

**DIGEST OF MODEL
PROGRAMS
FOR THE HOMELESS:**

**RURAL OUTREACH
and ENGAGEMENT
and
HOUSING FIRST**

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Prepared by
Peggy Robertson
and
Diana T. Myers
Diana T. Myers and Associates, Inc.
in coordination with
John Ames, State Housing Specialist
Office of Mental Health and
Substance Abuse Services

Introduction

The Digest of Model Programs for the Homeless illustrates the innovative and creative ways in which different agencies are pooling resources and collaborating to reach out to homeless individuals with mental illness, engage their trust, and expand their housing options.

Gathering research for the PATH-Funded Rural Models and Housing First Programs involved speaking with over a dozen PATH Coordinators and Directors of Homeless programs in different states. The models that are profiled document practices in the field in ways that speak to others working towards the same goal.

In every case, the people who described their program placed great importance on: focusing on individuals as people and recognizing the uniqueness of each individual; emphasizing empowerment and self-determination for homeless individuals; delivering outreach services with an attitude of respect, hope, kindness and advocacy; and being as flexible and creative as possible with limited resources.

Although the problems of homelessness are complex and challenging, it is extremely gratifying to know that there are so many people in urban and rural areas across the country who are developing creative solutions to assist homeless individuals with mental illness.

Special thanks go to the individuals who took the time to describe their programs for this Digest. Each and everyone is a hero. The work they do is not glamorous, it is impressive. They are to be applauded for their incredible commitment and dedication to trying to prevent and end homelessness.

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RURAL OUTREACH AND ENGAGEMENT PROGRAMS

A compilation of PATH funded Rural Models that are successful in Outreach and Engagement designed to end homelessness among those with serious mental illness. These programs reach out to chronically homeless individuals.

WHAT IS OUTREACH AND ENGAGEMENT?

Outreach is the initial and most crucial step in connecting a homeless person to services and is directed towards locating homeless individuals who are not otherwise connected with the system. The goal of engagement is to build a long term trusting relationship between the outreach worker and the homeless individual. *The engagement process varies in length of time.*¹

Outreach and engagement practices seek to build a relationship of trust and care with those who present unusual challenges and are the most difficult to serve. The process can take days, weeks, months, even years. The outreach worker must be present in a variety of ways with the individual, in brief moments and over long hours, on an unpredictable schedule, as the person is ready. Outreach and engagement begins with an approach to the homeless person based on an affirmation of our common humanity and the possibility and potential for relationship.²

¹ Definition adapted from *The Village Integrated Service Agency, National Mental Health Association of Greater Los Angeles*

² By Craig Rennebohm, *Mental Health Chaplaincy, Training Curriculum for HCH Outreach Workers, National HCH Council, Inc., January 2002*

PATH-FUNDED RURAL PROGRAMS – KINGMAN, ARIZONA

Provider: Mohave County Mental Health Clinic

Brief History and Description of Provider:

- Mental Health Clinic over 20 years old
- Clinic has a regular MH Department; provides outpatient and in-patient mental health services
- PATH program, only a few years old, started full time in summer of 2004

Demographics:

- Growing small rural town off of Route I40 and Route 66; transient populations
- Program serves Mohave County consisting of 3 cities; one very rich; a casino town; and one with a lot of working poor; enclaves of homeless in cities and desert

Staffing:

- PATH Coordinator, funded through PATH; there is a small amount of funding for another staff person but position has been unable to stay filled

Unique Feature of Program:

- Staff person, who is housed at the Mohave County Mental Health Clinic, basically works out of the PATH-funded car (PATH pays for the gas) and travels around the area doing outreach; carries around lots of sleeping bags and camping gear
- PATH Coordinator has incredible commitment and dedication and is excellent at establishing a rapport with clients and getting them to open up to her

Highlights of Successful Strategies for Outreach and Engagement:

- Has an excellent relationship with the emergency room and the social services department at the hospital
- Outreach consists of introductions and taking it very slowly in order to successfully build up trust
- Provides clients with water, juice, food, clothing, emergency services
- Transports clients in PATH car

Key Factors that Promote Successful Program:

- Helps clients through the process of obtaining Social Security Income
- Helps get clients housed
- Small amount of PATH funds for first month's rent; utilities; security deposit

Non-PATH Funded Services and Available Housing

- None

Barriers to the Program:

- No healthcare available for homeless individuals, only the E.R.
- Because of "No Trespassing" signs put up by police and if clients in the deserts or the streets get busted, they move around and are hard to find
- There are not enough shelters
- Need more staff
- Lack of follow-up by clients for appointments and getting services
- Lack of transportation
- One city in Mohave County denies there is a homeless problem

In Conclusion:

- A few people recently got on SSI and moved into their own apartments

Contact Information:

- Name: Mindy Wright
- Title: PATH Coordinator
- Agency: Mohave Mental Health Center
- Address: 3503 Western Ave.
Kingman, AZ 86401
- Email: wright.mohave@narbha.com
- Phone: (928) 757-8111 X2215

PATH-FUNDED RURAL PROGRAMS - SAN LUIS OBISPO, CALIFORNIA

Provider: San Luis Obispo County Mental Health Department

Brief History and Description of Provider:

- In 1989, Tom Beem, the only person on staff, began the program to end homelessness with the Mental Health Department (MHD)
- Program has grown dramatically; hopes to expand services to provide 24 hour coverage
- MHD partners with Transitions Mental Health Association, a community based nonprofit agency founded in 1979, dedicated to providing quality services to youth and adults with mental illness in San Luis Obispo and Santa Barbara Counties

Demographics:

- Wealthy rural area
- Focus on the hard to reach homeless population with severe mental illness

Staffing:

- MHD has a full time supervisor, full time legal person; full time Meds Specialist; part time public health nurse; D & A trained nurse; D & A trained therapist
- Transitions Mental Health Association has 4 Outreach workers; 1 housing specialist; 1 supervisor; 3 part time drivers

Unique Feature of Program:

- Provide outreach and engagement to the toughest cases of the homeless population, (those who can't even use phones)
- Staff gets involved in lives of homeless individuals and gets them employment as quickly as possible
- Reengaging homeless in society through persuasion and "seduction", which results in a status change in their lives, making it easier for them to find and stay in housing.

Highlights of Successful Strategies for Outreach and Engagement:

- Three part time drivers (former mental health clients) go out searching for individuals under bridges, in soup kitchens, in homeless shelters
- Referrals come from everywhere including the health department, police reports
- Staff is relentless about establishing relationships with people, getting them jobs, providing motivation and focusing on what an individual is capable of doing
- Drivers ride around in cars full of tents, food, propane, sleeping bags
- Staff finds out what the client wants to do, boosts the client's ego whenever possible, does whatever it takes to get clients up and running with jobs

Key Factors that Promote Successful Program:

- An incredibly dedicated and driven staff
- Participate in the AB-2034 Program which is authorized by California legislation to provide housing and intensive support services to individuals with serious mental illness who are homeless

The AB 2034 Training and Technical Assistance Project assists counties to implement AB 2034 and meet the goals of reducing homelessness, especially incarcerated and hospitalized adults with psychiatric disabilities who are homeless. Visit www.AB34.org to learn more about the project which: works with AB 2034 counties to assess training and technical assistance needs; develop targeted responses to needs; work with pilot counties to identify capacity for technical assistance and training; develop additional capacity.

Non-PATH Funded Services and Available Housing

- The Growing Ground, a program within Transitions Mental Health Association, helps train individuals and hires them out
- The Department of Mental Health has 14 beds and 40 ancillary beds; the rest of the clients are in apartments

- DMH does not subsidize rents

Barriers to the Program:

- Transportation to the scattered sites throughout the area
- The exorbitant cost of housing
- Staff turnover
- Physical and mental health care issues

In Conclusion:

- Primary focus is to get homeless individuals employed because employment will allow clients to get and maintain housing; 80% of the clients are housed
- Staff is very aggressive and reaches out to most difficult cases
- Program has had tremendous growth and draws on many different resources

Contact Information:

- Name: Tom Beem
- Title: Homeless Coordinator
- Agency: San Luis Obispo County Mental Health
- Address: 2178 Johnson Avenue
San Luis Obispo, CA 93401-4535
- Phone: 805-788-2038; 805-440-4610
- Email: tbeem@co.slo.ca.us

PATH-FUNDED RURAL PROGRAMS - BILLINGS, MONTANA

Provider: South Central Montana Regional Community Mental Health Center

Brief History and Description of Provider:

- Agency has been in service about 35 years; began as a Mental Hygiene Clinic, then became incorporated as a non-profit organization
- PATH program began in mid-1980's
- Provides outreach and engagement; referral and linkage advocacy services

Demographics:

- Billings, in Yellowstone County, has approximately 100,000; homeless individuals with mental illness are served
- Population represented by Caucasians, Hispanics and Native Americans; includes a large percentage of young men and veterans
- Many individuals come from New York and California end up in Montana because geographically it is a midway, touristy type place

Staffing:

- Three people are on the PATH team including the PATH Team Lead
- Staff works exceptionally well as a team

Unique Feature of Program:

- Each member of the team has unique skills (one has medical background, one fluent in Spanish, one has Native American background) which blend to make them highly competent and makes the program better able to serve wide variety of participants
- Team meets once a week to review cases and services needed, catch up on participant logs, paperwork
- Team supports each other and keeps the morale up among themselves, and in turn instills hope and faith in their participants

- Great empathy for participants and understand how participants are perceived by the community
- All team members get trained in everything and have a total understanding of the program
- Agency plans to network and share with other counties in the state

Highlights of Successful Strategies for Outreach and Engagement:

- Team has a once a week field day where they use their own vehicle to seek out participants by rivers and bridges, etc.
- Team understands vulnerabilities and trauma of participants and builds trust by engaging participants when they are ready

Key Factors that Promote Successful Program:

- Establish excellent relationships with key agencies such as jails, hospitals, police, Social Security Administration, shelters, temporary employment program, local landlords
- Learn about, and stay in close contact with other agencies
- Works with Deering Clinic, provider of healthcare for the homeless, which is located 3 blocks from 2 different shelters; clinic does outreach and offers services twice a week to the Drop-In Center, a facility run by the Center
- PATH liaison accompanies participants to other agencies that provide services in order to facilitate access and insure support for participants
- Center has established excellent public relations in the community and beyond
- Team meets with other agencies to learn what other services are available for participants and educates other agencies about their services and the participants they serve
- Homeless individuals find team members to be very approachable

Non-PATH Funded Services and Available Housing:

- Services are provided by Mental Health Center, Day Treatment Site, Community Homeless Drop-In Center (where PATH team is located), Residential Services, Chemical Dependency Services, all funded by the Center
- Some agencies match with rent and security deposits

Barriers to the Program:

- Not enough adequate housing; some participants end up staying in shelters or moving to other communities or back on the streets
- Funding is limited

In Conclusion:

- Provider agency is highly successful because they are creative and use resources wisely

Contact Information:

- Name: Carmen Gonzalez
- Title: PATH Team Leader
- Agency: South Central Montana Regional Community Mental Health Center
- Address: 1245 North 29th Street, P.O. Box 219
Billings, MT 59103
- Phone: 406-252-5658 X696
- Fax: (406) 252-4641

PATH-FUNDED RURAL PROGRAMS – FARGO, NORTH DAKOTA

Provider: Southeast Human Service Center

Brief History and Description of Provider:

- A regional human service center operated by the state of North Dakota located in a metro area of a SMSA population in 2000 of 174,367 people
- The agency as a whole provides services to a five county area that include chemical dependency treatment (outpatient) adults and minors, psychiatric services adults and minors, case management adult and minors, developmental disability services, infant development, therapy services adults and minors, and vocational rehabilitation
- There are 7 other regional human service centers across the state, with each having on PATH funded position

Demographics:

- Service area is rural, with agriculture being a mainstay. At this time PATH outreach does not go beyond the metro area
- Service providers from Southeast do go to every county in the region and work with an individual or family even if they are homeless
- There are no homeless shelters beyond the metro area

Staffing:

- The only PATH funded position is the PATH Coordinator

Unique Feature of Program:

- PATH Coordinator participates in city and statewide coalitions that focus on homeless issues and funding for housing projects
- Statewide coalition just formed a new subcommittee that will work with Native American Reservations in each region to develop relationships, educate in regard to resources, and assist in determining their need for housing. This hopefully will begin to expand PATH services into the more rural parts of the state.

Highlights of Successful Strategies for Outreach and Engagement:

- The PATH Coordinator works with adults, but will also work family systems
- Provides outreach to shelters in the area, the homeless clinic, hospitals, and from any other referrals
- Focus on helping the person navigate the system to obtain needed resources (food stamps, housing, clothing, deposit assistance, etc.)
- PATH Coordinator is "front-door" to Southeast Human Service Center and helps homeless individuals obtain on-going services

Key Factors that Promote Successful Program:

- Recognizing the specific needs of the target population
- Partnering with other service providers to expand to more rural areas

Non-PATH Funded Services and Available Housing:

- The services listed above that Southeast Human Service Center provides are available to anyone, regardless of housing, on a sliding fee scale

Barriers to the Program:

- Lack of staff and resources
- A number of persons and families are not being reached in the rural areas and in the metro area community, and relationships continue to be developed with community providers to educate regarding the services available

In Conclusion:

- Need to pool resources to provide services to homeless individuals in rural areas

Contact Information:

- Name: Laura Bauer
- Title: PATH Coordinator
- Agency: Southeast Human Service Center
- Address: 2624 9th Avenue, S.W.
Fargo, ND 58103
- Phone: 701-298-4522
- Email: 85baul@state.nd.us

PATH-FUNDED RURAL PROGRAMS – SIOUX FALLS, SOUTH DAKOTA

Provider: Southeastern Behavioral HealthCARE

Brief History and Description of Provider:

- Community Support Services, one of three branches, is the outpatient mental health center which serves the severely and persistently mentally ill (SPMI) and administers the homeless program
- Southeastern Behavioral Health CARE, or CARE, has been in existence for 52 years; the homeless program began 16 - 17 years ago

Demographics:

- CARE serves a four county area on the east river side of South Dakota, primarily in Minnehaha County
- Approximately 800 individuals are served a year; there is a waiting list that has gone up to 180
- Serves homeless individuals and individuals who are at risk of homelessness

Staffing:

- One CARE Intake/Homeless Outreach Coordinator and two other people work in the homeless/outreach program

Unique Feature of Program:

- Target population is very diverse, including immigrants from countries such as Ethiopia and Sudan; there is a large Native American population
- Staff are very mindful of, respect, and learn about the cultural differences
- Staff receive training and education and uses the Motivational Interviewing Technique, a method that helps to gain trust

Motivational interviewing is characterized by a style or spirit that is essentially collaborative, respectful and guiding as opposed to confrontational, authoritative and instructional. Core principles

include the need to express empathy through accurate reflective listening that understands the client's perspective without judging it or necessarily agreeing with it. Reasons for change are elicited from the client rather than argued for by the interviewer.

Resistance in the interview is seen to a large extent as a product of the interaction and not an intrinsic trait of the client. Seen in this way resistance is a signal that the counselor should respond differently rather than argue more forcefully or be more coercive.

The counselor believes that the client has the ability to change and is supportive of self-efficacy.

<http://www.sahealthinfo.org/motivational/index.htm>

Highlights of Successful Strategies for Outreach and Engagement:

- Works well with other agencies, avoids duplicating services
- Current staff cannot go out at night because of safety factors; Salvation Army has an emergency shelter and a van that goes out at night to provide soup, blankets, sandwiches, etc. There are two other shelters within the Sioux Falls community
- Collaborates with shelters, drop in center, Salvation Army, Homeless Coalition, parole board, Lutheran Social Services, local community agencies and landlords and coordinates with a number other statewide agencies to assure continuity of care when individuals leave the catchment area.
- Staff go out on the streets, do walks, meet and visit with people and build trust
- Staff extremely outgoing and willing to go above and beyond
- Staff do outreach with, and educate consumers in a non threatening way, are visible, and provide education for the community
- Philosophy is "never turn anyone away"

- Staff have built a number of bridges; they connect with the penitentiary prior to discharge for pre-discharge planning and link individuals to services they will need when they get out of prison

Key Factors that Promote Successful Program:

- Word of mouth about the program is extensive and effective; the Homeless Outreach Program does a lot of public relations such as calling, checking in with individuals, etc.
- Effective collaboration with other agencies
- Stresses importance of understanding, being aware of, and respecting the cultural differences of the individual populations; for example, the Native American population offers resistance because they do not consider themselves homeless when several families live together on a reservation
- After outreach, engagement and finding housing, there is at least a 70% rate of keeping people housed

Non-PATH Funded Services and Available Housing:

- Shelter Plus Care housing (incredibly successful) funded through state consortium
- Sioux Falls Housing Authority is willing to try the concept of housing first and has identified 2, possibly 3 slots for housing first within Shelter Plus Care program

Barriers to the Program:

- Lack of money and matching funds
- Lack of reimbursement
- Waiting lists for case management
- Lack of programs for people with co-occurring disorders
- Lack of discharge planning
- Lack of transportation
- Lack of health and dental health care
- Lack of housing options

In Conclusion:

- Staff very motivated to learn new methods to help reduce homelessness, tries to stay well informed
- Staff constantly building bridges with other agencies
- "We take care of our own" - Midwest type of mentality gives the impression that in very rural areas of the state very few are homeless
- As a rural state, South Dakota was allotted a certain amount of money from the federal level which has not increased in 15 years; the homeless program depends on being a part of Southeastern Behavioral HealthCare's CARE program in order to balance their budget
- CARE is viewed as a huge resource in the community

Contact Information:

- Name: Kari Benz
- Title: CARE Intake/Homeless Outreach Coordinator
- Agency: Southeastern Behavioral HealthCare
- Address: 2000 S. Summit Avenue
Sioux Falls, SD 57105
- Phone: 605-336-0503
- Email: karib@southeasternbh.org

PATH-FUNDED RURAL PROGRAMS – BRATTLEBORO, VERMONT

Provider: Brattleboro Area Drop-In Center

Brief History and Description of Provider:

- Day Shelter for individuals who are homeless and at risk of becoming homeless
- Established in 1988, providing PATH services since 1991
- Due to sharply increased homelessness in southeastern Vermont, and lack of adequate and appropriate shelter beds, the Center was open 24/7 from 1/9/04 through 6/13/04 providing 834 bednights to people with no other shelter options

Demographics:

- The Drop-In Center serves a two and one-half county area in southeastern Vermont: 2098 square miles, 22% of state; Windham County, Eastern Bennington County (and Windsor County for the chronically mentally-ill). Vermont and NH
- Population of 114,543, 18.5% of state
- Serves homeless and at-risk individuals with mental illness with or without co-occurring disorders; most individuals have some type of trauma issues

Staffing:

- Executive Director: does outreach, supervises case management and works directly with consumers
- Case Manager/Peer Community Outreach Worker: carries an active caseload of 40, and a follow up caseload of 100, both singles and families
- Night Outreach Volunteer: provides food, blankets, referrals, transportation, etc. after hours and on weekends year round, is usually the front line of engagement
- Teen Outreach Worker: does part time outreach to homeless and at risk youth, coordinating with local youth programs and services
- Food Shelf and Volunteer Coordinator: provides emergency and supplemental food to over 1700 households; recruits and trains volunteers for the Center

Unique Feature of Program:

- Most of the staff and half of the Board have been homeless, are consumer/ survivors, understand what it is like to be homeless, can build trust easier in outreach and engagement process.
- Paul, the Night Outreach Volunteer, is well known; people in Washington State were told that if they are ever homeless in Vermont they should look him up

Highlights of Successful Strategies for Outreach and Engagement:

- Incoming 800 phone number reachable from anywhere in U.S. with 24 hour access
- Peers do consumer directed outreach and engagement, "people first" philosophy
- Philosophy of respecting consumer choices and focusing on positive assets
- Developed Trauma Policy and trained staff and volunteers to be aware of trauma issues, needs of population, and triggers in daily ongoing interactions
- Provide quick access to food and hot beverages, clothing, blankets, basic first aid, transportation, shelter, immediate basic needs - help first, ask later
- Raised community awareness by taking a reporter out on the streets

Key Factors that Promote Successful Program:

- Staff safety issues such as night outreach volunteer being properly equipped with: a cell phone; safety vest; outdoor gear; security barrier in vehicle
- Staff developed good relationship with local all night coffee stops and service stations to gain quick access to donated food and beverages in emergency situations in outlying areas
- Works well with, and provides training to local Law Enforcement agencies and other Emergency Services Providers
- Use of a data management information system to track many facets of the work
- Close working relationship with statewide consumer organizations and Community Mental Health Center to share funding; works with crisis team, and collaborates on grants and projects; close involvement in local and state Continuum of Care groups

- Awareness and training around concept that when "trauma survivors" end their period of homelessness, they become more vulnerable to relapsing as they no longer live in "crisis mode" and are facing unresolved issues

Non-PATH Funded Services and Available Housing:

- Assistance with security deposit
- Transporting people to shelters
- Grant for OSP to train people in computer skills
- Brattleboro Housing Authority has 75 Section 8 vouchers for non-elderly disabled - could use another 200
- Relationship with Community Land Trust - purchased and renovated apartment buildings, some project based, some affordable
- Opened 2 SRO's - really nice apartments
- Public developer - not looking to cut corners or make money - always affordable

Barriers to the Program:

- Lack of adequate funding for program, staff, mileage. Currently receive a little more than \$48,000 which pays part of executive director's salary, part-time case manager's salary, mileage, 800 number, pager, cell phone, etc.
- Need for ongoing community education to change community reactions to consumer population
- A large geographic service area, not always easy to travel in winter
- A rural homeless population that at times doesn't want to be "found"
- Sometimes homeless individuals and families lose housing because they burn bridges with the landlord; program called "Bridges" is available to help

In Conclusion:

- Homeless people are survivors, who deserve our respect for their abilities and the unimaginable challenges they face
- Always put people's safety, physical and mental, first and work to earn trust

- Provide people with choices, and with the tools of self-help - the facility is used for a Recovery Education program, parenting classes, a HIV/AIDS outreach clinic, and other needed services
- Wrap PATH into seamless delivery system, merging many agency programs and services so consumers are perceived the same as others using agency services.
- 75% of the individuals that get engaged stay engaged and at least half get housing and stay in housing
- Understand that when trying to engage people, give them the choice to move at their own speed
- Brattleboro is truly a community that believes in collaboration

Contact Information:

- Name: Melinda Doyle-Bussino
- Title: Director,
- Agency: Brattleboro Area Drop-In Center, Inc.
- Address: 60 South Main Street
PO Box 175
Brattleboro, VT 05302
- Phone: 800-852-4286; Reception 802-257-5415; Office 802-257-2005,
- Email: badic@together.net

COMMON THEMES IN PATH-FUNDED RURAL PROGRAMS FOR SUCCESSFUL OUTREACH AND ENGAGEMENT

- Outreach staff understands that homelessness is caused by a combination of structural barriers and personal vulnerabilities
- Outreach staff treat people with dignity and respect
- Outreach staff is sensitive to cultural and ethnic diversity
- Outreach staff doesn't engage individuals until they are ready
- Staff is dedicated and committed
- Agencies collaborate and pool resources with others
- Agencies demonstrate commitment to education and training
- Agencies engage in good public relations with the community

COMMON BARRIERS

- Inadequate funding
- Inadequate staff
- Lack of transportation
- Lack of housing
- Lack of healthcare

HOUSING FIRST PROGRAMS

A compilation of Housing First Models designed to end homelessness among those with serious mental illness. These programs provide immediate housing and then offer supports and treatment to begin the process of recovery and integration into the community.

WHAT IS "HOUSING FIRST"?

The "Housing First" approach is to move homeless individuals with serious mental illness into permanent, affordable housing as quickly as possible and to support them with relevant services, in order to achieve long term stability.

The prevalent strategies are to:

- Develop outreach systems to engage homeless people who are not in shelters and connect them to housing.
- Develop systems to engage homeless people who are in shelters and connect them to housing.
- Develop community-based response systems that intervene with urgency to incidents of homelessness.³

³ Definition by the Committee to End Homelessness, King County, Washington

Programs In Other States

HOUSING FIRST PROGRAM – ARIZONA

Name of Program: RAPP Project CONNECT-SPC-3

County/Geographic Area Served: Tucson Metropolitan/Pima County

Project Sponsor: Community Partnership of Southern Arizona

Project Partners: RAPP Project CONNECT, Community Partnership of Southern Arizona, City of Tucson

Target Population: Homeless Adults with Serious Mental Illness

Outreach Methods Used to Engage Program Participants: Outreach to homeless camps, downtown streets, drop-in centers, referrals from other agencies, community at large.

Housing Information:

- Type of Housing Provided: Scattered site, tenant-based rental assistance apartments.
- Name of Agency(ies)/Program(s) providing the Housing: RAPP Project CONNECT
- Target Number of Individuals to be Housed: 9
- Number of Individuals Housed to Date: 7

Services Provided:

- Through PATH funds: Outreach, psychiatric services, medications, medication monitoring, case management, and acu-detox treatment, (an acupuncture technique)
- Through Other Sources: Rental assistance

Funding Sources:

- For Housing: HUD
- For Services: PATH, Community Partnership of Southern Arizona

Contact Information:

- Name: Sharon Kraych, R.N.
- Title: Clinical Supervisor
- Agency: La Frontera Center, Inc. RAPP Project CONNECT
- Address: 102 E. Council St. Tucson Arizona 85701
- Phone: (520) 882-8422
- E-mail: skraych@lafrontera.org

HOUSING FIRST PROGRAM - CONNECTICUT

Name of Program: Shelter Plus Care

Project Sponsor: Connecticut Department of Mental Health and Addiction Services

County/Geographic Area Served: Covers the entire state of Connecticut

Project Partners: Extensive list of providers

Target Population: Homeless individuals who are dually diagnosed, have a serious and prolonged mental illness, are victims of domestic abuse and/or have HIV/AIDS

Outreach Methods Used to Engage Program Participants: Outreach workers go to places they know homeless individuals congregate and bring various items to be used as engagement tools (combs, shaving kits, gloves, scarves, food, etc.) The staff seek out individuals in shelters, bus stations, railroad stations, encampments in the woods and in other areas in the community that they are advised that individuals may be. During the outreach and engagement phase the homeless service team works to build trust and set into motion services for the client, and in their role as a case manager, help complete referrals for housing. The Outreach and Engagement team (composed of people who work with homeless individuals every day and know the homeless community) work with the client to develop a service plan that includes housing. The referral goes to the Shelter Plus Care Housing Coordinator. Once a completed application is received it is timed, dated, stamped and reviewed by the screening committee in order it is received to determine eligibility and approval. Once approved one of two options may be offered; a) if there is no one on the waiting list they will receive a certificate and may start looking for an apartment or b) if there are individuals on the waiting list their name will be placed next on the list. When everyone ahead of them is housed they are next on the list and as soon as a certificate is available they will be notified and can start looking for an apartment. A case manager often assists the client in finding housing. The philosophy is that because they hold their own lease, their housing is not in jeopardy just because they do not wish to have services. Once a person is housed and has his/her own

lease, he/she may refuse to follow the plan and choose not to be involved in services. Every effort is made by the case manager to remain involved with the client with the hope that together they will be able to re-engage the client in needed services.

Housing Information:

- Type of Housing Provided: Shelter Plus Care, that includes subsidized housing and the opportunity to take part in needed services.
- Name of agency(ies)/Program(s) providing the Housing: The Department of Mental Health and Addiction Services is the Grantee for The Shelter Plus Care awards.
- Target Number of Individuals to be Housed: The Department has approximately 1,200 certificates.
- Number of Individuals Housed to Date: 100% occupancy as of June 2005.

Services Provided:

- Through PATH funds: Outreach, engagement and some case management is provided by the PATH program for individuals with a serious mental illness who may or may not have a substance abuse disorder.
- Through Other Sources: The list of providers is extensive. However, in most communities where the Department has a Shelter Plus Care program there is a broad array of services offered (case management, mental health services, substance abuse services, legal services, medical services, HIV services, etc.)

Funding Sources:

- For Housing: HUD Shelter Plus Care
- For Services: DMHAS

Contact Information:

- Name: Madeline Napolitano
- Title: State Coordinator of Homeless Services
- Agency: Connecticut Department of Mental Health and Addiction Services
- Address: 410 Capitol Avenue, MS 14 HOU, Hartford, CT 06134-1431
- Phone: 860-418-6910
- E-mail: Madeline.napolitano@po.state.ct.us

HOUSING FIRST PROGRAM - HAWAII

Name of Program: Case Management Outreach Services/Community Housing Program

County/Geographic Area Served: Statewide - all of the islands

Project Sponsor: State of Hawaii Department of Health Adult Mental Health Division

Project Partners: Purchase of service providers

Target Population: Homeless persons with serious and persistent mental illness and/or with dual diagnosis

Outreach Methods Used to Engage Program Participants: The goal is to get homeless individuals off of the streets and beaches and into housing without letting barriers such as lack of food, medication, treatment or money for security deposits get in the way. A new process called presumptive eligibility allows individuals who want housing to have immediate access to housing as well as mainstream services and housing. A person is placed in housing through Interim Case Management, which does not interfere with the continuation of outreach and engagement. The philosophy is that housing is part of the treatment.

Housing Information:

- Type of Housing Provided: 72 SRO units, Shelter Plus Care, Section 8 Vouchers, private rentals, and Supportive Housing Bridge Subsidy Program; just received a HUD 811 award to build an apartment building with 14 units
- Name of Agency(ies)/Program(s) providing the Housing: Adult Mental Health Division - links up with housing providers, private rentals and housing developers
- Target Number of Individuals to be Housed: 1800
- Number of Individuals Housed to Date: At least 150 homeless individuals (since the presumptive eligibility process began in 2004) - There are over 1300 units provided in the AMHD's menu of housing options for consumers statewide.

Services Provided:

- Through PATH funds: Outreach, engagement and some case management is provided by the PATH program for individuals with a serious mental illness who may or may not have a substance abuse disorder.
- Through Other Sources: Other mainstream provider agencies

Funding Sources:

- For Housing: State and Federal (HUD)
- For Services: PATH, State, Medicaid Rehab Options (MRO)

Contact Information:

- Name: : Bernie Miranda
- Title: Community Housing Services Director
- Name: Pam Haina
- Title: Case Management Director
- Agency: Hawaii Department of Health Adult Mental Health Division
- Address: 1250 Punchbowl Street, Room 256, Honolulu, HI 96813
- Phone: 808-733-4489
- E-mail: bfmirand@amhd.health.state.hi.us

HOUSING FIRST PROGRAM – NEW YORK

Name of Program: Pathways to Housing

County/Geographic Area Served: Queens, Brooklyn, East Harlem, West Harlem, and in Mt. Vernon serving Westchester County

Project Sponsor: Pathways to Housing

Project Partners: New York State Office of Mental Health

Target Population: Clients must be homeless, mentally ill and elect to participate in the program

Outreach Methods Used to Engage Program Participants: Assertive Community

Treatment (ACT) teams meet homeless individuals who have psychiatric disabilities where they are, when they are ready and at their pace. They then move them directly from the streets, shelters, psychiatric hospitals, and jails into permanent homes in order to provide immediate and independent housing, begin the process of recovery and promote integration into the community and work life.

Housing Information:

- Type of Housing Provided: Tenants have Section 8 vouchers for independent apartments or are subsidized by grants from the HUD Shelter Plus Care program
- Name of Agency providing the Housing: Pathways to Housing
- Target Number of Individuals to be Housed: No specific number, Pathways only take on new consumers for whom they can provide quality services
- Number of Individuals Housed to Date: 500 people served to date, 84% of people have stayed housed

Services Provided:

- Through PATH funds: ACT teams conduct outreach and also provide treatment and support services to clients in their homes. Most services are provided directly by the ACT team and the team provides client with referrals for other needed services

- Through Other Sources: Pathways staff work with private landlords and assist clients in locating and selecting safe, secure and affordable market rental apartments, pays a large portion of the rent through state and federal supported housing grants if client does not have Section 8 Voucher

Funding Sources:

- For Housing: US Department of Housing and Urban Development
- For Services: New York State Office of Mental Health

Contact Information:

- Name: Sam Tsemberis
- Title: Founder and Executive Director
- Agency: Pathways to Housing
- Address: 55 West 125th Street, 10th Floor, New York, NY 10027
- Phone: (212) 289-0000 (212) 289-0839 Fax
- E-mail: pathman101@aol.com <http://www.pathwaystohousing.org>

HOUSING FIRST PROGRAM - OHIO

Name of Program: Ohio's Housing First Pilot

County/Geographic Area Served: Hamilton and Franklin Counties

Project Sponsor: Ohio Department of Mental Health

Project Partners: State level entities

Target Population: Literally homeless and chronically homeless who are severely mentally disabled and/or with co-occurring substance use disorders

Outreach Methods Used to Engage Program Participants: The PATH team goes to the streets, "hang out" and make conversation in places where homeless people congregate. They try to build a relationship of trust to offer housing that is not contingent upon receiving clinical services.

Housing Information:

Type of Housing Provided: The Department of Development committed \$150,000 to Ohio's Housing First Pilot for one year rental subsidies for scattered site, independent apartments. The leases are held with the Housing Agency.

Name of Agency(ies)/Program(s) providing the Housing: Ohio Department of Development

- Target Number of Individuals to be Housed: 75
- Number of Individuals Housed to Date: Information not available at this time

Services Provided:

- Through PATH funds: The PATH Team links the client with assessment for mental health services and to obtain safe, decent, long-term housing, technical assistance, ACT treatment and housing supports
- Through Other Sources:

Funding Sources:

- For Housing: Ohio Housing Finance Agency, Ohio Department Of Development, HUD, Local Funds

- For Services: The Ohio Department of Mental Health, SAMSHA

Contact Information:

- Name: Roma Barickman
- Title: Housing Manager
- Agency Ohio Department of Mental Health
- Address: 30 East Broad Street, FL 8, Columbus, OH 43215-3430
- Phone: 614-466-5157
- E-mail: BarickmanR@mh.state.oh.us

HOUSING FIRST PROGRAM - VERMONT

Name of Program: Housing First!

County/Geographic Area Served: Burlington, Vermont

Project Sponsor: Community Health Center of Burlington

Project Partners: The team works with local permanent housing agencies including the Burlington Housing Authority, Burlington Community Land Trust, Lake Champlain Housing and local transitional housing agencies including the Committee on Temporary Shelter and Howard Health and Human Services.

Target Population: People experiencing chronic homelessness and who have a mental illness or developmental disability and a chronic medical condition.

Outreach Methods Used to Engage Program Participants: Outreach with the Center for Mental Health PATH program outreach staff; targets most disenfranchised, vulnerable, hard to reach, and does outreach in motels, SROs, jails, rural areas, etc. Initiates conversation, offers food, etc. and survival kits and clothing.

Housing Information:

- Type of Housing Provided: Shelter Plus Care subsidies, mainstream housing vouchers, 16 units of permanent housing - 10 scattered site, 6 SROs
- Name of Agency(ies)/Program(s) providing the Housing: See Project Partners
- Target Number of Individuals to be Housed: 16
- Number of Individuals Housed to Date: 13

Services Provided:

- Through PATH funds: Committee on Temporary Shelter, Howard Community Mental Health Service, Spectrum Youth and Family Services
- Through Other Sources: Visiting Nurses Association provides healthcare funds

Funding Sources:

- For Housing: HUD & NFP Developed subsidized housing
- For Services: Continuum of Care Partners

Contact Information:

- Name: Paul Dragon
- Title: Director, Homeless Health Care Program Agency
Community Health Center of Burlington Vermont
- Address: 184 South Winooski Avenue Burlington, Vermont 05401
- Phone: 802 860-4310
- E-mail: pdragon@chcb.org

The following profiles 8 individuals who were placed in the Housing First! Program.

"Tim"

- ◆ White Male - 40.
- ◆ Continually homeless for 11 years.
- ◆ Homeless due to unemployment and personal illness.
- ◆ Alcoholism and Developmental Disability
- ◆ Housed for 5 months.
- ◆ Continual engagement to keep him in housing. Slept outside several nights a week; only 2 or 3 nights in the SRO.
- ◆ Has made it to last 2 house meetings.

"Liz"

- ◆ White female - 34; married, 2 children.
- ◆ Homeless for one year.
- ◆ Mental illness, substance use, diabetes, anxiety and chronic back pain.
- ◆ Housed for 4 months.
- ◆ Medical condition and anxiety has stabilized; concerns with drug use for pain.

"Becky"

- ◆ African American female - 23.
- ◆ Incarcerated for most of her life.
- ◆ Episodically homeless.
- ◆ PTSD, Schizophrenia, intermittent explosive disorder
- ◆ Chronic Asthma
- ◆ Housed 10 months

"Stuart"

- ◆ White Male - 48; Veteran.
- ◆ Homeless on streets and emergency shelters for 3 years.
- ◆ Paranoid Schizophrenic.
- ◆ Received SSI benefits.
- ◆ Lost housing due to property destruction. verbal threats.
- ◆ Sent to psychiatric hospital for 1 month.
- ◆ Was released and housed by Housing First team.

"Taylor"

- ◆ White male - 53.
- ◆ Homeless on street for 4 years.
- ◆ Substance use, mental illness, Hepatitis C, anxiety but has stabilized
- ◆ Housed for 9 months.
- ◆ Recently received SSI.
- ◆ Mental Health recovery

"Jake"

- ◆ White male - 46.
- ◆ Homeless on the street since 1987.
- ◆ Convicted felon.
- ◆ Schizophrenia.
- ◆ Chronic Asthma
- ◆ Housed for one year.

"Sam"

- ◆ White Male - 47.
- ◆ Homeless street and emergency shelters for 2 years.
- ◆ Developmentally delayed. Obsessive compulsive disorder.
- ◆ Will not engage in mental health services.
- ◆ Refuses SSI benefit.
- ◆ Housed for 7 months.

"Vicky"

- ◆ Female African American - 29.
- ◆ Recently homeless for one year.
- ◆ Schizo-Affective Disorder, substance use.
- ◆ Chronic Asthma.
- ◆ Housed for four months.
- ◆ Recently received SSI benefits.
- ◆ Used emergency room, has not used community resources since Housing First.

PROPOSED HOUSING FIRST PROGRAM - VIRGINIA

Name of Program: VIRGINIA HOME TBRA

County/Geographic Area Served: Waynesboro, Roanoke and Martinsville Area (non-HOME entitlement jurisdictions). There is consideration to start the program in other areas and DMHMRSAS and DHCD are increasing training of sites in order to more effectively implement the program.

State Project Sponsor: Virginia Department of Housing and Community Development (DHCD)

State Project Partners: Virginia Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS)

Local Project Partners: Waynesboro Area: Redevelopment and Housing Authority and Valley Community Services Board (CSB), Roanoke Area: Total Action Against Poverty and Blue Ridge CSB, Martinsville Area: Piedmont CSB and the City of Martinsville.

Target Population: The chronically homeless (unaccompanied homeless individuals) that have incomes below 60 percent of the area median income.

Outreach Methods Used to Engage Program Participants: A regional system of outreach, intake and assessment, service referral and case management. The PATH outreach worker makes routine visits to local shelters, soup kitchens and other places commonly known to have a large number of homeless individuals and makes unscheduled visits to riverbanks, local libraries, wooded areas, and bridge overpasses in an attempt to assess the needs of potential PATH consumers not utilizing mainstream/traditional services. They offer increased visibility and accessibility to mental health services by using the community-based, rather than Center-based, approach.

Housing Information:

- Type of Housing Provided: Tenant Based Rental Assistance Program

- Name of Agency(ies)/Program(s) providing the Housing: Virginia Department of Housing and Community Development
- Target Number of Individuals to be Housed: 100 units of housing
- Number of Individuals Housed to Date: Several consumers have applications pending and sites expect to have them enrolled in the program by the end of June 2005. DMHMRSAS and DHCD are working together to assist sites in overcoming barriers to implementation.

Services Provided:

- Through the PATH Grant: Outreach, benefit acquisition and housing transition support services
- Through Other Sources: Rental assistance vouchers managed like Section 8 Housing Choice Vouchers provided to eligible individuals identified by PATH outreach and other homeless services referrals. Waynesboro Area: Redevelopment and Housing Authority, Roanoke Area: Total Action Against Poverty, Martinsville Area: City of Martinsville

Funding Sources:

- For Housing: HOME funds- which are flexible and the terms of the project may be negotiated to be revised to address complications that have arisen.
- For Services: PATH funds for outreach; mainstream mental health and other human services funded through a variety of sources.

Contact Information:

- Name: , Sarah Paige Fuller
- Title: Community Support Services Specialist
- Agency: Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services
- Address: P.O. Box 1797, Richmond, VA 23218
- Phone: 804-786-4521
- E-mail: sarah.fuller@co.dmhmrzas.virginia.gov

Programs in Pennsylvania

HOUSING FIRST PROGRAM DESCRIPTION - BLAIR COUNTY

Name of Program: Home Nursing Agency PATH Project

County/Geographic Area Served: Blair County

Project Sponsor: Blair County Mental Health/Mental Retardation/Drug & Alcohol Office

Project Partners: Blair County Local Housing Option Team (LHOT)

Target Population: Homeless mentally ill adults in Blair County

Outreach Methods Used to Engage Program Participants: Outreach/engagement

component to be provided on streets, in cooperation with the Community Crisis Center, Criminal Justice Specialists, and Local Homeless Shelters

Housing Information:

- Type of Housing Provided: Apartments through public agencies and private landlords, single room occupancy housing through agencies, personal care homes and domiciliary care providers.
- Name of Agency(ies)/Program(s) providing the Housing: Public housing providers, private landlords, SKILLS, Inc. and Home Nursing Agency
- Target Number of Individuals to be Housed: Targeted number to be placed in permanent housing is 20
- Number of Individuals Housed to Date: 19

Services Provided:

- Through PATH funds: The main objective of PATH services is to secure permanent and stable housing for consumers. Case management services in the area of housing. Assessment of needs, referrals to housing providers and follow up services to assist in maintaining housing. These services will be offered through a Housing Coordinator and a Housing Assistant who is to be hired.

Funding Sources:

- For Housing: Public and private Section 8, HUD and consumer income

For Services:

- Blair County Mental Health/Mental Retardation/Drug & Alcohol Office

Contact Information:

- Name: Kelly Lutz or Diana Packech
- Title: Housing Coordinator; Community Services Manager
- Agency: Home Nursing Agency
- Address: 500 East Chestnut Avenue, Altoona, Pa 16602
- Phone: 814-943-0414
- E-mail: klutz@homenursingagency.com; dpackech@homenursingagency.com

HOUSING FIRST PROGRAM - BUTLER COUNTY

Name of Program: HOPE Project

County/Geographic Area Served: Butler County

Project Sponsor: Butler County Mental Health/Mental Retardation/Drug & Alcohol Office Programs

Project Partners: Center for Community Resources, Inc.

Target Population: Chronically homeless individuals, ages 18-62

Outreach Methods Used to Engage Program Participants: Street and community outreach by case manager.

Housing Information:

- Type of Housing Provided: Permanent supportive housing, scattered site apartments
- Name of Agency(ies)/Program(s) providing the Housing: Center for Community Resources, Inc. works with local landlords to secure the apartments
- Target Number of Individuals to be Housed: 18 units
- Number of Individuals Housed to Date: 22 since it began in Sept. 2004/ 18 individuals housed currently

Services Provided:

- Through PATH funds: 1 FTE Case Manager (case management and outreach services), one-time housing assistance
- Through Other Sources: Housing (coordinated by Center for Community Resources, paid for through HUD McKinney Vento grant- administered through Butler County Community Action); 0.5 FTE Outreach/Peer Support Coordinator (HUD McKinney Vento Grant- subcontract with Grapevine Drop-in Center); Life Skills Worker (HUD McKinney Vento grant- subcontract with Catholic Charities);

Bus Tokens (Center for Community Resources, paid for through HUD McKinney Vento grant)

Funding Sources:

- For Housing: HUD McKinney-Vento grant
- For Services: none- in-kind services from other community providers

Contact Information:

- Name: Amanda Feltenberger
- Title: Program Development Manager
- Agency: Butler County Human Services
- Address: P.O. Box 1208
Butler, PA 16003
- Phone: (724) 284-5114
- E-mail: afeltenb@co.butler.pa.us

HOUSING FIRST PROGRAM - BUTLER COUNTY

Name of Program: Living Independently Project

County/Geographic Area Served: Butler County

Project Sponsor: Butler County Mental Health/Mental Retardation/Drug & Alcohol Office Programs

Project Partners: Catholic Charities - Butler Chapter

Target Population: Homeless youth aged 18-24 years diagnosed with a serious mental illness or dually diagnosed

Outreach Methods Used to Engage Program Participants: Street and community outreach by case manager.

Housing Information:

- Type of Housing Provided: Permanent Supportive Housing, scattered site apartments
- Name of Agency(ies)/Program(s) providing the Housing: Catholic Charities working with community landlords for apartments
- Target Number of Individuals to be Housed: 6 units
- Number of Individuals Housed to Date: 8 people; 6 currently

Services Provided:

- Through PATH funds: 1 FTE Case Manager (case management and outreach services) and .5 Vocational/Education Worker, and bus tokens for participants
- Through Other Sources: Assistance with outreach services from the HOPE Project (Housing First Program serving chronically homeless individuals) Case Manager, offered as in-kind support

Funding Sources:

- For Housing: Reinvestment funds - rental subsidies for 6 units

- For Services: none - in-kind services from other community providers

Contact Information:

- Name: Amanda Feltenberger
- Title: Program Development Manager
- Agency: Butler County Human Services
- Address: P.O. Box 1208
Butler, PA 16003
- Phone: (724) 284-5114
- E-mail: afeltenb@co.butler.pa.us

HOUSING FIRST PROGRAM - CRAWFORD COUNTY

Name of Program: CHAPS Fairweather Lodge and Resource Learning Center

County/Geographic Area Served: Crawford County

Project Sponsor: Crawford County Human Services

Project Partners: CHAPS

Target Population: Persons with a serious mental illness or MISA (mental illness substance abuse - dual diagnosis) who are homeless or at imminent risk of homelessness.

Outreach Methods Used to Engage Program Participants: Site visits at local shelters, education of various agencies who will be referral sources, and brochures distributed in the community

Housing Information:

- Type of Housing Provided: Fairweather Lodge - a housing and employment program that enhances the lives of adults with a mental health disability. The Lodge Program helps people reintegrate themselves into the community.
- Name of Agency(ies)/Program(s) providing the Housing: CHAPS
- Target Number of Individuals to be Housed: 1st Year - 30 Individuals
- Number of Individuals Housed to Date: 8

Services Provided:

- Through PATH funds: Hire staff to provide coordination and support of a Fairweather Lodge (full-time) and for implementation of a Resource Learning Center (part-time).
- Through Other Sources: CHAPS and Human Services will provide the housing piece for both programs

Funding Sources:

- For Housing: Crawford County Human Services and CHAPS

- For Services: PATH

Contact Information:

- Name: Lynn McUmbler
- Title: Executive Director
- Agency: CHAPS
- Address: 944 Liberty Street Meadville, PA 16335
- Phone: 814-333-2924
- E-mail: LMcUmbler@hotmail.com

HOUSING FIRST PROGRAM - DELAWARE COUNTY

Name of Program: PATH Housing 1st

County/Geographic Area Served: Delaware County, PA

Project Sponsor: Delaware County Office of Behavioral Health (OBH)

Project Partners: Horizon House, Inc.

Target Population: Delaware County homeless mental ill population with emphasis on the chronic homeless population

Outreach Methods Used to Engage Program Participants: The Path Housing 1st team (including the existing outreach staff) will reach out to chronic homeless consumers who are living on the streets or in emergency shelters. Following engagement and assessment, the staff will refer these individuals directly into subsidized apartments using a variety of sources of Tenant-Based Rental Assistance (TBRA) funding. The staff will provide ongoing case management, habilitation and rehabilitation, and residential outreach supports for these individuals until they are assimilated into mainstream treatment, case management and rehabilitative mental health and substance abuse services.

Housing Information:

- Type of Housing Provided: The Housing 1st program will provide access to various sources of TBRA subsidies that will assist consumers to access affordable housing throughout Delaware County.
- Name of Agency (ies)/Program(s) providing the Housing: Delaware County Housing Authority (DCHA); Local Housing Options Team (LHOT); Office of Housing and Community Development; Office of Behavioral Health and Mental Health.
- Target Number of Individuals to be housed: Housing 1st anticipates providing a minimum of 12 housing subsidies during the first year.
- Number of Individuals Housed to Date: 1 and 1 to be housed in July 2005

Services Provided:

- Through PATH funds: Outreach; screening and diagnostic treatment; case management; referrals for primary health, job training, educational services and relevant housing services. Housing 1st will provide the following additional services: habilitation and rehabilitation supports; residential supportive and supervisory services and staff training.
- Through Other Sources: Services provided through Horizon House, Inc. include: Specialized Residence for the Homeless (transitional housing); HUD Supported Living Services (permanent housing); Community Residential Rehabilitation (transitional housing); EASR Program (engagement, assessment, stabilization and referral-outreach/case management); Club house (site-based psychiatric rehabilitation) and Mobile Psychiatric Rehabilitation Services. Horizon House works with mental health, drug & alcohol, community providers. Homeless Services Coalition of Delaware County to assist consumers in accessing identified services.

Funding Sources:

- For Housing: HUD Section 8 Housing Choice Voucher, Delaware County Housing Authority, HUD Shelter Plus Care Program, Local Affordable Housing Trust Fund, State Department of Public Welfare and Local Matching Funds Delaware County Office of Behavioral Health, Local Housing Options Team
- For Services: PATH

Contact Information:

- Name: Sandra Pratt
- Title: Director of Homeless Services (Delaware County)
- Agency: Horizon House, Inc.
- Address: 2300 Providence Ave., Chester, PA 19013
- Phone: (610) 328-2165
- E-mail: saundra.pratt@hhinc.org

HOUSING FIRST PROGRAM - ERIE COUNTY

Name of Program: Youth in Transition Lodge

County/Geographic Area Served: Erie County

Project Sponsor: Stairways Behavioral Health

Project Partners: Donald Crenshaw, Erie County Wraparound Program

Target Population: Homeless Youth- 18-21 years old who are at risk for chronic homelessness and have a serious mental illness or dual diagnosis

Outreach Methods Used to Engage Program Participants: Outreach is not necessary because the Erie County Wraparound program has an established mechanism that makes referrals for the most difficult clients at the Gate Keeping meeting.

Housing Information:

- Type of Housing Provided: Shared Housing
- Name of Agency(ies)/Program(s) providing the Housing: Don Crenshaw
- Target Number of Individuals to be Housed: 5
- Number of Individuals Housed to Date: 4

Services Provided:

- Through PATH funds: Development of adult daily living skills, education regarding group dynamics and group processing per the Fairweather Lodge Model, development of interpersonal relationship building skills as well as social skills, problem intervention and resolution.
- Through Other Sources: Mobile Psychiatric Rehabilitation to be provided by Stairways Behavioral Health, Job Coaching to be provided by Office of Vocational Rehabilitation and Stairways Behavioral Health, Job Training to be provided by Don Crenshaw and Royal Homes and other community based employment opportunities

that may become available to this project. Therapeutic Support Services, Mobile Therapy to be provided by Erie County Wraparound System of Providers.

Funding Sources:

- Start-up Funds: for Appliances and Furniture- Erie County Children and Youth
- For Housing: Client Rent with housing subsidy from Erie County Department of Human Services
- For Services: PATH, Mobile Psychiatric Rehabilitation Fee for Service contract with Erie County Mental Health/Mental Retardation, Erie County Wraparound Services to include therapeutic support staff and mobile therapists

Contact Information:

- Name: Kim Stucke
- Title: Grantswriter/Legislative Liaison/ Housing Specialist
- Agency Stairways Behavioral Health
- Address:138 East 26th St.
Erie, PA 16504
- Phone: 814-878-2170
- E-mail: kmstucke@stairwaysbh.org

HOUSING FIRST PROGRAM - PHILADELPHIA

Name of Program: New Keys

County/Geographic Area Served: Philadelphia, PA

Project Sponsor: Horizon House, Inc.

Project Partners: City of Philadelphia's Behavioral Health Systems, 1260 Housing Development Corporation/Columbus Property Management, University of Pennsylvania Center for Mental Health Policy and Services Research.

Target Population: Chronically homeless individuals who have a serious mental illness co-occurring with a substance abuse disorder.

Outreach Methods Used to Engage Program Participants: All participants are chronic street dwellers. Individuals are referred to the program from the city's Outreach Coordination Center database. Participants are engaged by the team in the streets, shelters, behavioral health residences, jails, hospitals, and residential treatment facilities.

Housing Information:

- Type of Housing Provided: 1 bedroom scattered-site apartments
- Name of Agency(ies)/Program(s) providing the Housing: 1260 Housing Development/ Columbus Property Management
- Target Number of Individuals to be Housed: 60
- Number of Individuals Housed to Date: 50

Services Provided:

- Through PATH funds: None
- Through Other Sources: Assertive Community Treatment (ACT) Teams: The ACT teams, staffed by Horizon House builds support services around the individual on

the street or in his/her home. The team includes psychiatric support, nursing, case management, social workers, benefits specialist, and counselors.

Funding Sources:

- For Housing: HUD Supportive Housing Program and Shelter Plus Care grants.
- For Services: Substance Abuse and Mental Health Services Administration (SAMHSA) - Development of Comprehensive Drug/Alcohol and Mental Health Treatment Systems for Persons who are Homeless grant.

Contact Information:

- Name: David C. Dunbeck, MSW, LSW
- Title: Director of Homeless Services
- Agency Horizon House, Inc.
- Address: 1201 Chestnut St., 14th floor
Philadelphia, PA 19107
- Phone: (215) 636-0606, ext. 109
- E-mail: DAVID.DUNBECK@hhinc.org

HOUSING FIRST PROGRAM - PHILADELPHIA

Name of Program: Home First

County/Geographic Area Served: Philadelphia, PA

Project Sponsor: City of Philadelphia, Managing Directors Office for Adult Services

Project Partners: Horizon House, Inc., 1260 Housing Development Corporation/Columbus Property Management, Philadelphia Health Management Corporation (PHMC), and the Philadelphia Veterans Administration (VA) Medical Center

Target Population: Chronically homeless individuals with serious mental illness. Most will also have co-occurring substance abuse disorders.

Outreach Methods Used to Engage Program Participants: All participants are chronic shelter users. Individuals are referred to the program from the shelter system, behavioral health residential system, the VA and from PHMC. Participants are primarily engaged by the team in their current shelter or behavioral health residence. Some are also engaged on the street, in shelters, jails, hospitals, and residential treatment facilities.

Housing Information:

- Type of Housing Provided: one bedroom scattered-site apartments.
- Name of Agency(ies)/Program(s) providing the Housing: 1260 Housing Development Corporation/Columbus Property Management
- Target Number of Individuals to be Housed: 90
- Number of Individuals Housed to Date: 73

Services Provided:

- Through PATH funds: None
- Through Other Sources: The ACT teams, staffed by the program partners at the Horizon House site builds support services around the individual on the street or in

his/her home. The team includes psychiatric support, nursing, case management, social workers, benefits specialist, and counselors.

Funding Sources: Collaborative Initiative to End Chronic Homelessness

- For Housing: HUD Supportive Housing Program grant
- For Services: Substance Abuse and Mental Health Services Administration (SAMHSA), Health Resources and Services Administration (HRSA), and the Veterans Administration

Contact Information:

- Name: David C. Dunbeck, MSW, LSW
- Title: Director of Homeless Services
- Agency Horizon House, Inc.
- Address: 1201 Chestnut St., 14th floor
Philadelphia, PA 19107
- Phone: (215) 636-0606, ext. 109
- E-mail: DAVID.DUNBECK@hhinc.org

COMMON THEMES FOR SUCCESSFUL HOUSING FIRST PROGRAMS

- Must be tied to successful outreach and engagement
- Encourages, but does not require acceptance of services as a prerequisite to housing
- Requires a range of housing options and flexible subsidies
- Recognizes importance of intensive support services, such as Assertive Community Treatment Teams
- Requires strong partnerships between housing providers and service providers
- Taps into all available Federal and State funding streams

COMMON BARRIERS

- Lack of affordable housing
- Lack of funding, especially for intensive services