OREGON HOUSING AND COMMUNITY SERVICES

Liz Weber, Assistant Director, Housing Stabilization Division
OHA HRS, SHARE and ILOS Convening
September 13, 2023

Mission

We provide stable and affordable housing and engage leaders to develop an integrated statewide policy that addresses poverty and provides opportunity for Oregonians.

Working together to serve individuals, families and communities throughout Oregon

Serving Oregonians across the housing continuum

HOUSING STABILIZATION

- Eviction Prevention
- Homeless Services
- Planning and Evaluation
- Energy & Weatherization

AFFORDABLE RENTAL HOUSING

- Permanent Supportive Housing
- Low Income Housing Tax Credit
- General Housing Account Capacity Building
- Agricultural Worker Housing
- Oregon Multifamily Energy Program
- LIFT Rental

HOMEOWNERSHIP

- Homeownership Assistance Program
- Down Payment Assistance
- Oregon Bonds Residential Loan Program
- Oregon Homeownership Stabilization Initiative
- LIFT Homeownership

EQUITY AND RACIAL JUSTICE

OREGON HOUSING AND COMMUNITY SERVICES

CROSS-AGENCY STRATEGIC ALIGNMENT

HEALTH OUTCOMES

JUSTICE OUTCOMES

EDUCATION OUTCOMES

ECONOMIC OUTCOMES

HOUSING IS FOUNDATIONAL

Medicaid 1115 waiver

- Oregon successfully applied to use Medicaid funds on housing services in spring 2022
- Preparing for 2024 implementation; promoting/centering equity
- The waiver allows Oregon to use these Medicaid funds dedicated for low-income residents for housing services. Some of the housing supports include:
  - Rental assistance or temporary housing for up to six months
  - Home modifications
  - Pre-tenancy and tenancy support services
  - Housing-focused navigation and/or case manager

Snapshot of OHCS investments

- **$721.7 million invested in supply solutions and strategies**, including LIFT, Permanent Supportive Housing, LIFT Homeownership supplemental resources, a new in-community ag worker housing program, preservation of affordable housing, pre-development, PSH Risk Mitigation, modular housing, and loan guarantees
- **$349.6 million to emergency homelessness response**, including the early session package investments and expanding efforts to add new shelter beds, rehouse more Oregonians, prevent homelessness, and more
- **$46.1 million invested in community homelessness resources**, including youth homelessness, Tribal governments, shelters and navigation centers, tenant organizations, and more
- **$20 million** to support homeownership through down payment assistance, lending, manufactured home replacement, and foreclosure counseling

THANK YOU!

Trends in CCO Housing Investments

Rachel Burdon, SDOH Policy Advisor, Transformation Center

Moving Upstream: Investing in the Social Determinants of Health and Equity through HRS, SHARE and ILOS

September 13, 2023

SHARE and HRS: Enabling housing investments

Supporting Health for All through Re-Investment (SHARE) is a legislative requirement for coordinated care organizations (CCOs) to invest some of their profits back into their communities. A portion of this investment must go toward housing-related services and supports.

- In 2022, housing was the top category for SHARE investments.

Health-Related Services (HRS) are non-covered services that supplement covered benefits under Oregon’s Medicaid State Plan to improve care delivery and overall member and community health and well-being.

- In 2021, housing was a top category for HRS investments.

SHARE housing investments

Half of all SHARE investments in 2022 were directed toward housing and housing-related services. Top categories included:

- **Housing services and supports** help people find and maintain stable, safe housing
- **Permanent supportive housing** is housing assistance (for example, rent assistance) and/or housing that includes supportive services
- **Transitional housing** is for individuals in transition between houselessness and permanent housing
- **Emergency shelters** are temporary accommodations
- **Affordable housing** costs no more than 30% of tenants' gross income

Oregon Health Authority

Housing investments and community

Connected to community: Community advisory councils (CACs) and community health improvement plans play an important role in guiding investments and strategy for both SHARE and HRS.

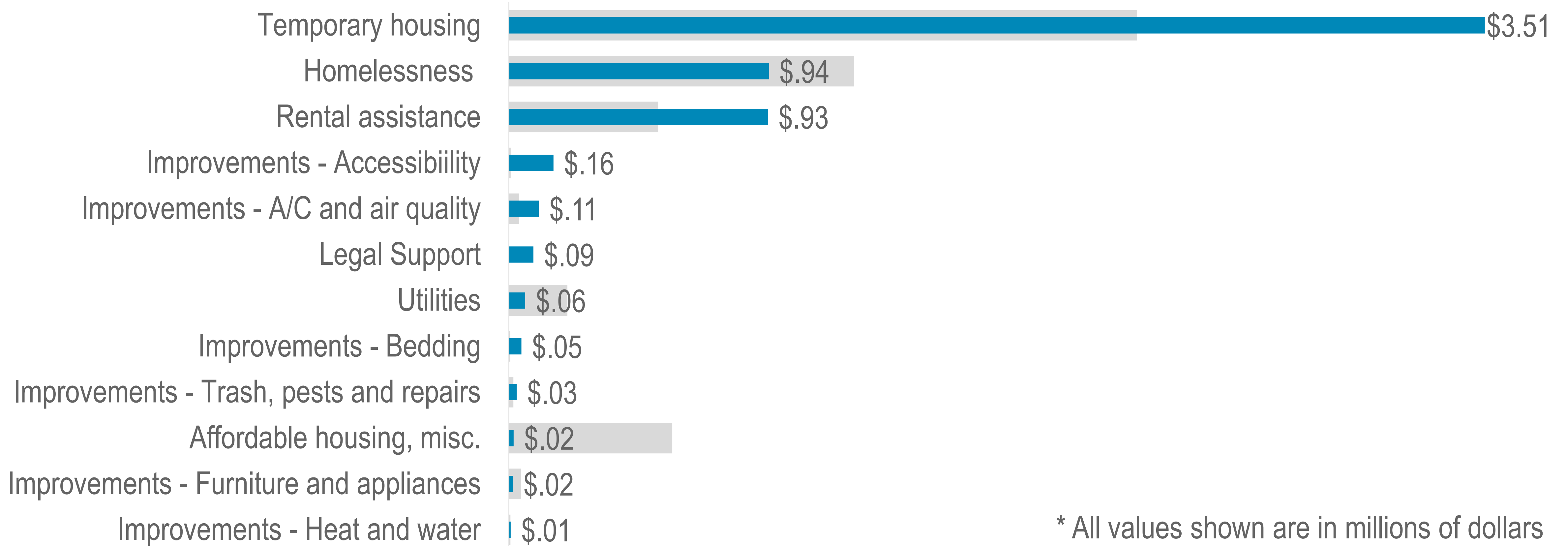
Substantial and growing: Through SHARE, HRS and other CCO investments, housing is a priority.

In 2022, CCOs invested or allocated dollars in housing and housing-related services in their communities.

- SHARE: $16,671,694 (2022)
- HRS: TBD (2022)

HRS housing investments

Temporary housing assistance led 2021 HRS housing spending with a 54% increase from 2020.*



Coalbank Village & Medical Sheltering: Meeting the Needs of the Underserved

Coos Bay, Oregon
Joanne Rutland & Ross Acker

Bridging the Future of Healthcare

Coalbank Village

- 26 pallet homes
- 2 medical shelters
- 2 mental health shelters
- Shared access to full kitchen
- Covered recreation area
- Restroom/shower trailer
- Onsite case management
- 24-hour staffing

AdvancedHealth

Advanced Health CCO financial support

- 2020 health-related services (HRS) community benefit
  - Food, showers, toilet facilities, laundry, transportation, warming shelter, temporary housing and connections to health and social services
- 2021 HRS community benefit
  - Same as above plus expansion of services to Coalbank Village
- 2021 Supporting Health for All through REinvestment (SHARE)
  - Coalbank Village Project (temporary housing)
  - Permanent supported housing
- 2022 HRS community benefit

AdvancedHealth

Medical Sheltering Population

The individuals experiencing houselessness referred for Medical Sheltering from acute care settings seem to fall into five general categories*:*

- Older individuals, post cerebral vascular accident (CVA), waiting on Agency for Persons with Disabilities (APD) placement/services
- Individuals struggling with a combination of diabetes, congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD), peripheral vascular disease (PVD) and late-stage liver and/or renal disease
- Individuals with cancer
- Individuals who have not been successful with outpatient care, who are now experiencing non-healing lower extremity ulcers, cellulitis, and, in some cases, amputations
- Individuals with orthopedic injuries and significant mobility impairments

AdvancedHealth

Medical sheltering expectations

Intensive Care Coordination staff:

- Ensure access to medical appointments and care
- Coordinate access to substance use disorder (SUD) and behavioral health (BH) treatment
- Assess SDOH needs and utilize resources to meet needs, including utilization of flex funding

Member:

- Active participation in own care plan
- Agreement to attend recommended medical care
- Agreement to participate in SUD and BH treatment, when needed
- Active participation in seeking and accessing resources

Utilization and early outcomes

2023 to date:

- 15 individuals sheltered
- Average length of stay (LOS): 25 days (target 21–28 days)
- Access to primary care provider (PCP) obtained: 100%
- Housing/transitional housing obtained: 7/12 (58%)

2022 (10/2021–12/2022):

- 27 individuals sheltered
- Average LOS: 28 days (target 21–28 days)
- Access to PCP obtained: 100%
- Housing/transitional housing obtained: 17/27 (62%)

Early outcomes

2022 emergency department (ED) and inpatient stay utilization:

3 months prior/post sheltering (n=22)

- ED prior: 106 visits (5/person)
- ED post: 38 visits (1.7/person)
- **279% reduction in ED utilization**
- Inpatient days prior: 309 days (14 days/person)
- Inpatient days post: 76 days (3.5 days/person)
- **406% reduction of inpatient days**

6 months prior/post sheltering (n=15)

- ED prior: 84 visits (5.6/person)
- ED post: 41 visits (2.7/person)
- **204% reduction in ED utilization**
- Inpatient days prior: 239 (15 days/person)
- Inpatient days post: 92 (6 days/person)
- **260% reduction of inpatient days**

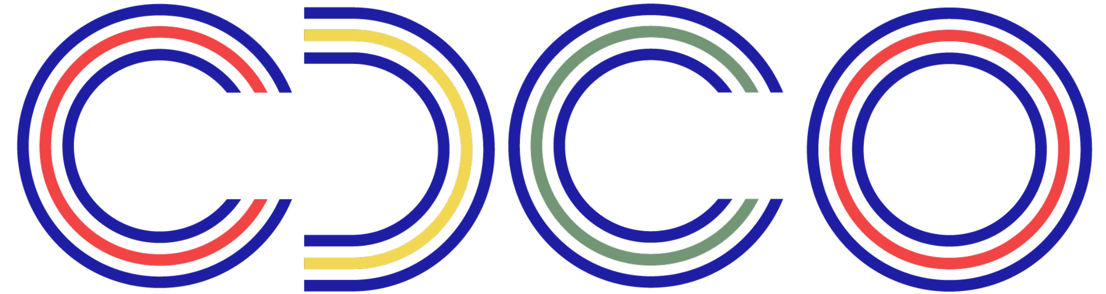
AdvancedHealth

Click to view video: https://vimeo.com/calcagnomedia/review/734899141/727d4afda7

AdvancedHealth

ROCKWOOD

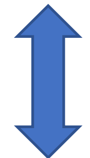
COMMUNITY DEVELOPMENT CORP.

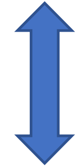


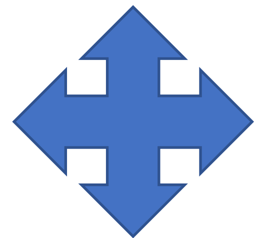
COMMUNITY DEVELOPMENT

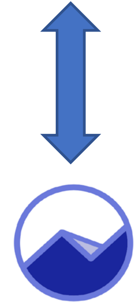
CORPORATION OF OREGON

PROGRAMS

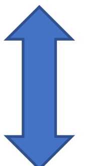


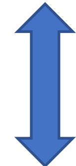






EAST COUNTY
HOUSING





EAST COUNTY
HOUSING

East County Housing (ECH) was founded in 2021 to address issues of houselessness and housing insecurities in East Multnomah County.

The Rockwood Tower was purchased with funds from an almost $7 million grant from Oregon Community Foundation
as part of its Project Turnkey program.

The 75-room four-story hotel is a
low barrier transitional housing shelter for houseless families and individuals.

EAST COUNTY HOUSING

OUR GOAL

To provide stable temporary housing accommodations that bridge the gap between houselessness and affordable permanent housing.

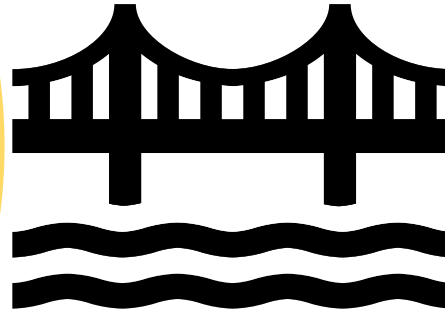
OUR MODEL

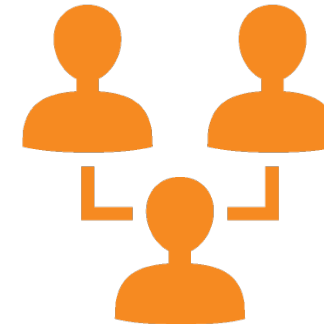
To offer housing case management and wraparound supportive services utilizing the Rapid Re-Housing model. Our team of Housing Specialists and CHWs work to move families and individuals into permanent housing while continuing to assess ongoing needs and barriers.

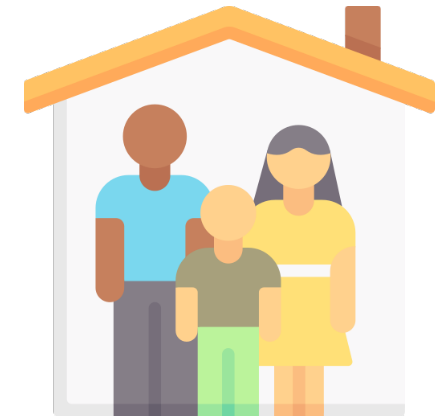
Transitional Housing Pathway

Referral Process

- The East County Housing Team is notified by referring agencies such as
  - 211
  - Multnomah County
  - City of Gresham
  - & many more!!!
- Background checks are run on individuals to maintain the safety of current and future residents
- Rooms, food, ground rules and expectations are provided as they enter into our shelter

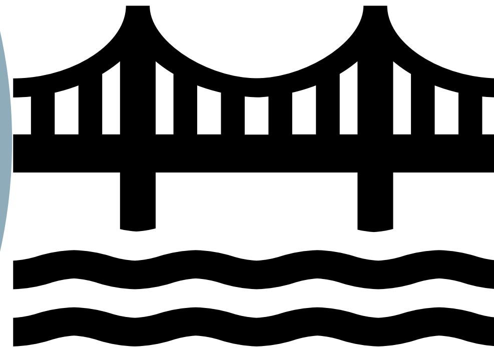


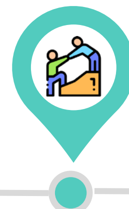




Assessment

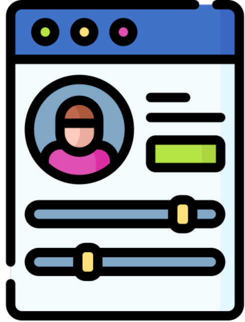
- Identify current barriers and goals
- Collect any special accommodation requests
- Develop an action plan between housing navigator and client (resident)
- Create a plan and introduce opportunities to empower clients to make changes
- Keep families together

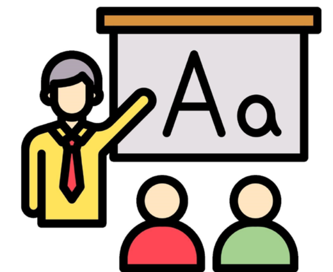




Supportive Services

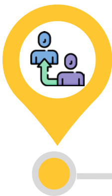
- Residents arrive with different challenges and barriers
  - Financial literacy needs
  - Healthcare needs
  - Educational attainment
  - Basic needs
- CHWs/Housing Navigators provide **personalized supportive services** to residents
- Collaborate with other CBOs to provide for any potential gaps

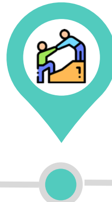




Exit Plan

- Help residents move into permanent housing
  - Criminal record expungement
  - Credit recovery
  - Outstanding bill payoffs
  - Move-in fees paid
  - Help with moving
- Maintain supportive contact after move in (3-6 months)





CITY OF
GRESHAM
OREGON

25 + PARTNERS

- Health Share of Oregon
- Trillium Community Health Plan
- Joint Office of Homeless Services
- Multnomah County DHS
- City of Gresham
- Black Swimming Initiative
- Spirit Mountain Community Fund
- Oregon Housing & Community Services
- Feed the Mass
- Rockwood Public Library
- Reynolds School District
- East County Community Health
- YMCA
- OHA/Medical Teams International
- IRCO
- KeyBank
- Cultivate Initiatives
- NAYA
- Oregon State University
- 211
- El Programa Hispano
- Human Solutions

TOTAL HOUSED

Approx. 2,000

TOTAL FAMILIES PLACED INTO PERMANENT HOUSING

Approx. 200

TOTAL MEALS SERVED

Over 200,000

EAST COUNTY
HOUSING

WHAT'S NEXT?

- 4 Points by Sheraton ($10.5M)
  - 75 rooms, potential 8,000 sq. ft. of Navigation Hub
- 3 new grants, remainder of 2023 for supportive services.

EAST COUNTY

HOUSING

Disclosure

Cultivate Housing Program Overview

A comprehensive, intensive trauma-informed approach to providing core treatment and sustainability of services to individuals living with HIV.

Follows the End HIV Oregon initiative in ending HIV infections through testing, prevention, and treatment.

Designed to assist individuals experiencing supports in behavioral health and the use of harmful substances.

Aims to increase low barrier supportive housing options for individuals living with HIV or at risk of HIV.

Program Goals

Goal 1: Supportive Housing clients will achieve and maintain viral suppression.

Goal 2: Supportive Housing clients will achieve and maintain engagement in HIV medical care.

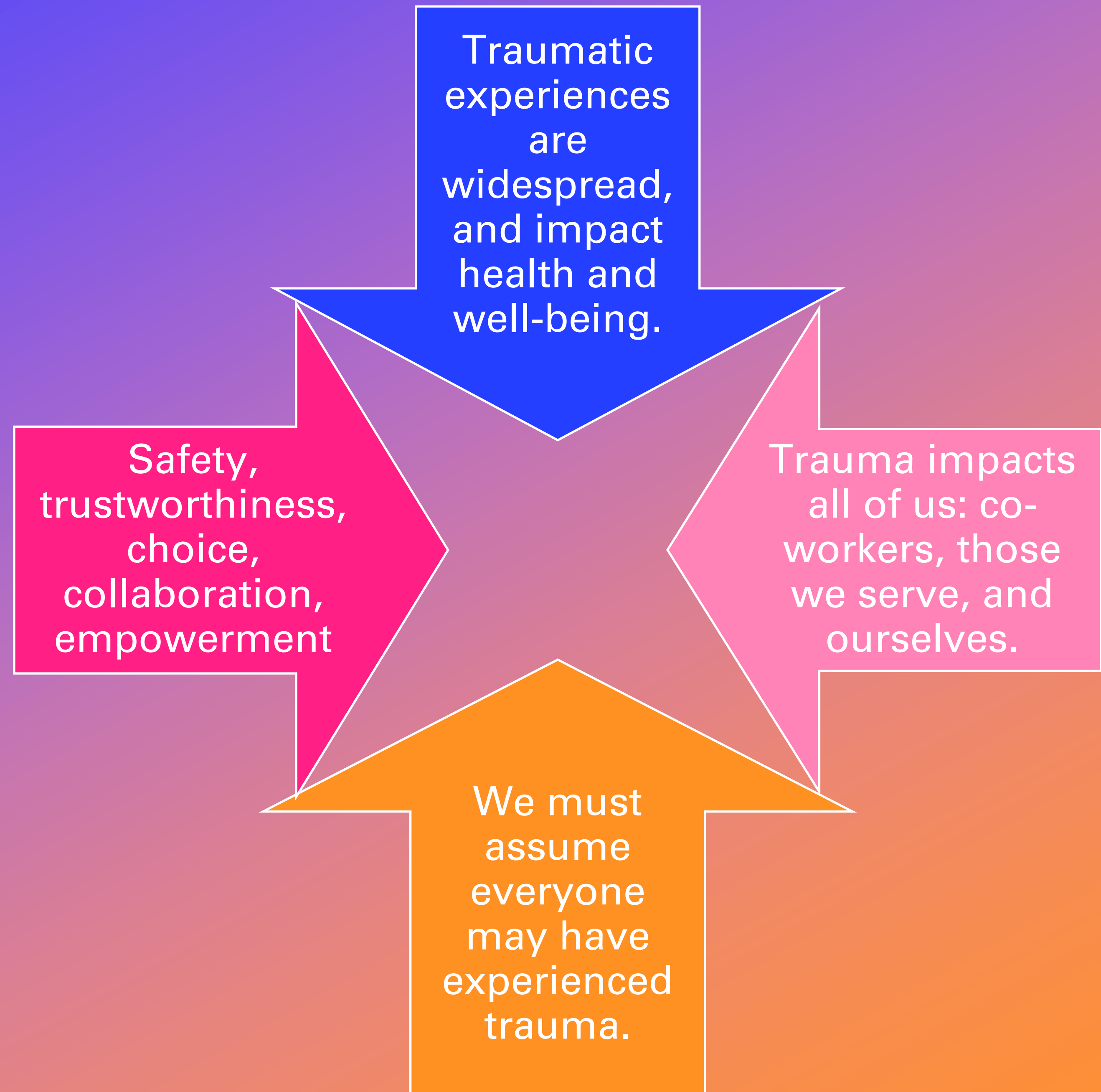
Goal 3: Supportive Housing clients will establish long-term wellness through engagement in program services.

Goal 4: Self-Sufficiency.

Goal 5: Quality, Safe, Affordable Housing.

Goal 6: Flexible Voluntary Services.

Trauma Informed Care Approach



Supportive Housing Navigator

- Provides intensive housing case management.
- Provides all Ryan White Care Coordination Services under the Housing Program.
- Located in Pendleton, Ontario, and The Dalles.
- Builds relationships and agreements with landlords.
- Alleviates barriers by meeting the clients in their own homes.
- Supports tenant compliance with lease terms

Behavioral Health Specialist

- Provides all formal behavioral health services to clients under the housing program.
- Assesses the client's behavioral health needs in close coordination with the client and the supportive housing navigator, supportive housing registered nurse.
- Forming and leading psychoeducation groups, support groups, process groups, substance use groups, or other therapeutic groups as demand arises (open to all clients through EOCIL).
- Individualized drug counseling, focusing on harm reduction, reducing or stopping drug use, and addressing related life areas impacted by substance abuse.

Supportive Housing Registered Nurse

Provides medical case management services specified in the Ryan White Care Coordination Standards.

May perform nursing services to clients in the home to reduce client barriers to accessing medical barriers.

Provides medication management and adherence counseling, including psychiatric medication management and the importance of viral suppression.

Conducts regular health assessments.

Supportive Housing Eligibility Requirements

HIV positive diagnosis verification must be obtained.

The client must sign the Consent for Services Form before the services commence.

Client is at or below 300% of the Federal Poverty Level (FPL) to be eligible.

The client must reside in the EOCIL and Supportive Housing Program service region at the time of referral.

The client must have a housing acuity 3 or 4, and a mental health life area acuity 3 or 4 or an addiction life area acuity 3 or 4.

Successes

- Served 75 EOCCO members since 2021
- Permanently housed 20 individuals
- Received two SHARE awards from EOCCO to purchase and renovate apartments
- 19 units across three counties (Umatilla, Union, and Malheur)
- All enrolled individuals are following program guidelines

QUESTIONS