

## Before Starting the Special CoC Application

You must submit both of the following parts in order for us to consider your Special NOFO Consolidated Application complete:

1. the CoC Application, and
2. the CoC Priority Listing.

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The Special Notice of Funding Opportunity (Special NOFO) for specific application and program requirements.
2. The Special NOFO Continuum of Care (CoC) Application Detailed Instructions for Collaborative Applicants which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

CoC Approval is Required before You Submit Your CoC's Special NOFO CoC Consolidated Application

- 24 CFR 578.9 requires you to compile and submit the Special NOFO CoC Consolidated Application on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You must upload the [Specific Attachment Name] attachment to the 4A. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

# 1A. Continuum of Care (CoC) Identification

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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**1A-1. CoC Name and Number:** IL-513 - Springfield/Sangamon County CoC

**1A-2. Collaborative Applicant Name:** County of Sangamon

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** M.E.R.C.Y. Communities

1A-5.	<b>New Projects</b>	
	Complete the chart below by indicating which funding opportunity(ies) your CoC applying for projects under. A CoC may apply for funding under both set asides; however, projects funded through the rural set aside may only be used in rural areas, as defined in the Special NOFO.	
1.	<b>Unsheltered Homelessness Set Aside</b>	Yes
2.	<b>Rural Homelessness Set Aside</b>	No

## 1B. Project Capacity, Review, and Ranking–Local Competition

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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<b>1B-1.</b>	<b>Web Posting of Your CoC Local Competition Deadline–Advance Public Notice. (All Applicants)</b>	
	Special NOFO Section VII.B.1.b.	
	You must upload the Local Competition Deadline attachment to the 4A. Attachments Screen.	
	Enter the date your CoC published the deadline for project application submission for your CoC's local competition.	08/01/2022

<b>1B-2.</b>	<b>Project Review and Ranking Process Your CoC Used in Its Local Competition. (All Applicants)</b>	
	Special NOFO Section VII.B.1.a.	
	You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected new project applications during your CoC's local competition:	
	1. Established total points available for each project application type.	Yes
	2. At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
	3. At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes

<b>1B-3.</b>	<b>Projects Rejected/Reduced–Notification Outside of e-snaps. (All Applicants)</b>	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4A. Attachments Screen.	
	1. Did your CoC reject or reduce any project application(s)?	Yes
	2. Did your CoC inform the applicants why their projects were rejected or reduced?	Yes
	3. If you selected yes, for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	10/05/2022

1B-3a.	<b>Projects Accepted–Notification Outside of e-snaps. (All Applicants)</b>	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Accepted attachment to the 4A. Attachments Screen.	
	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	10/05/2022
1B-4.	<b>Web Posting of the CoC-Approved Special NOFO CoC Consolidated Application. (All Applicants)</b>	
	Special NOFO Section VII.B.1.b.	
	You must upload the Web Posting–Special NOFO CoC Consolidated Application attachment to the 4A. Attachments Screen.	
	Enter the date your CoC posted its Special NOFO CoC Consolidated Application on the CoC’s website or affiliate’s website–which included: 1. the CoC Application, and 2. Priority Listings.	10/18/2022

## 2A. System Performance

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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<b>2A-1.</b>	<b>Reduction in the Number of First Time Homeless—Risk Factors.</b>	
	Special NOFO Section VII.B.2.b.	
	Describe in the field below:	
	1. how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;	
	2. how your CoC addresses individuals and families at risk of becoming homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.	

**(limit 2,500 characters)**

1.HCoC Homelessness Prevention/Diversion Task Group is a part of our Crisis Response System. This task group DETERMINES which RISK FACTORS our CoC uses as we work to divert people from our system & prevent experiences of homelessness by EXAMINING HMIS DATA related to households entering homelessness and data from our local Community Action organization, Sangamon County Community Resources. The Task Group identifies trends through HMIS data evaluation, 211 call data, reports on the number of eviction court cases, & feedback from case managers & Community Action Agency staff. Priority RISK FACTORS for the HCoC are eviction, loss of income, & health related crisis.

2.HCoC Homelessness Prevention/Diversion Task Group helps train organizations around our strategy to prevent homelessness. The HCoC Homeless Prevention and Diversion Task group COMMUNICATES & COORDINATES about resources & services available to prevent individuals and families from becoming homeless or divert them as quickly as possible from emergency shelter into permanent housing. Our community receives a HP Grant that PROVIDES DIRECT ASSISTANCE to help people at risk of becoming homeless. Public, private, governmental, faith-based, & educational organizations refer individuals & families who may be at risk to HP & diversion assistance. CE personnel are trained to determine during the assessment process if prevention/diversion funds could provide the stability needed to maintain current living conditions and divert literal homelessness. The HCoC helped to launch the Sangamon Housing Help Line this year that provides an initial intake in HMIS and then makes a direct referral to an agency in the community that provides rent or utility assistance. The HP/Diversion Task Group works to prioritize agencies to be referred to first for rent and utility need based on funding available.

3.The chair of our Homeless Prevention/Diversion Task Group is responsible for overseeing the CoC strategy to reduce or end the number of people experiencing homelessness for the first time.

2A-2.	Length of Time Homeless–Strategy to Reduce. (All Applicants)	
	Special NOFO Section VII.B.2.c.	

	Describe in the field below:
1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

1.HCoC data analysis reveals a significant NEED FOR NEW AND EXPANDED PH PROGRAMS in order to REDUCE THE LENGTH OF TIME people remain homeless. HCoC has increased the number of types of CE access points in order to better communicate the level & severity of need to organizations, potential funders, & community. THE EHV program allowed HCoC to develop a MOVE ON PROGRAM to create movement in the limited supply of PSH beds available. The HCoC's recently completed community wide strategic planning process calls for 765 new housing opportunities in the next five years. Expanding available rental subsidy and case management to create affordable housing opportunities will be provided initially from HOME-ARP and local funding. Additionally, the HCoC is engaging landlords to increase the number of units available through a Landlord Risk Mitigation Fund and the work of the HCoC Housing Navigator to educate landlords on supportive housing opportunities.

2.The HCoC strategies to reduce the length of time individuals and families remain homeless include factoring length of time an individual or family has experienced homelessness into our CES PRIORITIZATION METHODOLOGY, INCREASING THE NUMBER OF PH UNITS, TRAINING ON HOUSING PROBLEM SOLVING, & DEVELOPING NEW COLLABORATIVE OUTREACH PROCESSES. HCoC has prioritized RRH & PSH development as the highest priority for funding. Through prioritizing PH, we aim to increase RRH availability by 100 percent and increase the number of organizations w/ RRH programs. Our CES prioritizes CHRONIC HOMELESSNESS & the length of time a household experiences homelessness is a factor for our prioritized CE list. Individuals needing permanent housing are identified by personnel in emergency shelters, the Coordinated Entry System, and street outreach efforts.

3.The chair of the Permanent Housing Task Group is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.

2A-3.	Successful Permanent Housing Placement or Retention. (All Applicants) Special NOFO Section VII.B.2.d.	
	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:	
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and	
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.	

(limit 2,500 characters)

1.HCoC data analysis reveals significant NEED FOR NEW AND EXPANDED PH PROGRAMS to increase exits to PH destinations. The supply of PSH and RRH units within our CoC is insufficient to meet community need which causes prolonged stays in ES and TH programs w/ limited opportunities for exits to PH. HMIS data demonstrates Adult Only households have the lowest rate of exit to permanent destinations and make up the largest percentage of households waiting for resources on our CE list. INCREASING AVAILABILITY OF PH programs is a high priority of our CoC and a key part of our strategy to increase exits to PH. HCoC is accomplishing this through prioritizing PH programs that follow a HOUSING FIRST approach with all funding the CoC helps to allocate. Though TRAINING and AGENCY CAPACITY BUILDING, our CoC will develop new PSH and RRH programs. The EHV program has led to a development of a Move On program in our community that the CoC hopes to expand to include HCVs to increase the opportunities for vouchers for PH program participants. A CoC Housing Navigator has been hired to build landlord relationships and expand access to housing units throughout our geographic area to provide clients greater choice in unit location and configuration. A key strategic plan initiative for this winter involves utilizing HOME-ARP funds to create housing opportunities for 30 people.

2.HCoC’s strategy to increase retention of permanent housing includes increasing training, services, client choice, and connectivity to mainstream benefits. The CoC will increase the number of trainings on helping clients connect to mainstream benefits and available community resources and using HMIS data to evaluate potential gaps that could lead to challenges in retaining permanent housing. Additionally, HMIS will be utilized by the Strategy and Service Committee to analyze and identify any projects that are performing below the community goal set through the strategic planning process of 95% retention rate. Organizations are encouraged to maintain supportive relationships with clients and serve as a resource that will help people retain housing.

2A-4.	Returns to Homelessness–CoC’s Strategy to Reduce Rate. (All Applicants) Special NOFO Section VII.B.2.e.	
Describe in the field below:		
1.	how your CoC identifies individuals and families who return to homelessness;	
2.	your CoC’s strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)



1.HCoC’s Strategy and Services Committee IDENTIFIES RETURNS TO HOMELESSNESS THROUGH HMIS ANALYSIS. All CoC and ESG funded projects enter client information into HMIS that allows HCoC to identify individuals and families who return to homelessness, which household types most frequently return to homelessness, and the projects and project types they participated in. This year most returns to homeless came from adult only households who exited from Emergency Shelter programs.

2.HCoC’s strategy to REDUCE the RATE OF RETURNS to homelessness involves identifying causes of returns to homelessness and expanding RRH and PSH opportunities so that ES clients will be able to directly enter high-quality supportive housing programs. ES clients can access Coordinated Entry as well as health care programs, mental and behavioral health supports, job location support, and other services designed to help create pathways to housing. Our system currently has a large gap between the need and availability for PH which causes people to remain in ES and other programs for a prolonged period. Community data demonstrates that exits to housing that occur by means other than RRH or PSH have higher rates of returns to homelessness. To create more RRH and PSH programs, HCoC has made the development of new and expanding existing programs our highest priority and has worked with local funding sources to find new streams for developing additional capacity for RRH and PSH.

3.The chair of the Strategy and Services Committee is tasked with analysis of Systems Performance Measures including returns to homelessness and working the Committee to develop a strategy for improvement by reducing the rate of returns.

2A-5.	Increasing Employment Cash Income–Strategy. (All Applicants)	
Special NOFO Section VII.B.2.f.		
Describe in the field below:		
1.	the strategy your CoC has implemented to increase employment cash sources;	
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.	

(limit 2,500 characters)

1.HCoC’s strategy to INCREASE EMPLOYMENT INCOME involves supporting agencies that provide homelessness services as they include provision of employment services in their project design and execution and DEVELOPING PARTNERSHIPS that increase employment opportunities. Agencies work with each client to address employment needs and appropriate support for job training, communication/soft skill development, resume building. HCoC has elevated increasing income as a scoring metric in our CoC Competition. The Land of Lincoln Workforce Alliance participates in the HCoC General Membership and provides access to Workforce Investment and Opportunity funded training and education programs. HCoC invites area employers and Chambers of Commerce to participate in the HCoC General Membership. HCoC will provide ongoing training for agencies on best practices and effective strategies to help connect clients with employment opportunities. HCoC will also provide community education and outreach to help make businesses aware of the role they can play in ending homelessness through employment.

2.HCoC agencies work with the Land of Lincoln Workforce Alliance for job search assistance, career counseling, training opportunities, hiring events, workshops, and assistance with IllinoisJobLink for searching for positions and posting resumes. Another HCoC partner, Capital Township provides temporary employment for jobless adults by matching people with an employer based on their job skills and interests. Clients eligible for this program gain experience and tangible skills while earning a pay check. Sangamon County State’s Attorney Office provides resources for expungement and sealing of certain criminal records to help remove that barrier from the job and housing search process. HCoC communicates these opportunities through General Membership meetings and monthly newsletter about these opportunities.

3.The chair of the Strategy and Services Committee is tasked with analysis of Systems Performance Measures including increasing employment cash income and working the Committee to develop a strategy for improvement that would increase program participants’ incomes from employment.

2A-5a.	Increasing Non-employment Cash Income–Strategy. (All Applicants)	
	Special NOFO Section VII.B.2.f.	
	Describe in the field below:	
1.	the strategy your CoC has implemented to increase non-employment cash income;	
2.	your CoC’s strategy to increase access to non-employment cash sources; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase non-employment cash income.	

**(limit 2,500 characters)**

1.HCoC strategy to increase non-employment cash income is to equip and support agencies in CONNECTING CLIENTS TO MAINSTREAM BENEFITS as quickly as possible to increase the percentage of adults who have non-employment cash income. Additional training for increasing non-employment cash income has been prioritized by the HCoC in order to increase the number of clients system wide connected to benefits they are eligible for. The HCoC is partnering with the Supportive Housing Providers Association to host a community training on SOAR and other non-employment cash income opportunities in February of 2023. The City of Springfield has committed funding for a SOAR Certified Case Manager to work community wide to help clients through the SOAR process as well as to support other SOAR certified Case Mangers in the community as they assist clients.

2. Agencies work to ensure that all non-employment income clients are eligible for is applied for when clients are accepted into their agency programs in order to provide immediate access. Several agencies employ SOAR-certified Case Managers to stay abreast of changes to qualifications and availability of non-employment cash income. Case Managers work closely with clients to maintain and record any changes in eligibility. Transportation and computer access are provided by Emergency Shelters, Transitional Housing programs, Day Service providers and community partners such as Lincoln Library. Access to interpretation services is available on demand.

3.The Chair of the Strategy and Services Committee is tasked with analysis of Systems Performance Measures including non-employment cash income and working the Committee to develop a strategy for increasing program participants' non-employment cash income.

## 2B. Coordination and Engagement–Inclusive Structure and Participation

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2B-1.	<b>Inclusive Structure and Participation–Participation in Coordinated Entry. (All Applicants)</b>	
	Special NOFO Sections VII.B.3.a.(1)	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing of CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	CoC-Funded Victim Service Providers	Yes	Yes	Yes
5.	CoC-Funded Youth Homeless Organizations	Yes	Yes	Yes
6.	Disability Advocates	Yes	Yes	Yes
7.	Disability Service Organizations	Yes	Yes	Yes
8.	Domestic Violence Advocates	Yes	Yes	Yes
9.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
10.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
11.	Hospital(s)	Yes	Yes	Yes
12.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
13.	Law Enforcement	Yes	Yes	Yes
14.	Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) Advocates	Yes	Yes	Yes
15.	LGBTQ+ Service Organizations	Yes	Yes	Yes
16.	Local Government Staff/Officials	Yes	Yes	Yes
17.	Local Jail(s)	Yes	Yes	Yes
18.	Mental Health Service Organizations	Yes	Yes	Yes
19.	Mental Illness Advocates	Yes	Yes	Yes

20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
23.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
24.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
25.	Other homeless subpopulation advocates	Yes	Yes	Yes
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	Yes	Yes	Yes
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Service Providers	Yes	Yes	Yes
	Other:(limit 50 characters)			
33.	Legal Aid Organization	Yes	Yes	Yes
34.	Educational Institution	Yes	Yes	Yes

2B-2.	Open Invitation for New Members. (All Applicants)	
	Special NOFO Section VII.B.3.a.(2), V.B.3.g.	

	Describe in the field below how your CoC:
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, other People of Color, persons with disabilities).

(limit 2,500 characters)

1.HCoC extends public invitations A MINIMUM OF SIX TIMES A YEAR through a variety of mediums to solicit new members to join the CoC. The front page of the HCoC WEBSITE instructs any person or organization on how to become a part of the General Membership and new sign-ups for the HCoC NEWSLETTER receive a follow-up inviting them to become a General Member. PUBLIC INVITATIONS were extended through the CoC Facebook page and as a part of PUBLIC PRESENTATIONS our Continuum Coordinator gave at Sangamon County and City of Springfield government meetings, Rotary, Kiwanis and Greater Springfield Interfaith Association meetings, Westminster Presbyterian Church, and Capital Township. A postcard was created and passed out at a United Way fundraiser with a QR code informing people on how to become a General Member. The Community Education Task Group created an online, on-demand COMMUNITY AMBASSADOR TRAINING that was completed by 139 Community members with education on our strategy, housing first programs, and overcoming stigma which ended with an opportunity to join our General Membership. COMMUNITY SUMMITS AND FOCUS GROUPS connected to our community wide strategic planning process also shared information about joining the General Membership.

2. HCoC ENSURES EFFECTIVE COMMUNICATION with individuals with disabilities by ensuring CLOSED CAPTIONING is available for meetings held via Zoom and also publishing videos of our General Membership meetings to YouTube so that closed captioning is accessible. Agendas, meeting minutes, and policy DOCUMENTS ARE SHARED IN ACCESSIBLE PDF FORMATS. Announcements, news, and other invitations are made on the public CoC Facebook page in order to utilize the platform’s ACCESSIBILITY TOOLS. HCoC newsletter emails are sent through MailChimp and were designed using MailChimp’s Accessibility toolkit.

3. HCoC Coordinator and Board Members invite organizations SERVING CULTURALLY SPECIFIC COMMUNITIES that are represented in our population of people experiencing homelessness. In the past two years, our General Membership grew FROM 21 ORGANIZATIONS TO OVER 40 ORGANIZATIONS through this outreach and intentional invitations. The HCoC STRATEGIC PLANNING PROCESS and EQUITY ANALYSIS completed this year intentionally reached out to specific communities for discussion and feedback on decisions toward a final plan. The STEERING COMMITTEE for the Strategic Plan was developed intentionally to ensure the diversity of our community was represented.

2B-3.	CoC’s Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. (All Applicants)	
	Special NOFO Section VII.B.3.a.(3)	

Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information; and
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

**(limit 2,500 characters)**

1.HCoC GATHERS/USES VARIETY OF OPINIONS by: survey series (1 of community at large, 1 of stakeholders, 1 of people with lived experience), focus groups with people with lived experience (different locations/times, including snacks/gift); well publicized MONTHLY meetings with time for opinions and announcements; hosting community meetings in multiple neighborhoods. HCoC staff/board REGULARLY PRESENT at community events (Rotary Club, Township Trustee meeting), faith community gatherings, city/county government meetings for education and to solicit feedback. An online forum was created so that organizations and individuals from throughout the community could review and offer feedback on our community wide strategic plan.

2.HCoC communicated information by INCLUDING STRUCTURED SPACE IN EACH OF OUR PUBLIC GENERAL MEMBERSHIP MEETINGS for agencies, advocates, community partners, and the public to share updates. Our most recent meeting included updates from a local legal aid provider, service provider for veterans, and announcements from the recovery oriented system of care. HCoC’s EMAIL NEWSLETTER REACHES 230 people & shares content while also creating an easy way for people to respond to the email with questions. CoC’s WEBSITE AND FACEBOOK page have been effective methods of sharing information & collecting feedback.

3.HCoC INCORPORATES FEEDBACK FROM PUBLIC into strategic plans, written policies, and by using it to GUIDE FUNDING PRIORITIES, INFORM STRATEGY, and EXPAND SERVICES. Results from recent surveys and focus groups ELEVATED THE ISSUES of unsheltered homelessness and Emergency Shelter as areas of emphasis in our community wide strategic planning process. Feedback from focus groups and surveys from people with lived experience highlighted the need for developing more flexible pathways for people to access our Coordinated Entry System and increasing collaboration among diversion and prevention services available. HCoC Coordinated Entry Case Conferencing Group and the Homelessness Prevention/Diversion Task Group took action steps, revised our CE Assessment and Policy, added CE access points, and worked to support expanded services. A Housing Help Line has been created so community members can call a local phone number or get a referral from 211 to utilize a common assessment for referrals to several different sources of rent and utility assistance. This Help Line will be expanded to offer CE Assessments in the coming year.

2B-4.	Public Notification for Proposals from Organizations Not Previously Funded. (All Applicants)	
	Special NOFO Section VII.B.3.a.(4)	

Describe in the field below how your CoC notified the public:	
1.	that your CoC’s local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

**(limit 2,500 characters)**

1. HCoC notified the public that it is accepting project application proposals by POSTING ON CoC WEBSITE AND FACEBOOK PAGE, EMAILING all CoC email subscribers, and ANNOUNCING the local competition at the CoC General Membership meetings prior to competition start.
2. HCoC INVITED ORGANIZATIONS WHO HAVE NOT PREVIOUSLY RECEIVED FUNDING THROUGH THE CoC program to apply through announcements and posts about the competition. CoC HOSTED A PUBLIC COMPETITION TA WEBINAR to help new applicants with NOFO process, local competition, and steps to apply. A recording of the HCoC webinar was added to CoC website with an invitation to ask follow-up questions and seek support from HCoC staff. In all communications, questions were welcomed so CoC STAFF COULD PROVIDE one on one TA for organizations. One new worked with CoC staff for TA on accessing esnaps but ultimately decided to not apply.
3. HCoC communicated about project application submission through INSTRUCTIONS INCLUDED IN LOCAL APPLICATION and through CoC COMPETITION TA WEBINAR. The TA webinar walked through a step-by-step process for completing and submitting project applications. The HCoC published the timeline in multiple emails to General Membership and on the HCoC website. HCoC Coordinator was available to answer questions and walk applicants through the application process.
4. Communication about the HCoC Special NOFO Competition included links to the HCoC Competition Policy and the Rating and Ranking Scorecard. The CoC Competition policy (including appeals process) and scoring tools were posted on the HCoC website, Facebook posts, and General Membership emails which are archived on the HCoC website so that anyone can view them whether they subscribe to the General Membership email list or not. HCOC SCORED AND RANKED RENEWAL AND NEW PROJECTS based on OBJECTIVE FACTORS about agency capacity, contributions to system performance, and community need. The R&R Committee consisted of five individuals with diverse backgrounds who had no relation to the applicants. The R&R Committee presented a recommended ranked list of projects to the HCoC Board for approval per the local competition policy.
5. HCoC made all competition documents available in ACCESSIBLE PDF FORMATS on the HCoC website and announced the local competition through an email developed using MailChimp's Accessibility toolkit. TA webinar was held via Zoom and posted to YouTube to ensure closed captioning was available. The HCoC Coordinator was available to provide any other requested accommodations.



## 2C. Coordination / Engagement—with Federal, State, Local, Private, and Other Organizations

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

2C-1.	Coordination with Federal, State, Local, Private, and Other Organizations. (All Applicants)	
	Special NOFO Section VII.B.3.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC’s geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.	Faith Communities	Yes

2C-2.	CoC Consultation with ESG Program Recipients. (All Applicants)	
	Special NOFO Section VII.B.3.b.	

Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in Consolidated Plan update.

(limit 2,500 characters)

1.HCoC receives an ESG allocation through the Illinois Department of Human Services. HCoC CONSULTED WITH IDHS TO LEARN PRIORITIES for local funding allocations. HCoC Staff and recipient agencies attended IDHS Bureau of Basic Support's weekly support calls to learn from the ESG Grant manager. HCoC's RATING AND RANKING COMMITTEE WORKED WITH IDHS and local priorities developed by analyzing gaps in our system to make funding recommends based on project applications and HMIS data. Reducing length of time homeless, reducing returns, reducing number of people homeless for first time, and improving income were priority areas that le. HCoC priority for ESG allocation this year was Rapid Rehousing.

2.HCoC's Services and Strategy Committee is tasked with EVALUATING AND REPORTING performance of ESG Program recipients and subrecipients as a part of its annual work. Quarterly performance check-ins provide opportunities to monitor projects and outcomes to ensure programs meet stated goals from their local application. This process has resulted in one project being REALLOCATED over the past two years due to not spending down funds and meeting performance goals.

3.HCoC provided PIT and HIC data to the City of Springfield's Office of Planning and Economic Development (OPED) which administers all components of our Consolidated Plan. A City of Springfield staff person serves on the HCoC Board of Directors to help facilitate communication and the sharing of pertinent information. Additionally, the HCoC utilizes the General Membership mailing list and Facebook page to communicate about open meetings related to the consolidated plan.

4.HCoC PROVIDED INFORMATION to aide in the development of the Consolidated Plan and subsequent updates through SURVEYS, MEETINGS AND CONVERSATIONS with City of Springfield's Office of Planning and Economic Development. HCoC created an HMIS DATA DASHBOARD to allow OPED and the public to access certain data points. Upon request, HMIS LEAD was available to meet with OPED to EXPLAIN HMIS DATA, IDENTIFY TRENDS, AND SHARE OTHER HELPFUL INFORMATION for the Consolidated Plan. Additionally, the HCoC board and individual agencies welcomed OPED to request other information and data. OPED staff participated in parts of the development of our community wide strategic plan to reach functional zero. The OPED office was provided with drafts and versions of the plan throughout the development process to assist with planning for HOME-ARP and other funding.

2C-3.	Discharge Planning Coordination. (All Applicants)
	Special NOFO Section VII.B.3.c.

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1.	Foster Care	Yes
2.	Health Care	Yes
3.	Mental Health Care	Yes
4.	Correctional Facilities	Yes

2C-4.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts. (All Applicants)
	Special NOFO Section VII.B.3.d.

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

2C-4a.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts–Formal Partnerships. (All Applicants)
	Special NOFO Section VII.B.3.d.

Describe in the field below:

1.	how your CoC collaborates with the entities checked in Question 2C-4; and
2.	the formal partnerships your CoC has with the entities checked in Question 2C-4.

(limit 2,500 characters)

1.HCoC General Membership includes our local LEA, the REGIONAL OFFICE OF EDUCATION (ROE) for our CoC, the largest school district in Sangamon County, SPRINGFIELD PUBLIC SCHOOLS DISTRICT #186 (SPS 186), Springfield Urban League who provides Head Start and Early Start programming, & the Mini O’Beirne Crisis Nursery that provides childcare from birth-six years. HCoC is a COMMUNITY PARTNER IN THE CONTINUUM OF LEARNING INITIATIVE that promotes practices & programs to ensure all children in our community are ready to learn & all young adults are ready to enter the world of work. The Continuum of Learning allows HCoC to collaborate w/ local school districts, Head Start programs, & community partners to develop strategies to make sure all children have access to education opportunities. Youth Education providers are INVITED TO JOIN HCOC & PROVIDE UPDATES, OFFER CONNECTIVITY TO SERVICE PROVIDERS, AND SHARE GUIDANCE ON LOCAL NEEDS. In the past year, HCoC has developed a NEW YOUTH HOMELESSNESS TASK GROUP to help partners from throughout our community work together to provide support for youth experiencing homelessness. ROE and SPS 186 partnered with the HCoC to organize a YOUTH HOMELESSNESS SUMMIT. The goals of the summit were to pull together as many interested organizations and individuals as possible to create a Youth Homelessness Task Group, discuss local data, examine causes of youth homelessness, identify community resources, identify current community gaps, discuss how to initiate youth involvement and develop a youth advisory board, and outline action steps for moving forward. The summit resulted in over twenty people representing organizations from Sangamon County joining the task group. The Task Group meets monthly to discuss short term and long term strategies alongside trainings and announcements about available resources. The HCoC, ROE and SPS 186 provide DATA ON YOUTH HOMELESSNESS and provide TRAINING ON RESOURCES AVAILABLE to assist students in attending the school of their choice and ensuring that families are not separated. Additionally, the HCoC provides training to the ROE and SPS 186 about COORDINATED ENTRY, CRISIS HOUSING PROGRAMS, and OTHER YOUTH AND FAMILY RESOURCES available in the community. HCoC member agencies have staff that attend truancy board hearing for outreach opportunities.

2. The HCoC has MEMORANDUM OF AGREEMENTS with our local LEA, the ROE, SPS 186, Springfield Urban League who provides Head Start and Early Start programming, & the Mini O’Beirne Crisis Nursery.

2C-4b.	CoC Collaboration Related to Children and Youth–Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services. (All Applicants)	
	Special NOFO Section VII.B.3.d.	

Describe in the field below written policies and procedures your CoC adopted to inform individuals and families who become homeless of their eligibility for educational services

(limit 2,500 characters)

The title VII-B of the MCKINNEY-VENTO HOMELESS ASSISTANCE ACT, as amended by the EVERY STUDENT SUCCEEDS ACT has been adopted by the HCoC as our guide and working policy. Per CoC policy, all HCoC agencies that serve children and youth GIVE FAMILIES, GUARDIANS, AND PARENTS OF YOUTH EXPERIENCING HOMELESSNESS EDUCATIONAL MATERIALS that explain their educational rights according to the McKinney-Vento legislation. Each family with children experiencing homelessness or an unaccompanied youth RECEIVE A COPY OF THE EDUCATION FOR HOMELESS CHILDREN AND YOUTHS PROGRAM NON-REGULATORY GUIDANCE at the time of intake. Families are informed they may stay in their home schools regardless of where they have been displaced to and that the school must provide transportation to and from school if needed. The HCoC ensures agencies have contact information for Springfield Public Schools District #186 (SPS 186) Homeless Liaison staff who help guide families through all resources and services available to them. ROE and SPS 186 are BOTH REPRESENTED IN THE HCOG GENERAL MEMBERSHIP and provide updates as part of monthly General Membership meetings to ensure service providers are up to date on current procedures.

2C-5.	Mainstream Resources—CoC Training of Project Staff. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

Indicate in the chart below whether your CoC trains project staff annually on the following mainstream resources available for program participants within your CoC's geographic area:

	Mainstream Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI—Supplemental Security Income	Yes
3.	TANF—Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other	Yes

2C-5a.	Mainstream Resources—CoC Collaboration with Project Staff Regarding Healthcare Organizations. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

- Describe in the field below how your CoC:
1. systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
  2. works with project staff to collaborate with healthcare organizations to assist program participants with enrolling in health insurance;
  3. provides assistance to project staff with the effective use of Medicaid and other benefits; and
  4. works with projects to promote SOAR certification of program staff.

**(limit 2,500 characters)**

1.The HCoC encourages agencies to BECOME COMMUNITY PARTNERS with the Illinois Department of Human Resources in order to utilize their consolidated application for benefits eligibility (ABE) for SNAP, TANF, and Medicaid. As a community partner, agencies can HELP ILLINOIS RESIDENTS APPLY ONLINE for benefits by providing a computer or one-on-one assistance with applications. Communication about training, updates, and information about how to become a community partner are included in all HCoC General Membership emails. Updates from IDHS and other pertinent organizations is shared with the General Membership as well. In response to SYSTEMS PERFORMANCE ANALYSIS, the HCoC Strategy and Services Committee is recommending adding ABE Community Partnership as a scored item in future funding competitions.

2.At program intake, all housing & shelter participants are asked about eligibility for benefits & whether or not they currently receive all state, local, & federal benefits they qualify for. HCoC agencies have established relationships w/ social workers & care navigators at local hospitals to enroll patients experiencing homelessness who do not have medical insurance. Case managers work w/ local office of IL Dept of Healthcare & Family Services to expedite medical care apps & ensure no lapse in referral or care delivery occurs.

3.HCoC agencies work directly w/ local FQHCs to connect clients to primary care provider. Obtaining a medical card is a primary task on all client service plans. Emergency shelters in HCoC offer access to case management & provide onsite access to primary health care. Clients can immediately complete the medical card enrollment process & receive healthcare services without delay to either.

4.The City of Springfield funds an HCoC-WIDE SOAR CERTIFIED CASE MANAGER through Fifth Street Renaissance. Agencies are required to have SOAR certified program staff who partner with the HCoC-wide case manager to guide individuals through the SOAR process. The HCoC engaged with the Supportive Housing Providers Association for CoC-wide training on SOAR in 2022. HCoC General Membership emails include training opportunities such as SAMHSA's SOARING OVER LUNCH training program. Through SHPA, HCoC Strategy and Service committee has begun to review local SOAR data as part of community data analysis.

### 3A. New Projects With Rehabilitation/New Construction Costs

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3A-1.	Rehabilitation/New Construction Costs–New Projects. (Rural Set Aside Only).	
	Special NOFO Section VII.A.	
	If the answer to the question below is yes, you must upload the CoC Letter Supporting Capital Costs attachment to the 4A. Attachments Screen.	
	Is your CoC requesting funding for any new project(s) under the Rural Set Aside for housing rehabilitation or new construction costs?	No

### 3B. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3B-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
--	----

3B-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	
	You must upload the Project List for Other Federal Statutes attachment to the 4A. Attachments Screen.	
	If you answered yes to question 3B-1, describe in the field below:	
	1. how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
	2. how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.	

(limit 2,500 characters)



## 4A. Attachments Screen For All Application Questions

Please read the following guidance to help you successfully upload attachments and get maximum points:

- |  |    |   |
|--|----|---|
|  | 1. | You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.  |
|  | 2. | You must upload an attachment for each document listed where 'Required?' is 'Yes'   |
|  | 3. | We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images and reduces file size. Many systems allow you to create PDF files as a Print Option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube. |
|  | 4. | Attachments must match the questions they are associated with.  |
|  | 5. | Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.  |
|  | 6. | If you cannot read the attachment, it is likely we cannot read it either.<br>- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).<br>- We must be able to read everything you want us to consider in any attachment.                           |
|  | 7. | Open attachments once uploaded to ensure they are the correct attachment for the required Document Type.  |

Document Type	Required?	Document Description	Date Attached
1B-1. Local Competition Announcement	Yes		
1B-2. Local Competition Scoring Tool	Yes		
1B-3. Notification of Projects Rejected-Reduced	Yes		
1B-3a. Notification of Projects Accepted	Yes		
1B-4. Special NOFO CoC Consolidated Application	Yes		
3A-1. CoC Letter Supporting Capital Costs	No		
3B-2. Project List for Other Federal Statutes	No		
P-1. Leveraging Housing Commitment	No		
P-1a. PHA Commitment	No		
P-3. Healthcare Leveraging Commitment	No		
P-9c. Lived Experience Support Letter	No		
Plan. CoC Plan	Yes	HCoC Plan	10/17/2022

## **Attachment Details**

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## Attachment Details

**Document Description:** HCoC Plan

## Submission Summary

Ensure that the Special NOFO Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	10/17/2022
1B. Project Review, Ranking and Selection	10/17/2022
2A. System Performance	10/05/2022
2B. Coordination and Engagement	10/17/2022
2C. Coordination and Engagement–Con't.	10/17/2022
3A. New Projects With Rehab/New Construction	No Input Required
3B. Homelessness by Other Federal Statutes	10/17/2022
4A. Attachments Screen	Please Complete
Submission Summary	No Input Required

## **Heartland Continuum of Care Plan for Serving Individuals and Families Experiencing Homelessness with Severe Service Needs**

### **Introduction**

Over the past decade, the challenge of homelessness has grown in Springfield and Sangamon County. This challenge has been compounded by the reality that the number of people experiencing homelessness each year is growing and the system to provide supportive housing solutions has been under resources and ineffectively organized to make the experience of homelessness rare, brief, and nonrecurring. A recent gaps analysis found that the inflow into the homeless system of care each year is 746 people while the outflow is 591. We anticipate growth in the population of people experiencing homelessness of 155 people each year without new resources and system improvements to effectively meet this need. Over the past two years, the Heartland Continuum of Care (HCoC) has worked to transform the system of care which has over-relied on crisis shelter and under-developed supportive housing programs that have proven to be effective in supporting people in ending their homelessness. Previous approaches to addressing homelessness in Sangamon County have been slow to adopt Housing First principles and created a stuck system contributing to growth in both chronic and unsheltered homelessness. Despite the challenges, agencies and community partners have worked together, committed to doing things differently and are collaborating with the goal of reaching functional zero by the 2028 Point in Time count.

To support this system transformation, the HCoC began the process of developing a community wide strategic plan to address homelessness in the fall of 2021 and completed the plan in October of 2022. This undertaking was the first time strategic planning has been undertaken at the community level to improve our homelessness system since 2004. The plan development was funded by a partnership among city and county governments, two local hospitals, a medical school in our community, our local public housing authority, our community foundation and United Way. The plan was led by a local steering committee that intentionally represented the diversity of Sangamon County and included people with lived experience of homelessness. The steering committee contracted with one consulting firm with nationwide experience in improving homelessness systems and one local firm with expertise in public health and developing equity improvement plans. The steering committee worked with the vision to create a collaborative, unified system that provides people experiencing homelessness an equitable, trauma-informed, and coordinated community system where all can access the housing and support services that each person needs to thrive. This document seeks to reflect current strategies and work being done in our community as guided by HUD's CoC Supplemental to Address Unsheltered and Rural Homelessness document while also sharing where the HCoC is leading our community to create a more effective system to address homelessness.

### **P-1c Landlord Recruitment**

1. Historically, organizations providing supportive housing in Sangamon County or helping to assist people ending their experience of homelessness have been working on their own to develop relationships with landlords to support their housing programs. The strong

relationships organizations have built continue to be a valuable component of local efforts to end homelessness. In October of 2021, the HCoC hired our community's first Housing Navigator to build upon existing relations and to help recruit new landlords to work with agencies and to assist in expanding the number of landlords willing to allow their units to be utilized for vouchers such as Emergency Housing Vouchers.

The work of the HCoC Housing Navigator is a key part of our landlord recruitment strategy which includes community education, landlord and property manager engagement, and the development of a resource listing landlords interested in working with supportive housing providers. One example of community education and landlord engagement is the HCoC Housing Navigator joining the Springfield Area Landlord Association (SALA) as an honorary member and attending their monthly meetings to build relationships and share information with local housing providers. SALA is the largest association of landlords with thousands of units in their portfolios throughout the HCoC's geographic area of Sangamon County.

In just over a year, our community has already experienced success due to this strategy. Prior to the rollout of Emergency Housing Vouchers (EHVs), the Housing Navigator was the keynote speaker about the opportunity and created a one sheet describe in simple language what the EHV's were and how to support the HCoC to effectively utilize them. After the presentation, 16 landlords followed up to learn more about the program. These connections were a crucial component in the successful utilization of the 37 EHV's allocated to the Springfield Housing Authority. Due to the relationships he built and maintained, he was asked to speak at the beginning every meeting by the current President of the group to provide updates on housing needs and opportunities for landlords to be involved. Eight new landlords were brought onboard to accept housing authority vouchers while several others took steps to establish non-voucher partnerships with supportive housing providers.

The housing landscape of Sangamon County includes a large number of landlords with portfolios of varying sizes. Landlord interest is driven more by philanthropy and care for the the needs in our community for some while others are primarily interested in solutions that have a positive impact on profit margin and overhead. This requires a recruitment strategy that meets landlords where they are and engages them in an authentic and sincere conversation about community needs and how partnerships can be mutually beneficial for all involved.

2. In addition to the hiring of a community wide Housing Navigator, another new initiative of the HCoC Landlord Risk Mitigation Fund (LRMF). An added benefit of the new energy invested in engaging and educating landlords is that the HCoC has also gained new opportunities to be educated by landlords and property managers about concerns, barriers, and other challenges they encounter. The LRMF is the result of this education and was developed with feedback from landlords to help overcome one of the frequent barriers to partnership. The LRMF, policy, and Advisory Board was launched in 2022 with an initial

grant of \$30,000. The fund allows landlords to request reimbursement for damages up to \$3,000 beyond typical wear and tear when renting their unit to a client of a supportive housing program.

While this effort is too new for many lessons to be derived from it, we anticipate that it will need to evolve and be iteratively improved upon. The LRMF Advisory Board will provide information about the need of improvements to the Heartland Continuum of Care Board who oversees the LRMF.

3. Multiple data points will be utilized to gage the role of landlord recruitment in overall system improvement. One goal in the first year of Springfield & Sangamon County's 2022-2028 Strategic Plan to Address Homelessness is to recruit twenty new landlords to commit to rent to at least one formerly homeless client. This data will result from ongoing engagement work and be collected by the HCoC Housing Navigator. Additionally, the HCoC views landlord recruitment as essential to improving system performance to Reduce Length of Time Homeless (Measure 1 of HUD System Performance Measures) and Successful Placement and Retention of of PH (Measure 7 of HUD System Performance Measures). The HCoC expects to see ongoing improvement in reducing Measure 1 and increasing Measure 7 as a result of our Landlord Recruitment strategy. Qualitative data will also continue to drive strategy changes through annual focus groups with landlords, case managers, and people with lived experience.

### **P-3. CoCs Current Strategy to Identify, Shelter, and House Individuals and Families Experiencing Unsheltered Homelessness**

#### **P-3.a Current Street Outreach Strategy**

1. Coordination of Outreach

The HCoC Outreach Task Group meets every other week for a case conferencing meeting where a list is shared of people who are nearing the top of the list for housing placement and outreach workers are given an opportunity to add names to an additional list of people who could benefit from additional resources and efforts. The task group consists staff from local agencies, law enforcement, health care, behavioral health, community health workers, and emergency shelter staff. Collaborative outreach efforts allow staff to conduct community level outreach in the context of the work they do for their organizations. In 2022, the HCoC utilized ESG funding to purchase additional HMIS licenses for outreach workers in our community. A new needs assessment was created within HMIS that allows outreach workers to make referrals and track progress. These efforts also increased the number of people who are trained to do Coordinated Entry assessments in the field so that it is easier for people in the community to participate in Coordinated Entry. The Outreach Task Group has set the goal of developing a by-name list of all persons experiencing homelessness in our geographic area, including those who are unsheltered. In 2022, the City of Springfield hired a Community Care Coordinator who works closely with the Springfield Police Department's Homeless Outreach Team lead to follow up on referrals that are made to the police department. The Community Care Coordinator's focus on outreach and collaborating among



many organizations to meet needs has worked to significantly improve outreach efforts in our community. In addition, the City of Springfield supported the hiring of an outreach staff person with Memorial Behavioral Health who works closely with the Community Care Coordinator and organizations to increase access to health related resources. The investment in new staff positions alongside the expansion of HMIS to improve functionality for outreach staff has worked to improve the coordination of outreach efforts and provide a foundation for future improvements.

## 2. Frequency of Outreach

Outreach efforts are planned at varying times of the day and night and includes homeless encampments, public gatherings, communal meal opportunities, and other environments that provide opportunities for engagement. HCoC members and volunteers conduct street outreach each day through partnerships with the Springfield Police's Homeless Outreach Team (HOT), the City of Springfield's Community Care Coordinator, Memorial Behavioral Health's PATH team, and staff from CoC agencies. The HOT team encourages public safety officials to make referrals when they encounter individuals and families experiencing homelessness. The HOT Officer serves on Sangamon County's Drug, Veteran, & Mental Health Court & meets weekly with judges to consider non- legal alternatives such as mental health, addiction services, and mainstream services instead of criminal charges. This program is an invaluable tool for reaching individuals experiencing homelessness who are unlikely to request assistance. The Community Care Coordinator and Homeless Outreach Team lead follow up to referrals in collaboration with local organizations depending on the situations they encounter. Supportive Services for Veteran Families conducts outreach Monday through Friday each week throughout our geographic area. A volunteer team led by a local faith community conducts street outreach each Saturday in partnership with local agencies. These diverse outreach efforts filter information back to the Outreach Task Group through the every other week meeting and through HMIS utilization.

## 3. Outreach Efforts to Help People Exit Homelessness and Unsheltered Homelessness

HCoC Outreach Task Group mobilized partners from throughout the community to meet those experiencing homelessness where they are through a Housing First approach to ending homelessness. An emergency assistance provider, Helping the Homeless in Springfield, delivers essential items to persons experiencing homelessness throughout our CoC area and makes referrals to services. Helping the Homeless in Springfield places an emphasis on providing resources to people who are experiencing unsheltered homelessness and are resistant to accessing other services. Fifth Street Renaissance operates a mobile outreach unit & travels to where people are located to offer health screenings, CES access, meals, and mental health services. The Phoenix Center provides harm reduction services and training through active outreach to encampments and other locations where people experiencing homelessness gather. HCoC Outreach Task Group uses Case Conferencing to locate, offer housing assistance and supportive services, and plan follow-ups. These efforts are a crucial element of ensuring access to housing are available to anyone experiencing homelessness.

4. Outreach Efforts Utilizing Culturally Appropriate Strategies  
Each year outreach workers receive training on Trauma-Informed Care, Equity, Diversity, and Inclusion, and Motivational Interviewing. Each of these trainings contributes to the person-centered emphasis the HCoC hopes to ensure is the community standard for outreach. In addition to training that helps provide outreach that is respectful of gender identity, sexual orientation, beliefs, disability status, and cultural preferences, the HCoC Outreach Task Group works to train those doing outreach to utilize housing problem solving to identify any possible avenue that could lead to stable housing.
5. Outreach Efforts to Connect those Experiencing Unsheltered Homelessness with Permanent Housing  
HCoC reaches people who are least likely to apply for assistance by equipping outreach and other staff to conduct CES assessments in the field and by intentionally seeking diverse partners who can assist in providing outreach and connectivity to CES. Training outreach workers for CES has allowed the HCoC to connect people living in encampments and other unsheltered locations who are reluctant to access shelter or other services to access Coordinated Entry. Historically, the primary access points for Coordinated Entry were in Emergency Shelters and people who were reluctant to access shelter faced additional barriers to accessing Coordinated Entry and having an opportunity for supportive housing placements. The Outreach Task Group Case Conferencing meetings provide additional collaborations that help to deliver needed services to where people are and increase access to identification, income, and other items that help foster successful housing placements.
6. Outreach Efforts Including Hiring People with Lived Experience  
Due to the makeup of the outreach effort in our community and the few positions devoted fully to outreach, there has not been an intentional strategy to hire people with lived experience. There are several people who are outreach workers or volunteers who have lived experience. One of the goals in the Strategic Plan is to develop an outreach effort that employs people with lived experience to do outreach twice a week. The Street Outreach with Lived Experience (SOLE) team is expected to be piloted in 2023.

**P-3.b. Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for Individuals and Families Experiencing Unsheltered Homelessness**

1. Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing  
At the time of the 2022 HCoC Housing Inventory Count (HIC), there were 293 crisis beds available in the homeless system of care. For households without children there were 92 emergency shelter beds and 47 transitional housing beds. For households with children there were 26 emergency shelter beds and 121 transitional housing beds. Seven emergency shelter beds were available for households with only children. As mentioned in the introduction, community strategy has relied heavily on emergency shelter and transitional housing as the primary pathways to addressing homelessness. Over the past two years, there has been an increasing emphasis placed on moving crisis housing beds increasingly toward low-barrier

best practices. The response from organizations has been mixed particularly where funding sources provide flexibility to utilize a Housing First approach or not. With this being the case, the HCoC strategy to provide immediate access to low-barrier shelter has focused on helping low-barrier shelters expand to meet current need and ensure beds are available for each person in our community who needs one while also working to expand housing opportunities to reduce the length of time people spend in shelters and unsheltered locations. One part of this strategy has included the development of an overflow shelter funded by the City of Springfield that remained open year round in 2022 instead of closing during warmer months as has historically been the case in our community. Collaborations among the HCoC Emergency Shelter Task Group that meets each week, the HCoC Outreach Task Group, day service providers, and other community partners work to ensure every person experiencing homelessness can quickly access shelter that is appropriate for their needs. 2-1-1 also provides information and helps people navigate the shelter system.

2. Current Performance Providing Access to Low-Barrier Shelter & Culturally Appropriate Temporary Accommodations

With 293 crisis beds within the HCoC and 266 people experiencing homelessness during the 2022 Point in Time (PIT) Count, the community has the capacity and resources to provide access to shelter. On the night of the PIT count 26 people were unsheltered and an analysis from January of 2022 reflected that 58% of crisis beds were occupied. As part of the strategic planning implementation, the HCoC will do a full analysis of crisis housing beds with the intent of creating additional flexibility for who can be served in programs and redirecting resources to align with data on where community needs are.

3. New Practices Implemented by HCoC

The expansion of city-funded overflow shelter to operate low-barrier shelter for single person households year round in 2022 was a significant new practice for our community. During the COVID-19 pandemic, encampments emerged in the late spring of 2020 and 2021 when the overflow shelter closed during warmer months. The encampments were the product of inadequate shelter resources being available to meet needs including non-congregant shelter resources which were in higher demand. The overflow shelter worked in close collaboration with other shelters and provided space for people to access safe shelter beds when other shelters were full and helped people to avoid unsheltered homelessness. As the system improves to reduce the length of time people experience homelessness in our community, the need for overflow shelter and some of our other crisis housing beds will diminish.

Another new practice included the Emergency Shelter Task Group working with shelters to increasingly reduce barriers including expansion of intake times, policy changes regarding smoke breaks, and eliminating banned lists to every degree possible.

Resources available from the Fall of 2021 through Spring of 2022 allowed organizations to gain experience utilizing hotels to meet some non-congregant shelter needs. The Pandemic

Health Navigator program helped to utilize hotel space for COVID-19 quarantine. The program worked to create safer congregant shelter environments while also creating new capacity for organizations and other community partners to better understand and utilize non-congregant settings to meet particular needs in our community.

Through the strategic planning process, the HCoC will work to build diversion strategies and resources and link to existing programs to support households to access housing immediately.

### **P-3.c Current Strategy to Provide Immediate Access to Low Barrier Permanent Housing for Individuals and Families Experiencing Unsheltered Homelessness**

#### **1. Current Strategy to Provide Immediate Access to Low-Barrier Permanent Housing**

The HCoC Coordinated Entry System helps facilitate movement into permanent housing opportunities through a Housing First methodology by using the locally developed Coordinated Entry assessment and prioritization through case conferencing. A tremendous challenge for our community lacks adequate Housing First housing opportunities such as Permanent Supportive Housing and Rapid Rehousing to meet the needs that exist resulting in a system with movement into permanent housing that is much slower than people experiencing homelessness and the HCoC want to see. Currently there are 1,142 people active in HMIS and 230 supportive housing opportunities in our system. As a result of this disparity, the HCoC has placed the highest Permanent Supportive Housing and Rapid Rehousing respectively as the highest two funding priorities for all funding opportunities available through the HCoC including the Supplemental NOFO to Address Unsheltered Homelessness. Our community has set the goal of creating 765 new housing opportunities between now and January of 2028. By more than tripling the amount of supportive housing opportunities currently available, we will be able to reach functional zero for chronic and unsheltered homelessness.

Helping Hands Unsheltered Permanent Supportive Housing Project submitted through this grant process has been a goal in our community for over a year at this point and if fully funded will be a significant step forward in providing more permanent supportive housing opportunities. The project would leverage \$250,000 from Memorial Health to provide permanent supportive housing for some of the most vulnerable single person households in our community in a new 22 unit facility funded with an over \$5 million grant from the Illinois Housing Development Authority (IHDA) and \$800,000 from City of Springfield HOME funds. This development is the first IHDA funded PSH development in our city in over five years and the HCoC hopes to support additional grant requests each year for the next five years to help meet the gap that exists in Sangamon County.

#### **2. Current Performance Providing Access to Permanent Housing**

Providing access to permanent housing has been identified as the most critical shortcoming of our current system to address homelessness' configuration. Recent gaps analysis found that only 16% of people who access shelter or street outreach move into permanent housing

each year. The lack of opportunity for permanent housing has led to consistent growth in chronic homelessness and unsheltered homelessness in Sangamon County. Over 40% of adult individuals who experience homelessness live on the street at least once during their homeless experience.

3. Evidence to Support HCoCs Current Strategy

Nationwide data has demonstrated the efficacy of both Permanent Supportive Housing and Rapid Rehousing using a Housing First approach. The National Alliance to End Homelessness reports that PSH has a one-year retention rate of up to 98% while studies have shown between 75% and 91% for RRH clients remained in housing a year after being rapidly rehoused. Local data has demonstrated similar results with 90% of the households in PSH retaining housing since 2020. Connected to our strategic planning process, the HCoC has the goal of supporting households, organizations and programs to maintain a 95% retention rate for both PSH and RRH.

4. New Practices Implemented by the HCoC

Expansion of Rapid Rehousing has been the most significant new practice implemented by the HCoC in the past three years. Utilizing resources made available at the beginning of the COVID-19 pandemic, Helping Hands created the first RRH program to serve non-DV clients in Sangamon County. The program worked to lower emergency shelter census to reduce the risk of COVID-19 while also demonstrating how effective RRH can be in our community. Since then, three additional organizations have worked to create RRH programs to assist in meeting the high level of need in our community.

The Springfield Housing Authority's (SHA) allocation of Emergency Housing Vouchers created another unprecedented development for Sangamon County. The 37 vouchers were utilized to develop a Moving On policy and program for the first time in our community. The successful partnership helped the HCoC and SHA to strengthen their working relationship and level of collaboration. The SHA recently applied for and received acceptance into HUD's Moving to Work demonstration program with the anticipation that the program will assist in developing an ongoing Moving On program for our community.

Another new practice that has had an impact in our community is growing the capacity to effectively case conference with a variety of partners. One example is the Case Conferencing Collaboration Meetings that started in spring 2021 as a means for agencies to work together to provide improved service and discharge planning among shared clients, remove the disconnect between agencies, provide on-going supports in case management services, limit duplication of services and ensure the connection of resources and referrals to aid in stability. The CCCM members of Helping Hands of Springfield, Sangamon County Probation, Memorial Behavior Health-PATH/COET/Outreach, City of Springfield-Community Care Coordinator, Springfield Police Department-H.O.T Officer, Salvation Army, SIU-Trauma, Contact Ministries, DHS-Andrew McFarland Mental Health Center, while ensuring the confidentiality of clients, use this weekly meeting to develop action/stability plans, assess

shelter and housing needs and availability, ensure psych/medical/probation appointments and court dates are met, and support the accountability of clients. This collaboration of community agencies has been very successful in building a comprehensive means to aid in client housing, probation and court accountability, stability in behavior management, medication compliance and supports of agency processes.

#### **P-4. Updating the CoC's Strategy to Identify, Shelter, and House Individuals Experiencing Unsheltered Homelessness with Data and Performance**

During the first year of implementation of our community's strategic plan, the HCoC will bring in an outside consultant to work with the HCoC, stakeholders, and Task Groups to develop Community Standards that will inform best practices for Street Outreach, Shelter/Crisis Housing, and Permanent Housing efforts. Organizations will be asked to agree to the Community Standards in order to qualify for funding made available through the HCoC and other funders will be encouraged to utilize the standards to ensure they are funding programs utilizing best practices that lower barriers, are housing focused, and built with a housing first approach. In addition, our annual gaps analysis will expand to incorporate more qualitative data gathered through our Lived Experience Advisory board, focus groups, and surveys. This effort will work to ensure the community wide strategic plan evolves as necessary to ensure effective solutions to end homelessness.

Another key element of the strategic plan is the development of a new Strategy Board that has been developed in our community to provide support, resources, guidance, and accountability for the implementation of the goals of the plan. The Strategy Board includes key leaders from our community including the Mayor of Springfield, Sangamon County Board Chairman, representatives from local hospitals, local philanthropic organizations, other community stakeholders and people with lived experience. The Strategy Board will utilize data to track improvements or lack thereof within the system to address homelessness. They will be aided in this effort by the development of new community facing dashboards that will provide information about inflow, outflow, system performance measures, and retention rates in supportive housing programs. The HCoC Board will focus their energies on the day to day implementation of effective programs and report needs and gaps to the Strategy Board so that resources can be sought address needs in a flexible way.

Each of these developments have significant ramifications for how our community will update our strategy using data and performance in each of the following three areas.

##### **1. Street Outreach**

The HCoC has committed Emergency Solutions Grant funding to support expansion of HMIS to create new opportunities to for Outreach workers to utilize HMIS. A new needs assessment was created within HMIS that allows outreach workers to make referrals and track progress. Through the efforts to have more Outreach workers utilize HMIS, the HCoC was also able to expand the number of people in the community who are able to Coordinated Entry assessments in the field so that it is easier for people in the community to participate in

Coordinated Entry. The Outreach Task Group has set the goal of developing a by-name list of all persons experiencing homelessness in our geographic area, including those who are unsheltered. The by-name list will be a significant source of data to gauge improvement in the system. The Outreach Task Group anticipates setting a goal for the number of people assisted into permanent housing opportunities through supportive housing programs and housing problem solving efforts. These successes can be communicated to the Strategy Board and in the event the goal can not be met, the information about why it can not will inform the Strategy Board about needs whether they be housing resources, staff, or something else. The HMIS Needs Assessment will provide an additional source of data as referrals and services offered can be quantified. The HCoC has begun tracking how many new Coordinated Entry assessments are done each month in order to identify potential gaps in access and trends regarding increases and decreases in the number of assessments completed.

The Outreach Task Group will provide training on Outreach Community Standards and identify areas for improvement to ensure best practices are utilized in Street Outreach efforts.

The City of Springfield and the HCoC are exploring the possibility of working with an outreach application developer to create additional opportunities for community partners to share needs they identify in the community and make referrals to local organizations and street outreach workers. While HMIS will be utilized for Street Outreach efforts, an application pilot would allow our community to test productive avenues for community members to share helpful information with the City of Springfield's Community Care Coordinator and other partners.

## 2. Low-barrier Shelter and Accommodations

The process of creating and adopting Crisis Housing Community Standards will provide opportunities for shelter providers to analyze how their current practices line up with low-barrier community standards. As a community, the more barriers we can remove to accessing shelter beds the more access will be improved. Utilization rates will provide one data point regarding how effective an organization's practices are while Street Outreach Task Group's By-Name List will provide additional data about the number of people who are unsheltered. We expect some of the most important data about access improvements will come through focus groups, the Lived Experience Advisory Board, and surveys with those seeking shelter. Annual gaps analysis and monthly Lived Experience Advisory Board meetings will be the primary avenues for capturing this information.

Utilization data combined with HMIS system data analysis are key parts of right sizing shelter resources to meet the needs of those seeking shelter in our community. The Strategy Board will have a key role in ensuring shelter resources are expanded where necessary and in areas where utilization is low, the Strategy Board will recommend the reallocation of those resources, if possible, to create permanent housing opportunities. System inflow and outflow data will help the Strategy Board monitor fluctuations in need over time.

### 3. Permanent Housing

Similar to Street Outreach and Shelter/Crisis Housing, development of Permanent Housing Community Standards will be a key part of ensuring best practices are utilized in the delivery of services. System performance data on housing retention is a key indicator that the HCoC aims to increase and maintain at levels at or above 95%. This will be done with the guidance of the HCoC's Permanent Housing Task Group who will help to organize trainings in line with needs that emerge through the groups works and meetings. Length of time homeless is another data point that the HCoC is working to see significant reductions in. This will be accomplished through identifying new resources to help grow Rapid Rehousing and Permanent Supportive Housing programs while also improving training and resources available for Diversion and Housing Problem Solving efforts

By analyzing system data, we have identified the need for drastic expansion of permanent housing within our system and have set goals for how many units of RRH and PSH we hope to create in our community each year over the next five years adding up to a total of 765 housing opportunities. As we monitor inflow and outflow data, this number could increase or decrease. These goals provide an important and clear data point for the Strategy Board to monitor progress on meeting strategic plan goals.

#### **P-5. Identify and Prioritize Households Experiencing or with Histories of Unsheltered Homelessness.**

1. HCoC Strategy to Ensure Special NOFO Resources will Reduce Unsheltered Homelessness  
Challenges in navigating the scarce permanent housing resources available in our community are a contributing factor to unsheltered homelessness. In discussing this plan along with the overall strategic plan with our Lived Experience Advisory Board, one of the members who experienced homelessness for five years before receiving a housing opportunity shared that if he knew it was possible to get help with housing and knew it could happen within a few months time he would moved from the street to a shelter much sooner than he did. Increasing outflow to permanent housing opportunities is a crucial tool that our Street Outreach workers do not currently have. Outreach workers offer the opportunity to be on Coordinated Entry to people they engage but there is little trust in the system due to the fact that people experiencing homelessness in our community know a lot of people on the Coordinated Entry list but know very few who actually were connected with permanent housing. The projects reflected in this grant opportunity will create movement in our system which will also create new opportunities to for Street Outreach workers and our Street Outreach with Lived Experience Team to show people what could be possible. Beyond the PSH and RRH projects, the HMIS project will ensure we can continue to expand our HMIS system to support Outreach efforts.

In addition to the impact these funds could have from a system standpoint if received, the HCoC Coordinated Entry Task Group would work with the HCoC Coordinated Entry Task Group and HCoC Board on a prioritization process for these projects that emphasizes the



reduction of unsheltered homelessness.

2. HCoC Adoption Eligibility and CE Process that Reduce Unsheltered Homelessness

One of the early implementation steps of the community wide strategic plan is to work with a consultant to review and help revise our Coordinated Entry policy and process to prioritize unsheltered persons and integrate equity principles. The Strategy Board is working on a request for proposals for this project that we anticipate releasing in November with a start date in January of 2023. On completion, the Coordinated Entry Task Group would present revised eligibility processes and coordinated entry processes to the HCoC Board for approval.

3. Street Outreach Efforts to Connect those Living in Unsheltered Situations with Housing Resources

Street Outreach workers serve as the front door of the system to address homelessness for people living in unsheltered situation. Through the collaborations the HCoC has helped to develop and the work of the Outreach Task Group, the HCoC will continue to work to coordinate, align & target outreach workers and housing navigators to reduce duplication and ensure housing-focused approach, including creating community-wide outreach standards to improve safety, housing outcomes and equity. Improved utilization of HMIS will allow Outreach Workers to build off of each others work instead of duplicating the same questions to people they engage. Through Case Conferencing and By-Name List monitoring, the Outreach Task Group will be able to ensure better continuity of care and more focused outreach to meet people where they are and make resources available. One key impact of all of this for our community is that it changes the expectation for what Street Outreach can accomplish from being focused on delivering care items and checking in to becoming more about housing focused conversations built on the understanding that a housing opportunity is possible.

4. Additional Steps HCoC is Taking to Ensure Housing and Services for People who are Unsheltered (ID, housing navigation, access to healthcare and supportive services)

The HMIS Needs Assessment for Street Outreach Workers is a key component of offering additional services to people who are unsheltered. Through the Needs Assessment, outreach workers can make a note about services a person is requisition such as identification, housing navigation, access to healthcare, and supportive services that can be sent as a referral to an organization that utilizes HMIS and offers those services. The Outreach Task Group is able to review how many referrals are made and closed as a way of improving the effort. In many cases, Outreach Workers are able to make direct connections to services requested and make a follow-up plan with those they are engaging in the event a resource isn't available at the time of request.

**P-6. Involving Individuals with Lived Experience of Homelessness in Decision Making– Meaningful Outreach.**

1. Lived Experience Working Group Engagement

The HCoC has been actively working to develop a Lived Experience Advisory Board and policy that would establish a compensation matrix and create additional pathways for people with lived experience to be involved in efforts to end homelessness in Sangamon County. The HCoC Board approved the Lived Experience Advisory Board policy and compensation matrix in September of 2022. Simultaneously, the HCoC is seeking grant funding from our local Community Foundation to provide funding used to compensate people for their participation. Three individuals with lived experience have formed a working group with our Housing Navigator to develop and refine the policy and compensation matrix. Once funding is received, the HCoC will begin a recruitment process through social media, organizations, and outreach to build a board of ten people. The Lived Experience Advisory Board will participate in policy decisions, receive updates on local data, and focus their meetings on what they see as the most important challenges that need to be addressed in our community.

2. Lived Experience Integration in CoC Decision Making

The HCoC's stated goal is to have people with lived experience involved in each board and Task Group of the HCoC by the end of 2024. Once fully established, the Lived Experience Advisory Board will meet monthly with the power to make recommendations that will go to the HCoC board for action. The HCoC has always worked to ensure people with lived experience were a part of the board and other efforts but in the last year the desire has shifted to ensure people's experience of homelessness was in the past seven years. This was reflected in the establishment of the steering committee for the community wide strategic planning process which included a person who experienced homelessness less than two years ago. Additionally, the governance charter for the Strategy Board establishes that the board must include a person with lived experience. These efforts combined with the establishment of the Lived Experience Advisory Board are significant steps forward to ensure our community continues to improve on inclusion.

3. HCoC Encouragement to Involve People with Lived Experience in Delivery of Services

Beginning in 2020, the HCoC added a narrative question to each grant application that it manages asking those applying to share all the ways they include people with lived experience in their work. This initial step will be expanded upon through the work of the Lived Experience Advisory Board. Organizations in our community will have additional resources and tools to help them ensure they are incorporating lived experience through consulting, focus groups, and other means as they evaluate the delivery of the services they offer.

## **P-7. Supporting Underserved Communities and Supporting Equitable Community Development**

1. HCoC's Strategy for Identifying Inequity

The HCoC's strategy to identify populations in Sangamon County that are underserved by the homeless system at the same rate they are experiencing homelessness relies heavily on data from the homelessness system, community economic and census data, and qualitative data from intentional community feedback processes. In addition, other community

resources such as the Community Health Needs Assessment and United Way's ALICE report provide additional context as we analyze HMIS data and compare the rates of homelessness among different populations with other data points.

During 2022, the HCoC contracted with LathanHarris, Inc. to perform an Equity Analysis of our homelessness system and develop a Needs Assessment and Improvement Plan. Utilizing an outside consultant allowed for unbiased analysis and new ideas for improvement to identify underserved populations. This work was woven into our community wide strategic plan which included a commitment to pursuing equitable delivery of services throughout our community.

2. System Interaction with Underserved Communities

Recent data analysis of local data demonstrated that people of color make up 18% of Sangamon County's total population and 39% of our homelessness system. Review of Coordinated Entry data, shelter data, and permanent housing program data show similar population breakdowns in each areas of our system. The HCoC board continues to monitor racial data to determine if the new Coordinated Entry assessment our community has adopted leads to any changes that need to be addressed.

3. HCoC's Strategy for Outreach, Engagement, and Housing Interventions to Serve Populations Not Previously Served

In response to the large disparity between the composition of our community's population and the homeless system's population, the HCoC has made an intentional effort to invite and include new partners in the HCoC General Membership and Task Groups who represent the diversity of our community and particularly populations who are over represented. These new partnerships have provided new opportunities for Community Education and training to make more people in the community aware of what services are available to address homelessness. Additionally in response we have received about how challenging it can be for people facing a housing crisis, the Sangamon Housing Help Line was developed to take rent and utility assistance calls from 2-1-1 and make direct referrals through HMIS to organizations who have programs the callers are eligible for. As we continue to learn more through partnerships about challenges to navigate the current system, we anticipate testing and creating more accessible avenues for services to be delivered.