

Showcasing Ohio's Housing Models for Persons with Severe and Persistent Mental Illness, Addictions & Dually Diagnosed

Ohio Department of Mental Health & Addiction Services
Monday December 8th, 2014
ODOT- Auditorium

Agenda

- Welcome/Agenda/ Housekeeping
- Purpose of the Day/ Updates/Successes
- Review of OhioMHAS Housing
Categories/Definitions
- Housing Model Presentations

HOUSEKEEPING

- Bathrooms
- Cell phones
- Smoking
- Lunch
- Questions
- All materials posted to:
<http://mha.ohio.gov/Default.aspx?tabid=158>

Art Wills

Dave Warye

The Boys in Capital

Hamid Mehrizi

Community Capital
Capital Investment
Program

Robin Cox

**Doug
Bailey**

ACF Critical Repair Grant
Capital- Recovery
Residence RFP
Development/Financing
TA

**Jonathan
Baker**

**The Girls (& a Boy)
in
Recovery Supports**

ACF Quality Payment AOD Housing
 RSS Incentive Recovery Residence
 Payment RFP
 RSS RRC
 CAHBI Employment
 PATH IPS Grant
 Housing Policy Peer....
 Trainings/Learning Consumer..
 Community

Kuelting Betts **Theresa Rorhbaugh** **Elle Jazi** **Deena Mavromatis**
Sharon Fitzpatrick **Deborah Givens**
Allsla Clark **Dana Mondon**
Mindy Vance **& Adam Anderson**

OHIO MENTAL HEALTH & SUBSTANCE SERVICES

Housing Categories and Definitions Crosswalk

July 2014

Categories	Definition	Types of Housing	Examples
Permanent Housing	A housing setting that is voluntary and length of stay is resident-driven, not determined by a program. Housing may be scattered site apartments or single-family homes or a larger housing complex that is in the community of the individual's choice. Services and supports may be available to residents. Supports can be on-site or off-site depending on individual need and specific setting. Participation in supports and services may be voluntary or have some expectation of participation which is agreed to in the lease agreement addendum.	<ul style="list-style-type: none"> Permanent supportive housing Community residence Recovery residence Private apartments Home ownership 	<ul style="list-style-type: none"> HAP Housing as housing Supportive housing Person with Section 8 <ul style="list-style-type: none"> — private landlord Level 1, 2, 3 Sober house
Time-Limited/Temporary	A short-term setting that can include room, board and/or personal care. A non-permanent setting that provides support needed for residents to return to previous housing setting; to move into a more permanent housing setting or a break from current housing. Most often treatment and/or services are part of facility rules, NOT intended as a permanent housing environment. Program rules include length of stay. This setting is not subject to tenant landlord law.	<ul style="list-style-type: none"> Respite Foster Crisis Temporary Transitional 	<ul style="list-style-type: none"> Crisis bed Crisis intervention YMCA/YWCA Boarding home Respite care Foster care Step-down unit
Residential Care	A residential setting that includes room, board and personal care. Depending on resident's level of functioning and care needs, may have staffing 24 hours a day/seven days a week and assistance with activities of daily living. A congregate setting is usually included with this living environment. Services are delivered as defined in license. A resident agreement that includes participation in services may be applicable. May or may not be a long term more permanent housing depending on level of care needed for the individual. Residential care is owned and operated by a private owner or provider agency. This type of housing is licensed and is not subject to tenant landlord law.	<ul style="list-style-type: none"> Adult care facility (ACF)/ adult group home Residential care facilities (Health) Licensed DODD facility child residential care/ group homes 	<ul style="list-style-type: none"> ACF Supervised group living MH Type II, III Assisted living
Residential Treatment	A licensed facility staffed 24 hours a day/seven days a week that provides room, board, personal care and clinical services on-site as part of the treatment stay. Entrance into the facility is determined by clinical/medical need. Facility is owned and operated by a certified provider agency for the clinical/medical services provided on-site and may be affiliated with or within an inpatient continuum. This type of housing is licensed and is not subject to tenant landlord law. <i>Reasons for this placement level of care are more clinically driven than environmental.</i>	<ul style="list-style-type: none"> Residential treatment Non-medical community residential treatment (Level II-A) Medical community residential (Level II-B) 	<ul style="list-style-type: none"> Level 4 recovery residence Half-way house (Medical community residential) MH Type I

UPDATES & ACCOMPLISHMENTS

Adult Care Facility/Adult Foster Home Incentive Program

- Provide ACF/AFoH a financial incentive for ensuring residents with behavioral health needs are linked to community services
- FY14 ACF Incentive:
 - # of ACFs participating: 315
 - # of clients: 5880
 - \$\$ distributed: \$258,720
- FY15 ACF Incentive Q1:
 - # of ACFs participating: 286
 - # of clients: 1782
 - \$\$ distributed: \$128,304

AOD Housing

- Prior to consolidation the Department funded in partnership with Ohio Council an Environmental Scan for Recovery Housing in Ohio
- Quarterly AOD Housing Resource Meetings
- ATR catalyst
- MBR Request Granted
 - \$5 Million to increase capacity- Recovery Residences
 - \$5 Million earmark for Capital funding for Recovery Residences
 - Resource Hub Development
 - RFP Awarded for Ohio Recovery Housing (NARR Affiliate)

Capital

- FY13-14- \$10million in Community Capital for individuals with Severe and Persistent Mental Illness
 - 22 housing projects producing 322 units
 - Permanent Supportive Housing
 - Significant Leveraging from OHFA & FHLB
- FY15-16 - \$15 Million in Community Capital
 - Alcohol & Drug has access to capital funds
 - \$5 million was earmarked specifically for Recovery Residences
 - 7 housing projects that will produce 150 units

Capital (Cont')

- Capital Investment Program (SuperCIP)
 - Partnership with OHFA to preserve capital funded PSH projects (Mental Health) started FY 12
 - FY13 – 119 PSH units renovated (10 projects/ 22 addresses)
 - FY14 – 109 PSH units to be renovated (8 projects/ 17 addresses)
 - OHFA commits \$3 Million and OhioMHAS commits \$1 Million
 - FY15 – TBD – applications in spring 2015

Capital (Cont')

- Adult Care Critical Repair Grant
 - Partnership with OHFA
 - Funding from Ohio Housing Trust Fund- \$1 Million
 - FY 12, a total 114 ACFs were awarded grant funds.
 - FY 13 OHFA had a project drop out and gave an additional \$300,000 to assist more ACF's
 - **36** ACFs whose awarded projects have been completed and paid,
 - **18** ACFs which were awarded funds, whose projects either have not started or are currently in progress.

Cooperative Agreement to Benefit Homeless Individuals (CABHI)

- Ohio Awarded \$3.6 million over 3 years (\$1.2 million each year)
- Targets homeless and chronic vets and chronic homeless non vets that have SMI/SUD
- Primary Goal is to secure permanent housing and services and supports
- 5 County providers are participating
 - Cuyahoga – Frontline Services
 - Franklin – Southeast, Inc.
 - Hamilton – Greater Cincinnati Behavioral Health Services
 - Montgomery – Eastway Behavioral Health Care and Miami Valley Housing Opportunities
 - Summit – Community Support Services
- Target goal: 820 participants over 3 years
- Grant began September 30,2014

Projects for Assistance in Transition from Homelessness (PATH)

- PATH provides outreach, engagement and linkage to behavioral health services, housing and other benefits for individuals with severe and persistent mental illness who are chronic homeless or homeless
- PATH RFA:
 - 12 Funded Projects/13 Counties participating
 - \$1,906,094 SFY 2015 Allocated
 - \$691,012 SFY 2015 minimum match requirement
- SFY 2015 Projected Outreached/Enrolled:
 - Outreached/Contacted: 4,808
 - Enrolled: 3,384 (70%)
- <http://pathprogram.samhsa.gov/Super/Path/Grantees.aspx>
 - State/Territory "Ohio" for list of (provider) contacts

Recovery Housing RFA

- HB 369 allocated \$5 million to increase the number of Recovery Residences throughout Ohio for individuals with Substance Use Disorders
- Original Recovery Housing RFP Applications:
 - 56 Proposals
 - \$11,091,334 in original total requests
- Awarded:
 - 41 proposals awarded out of GRF
 - Approximate number of combined GRF/GAP beds 657
 - 54 providers funded GRF/CAP
- County View: (see maps)
 - 44 individual counties funded with combined GRF/CAP

Residential State Supplement Program (RSS)

- A cash assistance program which helps prevent premature or unnecessary institutionalization, and to deinstitutionalize those who have been inappropriately placed in long term care facilities and who can return to the community
- MBR allocated an additional \$7.5 million to expand the number of individuals for RSS
 - RSSAs of November 30th, almost 600 applications have been received since RSS expanded program enrollment October 1st.
 - Of those applications, over 100 individuals have begun receiving RSS benefits and over 300 are pending enrollment.

Residential State Supplement Quality Payment

- Effective Oct 1st for FY 2014 - 15 only
- Purpose: *To provide ancillary payments directly to operators of those facilities that house residents receiving RSS in order to enhance the quality of care of the living environment for every resident.*
- RSS Quality Payment Quarter 1:
 - This information is based on the first payout for Quarter 1 which just went to Fiscal today. 4-6 weeks before operators will receive.
 - # of ACFs participating: 101
 - # of clients: 1,246
 - \$\$ distributed: \$149,520.00 (RSS Program/Policy Changes)

OhioMHAS Match for Supportive Housing (SHP) Grant-Development Services Agency

- OhioMHAS provides a portion of the required match for the Supportive Housing and operations of Supportive Housing for homeless individuals.
- Eligibility- behavioral health providers applying for this grant
- FY 2014
 - 17 Requests for match was received
 - \$332,000 has be tentative set aside for allocations
 - \$466,751 has been requested
 - \$2,201,962 has been requested from DSA (leveraged dollars)
- OhioMHAS is anticipating allocations of match will be distributed January 2015 based on the final allocations by DSA

Housing

- There are four (4) Categories of Housing in which have several types of housing or residential placements under each.
 1. Permanent Housing;
 2. Residential Care;
 3. Time-Limited/ Temporary;
 4. Residential Treatment

Permanent Housing

A housing setting that does not have any time limits for the lease or resident agreement. Apartments may be scattered site, or a larger housing complex that is in the community of the individuals' choice. Services and Supports are not mandatory if included in the housing. Supports can be on site or off site depending on individual need and specific setting. Length of stay is determined by the individual not a program. Types of housing under this category include:

Permanent Supportive Housing (PSH)

Provide access both to affordable housing and to a flexible and comprehensive array of supportive services designed to help tenants to achieve and sustain housing stability and to move toward recovery. Housing is covered by Ohio tenant landlord law. PSH is an evidence-based practice for people with mental illnesses and is typically defined by the following features:

- Tenant households execute leases (or sub-lease) agreements with the same rights and responsibilities as other households renting housing in the community;
- Supportive services are readily available to tenants, are designed to promote housing stability, and include access to crisis services 24 hours per day, 7 days a week;
- Supportive services are flexible and individualized, adjusted to meet the tenants' evolving needs and preferences;
- On-going participation in supportive services is not required in order for tenants to retain their housing; and
- Access to the housing opportunity and the services is not time-limited.

Recovery Residence

- Is an alcohol and drug-free living environment with peer support and other addiction recovery aids, including employment assistance. Room and board, and various levels of services based on the level of care needed are included. Rules in program may be applicable. Treatment services are billed separately, if applicable. Agency or owner operated with various levels of staff. May have a standard tenant landlord lease or general lease agreement with program rules.
 - Level 1: Peer-run facilities that include drug screenings, house meetings, and self-help meetings. Democratically run. Generally single family residences utilized to house up to 5 unrelated individuals.
 - Level 2: Monitored facilities that include house rules, structure, peer run groups, drug screenings, house meetings, and involvement in self- help and/or treatment services. Primarily, single family residences for up to 5 unrelated adults. Can include apartments or other dwelling types. At least 1 paid position.
 - Level 3: Supervised housing with administrative oversight, policies and procedures, services delivered may be licensed services. This housing includes various types of structures including a single family residence or apartments. Include a facility manager, certified staff, or case worker.

Private Apartments

- Apartments or housing within the community with a private landlord. May or may not have a HUD section 8 voucher. Housing is not connected to local behavioral health system although individuals may receive outpatient services (i.e. case manager, meds only)

Home Ownership

- Refers to a house which anyone can own. Individual holds the mortgage or deed. This type of housing is NOT sponsored, licensed or supervised. Consumer is designated head of household or in a natural family environment.

Community Residence

- is a housing setting in which (service enriched housing) a person living in an apartment or shared living setting where they entered into an agreement that is NOT covered by Ohio tenant landlord law. Housing is contingent upon adherence to rules or specific services. Financial sponsorship and/or provision of some degree of on-site supervision. May be ADAMH/CMH/ADAS Board or provider or private owner owned and managed.
- Some Recovery Residences- level 3 may fit under this...

Residential Care

A living setting that includes room, board, and personal care. Rules in program or services agreement is attached to housing are applicable. 24/7 staffing, assistance with activities of daily living, in congregate setting is included with this living environment as defined in the license. Residential Care is owned and operated by a private owner, agency, and is affiliated with or within an inpatient continuum. This type of housing is licensed. There are three types of residential facilities in which OhioMHAS issues a license.

- Type 1 – provides Room & Board, Personal Care, and Certified Mental Health services to one or more adults, or children or adolescents
- Type 2 – provides Room & Board and Personal Care services to one or two adults, or children or adolescents
- Type 3 – provides Room & Board to five or more adults

Types of Residential Care Setting include:

- **Child Residential Care / Group Home** – A congregate living environment licensed by a county or state department to provide care to children or adolescents. Reasons for this placement level of care are more environmental in nature than psychiatric. Child residential Care / Group Home may provide supervision, social services, and accommodations, but treatment services are provided separately and service intensity will vary from client to client.

Types of Residential Care Setting include:

- **Group Home-** a congregate living environment licensed by a state department to provide care to adults. Reasons for this placement level of care are more environmental in nature than psychiatric. Home may provide supervision, social services, and accommodations, but treatment services are provided separately and service intensity will vary from client to client. May or may not be a long term more permanent housing depending on level of care needed for consumer. Licensed by the state, includes room & board and may or may not include personal care or mental health services. May also be called Residential Support, Next-Step Housing, or Supervised Group Living.
- ***Adult Residential Care/ ACF: Adult Care Facility (Adult Group Home/Adult Family Home) & Adult Residential Care (Type 2, 3)***

Types of Residential Care Setting include:

- **Residential Care Facility**- licensed through Department of Health- may or may not share a bedroom. Residential care facility" is a home that provides either of the following:
- (a) Accommodations for seventeen or more unrelated individuals, and supervision and personal care services for three or more of those individuals who are dependent on the services of others by reason of age or physical or mental impairment;
- (b) Accommodations for three or more unrelated individuals, supervision and personal care services for at least three of those individuals who are dependent on the services of others by reason of age or physical or mental impairment, and, to at least one of those individuals supervision of special diets or application of dressings, or provide for the administration of medication to residents, to the extent authorized. Can be called Assisted Living

Types of Residential Care Setting include:

- **Licensed MR Facility** – Refers to any ODMR-DD licensed group home or community facility (that is not an ICF-MR) where supervision, services and/or accommodations are provided. Examples: Group Home for persons with MR; Residential Facility for persons with MR.

Time-Limited/ Temporary-

- A short term setting that can include room, board, and personal care. A non- permanent setting that provides support needed for residents to return to previous housing setting; to move into a more permanent housing setting or a break from current housing. Treatment and/or services are part of facility rules. NOT a permanent housing environment. Program Rules include length of stay.

Types of Temporary Housing

- **Respite Care** – short-term living environment, it may or may not be 24 hour care. Reasons for this type of care are more environmental in nature. May provide supervision, services and accommodations. Treatment services are billed separately.
- **Foster Care** – Living situations in which the client resides with a non-related family or person in that person's home for purpose of receiving care, supervision, assistance, and accommodations. Treatment services are billed separately. Licensed through the state.
- **Crisis Care** – Provision of short-term care to stabilize person experiencing psychiatric emergency. Offered as an alternative to inpatient psychiatric unit. Staff 24 hours per day/7 days a week. Treatment services are billed separately.
- **Temporary Housing** – Non-hospital, time limited residential program with an expected length of occupancy and goals to transition to permanent housing. Includes room and board, with referral and access to treatment services that are billed separately.
- **Transitional Housing-** Time Limited usually connected to a program with a completion timeframes. Services and supports required as part of program.

Residential Treatment

A licensed 24/7 staffed facility that provides room, board, personal care and clinical services on site as part of the treatment stay. Entrance into facility is determined by clinical/medical need. Facility is owned and operated by a certified provider agency for the clinical/medical services provided on site and may be affiliated with or within an inpatient continuum. This type of housing is licensed and is not subject to tenant landlord law. Reasons for this placement level of care are more clinically driven than environmental.

Types of Residential Care Setting include:

- **Residential Treatment-** Provides room and board, personal care, and certified mental health services to one or more adults, or children or adolescents. Provider is licensed and certified by OhioMHAS as a Type 1 Residential facility. Reasons for this placement level of care are more psychiatric or behavioral in nature than environmental. Not a long term placement as clinical services is on site.
- **Non-Medical Community Residential Treatment (Level II-A)** –A 24-hour rehabilitation facility, without 24-hour-per-day medical/nursing monitoring, where a planned program of professionally directed evaluation, care and treatment for the restoration of functioning for persons with alcohol and other drug problems and/or addictions.

Types of Residential Care Setting include:

- **Medical Community Residential Treatment (Level II-B)**- A 24-hour rehabilitation facility, with 24-hour a day medical/nursing monitoring, where a planned program of professionally directed evaluation, care and treatment for the restoration of functioning for persons with alcohol and other drug problems and/or addiction occurs. It may be affiliated with or located within a hospital, as a part of the inpatient residential continuum or may be in a freestanding facility. Room & board, and personal care 24/7. Rules in program attached to housing are applicable.

Permanent Supportive Housing - Mainstream Integrated Model

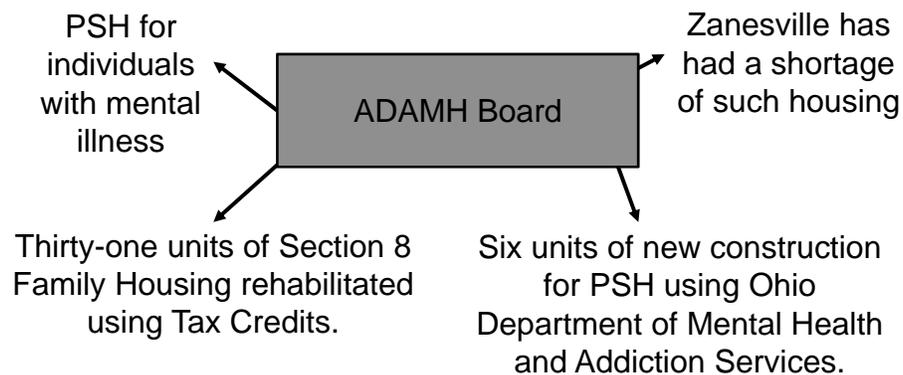
Fairway Vista

Section 8, Family Housing,
Tax Credit Rehab, New Construction, PSH

Fairfield Homes, Inc. & Six County

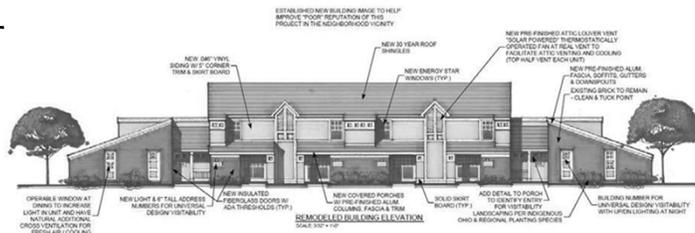
Jennifer Walters
jwalters@fairfieldhomesohio.com
Robert Montgomery
bmontgomery@sixcounty.org

Housing Model

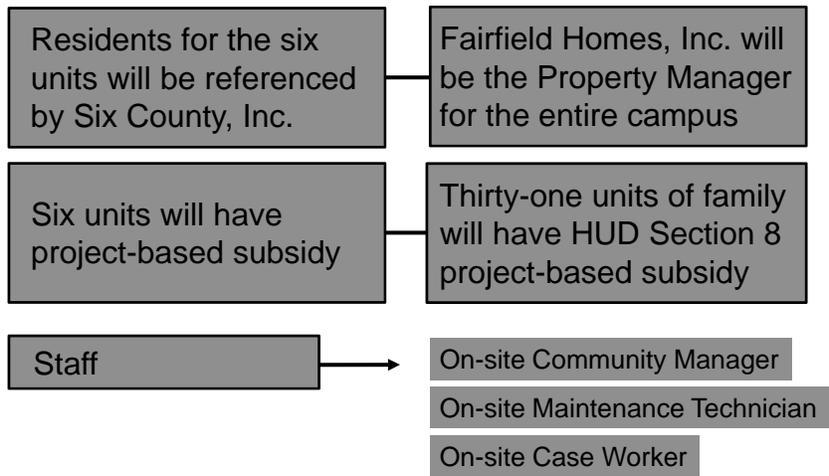


Property Description

- Fully furnished one-bedroom apartments with one-year lease
- Six units will be on the same campus as 31 family, 1-3 bedroom apartments
- Fairfield Homes, Inc., Six County Inc., MEOAG – General Partner



Property Description



Population Served and Characteristics of Tenants

Residents sign a 1-year lease and as long as they follow the rules of the lease and pay rent, they are able to live at Fairway Vista as long as they wish

Residents are referenced by Six County, Inc. and work with the Housing Authority and Fairfield Homes to pass screening



Funding

This site was previously called The Links and was in dire disrepair and under Section 8 housing contract with HUD in default

- Acquisition
- Rehab 31 units
- New Construction 6 units
- Rental Assistance: Section 8 HUD, Project Based Vouchers



Dogwood Glen PSH- Staff On Site

- Community Housing Network, Inc. (CHN)
- Ryan Cassell, Director of Development
- Contact Information
 - Phone Number (614) 487-6782
 - E-mail rcassell@chninc.org

Dogwood Glen PSH- Staff On Site

- Dogwood Glen is permanent housing with rent subsidies and on-site Resident Manager that provides an additional level of security and support.
- Dogwood Glen requires 120 days without use of illegal substances prior to entry
- Services are not required to be utilized

Dogwood Glen PSH- Staff On Site

- How did you decide on this model?
 - CHN and the Franklin County ADAMH Board work together to create a continuum of housing options in the Franklin County
 - Dogwood Glen increases the number of service enriched housing options available in the continuum

Location of Dogwood Glen



3237 Morse Road, Columbus, Ohio



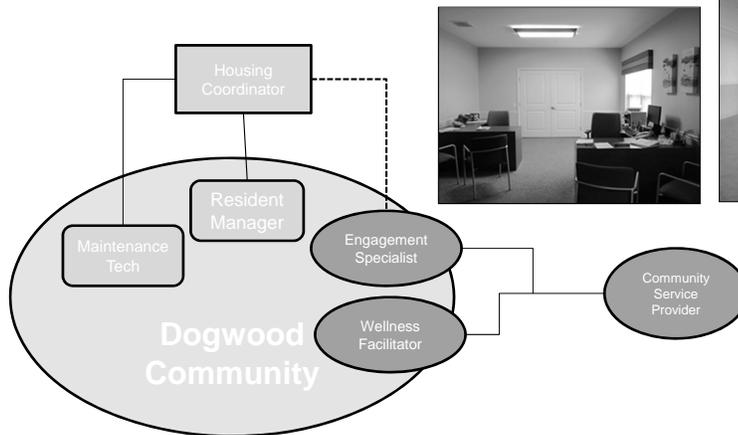
Description of Dogwood Glen



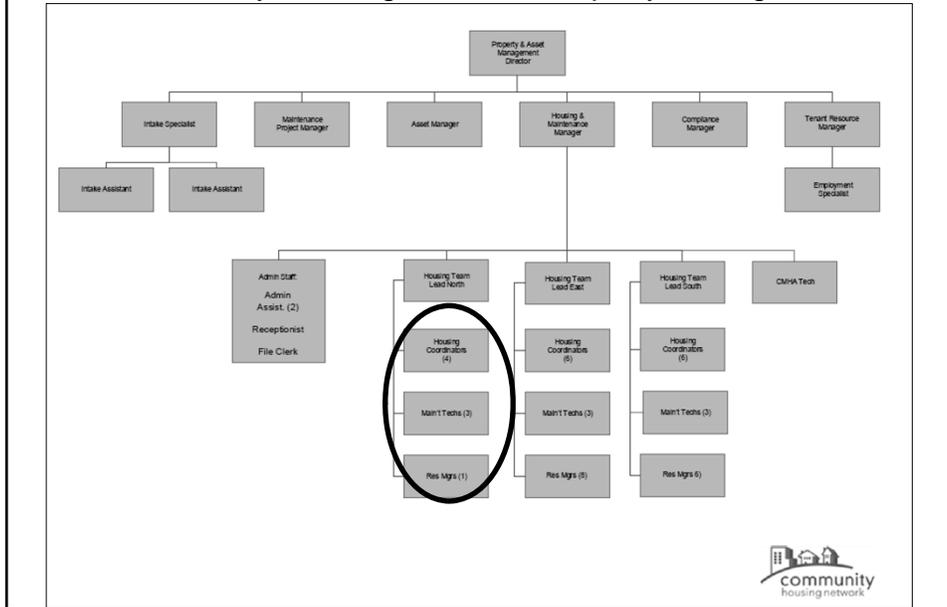
- 42 one-bedroom apartments:
 - 41 residents
 - 1 manager
- 100% Section 8
- Three stories
- Site 2.3 Acres
- 42,000 Gross SF

Description of the Dogwood Glen

- CHN, Inc.: Property Manager
- Dogwood Glen, LLC: Owner
- Concord Counseling: Lead Service Agency



Community Housing Network: Property Management



Service Location Space



Population Served and Characteristics of Tenants

- Eligibility requirements
 - Individuals disabled by severe mental illness
 - 9 units restricted to homeless individuals as defined by FHLB
 - Income restrictions
 - 9 units 35% AMI
 - 17 units 50% AMI
 - 16 units 60% AMI

Population Served and Characteristics of Tenants

- Tenure of average resident/length of stay:
 - 2.5 Years
- Requirements & responsibilities of the tenants?
 - Lease and House Rules
- How do tenants get referred?
 - ADAMH system referrals to CHN Intake Specialist

Services & Supports

- Addiction recovery and relapse prevention
- Counseling services
- Career development
- Case management and service coordination
- Behavioral healthcare
- Peer support
- Financial literacy training
- Wellness counseling



Live Well Program

Adults with mental illness and depressive disorders are more likely to have high blood pressure, asthma, diabetes, heart disease and suffer from stroke.

CHN's service partner Concord Counseling offers the Live Well program that focuses on the connection of mind, spirit and body to improve the lives of Dogwood Glen residents.

Capital Funding

- New construction

Dogwood Glen				12/1/14 6:18 PM	
SOURCES AND USES OF FUNDS					
Sources of Funds	Term	Rate	Sources	Per Unit	Total
2nd HDAP grant	30	0.00%	300,000	5,304	222,747
3rd : AHP Grant	30	0.00%	647,870	14,938	627,402
4th: City	0	0.00%	504,000	96,418	2,745,071
Other-County			250,000	6,848	287,626
Other:ODMH			300,000	11,272	473,440
Cols Found & Key (500)			25,500	4,785	200,960
Deferred Developers Fee		0.00%	0	272	11,439
Net Equity to Project		3,907,640	4,061,598	17,857	750,000
TOTAL SOURCES OF FUNDS			6,088,968		
Applications of Funds					
Acquisition -Land				5,304	222,747
Site Work - Land				14,938	627,402
Construction Costs New				96,418	2,745,071
Furnishings & appliances				6,848	287,626
Builder GR, OH & Profit				11,272	473,440
Architect & Inspection				4,785	200,960
Engineering including fees				272	11,439
Developer Fee Non-Profit/For-Profit				17,857	750,000
Real Estate Taxes				302	12,695
Insurance During Construction				302	12,664
Environmental				136	5,700
Appraisal				70	2,950
Survey				467	19,633
Title and Recording				386	16,196
GP Legal Costs				731	30,708
Accounting Review Partnership Accounting				357	15,000
Construction Period Tax Return				23	973
Cost Certification				179	7,500
Market Study				160	6,700
Marketing Costs				232	9,760
Construction Loan Interest				2,585	108,587
Loan Costs (Const.)				1,422	59,708
OHFA Tax Credit Appl				0	2,000
OHFA Tax Credit Reservation Fees				660	27,705
OHFA Monitoring Fees				900	37,800
Other: Parkland dedication				167	7,029
Soft Cost Contingency				160	6,736
Lease-up Reserve				414	17,407
Operating Reserve				4,973	208,884
SUBTOTAL				141,310	5,935,010
Bridge Loan Interest					153,958
TOTAL DEVELOPMENT COSTS				144,975	6,088,968

Operating Budgets

- Operations

No. Of Bedrooms	Units	Gross Rent	Utility Estimates *	Net Rent	Annual
1	9	643	97	546	58,968
1	8	643	97	546	52,416
1	9	643	97	546	58,968
1	15	643	97	546	98,280
TOTAL	42				\$268,632

EXPENSES	3.0%
PUPA With Accounting:	4,685
PUPA W/O Accounting:	4,225
Real Estate Taxes	0
Insurance	15,000
Utilities - common	28,000
Utilities - Mgr Apt	1,500
Water/Sewer	25,000
Maintenance/Decorating	54,568
Admin/Personnel	33,600
Management Fee	8.0%
Audit & Tax Return	6,000
Asset Management	4,000
Other: res mgt at \$8 hour	8,320
Other: EBL fee	1,000
Other:	0
Other - Service Coordinator	0
Total Expenses	197,362

Permanent Supportive Housing - No Staff on Site

Housing First / Permanent Supportive Housing

- Housing Solutions of Greene County, Inc.
- Rhonda Baer, Executive Director

335 E. Market Street

Xenia, OH 45385

937-376-7810

Rhonda@HSGreeneCo.org



Housing First / Permanent Supportive Housing

- Why is your model?

Housing First is an evidence-based practice that looks at housing as a tool, rather than a reward, for recovery. It is an approach to ending homelessness that centers on providing permanent housing first and then providing services as needed and requested.

- How did you decide on this model

Staff and tenants must feel that they have some collective control over their environment. In residences where people feel part of a larger community, they are also more likely to look out for their neighbors and work together to create a safe, comfortable environment to work on their Recovery.

Population Served and Characteristics of Tenants

- Eligibility requirements

- Have a Severe and Persistent Mental Illness
- Homeless/at-risk of homelessness
- Sobriety – Not a requirement – Housing First Model

Population Served and Characteristics of Tenants

- Services are not required.
- Tenant are required to be lease compliant. (Thru Motivation Interviewing we allow for mistakes and assist with compliance.)
- The Community and The Behavioral Health Provider makes referrals

Support Services are Accessible, Flexible, and Target Residential Stability

- Emphasize
 - Money management, activities of daily living, support in achieving and maintaining sobriety, and accessing health, addiction and mental health services.
 - Lease obligations, including paying rent, maintaining a safe and healthy living environment, allowing others the peaceful enjoyment of their homes, and complying with basic house rules.
- Widest possible appeal
 - Range from support groups for substance abusers, to cooking classes, the arts, high school equivalency preparation and vocational counseling.
- Linkages
 - Legal services, immigration services and local entitlement and benefits offices are usually essential. Although tenants sometimes need to be actively encouraged to use program resources

Fairborn Managed Units Owned by MHRB



4 – two bedroom
4 – one bedroom
2 – one bedroom town
houses

**4 yr.
Ave. Occ.**

Recently acquired \$600,000 grant from OHFA for renovations

- On-site Peer Resident Manager
- CPST and Housing Support Services is home based.

Fairborn Managed Units Owned by MHRB



4 – one bedroom in each building
8 total

**2 yr.
Ave. Occ.**

- On-site Peer Resident Manager
- CPST and Housing Support Services is home based.

Funding

- Acquisition
 - OMAS 75%
 - Debt Financing 25%
- Leasing/rental assistance
 - Section 8 Tenant Based Vouchers
 - Shelter Plus Care Tenant Based Voucher
- Operations
 - Rent Collections is very important
- Administration
 - 70% - MHRB
 - 25% - ODSA Supportive Housing Program

Fairborn Owned Units

**2.5 yr.
Ave. Occ.**



8 – one bedroom units

ODMH Capital Grant, Debt			
Installed windows, front steps, parking lots w/speed bumps			
Install security cameras			
OHFA & ODMH Capital Improvement Pilot Program (CIPP)			
Patio Door Replacement			
Replace Decking & railing			
New Furnaces			
Central air			

Xenia - Owned



2 – two bedroom
4 – one bedroom

**4.5 yr.
Ave. Occ.**

Transferred the ODMH Capital Grant to purchase			
New roof due to hail damage			
OHFA & ODMH Capital Improvement Pilot Program (CIPP)			
Window Replacement			
Kitchen updates			
Bathroom updates			
Exterior building			
New Furnaces			
Central air			

Xenia - Owned



2 – two bedroom
1 – three bedroom



2 – two bedroom
1 – three bedroom



2 – two bedroom
1 – three bedroom

ODMH Capital Grant, Debt

**2 yr.
Ave. Occ.**

Xenia - Brandywine Own HUD 811



8 – one bedroom units

HUD Financing/ Zero debt	
New roof/siding due to hail damage	
New Windows	

**3.5 yr.
Ave. Occ.**

Funding

- **New Construction**
 - Ohio Mental Health and Addiction Services (OMAS) 350,000
 - Ohio Housing Finance Agency (OFHA) 400,000
 - Federal Home Loan Bank of Cincinnati (FHLB) 300,000
- **Operations**
 - Project Based Section 8 Rent Collection

COLUMBUS PLACE UNDER CONSTRUCTION



Permanent Supportive Housing - Housing First Model

The Intersection of Permanent Supportive Housing & Housing First

Irene Collins, Executive Director
icollins@edeninc.org

EDEN Inc. Then & Now

- 1991 – 3 staff serving 35 individuals
 - Housing for persons with mental illness
- 2014 – 125 staff serving over 3,000 individuals and families each month
 - Housing for persons with disabilities
(primarily mental illness)/homeless

EDEN's Programs

- **79 Scattered site properties – 260 units**
 - ODHMAS/ADAMHS Board
- **5 HUD multi-family buildings – 76 units**
 - 811 and 202/8
- **Housing Subsidy Programs – 2470 units**
 - S + C, SHP, HAP, Section 8, HOPWA,
- **Re-entry Programs – 105 units**
 - RHO, H4G, Attorney General, Home Choice

EDEN's Programs (cont.)

- **Emergency Solutions Grant – Rapid Re-Housing/Housing Location**
- **Norma Herr Women's Shelter-Owner**
- **Property Management & Maintenance-** over 900 units
- **Developer-** PSH Buildings, renovations (CIP), projects for local ADAMHS Board

What is Permanent Supportive Housing?

- “Meeting the Need: Permanent Supportive Housing Need Assessment & Financial Model for Ohio” by CSH, October, 2014
- “...permanent supportive housing (psh) ...combines affordable housing with services to help people overcome complex challenges, such as homelessness, mental illness, physical disabilities, and substance abuse issues.”

Permanent Supportive Housing

- The study states that statewide, there are over 14,000 units of PSH
- These units serve a wide range of individuals who fit the general definition for PSH
- The need for PSH is great

Cleveland-Cuyahoga County Housing First Initiative

- Convened in 2001 by Enterprise Community Partners, Sisters of Charity Foundation and the Cleveland/Cuyahoga County Office of Homeless Services
- Initial Goal of 1,000 Permanent Supportive Housing apartments for persons experiencing chronic homelessness
- **9 PSH Building - 518 units**
- **10th Building starting construction - 66 units**



Housing First Buildings



Emerald Commons
Detroit-Shoreway \$8.6 Million

1850 Superior
Downtown \$4.4 Million

The Liberty at St. Clair
Glenville \$11.3 Million

South Pointe Commons
Clark-Metro \$12.2 Million

Buckeye Square
Buckeye \$10.5 Million

Edgewood Park
Slavic Village \$10.5 Million

Northridge Commons
Cudell \$1.2 Million

Greenbridge Commons
Fairfax \$12.6 Million

Winton on Lorain
Lorain Station Historic District \$9.5 Million

Total Investment = \$80 Million




Housing First Initiative

- Why is it different?
 - Focus on Chronically Homeless
 - Overriding Principle
 - Commitment of the original founders
 - Sisters of Charity Foundation
 - Enterprise Community Partners
 - Cleveland/Cuyahoga County Office of Homeless Services

Housing First Initiative

- Why is it different? (Cont.)
 - Strong Partnerships that have endured
 - EDEN
 - Cleveland Housing Network
 - FrontLine Service
 - Office of Homeless Services
 - Enterprise Community Partners

Are YOU ready to be HOMELESS???

- No one wants to answer “yes” to this question!
- Housing First guiding principles:
 - Everyone is ‘ready’ to be housed- *low barriers to entry*
 - Once stably housed individual better able to address issues that led to homelessness
 - Services on site and available-but NOT mandatory
 - *Focus on housing retention- consistent/flexible*

Housing First is Targeted

1. People Who are Chronically Homeless and Have Experienced Extensive Periods of Homelessness
2. Disabling Condition – MH, AOD, HIV/AIDS, DD
3. Significant housing barriers – Vulnerability Index
4. No requirement for sobriety or program participation



Targeting Applicants

- Chronic Homeless- 1 year or more continuous or 4 episodes or more in 3 years
- Homeless in the Shelters or on the Streets- verifiable
- Most Vulnerable- Most complex issues and those who have the most barriers (PSH Priority Meetings)
- Highest Utilizers of Resources- hospitalizations, jail, emergency room



Could benefit from intensive, on-site Services



PSH Current Client Profile

Mental illness – 78%
dependency – 36%

Alcohol or other drug

Serious physical health issues – 50%
involvement – 70%

Past criminal justice

Average days homeless prior to moving in – 700 days

Employment rate at entrance – 1%
- \$294 per month

Average income at entrance

Male – 68%

African-American - 70%

Veteran – 20%

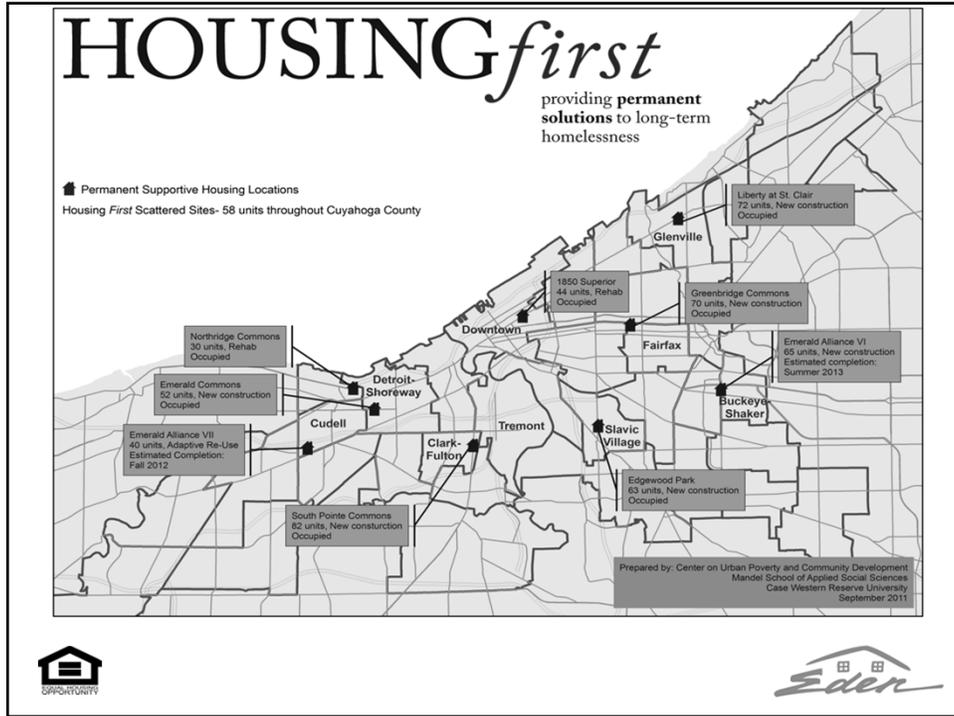
Average Age – 51 years old



Housing First Key Providers

- Enterprise Community Partners
- Sisters of Charity Foundation
- Cuyahoga County Office of Homeless Services
- City of Cleveland
- Cleveland Housing Network
- EDEN, Inc.
- FrontLine Service
- Famicos Foundation
- U.S. Department of Veterans Services
- AIDS Task Force of Cleveland
- Care Alliance
- Connections

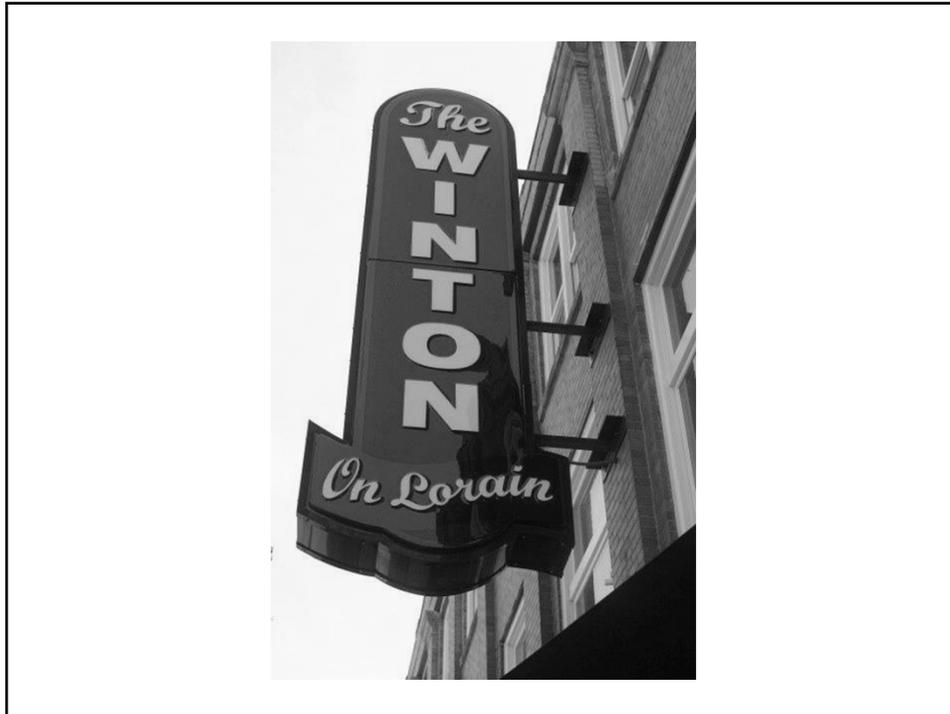




On-Site Staff

- Property Management – Property Manager, Maintenance Technician, Front Desk Clerk, Custodian
- 24 Hour front desk coverage-overnight covered by security firm
- Services - Service Coordinator, Case Managers, Employment Specialist, Life Skills Worker, Nurse (FLS, VA, ATFGC, Care Alliance)





Community Relationships

- Community acceptance
 - Political support – councilperson and CDC
 - Community around Site – stakeholders/neighbors
 - All partners should be present and bring expertise
 - Give facts – apartment building, Mental Illness does not mean violence, not a shelter, tenant selection criteria
 - Don't guarantee “no issues” but promise *responsiveness and FOLLOW THROUGH*





Important Community Relationships

- Block Clubs
- Councilperson/CDC
- Faith Based Organizations/Churches
- Merchant Associations
- Housing First Collaborative
- Coordinated Intake
- Police/Fire
- Neighbors



Community Room



Strategies to Engage the Community

- Open House of PSH
- Staff Contact Information
- Follow-up email/Phone Call if Issues Arise
- Use of Community Room
- Use of Restrooms/Coffee for Police
- Visit Local Merchants
- Reach out to Residential Neighbors
- Investment in Other Partners
- Office/Retail Space
- Mobile Clinic





Costs & Funding

- New Housing First PSH projects cost for construction, furnishings average \$11 million per building
- Funded primarily through Low Income Housing Tax Credits (LIHTC)
- Also AHP, City & County Support, Ohio MHAS, and other

Costs & Funding (cont.)

- Operating Costs & Revenue
 - Average Operating Costs pu/py = \$9,325;
Average Services Cost pu/py = \$6,950
 - Revenue primarily rental subsidies
 - Shelter Plus Care
 - SHP
 - Section 8 (minimal due to difficulty in administering)
 - VASH – 25 vouchers committed to new project
 - ODSA Supportive Housing Program Grant

Outcomes!

- Only 2% of participants return to shelter
 - Alternate options are important
- 73% Decrease in Chronic Homelessness
- 10% move on to more independent housing
- Closed 100 Bed shelter
- 10% Employment rate
- Cost savings to system: \$6,700 per person per year



Permanent Supportive Housing - Fostoria Junction

Fostoria Junction Permanent Supportive Housing

- Neighborhood Properties Inc.
- Lynnette Hair and John Hoover
- 419-473-2604 ext. 124
- lhair@neighborhoodproperties.org

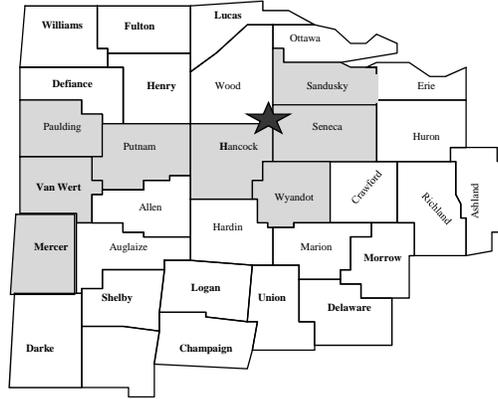
Fostoria Junction

- Why is Fostoria Junction PSH?
 - Fostoria Junction began as the idea of Precia Stuby from Hancock County (Findlay) that received seed money from the Eli Lilly Corporation and NAMI Ohio in the summer of 2003.
 - It was based upon the belief that people with a serious mental illness should not have to move far away from their home county in order to obtain permanent supportive housing.

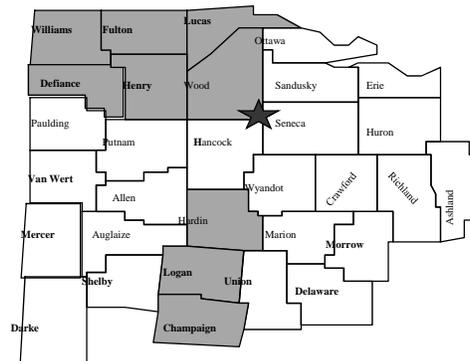
Fostoria Junction

- Fostoria Junction serves 4 Boards serving 8 counties. The primary treatment providers are Century Health and Firelands.
- At that time the four Boards were paying approximately \$300,000 to keep people housed with out-of-county vendors that were in some cases less than optimal.

Fostoria Junction – Member Boards



Boards that have placed a resident at Fostoria Junction



Description of the Housing

- The tenants at Fostoria Junction sign an initial one year lease.
- The building is located in Fostoria, Ohio
 - Single site with 15 one bedroom units, with full kitchens
- Ownership & Property Management
 - NPI owns and manages the property
 - 24/7 staffing is provided by NPI employees

Population Served and Characteristics of Tenants

- Eligibility Requirements
 - Diagnosis/disabling condition
 - Homeless/at-risk of homelessness
 - Low Income

Population Served and Characteristics of Tenants

- Tenure of average resident/length of stay
 - Average length of occupancy is 3.5 years
 - Three original tenants
- Requirements & responsibilities of the tenants
 - The average tenant at Fostoria Junction requires assistance with 2-3 Activities of Daily Living
 - Tenants agree to allow daily safety checks and medication prompting by staff
 - Manage tenant responsibilities, per Ohio Tenant-Landlord Law

Population Served and Characteristics of Tenants

- How do tenants get referred?
 - ADAMHS Board, clinical provider, family member, etc. makes inquiry regarding interest in Fostoria Junction and is provided with an application packet
 - Application packet submitted to Century Health or Firelands Counseling & Recovery Services
 - Designated team reviews packet
 - A decision is made within 10 working days to accept or deny admission

Services & Supports

- On-Site Services
 - 24-hour/7 days a week staffing
 - Two nutritiously balanced meals served daily
 - Monthly on-site mental health wellness visit by a psychiatrist
 - Pharmacy Delivery

Services & Supports

- On-Site Services
 - Psycho-educational groups facilitated by behavioral health provider
 - Religious Services conducted by clergy from various denominations
 - Arts, social recreation, fitness, and entertainment activities
 - On-site laundry

Services & Supports

- **Off-Site Services**
 - YMCA aquatic and fitness activities
 - Trips and tours to community events
 - Recovery-oriented education, classes, etc.
 - Public transportation systems (HATS, SCATS) as available

Funding

- **Acquisition, rehabilitation, new construction, development - \$1.5 million**
 - OMHAS
 - Federal Home Loan Bank
 - Huntington Bank
- **Leasing/rental assistance**
 - 8/15 have a voucher from the Hancock County Housing Authority
 - Remaining funded by home Board

Funding

- **Operations and Services**
 - Funded by home Board through the monthly fee
- **Administration**
 - Funded by home Board through the monthly fee

Fostoria Junction



**Recovery Residence Level 3
& Permanent Supportive Housing**

Permanent Supportive Housing

Amethyst, Inc.

Caroline Reed MSW, LSW
Chief Operating Officer

(614) 221-7175 or creed@amethyst-inc.org

Various Housing at Amethyst, Inc.

- **PSH** – Shelter Plus Care units located at Richmond Ave, Jefferson Ave, E. Long, Scattered Site
Section 8 also located on Jefferson Ave
- **Level 2 Recovery Residence (new)** – Location TBD
- **Returning Home Ohio** – 4 units of re-entry housing for homeless women leaving incarceration

Permanent Supportive Housing

- Subsidized housing integrated with services
- Targets persons with disabilities including addictions and mental health
- Tenant signs an Occupancy Agreement along with Community Understandings and Building Rules.
- Length of stay is resident-driven

Level 3 Recovery Residence

- Supervised Residence with a high level of support
- Goal is to transition residents to lower levels of support (NARR, 2012)
- Resident's time is highly structured and participation in programming is mandatory
- Services include life skills development and clinical services provided by certified staff

Description of the Facility

- **50 Jefferson (37 Units)**
 - 3 x three-bedroom apartments
 - 24 x two-bedroom apartments
 - 10 x 1-bedroom apartments
 - Scattered site, single site
- **37 Jefferson (17 Units)**
 - 2 x three-bedroom apartments
 - 15 x 1-bedroom apartments
- **Richmond Ave (6 buildings, 60 units)**
 - 8 x two-bedroom apartments
 - 2 x 1-bedroom apartments
- **Scattered Site (20 units)**
 - 4 x three-bedroom apartments
 - 9 x two-bedroom apartments
 - 7 x 1-bedroom apartments

Population Served and Characteristics of Tenants

- Amethyst provides sober housing for single women and female-headed families, including families with children placed outside of the home.
 - Primary AOD Diagnosis
 - Homeless for at least 7 days immediately prior to entry into Amethyst
 - Participation in Programming
 - Sobriety

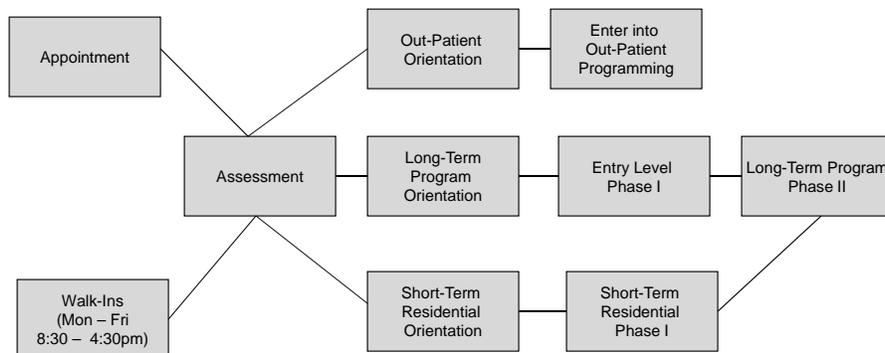
Population Served and Characteristics of Tenants

- Average length of stay is 22 months
- Requirements of Tenants:
 - Pay 30% of their income towards their rent
 - Sober living
 - Linked with Case Management and Counseling
 - Must attend weekly house meetings
 - Actively participating in groups
- Referrals: Regular outreach is conducted at the YWCA Family Center, Faith Mission, Van Buren Shelter, Maryhaven's Engagement Center.

Services Available Through Amethyst

- While women participate in the addictions treatment program, they live in Amethyst's community residential environment.
- Creating a stable, drug-free environment helps the women to build a sober support network.
- Our housing is designed so that women are living in a building with other program participants and a resident manager. The resident manager provides support and supervision to promote community among program participants and residential stability for each household. Activities include
 - Building meetings
 - Social functions
 - Cooperative living activities
- Women are also encouraged to link to self-help/peer support meetings each week. Amethyst holds these meetings on site and helps with transportation for public meetings if needed.

Entry Process



Services & Supports

The Amethyst Model will consist of 5 phases. Each phase has its own goals and outcomes to be used as guidance in the direction of treatment. Each phase will require it's own treatment plan. Movement from one phase to another is indicative of progress, not perfection.

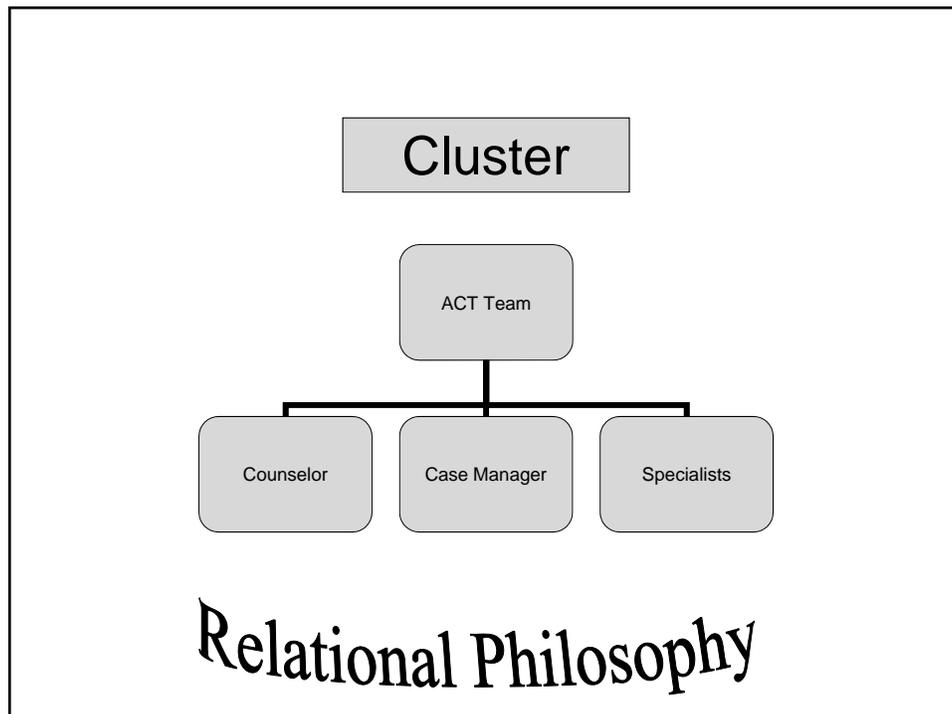
Phase I: Hope

Phase II: Foundation

Phase III: Empowerment

Phase IV: Community

Phase V: Leadership



Services Available Through Amethyst

- Intensive Alcohol, Tobacco and Drug Treatment
- Relapse Prevention Planning
- Relapse Intervention Programming
- Trauma Counseling
- Crisis Counseling
- Mental Health Services
- Case Management
- Transportation Assistance
- Enrollment in Income Assistance, Health Insurance, Food and Material Assistance Programs
- HIV/AIDS/STD Education, Testing, Counseling
- Physical Health Services for Women & Children
- Family Counseling
- Emergency Babysitting
- Enrollment in School and Childcare
- Parenting Education and Support
- SummerQuest, Therapeutic Camp for Children and After School Programming
- Personal Financial Planning, Credit Counseling and Budgeting for Repayment of Debt
- Employment, Education and Vocational Services

Funding

- Rental Assistance – HUD (passed through CSB)
- Medicaid
- ADAMH
- OhioMHAS
- SAMHSA
- Administration of Children and Families (ACF)
- United Way
- Various Foundations

50 Jefferson Ave



Richmond Ave



Recovery Residence -

Level 2

House of Hope, Inc. Recovery Residences

- Richard Mason, Employment Specialist/Housing Coordinator
- 614-291-4691 ext. 317
- rmason@hofhope.org

Level 2 Recovery Residence

- House of Hope Recovery Residences are considered a Level II Recovery Residence. The National Alliance of Recovery Residences (NARR) defines Level II Recovery Residences as, "Sober, safe and peer supportive living environments that are monitored by a peer, such as a resident house manager."
- There are no clinical aspects to our Recovery Residences

Description of the Facility

- **Columbus, Ohio** - Scattered sites with access to public transportation and employment opportunities. Our recovery residences offers recovery support, healing, comfort, and peer family style living and all the amenities you would expect in a home
- There is no maximum length of stay; however, the residence and program are designed to be transitional and to afford the resident sufficient time and resources with which to establish independent, healthy living arrangements

Description of the Facility

- **One: 11- Bedroom Facility and Four: 5 bedroom - single family homes.**
 - Each resident has his own bedroom and shares two bathrooms. Common areas include a kitchen with dining, living room, laundry and utility area. Comfortable furniture, television and all of the amenities associated with home living are included. Meals are the responsibility of each resident with cooking appliances, utensils and dishwasher provided. Mutual responsibility for the care of the residence is expected and enforced
- **Staffing**
 - On-site live-in house manager. Compensation for House Manager equals a 50% reduction in rent

Population Served and Characteristics of Tenants

- We provide sober housing for adult men in recovery from drug and alcohol addiction and live in Franklin County
- Most of our residents were indigent and just completed six months of residential AOD treatment
- **Eligibility requirements:**
 - 30 days of sobriety from drugs and alcohol (we prefer longer)
 - Men 18 and older – able to take care of themselves
 - Participation in a 12-step program of their choice
 - Must attend weekly House Meetings
 - Must be employed and able to pay rent: \$95.00 weekly or \$380 monthly
 - Residents on disability must work or volunteer at least 20 hours a week

Services & Supports

- Wrap-around services are offered to support residents in early sobriety. These services may include: a monthly bus pass or \$50 gas card, clothing for interviewing and work, and budgeting support, to name a few....
- We offer Supported Employment Services off site
- House of Hope coordinates with community providers for other resident services

Funding

Acquisition, rehabilitation, new construction, development

- State funding with Local ADAMH Board Match

Leasing/rental assistance

- N/A

Operations

- Self-sustaining from rent collected from residents

Services

- \$5000 a year for wrap-around services from ADAMH of Franklin County

Administration

- Funded from rent collected from residents

Resident Capacity	Each Night
Number of adults accomodated	5
Number of children	0
Annual Operating Investment	Annual Estimate in Dollars
Maintenance and Repairs (indoor and outdoor)	\$ 3,168.00
Trash Removal	
Electric	\$ 2,400.00
Gas	\$ 2,268.00
Water and Sewer	\$ 1,204.00
Food	
Consumable household items (linens, shower curtains, cleaning supplies, soap, etc.)	\$ 3,767.00
Staff payment (Mgt./Admin.)	\$ 3,000.00
Insurance	\$ 1,200.00
Property Taxes	
Rent (if not purchased) - Depreciation - owned property	\$ 14,930.00
Other: Residents Wrap-Around & Internet/Cable/Telephone	\$ 4,079.00
TOTAL:	\$ 36,016.00
Income Sources	Annual Estimate in Dollars
Monthly Resident Fee (mode)	\$ 17,880.00
Other Sources of Income (list here): ADAMH Wrap-Around	\$ 5,000.00
Other: Forgiven Rent Income-State/ADAMH Grant Funds	\$ 15,924.00
Other:	
TOTAL:	\$ 38,804.00



1320 Parsons Avenue – Columbus, Ohio 43206
11 bed facility





1324 Parsons Avenue – 5 Bedroom Facility



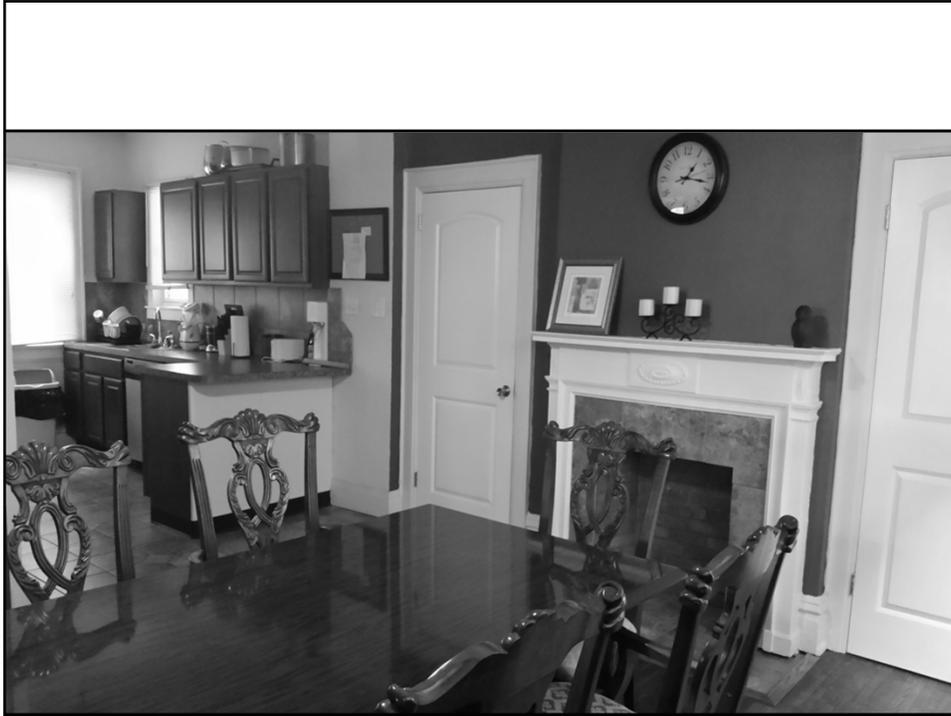
1212 highland Street – 5 Bedroom Facility





1645 Bryden Road – 5 Bedroom Facility





248 Rhoads Avenue – 5 Bedroom Facility



**Recovery Residence -
Level 2**

Recovery Residence

Truly Reaching You Ministries

Perry Clark, Founder/President

(P) 330-785-9294

(E) perry@trulyreachingyou.com

Housing Model

- T.R.Y. is a faith-based organization with peer to peer support services being an integral part of the program. The faith pathway to recovery is at the foundation of the T.R.Y. program.
- T.R.Y. provides an alcohol and drug-free living environment for an average of 6 months, depending on the client's needs, progress, and willingness to abide by the housing protocol (a successful client typically stays at least 9 to 12 months).
- While in the program, life skills are reinforced to help clients change their unhealthy living mindset to one that will help them re-adjust to healthy living.

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Housing Model

- Employment Skills Training prepares clients and enables them to feel comfortable in a work environment by teaching them soft skills and a trade where they can gain the necessary abilities to obtain and sustain employment.
- Trades offered in the T.R.Y. program are home rehab, commercial cleaning, lawn care/landscaping for men and commercial sewing and commercial cleaning (for women).
- Every client participates in the Healthy Social Circle aspect of the program, which engages them in volunteer and socialization activities that acclimates them to living independently instead of becoming a part of the poverty, homeless, crime cycle.

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Description of the Facility

T.R.Y. offers transitional housing for men & women reentering the community or recovering from addiction. The program helps them transition back into society in a productive, healthy way.

T.R.Y. has 5 houses for men and 1 house for women

- Men's houses are all within a few blocks away
- The women's house is one block from the T.R.Y. office
- All houses are in close proximity for transportation purposes
- T.R.Y. owns their houses

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Description of the Facility

- 5 houses for men = 17 beds
- 1 house for women = 3 beds
- Staffing for T.R.Y. is mostly office-based, however, there are trainers/leaders that work with the men and women while they are doing employment skills training on-site, as well as while transporting to and from appointments.

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Population Served and Characteristics of Tenants

- T.R.Y.'s targeted population consists of adult individuals (men and women) reentering the community from incarceration and/or addiction.
- Individuals may be transitioning from community addiction facilities, hospitals, behavioral health facilities, criminal justice facilities, homeless system, or living with family, friends or others.

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Population Served and Characteristics of Tenants

Key Requirements

- Daily quiet time (required to journal).
- Participate in 3 Bible Studies per week.
- Attend Sunday Worship Service.
- Perform 15 hours of community service each month.
- Work with a Financial Counselor for help in managing money once employed.
- When staff members drop clients off for appointments, they must stay at that location until picked up.

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Services & Supports

Employment Skills Training

- Home Rehab (Men)
- Lawn care/landscaping (Men)
- Commercial cleaning (Men & Women)
- Commercial sewing (Women)

Transportation

- Court/APA Appointments
- Health, Behavioral & Medical Appointments

Clothing

- Start Up Essentials
- Boots
- Warm Outerwear & Underwear for cold months

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Funding

Funding for houses, rehabilitation, development, operations, services & administration come from:

- Public donations **(32%)**
- Training support (individuals/organizations donate funds to train our clients in services that provide value to our partners) **(32%)**
- Local grants **(29%)**
- Client program fees **(5%)**
- Sales of Goods **(2%)**

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**Residential Care -
Adult Care Facility**

Adult Care Facilities

Community Living I, II, III
Fraz Betts
(419) 344-6512 cell
'Fraz Betts' <bobetts@sbcglobal.net>

Residential Care

- Because of the closure of state hospitals in the 1980's, there was a lack of housing alternatives for those individuals needing 24/7 care.
- Most homes were started as faith-based initiatives (which is why I started my homes) or as a method to serve these individuals in distressed areas with the ultimate desire of enhancing career goals.

Description of the Facility

- Duration

Most of my residents have been with me for years and may stay in my home for the rest of their lives. If a resident's recovery enables that individual to live in a less restrictive environment, that certainly happens. Everything is based upon what is best for the individual.

- Location

Building specifics – I operate Community Living I, II, III. Each home is a free standing facility within close proximity. The neighborhood would be considered middle class and our residents are seen no differently than the rest of the individuals in the neighborhood.

- Ownership & Property Management

I am fortunate that I was able to purchase these three homes solely to provide residential care. I am more than a property manager. I live in one of the homes and manage the home next door with staff assistance. The home that is two blocks away is staffed 24/7.

Description of the Facility

- Size

- Number of units – Each of my three homes house 5 individuals. One home has 5 men. One houses 5 women and one is co-ed with 2 men and 3 women. Two of my homes have 4 bedrooms and 1 is 3 bedroom. Two of the bedrooms in each of the homes have 2 people and 1 bedroom is a single. The four bedroom homes have a 24 hour live-in manager.

- Staffing

- Each of our homes have 24 hour supervision. I staff one home and the other two have live in managers.

Population Served and Characteristics of Tenants

- Eligibility requirements
 - All of my residents are severely mentally disabled. Many are dual diagnosed (for example, one is blind). Two other are MI/DD.
 - All residents are at-risk of homelessness. All of my referrals are from the mental health system. Due to the severity of my current residents, I rarely have an opening. I have not had an opening in one home for 17 years. Another house has been open for 12 years and 4 residents have been there since it opened. I have not had an opening in the last home for 4 years.

Population Served and Characteristics of Tenants

- Tenure of average resident/length of stay

As originally stated, my average length of stay is greater than my colleagues. My homes have become the “family” for my residents. Although some have family, rarely do the families get involved.
- Requirements & responsibilities of the tenants?

Due to the severity of my resident’s illnesses, they are not required to participate in household chores but many do because they feel they are contributing.
- How do tenants get referred?

All of my referrals come from the community mental health system.

Services & Supports

- Although most of the services provided are on-site, my residents are encouraged to participate in day programs or other activities. Two of my residents volunteer and one receives a stipend for a few hours a week filing documents.
- We support all of our residents by providing 3 meals a day, snacks upon request and fruits and vegetables are always available. We provide laundry services and ensure all residents' needs are met. We take the clients on outings, take them to doctors appts, hospitals, shopping, barbershops, salons, church, etc. We make sure that the residents are medication compliant through coaching.

Funding

I have purchased my facilities. Until recently, the funding of adult care facilities is the ugliest secret within the mental health system. Until 2008, I received no assistance with my facilities and the vast majority of my operation was paid for by the resident paying with their Social Security.

I have been fortunate that our local mental health system provided RSS to my home. However, RSS received no increase for over 15 years. I have also received support from Neighborhood Properties which manages most of the housing in Lucas County. They have been a God-send to those living in my homes.

Until 2008, we tried to serve these individuals on less than \$20.00 a day. Because of the support of the Ohio Department of Mental Health and Addiction Services and the advocacy of the Ohio Adult Care Facility Association, we now receive a little more than \$30.00 a day. We continue to be grossly underfunded but we are appreciative of the new dollars that will ultimately have a tremendously positive impact on the residents of my homes.

Pictures of the Facility

