

Housing for BHRS Clients Presentation
MHSARC Older Adult Committee Meeting – 11/4/20

Question & Answer

1. Why does someone have to become homeless or at-risk of becoming homeless to get housing?

Response: Mainstream housing vouchers is one way we have been able to support clients regardless of homelessness status. It also depends on the level of care that a client may need, which is how they get matched to housing programs and supports.

Most affordable and supportive housing construction and ongoing operations requires funding from federal, state or local governments. These forms of funding require units to be restricted to certain income levels and some funding is restricted to individuals who are chronically homeless, homeless or at risk of homelessness.

Affordable housing that is restricted only by income does not require an individual to be homeless or at risk of homelessness.

2. Do the housing supports include substance use adults, or do they have to qualify under mental health? There are clients who have those

Response: If not connected to MH services, got primary care providers to sign off on documentation that DOH requires in terms of disability.

AOD residential housing, sober-living environments are not considered at risk of homelessness. Some one who was homeless before entering residential treatment is considered home when completing treatment.

BHRS/AOD however, provides supportive services to voucher holders who are disabled and have substance abuse disorders. Those with cooccurring disorders are included in the housing support programs.

3. Are there Waiting lists?

Response: There are no current wait lists for buildings funded with MHSA funding. When there is an opening which is not very often BHRS notifies the FSPs and the case managers with FSP eligible individuals. Those that have NPLH funding or federal Permanent Supportive Housing funding must rely on the Coordinated Entry System (CES) for referrals of BHRS certified individuals

4. How many slots for FSP are available in San Mateo county? Who decides who gets them? What happens to individuals who are eligible that do not get FSP?

Response: Currently there are a total of 309 FSP slots: Telecare has 207 BHRS/MHSA slots and 22 Criminal Justice/MHSA slots. Caminar has 30 BHRS/MHSA and 50 AOT/MHSA slots. In addition, there 55 slots in Caminar's Reach Intensive Case Management. This program is pre-MHSA version of FSP. Individuals who met the FSP criteria are identified by their clinical case manager and reviewed by clinical team who approves the referral. The client agrees to participation in the FSP, If there is no open slot the client can remain on the wait list or participate in a lower level of service such as the Integrated FSP, Intensive case management until a slot opens up.

5. How many BHRS clients are unhoused?

Response: This is a good question. There is no accurate way to determine when BHRS clients are unhoused as this would be a self-report by the client in most cases. Often at discharge from 3AB or other institutions, the lack of housing becomes known. BHRS has found that few homeless individuals registering with CES are actually BHRS clients.

6. Many clients cannot live on their own, even with much support, are there any efforts to develop new contracts for licensed B&C homes?

Response: We've gone through the list that is kept by the State on individuals that have expressed interest and have not had much success in getting folks to go through the licensing that is required for many reasons. It's not a lucrative business and BHRS cannot compete with the private B&C. Cost makes it difficult. "Mom and pop" establishments are often for-profit so they are not eligible for state funding for capital improvements.

7. Please explain what integrative FSP is.

Response: The Integrated FSP is a service applying ACT (assertive community treatment) principles to regional clients who live in the community and need additional supports to order to participate in treatment and maintain themselves in the community.

Some supportive housing for regional clients are considered integrated FSPs

8. Why someone has to be homeless, is how can a person who is living with aging parents access supportive housing?

Response: An individual with SMI who is living with aging parents (depending on the health, functioning of the caretaking parent and how soon the caretaker

parent may no longer be able to so) maybe be considered at risk of homelessness. The need would be identified and documented by the BHRS case manager.

9. How does MHSA money get to the Housing Dept to be distributed (if I have that right)?

Response: In the past we have set up an MOU agreement with the Department of Housing (DOH) to allow us to transfer MHSA Housing Program funds. DOH facilitates the bidding process for housing developers, which typically includes a mix of funding sources. This allows for MHSA funds to be highly leveraged.

10. How do we get more set aside units for BHRS clients in all the new low-income housing developments that are going up? (For comparison, the Firehouse Square project in Belmont I believe has 12 units set aside for people with Intellectual or Developmental Disorders. Services will be provided by a contractor.)

Response:

In order to answer this question, we need to provide an overview of the funding that nonprofit affordable and supportive housing developers access in order to be able to build and provide long term commitments to serve special needs populations.

The first aspect of set aside units is funding for construction. The second is rental subsidy to maintain rents at a very low level.

Funding

Funding for construction of units comes from multiple sources. Affordable and supportive housing requires funding from have come from federal HOME and CDBG, 811 funding for special needs, San Mateo County Affordable Housing Funds, MHSA Housing Program, No Place Like Home Program, State funds such as Multifamily Housing and other agency funds that provide services to special needs populations. These funds are available through complex and competitive application process. Some of these funds such as the MHSA Housing Program are no longer available as the program was not refunded.

It takes a few years to gather the different funding commitments in order to have enough funds to begin construction.

At the time of requesting funding that targets special populations, the developer is making a long-term commitment to serve that population.

Ongoing Rental Subsidy

In order for units to be restricted to target populations such as homeless individuals with serious mental illness and who are extremely low income, projects need an ongoing source of funds in order to keep the rents affordable to individuals with little or no income. The Housing Authority with project-based vouchers and housing choice vouchers is a major source of rental assistance subsidy. Some funding sources provide additional operating funds to keep the tenant portion of the rent low.

The San Mateo County Department of Housing (DOH) is often the beginning source of funding for affordable and special needs housing. They work to identify those developers who are interested in special needs populations and the available sources of funding to help with the construction of units.

BHRS does outreach to developers when there are available targeted funds for construction of supportive housing.

The Developer also makes an application to the housing authority in order to secure project-based vouchers for the rental assistance.