

To: Homeless Solutions Advisory Council

From: Nicole Stingh, Strategic Initiatives and Relations Manager, Homeless Services Division

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RE: Supportive Housing Capital Funding Opportunity

Leveraging the increase of Supportive Housing Services revenue, staff are developing a concept to address gaps in our homeless services system of care. The supportive housing capital funding offering will address the needs of high acuity participants, especially those in active substance use and/or mental health crisis, that were rehoused after experiencing homelessness and are unable to remain successfully housed. The memo below outlines the offering under development, background information, and includes discussion prompts for the May 15th meeting.

Offering Under Development

The Board of County Commissioners approved \$30M to fund the development of supportive housing including transitional and recovery housing for people experiencing homelessness. Metro guidance limits capital funding to temporary housing; this offering is not able to fund the development of permanent supportive housing. In addition, the offering is intended to target SHS 'Population A'¹ but can serve anyone eligible to receive benefits of SHS programs.

The offering is expected to be competitive. Awarded housing developments will receive funding for capital investment including land purchasing and acquisition, construction and/or rehab, and the opportunity for ongoing operational costs. Staff anticipates developing two offerings, one for transitional housing and one for recovery housing. The transitional housing offering will come first.

- **Transitional housing** provides temporary housing with supportive services to individuals and families experiencing homelessness. Participants typically stay no more than two years.
- **Recovery housing** is a group home for individuals in recovery with on-site peer support and sobriety requirements. The County would likely require certification from Mental Health and Addiction Certification Board of Oregon using National Alliance for Recovery Residences standards. Participants stays are typically less than two years, often less than one year.

Background

Supportive Housing is often referred to as a three-legged stool, as it requires three key components. First is the physical site where housing and services are co-located. Next is the rental subsidy or assistance to ensure a household can afford rent/the program. Last, and arguably most vital, is the on-site supportive housing services to meet the needs of residents. The types of services provided are often site-specific

¹ Population A means people that are extremely low-income, have one or more disability conditions, and are experiencing or at imminent risk of experiencing long-term or frequent episodes of literal homelessness.

based on targeted populations. It can include addiction recovery programs, transitional age youth programs, behavioral health programming, workforce development programs, and more.

In developing this offering, we have focused on recovery programs and behavioral healthcare needs. Staff engaged with the Health and Human Services, HealthShare and recovery housing providers ([read feedback here](#)) —below are some takeaways of our system needs based on this engagement and other research.

- Washington County lacks transitional housing for people with high needs/high acuity and sober transitional housing. Existing recovery housing is listed in the Housing Inventory Count that is included in the May packet.
- Staff and providers are reporting some rehoused households need more support than traditional supportive housing can offer, necessitating a need for behavioral health connected transitional housing. We have also heard from shelter providers that alcohol and drug free community options are being requested from participants to support their sobriety.
- The need for recovery housing was documented in the Oregon Substance Use Disorder Services Inventory and Gap Analysis findings. Washington County has a 78% gap in needed recovery residences (exact figure not included in the study). There is a statewide need for 3,859 recovery homes.
- Reports from recovery housing providers indicate a strong need for more culturally specific recovery housing and gender specific housing. There are long waitlists for Latine families in need of recovery housing. In addition, there are no culturally specific housing for Black community members; folks in need are going to Multnomah County.

Staff are still researching operating costs of various types of temporary supportive housing and determining unit targets based on budget, which includes engagement with the healthcare system and opportunities to bill Medicaid for services. In addition, referral and exit pathways will need to be developed for recovery housing that consider ways to use Community Connect while also maintaining the intake flexibility that is important to the success of people in recovery housing.

Discussion

Staff plan to have a proposal ready at the end of this month for a summer transitional housing offering. We'll focus our meeting time on transitional housing issues and will discuss the recovery housing questions as time allows.

- Some people are not able to be successful in permanent housing, even permanent supportive housing, due to their level of need. How can transitional housing address this?
- How should we consider referral pathways that align with coordinated entry and connect people from institutional settings? Will that need to look different based on the supportive housing type?
- Should homeless services programs include funding for recovery housing models, as well as capital funding and operations?
- How should we consider the gaps in culturally specific recovery and transitional housing?