Supportive Housing Training
May 2018
9:00–1:00pm

Advancing Housing Solutions That
Improve lives of vulnerable people
Maximize public resources
Build strong, healthy communities

Your Trainers

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**Improving Lives**
- Veterans
- High-utilizers
- Criminal justice involved individuals
- Child welfare involved families
- Older adults
- Transition aged youth

**Maximizing Public Resources**
CSH collaborates with communities to introduce housing solutions that promote integration among public service systems, leading to strengthened partnerships and maximized resources.

**Supportive Housing is the Solution**
Supportive housing combines affordable housing with services that help people who face the most complex challenges to live with stability, autonomy and dignity.

**What We Do**
CSH is a touchstone for new ideas and best practices, a collaborative and pragmatic community partner, and an influential advocate for supportive housing.
Today’s Agenda

Understand where supportive housing fits in LA’s big picture

Define Supportive Housing, identify benefits and key components

Define Housing First and share harm reduction techniques

Introduce homeless services agencies and CES leads to SAPC providers in each SPA

Icebreaker!
What is Permanent Supportive Housing?

Decent, safe, and affordable community-based housing that provides residents with the rights of tenancy under state/local landlord tenant laws and is linked to Voluntary, flexible support and services designed to meet residents’ needs and preferences.

How do you describe supportive housing?

High Quality Supportive Housing

A variety of housing models exist with common factors including:

- Located in within safe neighborhoods with close proximity to:
  - transportation
  - employment opportunities
  - services
  - shopping, recreation and socialization.

- Tenants have a lease identical to those of tenants who are not in supportive housing.

- Services are voluntary and consumer-driven. They focus on ensuring that tenants can obtain and thrive in stable housing, regardless of barriers they may face.

- The housing and its tenants are good neighbors, contributing to meeting community needs and goals whenever possible.
Supportive Housing Outcomes

Does Supportive Housing Work?

Supportive Housing Outcomes

Supportive Housing Outcomes

State of the Literature 2002-2016

There are at least 32 known studies from 2002-2016 that focus on various subpopulations in supportive housing.

Supportive Housing Outcomes

Supportive Housing Outcomes

Supportive Housing Improves Lives

- Housing stability
- Employment
- Mental and physical health
- School attendance

Link to Supportive Housing Studies
Supportive Housing Generates Cost Savings to Public Systems, including decreased use of...
- Homeless shelters
- Hospitals
- Emergency rooms
- Jails and prisons

Supportive Housing Benefits Communities
- Improves the safety of neighborhoods
- Beautifies city blocks
- Increases or stabilizes property values over time

SUCCESS
- Tenants have social and community connections.
- Tenants stay housed.
- Tenants improve their physical and mental health.
- Tenants increase their income and employment.
- Tenants are satisfied with the services and housing.

Supportive Housing Models
- Single Site
- Scattered Site
**Scattered Site Model**

**How Supportive Housing Differs**

<table>
<thead>
<tr>
<th>Housing Type</th>
<th>Emergency Shelter</th>
<th>Transitional Housing</th>
<th>Rapid Rehousing</th>
<th>Permanent Supportive Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreement</td>
<td>House Rules</td>
<td>Program Agreement</td>
<td>Lease or Sub-Lease</td>
<td>Lease or Sub-Lease</td>
</tr>
<tr>
<td>Living Arrangements</td>
<td>Congregate Living</td>
<td>Congregate Living or Single Site</td>
<td>Scattered Site</td>
<td>Single or Scattered Site</td>
</tr>
<tr>
<td>Time Limit</td>
<td>Short-Term</td>
<td>Time Limited 24 months</td>
<td>Short-Term</td>
<td>Permanent</td>
</tr>
<tr>
<td>Typical Service Delivery</td>
<td>Limited access to services</td>
<td>Directed, required, intensive services</td>
<td>Tailored, tapered services</td>
<td>Tailored, comprehensive service package</td>
</tr>
<tr>
<td>Operations</td>
<td>Nonprofit Provider serves as service and property manager</td>
<td>Nonprofit Provider serves as service and property manager</td>
<td>Private Landlords with services delivered by provider.</td>
<td>Various Property Managers/Owners; Nonprofit Service Provider</td>
</tr>
</tbody>
</table>

**Targeting: Supportive Housing vs. Other Models**

- **Market Rate Housing**
  - Those who can pay market-rate rent without a subsidy

- **Affordable Housing**
  - Low-income
  - Prioritization can happen for sub-populations

- **Perm. Supportive Housing (PSH)**
  - Very vulnerable
  - Chronically homeless

- **Rapid Rehousing (RRH)**
  - Most homeless families
  - Newly homeless

- **Transitional Housing (TH)**
  - Non-disabled, high barrier
  - Desire structured treatment

- **Emergency Shelter (ES)**
  - Interim housing <30 days while waiting for housing

- **Prevention**
  - Targets those at-risk who actually enter system

**Key Components of Supportive Housing**

1. Targets households with multiple barriers
2. Provides unit with lease
3. Housing is affordable
4. Engages tenants in flexible, voluntary services
5. Coordinates among key partners
6. Supports connecting with community
1. Targets households with multiple barriers

- Chronically homeless
- Homeless
- At risk of homelessness
- Cycling through systems
- Exiting institutions

Supportive Housing is for people who are...

2. Provides unit with a lease

- Individuals subject to lifetime registration under a state sex offender registration program.
- Individuals convicted of the manufacture or production of methamphetamine in federally assisted housing.
- Housing Authorities have discretion for other issues related to criminal histories or drug-involvement.

Common Misconceptions: Section 8

3. Housing is affordable

Access through Affordability

- Rent should be no more than 30% of tenant's income

Access through Affordability

- Unit renting for $750 per month
- Tenant receives $721 in disability assistance
- Maximum tenant contribution = about $261
What are voluntary services?

Engages tenants in flexible, voluntary services

Participation in services is not a condition of tenancy.
Services are voluntary for tenants...not staff.
Staff must work to build relationships with tenants.
Emphasis is on user-friendly services driven by tenant needs and individual goals.

Housing First

Engages tenants in flexible, voluntary services

House tenants first - without preconditions
Keep them housed
Form effective service relationships

Coordinates among key partners

5
Supportive Housing

Tenants sustain stable housing

Development
Supportive Services
Property Management

Supports connecting with community

6
Units Located in Safe Neighborhoods
Transportation
Employment Opportunities
Services
Shopping, Recreation, Socialization
What is Housing First?

**Two Central Premises**

- Quick re-housing
- Housing focused, voluntary services

**Taking out the Housing Ready “stuff”**

- Connect with the potential tenant
- Get the tenant housed!
- Wraparound services

- Are you sober?
- Taking medication?
- Poor credit history?
Access to Homeless Assistance Resources

Housing First Approach

Traditional Approach

What’s the evidence?

Housing First Works!
- Housing retention rates of 75% - 80%
- Fewer hospital visits by participants
- Reduced involvement in criminal justice system
- Greater satisfaction from participants

Supportive Housing Outcomes

Cost studies in six different cities found that supportive housing results in decreased use of expensive homeless shelters, hospitals, emergency rooms, jails and prisons.

Housing for Health Outcomes (n=890)

Rand Evaluation 2017

LA County public system savings

Emergency room visits decline by 66%
Inpatient admissions decline by 76%
Use of detox residential facilities decline by 57%
More than 96% stay housed for at least one year
What are the benefits?

Client choice

“you shouldn’t be forced to do something you don’t want to do. And there’s certain groups that they’ve had in the past you know that I didn’t like and it didn’t have nothing to do with me or my situation, so I wouldn’t go. Why waste my time?”

Promoting choice in service participation promotes a sense of responsibility and increases learning.

Seven Key Principles: Housing First

- **Direct access to housing**
  - Move people into housing directly from streets and shelters without preconditions of treatment acceptance or compliance;

- **Robust services**
  - The provider is obligated to bring robust support services to the housing. These services are predicated on assertive engagement, not coercion;

- **Voluntary services**
  - Continued tenancy is not dependent on participation in services;

- **Targets most vulnerable**
  - Units targeted to most disabled and vulnerable homeless members of the community;

- **Embraces harm-reduction**
  - Embraces harm-reduction approach to addictions rather than mandating abstinence. At the same time, the provider must be prepared to support resident commitments to recovery;

- **Lease**
  - Residents must have leases and tenant protections under the law;

- **Multiple Models**
  - Can be implemented as either a project-based or scattered site model.

Client choice

“you shouldn’t be forced to do something you don’t want to do. And there’s certain groups that they’ve had in the past you know that I didn’t like and it didn’t have nothing to do with me or my situation, so I wouldn’t go. Why waste my time?”

Promoting choice in service participation promotes a sense of responsibility and increases learning.

Consumer Centered

- My dog comes with me
- Is it possible to get an extra room so my kids can visit?
- Can I look at another unit that doesn’t have stairs?
- I want to decorate my place myself

Housing First: A person centered approach that can accommodate individual needs

Me and Ana go together or we don’t go at all
Taking out the Housing Ready “stuff”

What do you need to know to house someone?

Why do you reject applicants?

How long does your process take?

Does your program serve the homeless of your community today?

Are your entrance criteria as open as possible?

When was the last time you looked at them?

Do the staff understand the applicant stress points at application and during the process?

Does an applicant get enough information to understand how this PSH will help them stay housed?

Why are leases important?

- Consumer holds a lease for the unit.
- Leases should be renewable, 12-month lease agreements, similar or the same as in the private rental housing market.

Leases in Supportive Housing

Key Practices in a Housing First Strategy

Simple application process for screening people

Housing is permanent

Standard lease agreement

Re-housing to avoid eviction is to be anticipated

Services are available to promote housing stability and well-being

Most effective with a low client-to-staff ratio

Housing not contingent on compliance with services.

Incorporates a Harm Reduction approach

HARM REDUCTION
Exercise - Introspection

1. How much time elapsed between the start of the behavior and the first time you recognized a risk or negative consequence?

2. How much time elapsed between the time you noticed the risk or negative consequence of your behavior and the first time you made an attempt to change the behavior?

3. Have you ever experienced a relapse of your undesired behavior?

Healing Arts Tools

- Trauma Informed Care
  - Motivational Interviewing
  - Reflective Listening
- Critical Time Intervention
- Consumer Choice
- Hierarchy of Needs
- Stages of Change

Philosophy

"The philosophy of harm reduction promotes and supports the right of people who use substances and engage in other risky behaviors to be treated with dignity and respect; their right to exercise self-determination related to use; and their right to expect and receive collaboration in therapeutic relationships."

- Midwest Harm Reduction Institute

Harm Reduction Defined

- Harm reduction is a set of practical strategies that reduce negative consequences of drug use, incorporating a spectrum of strategies
  - safer use
  - managed use
  - abstinence

- Harm reduction strategies meet drug users “where they’re at,” addressing conditions of use along with the use itself

- Belief in limiting risk
Harm Reduction Core Principles

- Individuals have a voice
- The focus is on reducing harm, not consumption
- There are no pre-defined outcomes
- The individual’s decision to engage in risky behaviors is accepted
- The individual is expected to take responsibility for his or her own behavior
- The individual is treated with dignity

What Harm Reduction Is NOT:

- Means of Enabling
- Anything Goes
- Hook into Traditional Tx
- Passive

Source: Heartland Health Outreach, Midwest Harm Reduction Institute

Midwest Harm Reduction Institute

Harm Reduction Intervention Examples

- Identify the harm that the use is causing
- Focus on safety
- Focus on behaviors secondary to use
- Plan an intervention strategy

- Needle Exchange
- Alcohol Monitoring
- Methadone or substitution therapy
- Use reduction
- Condoms
- Screens or rubber tubing on crack pipes
- Getting off bus two stops early and walking
- Switching timing
- Paying rent before buying substances
- Changing use patterns
- Groups or treatment w/Harm Reduction focus
Harm Reduction Strategies (Even when your client isn’t engaged!)

- Medication distribution
- Case management
- Education around safer practices
- Wrap around services
- Protective payeeships
- Outreach and engagement
- Welfare checks (scheduled)
- MH Court or Drug Court
- Coordination of primary care
- Unit inspections/Chore services
- Narcan/naloxone onsite

Substance Use Management

- What is the goal (benefit) of your use?
- What harms have you experienced in the past that you’d like to avoid?
- What action steps can you take to avoid these harms?

Increase in tolerance increases overdose risk.

Loss of tolerance increases overdose risk.

Overdose Prevention

- Learn signs to recognize overdose and overmedication
- Opioids + downers are deadly
- Protocols, training, and communication
- Good Samaritan Laws
- Seek out Naloxone/Narcan programs;
Other Harm Reduction Interventions

- Alcohol Management
- On-Site Needle Exchange
- Pipes vs. IV use
- Medication Assisted Tx.
- Harm Reduction Groups

Alcohol Management

- Alcohol treated like medication
- Avoid life threatening withdrawal
- Limit acute over intoxication
- Avoid non-beverage alcohol
- Findings are promising

Medication-Assisted Treatment: Alcohol and Opiates

Findings are promising

Medication-Assisted Treatment: Alcohol and Opiates
Tenancy Skills

- **Tenant training** about their lease: rights and responsibilities.

- Most common problems:
  - Too many guests
  - Noise
  - Non-payment of rent

- **Helpful Tips**:
  - Label TV and stereo at desired sound levels
  - Does tenant feel comfortable asking guests to leave
  - Connect resident to community activities
  - Establish a relationship with a fair housing program/legal center

Harm Reduction Resources

- Harm Reduction Coalition (Oakland) Training Institute Jan- March 2014. [www.harmreduction.org](http://www.harmreduction.org)


- Harm Reduction Therapy Center Publication: *Harm Reduction in Housing & Residential Treatment Settings: Housing First & Do No Harm*, Patt Denning, PhD and Jeannie Little, LCSW. [http://www.harmreductiontherapy.org/sites/default/files/Harm%20Reduction%20Housing%202011%20DenningLittle.pdf](http://www.harmreductiontherapy.org/sites/default/files/Harm%20Reduction%20Housing%202011%20DenningLittle.pdf)

Other Clinical Tools

- Motivational Interviewing
- Trauma Informed Care
- Critical Time Intervention
- Building Community
- Wellness Centers

Non Clinical Tools

- Money
- Natural Supports
- Landlord Partners
- Team

Housing First
How do SAPC agencies in the SPA refer clients to CES currently?
- What are the barriers?

What partnerships between SAPC providers and CES agencies currently exist?
- What are the opportunities?
- What are the barriers?

What are your next steps?
- Local CES monthly meetings (schedule)
- Ongoing trainings for SAPC staff?