EXPANDING THE “SUPPORT” IN PERMANENT SUPPORTIVE HOUSING

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AGENDA

• DEFINE PERMANENT SUPPORTIVE HOUSING
• PSH IN ORANGE COUNTY
• WHAT DOES SUPPORT LOOK LIKE?
• COMMUNITY FEEDBACK: WHERE ARE THE GAPS?
• HOW DO WE CLOSE THE GAPS AND MEET THE NEED?
• NEXT STEPS
• QUESTIONS/COMMENTS
PERMANENT SUPPORTIVE HOUSING  
(HUD DEFINITION)

- PERMANENT HOUSING WITH INDEFINITE LEASING OR RENTAL ASSISTANCE PAIRED WITH SUPPORTIVE SERVICES TO ASSIST HOMELESS PERSONS WITH A DISABILITY OR FAMILIES WITH AN ADULT OR CHILD MEMBER WITH A DISABILITY ACHIEVE HOUSING STABILITY.

SUPPORTIVE HOUSING  
(CALIFORNIA SUPPORTIVE HOUSING DEFINITION)

- SUPPORTIVE HOUSING IS A COMBINATION OF AFFORDABLE HOUSING AND SUPPORTIVE SERVICES DESIGNED TO HELP VULNERABLE INDIVIDUALS AND FAMILIES USE STABLE HOUSING AS A PLATFORM FOR HEALTH, RECOVERY AND PERSONAL GROWTH.

- THREE CRUCIAL COMPONENTS: THE THREE COMPONENTS THAT CREATE QUALITY SUPPORTIVE HOUSING ARE HOUSING, SUPPORTIVE SERVICES, AND PROPERTY/HOUSING MANAGEMENT. THESE THREE ELEMENTS HAVE TO WORK TOGETHER, AND ALSO WITHIN THE CONTEXT OF THE LARGER COMMUNITY.
PERMANENT SUPPORTIVE HOUSING IN ORANGE COUNTY

- Orange County Health Care Agency, Behavioral Health Services, has created **194** Permanent Supportive Housing (PSH) units throughout Orange County since 2009.
- Through the Special Needs Housing Program, $70 million allocation from the Board of Supervisors, and the upcoming No Place Like Home application, we anticipate development of an estimated additional 300 PSH units.
- Community efforts anticipate creating 2700 units of PSH.

![Diagram](image)
SUPPORT SERVICES IN ORANGE COUNTY

• **194 MHSA UNITS:** Support services are provided by the Full Service Partnerships and Program for Assertive Community Treatment Teams. (FSP’s and PACT)

• **Four Resident Clinical Services Coordinator’s (RCSC)**

• **FSP model is best practices**

• **FSP model is “whatever it takes,” field based, 24/7 availability, advocacy, intensive case management, transportation, benefits assistance, therapy, medication, housing, employment…**

• **However…..**

COMMUNITY FEEDBACK

• **Gaps:** Ongoing meetings with community partners provided insight into service gaps, and alternative models.

• **Capacity:** Health care agency agrees to provide 20 years of supportive services for NPLH units.

• **Best practices:** Consultation with California Supportive Housing (CSH)

• **Community feedback:** Community engagement meetings hosted by MHSA office
### CEMs: Results

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<tr>
<th>Service Priority Area</th>
<th>Provider</th>
<th>Community</th>
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<td>Peer / Family Support</td>
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* Only identified in CEMs (not PEI CPP meetings)

### CEM Priority Service Area: Housing

- **Focal Target Populations:**
  - Older Adults
  - TAY (Foster, LGBTIQ)
  - Vulnerable populations
CEM HOUSING THEMES

Increased Availability

- Provider CEMs: Central, South
- Community CEMs: South

Examples:
- Permanent Supportive Housing
- Affordable housing
- In all regions of county
- SUD Housing for recovery / support

CEM HOUSING THEMES

Housing Assistance

- Community CEMs: North, South

Examples:
- Rental Assistance/subsidized rent
- Eviction prevention and advocacy
- Better quality, basic standards
**CEM HOUSING THEMES**

**Supportive Services**

• Provider CEMs: Central, South

**Examples:**

• Linkage to services  
  • i.e., employment, therapy, support, case management  
• Onsite services  
• Skills building  
  • i.e., financial, life skills, empowerment and knowledge, case management

**CLOSING GAPS AND MEETING THE NEED**

• CREATE A CONTINUUM OF SUPPORTIVE HOUSING SERVICES  
  • #1 GOAL IS TO SUSTAIN HOUSING  
  • INCREASE ACCESS TO SERVICES  
  • SUPPORT INDIVIDUALS IN HOUSING AT VARIOUS LEVELS OF RECOVERY

• ALLOCATE MONEY FROM CSS FOR FY19/20  
  • FSP PER CLIENT $9,000 – 14,000 ANNUALLY  
  • ALTERNATE MODELS $7,000 – 9,000 ANNUALLY

• RFP FOR SUPPORTIVE HOUSING SERVICES (NON FSP)

• ANTICIPATING A 3 YEAR, TIME LIMITED, PROOF OF CONCEPT PROJECT.
NEXT STEPS

• COMMUNITY ENGAGEMENT AND PLANNING MEETINGS IN EARLY JANUARY 2019

• STRONGLY ENCOURAGE/WELCOME INPUT FROM PSH RECIPIENTS.

• STRONGLY ENCOURAGE/WELCOME INPUT FROM CLIENTS AND FAMILY MEMBERS.

• ADDITIONAL INPUT CAN BE EMAILED TO:
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