Increasing Access to Quality Care Through Supportive Housing

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South Carolina State Hospital 1956
MHASC Housing Models

- Group Living
- Home Share
- Shared Apartments
- Individual Supportive Apartments
- Tiny Cottages

- Currently serving 600 across the state

Ground Breaking for Williams Place
Group Living

The Model
• 24/7 Staff
• Length of stay: 6-12 months
• 6 people per group home

Regulation
• People aren’t served well if there are more than 6 people.
• Department of Health and Environmental Control in South Carolina has modified requirements for 6 and 10 people.

Enrollment and Funding
• Collaborate with inpatient facilities to support transition to housing.
• Must leverage funding with outside funds.

Mental Health Treatment
• Rehab services with clinical team
• Outpatient Care
Home Share

The Model
• 1 person living with a family that is not related to that client.
• Length of stay: 6-12 months
• Currently serving 23 individuals.
• Good for younger individuals.

Regulation
• Contracted with the Department of Mental Health.

Enrollment and Funding
• Enrollment entirely from inpatient facilities to support transition to housing.
• Family is paid a stipend
• Clients aren’t on disability.

Mental Health Treatment
• Family support treatment access to local treatment.
• Rehab services with clinical team
• Outpatient Care
• Benefits counseling
• Staff do home visits
Shared Apartments or Shared Living

**The Model**
- Independent Living
- 2 persons living in each unit with supportive services
- 10 scattered sites throughout state (80 people)

**Regulation**
- No certification process.
- Real estate broker support
- Fair Housing Practices (HUD)

**Enrollment and Funding**
- Collaborate with community treatment providers for enrollment.
- Built by SC Housing Trust Fund

**Mental Health Treatment**
- Rehab services with clinical team
- Day Treatment where available
- Transportation is important
- Outpatient care in community
- Collaborate with local community for supportive services (churches, garden club, etc.)
Individual Supported Apartments

The Model
• 1 bedroom kitchen living room
• 1 person
• Small apt complexes (12-20 units)
• Currently 450 people

Regulation
• Model developed from HUD 811 Project (federal program in 1985)

Enrollment and Funding
• Collaborate with community treatment providers for enrollment.
• HUD funding since 1987

Mental Health Treatment
• Peer Support in Community Rooms
• Individual Peer Support
• Use of the Community Space
Community Space

- Peer Support Groups
- Classes
- Life Skills
- Partner with community including educators to support recovery
- Social Skills
- Arts
Tiny Cottages

The Model
- Scattered
- Newest Model
- 1 person per tiny home
- Trying to build 4 homes per plot
- Currently have 8, building 8 more

Regulation
- Fair housing
- Some communities have zoning restrictions for tiny homes

Enrollment and Funding
- Collaborate with community treatment providers for enrollment
- Strength: Affordable
- Private funding

Mental Health Treatment
- Services are similar to Shared Apt
- Collaborate with local community treatment providers for services.
- Home visits.
Partners Needed

In order to succeed with integrated mental health, you need many partners in the community:

- South Carolina Department of Mental Health
- South Carolina Share
- NAMI
- Local Housing Authorities
- Private providers in the community
Vision of Housing
Reality of Housing
Funding Sources For Housing

1. HUD Housing and Urban Development
2. South Carolina State Housing Trust Fund
3. South Carolina Department of Mental Health
4. South Carolina Department of Health and Human Services
5. State of South Carolina
6. Local County Governments
7. Private Funding
8. Tax Credit Programs
Peer Support in South Carolina began in the mid 70’s “is using my personal Recovery story in helping peers achieve their goals”

MHASC envisions peer support services to play an integral part in future services for housing residents

Peers living in our residential facility contribute greatly to the care and ongoing success of
Peer Support in South Carolina

• **STATE Certification** - Certified Peer Support Specialists, CPSS is offered by SC SHARE with MHASC

  *Requirements for STATE Certification*—High School Diploma
  Person with Lived Experience & Volunteer hours in field

• **NATIONAL Certified Peer Support, NCPS** is offered by Mental Health America of SC, MHASC

  *Requirements for the NATIONAL* - State Certification plus
  3,000 hours of experience in the field, paid or volunteer
Working With Local Communities to Develop Housing Best suited for Their Needs

- Obtain Accurate Data at the Local Level
- Define Your Vision and Need for the Community
- Create Local Committee or Task Force (make sure to include Real Estate Agents)
- Include the City of County Government Officials for zoning, local funding opportunities, and local government support of project
Best Practices In Housing

• Establish a State Wide Housing Task Force
• Have local and statewide data on Housing Priorities
• Know who your potential residents will be and what they want and need
• Consider carefully the community and what a project could include:
  Mixed Income
  Intergenerational
  Sustainable
SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America’s communities.

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