

# Evaluation of the Homelessness Prevention Call Center

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**Summary Report**

**Evaluation of the Homelessness Prevention Call Center**

**October 2011**

**Submitted to**  
**Catholic Charities of the Archdiocese of Chicago**

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## Table of Contents

<b>SUMMARY REPORT</b> .....	<b>1</b>
Introduction.....	1
Research Questions and Methodology.....	2
Background of Homelessness Prevention Call Center Process.....	3
Findings - What We Learned About Callers' Experiences.....	5
Efficacy of Referral Process between HPCC and Referral Agencies.....	11
HPCC Staff and Stakeholder Interviews/Focus Groups.....	12
Conclusion.....	14
Recommendations.....	16

## Index of Tables and Figures

<b>Table 1.</b> Recruitment Period and Number of Participants for both Waves of Caller Surveys.....	3
<b>Figure 1.</b> Race and Ethnicity of Population of HPCC Callers.....	6
<b>Figure 2.</b> Gender of Population of HPCC Callers.....	6
<b>Figure 3.</b> Reasons Requests to HPCC Were Deemed Ineligible .....	7
<b>Figure 4.</b> Request Type and Eligibility Status of Call Requests to the HPCC.....	7
<b>Table 2.</b> Call Request Types by Race and Ethnic Group of Callers.....	8
<b>Figure 5a.</b> Outcomes for Sample of HPCC Callers Who Received Financial Assistance Referral.....	9
<b>Figure 5b.</b> Outcomes for Sample of HPCC Callers Told Funding Was Not Available.....	9

This is a summary report of a 3-year collaborative evaluation of the Homelessness Prevention Call Center (HPCC) between Loyola University Chicago's Center for Urban Research and Learning (CURL) and Catholic Charities of the Archdiocese of Chicago. Information for this evaluation was gathered from five sources: (1) surveys with HPCC callers and referral agency staff; (2) interviews with HPCC administrative staff and stakeholders; (3) focus groups with I&R ("Information and Referral") Specialists whom operate the HPCC; (4) analysis of HPCC's administrative data; and (5) test calls to the HPCC via 311 City Services. These data were collected and analyzed to evaluate the effectiveness of the HPCC system and its centralized delivery model. We reviewed data collected by the HPCC and the CURL research team for the purposes of understanding the experiences of HPCC callers and evaluating the centralized system. Findings from individual reports completed for this project are also consolidated here. These reports include: the 311 City Services Report; the Referral Agency Report; the HPCC Caller Phone Survey Report; and the HPCC Administrative Data Report.

## **Introduction**

In January 2003 the City of Chicago launched its historic "10 Year Plan to End Homelessness," the first homelessness intervention strategy of its magnitude officially initiated by a major city in the United States. Part and parcel of its strategy to eradicate homelessness, Chicago's Plan to End Homelessness aims to *prevent* homelessness within Chicago's city limits.

One such homelessness prevention initiative is the Homelessness Prevention Call Center ("HPCC" or "Call Center"), which is operated by Catholic Charities of the Archdiocese of Chicago (hereafter "Catholic Charities"). The HPCC represents a collaboration between the Chicago Alliance to End Homelessness, Catholic Charities, Emergency Fund, and the City of Chicago. Launched in January 2007, the Call Center directs individuals identified as being at risk for homelessness and who are deemed eligible for financial assistance to appropriate short-term funding agencies among the Call Center's network of referral agencies.

The Call Center is the first homelessness prevention call center in the country and is approaching its five-year anniversary. In an effort to determine best practices, i.e., identifying the strengths and weaknesses of the Call Center, Catholic Charities and the Loyola University Chicago Center for Urban Research and Learning ("CURL") formed a research partnership.

CURL conducted an extensive evaluation of the Call Center's daily operations and consumer experiences and outcomes. The CURL research team employed a mixed methodological approach to collect and analyze data in order to assist the HPCC in its endeavor to meet the increasing demands of Chicago city residents who are facing the imminent threat of homelessness. In February 2009, while the evaluation was underway, the Obama Administration passed the American Recovery and Reinvestment Act (ARRA). The ARRA included \$1.5 billion for Homelessness Prevention and Rapid Re-Housing Program (HPRP). The HPRP funds offer "mid-range assistance" and do not require that clients have the ability to pay their own expenses after assistance. The addition of the economic stimulus funds initiated several changes to the HPCC including an increased call volume, different screening protocol, and changes in requests for assistance. The stimulus funds prompted changes to the homelessness prevention system including an extension of the length of time for which callers can receive financial

assistance, an increase in the maximum amount of financial assistance individual callers are eligible to receive. Given these changes, the CURL research team re-designed the study to include a second survey wave with these callers to measure the impact of the stimulus on the HPCC service to callers.

Through an examination of HPCC callers' experiences, along with the Call Center's work flow, the CURL research team presents findings that provide a nuanced understanding of caller trends and recommendations to inform future planning. Understanding who callers are, the reasons they call, and the efficacy of social service provision are important data for funding agents, Call Center management, and the development of future homelessness prevention strategies.

As the first evaluation of a call center specifically devoted to homelessness prevention initiated by any major metropolitan area, this study provides systematic data necessary to strengthen the HPCC's service provision and inform future homelessness prevention strategies. Moreover, this study is a way to provide the Call Center with necessary feedback for its stakeholders and funding agents and to inform future programmatic and strategic planning for the city of Chicago as it assesses its Plan to End Homelessness.

## **Research Questions and Methodology**

This evaluation was guided by three key research questions:

1. How do callers experience and move through the Call Center system?
2. How does the centralized Call Center system work?
3. How was the Call Center system impacted by the changed policies and increased availability of funds due to the HPRP funds?

To answer these research questions, the CURL research team utilized a mixed methodological approach, which included:

- Conducting 100 test calls to the HPCC via 311 City Services in order to document the experience of callers: These test calls consisted of various scenarios which were communicated to the 311 operator. The research team analyzed the calls to determine whether the call was appropriately or inappropriately transferred to the HPCC based on existing HPCC protocols.<sup>1</sup>
- Conducting 357 phone surveys with a sample of HPCC callers who were deemed eligible for financial assistance: The trajectory of these callers was followed and analyzed as they moved through the system and were transferred to various referral agencies.<sup>2</sup> Among the 357 surveys, 105 surveys were conducted after referral agencies had received Homelessness Prevention and Rapid Re-Housing Program (HPRP) funds to analyze its impact (see Table 1). The research team found the sample to be representative of the HPCC eligible caller population.<sup>3</sup>

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<sup>1</sup> The full report on the test calls of the Chicago 311 City Service line can be found in the Appendix 1.

<sup>2</sup> The full report on the Caller Phone Survey is located in Appendix 2.

<sup>3</sup> Surveys were conducted a minimum of 7 days after the call to the HPCC.

- Conducting focus groups with the HPCC Information & Referral (I&R) Specialists and interviews with key HPCC administrative staff and stakeholders: Researchers held two focus groups (in which a total of seven I&R Specialists participated) and conducted interviews with three HPCC administrators and three HPCC stakeholders.
- Analyzing secondary data<sup>4</sup>: This included data from the Homelessness Management Information System (HMIS)/HPCC data and additional administrative and referral agency data. The CURL research team analyzed HMIS data collected by the HPCC between January 19, 2010 and November 9, 2010.<sup>5</sup>
- Conducting an online survey with referral agency staff<sup>6</sup>: During the month of March 2010, 37 referral agency staff members conducted an online survey. The online survey consisted of questions related to the referral process between the HPCC and their agency and the outcomes of the HPCC callers referred.

**Table 1. Recruitment Period and Number of Participants for both Waves of Caller Surveys**

	<b>Recruitment Period</b>	<b>Number of participants (N=357)</b>
<b>Wave 1 (Pre-Stimulus)</b>	March 2009-September 2009	252
<b>Wave 2 (Post-Stimulus)</b>	May 2010-June 2010	105

## **Background of Homelessness Prevention Call Center Process**

### Accessing the Homelessness Prevention Call Center

Currently, the only way to access the HPCC is by calling the Chicago 311 City Services line. A person in need of short-term assistance must first call 311 and be screened by a 311 operator. Then, the 311 operators should transfer appropriate calls to the HPCC.

The 311 operators use criteria indicators to screen calls and refer them to the HPCC if callers state or indicate they are in need of “short-term help.” These criteria include ensuring the following: (1) the type of assistance requested by the caller can be provided by the HPCC, such as rent, mortgage, and utilities assistance; and (2) the caller had contacted the Community and Economic Development Association (CEDA) or the Home Ownership Preservation Initiative (HOPI) before the HPCC, if applicable.

An automated system was added to the 311 line in early 2010, which allows callers to bypass the 311 operator and be transferred directly to the HPCC for assistance. However, callers still have the option to wait and speak to a 311 operator.

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<sup>4</sup> The full report on the Administrative Data Analysis is located in Appendix 3

<sup>5</sup> The available HMIS administrative data is limited; we only have administrative data for the second half of the evaluation period – January through November of 2010. Thus, we do not report population data to compare to the sample data. In reviewing administrative data for the year 2007, it appears that 2007 and 2010 data fairly similar on various data points including race, ethnicity, and gender. However, rental requests increased and mortgage requests decreased in 2010 in comparison to the year 2007.

<sup>6</sup> The full report on the Referral Agency Survey can be found in the Appendix 4.

### I&R Specialists' Handling of Calls to the Call Center

Each call answered by an I&R Specialist at the HPCC is tracked with an outcome for reporting purposes. Objectives of the Call Center, in addition to providing fair and equitable access to limited homeless prevention funds, are efficient service for providers, information for advocacy efforts, and community-wide homeless prevention strategy and planning. Valid calls to the HPCC are assessed and screened for fund eligibility and referred to an available provider agency. At any given time in the city of Chicago, there could be one to six or more types of Homelessness Prevention funding programs available to assist people in need. Each program has a set of guidelines and requirements of eligibility. In general, there are four eligible homelessness prevention guidelines:

- **Crisis:** The caller must have had a crisis beyond their control that affected their income or prevents the payment of their housing expenses (e.g. job loss, benefit loss).
- **Self-sufficiency:** The caller must be able to pay their housing expenses after the financial assistance is provided.
- **Imminent Risk:** The caller must be at imminent risk of losing their housing (e.g. landlord gives a 5-day notice or utility company sends disconnection notice).
- **Need Beyond Resource:** The award must solve the problem (e.g. If someone is behind on their rent, the amount needed is within the funds' maximum award limit).

### Utilization of Call Center Services

Once callers connect to the HPCC, I&R Specialists ask the caller a series of pre-screening questions (see flowchart of referral process in Appendix 5). At this point, about 7% calls are quickly found to be in error for reasons including residing in an area not served by HPCC or requesting assistance other than short term help (e.g. animal control) or are repeat callers (11%) asking if financial assistance is now available. The remaining 82% of the calls then proceed through the process. The pre-screening questions assist the Specialists in identifying the request type(s), determining whether the caller is eligible for funding and for which funding source(s). When a caller is deemed eligible for financial assistance and funding is available, the caller's name and contact information are referred to a referral agency that provides short-term financial assistance. The caller is told that a referral agency staff member will contact them. Callers deemed eligible, but no funding is available as well as callers deemed ineligible for financial assistance are provided with contact information for alternative resources since the caller would not be able to attain financial assistance.<sup>7</sup>

### Transfer of Caller Information to Referral Agency

After a caller is pre-screened for eligibility by an I&R Specialist and deemed eligible for assistance, their name is transferred to a referral agency. The referral agency attempts to contact the caller within a predetermined maximum number of days.<sup>8</sup> The referral agency staff works

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<sup>7</sup> Alternative resources including legal aid, domestic violence counseling, utility complaints, workforce development, senior services, disability services, public benefit screening, general support services, etc., since no financial assistance is available.

<sup>8</sup> The typical number of days for "short-term assistance" is two days and for HPRP funds contact is made within seven days.

with the callers and processes their application for assistance, providing case management and making the final determination of eligibility, per the fund's guidelines and documented requirements.

### Homelessness Prevention and Rapid Re-Housing Program (HPRP) – Impact on the HPCC

As mentioned above, the ARRA was passed in February of 2009 by the federal government. The ARRA includes \$1.5 billion for the HPRP. The HPRP funds are intended to assist individuals who imminently face homelessness. Emergency Fund, a primary funding agency of the HPCC was selected to administer the \$23 million in federal homelessness prevention funding, provided through the federal ARRA.

The addition of the economic stimulus funds initiated several modifications to the HPCC. These modifications included an increased call volume, different screening protocol, and changes in subsequent requests for assistance. In addition HPRP prompted changes to the homelessness prevention system including increasing the length of time for which callers can receive financial assistance, an increased maximum amount of money individual callers are eligible to receive. The stimulus funds also prompted changes in the procedures and operations of the HPCC. One significant change was an increased volume of callers to the HPCC fielded by I&R Specialists. In addition, the eligibility screening for HPRP funds now includes fewer questions by the Specialists to assess caller's eligibility. Further, referral staff now contacts a caller within seven days of their call to the HPCC, compared to those eligible for "short-term assistance," who are contacted within one or two days.

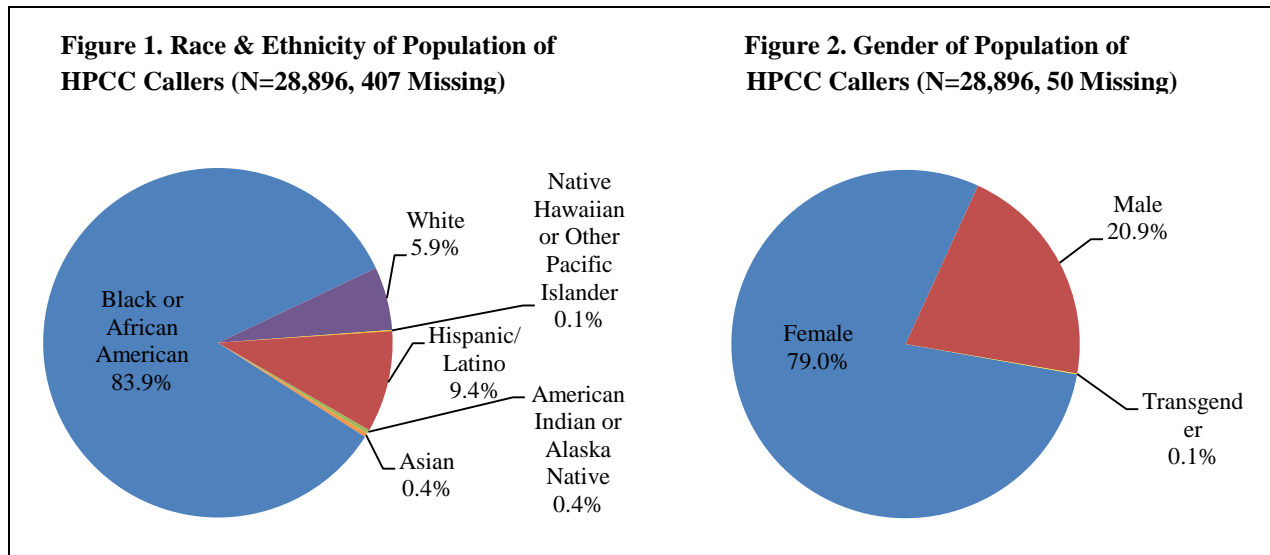
## **Findings – What We Learned About Callers' Experiences**

### Characteristics of Those Served by the System

Figures 1 and 2 present demographic data for the population, that is, all calls placed to the HPCC between January and November 2010. Figure 1 displays the racial and ethnic breakdown of the callers, documenting that the clear majority of callers were African-Americans, while Hispanics/Latinos comprised the second largest group of HPCC callers. Figure 2 displays the gender breakdown for the population of HPCC callers. Females represent the majority (over three-fourths) of callers to the HPCC.

Other demographic data such as primary language and veteran status were also collected. The clear majority of callers to the HPCC were English-language speakers primarily. Among the population of callers, 98.3% spoke English, 1.5% spoke Spanish, and 0.2% spoke another primary language. In addition, a small proportion of callers to the HPCC (3.3%) reported being veterans.





### Moving Through the System

As mentioned above, callers access the HPCC by first calling the 311 City Services Line. This next section details findings from test calls of the 311 system and caller survey respondents' assessment of their experiences with the 311 system.

#### Wait Times to Speak to 311 Operator and HPCC I&R Specialists

- Test calls conducted by the CURL research team found the median wait time to speak to a 311 operator was 2.8 minutes.<sup>9</sup>
  - On Mondays, which had some of the longest wait times, the average wait time was 6.0 minutes.
- The total time the test caller waited was an average 5.1 minutes. The total wait time included the time it took for a test caller to speak with a 311 operator, the length of the call with the 311 operator and the wait time to connect to the I&R Specialist.
  - For Monday calls, the median time to connect to HPCC was 8.9 minutes.
- Over seventy percent (70.8%) of survey respondents rated their ease in connecting from the 311 City Services Line as “excellent” or “good.”
- HPCC staff reported during interviews and focus groups that telling people to “call 311” was a quick and efficient way of directing people to resources.
- Still, after the automated feature was added to the 311 system, which allows callers to self-transfer directly to the HPCC, the HPCC staff reported receiving a higher number of errant calls.

<sup>9</sup> Test calls were conducted prior to the addition of the automated system to the 311 City Services line which allows callers to bypass the 311 operator and transfer directly to HPCC.

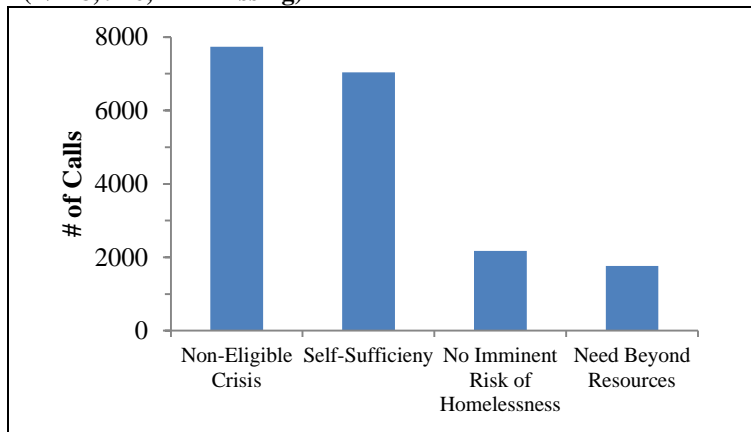
### Outcomes of Call Requests

Of the valid call requests to HPCC only a small number of requests were eligible for existing financial assistance. The call assessments by the I&R Specialists demonstrate that 23,578 of call requests were valid call requests.<sup>11</sup> The majority (18,946) were found ineligible and 4,632 were eligible for financial assistance.

Figure 3 demonstrates the breakdown of ineligible calls.

Among the reasons for ineligibility, having a ‘non-eligible crisis’ was the most common reason (7,734). The second highest reason for ineligibility was for ‘self-sufficiency’ reasons (7,034); 2,172 had ‘no imminent risk of homelessness’ and 1,764 had a ‘need beyond resource.’ Among non-eligible calls, 10,887 were given/accepted information for other resources.

**Figure 3. Reasons Requests to HPCC Were Deemed Ineligible (N=18, 946, 242 Missing)<sup>10 12</sup>**



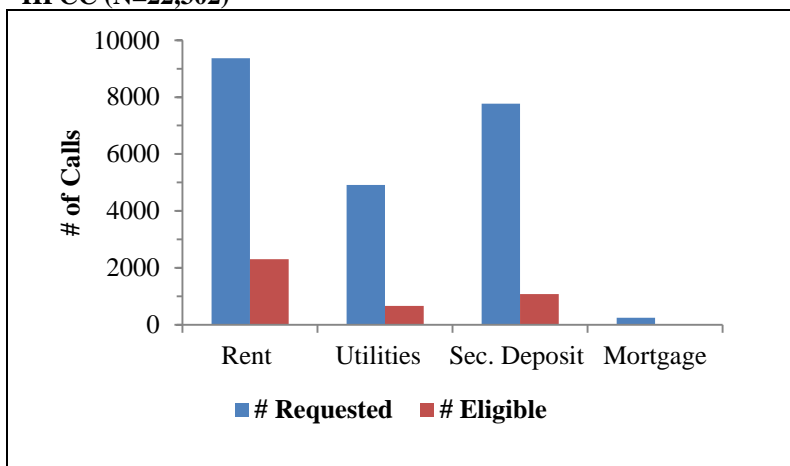
### Eligible Calls

In this section we discuss the outcomes of the near 4,632 calls that were deemed eligible for financial assistance.

### Varied Eligibility Rates by Type of Request

Figure 4 reports requests for assistance and eligibility rates for HPCC calls. The data indicate that the most typical requests among HPCC calls were for rental housing, with 9,361 requests for rent assistance and 7,771 for security deposits. Utilities were requested 4,918 times. Requests for mortgages were the least likely to be requested (n=252).

**Figure 4. Request Type and Eligibility Status of Call Requests to the HPCC (N=22,302)<sup>12 13</sup>**



<sup>10</sup> There may be more than one reason for ineligibility for each call.

<sup>11</sup> As described above, 18% of calls to HPCC were not “full assessments”. These calls are comprised of errant calls (7%) and repeat or follow-up callers inquiring about the availability of funding (11%).

<sup>12</sup> Source: HMIS database of HPCC callers between January 19, 2010 and November 9, 2010.

<sup>13</sup> These categories are not mutually exclusive; callers could request multiple types of assistance.

In terms of eligibility, 2,304 call requests or 24.6% of the requests for rent were eligible. Furthermore, 1,077 or 13.9% of the requests for security deposit were eligible. A total of 663 (13.5%) of the requests made for utilities were eligible. Mortgages, which had the lowest request rate, had 28 or 11.1% of eligible call requests.

Table 2 displays the variation in types of call requests received among racial and ethnic groups. While there were slight differences, all race and ethnic groups were similar in that approximately two-thirds of requests were for rental assistance (rent and security deposits).

**Table 2. Call Request Types by Race and Ethnic Group of Callers (N=28,110)<sup>14 15</sup>**

Requests by:	Rent	Security Deposit	Utilities	Mortgage	Other
<b>Black/African American</b>	8,498	7,337	6,309	225	973
<b>White</b>	738	366	434	23	76
<b>Hispanic/Latino</b>	1,022	584	814	43	68
<b>Asian</b>	41	19	22	3	3
<b>American Indian/ Alaska Native/ Native American</b>	26	16	19	0	1
<b>Multi-racial / Other/ Hawaiian/ Pacific Islander</b>	189	138	111	7	17

### Experiences of Eligible Callers<sup>16</sup>

Utilizing the two waves of phone survey data collected from the sample of eligible callers, we now report caller results:

- 30.3% said they were told that they were eligible and funds were available, and that a referral agency staff person would call them.<sup>17</sup> Funds were most likely to be available for rent requests (54%). Funding for gas, light, and security deposits was available for approximately 15% of requests.
- 69.7% said they were told that funds were not available.

<sup>14</sup> Source: HMIS database of HPCC callers between January 19, 2010 and November 9, 2010.

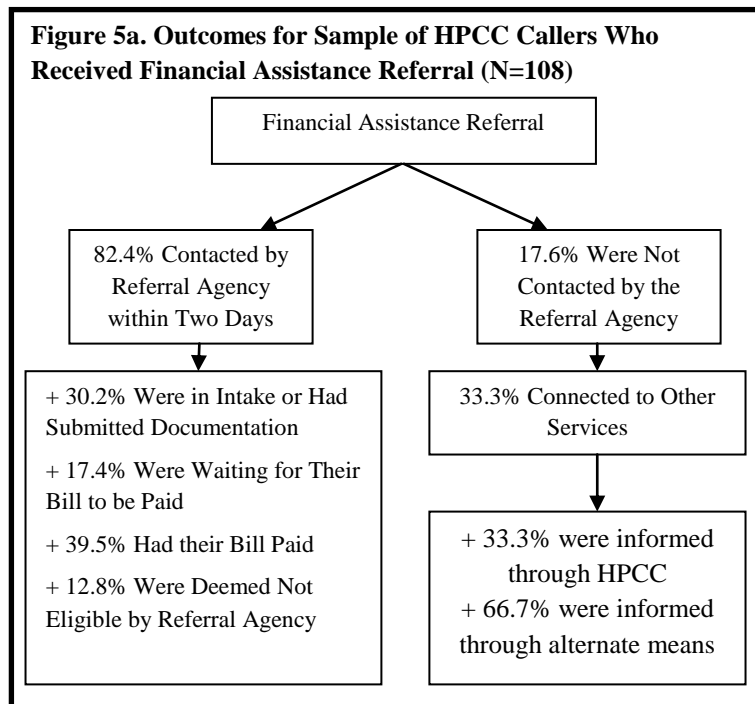
<sup>15</sup> Individuals reported as the categories Black/African-American, White, Asian, American Indian/Alaska Native, Multi-racial/Other are all non-Hispanic/Latino.

<sup>16</sup> Because the caller administrative data are limited, we now report the caller sample data to document caller outcomes.

<sup>17</sup> Our sample reflects a broader time period (March – September 2009 and May – June 2010) than the administrative data and includes a larger proportion of eligible callers where funds were not available. As we will discuss later in this report, this is probably due to the inclusion of pre-stimulus callers in the sample group. There were more funds available once the stimulus money was released.

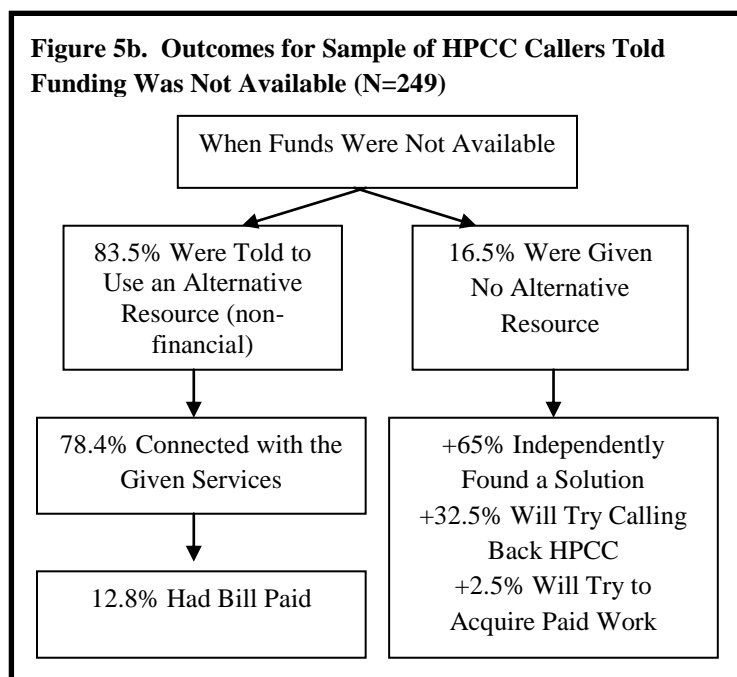
When Funding Was Available

As noted in Figure 5a, the overwhelming majority (82.4%) of the sample of phone survey respondents who were told they would be contacted by a referral agency reported that they had been contacted within an average of 2 days after their call. There were varied outcomes among these callers. The largest plurality (nearly 40%) stated that their bill had been paid, close to 20% (17.4%) were waiting for their bill to be paid, and about one-third were either in the intake/screening process or had submitted documentation. Just over 1 out of 10 callers was found to be ineligible by the referral agency. A large majority of these callers (82%) rated their experience with the referral agencies as “useful” or “very useful.”



When Funding Was Not Available

When funding was not available, the majority of callers (83.5%) were told by an I&R Specialist to go/call somewhere to obtain alternate resources since no financial assistance was available (see Figure 5b).<sup>18</sup> Of particular note is that over three-fourths of these callers had pursued and connected with other sources in an effort to have their bill paid subsequent to their call to the HPCC. Of those who were given an alternate resource, nearly half (46.4%) rated their experience with the given agency as “useful” or “very useful.” In addition to those who received



<sup>18</sup> The Call Center has arranged with specific community-based organizations and state offices to refer these callers to other resources. These resources consist of Department of Human Services offices, Department of Aging offices, Catholic Charities, Heartland Alliance, Trina Davila and others for legal aid, domestic violence services, senior services, and general support services.

an alternate resource referral, a total of 16.5% of callers reported receiving no alternate resource referral from HPCC. Among the 16.5% of callers, 65% said they were pursuing services through other social service agencies, through family and friends, or through payday loans. Furthermore, 32.5% were either told to or planned to keep calling back HPCC knowing that fund availability is sporadic. Lastly, 2.5% of clients were trying to obtain employment.

### Change in Housing Status

Callers were asked whether they were still residing in the same housing as when they called the Call Center. Among the entire sample of callers, 13.7% were residing in different housing from when they called the HPCC. Interestingly, those callers who were told funding was *not* available report a higher percentage of living in a different place compared to those who were told funding was available (14.4% compared to 12.3%). However, these differences were not large enough to be statistically significant.

### Impact of Funds from the Homelessness Prevention and Rapid Re-Housing Program (HPRP)

Given the changes to the HPCC as a result of the release of Homelessness Prevention and Rapid Re-Housing Program (HPRP) funds, the phone survey data collection plan was revised to conduct surveys with individuals calling after the infusion of the stimulus funds. This second wave of phone surveys was conducted in June and July of 2010 in order to assess the impact of the stimulus funds on the HPCC.<sup>19</sup>

This section compares the experiences of callers who moved through the HPCC system prior to the stimulus funds (Wave 1) and post stimulus funds (Wave 2). Wave 1 contained a sample of 252 callers and Wave 2 contained a sample of 105 callers (Table 1). Chi-square tests were conducted to document statistically significant changes from pre- to post-stimulus funds.

### A Significant Increase in Callers Told Financial Services Were Available

Not surprisingly given the increased funding available through HPRP funds, a higher statistically significant amount of eligible survey callers were told financial services were available. Specifically, in the Wave 1 pre-stimulus group 26.2% were told financial services were available compared to 40.0% in the Wave 2 post-stimulus group.

### Referral Agency Denied Financial Assistance to Fewer Callers

Of the pre-stimulus callers, 16.7% were deemed ineligible by the referral agency compared to 6.1% of the post-stimulus sample who were deemed ineligible. This was a sizable, albeit statistically non-significant decrease from pre- to post-stimulus. According to HPCC staff, this decrease may be attributed to the broadened eligibility criteria for HPRP funds, in comparison to the standard criteria for “short-term assistance.” As mentioned above, the economic stimulus funds offer “mid-range assistance,” which does not require clients to have the ability to pay their own expenses after they receive assistance. The initiation of the HPRP funds prompted changes including increasing the length of time for which callers can receive financial assistance and

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<sup>19</sup> The full report on the Caller Phone Survey can be found in Appendix 2.

increasing the amount of money callers can receive. Also, eligibility screening was streamlined to ensure faster processing of callers.

### Longer Wait Times to Receive Financial Assistance

Although responsibility for processing applications and providing the financial assistance lies on the referral agency, it was noted through a comparison of the outcomes for those who were told funding was available pre- and post-stimulus that it took longer to have bills paid after the release of HPRP funds. Among the pre-stimulus callers, 13.2% reported they were waiting, compared to 24.2% of the post-stimulus callers who were told funding was available. This increase (albeit not statistically significant) post-stimulus might have been impacted by the release of HPRP funding and the effort to assist a high number of clients/callers through the HPRP program, which initially overloaded the referral agencies, thus prompting delays with the processing of payments.

### **Efficacy of Referral Process Between the HPCC and Referral Agencies**

Moving on from the caller data, we now discuss how the referral process between the Call Center and referral agencies work, from the perspective of referral agency staff. Referral agency staff (n=37) via an online survey reported on their experiences with callers referred by the HPCC and the HPCC system. The main two issues discussed below include referral agency staff perspectives with regard to the efficacy of the HPCC screening system and the callback system for contacting callers referred by HPCC. In particular, we discuss the efficacy of the HPCC screening system and callback system, staff members' success in reaching referred clients, and how the HPCC system impacted their work.

#### Efficacy of HPCC Screening System

On the whole, the majority of referral agencies reported positive experiences with the referral system. For example, when asked to rate on a 5-point scale, where 1 is "never" and 5 is "always," their estimation of how often referral from the Call Center are pre-screened correctly for eligibility, 63.9% responded with a positive 4 or 5 rating. A quarter (25%) reported a neutral rating of three, and 11.1% demonstrated concern with a 1 or 2 rating. There were some expressed concerns about the efficacy of the process. When asked to rate the frequency that callers' pre-screened eligibility status was changed, more than half (55.6%) of referral agency staff reported deeming an HPCC referral ineligible in the six months prior to taking the survey. The most common reason staff reported for denying a caller's application was callers' inability to provide documentation to substantiate their request (85%). Further, over half (60%) indicated that callers' stories had changed which prompted their denial of callers' financial assistance request.

#### Efficacy of Callback System

The referral agencies reported that the contact information they received was very useful, reporting high levels of success in reaching referred clients. Staff reported they were able to contact a median of 87.5% of HPCC-referred clients. This finding is similar to the results of the

caller phone surveys, as 82.4% of eligible callers who were referred for a callback had made contact with the referral agency.

### Referral Staff-Identified Benefits and Areas of Improvement

Referral agency staff discussed both benefits of and areas in need of improvement with the centralized HPCC system. These include:

- A majority of respondents reported “pre-screened referrals” and “quick response for anyone who calls for assistance – ‘call 311’” as the biggest improvements with the transition to the centralized HPCC call system.
  - *This concurs with the HPCC staff perception that pre-screening practices save referral agencies time. HPCC staff perceived that use of a centralized referral system accessing the agency through one phone number was helpful to referral agencies and eliminated the possibility of callers reaching a staff member’s voicemail or calling at an inopportune time.*
- Staff reported that the efficiency, transparency, and pre-screening practices of the referral process worked well.
- A majority of referral agency staff felt that the centralized system improved their ability to serve people seeking emergency funds.
- Although referral agencies rated the pre-screening practices positively, a majority felt that it was an area that still needed improvement.
- Referral agency staff also indicated that HPCC should further explain and provide accurate information to callers referred to an agency for financial assistance.

### **HPCC Staff and Stakeholder Interviews/Focus Groups – Further Examination of the Homelessness Prevention Call Center System**

In addition to the quantitative component of the evaluation, qualitative data were collected through focus groups with I&R Specialists as well as interviews with HPCC administrative staff and HPCC stakeholders. These data were collected to further elucidate how the centralized call system works. The administrative and stakeholder interviews were conducted to provide insight about the HPCC system in Chicago as a whole, including the collaborative relationships between homeless prevention service providers, advocates and funding agencies.

#### Efficacy of Scripts and Protocols

During a focus group with I&R Specialists, participants reported that their use of scripts and protocols, and database spreadsheets during calls with HPCC callers was helpful, but reported that modifications to the pre-screening scripts could improve their efficiency. In addition, some I&R Specialists felt increased uniformity in HPCC’s distribution of information to I&R Specialists, more frequent updates of the information about city resources which Specialists share with callers, and a consolidation of spreadsheets would enable them to provide more accurate information to callers.

I&R Specialists also discussed perceived challenges for referral agency staff in reaching callers with irregular or limited telephone access. It was recommended that additional caller contact

information (e.g. e-mail addresses and contact information for a family member/friend) be obtained in order to contact those difficult-to-reach callers.

### Collaboration Between Homelessness Prevention Service Providers, Advocates and Funding Agencies

Interview participants discussed the lack of information transferred from referral agencies to HPCC, which is a limitation to documenting outcomes of the client assistance process. There is no uniform use of Service Point<sup>20</sup> among referral agencies, staff explained, which is a limitation to data gathering and reporting outcomes. In addition, staff explained that many callers continue to follow-up with the Call Center about the status of their claim, yet HPCC staff do not have access to information documenting the caller's referral status, thus HPCC staff cannot advise the caller regarding next steps. The HPCC administrative staff identified the transfer of callers' information from HPCC to the referral agencies as a point in the system in need of improvement. Potential modifications should be explored, yet security of information and efficiency are critical to maintain, these staff explained. Also, changes to the transfer of information from the referral agency back to the HPCC as it relates to outcomes of referred callers were also suggested.

Discussing the distribution of homelessness prevention funds in the city of Chicago, administrative staff reported that the Call Center operates under the assumption that they are screening for all homelessness prevention funds under the coordination of Emergency Fund. However, staff explained that there are some agencies that distribute private funds, usually for their internal program participants, which are not distributed through the HPCC. Staff assert that a centralized system for the distribution of ALL homelessness prevention funding is necessary to maintain an efficient, community-wide response. A centralized system that is inclusive of all homelessness prevention funds will simplify the funding distribution, staff explained. Thus, staff recommended that the system of homelessness prevention funding be reviewed and standardized with a fully centralized distribution system. Concern was expressed that agencies may be using low-criteria funding sources when unused tighter-criteria funds available through the Call Center could have been used.

HPCC staff and stakeholders discussed the impact of the HPRP funds on the HPCC system. The HPRP funds have temporarily helped meet the needs of callers who were either found eligible, but no funds were available, or ineligible due to self-sufficiency, by easing the eligibility requirements and providing funds when typically funds were no longer available, participants reported. There is no easy solution to address the needs of these callers once the HPRP funds are expended. For many who received assistance via HPRP funds, their 18-months of assistance have ended. Also, HPRP funding will end in July of 2012. Many of these individuals obtained employment and other assistance through the program, yet given the current economy, many have not secured employment, staff explained.

The large proportion of callers deemed ineligible for assistance by the HPCC was also discussed. HPCC staff reported there is need for alternative resources for those deemed ineligible; however, funding for these resources has been cut. For example, programs providing assistance for financial planning, a home sharing program, and general case management are all defunct.

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<sup>20</sup> Service Point is the HMIS software used by Chicago service providers.



### HPCC Data Utilization for Homeless Prevention Resources and Advocacy

All information collected from callers is stored electronically in the HMIS system. Staff explained that reports of aggregate Call Center data are produced and utilized by various stakeholders for purposes of furthering and promoting homelessness prevention efforts in the city. Statistical reports by location and service request type are provided and used to request more funding. The Chicago Alliance to End Homelessness has utilized reports of HPCC data for purposes of homelessness prevention advocacy and strategic planning, and the City of Chicago Department of Family and Support Services has also used data reports to request more funding from the U.S. Department of Housing and Urban Development. Further, Catholic Charities has circulated data to the media for purposes of raising awareness.

As mentioned earlier, HPCC records comprehensive caller information in the HMIS system, however, the lack of information from the referral agency regarding the status of referred caller's requests is a limitation on reporting the outcome, overall continuum of care, and resources.

### **Conclusion**

In general we found that the centralized referral system is effective and efficient. Individuals seem to easily access the system and HPCC staff are well trained and efficient. Given the system's limited funding resources, only a fraction (6%) are connected to funding, although we estimate close to 70% are given other referral information. With the release of additional funds in 2010 from the federal stimulus's Homeless Prevention and Rapid Re-housing Program (HPRP) more demand has been met. The number of eligible callers who were told funding was available increased by 52% and the number of referred callers who were denied financial assistance decreased by 70%.

### Access and Coordination Between Different Components of Homeless Prevention System:

- We found that callers were basically able to access the centralized referral system within a small but on the whole fairly manageable wait time. While in a time of heavy call volume, such as Mondays, researchers testing the referral system found the combined wait time to the 311 operator and the I&R Specialist could average 9 minutes, on the average, the wait time was 5 minutes. Reflecting these findings, just over seventy percent (70.8) of the survey respondents rated their initial connection to the system as "excellent" or "good."
- The 311 operators seem to have done a fairly good job of screening calls to the HPCC, with only a 2.5 % error rate. In fact, HPCC staff in general found the 311 portal effective and efficient. However, HPCC management reported that while the addition of the automated system made access to the HPCC easier, it may have increased errant calls.
- I & R Specialists' assessments of caller eligibility were congruent with the referral agencies' assessments in just under 90% of the cases. It is possible that changes in eligibility assessment (10% of cases), was due to the inability of the callers to provide documentation to substantiate their initial claims. This was one of the reasons noted by the referral agencies.

- The majority of the referral agencies reported positive experiences with the HPCC. Close to two-thirds gave a high rating to the accuracy of HPCC specialists' referrals. However, even though the referral agencies rated this screening system highly, the majority also felt there was room for improvement in the areas of the pre-screening of clients and providing callers further explanation and accurate information.
- The agency contact call back procedure worked well for callers subsequent to their referral for financial assistance. Four out of five callers who were told funds were available were contacted by the referral agency staff within 2 days (for referrals with a two-day service level requirement). The remainder had not been contacted within a week of being referred. The referral agencies rated highly the contact information they received from HPCC operators, and they reported similar contact rates to those reported by surveyed callers.
- Among those callers deemed ineligible for financial assistance, greater than half of the call requests were given/accepted information about other resources (10,887 out of 18,946 call requests).

#### Experience of Eligible Callers

- Among the callers who participated in a phone survey, all of whom were eligible for financial assistance, 30% were told funding was available.
- At the time of interview, usually about one week after their call to HPCC, a little less than half of the interviewed callers already had their bills paid by the referral agency, and just under 20 percent were waiting for bill payment. The remaining 30 percent were either in the intake process with the referral agency or had submitted documentation for their request.
- Most (84%) of those for whom funds were not available were referred to an alternative referral source, and nearly 4 out of 5 of those had connected with that referral agency within a week.
- Of those who reported not receiving any referral information, two-thirds reported finding an independent solution to meet their housing needs and one-third said they would try calling back HPCC. However, this policy does not seem to daunt callers, and according to administrative data, 11% of all calls to HPCC are individuals asking if funds have become available.

#### Impact of Stimulus Funding

- As mentioned above, the infusion of funds and broadening of eligibility due to the Homeless Prevention and Rapid Re-housing Program (HPRP) increased both the number of callers who were deemed eligible and for whom funds were available.
- However, it took significantly longer for bills to be paid by the referral agency after the release of the HPRP funds. The number of callers whose application had been approved and

waiting for their bill to be paid at the time of the survey increased by 86% (from 13% pre-stimulus to 24% post-stimulus).

- It should be noted that I&R Specialists' pre-screening assessments were less likely to be changed after the implementation of HPRP with its infusion of additional funding and broadened eligibility requirements.

## **Recommendations**

### Collaborate with 311 City Services for Spanish Language Improvement

Although we found the use of 311 City Services to be fairly efficient, the protocol should be reviewed again to assess the impact of 311's automated feature. The automated feature was implemented subsequent to our testing of the 311 portion of the HPCC system. With the new automated feature, a caller can transfer himself or herself to the HPCC by pressing a number. One concern is that the automated feature is not announced in Spanish-language; this may be a barrier to serving Spanish-language callers. In general, any automated greetings used by 311 City Services should also be said in Spanish to better serve Spanish-speaking residents.

In addition, we recommend that 311 operators review the procedures for handling Spanish-language calls. Among the series of test calls, there was a higher rate of misdirected calls during Spanish calls compared to English calls. Spanish calls had the unique challenge of a delay in bringing interpreters on the line. Test caller comments indicate that, in some cases, 311 operators spoke English when asking probing questions, even after the caller had requested a Spanish speaker. All 311 operators should be knowledgeable in handling Spanish-speaking callers and follow a standard procedure.

### Collaborate with 311 City Services to Appropriately Connect Callers

The HPCC and 311 City Services should review protocols and screening instruments on an annual basis to ensure that calls for the HPCC are being screened and appropriately connected. There needs to be discussion and clarification between HPCC and 311 City Services of protocol and procedures during homelessness prevention calls to assure that calls are being screened and appropriately connected. The protocols provided to the research team by HPCC staff included a number of screening questions used for various scripts, such as: "Is this due to a crisis or emergency situation?" or "Is this a one-time request for assistance?" The test callers reported that the 311 operators had not asked an anticipated screening question during several of the calls. The use of the screening questions would make the transfer from 311 to HPCC more efficient by increasing the number of callers who are appropriately connected and decreasing the number of ineligible callers taken by the HPCC.

### A Direct Line to HPCC

During interviews with some HPCC administrative staff, it was mentioned that alternative access points for callers such as e-mail, text, and internet would be helpful. They also mentioned the use of "211" lines in other states and municipalities as a way of providing information on health

and human services resources was suggested. HPCC and stakeholders should explore the possibilities of branching out in these areas, including collaboration on start-up funding. Additionally, a 211 line would provide direct access to the HPCC rather than through the City's 311 number.

#### Minimize Barriers to Financial Assistance During the Pre-Screening with I&R Specialists

The following specific changes would benefit the centralized call center model and potentially increase the efficiency of referrals sent to agencies for funding requests.

- Although call length is a concern for processing as many calls as possible, callers receiving a referral for financial assistance should be informed in more expanded detail than they currently receive that they are only “potentially” eligible, and referral agencies will complete the final eligibility assessment.
  - Ensure callers’ understanding of the proof of documentation requirement before sending a financial assistance referral.
  - Emphasize to callers the funding limitations and restrictions and that the final funding decisions are made by the referral agency. For example, the referral agency may not be located in close proximity to the callers. Likewise, due to the number of times the caller had received financial assistance, the agency will decide if they are still able to qualify for the fund.
- Collect an e-mail address from the caller to improve referral agencies’ ability to reach callers.

#### Systems Integration Between HPCC and Referral Agencies

Currently, the flow of information about an individual caller flows in only one direction, from HPCC to the referral agencies. However, there is a need for the information from the referral agencies regarding the status and final outcome of individual callers to be accessible by the HPCC. Callers often re-contact the Call Center in regard to the status of their case. In addition, callers when calling for a new request at a later date can incorrectly answer questions regarding their previous applications and outcomes, limiting the ability of HPCC to make accurate preliminary assessments. Yet it would be a strain on the referral agencies to provide such individual level or timely feedback.

Also, HPCC is hampered in accurately accessing systems outcomes because it does not have timely and uniform access to referral outcomes at the referral agency level. Better systems integration and access to the same information by both the HPCC and referral agencies will further increase efficiency of the centralized system.

- Stakeholders may want to explore a strategy for gathering these referral agency outcomes in the HMIS centralized system.
- In addition, the Call Center currently does not have the resources to conduct ongoing data analysis in order to access the system. As such, the stakeholders and the HPCC should explore options for staffing a research and dissemination position.

### Expansion of Services to Non-eligible Callers

Although alternate resources are provided for non-eligible callers and callers who are eligible, but no funds available, HPCC staff reports that more is needed. An increasing number of callers are still clearly in need of assistance to prevent homelessness but do not meet the funding requirement of the HPCC system.

- An expansion of the scope of the services provided by HPCC should be considered.
- The key stakeholders need to develop a plan and identify resources for this expanded community response.

### Recommendation to Funders: Consider Changing the “First-in, First-served” Access to Funding Model

As long as the funding strategy is first-in, first-served and fund eligibility is broad, it seems like a system in which the timing of a person’s call is more determinate of whether he or she will receive funding, rather than whether he or she may become homeless without the assistance. Eligible callers are matched to a referral agency for funding as long as funds are available.

- A rubric-of-need model of screening at HPCC, through which certain populations or characteristics are prioritized, might be considered.
- The centralized feature of the Call Center and use of Chicago’s HMIS system would allow prioritization based on any target strategies developed by fund providers.

