

SUPPLEMENTAL INFORMATION No. 1

For Planning Commission Agenda of:
July 11, 2019

<input type="checkbox"/>	Administrative Agenda Item	}
<input checked="" type="checkbox"/>	Continued Hearing Item	} [G-2]
<input type="checkbox"/>	New Hearing Item	}
<input type="checkbox"/>	Old Business Item	}
<input type="checkbox"/>	New Business Item	}

Attached for the Planning Commission's record and review are the following supplementary information items:

1. Comment letter from Peg Anderson, SoHum Housing, received via email July 6, 2019.
2. Excerpted slides from Sam Tsemberis' "Pathways Housing First, A person-center approach" from the 2018 Housing First Partners Conference.

The slide deck is mentioned in Janelle's email dated June 18, 2019, included as Attachment 6 of the July 11, 2019 Planning Commission staff report. The original slide deck was over 100 slides in length. The excerpted slides were selected by Janelle.

July 5th 2019

To the Planning Commission:

This letter is to commend you on your proposal for a new housing element for Humboldt County.
Not

only does your plan recognize the severity of our housing crisis but acknowledges the plight of those

with no option for safe shelter at the present.

As a homeless advocate in Southern Humboldt, I see several items that could help our area:

H-IM56-Safe Parking Program. There are several unused church parking lots that could be used.

H-IM57-Temporary Shelter Options. This would so important for our most vulnerable on the street; women, children ,the elderly and the disabled, for more immediate respite.

H-IM58- Alternative Lodge Park. This would enable our community ,to build a village of small units {detached bedroom units} with common use facilities.

The effects of implementing these projects would be very positive for the general community:

Vagrancy , theft and panhandling would lessen in the shopping areas.

Having bathing and toilet facilities would increase the health and wellness of the street population and
protect our river and watershed.

Litter and garbage would hopefully lessen with regulated and organized camps.

Our fire danger is extreme in Southern Humboldt. We must reduce the need for cooking and warming fires.

Thank you for this visionary proposal,
Peg Anderson
SoHum Housing Opportunities
Garberville, Ca.

Pathways Housing First: A person-centered approach

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I) Housing First: Distinguishing between HF models

➤ **PATHWAYS SCATTER SITE MODEL**

- Roots in psych rehab
- Consumer movement
- Social justice
- Services separate philosophically and physically
- Tenant based rents
- Location choices
- Point of Entry is case management

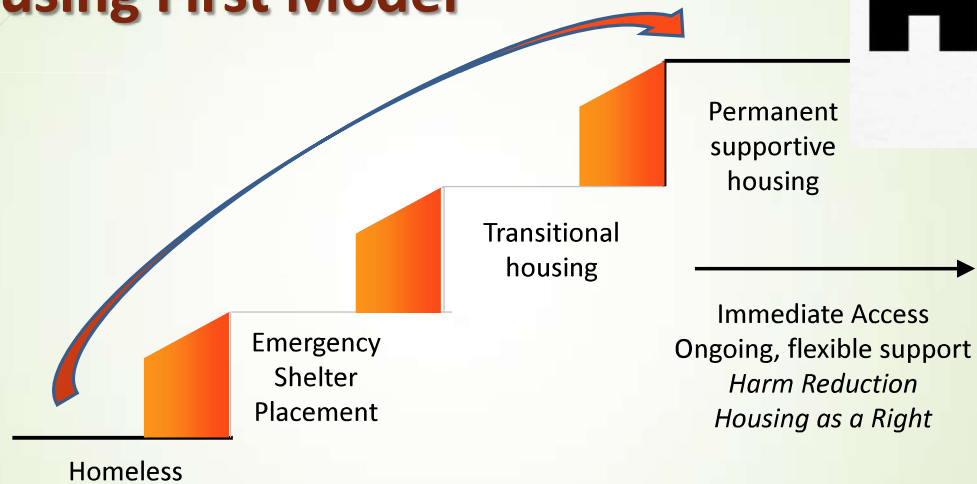
IN COMMON

Immediate access
Harm reduction
House most vulnerable
Separation H&S

➤ **SINGLE SITE MODELS**

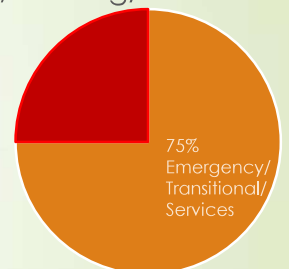
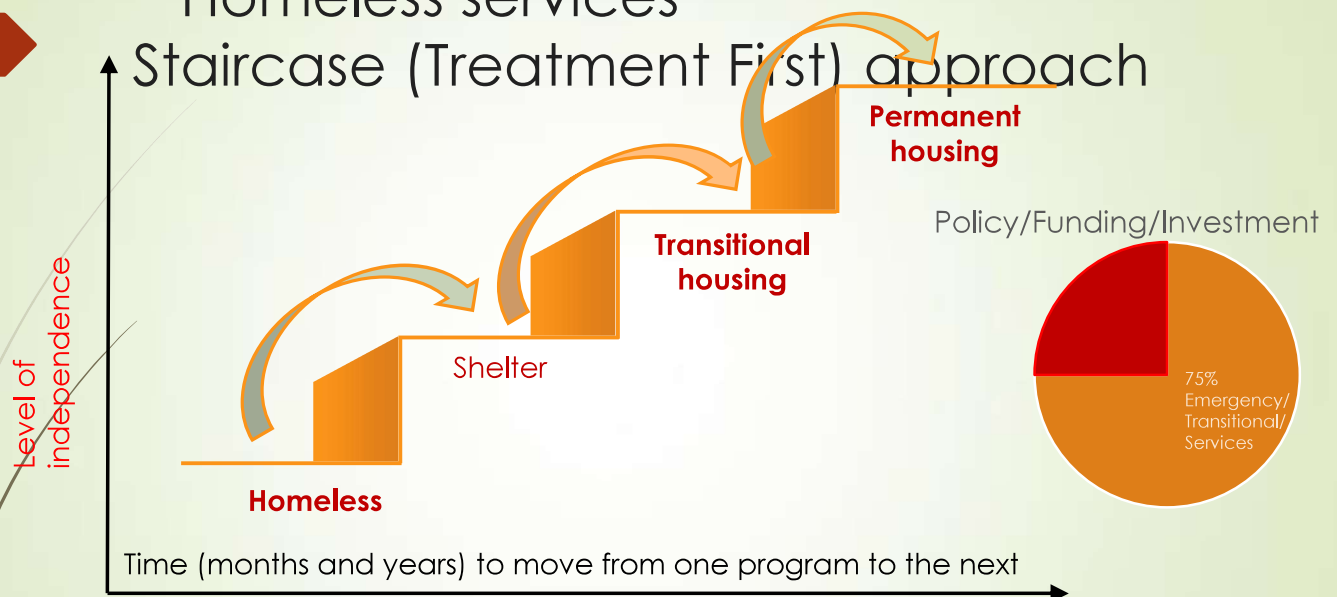
- Roots in housing development
- Advocacy for ending homelessness
- Services on site but separate domains
- Project based rents
- Point of Entry is housing

Pathways' Housing First Model



*Immediate Access to A Place of Your Own
Support and treatment follows

Homeless services Staircase (Treatment First) approach



Homeless Services System is Built Upon :

- 1) assumptions about mental illness, addiction and functional ability, and
- 2) Social prejudice and bias concerning the motivation of the poor ("economic hazard ratios" and "brought it upon themselves")



III. PRINCIPLES AND MAJOR COMPONENTS

FIVE PROGRAM PRINCIPLES:

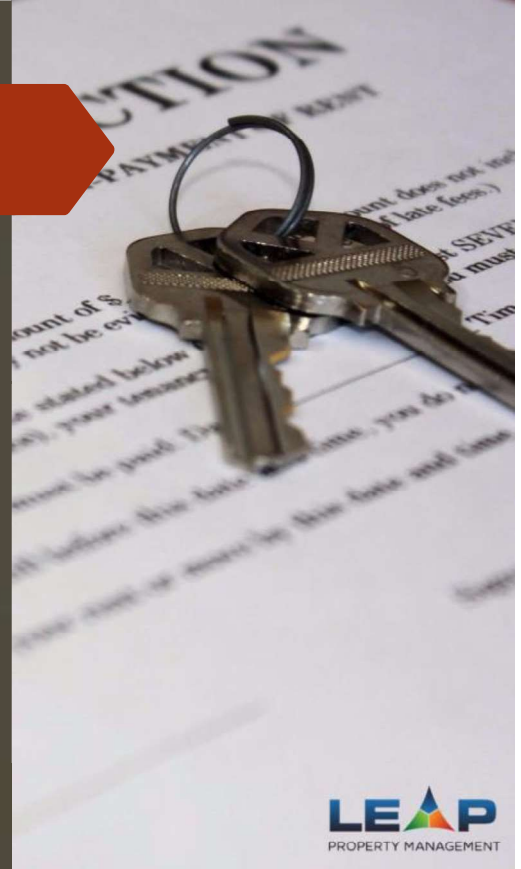
1. Consumer choice
2. Separation of housing and services
3. Services array to match needs
4. Recovery focused practice
5. Program operations

Working with Community Landlords

- 
- 1) Common Goal: Landlord, participant, and program all want decent, well-managed, affordable housing
 - 2) Benefits for landlords: guaranteed rent, no rent loss for vacancies
 - 3) Support staff responsive to landlords
 - 4) Master leasing allows sharing liability and creative solutions to housing barriers

P 2: Separation of Housing and Services

- Also refers to continuity and coordination of support through disruptions in housing



Housing First and Harm Reduction

Meet people where they are...

but don't leave them there.



V. Research, Fidelity and Systems Change

- How do we know this program is effective?
- What is an evidence based model?
- Why do we measure program fidelity?
- How has Housing First created systems change?

Research evidence

- See www.payhighwayshousingfirst.org
- 1999 psych services concurrent longitudinal 5 year outcomes (Tsemberis)
- 2004 RCT N=225 in NYC (Tsemberis)
- 2006 long stay shelter users (Stefancic)
- 2006 HUD Study (5 cities) (Pearson)
- Denver Cost Study (Parvensky)
- 2008 Mixed methods RCT (Padgett)
- 2012 Chronic Inebriates (HUD) DESC, Pathways DC, UW cost study
- 2014 Canadian RCT (over 100 papers)
- EU Studies (Portugal, France RCT*)

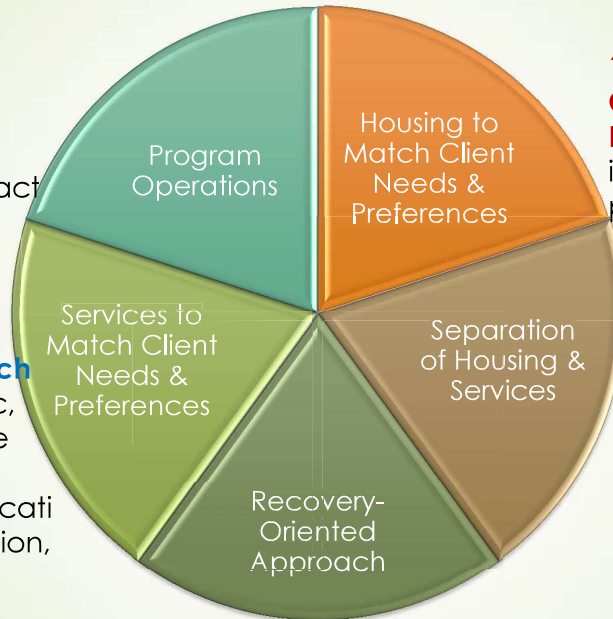
Housing First Fidelity: 5 Domains

5. Program Operations

Operations: team structure, staff communication & organization, contact with participants

4. Services to Match Needs

Needs: psychiatric, nursing, substance use, employment/education, social integration, etc.



1. Housing to Match Client Needs & Preferences

Preferences: choice, integrated, affordable, permanent

2. Separation of Housing & Services

no housing readiness, standard rights & rules of tenancy

3. Recovery-Oriented Approach

Approach: choice, harm reduction, self-determination, recovery

2 Ways of Conducting Fidelity Assessments

External review by HF Experts

- Team of experts visits your program
- Conducts interviews reviews practices
- Provides feedback in an interactive process

Internal review or Self-Assessment

- Each team members rates HF practice
- Dialogue with entire team to develop a team consensus

HOUSING FIRST FIDELITY SELF-ASSESSMENT

Please select the answer choice that best describes the **housing process and structure** that this program offers its participants (Questions 1-7).

1. How does the program determine the type of housing in which a participant will live?

Program assigns participant to the first available housing unit	Program conducts a clinical assessment and determines the most appropriate housing based on participant's clinical need / functioning	Program assigns housing based on a clinical assessment, but with input from the participant regarding their preference	Participant chooses the type of housing they want to live in OR All participants have the option of a scatter-site apartment
1	2	3	4

2. How does the program determine the neighborhood in which a participant will live?

Program automatically assigns participant to the neighborhood with	Program conducts a clinical assessment and determines the most appropriate	Program assigns housing based on a clinical assessment, but with input from	Participant chooses the neighborhood they want to live in, given
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Pathways Housing First Fidelity Assessment Tool

4. To what extent does this program have ready access to a affordable housing through the use of housing subsidies?

Program does not have access to housing subsidies or subsidized housing units, and does not provide support for participants to obtain them	Program does not have access to housing subsidies or subsidized housing units, but provides advocacy and support for participants to obtain housing subsidies or subsidized housing units	Program has direct access to housing subsidies and/or subsidized housing units, but there is a waiting period for participants	Program has ready direct access to housing subsidies and/or provides subsidized housing units for all participants
1	2	3	4

5. What percent of participants pay 30% or less of their income towards their rent (excluding costs for other services such as food, housekeeping, and nursing) in permanent supported housing?

0-14%	15-29%	31-45%	46-60%	60-84%	85-100%
1	1	1	2	3	4

6. On average, how long does it take participants to move from enrollment into permanent housing?

Within 6 months	Within 6 months	Within 3 months	Within 2 months	Within 1 month	Within 2 weeks
1	2	3	4	4	4

7. What percent of participants live in the following housing types? (Fill in % for each)

a. Scatter-site, short-term, or transitional housing	b. Hotel	c. Congregate housing/ Group Home	d. Social Housing: no support services	e. Social housing: with support services on-site	f. Social housing: with support services off-site	g. Supportive housing (specialized housing for persons with psychiatric disabilities with support on-site)	h. Independent apartments rented from community landlords	i. Other housing type fill in:
___%	___%	___%	___%	___%	___%	___%	___%	___%

Key Point

Fidelity is fundamental.

Higher fidelity to Housing First is associated with recovery-oriented practice and improved quality of life outcomes.

Fidelity & Outcomes

Higher program fidelity is associated with:

- Increased housing stability
- Increased quality of life
- Decreased drug/alcohol use
- Reduced use of acute care or emergency services (*Goering et. al in Psych Services, 2015*)

10-year outcomes for Ireland and Finland 2008-2018

FINLAND

- Adopted HF as National policy
- Converted shelters to permanent housing (national lottery)
- Invested in developing affordable housing (17,000 units)
- Rent subsidies for elderly, disabilities, single parents, students, widowed, etc.
- Shelter beds from 2100 to 50
- HOMELESS (RS) COUNT FROM 3100 TO ZERO
- Ref: **Y-Foundation**

IRELAND

- Addresses homelessness as an emergency or emergency accommodation
- Increased the investment in shelters and emergency accommodation
- Promised development of social housing
- Went from a low of 600 shelter beds to 2100
- HOMELESS (RS) COUNT FROM 1200 TO 5400



Lessons Learned from Finland

- National Housing First policy with sufficient funding
- Began to eliminate investment in transitional and shelter programs
- Converted existing building to PSH
- Acquired, built and rented a total of 17,000 mixed income units
- A financially sustainable non-profit landlord
- Services provided by referral agencies
- Rent supplements as prevention to 7 high risk groups currently housed
- Unified social and economic policy vision, social values of inclusion and assistance for those less fortunate



References

- Goering, P., et. al, (2014). Further Validation of the Pathways Housing First Fidelity Scale. *Psychiatric Services*, *Psychiatric Services*, 09/2015.
- Stefancic, A., Tsemberis, S., Messeri, P., Drake, R., and Goering, P. (2013). The pathways housing first fidelity scale for programs serving individuals with psychiatric disabilities. *American Journal of Psychiatric Rehabilitation*, *16*, 240-261.
- Tsemberis, S. (2015). *Housing First: The pathways model to end homelessness for people with mental illness and addiction*. Minneapolis, MN: Hazelden.