



# The First Year

2007 PROGRESS REPORT FOR SACRAMENTO'S  
TEN YEAR PLAN TO END CHRONIC HOMELESSNESS

## The Road To Success

### ROXANNA JEPPESON

Roxanna Jeppeson is 42 years old, articulate and an imposing figure at six feet tall. She said, "I've really been homeless since I was thirteen. I was a chronic runaway as a kid." She recognizes now that her family had a history of mental illness, particularly serious depression. Roxanna was camping under the 160 Freeway overpass near Richards Blvd. and had worked sporadically at the Loaves & Fishes dining room. She's had too many friends die on the streets and said, "I knew if I could get housing the rest of it would come."



Roxanna openly states that she has a Bi-Polar mental disorder, but she hasn't applied for disability income because she wants to work. She has been housed for the past year and receives mental health treatment at the Pathways Program run by Turning Point. She is thankful that Pathways "kept me off the street, gave me therapy, the right diagnosis and the right medications."

Roxanna shares a large single family home with six formerly homeless people who also suffer from serious mental conditions. She was placed into housing directly from the street as part of the "Housing First" approach.

Turning Point owns a ten-unit apartment building and a duplex, but most of their housing is provided through leasing arrangements with private landlords or Room & Board operators, and clients usually pay a share of the cost. Pathways provides members with 24/7 staff support and wraparound mental health services. Turning Point reports that 90% of the members retain housing and 20-25% are employed.

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## 171 Chronically Homeless People Housed in 2007

Sacramento's City Council and County Board of Supervisors adopted the Ten Year Plan in fall of 2006, calling for providing permanent supportive housing for all of Sacramento's chronically homeless population. The Plan outlines five overarching goals – creation of permanent supportive housing through development of new housing projects and scattered site leasing programs; opening a Central Intake office to screen and place chronically homeless people; preventing homelessness through preservation and development of very low income single-room-occupancy housing; restructuring oversight of the homeless services system; and evaluation and reporting to the community. This report will describe some of the successes and challenges encountered during the first year of the Ten Year Plan. See [www.communitycouncil.org/homelessplan](http://www.communitycouncil.org/homelessplan).

**PLAN GOAL:** Create 218 New Housing Opportunities for Chronically Homeless in Leased Units within Three Years

**RESULTS:** 171 Chronically Homeless Housed In the First Year

**PROGRESS TO COME:** Funding for an additional 140 leased housing opportunities will be ramped up during 2008-09.

## Demand Outstrips Supply

Contrary to the popular myth, homeless people want to be housed.

**PLAN GOAL:** Set up a new Central Intake system to screen and place chronically homeless people into permanent supportive housing.

**RESULTS:** Central Intake opened June of 2007, and was soon overwhelmed by chronically homeless people wanting to be housed. 220 people were screened. At the end of 2007, 48 people were on a waiting list for new housing units, and 35 more were completing documentation to be placed on the waiting list.

**PROGRESS TO COME:** Central Intake has been closed to new screenings until the supply of housing units catches up to the waiting list. The design of our intake system for chronically homeless will be reviewed during 2008 to figure out the best ways to calibrate the number of screenings with available housing, and to case manage homeless clients waiting for new housing.

## Ending Chronic Homelessness Saves Taxpayer Dollars

Studies across the country have demonstrated that it is less costly to provide permanent supportive housing to homeless people with disabilities than to allow them to continue to be homeless. Chronically homeless people incur dramatic public costs in hospital care, psychiatric facilities, jails, shelters, detox facilities, law enforcement, health care, and business disruption.

The net savings documented in some jurisdictions such as Seattle and Portland, Oregon has been from \$10,000 to \$16,000 per year per client. Since Sacramento has placed 171 people into permanent supportive housing, we are likely saving \$1.5 to 2.5 million per year!

## The Road To Success

### WILLIAM SCHIELD

William "Bill" Schield is fifty-eight years old and the father of an adult son with whom he reconnected about eight months ago. Bill is smartly dressed and groomed. Bill is illiterate; his parents were alcoholics and he has struggled with drugs and alcohol since he was a teenager.



His drug use caused him to lose his last job three years ago and he ended up homeless, constantly moving his camp up and down the American River Parkway. He finally "got tired of being tired" saying he was "in pain and agony camping in the cold and rain with a bad back and shoulder." He went to the Welfare office and was referred to the Aid-In-Kind Shelter where he stayed for five months. The Central Intake office identified Bill as Chronically Homeless and referred him to Sacramento Self Help Housing.

Bill moved into his own room seven months ago. He now takes medication for depression and anxiety attacks and has applied for disability income through the Social Security Administration. Bill states, "If it wasn't for Sacramento Self-Help Housing I wouldn't be where I'm at now and I won't give this up after all my hard work."

### SPECIAL STRATEGIES FOR CHRONICALLY HOMELESS

A total of 456 homeless adults and children were placed into permanent housing by publicly funded programs in 2007. Sacramento's array of shelter and transitional housing programs continue to assist families and individuals who find themselves homeless even as we ramp up the Ten Year Plan to assist chronically homeless people with disabilities.

The strategies adopted in the Plan are based on national research documenting the success of *Housing First* and *Permanent Supportive Housing for Chronically Homeless* people.

A *Chronically Homeless* person is defined as a single person with a disability who has been homeless for a year or more or who has been homeless four or more times in the last three years.

*Housing First* programs are a nationally recognized best practice for many chronically homeless people. The strategy offers permanent housing to disabled homeless people without expecting them to have solved their addictions or mental health problems. Clients are moved into permanent housing and then provided with voluntary services and treatments.

*Permanent Supportive Housing (PSH)* is the product that Sacramento must produce in order to solve chronic homelessness. PSH is permanent housing that is affordable to extremely low income people, is occupied by people with disabilities, and is supported by treatment and case management services.

Sacramento has very few PSH units based on the Housing First model. Our planning efforts assume that we need to develop about 1600 PSH units in order to end Chronic Homelessness. These numbers will be updated based on annual homeless counts.



COLONIA SAN MARTIN, SACRAMENTO - CONCEPTUAL LANDSCAPE PLAN

## Mental Health Resources Critical to Ending Chronic Homelessness

Making mental health treatment and case management available in coordination with housing for homeless people with mental illnesses is critical to success. National studies, as well as Sacramento's annual homeless counts, estimate that about 30 to 40 percent of the chronically homeless have a mental illness.

California is fortunate that the voters passed the Mental Health Services Act (MHSA) of 2005, which provides significant new funding for mental health services statewide. Through a mandated county-based stakeholder planning process, Sacramento County's Division of Mental Health established permanent supportive housing as its number one priority, and made a new commitment to ending chronic homelessness for the mentally ill population of our County.

In order to produce permanent supportive housing it was necessary for County Mental Health to establish new partnerships with state and local housing finance agencies, nonprofit housing developers and mental health service providers. Through these new partnerships, the County has committed more than \$5.4 million to creating new permanent supportive housing for homeless and chronically homeless individuals and families. This commitment represents 93 dedicated units with another 10-20 to be finalized shortly. The MHSA units are integrated into six affordable housing developments totaling 350 units.

In 2007 Mental Health awarded a contract to Turning Point Community Program to implement a new program, Pathways to Success after Homelessness (Pathways). There are currently 80-100 people housed and treated by Pathways and they plan to house up to 250 disabled homeless people in the future. Mental Health and the Sacramento Housing and Redevelopment Agency partnered to provide housing subsidies for 50 chronically homeless individuals served by Pathways.

Partnering with Sacramento Mutual Housing Association, County Mental Health submitted its first MHSA Housing application to the State in January 2008. Mutual Housing at the Highlands will be a 90-unit affordable housing development and will have 33 units dedicated for MHSA clients. Sacramento County was the first county in the state to submit an MHSA Housing application.

### TWO STEPS FORWARD, ONE STEP BACK

Unfortunately last September Governor Schwarzenegger vetoed existing funding for a successful program providing housing and services to mentally ill people who are homeless. The veto of funding for the 'AB 2034' program is resulting in disruption of services to these clients throughout the State.

In Sacramento, 300 people are at risk of homelessness and relapse of their mental illnesses. The County is working to ensure that these individuals continue to receive services through new and existing resources. As of January 2008, approximately 50% of the 300 'slots' of existing comprehensive mental health services targeting homeless adults has been lost.

## Case Management Resources Needed for Plan to Succeed

Staff and members of the Interagency Council to End Homelessness have conducted an in depth analysis of the financial components that will be needed to fully realize Sacramento's Ten Year Plan to End Chronic Homelessness.

The analysis concluded that we can project having many of the critical components for success identified or committed over the next ten years, including:

- financial capital for developing new permanent supportive housing (PSH) projects,
- operating subsidies for PSH projects from mental health resources and Project Based Section 8,
- rental subsidies for leasing individual or shared units, and
- treatment resources for medical, mental health and addictions needs.

However, the critical under-funded component of the system is Case Management. Chronically homeless clients are, by definition, disabled and typically have many complicated needs and few resources.

Inadequate case management funding is a problem now for clients placed into housing during 2007, and projections show an increasing gap as we seek to place more clients during the next ten years. In order for the Plan to succeed we must identify new ongoing funding streams for case management.

Having reviewed the analysis, the Policy Board to End Homelessness plans to establish a committee to understand the needs and identify strategies to fund the case management needs of the Plan.

### EVALUATION NEEDED

The Ten Year Plan calls for formal evaluation of the Plan and of the homeless services system. However, no funds are currently available for evaluation.

## Preventing Homelessness Through Housing Preservation, Development

**PLAN GOAL:** Prevent chronic homelessness by creating 200 new and preserving 100 existing Single Room Occupancy housing units that will serve extremely low income people with disabilities.

**RESULTS:** The 100-unit downtown Berry Hotel has been purchased by a developer who is assembling financing to rehabilitate and preserve the building as very low income housing.

**PROGRESS TO COME:** Current estimates are that Sacramento could lose up to 150 SRO units in the next three years. Two more projects are in the pipeline to preserve or replace these important resources.

The YWCA has requested funding to preserve an existing 32 SRO units, and a site at the corner of 7th and H Streets may be developed to provide up to 160 replacement units.

## New Veterans Services Network

The Sacramento Veterans Community Support Network (VCSN) was formed during the last year to create an integrated network of service providers to veterans and their families within the greater Sacramento Area. The network creates a mechanism for government and private organizations to communicate, advocate, and educate the community about the needs of veterans and the services available to them. Sacramento's 2007 Homeless Count found that about 16% of homeless (392 out of 2452 total) are veterans.



MLK VILLAGE CONSTRUCTION

## Three New Housing Projects Under Construction

### PLAN GOAL:

Develop 280 New Permanent Supportive Housing Units within Five Years

**RESULTS:** A total of 139 units in three PSH projects began construction in 2007 and will be complete at the end of 2008. All three projects are being developed by the nonprofit Mercy Housing California. The projects are:

MLK Village – 80 new 'cottage style' units for people with psychiatric disabilities at 47th Avenue in the County.

Ardenaire Apartments – 19 units dedicated to chronically homeless with psychiatric disabilities. Part of a 54-unit rehabilitation project on Ethan Way.

Colonia San Martin – 40 new housing units for disabled very low income individuals and families with HIV/AIDS. Part of a 60-unit project on Florin Mall Drive in the County.

**PROGRESS TO COME:** Five more projects, totaling 162 units for chronically homeless people, are in the financing pipeline at the Sacramento Housing and Redevelopment Agency.

## New Leadership Structure Supports Ending Homelessness

**PLAN GOAL:** Create a new leadership structure for Sacramento's homeless services system.

**RESULTS:** A completely new leadership structure has been established, enlisting new partners in Sacramento's efforts to end homelessness. The new structure consists of:

- The Policy Board to End Homelessness, chaired by Tom Gagen, CEO of Sutter Health Systems, is made up of high level political and private sector representatives such as Mayor Heather Fargo, County Supervisor Roger Dickinson, Police Chief Rick Braziel and others. The Policy Board provides community accountability, oversight and advocacy for homeless housing and services.
- The Interagency Council to End Homelessness (ICEH) is composed of more than 30 members representing the critical housing and services sectors which must come together in new partnerships to end chronic homelessness.
- Ten Committees are working under the sponsorship of ICEH: Veterans, Permanent Supportive Housing Production, Health Care Linked to Housing, Criminal Justice, Continuum of Care, Housing, Data & Reporting, Outreach & Central Intake, Financial Analysis, ICEH Executive Committee
- The new office of the Ending Chronic Homelessness Initiative consists of three professional staff and two AmeriCorps VISTA members. It is supported by City and County funds administered by the Sacramento Housing and Redevelopment Agency, and is located within the Community Services Planning Council.

## Ending Homelessness is a National Movement

Sacramento is working alongside other communities across the nation to implement proven solutions to end homelessness. Led by the federal U.S. Interagency Council on Homelessness and the National Alliance to End Homelessness advocacy organization, 325 communities have committed to Ten Year Plans. A nationwide network is sharing ideas and support as we make progress toward our common national goal.

Sacramento Mayor Heather Fargo and Supervisor Roger Dickinson, along with 155 other Mayors and elected officials, have signed the *America's Road Home Statement of Principles and Actions*, a 12-point national agreement to work together in a housing-centered approach to ending chronic homelessness [www.usich.gov/newsletter/Interactive\\_Statement\\_Action\\_Sign\\_Principles.pdf](http://www.usich.gov/newsletter/Interactive_Statement_Action_Sign_Principles.pdf)

## 'Frequent User' Programs Help End Homelessness

Many chronically homeless people have chronic illnesses, addictions and mental illnesses that cause them to cycle repeatedly through emergency rooms, jails and detox facilities, at great public cost and little benefit to the clients, who often remain homeless. Breaking the 'Frequent User' cycle with case management, treatment and housing is a key set of strategies for the Ten Year Plan. New partnerships in two venues – health care and criminal justice – are beginning to implement frequent user strategies in Sacramento.

### HEALTH CARE

The Care Connection serves frequent users of UC Davis' emergency room, averaging about 180 enrollees annually. The patients are provided case management services from Harm Reduction Services, housing resources from Transitional Living and Community Support, medical services from the Sacramento Community Health Center and medical and psychiatric services from The Effort. This program, initially funded by the California Endowment, has resulted in a significant decrease in in-patient hospital stays by participants, resulting in a cost avoidance of \$1.8 million annually.

The second health care frequent user program in Sacramento began in 2007 at Sutter Medical Center. Case management, medical care, addictions treatment and mental health services are provided by The Effort. In the first six months of operation the program has seen a 52% reduction in emergency room use among its clients. This program could eventually expand to serve frequent users from all hospitals in Sacramento.

### CRIMINAL JUSTICE

The Sacramento District Attorney, Downtown Partnership, County Jail, Sacramento Police Department and the Volunteers of America (VOA) Comprehensive Alcoholism Treatment Center (Detox) started the Serial Inebriate Program (SIP) in 2006. The SIP program targeted chronic substance abusers in the central city that had 25 or more admissions to jail or detox facilities in the previous 12-month period. Individuals who fit the criteria were offered a sentence of 120 days in jail, to be served by participating in a 90-day VOA treatment program. Twenty-seven people so far have been diverted off the streets into a sober and supportive environment at the VOA. However, at the end of their 90-day treatment only one client was able to access housing.

The new Criminal Justice Committee of the Ten Year Plan formed a collaborative to provide permanent supportive housing to SIP graduates and submitted a grant application to the Sutter Community Benefits Grants Program. Sutter agreed to provide case management funds to Sacramento Self Help Housing, which will provide housing to six SIP graduates. This pilot program seeks to learn what it takes to house this population, and to demonstrate the cost effectiveness of moving them from the streets to housing.

## Treatment Services Will Partner with Housing Projects

One of the key building blocks for ending chronic homelessness is treatment services – medical services, addictions treatment and mental health services. In many communities across America these services are being provided by Federally Qualified Health Centers (FQHC).

Sacramento needs an FQHC to provide treatment services on site at Permanent Supportive Housing programs. The Effort, Inc., a Sacramento community clinic, has applied for FQHC designation - with provisional status expected soon. Sutter Medical Center, Kaiser Permanente, UC Davis Medical Center, Mercy, The California Endowment and the Ending Chronic Homelessness Initiative have provided funding to The Effort to support the development of an FQHC.

The Effort's CEO, Robert Caulk, states "Through this partnership with the local hospital systems and foundations we are able to build a system of integrated medical and behavioral health care for Sacramento's most vulnerable." With this designation The Effort will be able to provide medical care, addictions treatment and mental health services on site at each of the new Permanent Supportive Housing programs.

## Housing Chronically Homeless People in the First Year

Housing units filled during the first year of the Ten Year Plan have been created by the "units through leasing" strategy. Sacramento Self-Help Housing ([www.sacselfhelp.org](http://www.sacselfhelp.org)) (SSHH), a non-profit organization housing homeless people in Sacramento for more than ten years, has been a critical partner for this strategy.

SSHH places most clients into leased single-family homes (4 or more bedrooms) throughout the city and county. SSHH is receiving federal Housing & Urban Development (HUD) funding to provide housing for up to 64 chronically homeless adults, and Sacramento Housing and Redevelopment Agency funding from the City of Sacramento's Tax Increment funds to house up to forty more disabled homeless people.

These funds don't adequately provide for case management and other supportive services, so SSHH partners with Lutheran Social Services and The Effort to provide services needed to achieve housing stability and access to health care and other benefits.

SSHH uses a "Housing First" strategy, which means that people can be housed directly from the streets without having achieved sobriety or mental health stability before they are housed. People do have to agree to the "house rules" to ensure basic safety and good neighbor expectations.

SSHH Executive Director John Foley engages a formerly homeless person to live in each of the homes as a Housing Monitor. Each tenant pays 30% of their income towards rent and the housing is "permanent" meaning there are no time limits on how long the person can live there.

SSHH currently leases 12 homes for these programs and they are always looking for landlords who are willing to lease their houses (at least 4 bedrooms). In this first year of the Plan more than 90% have been successful in maintaining housing.



WILLIAM SCHIELD AND HIS NEW HOME