PHAB PSH DEBRIEF

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22 North

40 units of Permanent Supportive Housing using the Housing First Model

Serving survivors of chronic homelessness, living with physical/mental/behavioral health diagnosis, ages 18 and up

22 North is an LLC and collects rents which go towards operations in addition to county funds and other funding sources that pay for 24 hour staffing



HOUSING CONTINUUM



A range of housing and shelter options that move individuals out of homelessness and meet the needs of different communities and socioeconomic groups.

PSH offers long-term rental assistance and supportive services to people who are chronically homeless and have disabilities, chronic medical conditions, or behavioral health conditions and are unable to sustain housing without imbedded supports

- The goal of PSH is to help people achieve housing stability
- 22 North is a Permanent Supportive Housing (PSH) program



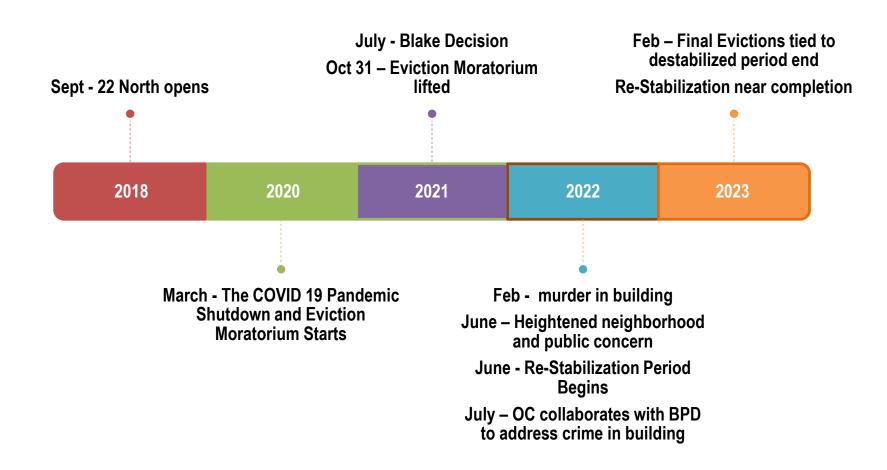
PAST CHALLENGES AT 22 No.

- The COVID-19 Pandemic
 - Reduction of outreach and emergency services
 - Staffing crisis
 - Sheltering in place (residents and guests)
- Eviction Moratorium
- Shooting on Site
 - Dealing open throughout building
- Open Fentanyl Use and Blake Decision
 - ODs



PAST CHALLENGES AND RIGHT-SIZING EFFORTS





STEPS TAKEN BY WC TO REMEDIATE ISSUES



<u>August 2022 – August 2023</u>

- County contract manager increases meeting attendance
 - Present at weekly property management/case management meeting, bi-weekly on site meetings, monthly management team meetings, and weekly case management client debriefs
- Completes monthly reports on progress
 - WC staff meets regularly with onsite staff to provide guidance and input, utilizes information provided by OC and meetings to create report
- Attends 22 North hosted Task Force Meetings monthly
- 22N submitted weekly reports to city and county on stabilization for the first 3 months, then changed to monthly reports
- 22N submitted quarterly reports on program function to the county

<u>August 2023 – Present</u>

- Meeting with management staff twice monthly
- Continuing monthly reports
- Attends new quarterly hosted Task Force meetings
- 22N staff submits monthly reports on program function to county and monthly reports on building operations/property management to city and county

STEPS TAKEN BY OC TO REMEDIATE ISSUES



Secured additional supportive services and operations funding from outside sources

Additional screening requirements for new tenants

Temporary security support on-site

Stricter enforcement of guest policies and lease agreements

Reactivating community-building activities post COVID

Engagement with neighbors in solutions-oriented task force

Collaboration with law enforcement regarding crime

Reactivating community partnerships post pandemic

 Lifeline Connections, Lake Whatcom Center, Compass



CHALLENGES HOMELESSNESS SERVICE PROVIDERS CONTINUE TO FACE IN WHATCOM COUNTY



Affordability

Aging homeless population

Opioid epidemic

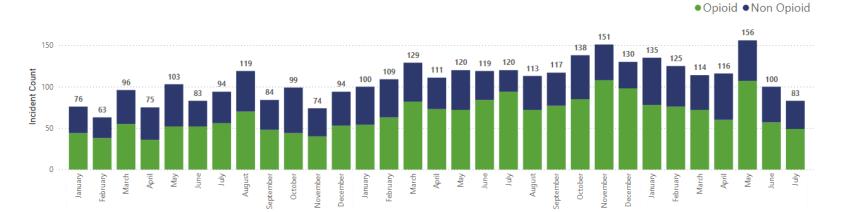
Complex medical and behavioral health challenges faced by PSH population

OPIOID EPIDEMIC



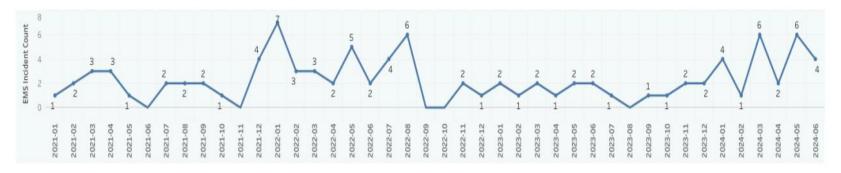
EMS Dispatch Calls for Suspected Overdoses by Month

Whatcom County EMS System



Street Address	EMS Incidents	Total Transports
1022 N STATE ST	96	42

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FROM JAN 2021- JUNE 2024

BELLINGHAM EMS RESPONDED TO 62,456 CALLS

94 OF THOSE CALLS WHERE FROM 22 North

TENANT EXAMPLES

Tenant 1 - Abby

Abby is living with schizophrenia, she often hits the walls which she has expressed is because she hears people talking inside them. Staff work with Abby to connect her to mental/behavioral health services. She is delivered weekly med packs which staff remind her to take her daily dosages. When there are noise complaints from Abby's neighbors when she hits the wall, staff go to her unit to talk her through her concerns and find solutions.



TENANT EXAMPLES

Tenant 2 – Doug

Doug has been an alcoholic since high school and is now entering his 60s. He has liver disease that requires weekly dialysis and a special diet to stick to. He struggles to keep his unit clean and sometimes his drinking escalates till he looses consciousness. Staff works with Doug to shift his drinking from hard liquor to beer to lower the concentration of alcohol he is taking in. Staff connects Doug to a care giver who helps with the cleaning of his unit and food preparation. Staff also connects him to a payee to assist with rent payment. Doug's case manager coordinates the team helping Doug and checks on him daily, increasing check ins when his alcohol consumption upticks.



TENANT EXAMPLES

Tenant 3 – Sydney

Sydney struggles with regular use of fentanyl and lives in an ADA unit. Staff talk to Sydney about their use often and provide them with Narcan as needed. Sydney struggles to pay their rent and receives a notice from the property management. Sydney's case manager talks to them about how their fentanyl use may be effecting them regularly paying rent and offers to connect them to treatment. They call detox but beds are full and the wait is a few days. By the time the bed is available again Sydney is no longer interested and they have fallen back into using with their friends.



LIVING AND DYING IN PERMANENT SUPPORTIVE HOUSING



For many people, a PSH unit will be their last home

Average life expectancy of those who are chronically homeless is 17-23 years shorter than others, this translates to about 54 years

Individual causes of death of people in Washington State is not available to the public

22 NORTH PROCEDURES RELATED TO TENANT WELFARE



22 North is an apartment building, meaning it must comply with federal and state tenants' rights laws

- Staff may not enter units without at least a 48-hour notice
- Staff may not search tenants' person or personal property
- Without a police warrant or tenant consent, individuals may not enter and test for contaminates

Welfare check protocols:

When to initiate welfare check protocol:

- Within 5 days of no response for clients who are considered low risk.
- Within 2 days of no response for clients who are considered high risk
- Within 12-24 hours of no response for clients who are considered at imminent risk.

Risk levels:

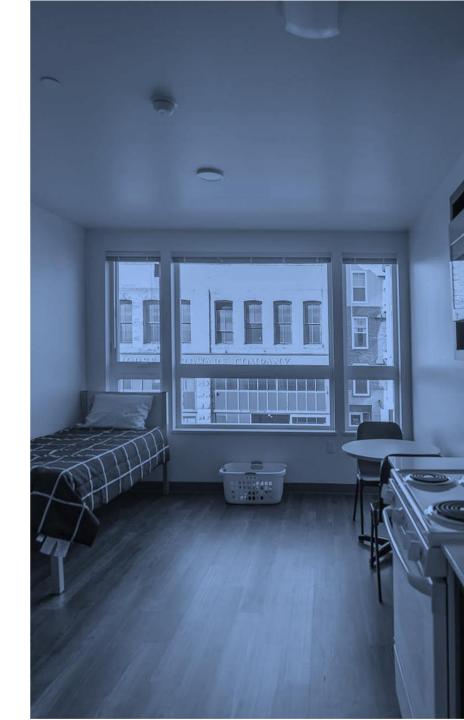
- Low Risk: no recent SI, not in active use, normal to go this long without seeing/hearing from client
- High Risk: recent SI (low to medium risk), active use, medical issues or recent medical recovery, recent OD, disclosed living in unsafe situation
- Imminent Risk: two or more co-occurring issues from high risk category, recent SI (high risk)

ACTIVITIES AT WCHCS TO SUPPORT THIS WORK

Supporting providers who want to do this work

Conduct additional oversight and monitoring for poorly performing programs

Contract with outside experts to gain insights on PSH best practices



22N FUNDING SOURCES



2024 22 North Budget Summary



RAMIFICATIONS OF PULLING WC CONTRACT FUNDS



The funding from Whatcom County funds a portion of the following positions

- 24 hour staff Residential Counselors
- Case managers
- Services Management
- Events and Activities Coordinator

Reducing funds for these services would eliminate 24 hour staffing and reduce safety for tenants and staff, reduce opportunities for connections to external providers, reduce lease enforcement and site monitoring

The building is owned by the Opportunity Council and their investor, funded through a variety of funding streams including a Housing Trust Fund and Low-Income Housing Tax Credits

 These funding streams require the building to be used to house people with severe health and housing challenges

CONTENTS OF CURRENT REPORT FORMAT



- Reports regularly submitted through existing contract obligations
 - Quarterly reports for all PSH programs
 - Current vacancies
 - Program challenges
 - Lease violations
 - Community engagement activities
 - Lease enforcement
 - Community complaints
 - EMS/Police calls
 - Tenant fatalities



 We require OC to provide monthly reports on 22 North which encompasses greater detail of the work on site

OPPORTUNITIES FOR IMPROVEMENT AT 22N



Hire a 3rd party behavioral health provider to provide on-site services to tenants

Implement changes based of the recommendations from forthcoming PSH consultant

Maintaining the staff that work in PSH and frontline homeless services staff

Changing policy to have a more robust welfare check procedure

Creating a direct partnership with an SUD treatment facility

Tighter policies and coordination with law enforcement to address dealing and distribution within the building and surrounding areas



WHATCOM COUNTY HEALTH AND COMMUNITY SERVICES