



The Boulevard

The Road to Health and Home

formerly Interfaith House

Agency Overview From The Boulevard of Chicago

For more than 22 years, The Boulevard of Chicago (formerly Interfaith House) has been a recognized leader in the network of organizations working to address the challenges faced by Chicago's homeless population. The Boulevard is a unique organization, dedicated to helping homeless men and women with medical recovery needs that cannot be appropriately addressed in a shelter environment. We provide program participants with medical respite care, interim housing, a wide variety of support services, and help obtaining stable housing. We believe there is a direct link between stable medical and mental health, and stable housing.

HISTORY AND MISSION

Mission Statement: *The Boulevard: The Road to Health and Home provides a healing environment and resources to help ill and injured homeless adults restore their health, rebuild their lives and regain self-sufficiency.*

In 1994, a group of community leaders who were determined to address the burgeoning crisis of homelessness in their communities established a program to focus efforts on the circumstances of numerous people they discovered showing up at the city's warming centers in desperate need of acute medical care as the result of an illness and/or injury. Many of these men and women had been discharged from treatment at local hospitals or clinics with nowhere to go to recuperate. The Boulevard, an independent and secular organization, grew in response to this unmet need.

The Boulevard addressed the challenge by developing a program that provides interim housing and meals, support services, behavioral health assistance and counseling sessions, and individual case management. We have an on-site clinic where residents can meet with medical professionals; an employment project to help residents in their search for what can be a make-or-break job; a housing advocacy team to locate stable housing; and a Health and Housing Outreach Team to provide a continuum of care through visits, counseling and support to clients once they have left us for independent housing.

At the beginning of Fiscal Year 2016, after more than a year of intensive consideration, research, and consultations with Board members, staff, residents and marketing professionals, the agency's name was officially changed from Interfaith House to The Boulevard of Chicago. The Boulevard continues to serve the same mission and will continue to provide Chicago's ill and injured homeless men and women with the best medical respite care available.

Today, The Boulevard is a 64-bed medical respite care center operating around the clock that serves more than 300 individuals annually. We are the only medical respite care center in Illinois dedicated to serving homeless men and women.

RECENT ACCOMPLISHMENTS

As part of our continued work to provide the best possible medical and psychological care to Chicago's ill and injured homeless population, The Boulevard has brought on two new staff positions to provide crucial on-site services: an LCSW and a Care Coordinator. Having an LCSW will allow us to offer increased on-site mental health services, and a Care Coordinator will smooth the process of determining and attaining both on-site and off-site medical, psychological, and substance abuse prevention care – particularly important since most of our clients have multiple diagnoses and need many different types of care. In addition to increase psycho-social care, Boulevard residents now also have access to increased substance abuse recovery care, including in-house Suboxone treatments, as part of a wider initiative by PCC Wellness to implement a large-scale chemical dependency treatment program.

COMMUNITY NEED AND DEMOGRAPHICS

The National Coalition for the Homeless has documented that chronic illness and/or disability conditions, including HIV/AIDS and diabetes, are more prevalent in the homeless population due to such factors as poor hygiene, malnutrition, and exposure to cold and rainy weather. It reports that homeless people are three to six times more likely to become ill than housed people.

Homeless adults with acute medical needs are referred to The Boulevard by more than 65 area hospitals and by the Chicago Department of Family and Support Services. In our last completed fiscal year, The Boulevard served 324 ill and injured homeless adults by providing access to healthcare, psychosocial services, and assistance in obtaining stable independent housing.

Prior to their arrival at The Boulevard, our clients have usually lived on the streets, eating in soup kitchens and moving between homeless shelters. They come to us with many untreated conditions: 95% of residents had chronic physical health needs; 42% suffered from mental illnesses; 27% reported they are living with HIV/AIDS; and 50% suffered from addiction. Residents were 77% African-American, 19% Caucasian, and 4% Hispanic; 77% of them were men and 23% women; and 19% were veterans. All of our clients live below the poverty level, with 50% having no income at all on admission.

VISION

For more than 22 years, The Boulevard has provided medical respite care to Chicago's ill and injured homeless population. Looking ahead, it is apparent that while our model is unique and effective, some modifications are necessary. Shifting government priorities, changes in housing markets and hospital regulations, and economic realities all require The Boulevard to adapt. Partnerships with referring hospitals are helping us build a sustainable financial future for our medical respite program. It is our goal to grow our organization and serve more clients, provide a greater range of resources, and expand our capability to deliver medical and psychological care.

PROGRAM NARRATIVE

The Boulevard's objective is to provide residential and support services for homeless adults with acute medical needs, and prepare each to return to independent living. The organization is structured into three primary programs to accomplish that end.

Assessment-Respite

The goal of our Assessment-Respite program is to assist ill or injured homeless adults to complete their medical recovery, begin receiving support with social and psychological issues, and successfully relocate into stable housing. A Case Manager and a Care Coordinator is assigned to each new resident to help determine their needs and direct them through our Medical, Behavioral Health, and Housing services.

Health and Housing Outreach Team

The Boulevard's Health and Housing Outreach Team (HHOT) provides clients who have successfully transitioned into independent housing, as well as clients referred to us by AFC's Samaritan Project, with continuing support services for up to two years. These services are provided through weekly in-home visits from staff that check to make sure clients are maintaining their medication regimen, keeping their medical appointments, that their basic needs are being met, and assisting them in maintaining government benefits. More than 95% of clients have remained housed while enrolled in the program.

Alvin Baum Employment Project

For many residents, a job opportunity will be the key to gaining and keeping stable housing. At The Boulevard, residents are able to work toward the goal of obtaining employment by participating in the *Alvin Baum Employment Project*. The project helps our clients develop job skills and job search skills; and assists them in finding jobs or entering workforce development programs. The project includes an *Employment Program* that is a structured five-week course which helps our residents identify their skills and set employment goals, and then works with clients to advance through the steps needed to achieve their goal. The project also includes a *Service Learning Program* offering specialized training that gives participants marketable skills in food service, housekeeping and training as a resident care assistant.

THE ROAD TO HEALTH AND HOME

Clients often arrive at The Boulevard with nothing but the clothes they are wearing, having recently undergone surgery, treatment, or recovery from a severe injury or illness. A typical client comes to The Boulevard from a hospital, treatment facility or short-term care unit with a referral from a social worker, medical professional, or DFSS official. Most of our clients are African-American (77%) and male (77%); have multiple diagnoses; have lived on the streets, in a car, or were otherwise completely homeless (60%); and have no income at all on arrival (50%).

Upon arrival, a client is given a snack, a shower, a fresh change of clothes, and a copy of the client handbook. While the client showers, their other clothing is laundered in our on-site laundry facility. A Case Manager is assigned to them, and they set up meetings with the LCSW, Care Coordinator, clinic staff, Housing Advocate, and peer mentor. Within the first week of their stay they have had both a medical and a psychological assessment, a medical recovery plan, a housing plan, and a good sense of the rhythm of life at The Boulevard.

During their stay, the client has access to three hot meals per day, plus snacks; a bed and a locker of their own; doctors, nurses, an LCSW, and an LPN at our on-site clinic; more than a dozen different classes on life skills, health, nutrition, and job seeking; AA and NA programming led by The Boulevard's on-site Substance Abuse Counselor; volunteer-led art, health and spiritual groups; and employment readiness programs. Their Case Manager and the Care Coordinator work with each client individually to determine their needs, and to make sure that each client has the ID, medications, treatments, and access to government benefits that they need in order to successfully become self-sufficient.

After an average stay of 90 days, clients who have successfully completed their medical recovery are housed: whether they attain their own apartment, get long-term help at a nursing home or other stable care facility, or move in with a loving family member, clients who complete our program move out of The Boulevard into stable housing.

COLLABORATIONS

The challenges faced by the homeless population in Chicago are beyond the resource ability of any single organization. As a result, The Boulevard has developed working relationships with multiple social services providers. Our most significant such relationship has long since become a formal collaboration: PCC Community Wellness provides professional medical and psychological staff and treatment at our on-site clinic. Partners who work with us to provide permanent housing include Deborah's Place, Safe Haven, Chicago House, and Housing Opportunities for Women. In addition to our collaborations with other non-profit agencies, The Boulevard works to engage hospitals and MCOs directly, allowing for smoother client transitions and decreased hospital or ER readmissions. So far, these partnerships have helped reduce healthcare costs by around 50% in a small sample of Chicago's ill and injured homeless population by helping to reduce ER visits and repeat hospitalizations.

PROGRAM GOALS FOR FISCAL YEAR 2017

Assessment-Respite Program

Goal: 85% of participants will complete their medical recovery plan.

Progress Marker 1: 90% of residents will receive a medical assessment in their first week.

Progress Marker 2: 85% of residents will complete their medication schedule.

Progress Marker 3: 85% of residents will keep their medical appointments.

Goal: 85% of participants will identify and receive assistance with psychosocial issues.

Progress Marker 1: 85% of residents will receive a case management assessment.

Progress Marker 2: 85% of residents will receive a substance abuse assessment.

Progress Marker 3: 100 AA/NA meetings will be offered to residents on-site.

Goal: 70% of participants will be placed into stable housing or treatment.

Progress Marker 1: 255 residents will develop a housing plan.

Progress Marker 2: 231 housing referrals will be provided.

Progress Marker 3: 48 sessions on life and housing skills will be offered residents.

Health and Housing Outreach Team

Goal: 90% of HHOT participants will maintain stable housing.

Progress Marker 1: 90% of participants will maintain stable housing.

Progress Marker 2: 90% of participants will maintain stable physical health.

Progress Marker 3: 75% of participants will maintain stable mental health.

Progress Marker 4: 75% of participants will maintain stable substance abuse recovery.

Alvin Baum Employment Project

Goal: 60% of Employment Project enrollees will complete the project.

Progress Marker 1: 50 residents will enroll in the employment project; and 30 enrollees will complete the project.

Progress Marker 2: 30 residents will enroll in the service learning project; and 20 residents will complete the service learning project.

Progress Marker 3: 10 job placements will be made.

EVALUATION: A monthly statistical report on these progress markers helps The Boulevard evaluate the effectiveness of our programs, as well as feedback from staff and community at weekly meetings. In addition, consumer feedback is gathered through a resident discharge questionnaire. Reports are made monthly to the CEO, and bi-monthly to the Board of Directors.

SUSTAINABILITY

The Boulevard is a unique and crucial part of the landscape of Chicago's homelessness care organizations. The Boulevard's programs are sustained by government funding and the generosity of a wide variety of foundations, corporations, individual donors and religious organizations. To insulate ourselves from changes in government funding priorities, we keep our government funding in the 50% range and constantly seek out new private funding opportunities. In addition to seeking more support from traditional funding sources, The Boulevard has developed partnerships with Northwestern Hospital, County Care and IlliniCare. We continue to work on building similar partnerships with our other referring hospitals and managed care organizations, and seeking out other ways to accommodate major shifts in government funding policies.

VOLUNTEER OPPORTUNITIES / GIFTS IN-KIND

At The Boulevard, a critical component of our work is to provide residents with regular, nutritious meals as a crucial part of their medical recovery. We are helped in this effort by a small but generous network of churches, schools and other organizations, who volunteer to provide and share a meal with our residents. Other volunteer opportunities include leading educational sessions for our residents on such topics as employment and job search, computer skills, personal communications, budgeting and daily living skills.

When our residents arrive at The Boulevard they usually have nothing but the clothes they are wearing. Through an active and generous network of volunteers we are able to supply personal hygiene products, shoes, clothing (including winter coats and gloves), and multiple other everyday needs. When residents move on to independent housing, we are able to help them set up their new homes with such necessities as furniture, dishes and towels.

MANAGEMENT CAPACITY AND LEADERSHIP

The Boulevard is guided by a Board of Directors with 18 members, chaired by Veronica Savarese Buckley, EdD; a Professor at DePaul University. Members draw upon their experience in all avenues of life to provide leadership and oversight to the organization. The Board is actively engaged in the promotion of The Boulevard: making financial and in-kind contributions, helping establish relationships with prospective funders, and increasing the agency's visibility.

The Boulevard's CEO, Jennifer Nelson-Seals, MSHRM, has been with the organization since just prior to its opening as Interfaith House in 1994. Under her leadership, The Boulevard has expanded its programs, increased and diversified its funding base, become a more diverse and more sustainable organization, and has helped shape national respite care standards.

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