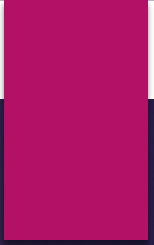


Case Study: City of Elgin's Unsheltered Pilot Project





We Moved With Them: A Story of Crisis, Shelter, and Support



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AID MISSION STATEMENT

To empower people
with physical,
developmental,
intellectual and
mental health
challenges to enjoy
lives of dignity and
purpose

AID STREET OUTREACH:

The AID Street Outreach Program supports individuals experiencing homelessness by encouraging engagement with appropriate mental health services. The goal of this program is to reduce inappropriate use of emergency services and support individuals with mental health needs.

AID SUPPORTIVE LIVING PROGRAM:

The AID Behavioral Health Supported Living Program is designed to assist individuals in the community improve their ability to live successfully in their own home or apartment. The program works with adults to increase access to the community.

THE BEGINNING

- For the last 4 years- Street outreach has been servicing the unsheltered population in Elgin using a street-based harm reduction approach.
- FY25- We were servicing 130-150 unique participants
- Our mission: To engage with folks at whatever capacity they were comfortable
- Services included: completing necessary assessments, providing advocacy in legal scenarios, connecting to physical and mental health providers, weekly food deliveries into the encampment, frequent well-being checks on encampment residents, installing and monitoring Narcan boxes in encampments, weekly pop-ups to provide warm meals, supplies and at-risk HIV testing



Setting the Stage: Before the Fire

- Large street-based unsheltered homeless population
- Tent city “The Original”, had been established for over 30 years
- Tent city fluctuated from 30-60 residents
- Lack of affordable housing
- Local shelters hindered by capacity requirements and staff retention

The Beginning of Change:

- Trespassing infractions increased
- Restricting access to common sleeping locations- “The islands, The DUNGEON”
 - Increase of bans in public spaces- decreasing opportunity for temporary shelter from all elements
- The warming center shelter increased its operational abilities-began opening 7 days a week





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THE FIRE



- DEC 6th, 2024- fire broke out in the encampment
- Extremely fast news response- triggering an outpouring of support from the community (POSITIVE)
- Triggered a lot of attention on tent city and its residents (Negative)
- Shortly after the fires, City of Elgin informed us of the possible relocation of tent city residents

PREPARING FOR THE MOVE

- The following two weeks were rapidly changing
- Comforting clients who lost their homes and belongings
 - Discussing the possible relocation with clients
 - Multiple stakeholder and council meetings
- Our primary mission was supporting clients through whatever change was to come.....

Preparing For The Move

- We were informed about the date and plan for relocation from the City of Elgin.
- **ORIGINAL PLAN:** City of Elgin and Elgin Police Department taking the lead- locating residents and assisting them with the move.
- **DAY OF ACTION PLAN:** We provided support in assisting COE and EPD in locating and identifying Tent City residents.

THE MOVE

ORIGINAL PLAN:

- Clients were given a letter stating the day and time of their move- we gave this out at our outreach pop-up
- Clients would meet with EPD at the Command Center bus to obtain two bins to move their belongings.
- AID Street Outreach team and other community partners would be at the Lexington Hotel to greet and intake residents.

DAY OF ACTION PLAN:

CLIENTS STRUGGLED WITH SEPARTING FROM THEIR HOME AND BELONGINGS

- AID Outreach was called in to assist the PD in moving clients out and used Trauma-Informed Care to support the clients while moving their belongings and transitioning to the hotel.
- OVER A 2 DAY PERIOD- 46 residents were located to the Lexington Hotel.



BARRIERS IN SERVICE PLANNING

- Multiple stakeholder meetings determined that the level of case management required by the residents would be difficult to meet.
- **Why?** – Staff capacity within agencies, service/intake requirements, discomfort with community based services.

THE COLLABORATION

- Deidra Trout wrote a grant with IDHS to fill the gap for services that was becoming apparent. The grant for the Unsheltered Pilot, was approved in January 2025. The grant would take effect in March 2025, allowing AID to co-partner with the City of Elgin to provide the social services for residents at the Lexington Hotel.
- Services we would be able to provide would be: On-site community mental health services. As stated in the grant proposal:
- AID has experience delivering supportive services as supported by IDHS funding (Advocacy, Case Management, Counseling, Employment Services, Mental Health Services, Outreach, Transportation, etc.). The City of Elgin Unsheltered Pilot Project will expand these services in the City of Elgin to assist with integrating residents of Elgin who are experiencing unsheltered homelessness that were residing in Elgin known as “Tent City.” These individuals will need ongoing support through IDHS Emergency and Transitional Housing (ETH) and Supportive Housing Program (SHP) type services to access transitional housing and to fulfill a variety of needs while moving towards permanent supportive housing to end their homelessness. Case management for this project will encompass inclusive service provision for mental health, outreach, and trauma informed care for participants.
- Jenna Strohmenger transferred into the management role of the Unsheltered Pilot Project to assist in implementing and managing the Unsheltered pilot project at the Lexington hotel.
- The next 3 weeks Jenna worked with AID Outpatient staff to conduct warm-hand offs with residents to members of the AID team to begin intake for the program.

IMPLEMENTING THE HOUSING FIRST MODEL

- Approach to ending homelessness that prioritizes providing permanent housing to people experiencing homelessness without requiring them to meet conditions like sobriety, employment, or mental health treatment first.
- The core idea is that stable housing is a foundation that makes it easier for people to address other challenges in their lives. Once housed, individuals are offered voluntary support services (like counseling, addiction treatment, or job training), but participation in those services is not required to keep the housing.



INITIAL CHAOS AT THE LEXINGTON

- ▶ Clients felt trapped
- ▶ Confusion about meals due to new location
 - ▶ Clients didn't know who to call
- ▶ The program needed time to be built- staff needed to be hired for these specific grant positions
 - ▶ Initial culture shock- increased behaviors
- ▶ Push back from local residents and businesses
 - ▶ Client mistrust
- ▶ 3 clients were exited before services began

RESPONDING TO INTIAL CHAOS

- ▶ Food pantry set-up on site and serviced by community volunteers
 - ▶ Local churches delivered dinners
- ▶ Clients were given contact information for Program Manager, Director and AID Crisis Line
- ▶ Partnered with other community agencies to obtain basic hygiene and household care packs
- ▶ Bus cards were provided by the City of Elgin to increase independence



IMPLEMENTING THE SUPPORTIVE LIVING PROGRAM

- ▶ Completed intakes for on-site Community Mental Health services
 - ▶ Two on-site case managers were onboarded
- ▶ AID's community case manager began weekly drop-in office hours
 - ▶ Each client was connected to a primary case manager
- ▶ Clients were referred to and connected with AID therapists, psychiatrists and employment services upon request of need
 - ▶ Implemented a monthly laundry card distribution
- ▶ Created a drop-down on-site office space which included a pantry to provide hygiene, cleaning and household items

SUPPORTIVE LIVING DAY TO DAY OPERATIONS:

- **Clients meet with their case manager weekly**
- **Case management responsibilities with clients include:**
 - **Assessment and planning-** identify needs, strengths, goals- develop individualized treatment planning, coordinate care with interdisciplinary teams
 - **Client engagement and support-** maintain therapeutic relationships, provide psychoeducation on mental health, medication and coping skills
 - **Service Coordination-** link to internal and external resources, coordinate with providers and community agencies, ensure continuity of care across services and settings, assist with obtaining and maintaining benefits, arrange/accompany transportation
 - **Communication and Advocacy-** advocate for client's needs with other agencies, facilitate communication between providers, maintain confidentiality
 - **Documentation and Compliance-** document case notes, assessments and service plans, maintain compliance with agency, state and federal regulations, ensure client files are up to date and accurate
 - **Skill building and Coaching-** teach independent living skills, assist with maintaining room cleanliness, coach in navigating systems, support in building coping skills and emotional regulation techniques, assist with vocational or educational planning
 - **Crisis and Risk-Management-** Develop and review safety or crisis plans, respond to psychiatric crises, conduct risk-assessments, coordinate emergency services or inpatient referrals, complete outpatient or psych referrals when requested.

CURRENT BARRIERS FACED

- Continued grants and funding
- General adjustment to independent living
 - Resistance to services
- Needing a higher level of care
- Conflicts in addressing safety incidents vs. behavioral incidents
 - Lack of Affordable Housing
 - Stigma/ community pushback

THINGS TO CONSIDER:

- Lean on Outreach teams
- Don't assume this is an improvement for everybody
- Respect people's autonomy
- Have understanding and empathy for growing pains
- Discuss crisis plans and plan for consistent support



What's Replicable?

- **Partnership with City Government**
- **Hotel-to-housing bridge model-** offers immediate, private shelter along with on-site support services (like case management, healthcare, or housing navigation) to help residents stabilize and transition into long-term housing.
- **Integrating case manager + behavioral health**

Clients moved to permanent housing: 1

Clients obtained new ID: 8

Clients received new SSI/SSDI benefits: 3

Clients on a housing list: 12

Clients obtained new DHS benefits: 8

Clients Employed: 5

Clients compliant with legal/court requirements: 5

Clients receiving new therapy services: 5

Clients receiving new psych services: 4

Clients that obtained new medical care: 6

Clients obtained dental care: 1

Clients obtained vision care: 2

PROGRAM SUCCESSES

2/2025- 9/2025

Current clients : 41

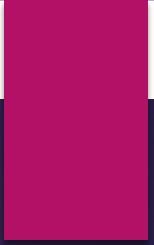
Thank you to our Community Partners:

- City of Elgin
- Food for Greater Elgin
- PADS
- Ecker Center
- Elgin Cooperative Ministry
- Elgin Police Department
- One Collective
- Community Volunteers: Greg Schiller, Carissa Ross, Lori Wynman
- Bark of an Angel



**FOOD FOR
GREATER
ELGIN**





**ALL PHOTOS & VIDEOS
SHARED WITH
ENTHUSIASTIC
PERMISSION.**

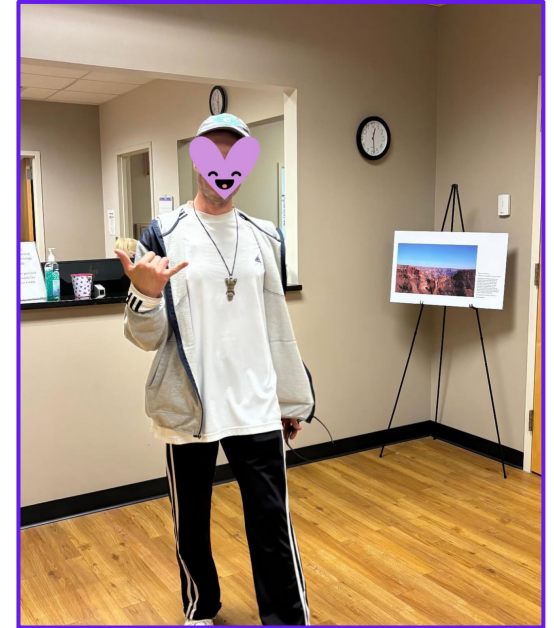
IN LOVING MEMORY OF:

Ivory Henderson

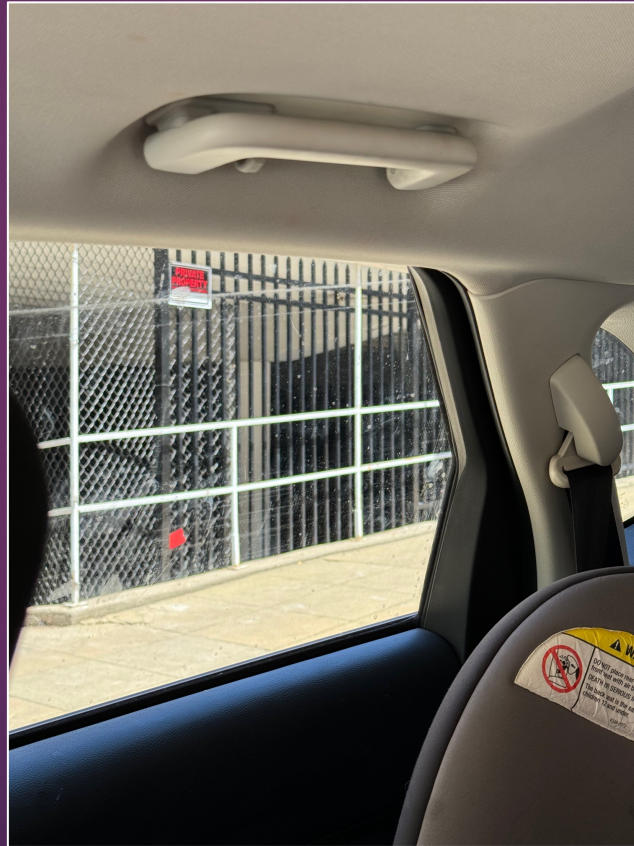
Christopher Lazenby

Rodolfo Canales

Mario Barrientos

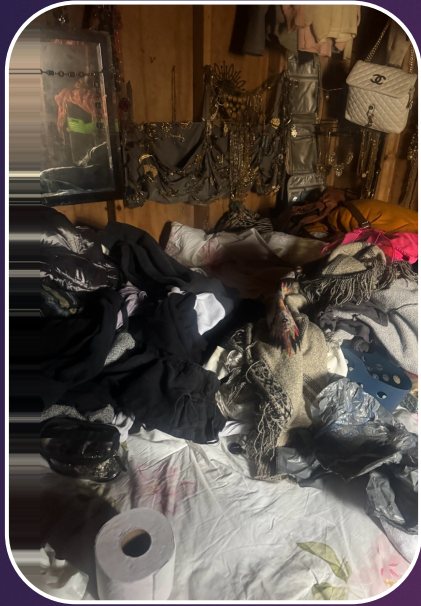




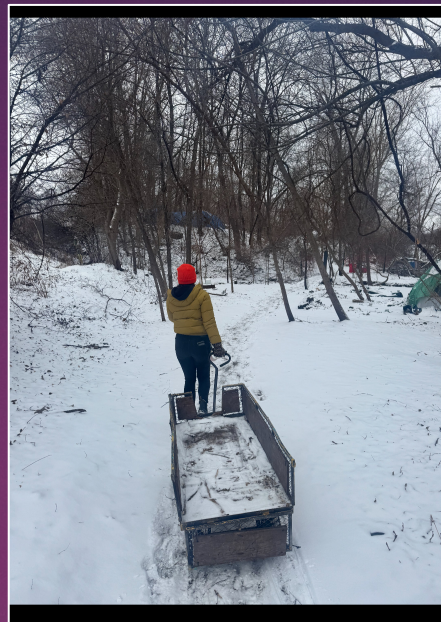
























Moving Day





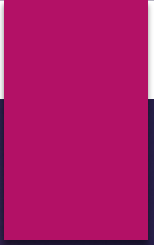


Somebody signed
their lease today!



Haircuts !





THANK YOU !