

Application Summary:

Process: General Grants December 2011 Board Meeting

Health Access for Formerly Homeless Women

Contact: Elizabeth Dunn - edunn@sarahs-circle.org

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Organization: Sarah's Circle - kragnar@sarahs-circle.org

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Form: General Grant App v. 4

Q1: Project Name*

Name of Project

[100 characters allowed]

Answer(s):

Health Access for Formerly Homeless Women

Q2: Project Description*

Please summarize the purpose of your request in one to three sentences.

[350 characters allowed]

Answer(s):

Sarah's Circle requests funding for our Health Access for Formerly Homeless Women program, which will provide formerly homeless women who have recently been placed in permanent housing by Sarah's Circle with physical and mental health services to improve their health and housing retention.

Q3: Amount Requested*

Amount Requested

Answer(s):

25,000

Q4: Population Served*

Population served, by age group

Answer(s):

Adults

Q5: Homeless*

Are the majority of the people served by the program homeless or formerly homeless?

Answer(s):

Yes, formerly

Q6: Setting*

Setting

Answer(s):

Home-and Community Based Services

Q7: Community Settings

If the program is other than home-based, please indicate the setting.

Answer(s):

Other

Q8: Type of Support*

Type of Support

Answer(s):

Program/Project Support

Q9: Internal Grant Number

Internal Grant Number

[10 characters allowed]

Answer(s):

12_34

Q10: Program Type*

Program Type

Answer(s):

Mental Health Care

Q11: Chicago Geographic Area*

Please select the geographic area that your project serves. If your program is in the city of Chicago please refer to the map here to see how VNA defines the North, South and West sides. If the program is in the suburbs or collar counties please select that and then choose the county it's in from the list that pops up.

Answer(s):

Chicago North

Q12: Geographic Area Continued

If your project will serve more than one county please select the other county from the list below.

Answer(s):

Q13: 1. Percent Female (Note: The total of question 1-3 should equal 100%)*

Please indicate the percentage of the population served by your organization that is female.

[15 characters allowed]

Answer(s):

99%

Q14: 2. Percent Male*

Please indicate the percentage of the population served by your organization that is male.

[3 characters allowed]

Answer(s):

0

Q15: 3. Percent Transgender*

Please indicate the percentage of the population served by your organization that is transgender.

[3 characters allowed]

Answer(s):

1%

Q16: 1. Percent African/American (Note: The total of question 1-6 should equal 100%)*

Please indicate the percentage of the population served by your organization that is African/American.

[4 characters allowed]

Answer(s):

64%

Q17: 2. Percent Asian American/Pacific Islander*

Please indicate the percentage of the population served by your organization that is Asian American/Pacific Islander.

[4 characters allowed]

Answer(s):

2%

Q18: 3. Percent Caucasian*

Please indicate the percentage of the population served by your organization that is Caucasian.

[4 characters allowed]

Answer(s):

22%

Q19: 4. Percent Hispanic/Latino*

Please indicate the percentage of the population served by your organization that is Hispanic/Latino.

[4 characters allowed]

Answer(s):

8%

Q20: 5. Percent Native American*

Please indicate the percentage of the population served by your organization that is Native American.

[4 characters allowed]

Answer(s):

1%

Q21: 6. Percent Other*

Please indicate the percentage of the population served by your organization that would be considered under another race/ethnicity.

[4 characters allowed]

Answer(s):

3%

Q22: Internal Geographic Area

If this is a project for an area outside of the standard geographic area the administrator should enter the geographic area here. Otherwise, enter N/A.

[25 characters allowed]

Answer(s):

Q23: Site Visit Date

Answer(s):

11/08/2011

Q24: Board Meeting Date

Answer(s):

12/08/2011

Organization Information

Q25: Organization Budget*

What is the total organization budget for the current year?

Answer(s):

834,438

Q26: Date of Incorporation*

What is the organization's date of incorporation?

Answer(s):

04/01/1979

Q27: United Way Funded*

Is the organization funded by the United Way?

Answer(s):

No

Q28: FEIN Number*

What is the organization's FEIN number? This must be the FEIN number for the organization whose name you are applying under.

[20 characters allowed]

Answer(s):

363043662

Q29: Section 501(c)(3)*

Is your organization tax exempt under Section 501(c)(3)?

Answer(s):

Yes

Q30: Section 509(a)(1)*

Is your organization tax exempt under Section 509(a)(1)?

Answer(s):

Yes

Q31: Section 509(a)(2)*

Is your organization tax exempt under Section 509(a)(2)?

Answer(s):

No

Q32: Fiscal Agent

If your organization is not tax exempt, do you have a fiscal agent? If so, please list the organization, contact person and phone number in the area below.

[150 characters allowed]

Answer(s):

Q33: Organization Mission*

Please summarize the organization's mission in the are below. Please limit the information to two to three sentences.

[200 characters allowed]

Answer(s):

Sarah's Circle is a refuge for women who are homeless or in need of a safe space. By providing services, we empower women to rebuild both emotionally and physically; realizing their unique potential.

Professional and Support Staff Information

Q34: Professional and Support Staff*

Please provide your agency's staff composition, listing the number of professional and support staff who are paid full time, paid part time, volunteers and interns/others. If the staff member is part time indicate what their full time equivalent is.

[1000 characters allowed]

Answer(s):

Professional Staff

4 full time paid

2 full time Americorps VISTA

Part time paid:

1 at .87 FTE

1 at .67 FTE

1 at .12 FTE

1 at .07 FTE

8 Graduate level program interns ~ 3.2 FTE

With the program changes described below, we will be hiring two additional full time case managers and several additional part time program staff members. The .87 FTE and .67 FTE part time staff members will become full time staff members.

Support Staff

Sarah's Circle uses over 200 volunteers each year to provide support to our professional staff. These volunteers act as receptionists, staffing the front desk, answering the program phone, and scheduling and facilitating the use of basic services, such as phone, computer, showers, laundry, etc by the clients.

Project Details

Q35: Project Start Date*

What is the estimated project start date?

Answer(s):

01/16/2012

Q36: Project End Date*

What is the estimated end date of the project?

Answer(s):

01/31/2014

Q37: Other Funding Sources*

Please either upload a document with a list of other private and public funding sources for this particular request or type in the information in the area below. Please be sure to include the following details:

1. Complete name of the source
2. Whether the funding has been received or is pending
3. Amount
4. Date Received

5. Or, If pending, the date of notification

[1000 characters allowed]

[1 MB(s) allowed]

Answer(s):

Attachment: FY12Health Access support.xls

Budget

Q38: Last Fiscal Year Organization Expenses*

What were the expenses for the last fiscal year?

Answer(s):

660,293

Q39: Last Fiscal Year Organization Revenues*

What were the revenues for the last fiscal year?

Answer(s):

1,246,285

Q40: Project Budget*

What is the total budget for this project?

Answer(s):

78,136

Electronic Signature

Q41: Electronic Signature Step 1*

Enter your full name, business title and the date of submission.

(e.g.: Erin Smith, Executive Director, 13 June 2009)

[200 characters allowed]

Answer(s):

Elizabeth Dunn, Development Assistant, 20 October 2011

Q42: Electronic Signature Step 2*

By entering your signature information above and clicking "I Agree" below, you certify that the statements contained in this application are true and correct to the best of your knowledge and belief.

Answer(s):

I Agree

Proposal Narrative

A. Background

Q43: 1. Organization's mission, history, overall goals and/or objectives.*

[3000 characters allowed]

Answer(s):

Located in Chicago's Uptown community, Sarah's Circle has served women who are homeless or at risk of homelessness since 1979. Over our thirty year history, Sarah's has evolved from a drop-in center only to a multi-faceted agency with comprehensive services and permanent supportive housing. In 1979 Sarah's Circle served approximately 10 women a day with very basic services. Today we serve approximately 68 women a day, with a total of 917 for 2010. Beyond simply providing life-sustaining physical services for women who are homeless, we do so in a healing environment and in conjunction with professional services such as case management, clinical services, and housing placements, all geared towards improving women's long-term health, well-being, and self-sufficiency. Our ultimate goal is to end homelessness for the women we serve.

Mission Statement: Sarah's Circle is a refuge for women who are homeless or in need of a safe space. By providing housing assistance, case management, referral services, and life necessities, we encourage women to empower themselves by rebuilding both emotionally and physically; realizing their unique potential.

Beginning November 1, Sarah's Circle will be stepping up to operate the 50 bed women's interim housing program formerly operated by REST. With the new contract, Sarah's Circle will be able to target resources to a significant number of chronically homeless women, and double the hours our current facility is opened. Assimilating this program into our existing operations is challenging, but a solid fit with our strategic direction and commitment to end homeless for women.

The 50 bed interim housing program will serve as the entry point to our existing services – case management, clinical services, and housing services. Our agency will work with the women in a harm reduction framework to house women quickly, allowing more women to access the interim housing program. Subsequent to housing, Sarah's Circle will provide support and ongoing services to newly housed women, who still require a high level of

support to retain housing.

The Health Access for Formerly Homeless Women program plays a vital role in this strategic plan in providing routine and systematic services for health and housing retention during and after housing placement. The services will cause health improvements for the women both directly and indirectly, through helping the women remain stably housed.

This service delivery model will provide for a continuum of care from immediate housing and provision of basic human needs, to comprehensive services and housing placement, and finally the follow up services to ensure housing retention.

Q44: 2. Description of current programs, activities and achievements.*

[1500 characters allowed]

Answer(s):

Sarah's Circle's current programs include Physical Services, Educational and General Interest Programming, Case Management, Clinical Services, and our Housing Program, which encompasses both our 11 units of permanent supportive housing and the placement of women in housing through other housing providers.

Our Clinical Services Program was originally designed as a response to the high prevalence of trauma and mental illness that had consistently proven to be a major barrier to the health and housing stability of our clients. At the program's inception, there were other mental health services available in the community, which we referred clients to and partnered with, however these services were not ideal for all of our clients. Our clients needed services that were highly accessible, gender-sensitive, trauma-informed, and with homelessness as a universalized experience among program participants. Since the program started in 2007, it has grown, especially with the shrinking availability of mental health services in the community. Due to state budget cuts, Sarah's Circle can no longer refer our clients who do not have Medicaid to other service providers. Sarah's Circle now provides groups on Mood Management, Trauma, Domestic Violence, and Anxiety Management, as well as art therapy, individual counseling, and coordination of medication management through a Heartland Health Outreach nurse practitioner.

Q45: Number Served*

How many people were served by the program you are requesting funding for (if it's an existing program), and the agency overall, last year?

[1000 characters allowed]

Answer(s):

The Health Access for Formerly Homeless women is a new program for Sarah's Circle. Last year we housed 61 women in permanent housing through other housing providers. The agency overall served 917 women with basic services in 2010. With the changes detailed above, we expect to serve fewer women total, but the ones we serve will receive a greater depth of service.

Q46: 3. Description of formal and informal relationships with other organizations.*

Emphasize those relevant to the program or activities for which you seek funding.

[1500 characters allowed]

Answer(s):

Sarah's Circle has strong relationships with numerous health, housing, and human service providers in the area. We host health providers at Sarah's Circle on a regular basis to ensure access to testing, information, and care for the women. Chicago House provides HIV testing to Sarah's Circle clients monthly, Chicago Women's Health Center presents on women's health and sexual health topics monthly or bimonthly, and a nurse practitioner from Heartland Health Outreach performs general health checkups and coordinates medication management biweekly. These general health checkups are for women who are currently homeless and are too brief for a full diagnosis and treatment of health issues. This is particularly true for the chronically homeless, as they are at a greater risk for physical and mental health conditions due to homelessness and are among the most difficult to engage in any type of therapeutic relationship.

For clients requiring intensive treatment for addiction and severe mental illness, Sarah's Circle collaborates with specializing organizations, such as C4, Trilogy, and Thresholds. However these service providers have become unable to provide services to clients without Medicaid or some other form of insurance.

Our Housing Coordinator maintains relationships with other housing providers, such as Housing Opportunities for Women, Deborah's Place, Featherfist, Heartland Housing, Mercy Housing Lakefront, SRHAC, Friendly Towers, Ezra Multi Service.

B. Purpose of Funding Request

Q47: 1. Please state how this grant will be used and its overall goals.*

[2140 characters allowed]

Answer(s):

Sarah's Circle seeks funding for a pilot Health Access for Formerly Homeless Women program. The program is intended to be both a "Critical Time Intervention" to improve housing retention and an important source of health care for women who are desperately in need and have few or no other options for care. An Advanced Practice Nurse (APN) will first provide initial psychiatric/medical evaluations for women who are homeless, whom Sarah's Circle is working to place in permanent housing. The evaluations will be used to connect women with appropriate physical health services, as a basis for ongoing mental health services conducted by Sarah's Circle staff, and in some cases as a basis for pursuing disability benefits. A clinical case manager will then provide mental health counseling and motivational interviewing, provide practical support to the client during the transition period, and aid the client in transitioning to local service providers, a health home, and community support networks. A clinical case manager is an experienced mental health professional who works intensively with a client providing both case management and clinical services. When needed, the APN will continue to provide medical services, including medication management with clients.

The program is designed primarily as a Critical Time Intervention to provide support and aid clients in the transition from homelessness to housing with access to community health services, however there are limitations to this model because of the extreme shortage of health services available in the community for this population. If there are not community resources, a transition cannot occur. Our program is intentionally flexible to deal with this issue. The Clinical Case Manager will have a greater focus on mental health issues for clients struggling with mental illness, and services may be extended past the traditional 9 month cutoff for clients who are unable to obtain community mental health services. The APN will also be providing critical health services and oversight for the Clinical Case Manager.

Q48: 2. Needs Addressed and Population Served*

Identify the needs or problems that this program will address, including the population served, and describe how the program addresses these needs.

[3000 characters allowed]

Answer(s):

The women who come to Sarah's Circle have extremely limited access to medical/mental health services. Indeed, of the women we serve only 32% have Medicaid, and even with Medicaid, the severity of the women's conditions often limits their ability to access health care. This situation becomes even more drastic when a woman becomes housed outside of a comprehensive program, as she loses access to even the most basic health outreach programs designated for homeless individuals and spends more of her income on housing. Additionally, local mental health providers have become unable to provide services to low-income patients without Medicaid. This situation, coupled with the fact that 60% of the women coming to Sarah's Circle cite mental illness as a major barrier to housing stability creates a systemic lack of fundamental health care enabling women to retain housing and improve their health.

Participants in the program will be low-income, adult, formerly homeless women. More than 80% of the women Sarah's Circle serves are racial or ethnic minorities, with 64% of African American descent. Approximately 60% struggle with mental illness, and 11% suffer from a physical or developmental disability. Sarah's Circle places approximately 60 women per year in housing through other housing providers and provides 11 units of permanent supportive housing for women with disabilities who have been chronically homeless.

Primary and psychiatric healthcare will be provided by an experienced and dual certified APN. Mental health counseling, case management, and practical assistance with establishing a support network and community based service providers will be provided by the Clinical Case Manager. The APN will provide most services at Sarah's Circle where supplies and appropriate space will be available, while the Clinical Case Manager will provide most services during home visits. Both will have flexibility to meet a client at alternative locations as needed. This flexibility and the home visits by the Clinical Case Manager will help the program staff to provide highly accessible services for these extremely vulnerable women. The program will not only provide non existent or scarce services to a difficult to reach population, but the clinical case manager will be providing services according to a critical time intervention model, which has been proven to improve housing retention among formerly homeless populations.

Q49: Number Served*

How many people would be served by this grant and/or program?

[1000 characters allowed]

Answer(s):

We anticipate serving approximately 70 women with this program during its first year, with about 60 who we will house through other programs, and the 11 in our permanent supportive housing. Ideally the women will be served intensively for a limited amount of time with the expectation that these services during the critical transition time will improve their long-term health and housing stability. If women are in need of continued services, and are unable to gain access to community health services, Sarah's Circle services may be continued.

Q50: 3. Methodology*

Describe the program methodology or intervention strategy.

[2000 characters allowed]

Answer(s):

The Critical Time Intervention model was first designed in New York City in the 1990s to address the high rate of recidivism among men struggling with mental illness who were placed in housing after receiving mental health treatment in homeless shelters. Service providers hypothesized that part of the problem was discontinuity of support as the men went through the transition period and were expected to navigate alone a new and complex system of care. In the Critical Time Intervention model, the first three months after housing placement involve the most intensive emotional and practical support in helping the client establish and negotiate a community support network. The case manager continues to meet with the client and address issues until transfer of care is complete approximately nine months after housing placement. The model has been proven in randomized trials to be significantly more effective than usual treatment at reducing homelessness, up to 18 months after housing placement (www.criticaltime.org).

Critical Time Intervention is predicated on the availability of supportive services in the community, including mental health services. Due to the severe shortage of mental health services, there will be a greater focus with our program on providing mental health counseling and ensuring proper medication management and medical oversight, including the possibility of extension of services based upon need.

Best Practices: Sarah's Circle is Trauma-Informed and practices Harm Reduction in all of our programs. The Clinical Case Manager and Advanced Practice Nurse will have relatively small case loads and will take part in monthly team meetings with the Housing Coordinator. This will ensure coordinated care and smooth transitions from the Housing Coordinator as the primary contact to the Clinical Case Manager as the primary contact. The Clinical Case Manager will use Motivational Interviewing and other evidence-based Substance Abuse and Mental Health techniques.

Q51: 4. Outcome Measures*

What are the specific outcome measures and related baselines (please see our website for examples).

[3150 characters allowed]

Answer(s):

Sarah's Circle's programs are monitored and assessed from multiple perspectives. Clients are routinely surveyed to determine overall satisfaction and programming needs, both through formal surveys and regular informal check-in. Case management and clinical files are systemically reviewed by the Program Director for follow-up and trends. Program information is recorded and aggregated in an internal database and evaluated based upon progress on goals and objectives throughout the year. All governmental programs as well as the entire agency are subject to periodic audits.

Follow-up calls, letters, and visits will be conducted at 12 months after placement to accurately assess the housing retention rate and gather qualitative data on program satisfaction and areas for improvement. Below are our objectives for the project.

- 70 women receive initial health screening.
- 70 women connected with FQHC (Federally Qualified Health Clinic) health home.
- 70 women will be assessed for benefits including Medicaid. For eligible, women, process will be started.
- 60% linked with Clinical Case Manager for more intensive services as needed.
- 80% remain in housing for 12 months.

Currently the women we place in housing are not receiving these services. Our case managers routinely perform mainstream benefits assessments, but these do not include the medical assessment needed for Medicaid and SSI. Our baseline for housing retention is based upon desired outcomes for housing programs for the formerly homeless. We do not have an accurate 12 month housing retention rate baseline for this particular population.

Q52: 5. Staffing*

Describe any specific staffing needs to accomplish the activities for which funding is requested. Identify key staff and their qualifications.

[1900 characters allowed]

Answer(s):

Key staff members will be the APN who will be providing the medical care for the project and the Clinical Case Manager who will be providing the mental health counseling and case management for project participants. While we have used interns in the past to provide quality services while keeping costs low for our Clinical Services Program, that was done in house, in a controlled setting. This model of leveraging graduate students with intensive supervision in a controlled setting is not transferable to a home visit model.

Regina Sasha will be the Advanced Practice Nurse for this project. She is dual certified and has over 20 years of experience working in clinical and academic settings. The Clinical Case Manager for the project has not yet been hired. The staff member hired will be a LCSW and CADC with at least five years of experience working with this population.

Additional important staff members will be Anne-Marie Keswick our Program Director and Megan Libreros, our Housing Coordinator. Ms. Keswick, LCSW, has a background of providing mental health service for this population at C4, and prior to joining Sarah's Circle was a Supportive Services Director for an agency providing a range of supportive services and permanent housing for the homeless. Ms. Libreros works to house clients by matching clients with available and appropriate housing options, whether that is through a partnering housing program or in low-cost market rate housing.

Q53: 6. Sustainability*

Please tell us how you plan to sustain the program for which you seek funding after the termination of this grant.

[2000 characters allowed]

Answer(s):

Sarah's Circle has designed this program strategically to be a two year pilot program. The program will provide immediate needed support for a group of women with extremely limited access to health services and position Sarah's Circle well for changes in the funding environment when healthcare reform is enacted. Although the political environment has been volatile, as healthcare reform is now designed, most of the clients we house will become eligible for Medicaid in 2014, and Medicaid will become more flexible in covering holistic healthcare costs, such as clinical case management. At that time, Sarah's Circle will assess multiple models, including partnering with a health home to be reimbursed for providing services, which will give us access to a major sustainable source of funding for these much needed services.

Required Documents

A. Finances

Q54: 1. Organization Budget

Please upload the organization's budget. Please do not use Excel headers on the budget because this application system adds a title over the header, and then they are both difficult to read. Please leave at least 3/4 of an inch blank at the top and bottom of the page.

[3 MB(s) allowed]

Answer(s):

Attachment: FinalBudgetFY12.xls.pdf

Q55: 2. Program Budget*

Please upload the program budget with narrative. Please do not use Excel headers on the budget because this application system adds a title over the header, and then they are both difficult to read. Please leave at least 3/4 of an inch blank at the top and bottom of the page.

[1 MB(s) allowed]

Answer(s):

Attachment: Health Access Budget and Narrative.doc

Q56: 3. Capital Budget & Campaign Committe Members

If your organization is in the midst of a capital campaign please upload the capital budget and a list of capital campaign committee members.

[1 MB(s) allowed]

Answer(s):

Attachment: Campaign Summary.xls

Q57: 4. Funding Sources*

Please upload a list of foundations, corporations, or government agencies that funded the organization in the last fiscal year, including amounts contributed (\$1,000 and above).

[1 MB(s) allowed]

Answer(s):

Attachment: FY11funders2.xls.xml

B. Other Supporting Materials

Q58: 1. Board List*

Please upload a current board list with related employment affiliations.

[1 MB(s) allowed]

Answer(s):

Attachment: Board of Directors- May 2011.doc

Q59: 2. Staff Qualifications

Please upload the qualifications of professional program staff (if applicable)

[1 MB(s) allowed]

Answer(s):

Attachment: Health Access Program Staff.doc

Q60: 3. Agency Collaboration

If the project for which funding is sought is a collaboration with other agencies, include letters of agreement from the collaborating agencies.

[1 MB(s) allowed]

Answer(s):

No File Uploaded

Q61: 4. Letters of Support

Please upload any letters of support or reviews (if applicable).

[1 MB(s) allowed]

Answer(s):

No File Uploaded

Q62: 5. Verification of Tax-Exempt Status*

Please upload your most recent IRS Determination Letter stating your status or your fiscal agent's status as a 501(c)(3) organization with a 509(a)(1) or 509(a)(2) designation. If using a fiscal agent, please include Letter of Authorization.

[2 MB(s) allowed]

Answer(s):

Attachment: Sarah-s Circle 501c3 Letter.pdf

Q63: 6. Annual Report*

Please upload the latest annual report or a summary of the organization's prior year's activities.

[3 MB(s) allowed]

Answer(s):

Attachment: SC annual report 2010 as printed.pdf

Files Summary

Process: General Grants December 2011 Board Meeting

Health Access for Formerly Homeless Women

File Uploads

FY12Health Access support.xls

FinalBudgetFY12.xls.pdf

Health Access Budget and Narrative.doc

Campaign Summary.xls

Board of Directors- May 2011.doc

Health Access Program Staff.doc

Sarah-s Circle 501c3 Letter.pdf

SC annual report 2010 as printed.pdf

FY11funders2.xls.xml (NOT CONVERTED*)

Supporting Documents

No supporting documents were uploaded

**Files not converted can still be accessed directly from links on the application view*

Sources of Support for Health Access Project

Confirmed

Crown Family Philanthropies (\$60,000 GenOp over 3 years.)	\$5,000 Received 6/22/2011
Boeing Employee Community Fund (\$10,000 for Clinical Services.)	\$5,000 Received 7/27/2011

Potential

VNA Foundation	\$25,000 Pending
Albert Pick, Jr. Fund	\$15,000 January 21 deadline, notification March/April
Michael Reese Health Trust	\$25,000 December 15 deadline, notification June 2012
Washington Square Health Foundation	\$25,000 December 1 deadline, notification Feb/March
Field Foundation	\$20,000 Pending, notification Feb/March

FY12 Budget

Income

Government Contracts	\$	209,428.00
Contributions Income Individuals	\$	76,500.00
Religious Organizations	\$	5,000.00
Foundations Grants	\$	226,760.00
Special Events	\$	18,900.00
In-Kind	\$	315,090.60
Interest Income	\$	1,200.00
Unrealized Gain/Loss	\$	775.00
Investment Income	\$	125.00
Full Circle Revenue	\$	-
Total Income	\$	855,389.16

Expenses

Full Circle Sales Tax		
Consignment Payouts		
Payroll Expenses	\$	282,412.17
Payroll	\$	218,804.75
401K Employer Match	\$	5,900.15
401k Fees	\$	2,080.00
Payroll Taxes	\$	16,738.56
Unemployment	\$	9,700.00
Medical/Dental Benefits	\$	29,188.70
Contracted Staff	\$	10,960.00
Marketing/Web		800.00
Consumable Supplies		5,000.00
Event Expense		3,400.00
Rent		60,000.00
HUD CHI - Leasing		82,302.00
Utilities		6,553.89
Telephone		7,700.00
Repairs & Maintenance		2,000.00
Food		8,000.00
Participant Services		10,200.00
Postage & Delivery		3,450.00
Printing & Reproduction		3,500.00
Insurance		7,760.52
Staff Related		1,500.00
Board Development		250.00
Volunteer		800.00
Professional & Organizational		13,820.00
Bank/Credit Card Service Fees		1,200.00
Transportation		1,000.00
Equipment - Computer & Other		4,869.00
In-Kind Expense		315,090.60
Total Expenses		834,438.11
Net Income	\$	20,951.05

Budget

Health Access for Formerly Homeless Women Budget

430 hours Dual Certified APN @ \$60/hour	\$25,800
Visits with Clinical Case Manager (LCSW/CADC) 1209 hours@ \$30/hour	\$36,270
Medical Oversight (MD) 15 hours @ \$125/hour	\$1,875
Supplies	\$2,000
Transportation (Home visit costs)	\$2,000
Sub Total	\$67,945
Administrative Costs (15% of total budget)	\$10,191
Total Budget	\$78,136

All personnel on this project will be contractual, so the scope of the project can be scaled up or down based upon funding levels. Clients with the most needs who are placed in housing without supportive services will be prioritized if the project must be scaled down.

The dual certified APN will be providing physical health and psychiatric services for the clients, and the Clinical Case Manager will be providing mental health counseling.

Some medical oversight by an MD is required for the APN to practice. While we have prospects for an MD to provide these services pro bono, this has been built into the budget both to ensure the services can be paid for if they are not secured pro bono and to reflect the value of the services.

We have also added an additional 15% to the budget for administration to help cover the overhead costs associated with running the program.

SARAH'S CIRCLE BOARD OF DIRECTORS

4750 N. Sheridan Rd. Suite 220, Chicago IL 60640

Admin: (773) 728-1014 Program: (773) 728-1991 Fax: (773) 728-0992

www.sarahs-circle.org Email: kragnar@sarahs-circle.org

<p>Georgia A. Beatty (1/07) Attorney at Law 6102 N. Sheridan Rd. Suite 502 Chicago, IL 60660 (W) 773-764-6102 (F) 773-764-6161 Georgia222@lycos.com</p>	<p>Reginald Richardson, PhD, ACSW, LCSW (11/07) Vice President for Quality Assurance and Evaluation The Family Institute at Northwestern Univ. 8 South Michigan Ave #500 Chicago, IL 60603 (W) 847-733-4300 ext 674 (F) 312-609-0052 rrichardson2@northwestern.edu</p>	<p>Sheila Frost, MSW (1/09) Field Director, Assistant Professor St. Augustine College 1345 W. Argyle Street Chicago IL 60640 (W) 773-878-3718 (F) 773-878-0937 sfrost@staugustine.edu</p>
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<p>Joyce J. Johnson (5/09) 1032 W. Montrose Apt. 701 Chicago, IL 60613 (C) 773.322.0017</p>	<p>Judy Krueger (7/05) Active Volunteer 570 N. Sheridan Rd. Lake Forest, IL 60045 (H) 847-295-8475 holthouse@msn.com</p>	<p>Susan Lucari (5/09) Executive Director AT&T 225 W. Randolph, 18-A Chicago, IL 60606 (W) 312-364-2994 (C) 847-502-6777 (F) 312-425-1360 s11262@att.com</p>
<p>Katherine Ragnar (10/06) Executive Director Sarah's Circle 4750 N. Sheridan Rd. Suite 220 Chicago, IL 60640 (W) 773-728-1014 ext 309 (F) 773-728-0992 kragnar@sarahs-circle.org</p>	<p>Debra Flynn (07/10) Principal Mercer 155 N. Wacker Dr. Ste. 1500 Chicago, IL 60606 (W) 312-917-0654 (F) 312-917-8999 (C) 312-576-2548 Debra.flynn@mercerc.com</p>	<p>Barbara Burrell (3/11) Burrell Realty 35 East Wacker Dr, Suite 3400 Chicago, IL 60601 (W) 312-306-9984 (F) 773-661-9783 (C) 312-925-1204 barbara@burrellrealty.com</p>

President: Judy Krueger
Secretary: Georgia Beatty
Treasurer: Joshua Reitman

Health Access for Formerly Homeless Women Program Staff Members

Anne-Marie Keswick, LCSW
Program Director

Anne-Marie Keswick received her Masters in Social Work from the University of Chicago and her BA in Psychology from Lake Forest College. Ms. Keswick has an extensive background working with the homeless population and individuals with mental illness, having worked as a therapist at Community Counseling Centers of Chicago for over 10 years and more recently as Director of Social Services at REST, a transitional homeless shelter.

Sarah E. Shapleigh, LCSW, CADC
Clinical Supervisor

Sarah Shapleigh has an extensive background working with the homeless, primarily with homeless adults suffering with dual disorders of severe mental illness and substance abuse. Ms. Shapleigh developed and conducted group therapy programs, oversaw treatment planning and provided staff training for Chicago Health Outreach and C4. In addition to working with clients and staff at Sarah's Circle, Ms. Shapleigh has a private psychotherapy practice.

Regina Shasha, APN
Advanced Practice Nurse

Regina Shasha is a Licensed Advanced Practice Nurse with over 20 years of experience working in clinical and academic settings. Ms. Shasha received her A.B. in Psychology and Social Relations, *cum laude*, from Harvard University and her M.S. in Nursing Sciences from the University of Illinois at Chicago. Ms. Shasha is a Certified Family Nurse Practitioner and a Certified Family Psychiatric and Mental Health Nurse Practitioner. Ms. Shasha was a Psychiatric and Family Nurse Practitioner with Heartland Health Outreach focusing on the homeless population from 2006-2011. Currently Ms. Shasha is a faculty member at the University of Illinois at Chicago College of Nursing.

Clinical Case Manger, to be hired

This staff member has not yet been hired, but will be a Licensed Clinical Social Worker and Certified Alcohol and Drug Counselor with at least five years of experience working with the population.

Megan Libberos
Housing Coordinator

Megan Libberos received her Bachelors Degree from the University of Illinois at Chicago, majoring in Applied Psychology. Prior to her current position, Megan served as an intern for Sarah's Circle's Housing Program, maintaining current information on subsidized and market rate housing options in the Chicago area and providing housing-related case management to clients. Megan also volunteers as a certified rape crisis counselor with Rape Victim Advocates.

Susan worked for over twenty years in the telecommunications industry.

Tiffany was completing her Master's degree at a local university.

Rachel had struggled with abusive relationships since she was a teenager.

Mary was a stay-at-home mom with a husband and two teenage sons.

What do these women have in common?



Sarah's Circle

Helping Women Rebuild Their Lives

Sarah's Circle is a refuge for women who are homeless or in need of a safe space. By providing housing assistance, case management, referral services, and life necessities, we encourage women to empower themselves by rebuilding both emotionally and physically; realizing their unique potential.

Dear Friends of Sarah's Circle,

As our cover illustrates, homelessness is a reality experienced by women from all walks of life. Sarah's Circle served 917 women in 2010, and each of those women has a unique story of how she came to need Sarah's Circle. While our clients come from many different backgrounds, much in their experience is shared. Women who are homeless lack not just reliable shelter, but also the safety, stability, and community that come with a permanent home.

For our annual report this year, we have chosen to share with you the stories of four women who have been touched by Sarah's Circle. These stories demonstrate the diversity of women who struggle with housing instability, and the importance of a multifaceted approach to ending homelessness. These women challenge and complicate stereotypical notions of homelessness and remind us what we are working towards.

These stories also represent a small portion of the staggering 26% increase in clients that we have welcomed into Sarah's Circle over the past year. Staff, volunteers, and donors have met this challenging increase with dedication and enthusiasm. We are proud of the progress Sarah's Circle has made on long-term goals, even while finding creative ways of accommodating so many new clients. In the past year, we have housed more women, expanded our Clinical Services, and finalized plans to purchase and renovate a new home for Sarah's Circle. This progress was and is possible only with the involvement of friends of Sarah's Circle.

Thank you for all of your support of Sarah's Circle as we continue to successfully serve women who are homeless.

Sincerely,



Judy Krueger
President, Board of Directors



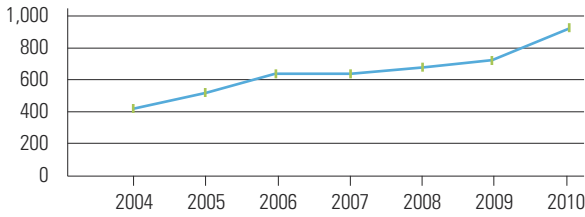
Katherine Ragnar
Executive Director

917 women met their basic needs at Sarah's Circle in 2010.

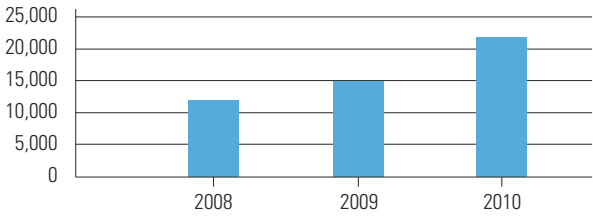
By the early 2000s, Susan had risen in the ranks of her company and truly enjoyed her job, training and supervising new employees. When her company relocated to Indiana, Susan went with it. After a few years though, when her company decided to outsource, Susan was laid off. She was alone in Indiana with few employment options and without the resources to move again. Susan eventually found a job, but it paid less and provided minimal benefits. After struggling for several years, Susan lost everything when she lost her job in 2009. There was no help for Susan in Indiana; she could not even find an open emergency shelter bed, so she used her last few dollars to pay for a bus ticket back to Chicago.

When Susan finally found her way to Sarah's Circle in 2010, she had started to lose hope. Sarah's Circle gave Susan a welcoming, supportive community and the daily necessities of life so she could concentrate on working to regain self-sufficiency. The staff at Sarah's Circle also connected Susan to healthcare and employment resources that fit her needs. Susan continues to use Sarah's Circle as her home base as she works to become housed once more.

Number of Clients Served by Sarahs Circle 2004-2010



Number of Meals Served



Whether a woman has become homeless for the first time or has been homeless for years, she needs to secure her basic needs before she is able to pursue more long-term goals. A meal, a hot shower, and being treated with respect can mean the difference between getting back on her feet and becoming mired in homelessness. Sarah's Circle provided safe daytime shelter, food, showers, restrooms, and laundry facilities to a record number of women in 2010.

363 women participated in Case Management at Sarah's Circle in 2010.

*I'm working to stand on my own two feet,
but I'll always remember that Sarah's Circle
is behind me because it's awfully hard out
there on your own.*

-A client

When Tiffany first came to Sarah's Circle, she was spending her nights in an emergency shelter while holding down a part time job, struggling with a physical disability, and working to finish her dissertation. Tiffany had experienced a difficult childhood but chose to pursue higher education in order to earn a better life for herself. However without any family support, Tiffany lost her housing months before finishing her degree. Tiffany had long neglected her health while devoting her time and money to completing her education. This had exacerbated her condition and ultimately contributed to her loss of housing.

Tiffany's case manager at Sarah's Circle worked with her to determine her long-term goals for improving her health and self-sufficiency. They then identified the steps needed to pursue those goals. Tiffany's case manager connected her with professionals who provided vision, dental, and most importantly medical care in order to manage her disability. Tiffany and her case manager were also able to negotiate reduced bus fare, so Tiffany could affordably commute to work and school. She is now able to maintain her income and work toward finishing her degree. Tiffany is a fighter and continues to work with her case manager to accomplish her goals.

How Case Managers Spend their Time at Sarah's Circle



Case Management is a collaborative effort between a case manager and a client. The case manager provides resources, referrals, and assistance, while the client must do the work to accomplish her goals. Our case managers also use motivational interviewing techniques to keep women positive and invested in the goals they are working to achieve, especially when they experience setbacks. Having unconditional support and a guide in navigating the available resources is often a crucial service for women in escaping and avoiding chronic homelessness.

206 women participated in Clinical Services counseling in 2010.

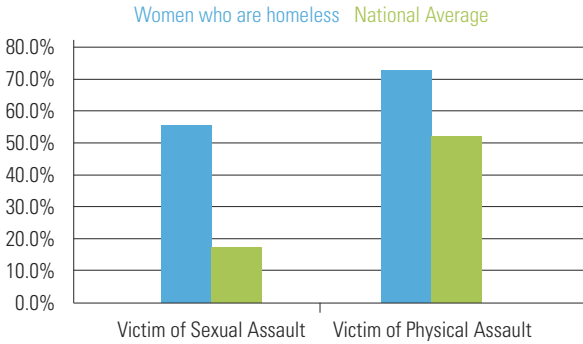
What you have done for me is priceless.
- Rachel

Rachel remembers an idyllic childhood before her father left when she was ten. After he left, Rachel's life became chaotic. She moved frequently with her mother and was sexually abused by a friend of the family. As she got older, Rachel began looking for love, stability, and protection from boyfriends. The men she dated often became controlling and then physically abusive. These relationships caused even more pain. To numb the pain, Rachel began using drugs.

Rachel struggled to regain sobriety and spent several years sober. She married a man with three children. However when that relationship also devolved into abuse, Rachel became homeless.

When Rachel came to Sarah's Circle for the first time, she immediately felt safe and accepted, despite her mistakes. Rachel's clinical counselor at Sarah's Circle was able to offer her support and help her understand the psychological causes and consequences of traumatic experiences in her past. Rachel worked to accept her past, develop healthy coping skills, and envision a better future. She came to believe in her own strength and independence. Rachel started thinking of herself as a survivor. She is now housed but continues to work with her counselor at Sarah's Circle.

Lifetime Rates of Victimization for Women in the General Population vs. Women who are Homeless¹



For many women who are homeless, housing instability is rooted in a history of trauma or mental illness. In the past several years, Sarah’s Circle has developed clinical programming to address this problem. The services provided today include four supportive therapy groups: Trauma Services for Women, Domestic Violence, Mood Management, and Anxiety Management. These groups are a forum where women can relate to each other in a mutually supportive way while learning strategies for reducing psychological symptoms and destructive behaviors. Sarah’s Circle also provides art therapy and individual counseling. Providing Clinical Services is even more important now, as state budget cuts have resulted in many of our partner agencies eliminating these services, especially for the uninsured.

¹ Jasinski et al. (2005) The Experience of Violence in the Lives of Homeless Women: A Research Report, p. 22, Department of Justice

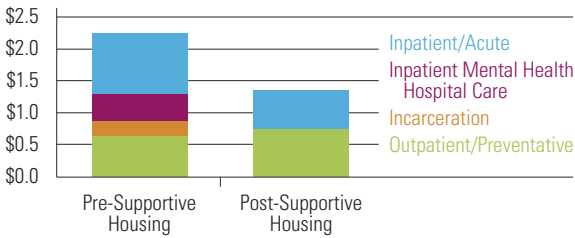
11 women were housed as tenants in Sarah's Circle supportive housing units in 2010.

An additional 50 women were placed in permanent housing through partnering agencies.

As a stay-at-home mom for nearly two decades, Mary lovingly took care of her family and nurtured her two boys as they grew. She felt blessed that she didn't need to work outside the home to support her family. However, her life abruptly changed when her husband tragically died in a work-related accident. Mary found that she lacked the job skills to find employment. Mary and her teenage sons bounced from shelter to shelter until a friend told her that Sarah's Circle might be able to help.

The Housing Coordinator at Sarah's Circle worked to find a long-term housing program that was right for Mary's family. The Housing Coordinator advocated on their behalf, and eventually the family was placed in an appropriate housing program. They were able to stay together in one place while Mary worked through a job-training program and found employment.

**Cost in Millions Pre vs. Post Supportive Housing
for Sample of 177 Illinois Supportive Housing Residents²**



The journey to a permanent home can vary as much as the journey from a permanent home. Our housing coordinator and case managers are familiar with the housing options available and connect women to housing that is appropriate for their situation and capabilities. For some women, transitional housing and a job training program is the path to independent, market-rate housing. For others, especially those with disabilities who have been homeless for years, subsidized housing with wrap-around supportive services are necessary to keep them housed permanently. This type of housing has been proven to improve outcomes and decrease public costs as residents switch to using outpatient preventative care as their primary method of managing a disability.

² Nogaski et al. (2009) Supportive Housing in Illinois: A Wise Investment, p. 9, Retrieved from www.heartlandalliance.org/research



Our Future

As many of you know, Sarah's Circle has outgrown our current facility, both in the number of women served and in the type of services provided. Over the years, our mission has evolved from passively serving as a refuge, to actively helping women to rebuild their lives. While we have transitioned from operating as a drop-in center only to operating as a dynamic and multifaceted agency offering individualized attention, our space has stayed the same. Staff members have creatively repurposed storage and office space to accommodate case management, therapy, and housing assistance. However this ingenuity can only go so far. The future of Sarah's Circle is in a new space designed for our purposes.

We are in the final stages of raising the funds to purchase and renovate the new building, 4836 North Sheridan Road – just a block from our current location. The renovated building will transform the way Sarah's Circle delivers its programs and enhance the lives of countless women experiencing homelessness.

The top two floors of the building will contain ten studio apartments for our Housing Program, which will allow tenants easy access to Sarah's Circle daytime programming. By keeping the 11 units we currently have scattered on the North Side, we will have a total of 21 units for women who have been chronically homeless with a disability. This housing is crucial to ending homelessness for society's most vulnerable women.

The main space of the new building will allow us to deliver our services more efficiently and more effectively. Our basic services will be upgraded and we will have proper facilities for our other programs. There will be more offices and multipurpose rooms that will improve our capacity to provide counseling, case management, and housing assistance and will allow us to improvise with the space as needed. Our new home will be beautiful, reflecting our belief in the dignity and potential of all the women who come to Sarah's Circle for help.

The renovated building will be the embodiment of the transformation Sarah's Circle has been making from alleviating the pain of homelessness to ending homelessness.

Thank you to all who have contributed to this project so far, and for those who have not yet, it's not too late!

Financials

Fiscal Year 2010

July 1, 2009 – June 30, 2010

Income

Government Grants and Contracts	\$137,812
Contributions (Private)	317,206
Special Events	28,661
Interest/Investments income	936
Unrealized loss on investments	326
Full Circle (Resale Shop) – Gross income	145,732
In-kind contribution	98,996
<hr/>	
Total Revenue	<u>\$729,669</u>

12

Expenses

Program Services:

Self Sufficiency Employment Services	\$ 81,851
Physical Services/General Education	205,657
Housing	57,343
Clinical Services/Trauma Program	25,712
Full Circle (Resale Shop)	160,302
<hr/>	

Total Program Services \$530,865

Supporting Services:

Management and General	76,049
Development and Fundraising	82,534
<hr/>	

Total supporting services \$158,583

Total Expenses **\$689,448**

Change in net assets \$ 40,221

Net assets

Beginning of year	\$237,248
End of year	\$277,469

Thank You to Our Generous Donors

Thank you to the following individuals, corporations, foundations, and organizations who contributed so generously to our efforts from July 1, 2009 to June 30, 2010.

Government Contracts

U.S. Department of Housing and Urban Development **\$66,462**
City of Chicago Department of Family & Support Services **\$29,187**
Federal Emergency Management Agency **\$23,250**
Chicago Department of Housing **\$18,912**

Grants

\$10,000-\$15,000

A. Montgomery Ward Foundation
Anonymous
Albert Pick, Jr. Fund
Crown Family Philanthropies
Irvin Stern Foundation

\$5,000-\$9,999

Blue Cross Blue Shield
Deutsche Bank
Frechette Family Foundation
Gallop Family Foundation
Peoples Gas
Sara & Two C-Dogs Foundation
The Patrick & Anna M. Cudahy Fund

\$1,000-\$4,999

Anonymous
Dewan Foundation
Rothman Family Foundation
Sulzer Family Foundation

Religious Grants and Organizations

\$5,000-\$15,000

First Presbyterian Church of Lake Forest
Kenilworth Union Church
Sisters of Charity, BVM
Winnetka Congregational Church

1,000-\$4,999

First Presbyterian Church of Wilmette
Fourth Presbyterian Church
Presbytery of Chicago
WELCA of Edgebrook Lutheran Church

\$500-\$999

Lincoln Park Presbyterian Church
Missionary Sisters of the Holy Spirit
Northminster Presbyterian Church
Sts. Peter & Paul Catholic Church
Yorkfield Presbyterian Church

\$50-\$499

Believer's Fellowship NDC
North Shore Baptist Church
Presbyterian Hunger Program (USA)
Ravenswood Fellowship United Methodist Church
Ravenswood Presbyterian Church
St. Catherine Laboure
The Sisters of St. Joseph of LaGrange

Business & Other Group Contributions

\$5,000-\$10,000

Individuals via Global Giving
Women's Criminal Defense Bar Association

\$1,000-\$4,999

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Make It Better LLC
Northwestern Memorial Hospital- Referred Testing

\$500-\$999

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The Woman's Club of Evanston

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Weiss Memorial Hospital
Women Everywhere

\$50-\$99

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\$5,000+

Bert and Judy Krueger

\$1,000-\$4,999

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It is possible we may have misspelled a name or printed the name of someone who wished to remain anonymous. It is also possible we may have inadvertently omitted a name of a donor. Please notify us and accept our apology for the error.

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Katherine Ragnar

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Sarah's Circle
Helping Women Rebuild Their Lives