What Is Supportive Housing?

The Corporation for Supportive Housing (CSH) defines Supportive Housing as a combined package of affordable housing coupled with intensive care management services.

Designed to help vulnerable, formerly homeless individuals:
- remain in housing,
- live with maximum independence,
- connect to needed clinical and mainstream services, and
- facilitate the attainment of their goals and aspirations.
Who is Mercy Housing?

Mission: Mercy Housing is working to create stable, vibrant and healthy communities by developing, financing and operating affordable, program-enriched housing for families, seniors and people with special needs who lack the economic resources to access quality, safe housing opportunities.

- Founded by Sisters of Mercy in Omaha, Nebraska in 1981
- Grown to include 5 geographic business centers, with a presence in 41 states
- Developed more than 18,500 homes
- Developed more than $2 billion in affordable real estate
- Owns and manages its units, housing more than 50,000 residents
How Does Mercy Housing Approach Supportive Housing?

National reputation as a supportive housing provider
- Over 2500 units of supportive housing including a mix of single adults, families and seniors
- Relationships with funders and government agencies
- Solid Management Company utilizing the “Blended Management” approach to supportive housing.

Voluntary supportive services for tenants include
- Resident Services Coordinators
- Partnerships with specialty service providers
- Health and wellness services
- Employment, training, and education
- Leadership development
- Social opportunities
Who Does Supportive Housing Serve?

• People served include single adults, seniors, families, veterans, foster-youth, people w/ HIV/AIDS, and other special needs populations.

• Incomes tend to be extremely low: Social Security Disability Income, General Assistance, or no income.

• Rents: ranging from zero to $350/month

• Public Subsidy: typically requires a rent or operating subsidy to meet operating and service budgets of $700 to $1000 per month.
“First generation” supportive housing

• SRO acquisition/rehab
• Formerly homeless single-adults with mental health, substance abuse, and other challenges

The Rose and The Dudley, 76 and 75 SRO units on Sixth St. in San Francisco
Quinn Cottages, Sacramento

- 60 small cottage apartments
- Transitional supportive housing for homeless individuals
- “clean and sober” requirements
- Early versions of supportive housing were not permanent or “housing first”
Boulevard Court, Sacramento

Conversion of motel to 75 apartments for formerly homeless adults.

Service partners provide on-site case management and other services.

Key funding source in California is the Mental Health Services Act (aka Prop 63).

MHSA provides flexible funding for capital, services or operations.
Mission Creek Senior Community, San Francisco

• Service-enriched independent living as an alternative to nursing home beds at Laguna Honda

• 140 senior apartments, 30% for formerly homeless seniors

• Partnership with SF DPH for services and rent subsidies through the Local Operating Support Program

• Adult Day Health Center operated by Stepping Stone
10th and Mission Family Apartments
San Francisco

Mixed supportive housing and conventional family housing

• 136 family apartments, includes 44 formerly homeless families

• Homeless families referred by the SF Human Services Agency from shelters, wait lists & other emergency settings

• Rents subsidized by San Francisco’s Local Operating Support Program (LOSP)
Caroline Severance Manor
Los Angeles

85 rental apartments

- over 50% supportive housing

- 30 apartments for single adults with severe and persistent mental illness

- 18 family apartments designated for the families of children dealing with severe emotional disturbances and who have been, or are at risk of being, removed from their homes by the County.

In a unique partnership with LA County and the Child Welfare Initiative, the family units will be targeted to Kincare Families—households in which children are cared for by a relative other than their parent.
The Three-Legged Stool of Financing

Supportive Housing Requires 3 Types of Funding

1. Development Capital: funds for building or buying
   - Federal Funds: HUD programs and the Low Income Housing Tax Credit
   - State funds: Multi-family Housing Program
   - City/County resources: local trust funds, HUD block grants

2. Operating Revenues: ongoing grant funding that supports operation
   - Rent (typically 20-30% of actual costs)
   - Rental subsidies/sources:
     - Federal: HUD Section 8, McKinney, HOPWA
     - City/County Programs: Mental Health Services Act, LOSP (San Francisco only)

3. Resident Services: grant funding to pay for support services in housing
   - Federal programs: HUD McKinney Act, HOPWA, CDBG
   - State, County: Mental Health Services Act
   - Foundation/Private support
Supportive Housing Finance  
Third and LeConte, San Francisco  
73 family apartments

### Permanent Financing

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low-Income Housing Tax Credit (9%)</td>
<td>$15.4 million</td>
</tr>
<tr>
<td>CA HCD Multi-family Housing Program</td>
<td>$10 million</td>
</tr>
<tr>
<td>San Francisco Redevelopment Agency</td>
<td>$10.1 million</td>
</tr>
<tr>
<td>Fed.Home Loan Bank--Aff. Hsg Program</td>
<td>$1 million</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$36.4 million</strong></td>
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</tbody>
</table>

### Uses

<table>
<thead>
<tr>
<th>Use</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land</td>
<td>$3.6 million</td>
</tr>
<tr>
<td>Construction Costs</td>
<td>$25 million</td>
</tr>
<tr>
<td>Architecture, Engineering</td>
<td>$2 million</td>
</tr>
<tr>
<td>Developer Fee</td>
<td>$1.1 million</td>
</tr>
<tr>
<td>Permits, taxes and fees</td>
<td>$1.1 million</td>
</tr>
<tr>
<td>Financing Costs</td>
<td>$1 million</td>
</tr>
<tr>
<td>Other Costs</td>
<td>$2.6 million</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$36.4 million</strong></td>
</tr>
</tbody>
</table>

- **Local Operating Subsidy:** $673,000/year
- **Average Household Income:** 15% median income
- **Average Household Rent:** $300/month
Supportive Housing enables residents to:

- Become stabilized in housing,
- Remain clean and sober,
- Have freedom and necessary support,
- Get consistent proper medical care,
- Avoid returning to jail or prison,
- Take positive steps in their lives, including employment for those who are able.
Blended Management

- An approach or style of property management and service delivery where the Property Manager and Case Manager (or Resident Service Coordinator) have the mutual goal of preserving tenancy and improving the quality of life for residents.

- Blended management is a method of delivering services that can be applied at any type of housing with services.

- Property Manager and Services Manager are equals on the organizational chart.

- Property Manager and Services Manager are mutually accountable to prevent homelessness by ensuring successful tenancies.
**Staff Roles**

### Resident Services Coordinators
- Family, Senior and Supportive properties
- Coordinate services for all
- No action plan
- Services voluntary

### Case Managers
- Supportive properties
- Specific, assigned residents on caseload
- Individual Action Plans addresses specific needs
- Services voluntary in most cases

All staff focus on providing services addressing health and wellness, community participation, financial stability, housing stability and out of school time services specific to their property.
## Services: Third party vs. In-House

<table>
<thead>
<tr>
<th>PROS</th>
<th>CONS</th>
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<tbody>
<tr>
<td>• Long-term relationships with excellent organizations</td>
<td>• Hiring</td>
</tr>
<tr>
<td>• Higher staff ratio</td>
<td>• Funding cuts</td>
</tr>
<tr>
<td>• Some contracts we pay for, some we are paid for (lease) some where there is no exchange of $$</td>
<td>• Different program models</td>
</tr>
<tr>
<td>• Thorough annual reporting already in place for other agencies</td>
<td>• Outcomes from program models in different systems</td>
</tr>
</tbody>
</table>
Priority Programs

- **Housing Stability**
  - Lease Education
  - Eviction Prevention
- **Financial Stability**
  - Financial Literacy
  - EITC
  - Employment

- **Out of School Time Programs**
  - Educational Support
  - Community Service
  - Leadership
  - Physical Activity

- **Community Participation**
  - Community Events
  - Safety Issues
  - Volunteerism
  - Voter Registration

- **Health and Wellness**
  - Health Supports
  - Health Education
  - Food
  - Risk and Resiliency Review
Program Models

- Essential Activities
- Outputs
- Short-Term Impacts
- Intermediate Impacts
- Long-Term Impacts
Program Model

Essential Activities

Based on “best practices” research that indicates which activities lead to impacts in the priority program areas

<table>
<thead>
<tr>
<th>Impacts</th>
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<tbody>
<tr>
<td>Reduced Hospital Stays and Improved Health</td>
</tr>
<tr>
<td>Safe, Stable, Continuous Housing</td>
</tr>
<tr>
<td>Active Engagement in the Community</td>
</tr>
<tr>
<td>Growth and Improvement in School</td>
</tr>
<tr>
<td>Financial Stability and Increased Assets</td>
</tr>
</tbody>
</table>
Measuring Impact

Health and Wellness

Essential Activity: Risk and Resiliency Review

Int-Term Impact: Residents hospitalized have lower rates of rehospitalization than similar community populations

Source: Risk of Hospitalization Screening Tool, Transition Plan Tool

Administration: Paper and Pencil

Timing: Transition plan completed if a resident screened and determined high risk
Housing Stability

- Individual outreach to residents with lease violations
- Referrals for those needing rent assistance or help transitioning to other housing
- Counseling to resolve unit inspection issues
- May provide preventative information through games (lease education bingo) at social events
Health and Wellness

- Coordinate health information classes
- Set up screenings delivered by health care providers
- Referrals
- Individual assistance with applications
- Meet with residents individually to determine their health needs
- Work with hospital discharge planners to coordinate successful transition home
Financial Stability

• Individual meetings with residents to build skills
• Occasional classes on financial education topics taught by volunteers
• Individual job readiness assistance
• Marketing the EITC opportunity
• Individual assistance to apply for financial benefits
Community Participation

• Social events to build community also are the foundation of outreach efforts
• Volunteer recruitment
• Community safety meetings
• May set up workshops on leadership development

Community Participation
• Community Events
• Community Safety
• Leadership – Adult
• Voter Education
• Volunteer Opportunities
A Typical Day:
Resident Services

• Check on any weekend / evening occurrences that may require follow up
• Complete health and wellness assessment with new residents, create follow up plan
• Meet with a resident to work on budgeting
• Outreach to residents with lease violations
• Conduct a meeting with a community partner to bring services on-site
• Talk with property management staff about issues that have arisen
• Make a round of the property to follow up on referrals
• Address issues as residents request information or services – continuous
• Mediate a conflict between neighbors
• Prepare for a partner to come present a class
• SIMS data entry
• FAMILY: prepare and run out of school time programs
• SUPPORTIVE: address public intoxication issue
• SENIOR: coordinate a transition plan with a hospital discharge planner