# **Housing is Health Care**

Chris Donnelly Director of Community Relations Champlain Housing Trust

Jason Williams
Director of Government and Community Relations
Interim Director of Communications and Engagement Strategies
The University of Vermont Medical Center

January 13, 2019 – House Committee on General, Housing and Military Affairs



#### Some of the Partners









There were many other public and private partners in this work

# The Challenge

- Persistent unaffordability since Out of Reach began ranking states in 2015 on the gap between average renter wage and the housing wage, Vermont has ranked between the 3<sup>rd</sup> to 6<sup>th</sup> largest gap in the country
- Low rental vacancy rate in Chittenden County - around 2% for the last two decades
- 2016 Community Health Needs
   Assessment: Lack of Affordable Housing was the #1 concern



# The Challenge

- 2014: Vermont was #10 in country for per capita homelessness and #6 per capita for chronic homelessness
  - Chronic homelessness is highest in Chittenden County
- Numbers of people experiencing homelessness in Chittenden County were stagnant
- Motel voucher spending crisis state spending on emergency homeless housing in motels rose from \$0.88 per capita in 2008 to \$5.56 per capita in 2013

# The Solution, Part One

## **Harbor Place**

 A motel in Shelburne, VT that provides low cost accommodation and housing placement services





#### **Harbor Place**

- In November, 2013, CHT purchased a 59-room EconoLodge motel for \$1.85 million and renamed it Harbor Place
  - Acquisition was financed with a CDFI loan and owner financing, minor renovations with Vermont Housing & Conservation Board funds
- UVM MC, the State, United Way of Northwest VT, and the Fanny Allen Foundation contributed to a \$300,000 operating reserve to help offset the risk
- CHT has discount guest contracts with the State, UVM MC, and others
  - Statewide average motel voucher room = \$70/night, single Harbor
     Place room = \$35/night

#### **Harbor Place**

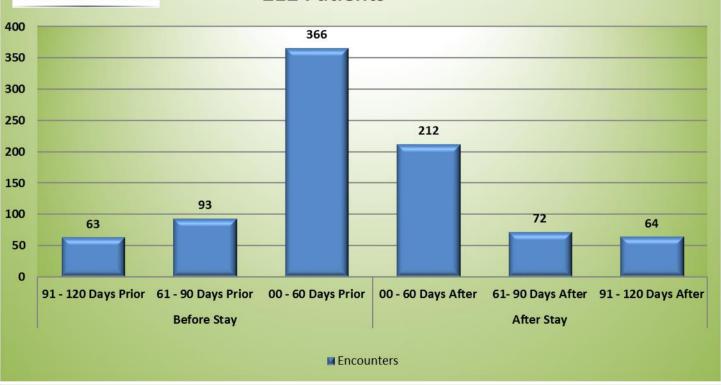
- Housing search assistance is available onsite Monday –
   Friday through the local Community Action and Domestic Violence agencies, funded by the state
- 2018: 10-year interest only loan from the Kresge Foundation is financing major renovations at the motel
- New this year: Guest services position focused on coordinating hospital discharges and on repeat / long-term guests, funded through a grant from Key Bank

### **UVM MC & Harbor Place**

As of June 30, 2018, the Medical Center has paid for 3,819 bed nights for 237 patients (approximately \$106,288)

Year	# of Patients	# of Bed Nights	Average nights/patient
2013	8	83	10.4
2014	43	299	7.0
2015	45	483	10.7
2016	43	950	22.1
2017	61	1,328	21.8
2018 (6 mos.)	37	676	18.3

# Harbor Place Patient Intervention Study Patient Encounters Before/After Stay University of Vermont MEDICAL CENTER University of Vermont MEDICAL CENTER Updated through June 2018 212 Patients



# Harbor Place Patient Intervention Study Direct Costs Before/After Stay Updated through June 2018 212 Patients





University of Vermont

# Harbor Place Patient Intervention Study Cost per Visit Before/After Stay Updated through June 2018 212 Patients



# **The Expansion**

# **Beacon Apartments**

Opened in January 2016, a motel converted into 19 permanent, supportive apartments, as well as a night manager apartment



# **Beacon Apartments**

- Acquisition structured for seller tax advantages: 15-year leasepurchase agreement with 15-year income stream and a discounted purchase price for charitable donation
- Development cost (including lease purchase): Per unit cost of \$104,827 v. average development per unit cost of \$253,000
- Renovations financed with Vermont Housing & Conservation Board funds and interest-only financing from the State Treasurer's Office

# **Beacon Apartments**

- Community Health Centers of Burlington provides onsite housing supports 7 days a week, 8 hours a day – primarily funded by the Medical Center
- Burlington Housing Authority provides tenant-based subsidy (Non-Elderly Disabled and Continuum of Care vouchers)
- Tenants chosen from coordinated entry permanent supportive housing portion of the community master list, prioritized for most vulnerable

# Who are our Permanent Supportive Housing people?

- Most lived outside before moving into Beacon Apartments
- Co and tri morbid issues, the most common are:
  - Mental Health: depression, anxiety, trauma, bipolar affective disorder
  - Health: congestive heart failure, seizure disorders, chronic pain, COPD, diabetes
  - Substance use: alcohol is primary, followed by marijuana and opiates

# **Services at Beacon Apartments**

- When people have a home you can help them focus on:
  - Medical, dental, and specialty appointments
  - Eating regularly
  - Community integration
  - Medication management and assistance
  - Family/friend/support reconnection
  - Budgeting/money management
  - Setting and achieving goals

#### **Measures of Success**

- 1. Are you still successfully housed? Following lease agreements? Are you a good neighbor?
- 2. SSOM/Self Sufficiency Matrix
  - 9 categories across 5 levels
  - Categories:
    - Housing, employment, income, legal, mental health, substance abuse, health care coverage, disabling conditions, community involvement
  - o Levels:
    - o In crisis, vulnerable, safe, building capacity, empowered/thriving
- 3. Are you using preventive/primary care vs. emergency services?

### **Bel Aire**

Former motel converted into 8 apartments, 3 that house up to 7 people with high health needs who are either homeless or in substandard housing, opened in August 2017.



### **Bel Aire**

- Acquisition and renovation paid for by UVM Medical Center with a \$1.6M gift to the Champlain Housing Trust
- 24/7 onsite support services provided by the Community Health Centers of Burlington, funded by UVM MC
- 5 permanent supportive apartments, with tenant-based subsidy from the Burlington Housing Authority
- 3 medical respite apartments, master leased by the Medical Center

# **Medical Respite at Bel Aire**

- 3 units with 7 beds
- First patient admitted to respite on 1/15/18
- As of October:
  - 34 individuals served (two had separate stays)
  - o 25 men, 9 women
- 19 of the 34 were hospital discharges, remaining were hospital diversions or pre-op stays (i.e., colonoscopy prep)
- Self-reported conditions:
  - 25 with some kind of physical disability
  - 24 with mental health issues
  - 10 with DV history
  - 12 with substance use issues

# **Community Results**

- Point in Time unsheltered count decreased from 82 in 2015 to 17 in 2018
- Point in Time count of chronically homeless dropped from 101 in 2015 to 35 in 2018
  - Expect to reach functional zero in 2019
- Process improvements:
  - Community master list, first for chronically homeless, now for all single adults, moving to include youth and families in the next few months
  - Weekly Community Housing Review Team meetings bring apartments, subsidy and services to one table to house people on the master list