



Cornerstone Community Outreach

Vision

Cornerstone Community Outreach (CCO), an Illinois non-profit 501-c3 organization, was founded in 1989 to raise the quality of life and access housing for people experiencing homelessness Chicago.

Mission

Addressing Homelessness, Providing Shelter, Accepting People, Finding Home.

For over 35 years, Cornerstone has welcomed families and individuals experiencing homelessness into safe, stable temporary housing, with holistic services, and individualized support to pave the way to permanent housing.



Core Shelter Programs & Services

Cornerstone currently operates **2 Family & 2 Individual Shelters**:

Primary Shelter Services Include:

- Comprehensive intake, **safe shelter**
- Trauma-informed, **individualized compassionate care** with holistic wrap-around services
- Entry into City-wide Coordinated Entry housing database, **tailored and supported goals** for positive outcomes.
- Intensive effort toward supportive, affordable, subsidized, or market-rate permanent housing.
- Assistance in obtaining ID & birth certificates, **on-site wellness & healthcare** appointments, counseling services
- Linkage to vocational & academic training, **referrals to employment**, and behavioral healthcare services

Other Shelter Services:

- Daily meals, laundry facility, access to free clothes, shoes & household items
- Computer lab, WIFI, after school tutoring with Chicago Hopes
- Rooftop playground & garden, 24-hour staff & trained security team
- Transportation assistance, furniture assistance, follow-up services



Program Activities and Outcomes



- In 2024, Cornerstone **provided shelter for 592 people**: 390 adults and 201 children. Of the 592, 412 people (70%) entered in 2024, and the other 180 people (30%) were already sheltering with Cornerstone.
 - 93% entered with no income, a 10% rise from 2023. 23% had an increase of income upon exit.
 - 24% had lived in “non-housing” prior to entry, 36% in other emergency shelter, 7% entered shelter from hospitals
 - 36% are survivors of domestic violence, 34% being children. 15% of all residents stated DV as reason for homelessness.
 - 34% were children, and 16% were over 51 years old
 - 40% have a disability, and 31% chronic medical health condition
- **65,912 nights of shelter were provided, averaging 180 people per night staying at Cornerstone.**
- Despite reduced available subsidized and low-income housing units, 28% have found housing, the rest in process!



Program Transformation



Medically Integrated Shelter Model

Transforming Shelter into Health + Housing Access

- **Integrated On-Site Healthcare:**
Residents can access primary care, behavioral health, and preventative services directly within shelter campuses.
- **Holistic, Person-Centered Services:**
Combining medical care, case management, trauma-informed support, and coordinated housing navigation under one roof.
- **Designed for Health & Dignity:**
Private non-congregate rooms, ADA-accessible design, and calming, community-focused spaces to support recovery and independence.
- **Partnership-Driven:**
Collaborations with healthcare providers, social service agencies, and public health systems to ensure continuity of care.
- **Impact Goal:**
Shorten time to housing, improve health outcomes, reduce ER visits, and increase long-term stability for people experiencing homelessness.

Quality Improvement & Benchmarking

Investing in excellence across every level of care

Cornerstone Community Outreach is committed to continuous quality improvement (CQI) to ensure our shelters are not only safe—but also effective, healing, and outcome-driven.



Current Practices

- Data Monitoring – Tracking housing placements, income changes, health access.
- Program Audits – Evaluating service quality and trauma-informed care.
- Resident Feedback – Listening to client experience to shape programs.
- Cross-Site Learning – Benchmarking outcomes across our shelters.

2025–2026 Goals

- Increase health engagement for residents with chronic conditions
- Standardize outcome metrics across all locations
- Boost housing exits from 28% to 40%
- Shorten average length of stay

Gaps & Investment Needs

- Data Tools – Real-time, integrated systems
- CQI Staffing – Dedicated quality lead and staff training time
- System Integration – Improve healthcare and housing data sharing

With the right support, Cornerstone will lead in defining high-quality, health-integrated shelter for all.

Development Projects

Sylvia

- Creating 51 Units for Families
- Medical clinic
- Youth services



Hannah

- Creating 29 Units for Individuals
- Food Pantry
- Outreach Services



Green – Current shelter for expansion

Blue – Proposed New Site



NCS Program

- Create ~ 38 Units of non-congregate housing for individuals
- On-site holistic social services, physical and behavioral health care.
- Neighborhood Supports



5/9/25

Challenges



Limited and Restrictive Government funding

Cornerstone has been a Delegate Agency of the City of Chicago DFSS since 1989, operating the shelters according to its protocol

- DFSS only funds on average \$30 per person per day, actual cost is closer to \$80.
- Likelihood of increase is low, and don't account for unfunded mandates, ie Minimum Wage/Paid Time off
- Fund only specific roles and expenses, does not cover it all
- Development Projects are great, but real-time costs are much higher than the City planned for, likely not able to achieve best goals

Capacity to take Cornerstone to the Next Level

- Philanthropy not having understanding of the importance of short-term housing supports
- Focused on quality program and surviving COVID, not enough capacity to lean into new development
- Strong consultants poised to support, not enough capital to move forward

Solutions



Operating funds to be able to sustain services

- To be able to sustain services, increase in public and private funding for accurate costs.
- Need \$525,000 per year for the next three years
- Vision includes sustainable revenue through Medicaid billing for mental health services
- Creation of permanent endowment/social venture endowment

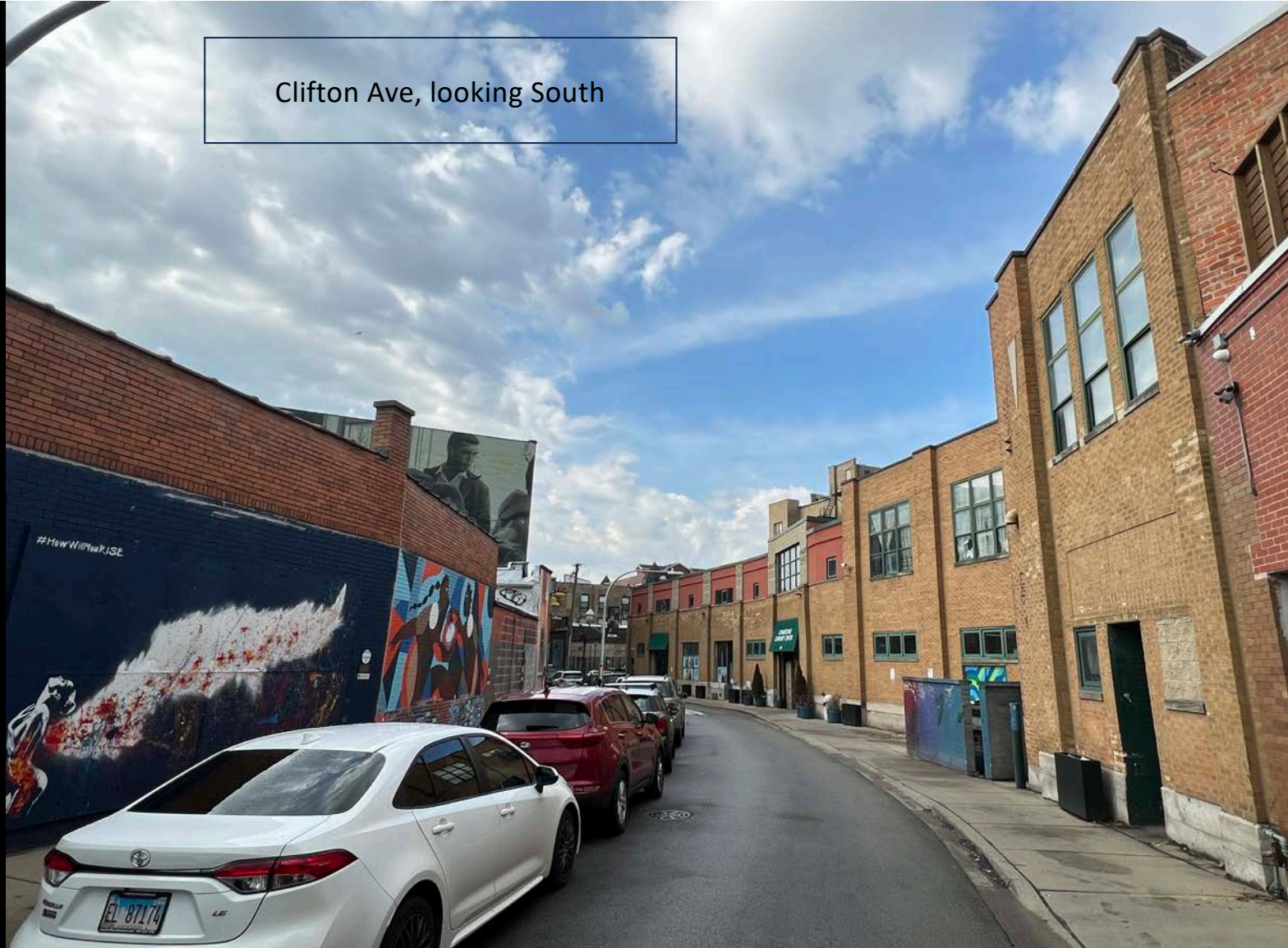
Capacity building funds for a development director

- Three year plan, hiring an extremely qualified and experienced Development Director and Development Assistant
- Recommended \$175,00 per year
- Need \$525,000

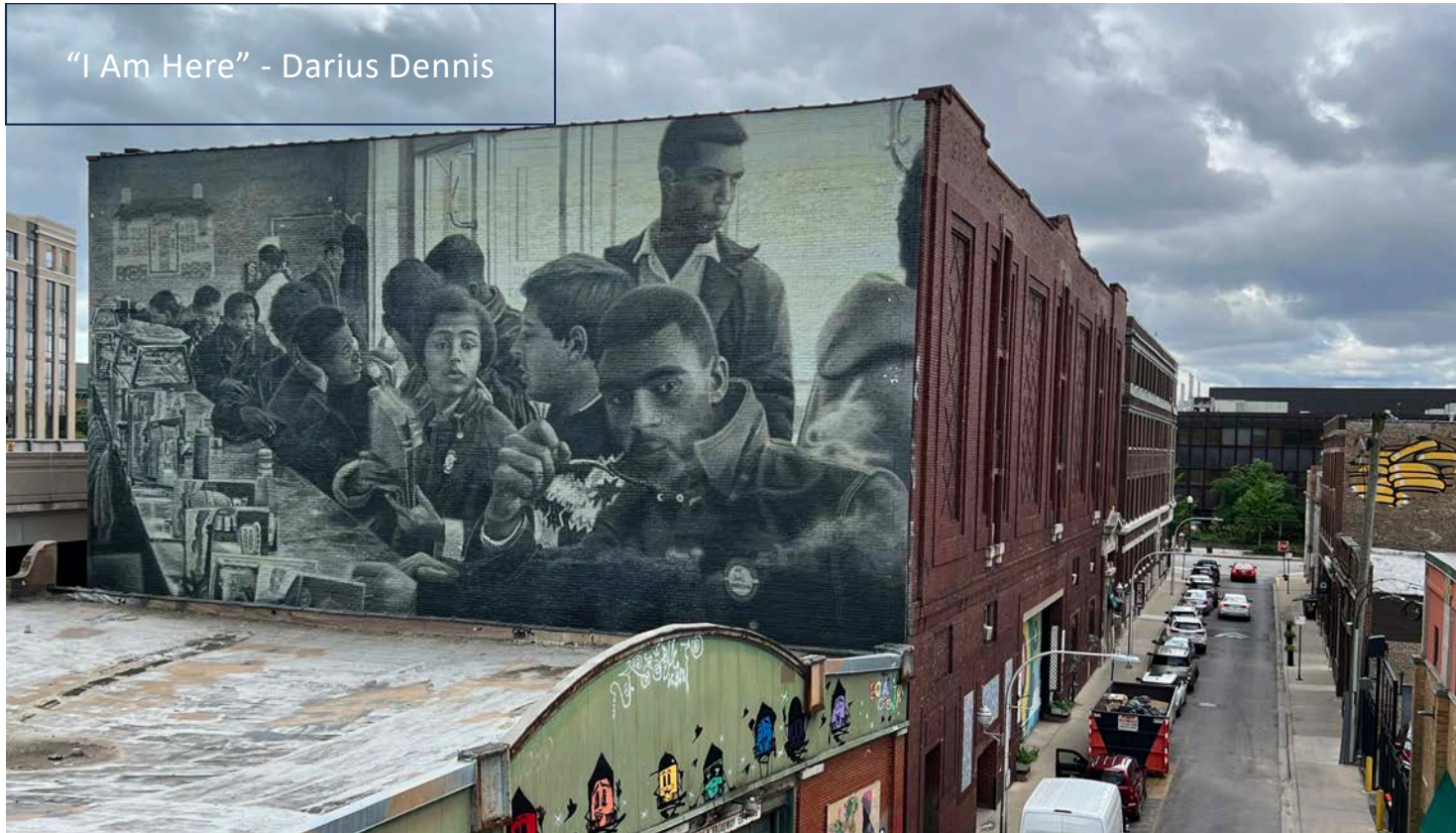
Capital Investment in Property Development Projects

- DFSS, DOHHDHA, NMTC, FHLB being pursued for funding Once each path is determined, then discuss scale of support into property developments
- Additional Capital for Medical Clinic, Outreach space, and youth services buildout needed

Clifton Ave, looking South



"I Am Here" - Darius Dennis



Cornerstone Community Outreach

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