

Mental Health Services Act Planning Housing and Supports Committee

Revised Minutes for February 25, 2005

Present: Carla McSweeney (MHCAN), Julie Conway (County Planning), Robert Overbury (Front Street, Inc.), Bobby Spurgeon (MHCAN), Geraldine Drager (SCAP), Inbal Yassur (FSI), Adeline Davis (SCCCC), Ann Butler (FSI), Paul O'Brien (SCCCC), Karen Dawson (SCCCC), Ivan Diamond (SCCCC/CSS), Rain Urbanski (SCCCC/T-House), Nora Krantzler (HPHP), Yana Jacobs (MH), Richard Nanas (FSI), Jain Whaley (consumer), Betsy Clark (SCCCC)

Others on interest list: Holly Weimer (consumer), Francie Newfield (HRA Adult Services)

Major Issues and Needs Identified:

- **Housing stability.** Consumers noted that the importance of a stable home and meaningful work cannot be overestimated.
- **Regional gaps in housing and services.** In the San Lorenzo Valley, there is no site-based subsidized housing; only three board and care facilities. Services are seriously under-funded in South County.
- **Insufficient funding for supportive services throughout the system.** We are getting more people into housing, but there's little funding for support and no system for coordination of services.
- **High caseloads/not enough staff.** Can result in people failing in housing—this was noted in particular for young people coming from treatment facilities who have had no experience living on their own and are not prepared.
- **Need for separation of coordinator and property management role.** Property Management is often (maybe usually) the first point of contact but there needs to be a coordinated way to hand service-related issues off to the appropriate people.
- **Communication between coordinators and property managers.** Often the property manager must communicate with many different coordinators and supervisors. For example, in an 8-bedroom house, a site manager may have to communicate with more than 15 people providing services. It is hard to know with whom and when the manager should be communicating.
- **No resources for people who are meds only--** People who stop taking their meds can go a long time without help and end up in a crisis situation when it could be avoided if there was a way to access services sooner.
- **Step-down from social rehab to independence.** Many people are moving into independent living without the support they need to maintain

their housing. Often, people who move into permanent housing (for instance, from social rehab) lose their community—peers and staff. Consumers need consistency of support/coordinator/team. Many social rehabs do have systems in place (classes, outreach, Community Connections services) to help transition people into independent housing but consumers often must move out before they are ready for fear of losing a Sec. 8 opportunity. “Community Integration Specialists” could help ease the transition.

- **Need for more housing and more subsidy.**
- **Need for more programs like Puentes’s Rent Plus,** to bring landlords along. Allows program to share the risk with housing providers. The program backs potential tenants up with services, emergency contact and a rent guarantee.
- **Shared housing.** The group explored why some shared housing works and some doesn’t. When it works it tends to have these characteristics: intensive support, no active substance use, accessible community services, easy for coordinators to visit. Cannot put people into shared housing if they are actively using-- it doesn’t work.
- **Emphasis on crisis management.** With fewer resources available for services and larger caseloads for coordinators, tenants may not get the minimum level of support needed to maintain their housing.
- **Threatened closure of T-House and Opal Cliffs through budget cuts.** We need to evaluate how well we are using our resources, think about them in new ways, and ask: what needs do they serve? What resources are we not using, or under-using? Use the opportunity to look at the housing system as a whole.
- **Lack of elderly /senior designated beds.** There is a statewide problem with an increasing need for residential beds for consumers over 59 years which results in agencies consistently having to ask for age exceptions. In Santa Cruz County there are only 6 licensed residential beds accepting SSI seniors.

What Works/Ideas from Initial Brainstorming:

- **Community building.** A whole-team approach can build a sense of community.
- **Central coordination at a site,** such as at Willowbrook and Front Street. The down side is that when people leave, they lose their coordinator.
- **Clear and separate roles for services and property management.**
- **Aftercare stability.** Providing support, consistency and follow-up in the transition from higher levels of care (e.g., board and care or social rehab) to permanent, independent housing. One suggestion was creating a transition team that could provide support by teaching cooking and other life skills, allowing time for consumers to learn, fail, and learn again, and

still maintain their housing. Put the resources into the front end (prevention) rather than at the back end (crisis).

- **Consumer-driven services.**
- **Peer counselors.** Discussed idea of a housing services model in which a few clinical staff supervise teams of peer support. Clinicians may not want to get their “hands dirty,” and peers will. One suggestion presented was to have teams comprising one supervisor and ten peer counselors in North and South County to address the unique needs of each region.
- **Responsiveness and a plan for back-up.**
- **Variety of different housing types.** One size does not fit all; need a menu of different housing options to allow consumers to choose the best fit.
- **No “gates.”** Provide services that are integrated and easy for consumers to access.
- **Don’t lose property!** Preserve what we have.

Next Steps

- Review these ideas and make any additions/complete the brainstorming process. Include discussion of specific populations (age groups, regional and cultural issues, other?).
- Craft specific recommendations & prioritize them based on the identified needs and ideas and using AB2034 best practice models, and identify which AB2034 outcomes would be achieved and which populations would be served.
- Two meetings scheduled, both at Front St. Inc.: Thursday March 10 from 1pm-2:50pm and Wednesday March 16 from 1pm-3pm. Consumer input will be provided at the March 16 meeting.