Past, Present and Future of Permanent Supportive Housing in Connecticut

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Permanent Supportive Housing

Affordable Housing + Individualized Supports = Permanent Supportive Housing

- Individualized Supports
  - Case Management, Peer Support
  - Employment, Education
  - Daily Living Skills
  - Social and Family Connections
  - Access to Medical, Mental Health, Substance Use Care
  - Recovery from mental health and substance use issues
Successful Permanent Supportive Housing

Diagram: 
- Case Management Services
- Property Manager/Landlord
- Housing Provider
- Tenant
7 Dimensions of SAMHSA Evidenced Based Practices Permanent Supportive Housing

- Choice in housing and living arrangements
- Separation of housing and services
- Decent, safe, and affordable housing
- Community integration
- Rights of tenancy
- Access to housing and privacy
- Flexible, voluntary, and recovery-focused services
Overview of Permanent Supportive Housing in CT

- Interagency Council on Housing and Homelessness
- Supportive Housing funded through State agencies:
  - Development funding
    - CT Housing Finance Authority
    - Department of Economic and Community Development
  - Rental Subsidy
    - Department of Housing
    - Department of Mental Health and Addiction Services (HUD funding)
  - Supportive Services
    - Department of Children and Families
    - Department of Mental Health and Addiction Services
    - Department of Social Services
Interagency Council on Supportive Housing and Homelessness

- Established in April 2004 by Governor Rowland
- The Council is composed of representatives from:
  - State of CT Office of Policy & Management (OPM)
  - State of CT Judicial Branch, Court Support Service Division (CSSD)
  - Connecticut Housing Finance Authority (CHFA)
  - Department of Children & Families (DCF)
  - Department of Correction (DOC)
  - Department of Developmental Services (DDS)
  - Department of Housing (DOH)
  - Department of Mental Health & Addiction Services (DMHAS)
  - Department of Social Services (DSS)
  - Department of Veterans Affairs (DVA)
  - Corporation for Supportive Housing (CSH)
Historical Overview of Permanent Supportive Housing in CT

- **Demonstration Program – 281 units (development)**
  - The first building, Liberty Commons in Middletown, opened in May 1996
  - Combined Low Income Housing Tax Credit and HUD funded Rental Assistance (formerly Shelter Plus Care)

- **Permanent Supportive Housing (development and scattered-site)**
  - Approximately 2500 housing vouchers statewide to house individuals and families experiencing homelessness who are diagnosed with a behavioral health disorder
  - Combines, Low Income Housing Tax Credit, Section 8, Rental Assistance (formerly Shelter Plus Care), State-funded Rental Assistance Program (RAP)
Connecticut Permanent Supportive Housing Demonstration Program

- 25-40 apartments each
- 9 projects, 281 units, 6 communities
- Coordinated financing—public-private
- Interagency Agreement
HUD Rental Assistance

- DMHAS is the grantee for approximately 1600 Rental Assistance subsidized units
- The RA funding includes single and scattered site units
- The RA funding provides housing subsidies to individuals and families
Key Champions in CT Initiatives

Demonstration Projects

- **Philanthropy** – helped gain attention of Governor
- **Governor** – formed Interagency Committee which was charged with creating a housing plan
- **Department of Mental Health and Addiction Services** – was HUD grantee for all Shelter Plus Care (now Rental Assistance) subsidies for all 9 projects
- **Department of Social Services Commissioner** – spearheaded interagency council, educated legislative leaders
Key Champions in CT Initiatives

Permanent Supportive Housing Programs

- **State of CT Governor** – made supportive housing one of his top priorities
- Commissioners of State Agencies
  - Department of Developmental Disabilities
  - Department of Housing
  - Department of Mental Health and Addiction Services
  - Department of Social Services
- **Members of the Interagency Council on Homelessness and Supportive Housing**
- Mental health and supportive housing advocates
Other Key Champions in CT

- **Interagency Council** – Permanent Supportive Housing is centerpiece of work
- **Reaching Home Campaign** – broad-based advocacy effort; has secured champions in business, philanthropic, faith and health sectors
- **Corporation for Supportive Housing** - advances solutions that use housing as a platform for services to improve the lives of the most vulnerable people, maximize public resources and build healthy communities
Permanent Supportive Housing Infrastructure

- Production & Preservation
  - 5,000+ units statewide
  - Maximize resources-federal, state, private

- Build supportive housing industry
  - 40+ service providers
  - Strengthened housing-service partnerships

- Strategic approach to advocacy/policy reform
  - Interagency collaboration and coordination
  - Reaching Home Campaign
  - Corporation for Supportive Housing
Coordinated Access Networks

- **Coordinated Access Network** responsible for coordinated entry into homeless and housing services

- **Client-centric focus** - goal is for community resources to come together around the client

- **CAN Collaboration** – CAN providers work together to coordinate homeless and housing resources to help people exit homelessness

- **Service Regions** - Department of Housing, Department of Mental Health and Addiction Services and CT Coalition to End Homelessness developed a map of eight Coordinated Access Networks
Coordinated Access Networks

Connecticut CANs
DMHAS Housing Principles

● Housing First
  – Focuses on helping individuals and families access and sustain permanent rental housing as quickly as possible
  – Provides a variety of services that are delivered to promote housing stability and individual well-being on an as-needed and entirely voluntary basis
  – A standard lease agreement to housing – as opposed to mandated therapy or services compliance
DMHAS Funded Initiatives

- **Housing Assistance Fund**
  - DMHAS provides temporary rental assistance to persons experiencing homelessness who are diagnosed with a behavioral health disorder who are on a wait list for permanent housing
  - DMHAS provides security deposit loan to persons experiencing homelessness who are diagnosed with a behavioral health disorder to secure permanent housing
CT Collaborative on Re-Entry (formerly FUSE)

- Program targets individuals, diagnosed with mental illness or chronic substance abuse, who cycle through the homeless service and corrections systems.

- Data is matched from Department of Correction (DOC) and Homeless Management Information System (HMIS) to identify individuals who cycle repeatedly in and out of correctional settings and emergency shelter system.

- Started as 30 unit pilot in 3 areas of the state, has grown to 190 units in New Haven, Bridgeport, Hartford and New London County.

- Housing subsidies provided by Housing Authority of New Haven, Bridgeport Housing Authority and the Department of Housing.
Social Innovation Fund

- Data is merged from Department of Social Services (DSS) and Homeless Management Information System (HMIS) to identify individuals who experiencing homelessness who have accrued > $20,000 annually in Medicaid costs

- 150 RAP vouchers, 10 vouchers from various other housing subsidies

- New Haven, Bridgeport, Hartford and New London
DMHAS and CSH created an Assessment & Acuity Index to assist case managers with assessing tenants’ needs, developing service plans, future housing and service needs.

Acuity Index addresses:
- Housing
- Income Benefits, Health, and Supportive Services and Resources
- Parenting and Child Services
Permanent Supportive Housing Quality Initiative

- DMHAS provides on-going trainings to case management and supervisors of PSH
- Seven Core Courses
  - Housing Based Case Management
  - Service Planning
  - Addressing Substance Abuse with PSH Tenants
  - Assessment and Acuity Scale
  - Motivational Interviewing
  - CT Fair Housing and Tenant Selection
Permanent Supportive Housing Quality Initiative

- DMHAS, CSH and a group of Peer Reviewers conduct annual reviews of permanent supportive housing throughout CT
- Each visit entails:
  - Review of Policies and Procedures
  - Chart review (current tenants, discharged tenants)
  - Review of Housing First philosophies
  - Verification of Target Population
  - Tenant Focus Group and Surveys
  - Interviews with Staff (line staff and supervisor)
Permanent Supportive Housing Quality Initiative

7 Domains:

- Facilitated Access to Housing and Services
- Tenant Involvement
- Housing Quality & Safety
- Client-Centered Services & Tenant Engagement
- Services that Promote Recovery, Wellness and Community Integration
- Focus on Housing Stability
- Building Internal Quality Assurance Practices, Key Staffing and Coordination
Tenant Satisfaction

- Tenants were most likely to agree with the statement: “I have a case manager who is helpful.” (scored 4.5 on a 5 point scale)

- Tenants were most likely to disagree with the statement “I will keep my apartment whether I participate in services or not.” (scored 3.8 on a 5 point scale –omitted questions 21 & 22 which relate to children due to data quality issues)

- Tenants most frequently (41%) reported that they would like to have contact with their case manager 4 or more times per month.
Overall Findings

- Tenants overwhelmingly provided positive feedback during focus groups

- Most agencies are serving tenants with complex needs including active substance use, untreated psychiatric disabilities, and chronic medical conditions

- Most agencies are working closely with tenants to provide supports as needed while striving to help them achieve maximum independence
Progress Report

- Production goes statewide
  - 5,000+ units
  - Half of CT communities have permanent supportive housing
    - Housing that “fits” the local community
      - Build/renovate apartments
      - Utilize existing private rental housing
- PSH programs have expanded population focus over the last 20 years
Housing and Supportive Services Make a Difference

- More than 80% of supportive housing tenants are able to maintain housing for at least 12 months
- Most supportive housing tenants engage in services
- There is a decline in the usage of the most costly services in the homeless, health care and criminal justice systems
- Nearly any combination of housing and services is more effective than services alone
Building Capacity

- **Interested Parties**
  - Service Providers
  - Housing Developers, non-profit and for-profit agencies
  - Housing Authorities
  - Property Managers

- **Methods**
  - Training – Supportive Housing Institute
  - Monitoring of SH programs
  - Direct Technical Assistance
  - Pre-development Financing
Future of Permanent Supportive Housing

- Federal and state governments in fiscal crisis
  - Permanent Supportive Housing remains a focus
  - State of CT Governor and State Agencies
  - Strong advocacy groups
  - Success of current supportive housing
  - Continuing to expand programs and initiatives