

Will County Performance Measurement Template: Continuum of Care Coordination

Problem: Nearly 50 entities in the public, private, faith-based and non-profit sectors of Will County are involved in homeless issues affecting in the County. To unite these entities on an ongoing basis to develop unduplicated strategies and services designed to lead the homeless and chronic homeless to self-sufficiency requires a high level of coordination and leadership.

Goal: Provide full-time, countywide coordination of the H.M.I.S.

Inputs:

1. \$93,500 in CDBG funds (\$78.00 per homeless person in Will County – \$93,500 divided by 1,200 homeless persons annually).
2. 150 hours in staff time per month across the 50 entities involved in the Continuum of Care (50 entities times 3 hours per month).

Activities:

1. Design/implement initiatives and directives
2. Coordinate special meetings/events
3. Create/disseminate communications (meeting minutes, newsletters, annual reports, presentations, press releases, special communications)
4. Maintain central Continuum “library” of files and information
5. Provide planning support to HUD entitlements
6. Oversee all aspects of the HMIS initiative
7. Coordinate annual SuperNOFA process/DHS Homeless Prevention Grant
8. Support volunteer leadership (chairpersons) in moving committee initiatives forward

Outputs:

1. 1,200 homeless persons served through Continuum-wide activities.
2. 80 chronic homeless receive specialized focus/support (subpopulation of the 1,200 total homeless).
3. 50 entities (approximately) are provided a forum to strategize solutions.
4. 8 homeless service organizations are linked electronically through the HMIS, meeting monthly through the Continuum to continually improve data collection.
5. 80 (approximately) meetings coordinated between entities working to fill gaps in homeless services and improve homeless service delivery.
6. [No.] homeless persons leave the Will County shelter system on the road to self-sufficiency due in part to the efforts of the Continuum of Care.
7. [No.] chronically homeless persons become housed and self-sufficient due in part to the efforts of the Continuum of Care.
8. [\$SuperNofa dollar amount] received from the federal government for local homeless services; the federal government requires having a strong, efficient, coordinated Continuum of Care to receive funding.

Outcomes:

1. Consensus is established to create/maintain housing (emergency,

transitional and permanent supportive) and services for the homeless.

2. Plan to end homelessness and chronic homelessness in Will County is strategized by a broad, diverse contingent of the community.
3. Collaboration among homeless services providers increases enrollment of the homeless in mainstream programs, maximizing access to critical resources.
4. Discharge plan with state mental health centers, child welfare agency, and penal institutions will be developed and implemented to prevent persons being discharged from becoming homeless.
5. Employment services benefiting the homeless are coordinated and delivered efficiently.
6. Gaps in homeless services are continually quantified and analyzed.
7. HMIS is implemented, expanded and maximized to provide actionable data collection and comprehensive resource information.
8. Strong, coordinated advocacy continually raises local awareness in the community.