

Service Possibilities for People with Disabilities

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Housing Benefits 101

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Programs & Services



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Housing Program Videos Minnesota's housing programs can help you pay for housing or get the services you need. These videos introduce some state programs.

The Vault



Benefits Lookup



Benefits Lookup







Behavioral Health Connections

Gary Travis, Behavioral Health and Housing Policy Lead

Overview

- Behavioral health system partners
 - Partners that are vital for connecting people to programs and services
- Behavioral Health Division homeless and housing programs
 - Programs and partnerships that support people with behavioral health needs
- Crisis response services and resources
 - Programs and resources to assist people in mental health crisis or dealing with addictions



Behavioral Health System Partners

- Adult Mental Health Initiatives (AMHI)
 - Regional collaborations charged with overseeing adult mental health services and funding to counties and tribal governments in their area
 - Critical partners for coordinating and assuring access to mental health services and supports
 - 19 AMHIs made up of single county, county collaborations, single tribe, or tribal and county collaborations
 - DHS AMHI webpage and AMHI map handout
 - Email questions about AMHIs and for contact information to mn dhs amhi.dhs@state.mn.us
- Tribal Nations
 - 12 Minnesota tribal nations, Twin City American Indian communities, and the Minnesota Tribal Collaborative
 - Contact and service information can be found at DHS <u>Tribal information</u>

More Behavioral Health System Partners

- Certified Community Behavioral Health Clinics (CCBHC)
 - A new service delivery model that integrates mental health, substance used disorder services, and care coordination to ensure seamless transitions for individuals across the full spectrum of health and social services
 - Minnesota CCBHC federal demonstration from 2017 to 2019 began with 6 certified clinics
 - Expanded to 13 CCBHCs located in the Metro and across Minnesota
 - 10 current CCBHCs and 3 in the process of becoming certified
 - DHS <u>CCBHC information</u>, including a listing of certified providers, contact information, and a <u>CCBHC</u> <u>summary and map</u> handout

Homeless and Housing Programs

- Crisis Housing Assistance Program (fka Crisis Housing Fund)
- Projects for Assistance in Transition from Homelessness (PATH)
- Housing with Supports for Adults with Serious Mental Illness (HSASMI)
- Bridges, Bridges Regional Treatment Center, and other program partnerships

Crisis Housing Assistance Program

- Provides short term housing assistance to prevent homelessness while a person receives needed behavioral health hospital or residential treatment
 - Housing assistance covers housing related expenses such as rent or mortgage, lot fees, and utilities for up to 90 days
- Eligibility criteria
 - Adults with serious mental illness or co-occurring substance use disorder
 - Be of low or moderate income
 - Admitted to a facility for mental health or substance use treatment
- In 2020 there were 304 people served
- The program is temporarily unavailable until a new agency contract is established

Projects for Assistance in Transition from Homelessness

- A federal McKinney–Vento Homeless Assistance Act of 1987 program that requires a state service match
- PATH provides outreach, case management, and other services and resources for people to help them prevent or transition out of homelessness
- Eligibility criteria
 - People with serious mental illnesses or co-occurring substance use disorder who are homeless or at imminent risk of homelessness
 - Prioritizes services for people who are literally homeless with complex needs and barriers
- 7 grantees located across the state including the metro (4) and greater Minnesota (3)
 - A service area map and current provider contact information is available on the DHS <u>PATH website</u>
- In 2020 there were 2,187 contacted by PATH, 681 people were enrolled

Housing with Supports for Adults with Serious Mental Illness

- Program services help people to obtain and retain permanent supportive housing
 - Services include housing transition and tenancy sustaining services, site-based housing services, outreach services, and direct assistance
 - Services must link people to evidence-based permanent supportive housing
- Eligibility criteria
 - People with serious mental illness, or co-occurring substance use disorder, and the highest needs and barriers who are exiting segregated settings, are long term or chronic homeless, homeless, or at imminent risk of homelessness
- 29 projects located across Minnesota including metro (13) and greater MN (16)
 - The current service access is primarily through the Coordinated Entry system for people eligible for permanent supportive housing
- In 2020, across 42 HSASMI projects, there were 1,625 people served
 - 593 in the metro and 1,031 in greater Minnesota

HSASMI RFP

- Request for Proposal opportunity projected for January/February 2022
 - Approximately \$2.25 M in funding per year
- The availability of the Housing Stabilization Services is helping to expand the HSASMI required and optional services:

Required Services	Optional Services
Housing transition and tenancy sustaining	Outreach service
Site-based housing service	Community support services
General case management	Direct assistance

- A limited amount of capacity building funding to increase the availability of the Housing Stabilization Services and to develop or expand available housing
- Will be published to the DHS Open grants, RFPs and RFIs website

HSASMI RFP Priorities

- People with serious mental illness, or co-occurring substance use disorder
- Three homeless criteria
 - People residing in an institution or other segregated setting who will be homeless upon discharge.
 - People experiencing homelessness for one year or more, or multiple times in the last three years, or have been prioritized for permanent supportive housing by the Coordinated Entry system.
 - People experiencing or at imminent risk of homelessness.
- Four behavioral health priorities at least one behavioral health priority is required
 - Program linkage to state homeless and housing programs serving people with mental illness
 - **Peer services** by Certified Peer Specialists or Certified Peer Recovery Specialists
 - Veterans by partnership with the Minnesota Homeless Veteran Registry and with Veteran peer services
 - Equity through being a <u>targeted organization</u> or by partnership with a targeted organization
- HSASMI contact <u>BHD.Housing.DHS@state.mn.us</u>

Housing Partnerships

• Minnesota Housing

- Bridges program and Bridges Regional Treatment Center demonstration program
- HUD Section 811 program
 - Units and federal rental subsidies for people served by Moving Home MN, PATH, or who are long term homeless
 - Partnership includes MN Housing and DHS areas of Housing and Support Services Division and the Moving Home MN Program
- Housing and Support Services Division
 - Housing Stabilization Services Minnesota Health Care Program to provide housing services for people with disabling conditions
 - SOAR (SSI/SSDI Outreach, Access and Recovery) Assistance with applying for Social Security disability benefits
 - Opioid Response grants partnered with homeless outreach to help people attain and retain permanent supportive housing

Mental Health Crisis Services

- <u>Crisis Text Line</u> available 24/7 statewide
 - Text MN to 741741
- Mental health crisis response includes phone and mobile crisis services
 - Adult crisis <u>map and directory</u>
 - Children's crisis map and directory
- Adult Residential Crisis Stabilization available 24/7, for up to 10 days, for crisis treatment
- National Suicide Prevention Lifeline is a toll-free number: 800-273-TALK (8255)

Alcohol, Drug, and Addiction Services

- <u>Alcohol, drugs and addictions</u> information, programs, and resources
 - <u>Get help</u> to find, pay for, and learn about drug, alcohol, and addiction treatment services
- <u>Working together to end the opioid epidemic</u> information about the effort to address the opioid crisis
 - Get help with opioid information and treatment at <u>knowthedangers.com</u>
- **Problem gambling** information, programs, and resources
 - Get help with problem gambling at <u>getgamblinghelp.com</u>
 - Call 800-333-HOPE for free, confidential information, and referral to services, or text HOPE to 61222
- Search for mental health and substance use resources with <u>FastTrackerMN.org</u>





Transition to Community Initiative

Maria Krynicki, Transition to Community Initiative Lead

Transition to Community Initiative

Increased Waiver dollars if the current allocations are insufficient to meet the needs of the person returning to a community setting

Grants to Counties and Technical Assistance Whatever it Takes (WIT) Grantees:

Olmsted County, RADIAS Health, REM and Tasks Unlimited

NEW

Extending eligibility to individuals who are in Community Psychiatric units or CBHH's on the AMRTC waiting list and could return to the community without treatment at AMRTC or FMHP

For more information or to make a referral for the Transition or WIT program please contact: Maria Krynicki, MSW, LICSW Phone: 651.431.6413 Email: maria.krynicki@state.mn.us





Agency Relationship Mapping

Intersections between Homelessness and Housing Programs



Introduction



- Amy Carter Rise Housing Program Manager
 - <u>acarter@rise.org</u>
 - Experience:
 - 13 years at Rise
 - 25 years in housing
- About Rise
 - 50 years founded in 1971
 - Central Minnesota in 1998
 - Housing, employment services, ARMHS in Central MN
 - Mission:
 - Rise unlocks potential and opens doors to success for people with disabilities or other challenges through creative solutions and customized support
 - Vision:
 - We envision a progressive, supportive, and collaborative environment that fosters meaningful growth and provides opportunities to live a life filled with purpose.





Staff:

- 3 FT Housing Support Specialists
- 5 FT Mental Health Practitioners ARMHS

Geography:

- Region 7W Stearns, Sherburne, Benton and Wright Counties
- Region 7E Chisago, Isanti, Pine, Kanabec and Mille Lacs Counties
- Anoka ARMHS Only



How is Rise's Housing Work Funded?

- Braiding together various government funding streams.
- 30% of persons served receive services from multiple programs (employment, housing, mental health)
- Government funding has strings, but gives access to leaders and seat at the table (worth the work)
 - Example: RentHelpMN

Public Funder	Funder/Coa lition	Years Funded
Adult Mental Health Initiatives (AHMI)	DHS	c. 2005-
Housing with Supports for Adults with Serious Mental Illness (HSASMI)	DHS	2008-2022
Family Homeless Prevention and Assistance Program (FHPAP)	MN Housing (LSS is main grantee)	c.2009-
Housing Stabilization Services (HSS)	DHS, MA	2020-
ARMHS	DHS, MA	c. 2008-
RentHelpMN	MN Housing	2021-

Leveraging Private Funding

• Private funding usually fills in gaps

daries. Unlocking possibilities

- E.g. transportation funds, onetime employment expenses, household essentials
- Reach out the grantwriter with needs; she finds us the funding
- Sometimes, you need to get creative.
- Hard to find private funders who will support a new program in Central Minnesota

Private Funders	Dates	Largest Grant Amount	What is it funded?
Americorps	2008-2012		Benefit Navigation
Initiative Foundation	2019-	\$5000	Direct client assistance
Stearns Electric Trust	2018	\$1000	Direct client assistance
Benton Telecom	2019-	\$10,000	Direct client assistance
Midco Foundation	2017-	\$1500	Direct client assistance
Memorial Hospital Fund	2021-	\$5000	Community-based health and wellness opportunities
STARS	2009	\$10,000	Youth services
Otto Bremer Trust	2010-	\$50,000	Re-Entry
United Way	2017	\$1200	Federal-level training
Medica Foundation	2021	\$50,000	Re-Entry



- Knowledge is Key
 - What resource guides already exist?
 - Who is doing similar work?
 - What is missing?
- Network to increase capacity
 - Break down silos
 - Avenues for connection across agencies
- Who do you need to partner with?





Crystal (left) appreciates the support she receives from Rise's Ann Hill, and is excited to be nearing her one-year work anniversary in March.

Our Relationships and Their Strategic Benefits





- Maintaining partnerships to ensure you know what resources are available in the community
 - Valuable even if the partner org doesn't fund you.
- Example: Central Region Continuum of Care
 - c. 2010
 - Rise receives no funding.
 - Learn about housing programs in region.
 - Learn policies for Coordinated Entry and other processes.
 - Shape policy through volunteer/leadership.
 - Occasional funding opportunity.



Our Relationships and Their Strategic Benefits



- Family Homeless Prevention and Assistance Program
 FHPAP
 - c. 2009 subgrantee for 2 FHPAP projects (Lakes and Pines, Central MN)
 - Leadership roles:
 - Chair of the Advisory Committee for both regions;
 - Advisory Committee Secretary
 - Membership sub-committee
 - Knowledge Gained: agencies from housing, vocational, mental health, schools, DV, Counties, state orgs, shelters, aging, youth and many more
 - Benefits to Rise's Service Delivery



Our Relationships and Their Strategic Benefits

- Adult Mental Health Initiatives AMHI Region 7E
 - 15 years direct funder for one of our most successful housing programs.
 - Benefits: Flex Funds, DHS Crisis Housing Fund, LTHSSF, Path program, MHIS Collaboration, MSA Housing, Housing with Support; scattered site and supplemental supports, Bridges, HSS, access to amazing resource guides.
 - Local Advisory Council (LAC) -consumer-driven with focus on direct need of the persons we serve.
 - Interdisciplinary team meetings amongst Targeted Case Managers, Mental Health providers, vocational support and housing support specialists for shared individuals.



Pandemic Lessons





- Listen Louder phone triage skills.
- Teach and standardize phone etiquette for staff
- In person protocols during Stay-at-Home order



Pandemic Impact





- Increase in isolation, anxiety and depression
- More frequent contact.
 - Easier access to staff by phone.
 - Reduced staff travel increases availability
- Technology and IT critical for transition



Thank You!

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