

# **Outcomes Associated with Permanent Supportive Housing (PSH) Programs in Santa Clara County 16<sup>th</sup> Report**

Note: Reporting periods may vary between sections.

## **Summary**

- Project Welcome Home (PWH), a pay for success (PFS) project, outcomes data is reported separately from the Care Coordination Project (CCP) report.
- From July 1, 2011 through March 31, 2018, CCP served 1201 unduplicated households, of whom 962 had been housed.
- Results continue to show correlation between CCP clients receiving housing and supportive services and experiencing improved patterns of utilization of public services.

## **Section I: Performance Measures and Demographics Information for Project Welcome Home (PWH) (May 1, 2015 through March 20, 2018)**

PWH serves the chronically homeless individuals who are “high-users” of various County services, most notably emergency medical and psychiatric services, and the County jail. This program has the capacity to serve 112 clients at any given time. As of March 20, 2018, 119 chronically homeless individuals have been enrolled and 111 are housed through PWH.

**Attachment A** provides reports of the program’s progress.

## **Section II: Rental Assistance Program for the Chronically Homeless (April 1, 2012 through March 31, 2018)**

The County’s Rental Assistance Program for the Chronically Homeless (RAP CH) is one of several housing resources that collectively make up the pool of rental subsidies available to homeless individuals through the CCP. RAP consists entirely of local (County) funding and currently has an annual budget of \$3.5 million for rental assistance payments.

As of March 31, 2018, the monthly subsidy amount ranges from \$78 to \$3294\*, with an average monthly subsidy of \$1742 per household. 94 households were provided rental assistance for the month of March under the RAP CH program. Table 1 summarizes RAP’s participants through March 31, 2018.

(\*the Board & Care which is the highest subsidy amount is \$3,294, 3 Bedroom is the same amount as Board & Care and 1 Bedroom, where 48% of the clients are housed is \$2,157.)

RAP CH reached a full capacity during the 2nd quarter of fiscal year (FY) 2016. The monthly subsidy amount has decreased due to a collaborative effort to transfer eligible clients to Housing Authority CHDR program. Nevertheless, the total amount spent exceeded the amount allocated for this period by \$87,818. All eligible households are continually being transferred to the Housing

Authority CHDR program as quickly as possible so that the County rental subsidy can be utilized to assist those who do not qualify for HUD and other federally funded subsidies. The subsidy calculations above do not include the subsidies paid for the 65 PWH clients.

**Table 1**

<b>RAP CH</b>	<b>All Clients</b>	<b>Active Clients</b>
Receiving Assistance as of March 31, 2018	104	94
Moved to Other Permanent Housing	120	
In-Process of Re-Housing	11	11
Deceased	38	
Lease Termination-Closed by CCP Manager	52	
New Clients in Housing Search	10	10
<b>Total Served</b>	<b>335</b>	<b>115</b>

**Section III: Care Coordination Project Performance Measures**

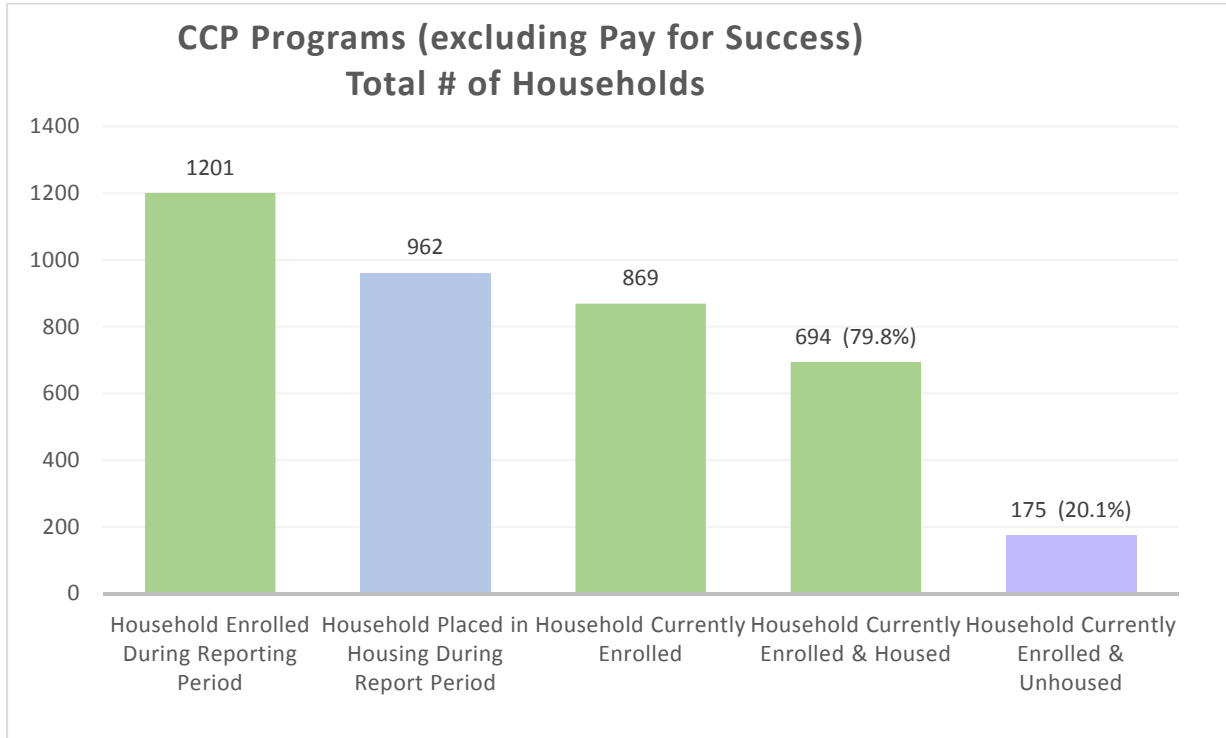
The Care Coordination Project (CCP) is a multi-agency initiative to coordinate, prioritize and deliver permanent supportive housing for the County’s most vulnerable chronically homeless individuals and families. The County’s Office of Supportive Housing (OSH) manages and oversees the CCP and is responsible for assessing the housing needs of chronically homeless persons, prioritizing scarce resources, optimizing funding by strategically allocating resources, leveraging federal resources and monitoring and improving services. Services are also prioritized for vulnerable individuals based on high utilization of healthcare and/or criminal justice services within the county of Santa Clara.

From July 1, 2011 through March 31, 2018, the CCP enrolled 1201 chronic homeless households into intensive case management and housed 962 households (See Figure 1). The housing retention rate (defined as 12 consecutive months of housing) is 86.8% (Figure 2). This exceeds the CCP’s housing retention goal of 80%.

**Attachment B** provides CCP Outcomes from July 1, 2011 through March 31, 2018.

**Attachment C** provides Demographic Information for the CCP.

**Figure 1: CCP Outcomes**



**Figure 2: CCP Housing Retention (Excludes CCTP & PFS)**

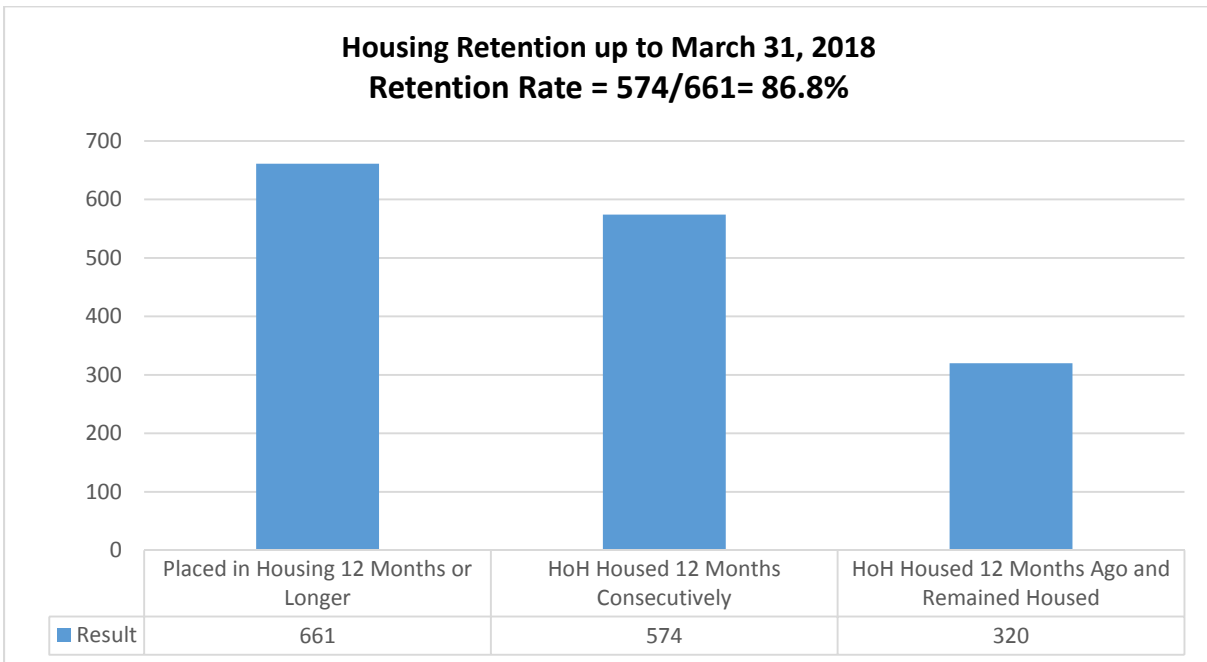


Table 2 and Table 3 show the total capacity for housing subsidies and intensive case management services within the Care Coordination Project as of March 31, 2018.

**Table 2: Housing Subsidy Capacity (excluding PFS)**

<b>Funding Source</b>	<b>Total Capacity</b>	<b>In Use</b>
County of Santa Clara	190	148
HUD CoC	422	461
MHSA Housing Program	49	49
HACSC	518	282
Other	7	7
<b>Total:</b>	<b>1186</b>	<b>947</b>

**Table 3: Intensive Case Management (ICM) Capacity (excluding PFS)**

	<b>Total Capacity</b>	<b>In Use</b>
County of Santa Clara	794	732
HUD	47	51
Veterans Administration	80	65
City of San Jose	180	180
City of Santa Clara	20	20
City of Mountain View	20	20
City of Palo Alto	20	20
<b>Total:</b>	<b>1161</b>	<b>1088</b>

**Section IV: Client Need, System Utilization, and Records Linkage**  
**(July 1, 2011 through March 31, 2018)**

The County staff significantly strengthened its ability to:

1) Regularly link CCP clients to their utilization of County health, social service and criminal justice systems; 2) report on changes in system utilization; and 3) estimate costs associated with system utilization and cost avoidance associated with reduced system utilization. The remainder of this report focuses on changes in utilization patterns for CCP clients who receive housing and supportive services. County staff analyzed utilization for 717 unduplicated clients who actively received services from the CCP sometime between July 1, 2011 and March 31, 2018, and remained in housing for one year or more. County staff was then able to link them to service utilization data and other records from the Santa Clara Valley Medical Center, Behavioral Health Services, Social Services Administration and the Criminal Justice Information Control system (CJIC).

**Changes in System Utilization.** Figures 3 through 12 show the changes in CCP clients' utilization of County services pre- and post-housing. County staff identified an unduplicated list of 717 individuals who were housed by the CCP between July 1, 2011 and March 31, 2018, and who remained housed for a period of one year or more.

The “Pre-Housed” data show the actual utilization of services for those 717 individuals for a period of three years prior to the date each individual was housed. The post-housed data show the actual utilization of services for the same 717 individuals for a period of three years after the date each individual was housed.

Figure 3 shows a downward trend in the utilization of outpatient mental health services by chronically homeless individuals after receiving supportive housing services. There is still a high utilization of outpatient mental health services in the first 12 months post-housing. This is considered positive as clients are encouraged to seek outpatient services and get stabilized. As expected, the utilization decreased significantly after 12 months post-housing. Housing, coupled with supportive case management services provide significant stability to clients who have been homeless for many years. As clients are stably housed longer, the utilization of outpatient mental health services decreased significantly.

**Figure 3: Outpatient Mental Health Service Encounters**

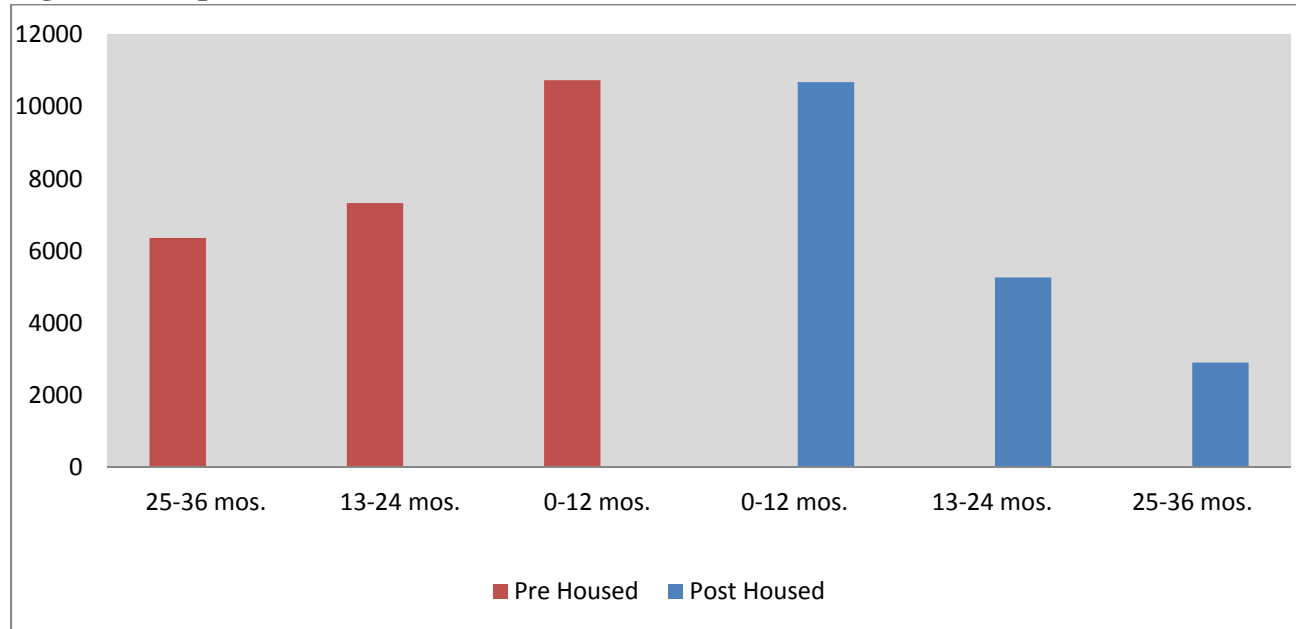


Figure 4 shows a significant drop in utilization of substance use outpatient services post-housing. It’s a strong indicator that housing has significantly impacted clients attain sobriety from substance use and decrease utilization of acute/inpatient services.

**Figure 4: Outpatient Drug/Alcohol Service Encounters**

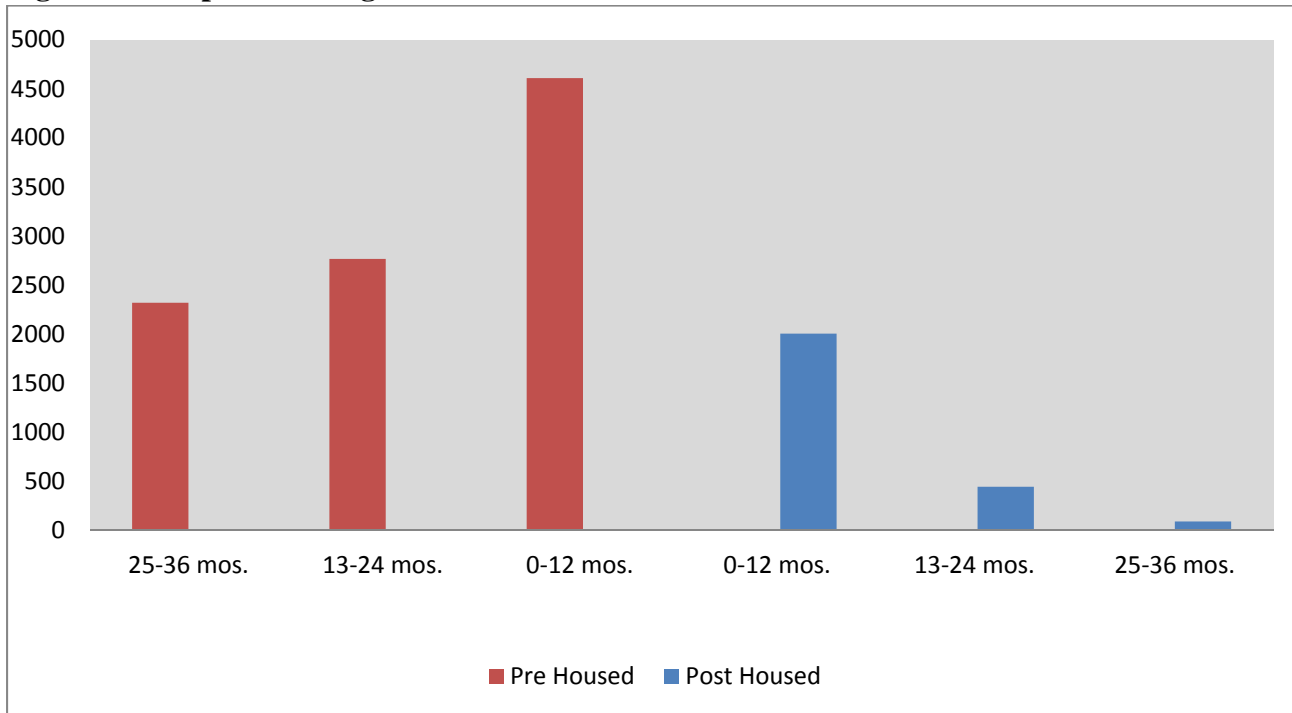


Figure 5 shows a significant reduction of utilization of the Emergency Room after individuals become housed.

**Figure 5: SCVMC Emergency Room Admits**

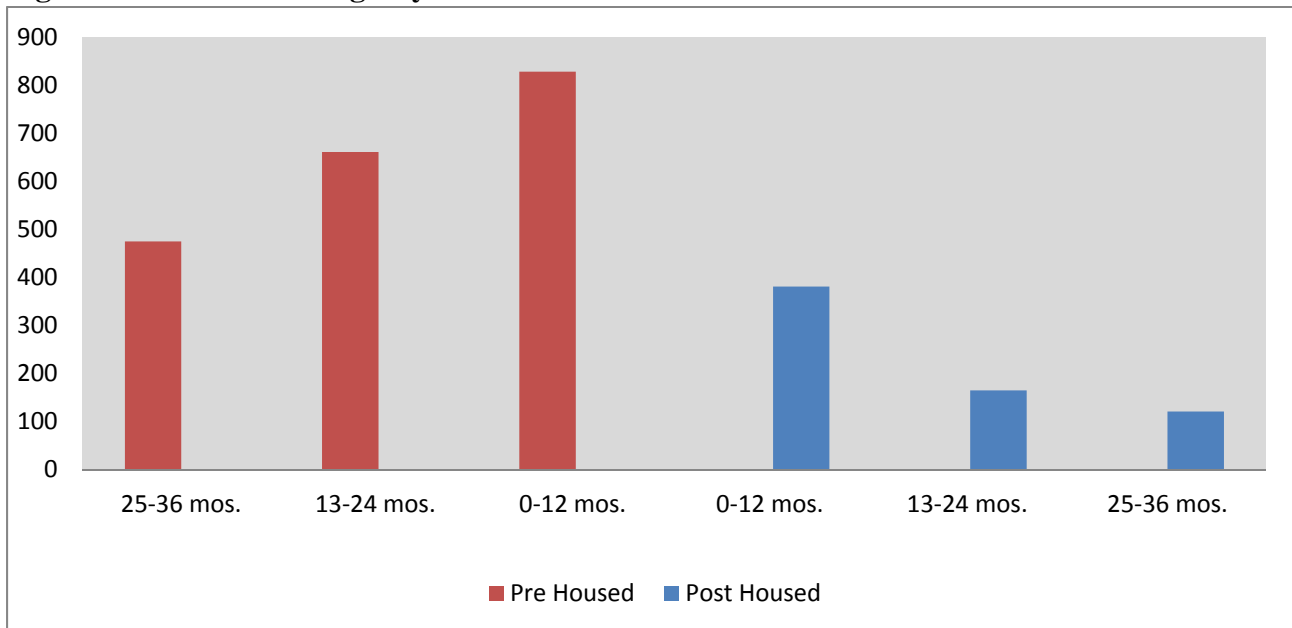
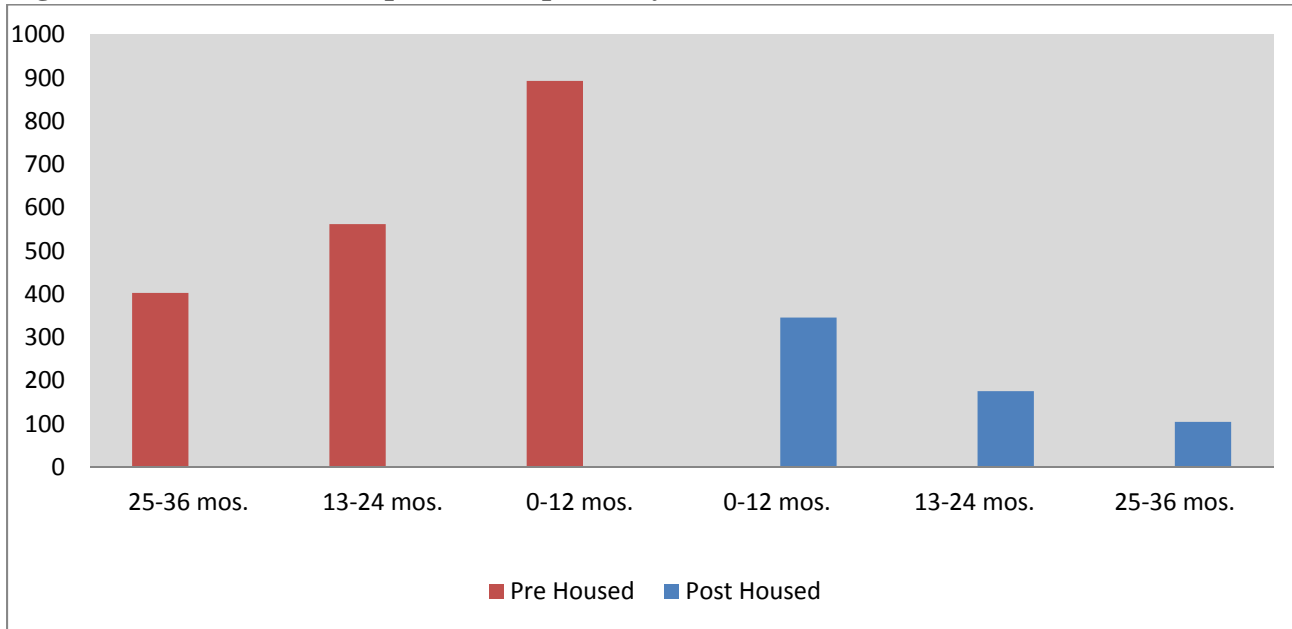


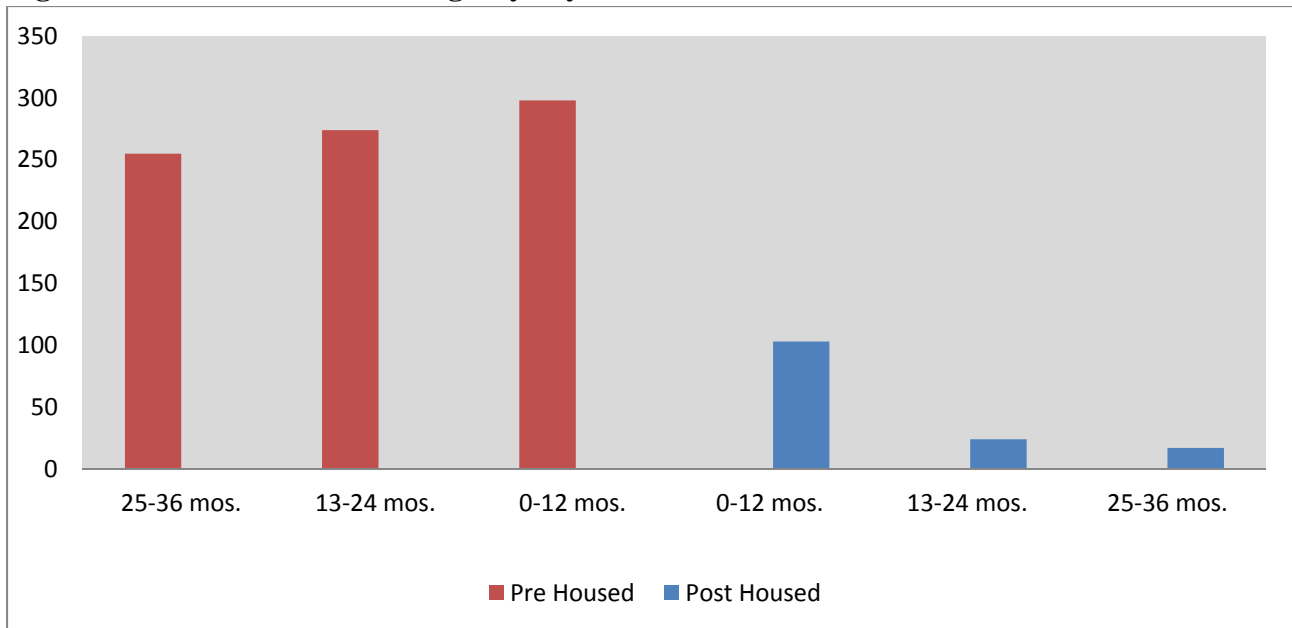
Figure 6 shows a big decline in inpatient hospital days at SCVMC for individuals post housed.

**Figure 6: Total SCVMC Inpatient Hospital Days**



Figures 7 and 8 show significant decreases in utilization of Emergency Psychiatric Services (EPS) and psychiatric inpatient services post housed. Note that *no* psychiatric inpatient services were utilized 2 years post housing.

**Figure 7: Total Admits at Emergency Psychiatric Services**



**Figure 8: Psychiatric Inpatient Service Days**

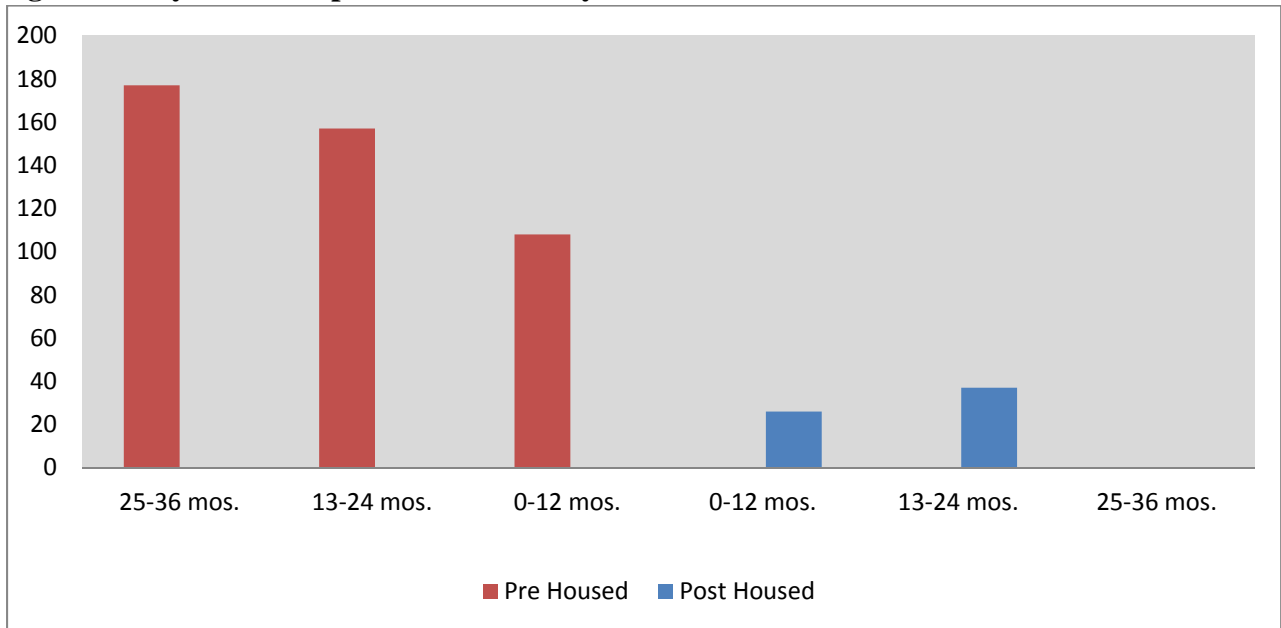


Figure 9 shows a drastic decrease in utilization of mental health Residential Care Facilities (RCF). Note that clients spent *zero* days at RCF 2 years post housing.

**Figure 9: Mental health- Residential Care Facility Days**

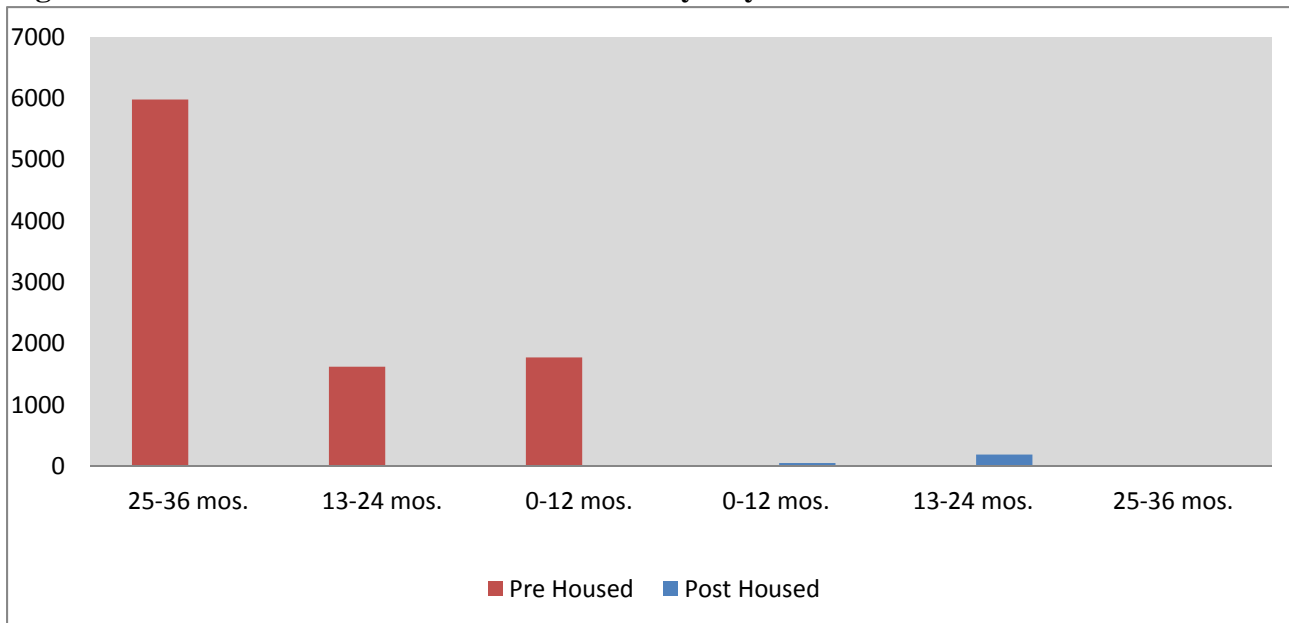




Figure 10 shows a continual decrease in the total number of arrests for individuals after they have been housed.

**Figure 10: Number of Arrests**

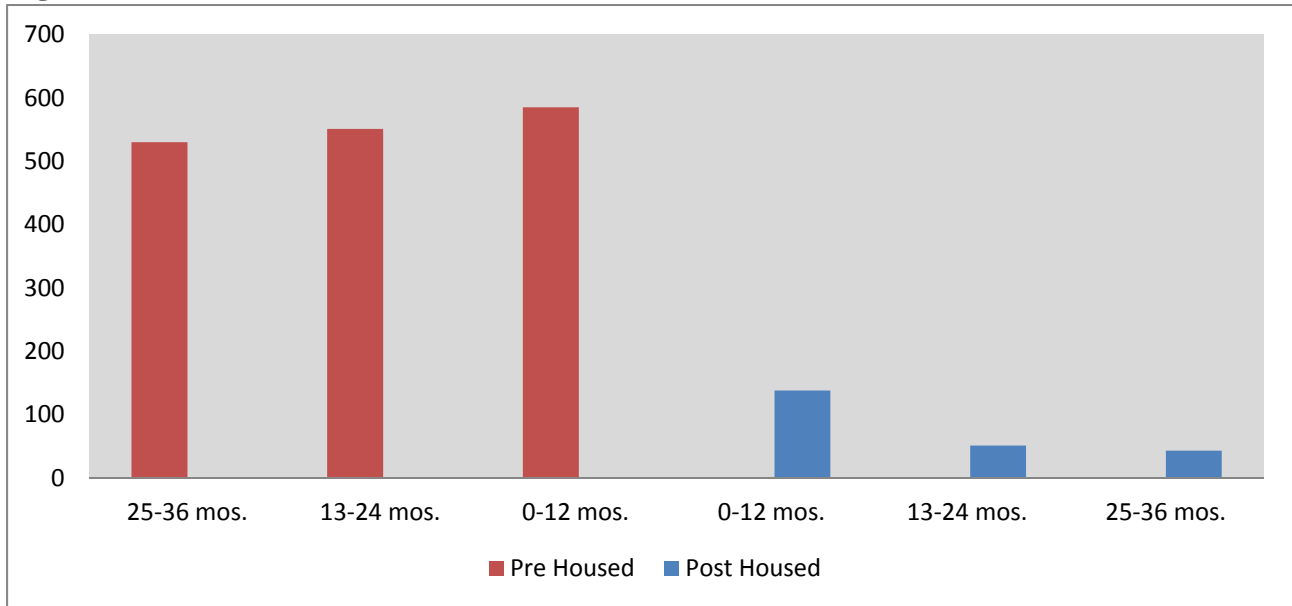


Figure 11 shows a continual decrease in the total number of days incarcerated after being housed.

**Figure 11: Total Days Incarcerated**

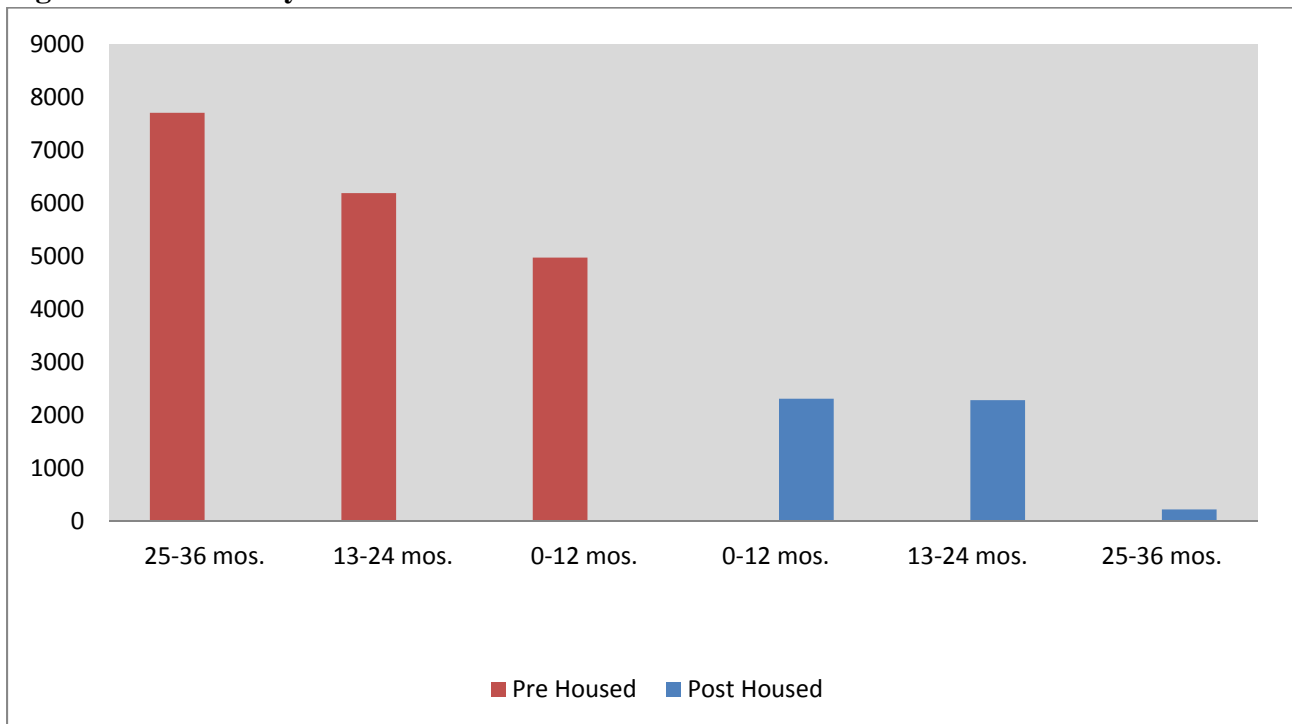
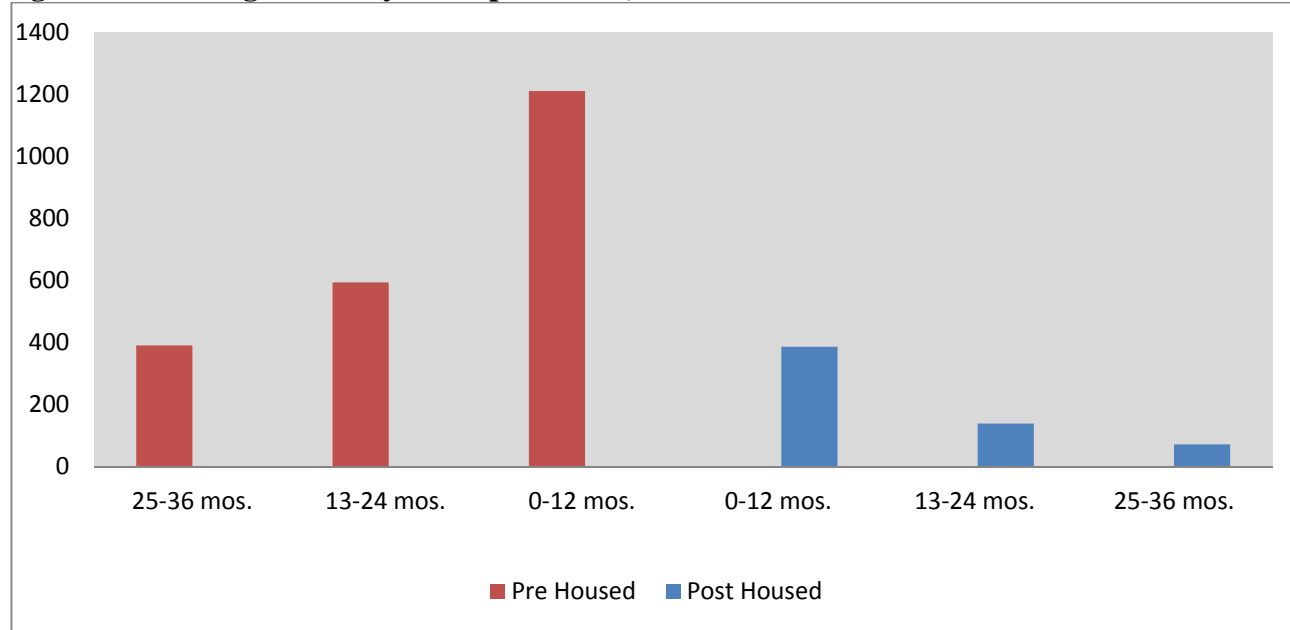


Figure 12 shows that after individuals received housing, they experienced a significant decline in General Assistance (GA) payments. This may, in part, be due to individuals obtaining the federal disability payments such as Supplemental Security Income (SSI).

**Figure 12: Average SSA Payments per Client, Pre- and Post-Housed**

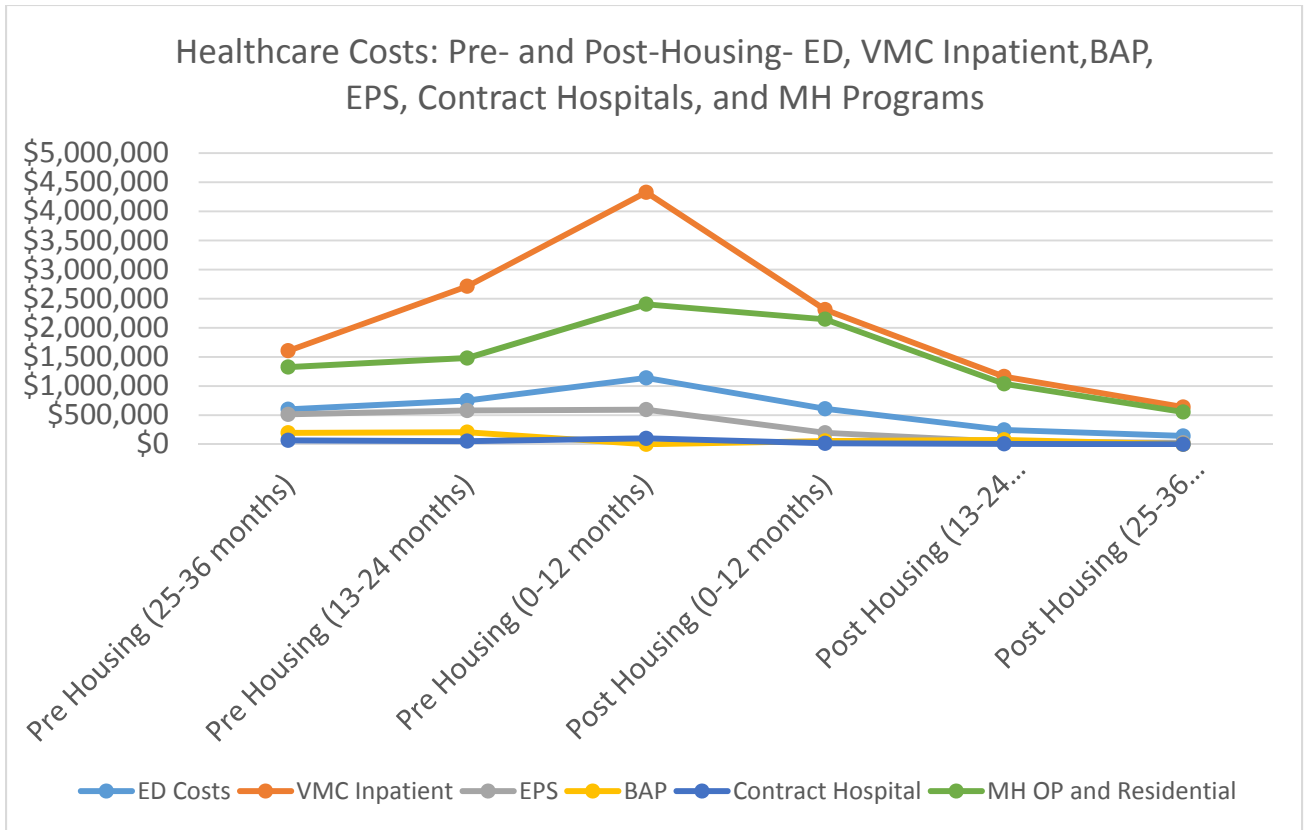


**Section V: Cost Analysis for Care Coordination Project (CCP)**

County staff completed an analysis of cost avoidance related to healthcare utilization changes for formerly homeless individuals served by the CCP. County staff identified 637 unduplicated individuals who were housed through the CCP sometime between July 1, 2011 and March 31, 2018, and remained in housing for two years or more and accrued costs for healthcare services.

County staff linked these individuals’ information with service utilization and cost data from County Emergency Department (ED), VMC Inpatient, Barbara Aaron Pavilion, Emergency Psychiatric Services (EPS), County Mental Health Outpatient and Residential Programs, and contracted psychiatric hospitals. Pre- and post-housing healthcare costs are shown in Figure 13, below. In total, the healthcare costs for these individuals were approximately \$18.7 million for the three-year period pre-housing, and decreased to \$9.3 million for the three-year period post-housing, a decrease of over 50%.

**Figure 13**



Clients Housed  
**111**

Stable Tenancy  
**2650 months**

Currently Success  
**109 clients**

Success Payments  
**\$2,140,794**

ATTACHMENT A

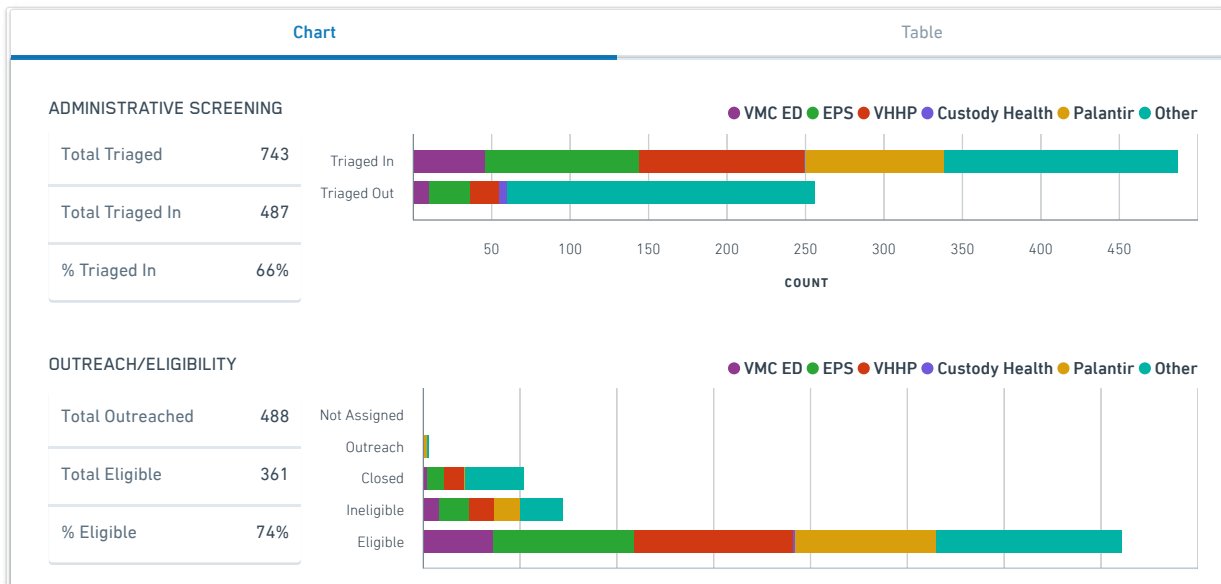
SUCCESS PAYMENTS SUMMARY

Chart Table

QUARTER	QUARTER PAYMENTS	QUARTER PROJECTION	CUMULATIVE PAYMENTS	CUMULATIVE PROJECTION
1	\$4,968	\$4,724	\$4,968	\$4,724
2	\$31,050	\$24,699	\$36,018	\$29,423
3	\$59,616	\$62,440	\$95,634	\$91,863
4	\$123,579	\$131,902	\$219,213	\$223,765
5	\$229,977	\$259,078	\$449,190	\$482,844
6	\$261,855	\$335,578	\$711,045	\$818,422
7	\$328,716	\$402,090	\$1,039,761	\$1,220,512
8	\$419,382	\$480,147	\$1,459,143	\$1,700,659
9	\$356,040	\$325,140	\$1,815,183	\$2,025,799
10	\$325,611	\$331,056	\$2,140,794	\$2,356,855
11 (in progress)	\$280,692	\$336,337	\$2,421,486	\$2,693,192

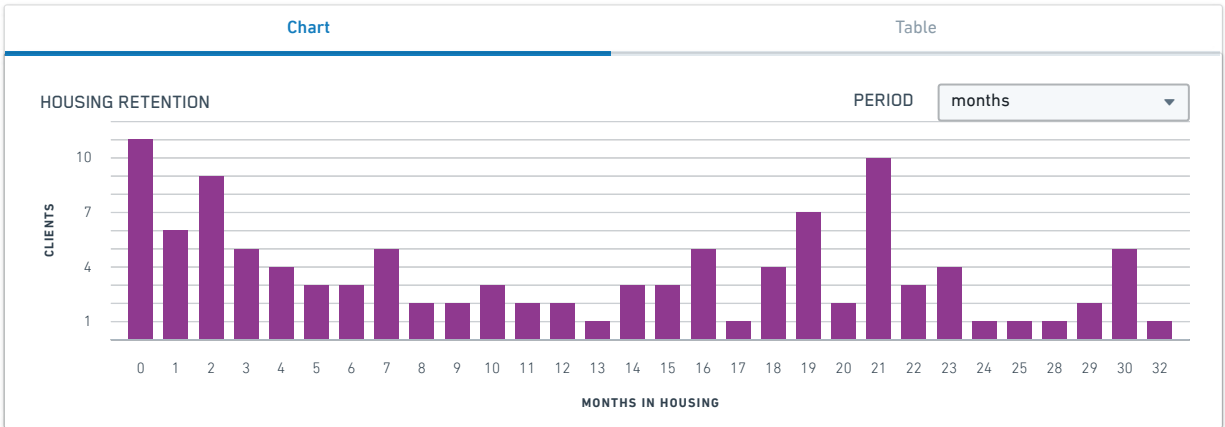
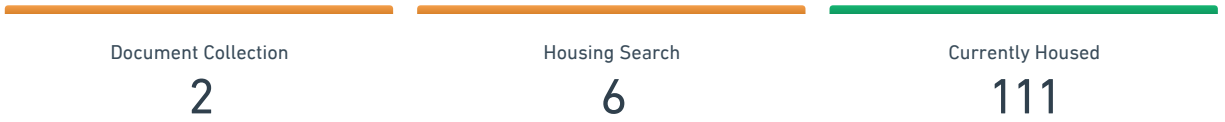
Current Quarter: Jan 01, 2018 - Mar 31, 2018

REFERRAL AND ENROLLMENT

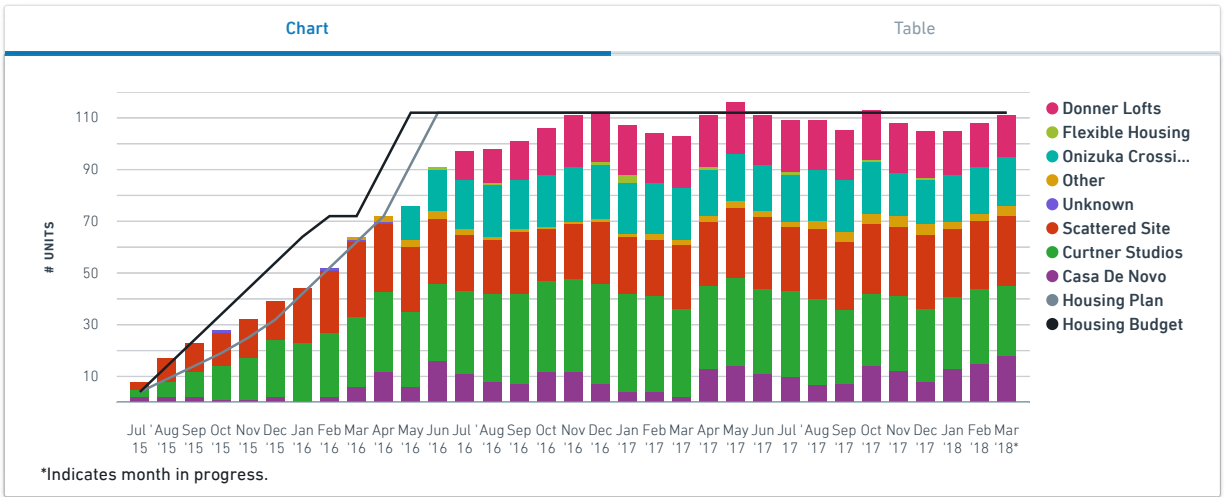




## HOUSING OPERATIONS BREAKDOWN



## HOUSING UNITS



# SUCCESS MEASUREMENT

Currently Success

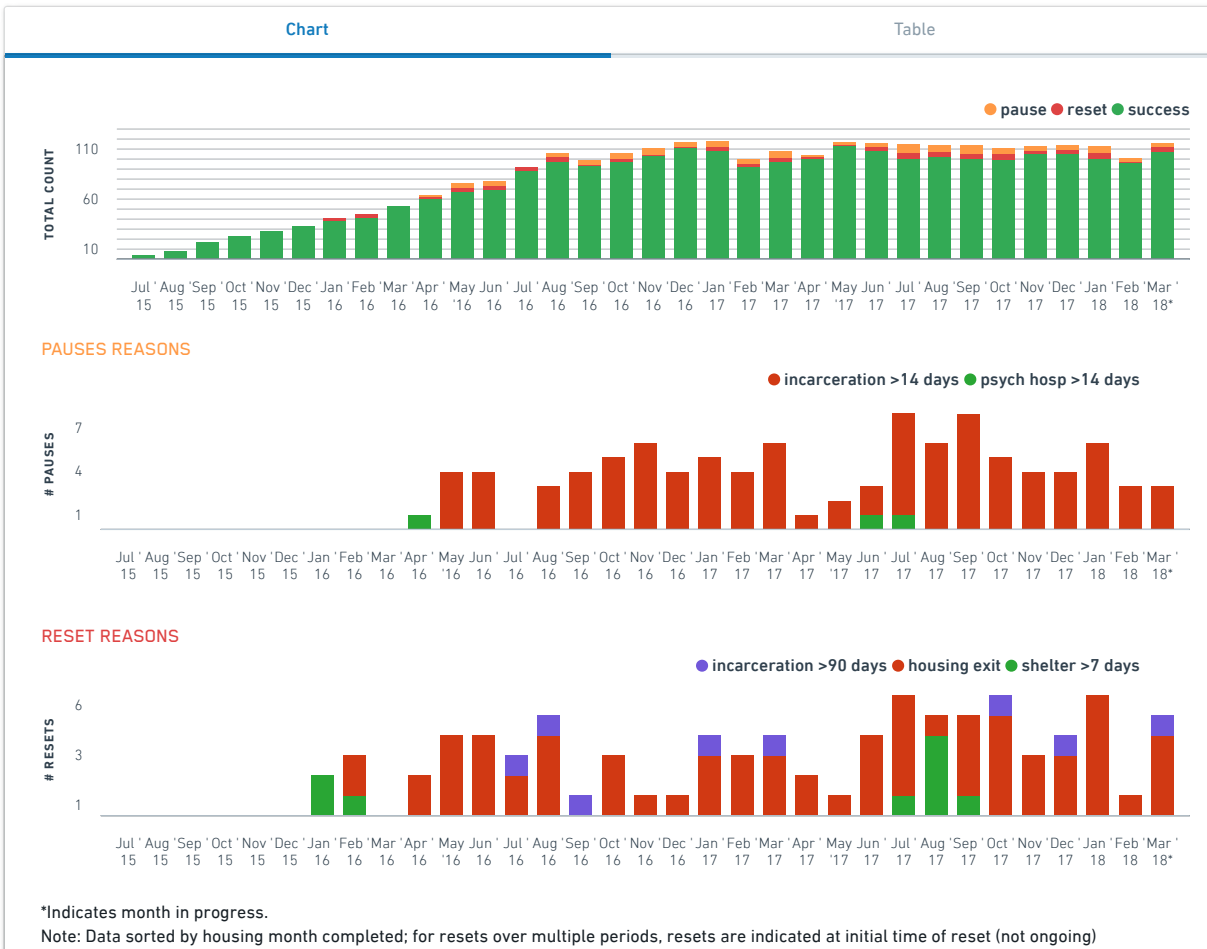
109

Currently Paused

2

Currently Reset

7





Search or browse your files and data...



TREND EXPLORER

TRIAGE 4112 ELIGIBLE 3 ENROLLED 119 HOUSED 111

1 filters, 119 clients

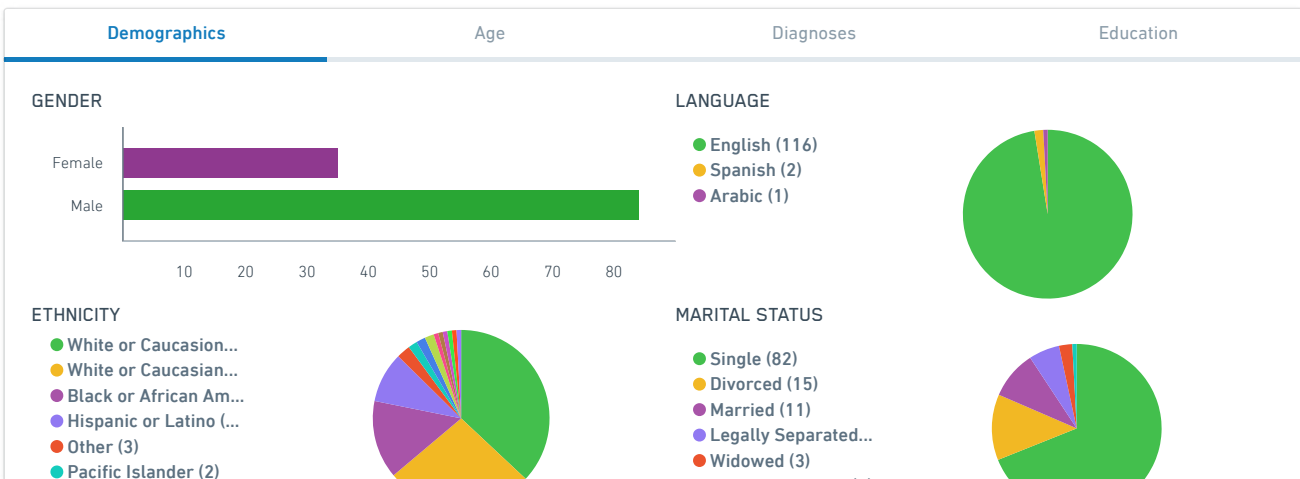
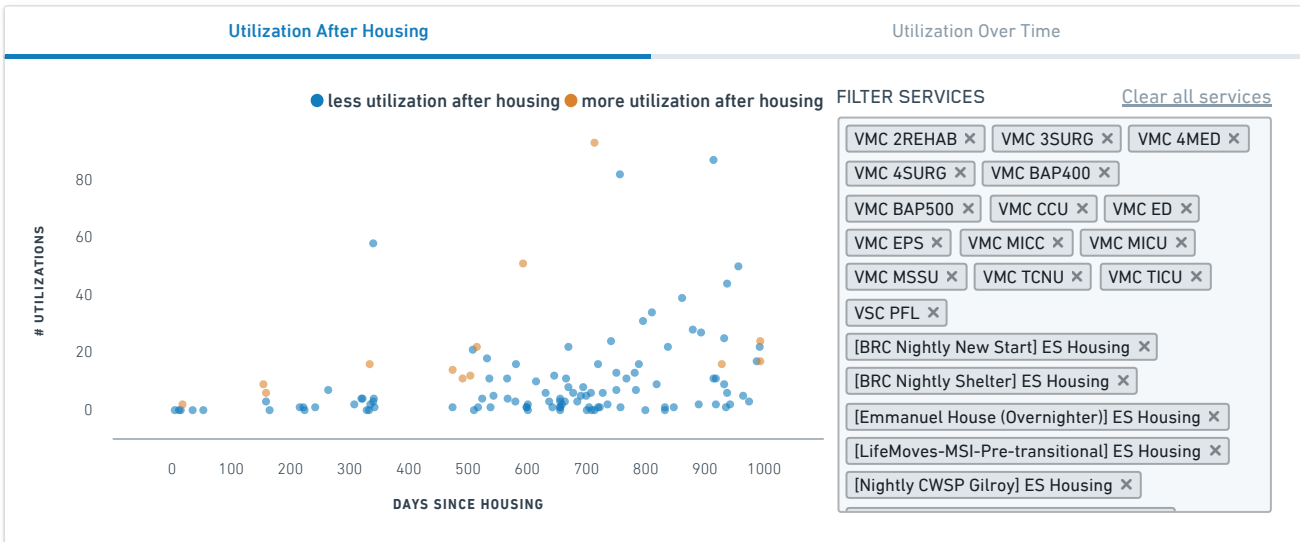
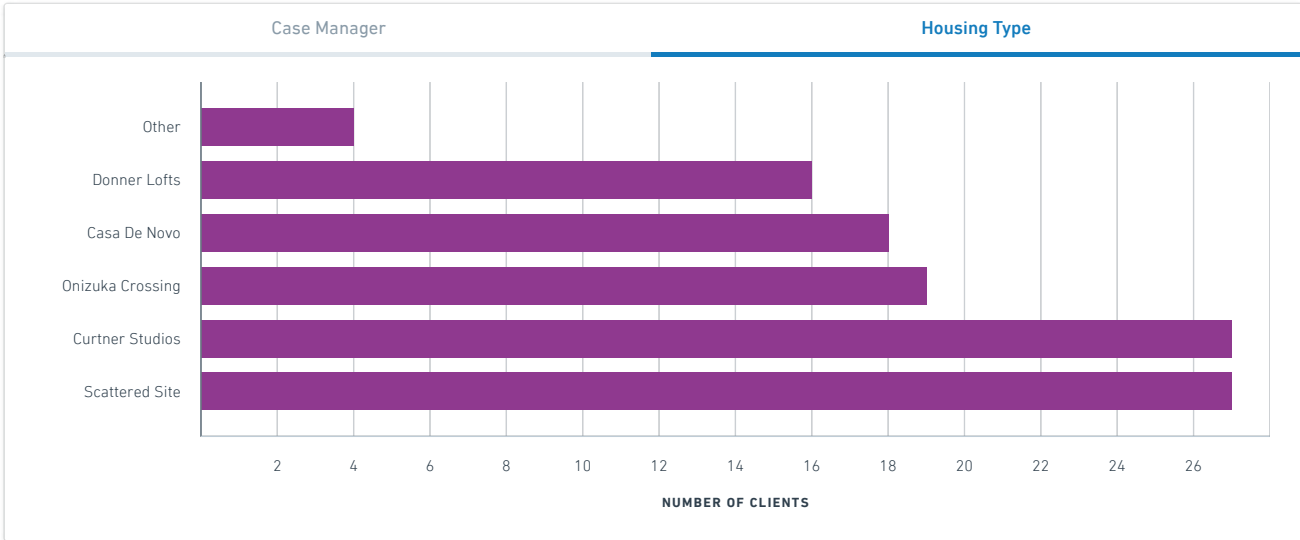
HOUSED

PROJECT TO DATE (BY ENROLLMENT)

THIS QUARTER (BY ENROLLMENT)

LAST QUARTER (BY ENROLLMENT)

THIS MONTH (BY ENROLLMENT)

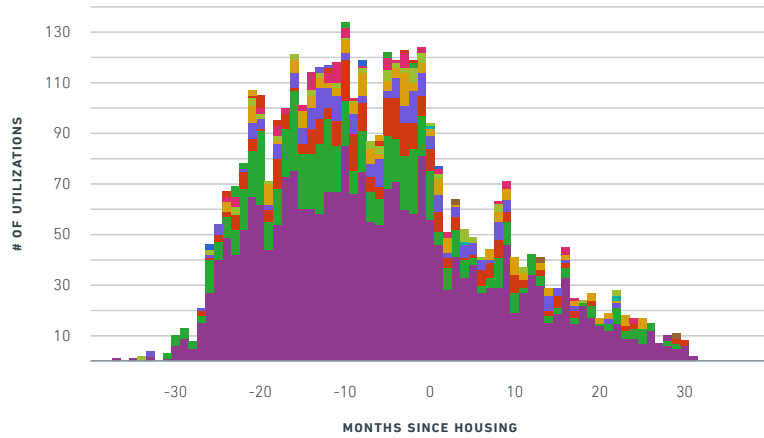


Native American or...

Significant Other (1)

### Services Pre/Post Housing

Top Services Breakdown



- VMC TICU
- ZZVMC3R...
- VMC BAP...
- VMC BAP...
- VMC 2A...
- VMC 6A...
- VMC MICC
- ZZVMCTC...
- VMC 4SU...
- VMC 5A...
- VMC 2 MED
- ZZVMC4...
- VMC 3SU...
- VMC EPS
- VMC ED

PERIOD

months

FILTER SERVICES [Clear all services](#)

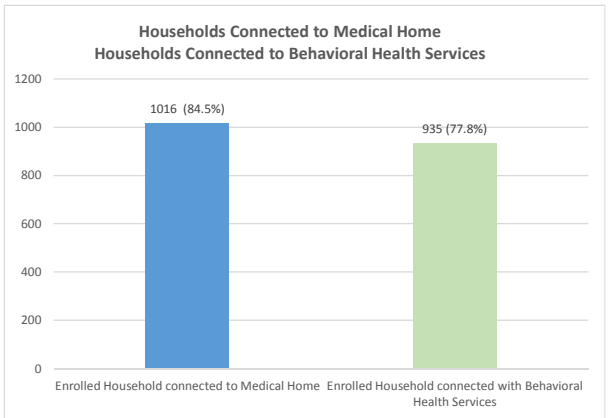
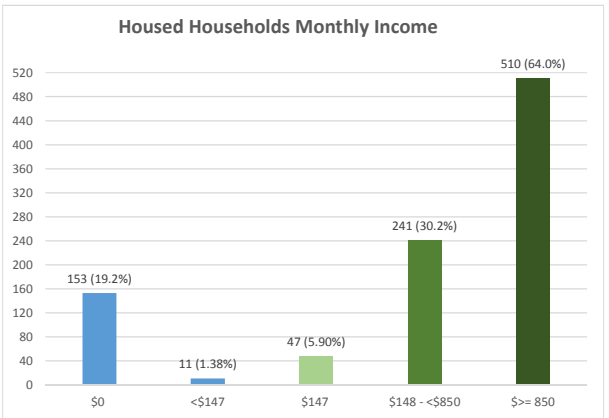
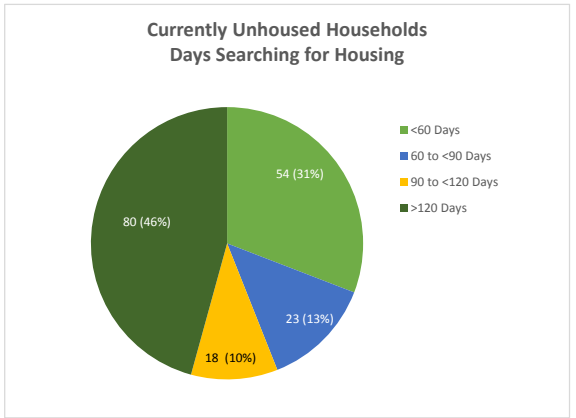
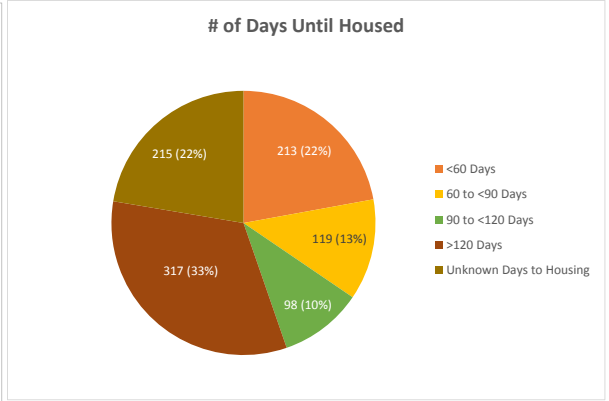
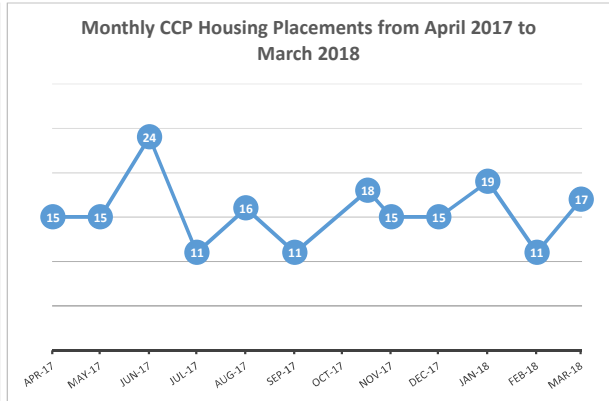
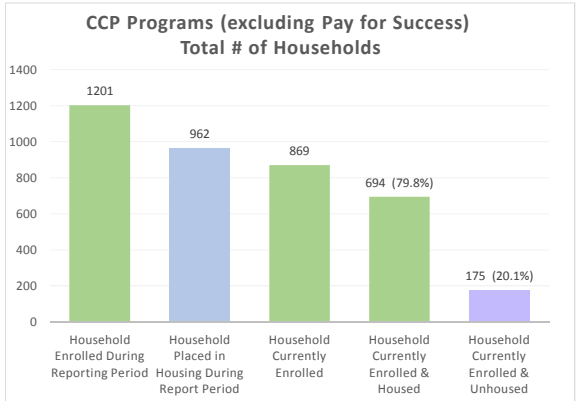
- VMC 2 MED x
- VMC 2A MICU x
- VMC 3SURG x
- VMC 4SURG x
- VMC 5A PCU x
- VMC 6A MED x
- VMC BAP400 x
- VMC BAP500 x
- VMC ED x
- VMC EPS x
- VMC MICC x
- VMC TICU x
- ZZVMC3RHB x
- ZZVMC4MED x
- ZZVMCTCNU x



ATTACHMENT B

CCP Outcomes Report Up to March 31, 2018

(Households & All CCP Programs EXCEPT CCTP, and Pay for Success)



## CCP Demographics - Up to March 31, 2018

(Currently Enrolled CCP Households & EXCEPT CCTP, and Pay for Success)

**Total # of Enrolled Households: 869**

