This public notice serves to inform citizens of the City of Chicago regarding an amendment to the City’s 2010-2014 Five-Year Consolidated Plan, as well as, the 2012 Action Plan. The Five-Year Consolidated Plan (the Plan) set forth prioritized needs and goals to benefit low- and moderate-income persons in accordance with the U. S. Department of Housing and Urban Development (HUD) goals of: decent housing, a suitable living environment, expanded economic opportunities, availability, sustainability and affordability. The Annual Action Plan is a one-year implementation of the Five-Year Consolidated Plan. The City proposes to amend the 2012 Annual Action Plan by revising proposed 2012 outcomes and by updating the document to meet new requirements in the Consolidated Plan Regulation as amended by the Emergency Solutions Grant (ESG) Interim Rule. HUD regulations mandate that the public be given notice regarding amendments and an opportunity to comment. The City is mandated to consider any comments or views of citizens regarding proposed amendments. City department’s whose budget is funded in part with Community Development Block Grant, HOME Investment Partnership, Emergency Solutions Grant, and Housing Opportunities for Persons with AIDS funds to provide activities and programs propose to reduce outcomes as follows:

<table>
<thead>
<tr>
<th>Activity/Program</th>
<th>Original 5-Year Outcomes</th>
<th>Revised 5-Year Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clearance and Demolition</td>
<td>15,000</td>
<td>10,600</td>
</tr>
<tr>
<td>Board-up</td>
<td>25,000</td>
<td>17,400</td>
</tr>
<tr>
<td>Handicapped Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent Living</td>
<td>2,020</td>
<td>1,558</td>
</tr>
<tr>
<td>DFSS, Family Violence Prevention</td>
<td>41,750</td>
<td>37,050</td>
</tr>
<tr>
<td>DFSS, Economic Stabilization</td>
<td>2,800</td>
<td>2,418</td>
</tr>
<tr>
<td>Youth Services</td>
<td>95,000</td>
<td>70,400</td>
</tr>
<tr>
<td>Employment/Training Services</td>
<td>7,500</td>
<td>7,000</td>
</tr>
<tr>
<td>DPH, Family Violence Prevention</td>
<td>7,500</td>
<td>7,245</td>
</tr>
<tr>
<td>HIV/AIDS Housing Program</td>
<td>225</td>
<td>222</td>
</tr>
<tr>
<td>Housing Counseling Services</td>
<td>154,000</td>
<td>122,600</td>
</tr>
<tr>
<td>Home Ownership Centers</td>
<td>120,000</td>
<td>48,000</td>
</tr>
<tr>
<td>Home Ownership CC</td>
<td>20,000</td>
<td>17,000</td>
</tr>
<tr>
<td>Emergency Food</td>
<td>75,000</td>
<td>70,800</td>
</tr>
<tr>
<td>Human Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homeless Services</td>
<td>32,500</td>
<td>29,426</td>
</tr>
<tr>
<td>Multi-Unit Heating Repair</td>
<td>4,000</td>
<td>3,000</td>
</tr>
<tr>
<td>Emergency Housing Assistance Program</td>
<td>4,000</td>
<td>3,790</td>
</tr>
<tr>
<td>Neighborhood Lending Program</td>
<td>2,900</td>
<td>2,125</td>
</tr>
<tr>
<td>Multi-Unit TBI</td>
<td>4,500</td>
<td>3,600</td>
</tr>
<tr>
<td>Façade Rebate</td>
<td>150</td>
<td>70</td>
</tr>
<tr>
<td>Homeless Prevention</td>
<td>3,500</td>
<td>3,110</td>
</tr>
<tr>
<td>Multi-Family Loan Program</td>
<td>4,875</td>
<td>3,475</td>
</tr>
<tr>
<td>Homebuyers Assistance</td>
<td>1,450</td>
<td>940</td>
</tr>
</tbody>
</table>
Community Engaged Care replaces Uptown Neighborhood Health Center. The Chicago Department of Public Health has contracted with Federally Qualified Health Centers (FQHC) to provide primary health care services at seven different neighborhood locations, including Uptown/Rogers Park, West Town, Lower West, South Lawndale, South Chicago, Roseland and Englewood under the program heading of Community Engaged Care. FQHC’s are community-based and patient directed organizations that serve vulnerable populations with limited access to health care. They are located in medically underserved areas; governed by a board comprised of a majority of health center patients who represent the population served; provide comprehensive primary health care services, as well as, supportive services (e.g., transportation, translation) that promote access to health care; and provide services to all with fees adjusted based on ability to pay.

For 2013, FQHC’s will provide 295 patient’s mammography screenings and 2,665 children dental sealant checks.

The City proposes to amend the 2012 Annual Action Plan as follows:

<table>
<thead>
<tr>
<th>Activity/Program</th>
<th>Proposed 2012 Outcome</th>
<th>Revised 2012 Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clearance and Demolition</td>
<td>3,000</td>
<td>800</td>
</tr>
<tr>
<td>Board-up</td>
<td>5,000</td>
<td>1,200</td>
</tr>
<tr>
<td>Handicapped Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent Living</td>
<td>368</td>
<td>250</td>
</tr>
<tr>
<td>Senior Services, ICASA</td>
<td>9,218</td>
<td>1,206</td>
</tr>
<tr>
<td>Youth Services</td>
<td>17,800</td>
<td>6,800</td>
</tr>
<tr>
<td>HIV/AIDS Housing Program</td>
<td>45</td>
<td>42</td>
</tr>
<tr>
<td>Home Ownership Counseling Services</td>
<td>6,500</td>
<td>0</td>
</tr>
<tr>
<td>Developer Services</td>
<td>96</td>
<td>TBD</td>
</tr>
<tr>
<td>Multi-Unit Heating Repair</td>
<td>800</td>
<td>600</td>
</tr>
<tr>
<td>Emergency Housing Assistance Program</td>
<td>890</td>
<td>650</td>
</tr>
<tr>
<td>Neighborhood Lending Program</td>
<td>325</td>
<td>320</td>
</tr>
<tr>
<td>Multi-Family Loan Program</td>
<td>975</td>
<td>550</td>
</tr>
<tr>
<td>Community Housing Dev Orgs</td>
<td>17</td>
<td>7</td>
</tr>
</tbody>
</table>

Additionally, the City of Chicago has prepared a substantial amendment to update the 2012 Annual Action Plan to meet new requirements in the Consolidated Plan Regulation as amended by the Emergency Solutions Grant (ESG) Interim Rule. The substantial amendment outlines the City of Chicago’s homeless and other special needs activities. The substantial amendment language follows:
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

The City of Chicago has prepared this substantial amendment to update the 2012 Action Plan to meet new requirements in the Consolidated Plan Regulation as amended by the Emergency Solutions Grant (ESG) Interim Rule. The substantial amendment outlines the City of Chicago’s homeless and other special needs activities.

1. Summary of Consultation Process
The City of Chicago developed this substantial amendment in consultation with the Chicago Alliance to End Homelessness, the lead agency for Chicago’s Continuum of Care.

2. Summary of Citizen Participation Process
The City of Chicago believes that citizen participation is central to the success of community development. To that end, the City makes this substantial amendment available for public review for a period of 30 days beginning October 16, 2012 through November 15, 2012 at the City’s website www.cityofchicago.org/city/en/depts/fss.html. Public comments on the proposed amendment will be accepted via mail and e-mail for a period of 30 days beginning October 16, 2012 through November 15, 2012. The City published notices of this public comment period during the week of October 16, 2012 in three local newspapers, including one Spanish language newspaper; sent e-mail notices via the Chicago Alliance to End Homelessness to community-based agencies, current and formerly homeless consumers, and other stakeholders. Finally, this substantial amendment was included on the agenda of a City of Chicago public hearing on Tuesday, October 16, 2012.

3. Proposed homeless and other special needs activities
The City and its partners, through the Chicago Planning Council to End Homelessness, have made significant progress in implementing Chicago’s original 2003 Plan to End Homelessness (“the Plan”). The three core tenets of the Plan are to: 1) prevent homelessness whenever possible; 2) rapidly re-house people when homelessness cannot be prevented; and 3) provide wraparound services that promote housing stability and self-sufficiency.

The Plan called for a transition of the homeless services system from a shelter-based system, focused on temporary fixes, to a housing-based system emphasizing long-term living solutions for the homeless on the street and in overnight shelters. To that end, Chicago significantly increased interim/transitional and permanent housing resources and reduced the number of temporary shelter beds.

In 2012, stakeholders in Chicago’s Continuum of Care developed an updated set of strategies to prevent and end homelessness. Chicago’s “Plan 2.0” is a broad-ranging, seven-year action plan (2013-2019) that reaffirms and builds on the core strategies outlined in the first plan – prevention, housing first and wraparound Services – and identifies seven new strategies for improving and coordinating access to housing and services:

1) **The Crisis Response System**: Create an effective crisis response system that prevents homelessness whenever possible and rapidly returns people who experience homelessness to stable housing.
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

2) **Access to Stable and Affordable Housing**: Create and maintain stable and affordable housing for households who are experiencing or at risk of homelessness.

3) **Youth Homelessness**: Create a comprehensive, developmentally appropriate menu of services for youth who experience homelessness in order to prevent homeless youth from becoming the next generation of homeless adults.

4) **Employment**: Increase meaningful and sustainable employment opportunities for people experiencing or most at risk of homelessness.

5) **Advocacy and Civic Engagement**: Engage all of Chicago in a robust plan that creates a path to securing a home for everyone in our community.

6) **Cross-Systems Integration**: Work across public and private systems of care to ensure ending homelessness is a shared priority.

7) **Capacity Building**: Ensure a strong homeless assistance system capable of implementing Plan 2.0 goals and HEARTH Act performance standards.

Several funding streams support the Plan at the City level (CDBG, HUD Emergency Shelter/Emergency Solutions Grant Program, Community Services Block Grant, Illinois Department of Human Services’ Emergency and Transitional Housing Program, and local funding).

**Start and end dates- all activities**
January 1, 2012 – December 31, 2012

a) **One-year goals and action steps for reducing and ending homelessness**

**Outreach and assessment with homeless persons (especially unsheltered)**

**Outreach and Engagement Programs**
The Department of Family and Support Services utilizes CDBG funds for targeted outreach and engagement. These services include assessment of individuals, including youth, who do not typically access either shelter or other homeless services. Providers of this program model utilize the Vulnerability Index (a standardized tool for identifying and prioritizing the street homeless population for housing according to the fragility of their health) and to receive referrals through Chicago’s Central Referral System (CRS) for permanent supportive housing. CRS is a database of highly vulnerable individuals and families coming from the streets or shelters which serves as a central client referral source for housing providers. Outreach and Engagement programs assist vulnerable households in applying for resources through CRS by helping them respond to interviews and collect documentation needed to achieve permanent housing placement as fast as possible.

The program has three subcategories: 1) Daytime Supportive Service Centers which are drop-in centers where services include physical, psychological and housing needs assessments; Mobile Outreach Engagement which focuses on street-based outreach; and Airport Outreach Engagement which is targeted outreach with homeless individuals identified at Chicago’s airports and on mass transit systems.
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

**Planned Outcomes 2012**  
Outreach and Engagement Services: 1,835 individuals served

Addressing the emergency shelter and transitional housing needs of homeless persons

In coordination with the Chicago Continuum of Care, DFSS is the primary funder of emergency and interim housing for homeless individuals and families in Chicago. Both types of temporary housing options focus on assessing the service needs of residents and either making appropriate referrals to other providers or offering supportive services at the residential program. Additionally, DFSS funds supportive services that move persons who are currently homeless toward housing stability and self-sufficiency. Following are activities that address the shelter and transitional housing needs of homeless households:

**Overnight Shelter**  
Adult: This program model provides shelter to single men and women aged 18 and over on a nightly basis for up to twelve consecutive hours. Adult Overnight Shelter may be appropriate for persons who do not want to participate in case management or the more intensive services and goals associated with interim housing. However, Adult Overnight Shelter programs are expected to engage clients in accessing supportive services and to assess clients for rapid re-housing options.

Youth: This program model provides age-appropriate shelter to single male and female youth ages 18 to 25, on a nightly basis for up to twelve consecutive hours. Youth Overnight Shelter programs are also expected to engage clients in accessing supportive services and to assess clients for rapid re-housing options.

**Planned Outcomes 2012**  
Overnight Shelter Programs: 4,336 individuals served

**Interim Housing**  
Adopting the “housing first” model, Interim Housing focuses on rapidly re-housing those who are homeless while working to progressively reduce the amount of time people spend homeless. Permanent housing placements are emphasized and must be supplemented with services that focus on client stabilization, assessment, and referrals to community resources.

**Planned Outcomes 2012**  
Interim Housing Programs: 11,777 individuals served

**Community Based Case Management**  
This program model assists homeless individuals and families in accessing mainstream services and benefits in order to help them achieve housing stability. Community Based Case
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

Management should expedite the movement of clients from homelessness to permanent housing, by moving clients toward self-sufficiency through linkages to health care, substance use services, education, financial literacy programs, housing assistance programs, and job training and placement. Services may be provided at shelter and interim housing facilities or day-time supportive service programs.

**Planned Outcomes 2012**
Community Based Case Management Services: 1,486 individuals served

*Specialized Services*
Specialized Services are designed to address a client’s specific barriers to achieving housing stability that are not immediately addressed by existing community supports and are provided by experts in a particular field of knowledge. The program can be specialized to focus on a particular homeless population (e.g. the mentally ill, those with a substance use disorder, those who require specialized employment, etc.). Specialized Services funded by DFSS include Employment Programs, Substance Use Disorder and Mental Health Services.

**Planned Outcomes 2012**
Specialized Services: 309 individuals served

*Homeless Shelter Food Supply*
As part of its emergency food program, DFSS provides fresh fruits and vegetables to shelters throughout the city to feed people who are homeless. Approximately 60 shelters located within the city participate.

**Planned Outcomes 2012**
Homeless Shelter Food Supply: 60 shelters served

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families and unaccompanied youth) make the transition to permanent housing independent living and shortening the length of time individuals and families experience homelessness

Building on successful coordination of homeless prevention resources with its Homeless Prevention Call Center (HPCC), Chicago has taken steps towards expanding coordinated access and improving access to permanent housing and independent living. DFSS-funded outreach, engagement and shelter providers utilize the Housing Options Survey Tool (HOST), a web-based tool that helps providers and consumers identify appropriate housing opportunities. In late 2011, HOST was enhanced to centralize the application process for Permanent Housing with Short-term Support programs. Under the oversight of the Chicago Planning Council on Homelessness, Chicago will implement a Central Referral System (CRS) for permanent supportive housing in 2012. Individuals and families will be assessed utilizing the Vulnerability Index and a Family Vulnerability index, ensuring that the most vulnerable households are prioritized for permanent housing units.
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

Reducing the amount of time people experience homelessness is a major priority for the City of Chicago and the Chicago Continuum of Care. The HEARTH Act restructured the HUD Emergency Shelter Grant into the new Emergency Solutions Grant (ESG), which includes all of the provisions of the former Emergency Shelter Grant and adds several provisions that were enacted through the Homeless Prevention and Rapid Re-housing Program (HPRP) which was part of the American Recovery and Reinvestment Act. HPRP provisions included coordination and consultation with local Continuums of Care, street outreach as an essential service, and housing relocation and stabilization services.

In 2012, the City of Chicago created an ESG Advisory Committee in partnership with the Chicago Alliance to End Homelessness, the lead agency for Chicago’s Continuum of Care, in developing the City’s plan for ESG rapid re-housing and prevention priorities. This committee assisted the City in determining how to allocate ESG funds for eligible activities and developing the performance standards for activities funded under ESG by jointly reviewing an analysis of data regarding Chicago’s implementation of the Homelessness Prevention and Rapid Re-housing Program (HPRP) conducted by the Corporation for Supportive Housing. The City plans to issue a RFP in the 4th quarter of 2012 to identify partners to implement rapid re-housing activities.

In 2013, Chicago will implement rapid re-housing with ESG funds for tenant-based rental assistance, and housing relocation and stabilization services. The City will use its Emergency Solutions Grant funding to help support the Homeless Prevention Call Center (HPCC) that currently acts as a centralized eligibility and referral system for rental assistance. The support will enable the HPCC to be the primary point of entry that conducts initial evaluations and referrals to available prevention assistance from local, state, and federal resources. Tenant-based rental assistance will be used to help households who have already fallen into homelessness be re-housed as quickly as possible by providing a security deposit and/or short-term rent assistance until sufficient income or a permanent tenant-based subsidy is in place. And finally, housing relocation and stabilization services will include recruiting landlords, matching households with appropriate rental units and community areas, and inspecting rental units per HUD program standards. In 2013, Chicago plans to serve 219 households with ESG rapid re-housing assistance.

Facilitating access for homeless individuals and families to affordable housing units and preventing individuals and families who were recently homeless from becoming homeless again

To effectively end homelessness, the Plan calls for Chicago to significantly increase the amount of permanent housing stock and rapid re-housing assistance as well as to fund supportive services that promote housing stability. The City is employing three strategies to increase the amount of permanent housing available to people who are homeless:

1) Access private market units made affordable with subsidies;
2) Access private market units that are affordable to low-income renters;
3) Develop new units through construction and rehab.
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

The Chicago Low-Income Housing Trust Fund, the largest locally funded rental assistance program in the nation, has committed $8.1 million annually in rental assistance to prevent homelessness for more than 1,300 families and individuals. Of that total, nearly 600 units are targeted towards long-term homeless individuals and families.

DFSS offers several programs for homeless individuals and families seeking a permanent and stable housing situation. Permanent supportive housing for individuals and families most often takes the form of rental subsidies for existing units. DFSS uses local funding sources to provide homeless services that include those funded by CDBG as well as others endorsed by the Plan to End Homelessness. Supported activities include:

*Permanent Supportive Housing Support Services*

These services are designed to help clients maintain residential stability in permanent supportive housing. Permanent Supportive Housing programs provide long-term subsidized housing for individuals and families who are homeless. Clients may have serious and persistent disabilities such as mental illness, substance use disorders, or HIV/AIDS, which often contribute to chronic homelessness.

**Planned Outcomes 2012**

Individuals Served: 1,228

*Shelter Plus Care*

DFSS, in collaboration with local providers, also offers rental subsidies paired with a range of supportive services to disabled homeless individuals or families. Services include case management, employment assistance, and counseling and substance use services.

**Planned Outcomes 2012**

Shelter Plus Care Rental Subsidies: 2,300 individuals served

The following three service models are provided with funding from sources other than HUD:

*Permanent Housing with Short-Term Supports*

This program model targets households that need short to medium term assistance (up to 24 months) with housing and supportive services to move them towards a goal of assuming. Homeless individuals and families are housed in scattered housing, provided rental assistance and supportive services with the goal of assuming the lease at market rate after services transition out.

**Planned Outcomes 2012**

Permanent Housing with Short-Term Supports: 175 individuals served
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

Safe Havens
This program is an open-stay, on-demand, and service-enriched housing program for persons with mental illness or dual disorders (mental illness and substance use disorder) who are difficult to engage in services. Safe Havens are safe, non-intrusive living environments in which skilled staff members work to engage persons in housing and needed services. In Chicago, Safe Haven beds are considered permanent housing.

Planned Outcomes 2012
Safe Havens: 33 individuals served

Age-Appropriate Stable Housing for Unaccompanied Youth
This program model is designed to serve homeless youth ages 18 through 25 that are not wards of the state. Services may be delivered in a shared living arrangement or in clustered apartments with on-site supportive services and community-based linkages and include 24-hour access to staff, age-appropriate services and crisis intervention. In addition, services will focus on attaining independent living skills.

Planned Outcomes 2012
Age-Appropriate Stable Housing: 108 individuals served

Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are (A) Being discharged from publicly funded institutions and systems of care, or (B) Receiving assistance from public and private agencies that address housing, health, social services, employment, education, or youth needs.

(A) Chicago’s Continuum of Care, in coordination with DFSS, emphasizes systems integration efforts that focus on appropriate discharge planning for special populations. The Discharge Planning Sub-committee of the Chicago Alliance to End Homeless is charged with addressing coordination between child-welfare, corrections, homeless providers and other relevant entities. Additionally, the Chicago Department of Public Health convenes a task group on mental health, homelessness and criminal justice issues to improve systems coordination in these areas.

(B) With a combination of CDBG, local and state resources, DFSS addresses a range of human services needs for low-income individuals and families in Chicago communities through coordinated homeless prevention resources and six DFSS Community Services Centers. These services contribute to homelessness prevention for low-income households.

Homeless Prevention
The City of Chicago, through local funds in 2012, supports the Homelessness Prevention Call Center (HPCC) to conduct initial evaluations and referrals to available prevention assistance and delegate agencies to provide homeless prevention supportive services. The HPCC is Chicago's prevention infrastructure to assess and refer for public and private resources, including the City of Chicago’s Rental Assistance Program, which provides short-term financial assistance to low-income individuals at risk of eviction and homelessness and which is funded through ESG and
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

administered by DFSS’s six Community Service Centers. The HPCC will be a primary point of entry for ESG homelessness prevention resources, and also will be a way that people seeking eligibility and referral for rapid rehousing assistance can complete initial evaluation. HPCC fields a high volume of calls each year, nearly 70,000. Each call receives a screening and evaluation for eligibility and all information is entered into HMIS. HPCC makes electronic referrals through HMIS for continuous case management.

DFSS funds partner agencies to provide homeless prevention supportive services targeted to individuals or families that are at immediate risk of homelessness. Services may include, but are not limited to provision of financial assistance, provision of legal representation for tenants facing evictions, and provision of housing stabilization or relocation assistance.

Planned Outcomes 2012
Individuals served with ESG rental assistance: 900
Individuals served with homeless prevention supportive services: 410

Community Service Centers
Direct services are offered through DFSS Community Service Centers where case management, counseling for victims of domestic violence, emergency food, transportation, and emergency rental and utility assistance are provided. Referrals are also available for housing, employment, education, child care, and health services. The Community Service Centers also serve as Warming and Cooling Centers during periods of extreme weather conditions. At the Centers, DFSS staff works with clients to address their needs (immediate, short-term, and long-term) to achieve self-sufficiency.

Direct services and programs, including benefits eligibility screening, are co-located at all six centers. Workforce services are co-located at the Garfield, King and North Area Community Service Centers. The North Area center also houses a Veterans Employment Assistance Center that helps veterans access a variety of benefits programs.

Emergency Food Boxes
The City, through DFSS, provides Emergency Food Services to alleviate hunger among low-income people through two main programs: Emergency Food Boxes and Homeless Shelter Food Supply. DFSS distributes emergency food boxes to low-income individuals and families throughout the City of Chicago. Emergency food boxes are composed of non-perishable food items and are designed to last an individual or a family of four up to three days. Distribution is administered by DFSS’ Emergency Services team and takes place at six Community Service Centers and twenty outstations located throughout the City.

Planned Outcome 2012
Emergency Food Boxes: 12,900 individuals served

b) The jurisdiction must specify the activities that it plans to undertake during the next year to address the housing and supportive service needs identified in accordance with 91.215(e) (strategic plan) with respect to persons who are not homeless but have other special
The City of Chicago Substantial Amendment to the 2012 Annual Action Plan

needs (elderly, frail elderly, persons with disabilities, person with HIV/AIDS, persons with alcohol or other substance abuse problems).

**Intensive Case Advocacy, Support Assistance and Home Delivered Meals to Seniors**

DFSS uses CDBG funding to address the needs of seniors most at-risk through intensive support and meal delivery, which in turn assists seniors in remaining in the least restrictive housing environment. Intensive Case Advocacy and Support provides one-on-one assistance from local community organizations to at-risk seniors. This relationship allows seniors to remain independent, in the community, and able to take control of their current situations. Staff assists seniors in identifying and applying for public benefits and programs which will stabilize the at-risk senior’s situation. Staff also assists in improving seniors’ living situation through advocacy and through identifying resources to improve the seniors’ quality of life.

The Home-Delivered Meals Program provides microwave-ready frozen or hot meals to homebound seniors who are unable to prepare meals for themselves and who have no other means of acquiring nutritious meals.

**Housing and Supportive Service Needs of Individuals Impacted by HIV/AIDS**

The Chicago Department of Public Health utilizes a range of funding to support medical case management, housing assistance, homelessness prevention assistance and mental health and substance use services for individuals impacted by HIV/AIDS with HOPWA and other federal, state and local funds.

Comments from the public will be accepted at the community development public hearing Tuesday, October 16, 2012 at the Chicago Cultural Center, Preston Bradley Hall, 78 East Washington Street beginning 6:00 p.m.

Written comments on these proposed amendments will be accepted for a period of 30 days beginning October 16, 2012 through November 15, 2012.

Address correspondence to the Office of Budget and Management, City Hall, Room 604, 121 North LaSalle Street, Chicago, Illinois 60602. Attention: Darlene Watkins

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