T101104
Reduced Project Current Annual Renewal Amount: \$204,956

Amount Retained for Project: \$203,686
Amount available for New Project: \$1,270
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Washington Park SRO
Grant Number of Reduced Project: IL0404B5T101103
Reduced Project Current Annual Renewal Amount: \$79,104
Amount Retained for Project: \$78,639
Amount available for New Project: \$465
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low Income Hsg Trust Fund 1 (DFSS)
Grant Number of Reduced Project: IL0375B5T101103
Reduced Project Current Annual Renewal Amount: \$181,608
Amount Retained for Project: \$180,483
Amount available for New Project: \$1,125
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund 2 (Housing Opportunities for Women)
Grant Number of Reduced Project: IL0383B5T101103
Reduced Project Current Annual Renewal Amount: \$66,158
Amount Retained for Project: \$66,110
Amount available for New Project: \$48
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Diaconea Homeless Supportive Services Program
Grant Number of Reduced Project: IL0202B5T101104
Reduced Project Current Annual Renewal Amount: \$126,225
Amount Retained for Project: \$121,006
Amount available for New Project: \$5,219
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low Income Housing Trust Fund Chronic Homeless (Christian Community Hlth Ctr)
Grant Number of Reduced Project: IL0390B5T101002
Reduced Project Current Annual Renewal Amount: \$195,143
Amount Retained for Project: \$179,366
Amount available for New Project: \$15,777
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Cafe Too
Grant Number of Reduced Project: IL0100B5T101104
Reduced Project Current Annual Renewal Amount: \$329,393
Amount Retained for Project: \$315,343
Amount available for New Project: \$14,050
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: First Step Program (The Supportive Living Program)
Grant Number of Reduced Project: IL0215B5T101104
Reduced Project Current Annual Renewal Amount: \$41,413
Amount Retained for Project: \$41,115
Amount available for New Project: \$298
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Breakthrough Supportive Housing 1
Grant Number of Reduced Project: IL0163B5T101104
Reduced Project Current Annual Renewal Amount: \$188,534
Amount Retained for Project: \$186,474
Amount available for New Project: \$2,060
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: IL-510-REN REST SHP2
Grant Number of Reduced Project: IL0193B5T101104
Reduced Project Current Annual Renewal Amount: \$171,010

Amount Retained for Project: \$170,902
Amount available for New Project: \$108
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Rowan Trees Apartments
Grant Number of Reduced Project: IL0196B5T101104
Reduced Project Current Annual Renewal Amount: \$357,847
Amount Retained for Project: \$353,523
Amount available for New Project: \$4,324
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Dolores' Safe Haven
Grant Number of Reduced Project: IL0113B5T101104
Reduced Project Current Annual Renewal Amount: \$336,584
Amount Retained for Project: \$329,737
Amount available for New Project: \$6,847
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Neon Street Dorm
Grant Number of Reduced Project: IL0167B5T101104
Reduced Project Current Annual Renewal Amount: \$259,804
Amount Retained for Project: \$258,081
Amount available for New Project: \$1,723
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund Chronic Homelessness (Unity Parenting inc.)
Grant Number of Reduced Project: IL0388B5T101103
Reduced Project Current Annual Renewal Amount: \$124,010
Amount Retained for Project: \$123,950
Amount available for New Project: \$60
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Intensive Case Management
Grant Number of Reduced Project: IL0147B5T101104
Reduced Project Current Annual Renewal Amount: \$62,438
Amount Retained for Project: \$59,856
Amount available for New Project: \$2,582
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Life Development Center
Grant Number of Reduced Project: IL0159B5T101104
Reduced Project Current Annual Renewal Amount: \$235,664
Amount Retained for Project: \$234,002
Amount available for New Project: \$1,662
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Supportive Permanent Housing
Grant Number of Reduced Project: IL0216B5T101104
Reduced Project Current Annual Renewal Amount: \$275,250
Amount Retained for Project: \$273,544
Amount available for New Project: \$1,706
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund 2 (North Side Housing)
Grant Number of Reduced Project: IL0385B5T101103
Reduced Project Current Annual Renewal Amount: \$77,836
Amount Retained for Project: \$77,320
Amount available for New Project: \$516
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Supportive Housing Program
Grant Number of Reduced Project: IL0218B5T101104
Reduced Project Current Annual Renewal Amount: \$54,134

Amount Retained for Project: \$51,748
Amount available for New Project: \$2,386
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low-Income Housing Trust Fund Chronic Homeless (Cornerstone Comm Outreach)
Grant Number of Reduced Project: IL0391B5T101103
Reduced Project Current Annual Renewal Amount: \$44,877
Amount Retained for Project: \$44,847
Amount available for New Project: \$30
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Pathways Home Outpatient
Grant Number of Reduced Project: IL0178B5T101104
Reduced Project Current Annual Renewal Amount: \$326,369
Amount Retained for Project: \$312,873
Amount available for New Project: \$13,496
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Leland House
Grant Number of Reduced Project: IL0158B5T101104
Reduced Project Current Annual Renewal Amount: \$134,808
Amount Retained for Project: \$133,153
Amount available for New Project: \$1,655
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Mobile Assessment Unit
Grant Number of Reduced Project: IL0165B5T101104
Reduced Project Current Annual Renewal Amount: \$203,289
Amount Retained for Project: \$195,482
Amount available for New Project: \$7,807
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Bridges to Home
Grant Number of Reduced Project: IL0099B5T101104
Reduced Project Current Annual Renewal Amount: \$173,085
Amount Retained for Project: \$172,012
Amount available for New Project: \$1,073
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Greenhouse Shelter
Grant Number of Reduced Project: IL0127B5T101104
Reduced Project Current Annual Renewal Amount: \$24,146
Amount Retained for Project: \$23,148
Amount available for New Project: \$998
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Derrick David Stinson Supportive Housing Program
Grant Number of Reduced Project: IL0425B5T101101
Reduced Project Current Annual Renewal Amount: \$208,650
Amount Retained for Project: \$206,980
Amount available for New Project: \$1,670
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: IL-510 - NEW - Scattered Site Youth Housing
Grant Number of Reduced Project: IL0463B5T101000
Reduced Project Current Annual Renewal Amount: \$156,495
Amount Retained for Project: \$153,434
Amount available for New Project: \$3,061
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Families Building Community
Grant Number of Reduced Project: IL0119B5T101104
Reduced Project Current Annual Renewal Amount: \$1,184,619

Amount Retained for Project: \$1,177,275
Amount available for New Project: \$7,344
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: Low Income Housing Trust Fund Chronic Homeless (AFC Housing)
Grant Number of Reduced Project: IL0162B5T101104
Reduced Project Current Annual Renewal Amount: \$2,524,019
Amount Retained for Project: \$2,502,080
Amount available for New Project: \$21,939
(This amount will auto-calculate by selecting "Save" button)

3G. Reallocation: Details of Grant(s) Reduced

Complete each of the fields below for each SHP grant that is being reduced during the FY2012 HHN Reallocation process. CoCs should refer to the final approved FY2012 Grant Inventory Worksheet to ensure all information entered here is accurate.

Reduced Project Name: SHOT 2.0
Grant Number of Reduced Project: IL0501B5T101100
Reduced Project Current Annual Renewal Amount: \$380,086
Amount Retained for Project: \$373,541
Amount available for New Project: \$6,545
(This amount will auto-calculate by selecting "Save" button)

3H. Reallocation - Proposed New Project(s)

CoCs that choose to reallocate funds into new permanent housing, rapid re-housing, dedicated HMIS, or SSO projects may do so by reducing the grant amount for one or more of its expiring grants. CoCs must identify if the new project(s) it plans to create and provide requested information for each. Click on the [link](#) to enter information for each of the proposed new reallocated projects.

Sum of All New Reallocated Project Requests
(Must be less than or equal to total amount(s) eliminated and/or reduced)

\$368,470				
Current Priority #	New Project Name	Component Type	Transferred Amount	Reallocation Type
1	Central Refe...	SSO	\$162,111	Regular
2	HMIS Expansi...	HMIS	\$206,359	Regular

3H. Reallocation: Details of Proposed New Project(s)

Complete each of the fields below for each new reallocated project the CoC is requesting in the FY2012 CoC Competition. CoCs may only reallocate funds to new permanent housing, rapid re-housing, dedicated HMIS, or SSO projects.

2012 Rank (from Project Listing): 1
Proposed New Project Name: Central Referral System
Component Type: SSO
Amount Requested for New Project: \$162,111

3H. Reallocation: Details of Proposed New Project(s)

Complete each of the fields below for each new reallocated project the CoC is requesting in the FY2012 CoC Competition. CoCs may only reallocate funds to new permanent housing, rapid re-housing, dedicated HMIS, or SSO projects.

2012 Rank (from Project Listing): 2
Proposed New Project Name: HMIS Expansion Project
Component Type: HMIS
Amount Requested for New Project: \$206,359

3I. Reallocation: Reallocation Balance Summary

Below is a summary of the information entered on forms 3D-3G for CoC reallocated projects. The last field, "remaining reallocation balance" should indicate "0." If there is a balance remaining, this means that more funds are being eliminated or reduced than the new project(s) requested. CoCs cannot create a new reallocated project for an amount that is greater than the total amount of reallocated funds available for new project(s).

Reallocated funds available for new project(s):	\$391,928
Amount requested for new project(s):	\$368,470
Remaining Reallocation Balance:	\$23,458

4A. Continuum of Care (CoC) FY2011 Achievements

Instructions:

In the FY2011 CoC application, CoCs were asked to propose numeric achievements for each of HUD's five national objectives related to ending chronic homelessness and moving individuals and families to permanent housing and self-sufficiency through employment. CoCs will report on their actual accomplishments since FY2011 versus the proposed accomplishments.

In the column labeled FY2011 Proposed Numeric Achievement enter the number of beds, percentage, or number of households that were entered in the FY2011 application for the applicable objective. In the column labeled Actual Numeric Achievement enter the actual number of beds, percentage, or number of households that the CoC reached to date for each objective.

CoCs will also indicate if they submitted an Exhibit 1 (now called CoC Consolidated Application) in FY2011. If a CoC did not submit an Exhibit 1 in FY2011, enter "No" to the question. CoCs that did not fully meet the proposed numeric achievement for any of the objectives should indicate the reason in the narrative section.

Additionally, CoCs must indicate if there are any unexecuted grants. The CoC will also indicate how project performance is monitored, how projects are assisted to reach the HUD-established goals, and how poor performing projects are assisted to increase capacity that will result in the CoC reach and maintain HUD goals.

CoCs are to provide information regarding the efforts in the CoC to address average length of time persons remain homeless, the steps to track additional spells of homelessness and describe outreach procedures to engage homeless persons. CoCs will also provide specific steps that are being taken to prevent homelessness with its geography as outlined in the jurisdiction(s) plan.

Finally, if the CoC requested and was approved by HUD to serve persons under other Federal statutes, the CoC will need to describe how the funds were used to prevent homelessness and how the funds were used to assist families with children and youth achieve independent living.

Objective	FY2011 Proposed Numeric Achievement		FY2011 Actual Numeric Achievement	
Create new permanent housing beds for the chronically homeless	1,730	Beds	1,819	Beds
Increase the percentage of homeless persons staying in permanent housing over 6 months to at least 77%	88	%	81	%
Increase the percentage of homeless persons moving from transitional housing to permanent housing to at least 65%	67	%	54	%
Increase the percentage of homeless persons employed at exit to at least 20%	21	%	12	%
Decrease the number of homeless households with children	802	Households	770	Households

Did the CoC submit an Exhibit 1 application in FY2011? Yes

If the CoC was unable to reach its FY2011 proposed numeric achievement for any of the national objectives, provide a detailed explanation (limit 1500 characters)

We did not reach our goal of 88 percent of people remaining in PH for 6+ months due to the large number (1106, or 17% of the total served) who entered PH but had not yet hit the 6 month mark at the time the APRs were due. We anticipate the majority of people in this group will remain in PH beyond the 6 month mark as those programs have a strong history of successful retention. Of the people that left in 2011 to free up space for people entering in 2012, 70% of those went to PH living situations, which we consider a positive outcome. We also were not able to meet our employment goal of having 21% of people who exit CoC-funded programs have employment income. We attribute this largely to the high unemployment rate in general during 2011, as Chicago was steadily above the national average throughout 2011. The goal of moving people from TH to PH was also not achieved. Our Plan projects that we need an additional 7,518 units of PH, rapid rehousing and affordable housing to meet our current need. This year, 46.35% of our exits from TH were to other TH options and this supports our projections that we need more PH options. Secondly, in late 2010, the CoC implemented a data quality procedure to check entries and exits in our HMIS. Implementing this without emphasis on accurately entering the data required at program exit – such as destination – has led to a significant increase projects selecting the “other” category. This has been corrected.

How does the CoC monitor recipients' performance? (limit 750 characters)

The CoC established a series of performance outcomes for all program types in Chicago. The evaluation process used by the CoC and administered by the Chicago Alliance to End Homelessness uses HUD Annual Performance Reports (APR) for each project to compare project performance to these local outcome goals, HUD outcome goals, and also compares the outcomes of projects to others of the same program model type. Based on the outcomes, each project is given a score out of 30 points, and those scores are used in conjunction with other scoring mechanisms to form policy decisions for prioritizing and funding. If agencies are poor-performing, they are placed on probation, which is discussed in the following questions.

How does the CoC assist project applicants to reach HUD-established performance goals? (limit 750 characters)

The CoC assists projects with reaching performance goals in three ways. First is the adoption of best-practice policies that impact performance. For example, implementing a harm-reduction philosophy improves PH retention, and also TH retention which helps improve outcomes from those moving from TH to PH. Another example is encouraging agencies to attend SOAR trainings to increase connections to mainstream benefits. The CoC Governing Body also seeks to reduce system-wide barriers to achieving high performance, such as implementing a coordinated access system to help target appropriate housing interventions. Finally, the CoC appoints the Chicago Alliance to assist poor performing projects to improve, which is discussed more in the next question.

How does the CoC assist poor performers to increase capacity? (limit 750 characters)

The CoC has adopted and appointed the Chicago Alliance to implement a probation policy for poor performing projects. That policy requires agencies to be on funding probation for 1 year, and must demonstrate an increase in performance over the next year to be considered for renewal funding. During the year of probation, the agency must meet with the CoC Lead Agency staff to discuss performance, and provide a plan of action for improvement. Often times, one of the items in the action plan is to partner with a peer agency for programmatic support. Of the 6 agencies that have been on funding probation over the last 3 years, all have shown significant improvements and have been released from probation.

Does the CoC have any unexecuted grants awarded prior to FY2011? No

If 'Yes', list the grants with awarded amount:

Project Awarded	Competition Year the Grant was Awarded	Awarded Amount
n/a	n/a	\$0
n/a	n/a	\$0
n/a	n/a	\$0
n/a	n/a	\$0
n/a	n/a	\$0
	Total	\$0

What steps has the CoC taken to track the length of time individuals and families remain homeless? (limit 1000 characters)

There are two initiatives Chicago is undertaking to improve our ability to track the length of time people remain homeless. The first is to increase our HMIS participation and data quality. In May 2012, the CoC transitioned the HMIS project from the City of Chicago to the Chicago Alliance. This allowed for increased project capacity, including the addition of a specialized module for ESG emergency shelters which vastly decreases the amount of time emergency shelters have to spend on data entry. This improves data quality and facilitates the inclusion of agencies that may not otherwise participate in HMIS. The second initiative is the dedication to data-driven decisions, which drove the CoC to use data from APRs, HMIS, AHAR and our evaluation of the plan to compare lengths of time in programs by program model. The analysis will continue as our data quality improves, and in 2013, the CoC will seek to establish definitions of an "episode" of homelessness so we can better analyze data.

What steps has the CoC taken to track the additional spells of homelessness of individuals and families in the CoC's geography? (limit 1000 characters)

In addition to the items mentioned in the previous answer about improving HMIS capacity, participation and data quality, the CoC is moving toward tracking recidivism of homelessness in many ways. First, the CoC has prioritized the rewrite of our program model outcomes as a task for early 2013. The HMV Committee has already spent time in 2012 discussing how recidivism will be included as a program model outcome, and also as part of the performance evaluation of CoC and ESG programs. They recognize that the CoC will need to define the data points used to determine what an additional episode of homelessness is, and plan for that to be part of the Program Models Outcome Chart redesign. Our HMIS software is capable of generating reports to show whether people have additional spells of homelessness, and we plan to expand upon this capacity in 2013 to begin using the data to set outcome benchmarks for the program models in Chicago.

What specific outreach procedures has the CoC developed to assist homeless service providers in the outreach efforts to engage homeless individuals and families? (limit 1500 characters)

The CoC has adopted an Outreach and Engagement (O&E) program model with the goals of providing services, including assessment and assistance, to individuals who do not access either shelter or other homeless services. DFSS supports street outreach by operating a city-staffed homeless outreach team and by funding delegate agencies through street outreach contracts, and all programs must follow the standards outlined in the program model. These teams have bilingual staff (Spanish and Polish), and the outreach vehicles are accessible. O&E programs assist highly vulnerable households in applying for resources through the Central Referral System by helping them respond to interviews and collect documentation needed to achieve permanent housing placement. CRS is a database of highly vulnerable individuals and families coming from the streets or shelters which serves as a client referral source for housing providers.

In 2012, DFSS and street outreach providers have worked to establish the following targeting procedures. 1) Response to 311, police, aldermanic, or other community concerns about well-being of individuals in specific geographic locations; 2) Focus on engaging those high on the CRS to prepare for housing; and 3) Delegate agencies conduct street outreach in geographic areas specified in scopes of service and provide ongoing essential services to those that they engage through that process.

**What are the specific steps the CoC has incorporated to prevent homelessness within the CoC geography and how are these steps outlined in the jurisdiction(s) plans?
(limit 1500 characters)**

Chicago has established a central point of access for prevention services - the Homeless Prevention Call Center (HPCC). The HPCC assess and refers for public and private prevention assistance, and the city has several streams of funding dedicated for prevention. The blend of the various funding streams allows for a robust prevention system. These funds include the City of Chicago's Rental Assistance Program, which provides short-term financial assistance to low-income individuals at risk of eviction and homelessness and which is funded through ESG first allocation funds; the state homeless prevention funds, which are used to help people experiencing a short-term economic crisis maintain or re-enter housing; and private funds called "Emergency Funds" which can be used flexibly to help people in crisis or transition with a wide variety of needs such as rent, utilities, transportation, or other essential needs.

Preventing homelessness is a top priority of Chicago's Plan 2.0, of which implementation is just beginning. One of the first strategies the CoC will undertake is to increase efforts to target prevention to those most at-risk of entering the system. Our CoC's Consolidated Plan also prioritizes prevention through the 2013 ESG Action Plan which establishes HPCC as the central access point for prevention, and outlines performance goals.

Did the CoC exercise its authority and receive approval from HUD to serve families with children and youth defined as homeless under other Federal statutes? No

**If 'Yes', specifically describe how the funds were used to prevent homelessness among families with children and youth who are at the highest risk of becoming homeless
(limit 1500 characters)**

If 'Yes', specifically describe how the funds were used to assist families with children and youth achieve independent living (limit 1500 characters)

4B. Continuum of Care (CoC) Chronic Homeless Progress

Instructions:

HUD tracks each CoCs progress toward ending chronic homelessness.

CoCs are to track changes from one year to the next in the number of chronically homeless persons as well as the number of beds available for this population. CoCs will complete this section using data reported for the FY2010, FY2011, and FY2012 (if applicable) point-in-time counts as well as the data collected and reported on the Housing Inventory Counts (HIC) for those same years. For each year, indicate the total unduplicated point-in-time count of chronically homeless as reported in that year. For FY2010 and FY2011, this number should match the number indicated on form 2J of the respective years Exhibit 1. For FY2012, this number should match the number entered on the Homeless Data Exchange (HDX). CoCs should include beds designated for this population from all funding sources.

Additionally, CoCs will specifically describe how chronic homeless eligible is determined within the CoC and how the data is collected.

Indicate the total number of chronically homeless persons and total number of permanent housing beds designated for the chronically homeless persons in the CoC for FY2010, FY2011, and FY2012:

Year	Number of CH Persons	Number of PH beds for the CH
2010	689	2,171
2011	1,155	1,700
2012	1,112	1,819

What methods does the CoC used to determine chronic homeless eligibility and how is data collected for this population (limit 1000 characters)

Chicago uses HUD's definition of chronically homeless to determine eligibility. One of the methods our providers use to determine prior residence is the CoC's Housing Inventory Chart (HIC), which clearly identifies the programs that are considered emergency shelters. The HIC is published on the CoC Lead Agency's website, and is updated annually, or more frequently if necessary. Documentation is typically captured by written verification from a third party. A small number of projects have started using HMIS to document prior episodes of homelessness, and we expect this will increase over the next year. The other primary data source is the Central Referral System (CRS). This system utilizes the Vulnerability Index to prioritize the most vulnerable. Once CRS is fully operating, city outreach teams will prioritize people ranked high on the list and begin collecting documentation necessary to determine eligibility. Methods to do this will include HMIS, and written or verbal verification.

Indicate the number of new permanent housing beds in place and made available for occupancy for the chronically homeless between February 1, 2011 and January 31, 2012:

119

If the number of chronically homeless persons increased or if the number of permanent beds designated for the chronically homeless decreased, please explain (limit 750 characters)

n/a

Identify the amount of funds from each funding source for the development and operations costs of the new permanent housing beds designated for the chronically homeless, that were created between February 1, 2011 and January 31, 2012:

Cost Type	HUD McKinney-Vento	Other Federal	State	Local	Private
Development					
Operations	\$170,537	\$34,766			\$30,000
Total	\$170,537	\$34,766	\$0	\$0	\$30,000

4C. Continuum of Care (CoC) Housing Performance

Instructions:

HUD will assess CoC performance of participants remaining in permanent housing for 6 months or longer. To demonstrate performance, CoCs must use data on all permanent housing projects that should have submitted an APR for the most recent operating year. Projects that did not submit an APR on time must also be included in this calculation.

Complete the table below using cumulative data on the most recent APRs submitted by all permanent housing projects within the CoC that should have submitted one. Once amounts have been entered click "Save" which will auto-calculate the percentage. CoCs that do not have CoC-funded permanent housing projects for which an APR was required should select "No" to the question below. This only applies to CoCs that do not have any CoC-funded permanent housing projects currently operating within their CoC that should have submitted an APR.

Does the CoC have any permanent housing projects for which an APR was required to be submitted? Yes

Participants in Permanent Housing (PH)	
a. Number of participants who exited permanent housing project(s)	821
b. Number of participants who did not leave the project(s)	5410
c. Number of participants who exited after staying 6 months or longer	743
d. Number of participants who did not exit after staying 6 months or longer	4303
e. Number of participants who did not exit and were enrolled for less than 6 months	1106
TOTAL PH (%)	81

Instructions:

HUD will assess CoC performance in moving participants from transitional housing programs into permanent housing. To demonstrate performance, CoCs must use data on all transitional housing projects that should have submitted an APR for the most recent operating year. Projects that did not submit an APR on time must also be included in this calculation.

Complete the table below using cumulative data on the most recent APRs submitted by all transitional housing projects within the CoC that should have submitted one. Once amounts have been entered click "Save" which will auto-calculate the percentage. CoCs that do not have CoC-funded transitional housing projects for which an APR was required should select "No" to the question below. This only applies to CoCs that do not have any CoC-funded transitional housing projects currently operating within their CoC that should have submitted an APR.

Does the CoC have any transitional housing projects for which an APR was required to be submitted? Yes

Participants in Transitional Housing (TH)	
a. Number of participants who exited TH project(s), including unknown destination	2339
b. Number of SHP transitional housing participants that moved to permanent housing upon exit	1260
TOTAL TH (%)	54

4D. Continuum of Care (CoC) Cash Income Information

Instructions:

HUD will assess CoC performance in assisting program participants with accessing cash income sources. To demonstrate performance, CoCs must use data on all non-HMIS projects that should have submitted an APR in e-snaps for the most recent operating year. Projects that did not submit an APR on time must also include the data in this calculation.

Complete the table below using cumulative data as reported on the most recent submitted HUD APR in e-snaps for all non-HMIS projects within the CoC that should have submitted one. The CoC will first indicate the total number of exiting adults. Next, enter the total number of adults who exited CoC non-HMIS projects with each source of cash income. Once the total number of exiting adults has been entered, select "Save" and the percentages will auto-calculate. CoCs that do not have any non-HMIS projects for which an APR was required should select "No" to the question below. This only applies to CoCs that do not have any CoC-funded non-HMIS projects currently operating within the CoC that should have submitted an APR.

Total Number of Exiting Adults: 6,779

Total Number of Exiting Adults

Cash Income Sources (Q25a1.)	Number of Exiting Adults	Exit Percentage (Auto-Calculated)
Earned income	787	12%
Unemployment insurance	144	2%
SSI	786	12%
SSDI	368	5%
Veteran's disability	37	1%
Private disability insurance	0	0%
Worker's compensation	35	1%
TANF or equivalent	384	6%
General assistance	58	1%
Retirement (Social Security)	29	0%
Veteran's pension	19	0%
Pension from former job	6	0%
Child support	70	1%
Alimony (Spousal support)	19	0%
Other source	313	5%
No sources (from Q25a2.)	2,410	36%

The percentage values will be calculated by the system when you click the "save" button.

Does the CoC have any non-HMIS projects for which an APR was required to be submitted? Yes

4E. Continuum of Care (CoC) Non-Cash Benefits

Instructions:

HUD will assess CoC performance in assisting program participants with accessing non-cash benefit sources to improve economic outcomes of homeless persons. To demonstrate performance, CoCs must use data on all non-HMIS that should have submitted an APR in e-snaps for the most recent operating year. Projects that did not submit an APR on time must also include the data in this calculation.

Complete the table below using cumulative data from the most recent submitted HUD APR in e-snaps for all non-HMIS projects within the CoC that should have submitted one. The CoC will first indicate the total number of exiting adults. Next, enter the total number of adults who exited CoC non-HMIS projects with each source of non-cash benefits. Once the total number of exiting adults has been entered, select "Save" and the percentages will auto-calculate. CoCs that do not have any non-HMIS projects for which an APR was required should select "No" to the question below. This only applies to CoCs that do not have any CoC-funded non-HMIS projects currently operating within the CoC that should have submitted an APR.

Total Number of Exiting Adults: 6,779

Total Number of Exiting Adults:

Non-Cash Benefit Sources (Q26a1.)	Number of Exiting Adults	Exit Percentage (Auto-Calculated)
Supplemental nutritional assistance program	2,062	30%
MEDICAID health insurance	1,054	16%
MEDICARE health insurance	147	2%
State children's health insurance	4	0%
WIC	59	1%
VA medical services	137	2%
TANF child care services	7	0%
TANF transportation services	6	0%
Other TANF-funded services	14	0%
Temporary rental assistance	10	0%
Section 8, public housing, rental assistance	58	1%
Other source	30	0%
No sources (from Q26a2.)	2,404	35%

The percentage values will be calculated by the system when you click the "save" button.

Does the CoC have any non-HMIS projects for which an APR was required to be submitted? Yes

4F. Continuum of Care (CoC) Participation in Energy Star and Section 3 Employment Policy

Instructions:

HUD promotes energy-efficient housing. All McKinney-Vento funded projects are encouraged to purchase and use Energy Star labeled products. For information on the Energy Star Initiative go to: www.energystar.gov .

A "Section 3 business concern" is one in which: 51% or more of the owners are Section 3 residents of the area of services; or at least 30% of its permanent full-time employees are currently Section 3 residents of the area of services; or within three years of their date of hire with the business concern were Section 3 residents; or evidence of a commitment to subcontract greater than 25% of the dollar award of all subcontracts to businesses that meet the qualifications in the above categories is provided. The Section 3 clause can be found at 24 CFR Part 135.

Has the CoC notified its members of the Energy Star Initiative? Yes

Are any projects within the CoC requesting funds for housing rehabilitation or new construction? No

If 'Yes' to above question, click save to provide activities

If yes, are the projects requesting \$200,000 or more? Yes

4G. Continuum of Care (CoC) Enrollment and Participation in Mainstream Programs

It is fundamental that each CoC systematically help homeless persons to identify, apply for, and follow-up to receive benefits under SSI, SSDI, TANF, Medicaid, Food Stamps, SCHIP, WIA, and Veterans Health Care as well as any other State or Local program that may be applicable.

Does the CoC systematically analyze its projects APRs in order to improve access to mainstream programs? Yes

If 'Yes', describe the process and the frequency that it occurs:

The Chicago Alliance to End Homelessness analyzes the APRs for all projects annually, during the Chicago evaluation process for the HUD Continuum of Care Homeless Assistance Program NOFA application. Results are then conveyed to CoC working committees to inform policies and implement best practices in the field, regarding mainstream benefits.

Does the CoC have an active planning committee that meets at least 3 times per year to improve CoC-wide participation in mainstream programs? No

If 'Yes', indicate all meeting dates in the past 12 months:

Does the CoC coordinate with the State Interagency Council on Homelessness to reduce or remove barriers to accessing mainstream services? Not Applicable

Does the CoC and/or its providers have specialized staff whose primary responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs? Yes

If 'Yes', identify these staff members: Provider Staff

Does the CoC systematically provide training on how to identify eligibility and program changes for mainstream programs to provider staff: No

If 'Yes', specify the frequency of the training: Not Applicable

Does the CoC use HMIS as a way to screen for mainstream benefit eligibility? No

If 'Yes', indicate for which mainstream programs HMIS completes screening:

Has the CoC participated in SOAR training? Yes

If 'Yes', indicate training date(s):

July 19, 2012; August 9, 2012

4H. Homeless Assistance Providers Enrollment and Participation in Mainstream Programs

Indicate the percentage of homeless assistance providers that are implementing the following activities:

Activity	Percentage
1. Case managers systematically assist clients in completing applications for mainstream benefits. 1a. Describe how service is generally provided:	94%
Case managers assess clients eligibility for mainstream benefits during intake and assist clients with	
2. Homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs:	88%
3. Homeless assistance providers use a single application form for four or more mainstream programs: 3.a Indicate for which mainstream programs the form applies:	17%
SSI, SSDI, TANF, Medicaid, VA, Health Care	
4. Homeless assistance providers have staff systematically follow-up to ensure mainstream benefits are received:	89%
4a. Describe the follow-up process:	
Case managers contact mainstream benefit offices with client involvement to ensure mainstream benefits	

4I. Unified Funding Agency

Instructions

CoCs that were approved for UFA designation during the FY2011 CoC Registration process must complete all of the questions below in full.

Is the collaborative applicant able to apply to HUD for funding for all of the projects within the geographic area and enter into a grant agreement with HUD for the entire geographic area? No

Is the collaborative applicant able to enter into legal binding agreements with subrecipients and receive and distribute funds to subrecipients for all projects with the geographic area? No

What experience does the CoC have with managing federal funding, excluding HMIS experience? (limit 1500 characters)

n/a

Indicate the financial management system that has been established by the UFA applicant to ensure grant funds are executed timely with subrecipients, spent appropriately, and draws are monitored. (limit 1500 characters)

n/a

Indicate the process for monitoring subrecipients to ensure compliance with HUD regulations and the NOFA. (limit 1500 characters)

n/a

What is the CoC's process for issuing concerns and/or findings to HUD-funded projects? (limit 1500 characters)

n/a

Specifically describe the process the CoC will use to obtain approval for any proposed grant agreement amendments prior to submitting the request for amendment to HUD. (limit 1500 characters)

n/a

Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan	Yes	IL-510 Cert of Co...	01/18/2013
CoC-HMIS Governance Agreement	No		
Other	No		
Other	No		
Other	No		
Other	No		
Other	No		
Other	No		

Attachment Details

Document Description: IL-510 Cert of Con Plan

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Submission Summary

Page	Last Updated
1A. Identification	No Input Required
1B. CoC Operations	01/18/2013
1C. Committees	01/18/2013
1D. Member Organizations	01/15/2013
1E. Project Review and Selection	01/18/2013
1F. e-HIC Change in Beds	01/16/2013
1G. e-HIC Sources and Methods	01/18/2013
2A. HMIS Implementation	01/18/2013
2B. HMIS Funding Sources	01/18/2013
2C. HMIS Bed Coverage	01/15/2013
2D. HMIS Data Quality	01/15/2013
2E. HMIS Data Usage	01/18/2013
2F. HMIS Data and Technical Standards	01/18/2013
2G. HMIS Training	01/15/2013
2H. Sheltered PIT	01/18/2013
2I. Sheltered Data - Methods	01/18/2013
2J. Sheltered Data - Collections	01/15/2013
2K. Sheltered Data - Quality	01/17/2013
2L. Unsheltered PIT	01/18/2013
2M. Unsheltered Data - Methods	01/18/2013
2N. Unsheltered Data - Coverage	01/15/2013
2O. Unsheltered Data - Quality	01/18/2013
Objective 1	01/18/2013
Objective 2	01/11/2013
Objective 3	01/18/2013
Objective 4	01/18/2013

Objective 5	01/18/2013
Objective 6	01/18/2013
Objective 7	01/18/2013
3B. Discharge Planning: Foster Care	01/18/2013
3B. CoC Discharge Planning: Health Care	01/16/2013
3B. CoC Discharge Planning: Mental Health	01/18/2013
3B. CoC Discharge Planning: Corrections	01/18/2013
3C. CoC Coordination	01/18/2013
3D. CoC Strategic Planning Coordination	01/18/2013
3E. Reallocation	11/21/2012
3F. Eliminated Grants	No Input Required
3G. Reduced Grants	01/17/2013
3H. New Projects Requested	01/16/2013
3I. Reallocation Balance	No Input Required
4A. FY2011 CoC Achievements	01/18/2013
4B. Chronic Homeless Progress	01/18/2013
4C. Housing Performance	01/06/2013
4D. CoC Cash Income Information	01/18/2013
4E. CoC Non-Cash Benefits	01/18/2013
4F. Section 3 Employment Policy Detail	01/07/2013
4G. CoC Enrollment and Participation in Mainstream Programs	01/11/2013
4H. Homeless Assistance Providers Enrollment and Participation in Mainstream Programs	01/11/2013
4I. Unified Funding Agency	No Input Required
Attachments	01/18/2013
Submission Summary	No Input Required

Certification of Consistency with the Consolidated Plan

U.S. Department of Housing
and Urban Development

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.
(Type or clearly print the following information:)

Applicant Name: Chicago Alliance to End Homelessness

Project Name: See attached list

Location of the Project: City of Chicago

Name of the Federal Program to which the applicant is applying: 2012 HUD Continuum of Care Homeless Assistance

Name of Certifying Jurisdiction: City of Chicago

Certifying Official of the Jurisdiction Name: Darlene Watkins

Title: Assistant Director

Signature: 

Date: Jan 4, 2013

Agency Name	Project Name	HUD Project Type
A Safe Haven Foundation	600 South	PH
A Safe Haven Foundation	Douglas Villa Scattered Sites SSO	SSO
A Safe Haven Foundation	Family Wellness Center	TH
A Safe Haven Foundation	The Studios	PH
A Safe Haven Foundation	Westside Housing for Independent Living	TH
Affordable Housing Preservation Foundation 51st Street Y	Washington Park SRO	PH
AIDS Foundation of Chicago	Low-Income Housing Trust Fund Chronic Homeless (AFC Housing)	PH
AIDS Foundation of Chicago	New 2013 Bonus Project	PH
AIDS Foundation of Chicago	Safe Start 1	PH
Ambassadors For Christ	Low-Income Housing Trust Fund 2 (Ambassadors For Christ)	PH
Apna Ghar, Inc.	Supportive Housing Program/ Transitional Housing	TH
Beacon Therapeutic Diagnostic and Treatment Center	Shelter Outreach Services/HUD	SSO
Breakthrough Urban Ministries, Inc.	Breakthrough Chronic Homeless	PH
Breakthrough Urban Ministries, Inc.	Breakthrough Supportive Housing 1	PH
Casa Central	Casa Central La Posada Interim Housing	TH
Casa Central	Casa Central La Posada Scattered Sites	PH
Cathedral Shelter of Chicago	Supportive Housing Program	SSO
Cathedral Shelter of Chicago	Supportive Services GAP Program	PH
Catholic Charities	Central Referral System Project	New - SSO
Catholic Charities	New Hope Apartments	TH
Catholic Charities	St. Leo Residence	PH
Chicago Alliance to End Homelessness	CoC Planning Project	New - CoC Planning
Chicago Alliance to End Homelessness	HMIS Expansion	New - HMIS
Chicago Alliance to End Homelessness	HMIS Original	HMIS
Chicago Dept. of Family and Support Services	A Safe Haven - Shelter Plus Care	S+C - PH
Chicago Dept. of Family and Support Services	Brand New Beginnings - Shelter Plus Care	S+C - PH
Chicago Dept. of Family and Support Services	Cathedral Shelter of Chicago - Cressey House	S+C - PH
Chicago Dept. of Family and Support Services	Chicago Department of Family & Support Services - ARCH	S+C - PH
Chicago Dept. of Family and Support Services	Chicago Department of Family & Support Services - Shelter Plus Care I	S+C - PH
Chicago Dept. of Family and Support Services	Chicago Department of Family & Support Services - Shelter Plus Care II	S+C - PH
Chicago Dept. of Family and Support Services	Chicago Department of Family & Support Services - Shelter Plus Care III	S+C - PH
Chicago Dept. of Family and Support Services	Chicago Department of Family & Support Services - Shelter Plus Care REST	S+C - PH
Chicago Dept. of Family and Support Services	Chicago House & Social Service Agency - Residence for Families	S+C - PH
Chicago Dept. of Family and Support Services	Christian Community Health Center - The Genesis Project	S+C - PH
Chicago Dept. of Family and Support Services	Facing Forward to End Homelessness - Shelter Graduates	S+C - PH
Chicago Dept. of Family and Support Services	Featherfist	S+C - PH
Chicago Dept. of Family and Support Services	Heartland Health Outreach - Shelter Plus Care II	S+C - PH
Chicago Dept. of Family and Support Services	Heartland Health Outreach - Shelter Plus Care North Side	S+C - PH
Chicago Dept. of Family and Support Services	Heartland Human Care Services - Rafael Center	S+C - PH
Chicago Dept. of Family and Support Services	Housing Opportunities for Women, Inc. - Shelter Plus Care I	S+C - PH
Chicago Dept. of Family and Support Services	Housing Opportunities for Women, Inc. - Shelter Plus Care II	S+C - PH
Chicago Dept. of Family and Support Services	Housing Opportunities for Women, Inc. - Shelter Plus Care III	S+C - PH

Agency Name	Project Name	HUD Project Type
Chicago Dept. of Family and Support Services	Housing Opportunities for Women, Inc. - Shelter Plus Care IV	S+C - PH
Chicago Dept. of Family and Support Services	Housing Opportunities for Women, Inc. - Shelter Plus Care V	S+C - PH
Chicago Dept. of Family and Support Services	Housing Opportunities for Women, Inc. - Shelter Plus Care VI	S+C - PH
Chicago Dept. of Family and Support Services	Human Resources Development Institute, Inc. - Shelter Plus Care	S+C - PH
Chicago Dept. of Family and Support Services	Interfaith Housing Development Corporation of Chicago - HOPE II	S+C - PH
Chicago Dept. of Family and Support Services	Interfaith Housing Development Corporation of Chicago - Independence House	S+C - PH
Chicago Dept. of Family and Support Services	Interfaith Housing Development Corporation of Chicago - Sanctuary Place	S+C - PH
Chicago Dept. of Family and Support Services	Interfaith Housing Development Corporation of Chicago - Vision House	S+C - PH
Chicago Dept. of Family and Support Services	Mercy Housing Lakefront - Near North	S+C - PH
Chicago Dept. of Family and Support Services	Mercy Housing Lakefront - Wentworth Commons	S+C - PH
Chicago Dept. of Family and Support Services	North Side Housing & Supportive Services - Shelter Plus Care V	S+C - PH
Chicago Dept. of Family and Support Services	North Side Housing & Supportive Services - Shelter Plus Care XV	S+C - PH
Chicago Dept. of Family and Support Services	Olive Branch Mission - Hope of a Home	S+C - PH
Chicago Dept. of Family and Support Services	St. Leonard's Ministries - St. Andrew's Court	S+C - PH
Chicago Dept. of Family and Support Services	The Inner Voice, Inc. - Shelter Plus Care	S+C - PH
Chicago Dept. of Family and Support Services	The Safer Foundation - FOCUS	S+C - PH
Chicago Dept. of Family and Support Services	Thresholds - Shelter Plus Care I	S+C - PH
Chicago Dept. of Family and Support Services	Thresholds - Shelter Plus Care II	S+C - PH
Chicago Dept. of Family and Support Services	Thresholds - Shelter Plus Care III	S+C - PH
Chicago Dept. of Family and Support Services	Thresholds - Shelter Plus Care IV	S+C - PH
Chicago House and Social Service Agency	First Step Program (The Supportive Living Program)	PH
Chicago House and Social Services	New 2013 Bonus Project	PH
ChildServ	Emerge Program	TH
Christian Community Health Center	EnHarmony Bonus Project	PH
Christian Community Health Center	Low Income Housing Trust Fund Chronic Homeless (Christian Community Hlth Ctr)	PH
Community Supportive Living Systems, Inc.	Emerald House	PH
Connectns for Abused Women and their Children	Greenhouse Shelter	SSO
Cornerstone Community Outreach	CCO Transitional Housing with Supportive Services	TH
Cornerstone Community Outreach	Leland House	PH
Cornerstone Community Outreach	Low-Income Housing Trust Fund Chronic Homeless (Cornerstone Comm Outreach)	PH
Deborah's Place	Dolores' Safe Haven	PH
Deborah's Place	Marah's Permanent Housing	PH
Deborah's Place	Patty Crowley Apartments	PH
Deborah's Place	Rebecca Johnson Apartments	PH
EdgeAlliance	The Phoenix	PH
Facing Forward to End Homelessness	Sanctuary Place	PH
Family Rescue	Ridgeland Apartments and Day Care Center	TH
Family Rescue	Rosenthal Family Lodge	SSO
FEATHERFIST	EXPEDIENT, PRIORITIZED, INDIVIDUALIZED CASE MANAGEMENT (EPIC)	SSO
FEATHERFIST	FEATHERFIST APARTMENTS	PH
FEATHERFIST	FEATHERFIST OUTREACH, RETENTION AND TREATMENT (FORT)	TH
FEATHERFIST	FOUNDATIONS	PH
FEATHERFIST	HOPE VILLAGE	TH
FEATHERFIST	HOUSING, UTILIZATION AND TRAINING SERVICES (HUTS)	SSO

Agency Name	Project Name	HUD Project Type
FEATHERFIST	LOW-INCOME HOUSING TRUST FUND 1	PH
FEATHERFIST	LOW-INCOME HOUSING TRUST FUND 2	PH
FEATHERFIST	LOW-INCOME HOUSING TRUST FUND CHRONIC HOMELESS	PH
FEATHERFIST	OUTREACH AND COMPREHENSIVE ASSESSMENT (ORCA)	SSO
Healthcare Alternative Systems, Inc.	Transitional Housing Program	TH
Heartland Health Outreach, Inc.	Antonia Safe Haven	PH
Heartland Health Outreach, Inc.	Assisted Permanent Housing	PH
Heartland Health Outreach, Inc.	Bridges to Home	TH
Heartland Health Outreach, Inc.	Low Income Housing Trust Fund Chronic Homeless Initiative (Heartland Health Outreach)	PH
Heartland Health Outreach, Inc.	Pathways Home Outpatient	SSO
Heartland Health Outreach, Inc.	Pathways Home Permanent Housing	PH
Heartland Health Outreach, Inc.	Pathways Home Safe Haven	PH
Heartland Health Outreach, Inc.	Supportive Permanent Housing	PH
Heartland Human Care Services, Inc.	Families Building Community	PH
Heartland Human Care Services, Inc.	Neon Street Dorm	TH
Heartland Human Care Services, Inc.	NPAC SHP Permanent Housing	PH
Heartland Human Care Services, Inc.	NPAC SHP w/Short Term Support	PH
Heartland Human Care Services, Inc.	Stable Futures	PH
Heartland Human Care Services, Inc.	Violence Recovery Services	SSO
Housing Opportunities for Women	New 2013 Bonus Project	PH
Housing Opportunities for Women, Inc.	IL-510-REN REST SHP2	PH
Housing Opportunities for Women, Inc.	IL-510-REN-REST SHP 1	PH
Housing Opportunities for Women, Inc.	Low-Income Housing Trust Fund 2 (Housing Opportunities for Women)	PH
Housing Opportunities for Women, Inc.	Low-Income Housing Trust Fund Chronic Homeless (Housing Opportunities for Women)	PH
Housing Opportunities for Women, Inc.	Singles Two	PH
Human Resources Development Institute, Inc. (HRDI)	HUD Supportive Housing for Women	TH
Inspiration Corporation	Cafe Too	SSO
Inspiration Corporation	IC Short Term Support Housing	PH
Inspiration Corporation	Low-Income Housing Trust Fund 2 (Inspiration Corporation)	PH
Inspiration Corporation	Low-Income Housing Trust Fund Chronic Homeless (Inspiration Corporation)	PH
Inspiration Corporation	SSO - Supportive Services Only	SSO
Inspiration Corporation	The Employment Project	SSO
Interfaith House	respite/assessment	TH
La Casa Norte	IL-510 - NEW - Scattered Site Youth Housing	PH
La Casa Norte	New 2013 Bonus Project	PH
La Casa Norte	Permanent Housing Bonus Project	PH
La Casa Norte	Solid Ground Supportive Housing Program	TH
Latin United Community Housing Association	Social Services GAP Program	PH
Matthew House Inc	Derrick David Stinson Supportive Housing Program	PH
Matthew House Inc	Diaconea Homeless Supportive Services Program	SSO
Matthew House Inc	Low-Income Housing Trust Fund Chronic Homeless (Matthew House)	PH
Matthew House Inc	Marzette Johnson Housing Project	PH
McDermott Center	Undomiciled Mentally Ill Substance Abuse (UMISA) Program	SSO
Mercy Housing Lakefront	Carlton, Miriam, Delmar	PH
Mercy Housing Lakefront	Holland Families	PH
Mercy Housing Lakefront	Near North	PH
Mercy Housing Lakefront	Recovery Belray Holland Singles	PH
Mercy Housing Lakefront	South Loop and Wentworth Combined	PH
Near West Side Community Development Corporation	Near West Side SHP	PH

Agency Name	Project Name	HUD Project Type
New Moms Inc	Cooperative Living Program (CLP)	TH
North Side Housing and Supportive Services, Inc.	Intensive Case Management	SSO
North Side Housing and Supportive Services, Inc.	Low-Income Housing Trust Fund 1 (North Side Housing and Supportive Services)	PH
North Side Housing and Supportive Services, Inc.	Low-Income Housing Trust Fund 2 (North Side Housing)	PH
North Side Housing and Supportive Services, Inc.	Permanent Supportive Housing Program	PH
Northwestern Memorial Hospital	Carter House	PH
Northwestern Memorial Hospital	New Home Project	SSO
Northwestern Memorial Hospital	Union House	PH
Polish American Association	Low-Income Housing Trust Fund 2 (Polish American Assn)	PH
Renaissance Social Services	New 2013 Bonus Project	PH
Renaissance Social Services, Inc.	Housing Stability Program	PH
Renaissance Social Services, Inc.	IL-510 - NEW - Supportive Housing Outreach Team	PH
Renaissance Social Services, Inc.	Low Income Hsg Trust Fund 1 (DFSS)	PH
Renaissance Social Services, Inc.	SHOT 2.0	PH
San Jose Obrero Mission	New 2013 Bonus Project	PH
Sarah's Circle	Case Management and Rental of Space	SSO
Sarah's Circle	Low-Income Housing Trust Fund Chronic Homeless (Sarah's Circle)	PH
Single Room Housing Assistance Corp.	IL-510 - REN - SHP-PH Expansion (IL01B710038)	PH
Single Room Housing Assistance Corp.	IL-510 - REN - Supportive Housing Program (SHP)(IL01B70042)	PH
Single Room Housing Assistance Corp.	IL-510 - REN - Supportive Housing Program (SHP)(IL01B710038)	PH
Single Room Housing Assistance Corporation	New 2013 Bonus Project	PH
St Leonards	Psychological Service	SSO
Supportive Services Development Corporation	Low-Income Housing Trust 1(Supportive Services Dev Corp)	PH
Teen Living Programs	CaSSA Clustered and Scattered Site Apartments	TH
Teen Living Programs	TLP Project- Belfort House	TH
The Inner Voice, Inc.	Chronic Homeless Initiative (Inner Voice)	PH
The Inner Voice, Inc.	Eddie Beard Homeless Veterans' Transitional Housing Program	TH
The Inner Voice, Inc.	Family Regeneration Project	SSO
The Inner Voice, Inc.	Learning Center (SSO)	SSO
The Inner Voice, Inc.	Pioneer House Transitional Housing Program	TH
The Interfaith Housing Development Corporation of Chicago	Branch of Hope Apartments	PH
The Interfaith Housing Development Corporation of Chicago	Independence House	PH
The Night Ministry	Interim Program at Open Door Shelter West Town	TH
The Night Ministry	Transitional Living Program at Open Door Shelter West Town	TH
The Renaissance Collaborative	TRC Permanent Supportive Housing Project	PH
Thresholds	New 2013 Bonus Project	PH
Thresholds Inc	Austin Safe Haven	PH
Thresholds Inc	Lawson Safe Haven	PH
Thresholds Inc	Mobile Assessment Unit	SSO
Thresholds Inc	Rowan Trees Apartments	PH
Thresholds Inc	Trust Fund Chronic Homeless (Thresholds)	PH
Thresholds Inc	Wayne Street Grais Apartments	PH
Unity Parenting & Counseling Inc.	Focus Hope II	PH
Unity Parenting & Counseling Inc.	Harmony Village	TH
Unity Parenting & Counseling Inc.	Low-Income Housing Trust Fund 2 (unity parenting)	PH
Unity Parenting & Counseling Inc.	Low-Income Housing Trust Fund Chronic Homelessness (Unity Parenting inc.)	PH
Young Men's Christian Association	Life Development Center	PH
Young Men's Christian Association	Life Development Center Gap	PH