

Mental Health Services Act (MHSA) HEALTH SERVICES March 3, 2021



Before we begin...

- Meeting is being recorded
- Stipends for clients and family members participating
 - Please remain online after the meeting ends
- Raise hand button test
- Quick Poll





Agenda

- 1. Introductions & Ground Rules
- 2. Overview & Purpose
 - Objectives for all 3 meetings
- 3. Background Information
- 4. Housing Continuum & Housing Assistance
- 5. Next Steps



1. Introductions



Participation Guidelines

- Please enter your questions in the chat box as we go
- There are "Q&A" slides incorporated into the presentation
 - "Raise Hand" button
 - Host will call on one participant at a time; you can then unmute yourself
- Ground Rules
 - 1. Share the airtime; allow every voice to be heard (step up/step back)
 - 2. Practice both/and thinking; consider all ideas along with your personal advocacy
 - 3. Be brief and meaningful when voicing your opinion
 - 4. Success depends on participation (share ideas, ask questions)
 - 5. Share your unique perspective and experience
- Decision points majority vote
- A recommendation will be made for public hearing, 30-day public comment and final approval by the Board of Supervisors



2. Overview & Purpose



MHSA Housing Priority

- MHSA & Three-Year Plan Priorities
- MHSA Housing Initiative Goals:
 - Identify gaps in services based on a proposed Housing Continuum of housing support services
 - Define and prioritize outcomes
 - Develop and prioritize housing strategies for future funding consideration



Meeting Objectives

- Meeting #1 (March 3rd):
 - Review background information and opportunity for additional Q&A
 - Present additional layers to the Housing Continuum to include:
 - Programs and numbers served
 - Eligibility and State requirements were applicable
- Meeting #2 (April 7th):
 - Present set of outcomes and data to support/inform decisions
 - Brainstorm additional outcomes as necessary
 - Prioritize across all outcomes to focus strategic direction
- Meeting #3 (May 5th):
 - Present set of best practice solutions
 - Brainstorm additional solutions as necessary
 - Prioritize across all strategies to recommend



Questions?

3. Background Information



MHSA Available Funding

- Inequitable impact of COVID has led to higher revenues than expected for MHSA
- <u>Ongoing</u> budget for FSP services, including supportive services and other housing supports will be increased by at least \$1M
- <u>One-time</u> funding for housing developments, system development efforts, facility renovations and technology infrastructure; amount TBD
 - As we move forward the exact amounts will become clearer and the proposed MHSA budget will be presented to the MHSARC for a public hearing, 30-day public comment process and approval.



Materials High-Level Review

- What MHSA can fund
 - Fact Sheet How Can MHSA Be Used To Support Homeless Individuals
- Q&A
 - Any additional questions



Questions?

4. Housing Continuum & Housing Assistance



Housing Continuum - example

Pre- Housing Engagement: Drop-In Centers / Shelters / Field Services / Post- Psychiatric Emergency Services, Hospitalization, Incarceration



Housing Continuum for Individuals with Mental Illness

* Based on Luke-Dorf Inc and Washington County, Oregon

REHABILITATION CENTERS

- Locked
- 24/7 Staffing
- Most restrictive
- Ideal for highly symptomatic individuals

RESIDENTIAL TREATMENT

- Unlocked
- 24/7 Staffing
- Stabilization and skills building
- Ideal for individuals out of higher level of care

RESIDENTIAL BOARD & CARE

- Unlocked; eligibility requirements
- 24/7 Staffing
- Skill building and long-term stability
- Ideal for support with basic needs

TRANSITIONAL

- Independent units
- Staffing on-site
- Intensive support services on-site
- Ideal for stable individuals needing • support

hits HOUSING • Independent

integrated housingSupport service

SUPPORTIVE

- Support service
- staffing on-site Ideal for individuals who are able to manage their needs with some support

INDEPENDENT LIVING

- Independent
 housing
- Some support
- Ideal for individuals who need minimal to no support

MORE STRUCTURED INTENSIVE CARE

LESS STRUCTURED SUPPORTS

Housing Continuum



Pre-Housing Engagement

Drop-In Centers	Shelters	Field Services	Post Psychiatric	Hospitalization	Incarceration
			Emergency Services		
Services or activities	Beds for homeless	Services delivered by	Services to individuals	In-patient psychiatric	Behavioral health
for homeless and/or	individuals	outreach teams to	following a psychiatric	stay for individuals with	services for incarcerated
those with mental	Usually for 90 days	individuals who are	emergency room visit or	acute symptoms and	and post incarcerated
illness.	or less.	homeless and/or have	hospitalization.	are a danger to self or	individuals.
Available without an		mental illness and/or	New clients referred to	others.	MH and AOD services
appointment	In County:	substance use	Access for assessment	 No discharge to 	in SMC county jail
 Range from M-F 8- 	25 MH beds	challenges.	for ongoing services and	homeless	Mental Health Court
5 to 1 x per week	221 general beds	 Services provided in community locations, 	outreach Teams ensure linkage and ongoing	 Coordinated step down plan 	and diversion with mental health team
In county:		place of residence,	peer support	 Outreach team if 	case management
• 20 sites		street or encampments	Current clients follow up services are coordinated	needed	
		 In County: 11 BHRS Outreach Teams 5 Homeless Outreach 	with care team and outreach team when needed	 In county: 34 locked beds Additional beds on case basis 	
		Teams (HOT)			

Housing Continuum cont'd



SMC Housing for Individuals with Mental Illness

Rehabilitation	Residential Treatment	Residential Board	Transitional	Supportive	FSP Supported	Independent Housing
Center		and Care		Housing	Housing	
 Locked facilities 24/7 Staffing Most Restrictive Ideal for highly symptomatic individuals In County: 64 beds Out of County: 65 beds 	 Unlocked 24/7 Staffing Stabilization and skills building Ideal for individuals leaving higher level of care ➢ In county: 29 Crisis Residential beds 37 Social Rehabilitation beds 163 AOD beds 	 Unlocked, eligibility requirements 24/7 Staffing Skill building and long-term stability Ideal for support for basic In county: 194 Beds Out of County: 129 Beds 	 Independent units Staffing on-site Intensive support services on-site Ideal for stable individuals needing support Focus on moving to permanent housing In County: 7 units, 6 bedrooms 	 Independent Integrated or dedicated housing Permanent housing Support Services on-site Ideal for individuals who manage their needs with some support In County: 165 units, 9 NPLH units pending 	 Range of housing includes Single Room Occupancy, Room and Board, Shared Housing, and independent housing Individuals receive on site and off site services based on Assertive Care Treatment (ACT) In County: 309 individuals enrolled in FSP 	 Independent housing in community May have some supports Ideal for individuals who need minimal to no support Rental assistance include mainstream, Shelter Plus Care, Project-Based Vouchers, and Housing Choice vouchers and other rental support are utilized

Housing Assistance Services

Skill Development	Housing Case Management	Rental Assistance	Homeless Assessment and Housing Referral	Housing Locator	Landlord Tenant Assistance
Instruction on daily living skills for success in housing	Services to find and maintain successful housing	Short-term and long- term assistance	Identification of housing needs and referral to available housing	Services to identify available housing	Services to educate tenants, mediate issues with landlords, identify and support landlords who rent to special populations



Pre-Housing Engagement



Drop-In Center

- Services or activities for homeless and or those with mental illness
- Available without an appointment
- Range from M-F 8-5 to 1x per week
- In County:
 - 20 sites



Shelters

- Beds for Homeless Individuals
- Usually 90 days or less
- Case Management
- Linkage to housing resources
- In County:
 - 25 beds mental health beds
 - 221 general population beds



Field Services

- Services delivered by outreach teams
- Services provided in community locations, place of residence, street or encampments
- Outreach to homeless individuals, individual with mental illness and or substance abuse disorder
- In County:
 - 11 BHRS outreach teams
 - 5 Homeless Outreach Teams (HOT)

Post Psychiatric Emergency Services

- Services to individuals following a psychiatric emergency room visit or hospitalization
- New clients
 - Referred to Access or Regional Clinic for same day assessment
 - Outreach Teams to ensure linkage
 - Peer Support
- Current clients
 - Follow up services are coordinated with care team
 - Outreach team when needed.

Hospitalization

- Inpatient psychiatric stay
- Individuals with acute symptoms and are a danger to self or others
- No discharge to homelessness
- Coordinated step down plan
- Outreach team if needed
- In county: 34 locked beds
 - Additional beds on case basis



Incarceration

- Behavioral health services for incarcerated and post incarcerated individuals.
- In County Jail:
 - Mental Health Services
 - AOD treatment program
- Mental Health Court
 - Drug Court
 - Service Connect

Housing for Individuals with Mental Illness



Rehabilitation Centers

- Locked Facilities
- 24 hour, 7 days a week staffing
- Most Restrictive
- Ideal for highly symptomatic individuals
- In County: 64 beds
- Out of County: 165 beds

Residential Treatment

- Unlocked
- 24/7 Staffing
- Stabilization and skills building
- Ideal for individuals leaving higher
 level of care
- In County
 - Crisis Residential: 29 beds
 - Social Rehabilitation: 37 beds
 - AOD Residential Treatment: 163 beds



Residential Board and Care

- Unlocked
- Eligibility requirements
- 24/7 Staffing
- Skill building and long-term stability
- Ideal for basic support
- In County: 194 Beds
- Out of County: 129 Beds

Transitional

- Independent Units
- Time limited stay
- Staffing and intensive support services on-site
- Ideal for stable individuals needing support
- Focus on moving to permanent housing
- In County: 7 units, 6 bedrooms
 - Some space in shelters

Supportive Housing

- Independent, integrated or dedicated housing
- Permanent housing
- Support services on-site
- Ideal for Individuals who are able to manage their needs with some support
- In County: 165 units
 - Pending: 29 total



Supportive Housing Financing

- Total Project Cost:
- City of RWC: \$610,875
- SMC DOH HOME/CDBG \$1,018,700
- SMC DOH HOME/CDBG \$400,000
- SMC AHF \$950,000
- CALHFA MHSA
- HCD MHP
- General Partner Equity
- Tax Credit Equity

\$950,000 \$1,973,895 \$1,334,263 \$350,000 \$2,916,537



\$9,554,270 16 units at 15%-30% AMI

Full Service Partnership Supported Housing

- Range of housing includes Single Room Occupancy (SRO), Room & Board (R&B), shared housing, and independent housing
- All receive on-site and off-site service based on Assertive Community Treatment (ACT) model
- In County: 309 individuals enrolled in FSP

Independent Housing

- Independent housing in community
- May have supports not connected to housing
- Ideal for individuals who need minimal to no support
- May have rental assistance.

Housing Assistance



Rental Assistance

- Short-Term (Often 1x only)
 - Rapid Re Housing
 - Move in Deposit
 - Moving costs
 - Utility Deposit/Payment
 - Back rent
- Permanent Assistance
 - Main Stream Vouchers
 - Project Based Vouchers
 - Housing Choice
 - Master Leasing
 - Affordability restrictions

Housing Case Management

- Independent housing with mainstream and Shelter Plus Care vouchers
- Assistance with housing applications, securing documents, interview preparation
- Tracking housing openings
- Provided by FSP, Regional BHRS case managers, peer employees and peer volunteers

Skill Development

- Independent living skills
- Wrap for housing
- Occupational therapy for independent living skills
- Peer coaching

Homeless Assessment and Housing Referral

- Housing Locator service
- Core Service Agency
 - Coordinated Entry System (CES)
 - Homeless Assessment
 - Housing Referral System
 - Rapid Re-Housing
 - Rent and Utility Assistance
- Basic Needs
- Information and Referral

Landlord Tenant Assistance

- How to be a good tenant
- Eviction prevention
- Fair Housing
- Landlord/ Tenant Mediation
- Outreach to potential landlords
- Landlord support for special needs populations
- On site Resident Services Coordinator

Collaborative Planning

- Continuum of Care
- Housing Operations and Policy (HOP) Committee
- Housing Our People Effectively (HOPE) Interagency Council (IAC)
- Housing Our Clients
- Department of Housing
- Human Service Agency
- County Health
- Health Plan of San Mateo
- Non-Profit Housing Providers
- Non-Profit Mental Health Housing and Service Providers
- Consumers and Family Members

Future Developments & Events

- County to purchase and renovate hotels for homeless and seniors
 - Towne Suites: 95 units for seniors
 - Pacific Inn: 74 units
 - Coastside Inn: 52 units
- New source of rental assistance funds
 - Rent and utilities: current and in arrears



Questions?

BEHAVIORAL HEALTH & RECOVERY SERVICES

5. Next Steps



What additional information do you need?

- Type in chat
 - Data, programs/services, other?
- Email Judy Davila: <u>c_jdavila@smcgov.org</u> or <u>MHSA@smcgov.org</u>





THANK YOU!

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www.smchealth.org/MHSA

Meeting Feedback: <u>www.surveymonkey.com/r/HousingTaskforce</u>



SAN MATEO COUNTY HEALTH BEHAVIORAL HEALTH & RECOVERY SERVICES