

Evaluation and Monitoring

Note: Initial CE measures will generally be used establish a baseline for CE in Suburban Cook County. Trends will be evaluated throughout the year to help identify gaps in service, effectiveness of processes and opportunities for improvement. Specific performance goals have been identified in some instances but will be re-evaluated throughout.

HUD requirement for evaluating Coordinated Entry – HUD Coordinated Entry Notice: Section ii.B.15

Core Requirements: CoC consults with each participating project and project participants at least annually to evaluate the intake, assessment, and referral processes associated with coordinated entry. Solicitations for feedback must address the quality and effectiveness of the entire coordinated entry experience for both participating projects and households.

Evaluation methods: CoC ensures through written CE policies and procedures the frequency and method by which the CE evaluation will be conducted, including how project participants will be selected to provide feedback, and must describe a process by which the evaluation is used to implement updates to existing policies and procedures.

Measures to evaluate the effectiveness of CE:

Note: measures will be evaluated every three months beginning July 1, 2017 across client demographics at CoC, individual agency and project/service type to help ensure nondiscrimination and low-barrier access and to identify gaps in services. Evaluations will be presented to the Alliance Board twice a year.

- Length of time between: identification, pre-screen, VI-SPDAT, BNL (for prioritized households), match/offer, housing referral, housed.
 - Goal 1 – 75% of individuals or families identified as chronic have been assessed for housing within 14 days of identification (screened for housing/services preference, VISPDAT, housing application)
 - Goal 2 – Establish baseline and ongoing improvement toward HUD’s stated objective of minimizing time until housing resources are offered to every prioritized household (BNL) experiencing homelessness
 - Goal 3 – Work toward housing placement within 30 days of referral, evaluate any ongoing exceptions toward meeting this goal to inform potential gaps in services or areas of improvement.
- Completed housing referrals
 - Goal - establish baseline and observed improvement in number of completed compared with returned referrals. Will track completed referrals, returned referrals and reasons for return.
- CoC and ESG funded project vacancies filled by CE (system, agency, project level)
 - Goal – 100% adult-only PSH filled through CE
 - Goal – Establish baseline for all other PSH demographics, RRH and TH.

Vacancy time and occupancy rate

- Goal 1 – Adult-only PSH Vacancies filled within 60 days of vacancy
 - Goal 2 – CoC funded adult-only PSH occupancy rate exceeds 95%
 - Goal 3 - Establish baseline occupancy goals for all other PSH demographics, RRH and TH.
- Call Center process and outcomes
 - Goal 1 – Continued improvement trend in call/caller ratio (reduced number of calls by individual callers before connecting with call specialist)

- Goal 2 – establish baseline and observed improvement for accuracy of eligibility screening for households receiving referrals for services, completed referrals and outcomes by referral type
- Process surveys:
 - Access, Assessment and Referral process for clients – transparent process, fair and equal access, as few barriers to entry as possible
 - Access, Assessment and Referral process for agencies – consistent, standardized procedures across all CoC and ESG funded projects (Emergency Services, Street Outreach, Prevention, RRH, TH and PSH)
 - Training assessment – are agencies/staff receiving appropriate training
- Compliance with requirements of HUD Coordinated Entry Notice CPD-17-01
 - Goal – Written policies and procedures in place to achieve full compliance by January 23, 2018

Potential CE Impact on HUD CoC System-Wide Outcomes:

- Reduced average length of time homeless (by household type/demographic)
- Reduced return to homelessness
- Reduced rate of first-time homelessness
- Reduced chronic homelessness, family homelessness and youth homelessness
- Meet outcome targets for housing stability and increased income

General data measurements – as currently measured by HMIS staff:

- Household served makeup (size, CH, Vet, demographic)
- Data Quality – standard Alliance HMIS goals