

**THE STATE OF
PERMANENT
SUPPORTIVE
HOUSING
IN THE COMMONWEALTH OF VIRGINIA**



presented by VIRGINIA COALITION TO END HOMELESSNESS

About VCEH



The Virginia Coalition to End Homelessness is the only statewide nonprofit organization dedicated to preventing and ending homelessness in the Commonwealth of Virginia through community collaboration, capacity building, education, and advocacy.

Our work is grounded on the premise that homelessness is solvable. Our vision is that resources and services will be focused on achieving and maintaining housing stability for those who experience and are at risk of homelessness. In order to achieve this vision, VCEH—in collaboration with our partners and members—will:

- Make ending homelessness a priority.
- Shift focus from band-aid and temporary solutions to long-term solutions that include prevention and rapid rehousing.
- Build a coordinated statewide response to prevent and end homelessness.
- Encourage increased funding for outcome-oriented housing solutions to homelessness.
- Support community efforts and initiatives to prevent and end homelessness.

One of VCEH's main priorities is to increase investment in permanent supportive housing. This model of combining affordable housing with support services works to end homelessness for those with the most complex needs, including mental illness, chemical dependency, and chronic health conditions. It can also help youth who have aged out of foster care without a permanent family to successfully transition to adulthood and avoid homelessness, and assist ex-offenders in rejoining society and avert homelessness.

Our Vision of a World with Adequate Permanent Supportive Housing

A continuum of housing options, including permanent supportive housing, will be available and accessible to those experiencing homelessness, who struggle with mental illness, chemical dependency, co-occurring disorders, and chronic health conditions.

No one will be discharged into homelessness from hospitals, foster care, jails, or prisons.

Hospitals, jails, and prisons will no longer be the central depositories for individuals the current social service system has no method of housing.

Public and private agencies will have appropriate housing resources available to their clients experiencing mental illness, substance abuse disorders, and other disabilities.



We would like to express our appreciation to Fannie Mae whose generous support made this report possible.

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Page 33: Virginia Supportive Housing, Richmond, VA

Executive Summary

A national consensus has formed on the effectiveness of permanent supportive housing for preventing and ending homelessness for the most vulnerable individuals, with the most severe and complex needs. *The State of Permanent Supportive Housing in the Commonwealth of Virginia* outlines the status of permanent supportive housing programs in Virginia, and includes: the current number of permanent supportive housing units, who permanent supportive housing serves and can serve, and how it can solve the problems of chronic homelessness, jail and prison recidivism, and inadequate housing options for youth aging out of foster care. It answers the questions: how close does Virginia's current permanent supportive housing capacity come to meeting the need for permanent supportive housing in Virginia and how can we better use partnerships, encourage increased collaboration, and leverage existing and new resources to fill the gap between current capacity and actual need.

The purpose of permanent supportive housing is to provide, first a home, and then continuing supportive services for those who have experienced homelessness (often for very long periods of time), for those individuals and families with an adult head of household with disabilities (including mental illness and chemical dependency), for those with criminal backgrounds, for youth who have aged out of foster care without a permanent family, and for some veterans. The goal is to support a person's path towards self-sufficiency—to give everyone the opportunity to achieve independence, living in their own home.

Permanent supportive housing uses a "housing first philosophy" by creating the opportunity for an individual to live in a home. It combines affordable housing with supportive services that are tailored to the needs of each individual. "Permanent" does not mean forever. "Permanent" simply means that the person determines how long he or she will live there, just as any person chooses how long he or she will live in a home.

Permanent supportive housing is a permanent solution to homelessness for many. Eighty-five to one hundred percent of tenants in several of Virginia's permanent supportive housing programs did not return to homelessness. This housing model has also been shown to be cost effective because it saves money to other systems of care, including hospitals, jail, and prison.

Currently, 2,138 Virginians including 1,661 single adults and 477 people in families with children live in 1,784 units of permanent supportive housing. The individuals and adult heads of households living in permanent supportive housing are experiencing either mental illness and/or chemical dependency and/or other chronic health conditions. Thirty-one agencies serve as the primary provider of permanent supportive housing with many other organizations and agencies serving as partners.



¹ Virginia Department of Behavioral Health and Developmental Services. *Creating Opportunities: A Plan for Advancing Community-Focused Services in Virginia*. June 25, 2010.

Virginia needs 6,839 new units of permanent supportive housing to:

- House 1,347 individuals and families currently experiencing chronic homelessness, including veterans.
- House 465 individuals exiting state hospitals who are at risk of experiencing chronic homelessness.
- House 5,027 individuals exiting jail and prison who are at risk of experiencing chronic homelessness and prevent jail and prison recidivism.

New permanent supportive housing is needed in all regions: urban, suburban, and rural. In Virginia, there are inadequate funds to create and sustain the necessary number of new and current permanent supportive housing units. This has resulted in Virginia agencies not developing adequate capacity to provide permanent supportive housing. This report outlines the steps that we as Virginians can take to ensure that Virginia has an adequate supply of this critical housing.

The benefits of permanent supportive housing are many. Our investment in permanent supportive housing will end homelessness for those with the most severe needs and end the tragic cycle between emergency shelter, hospital and jail. It will house those individuals and families who many believe can never be housed. It will assist individuals with severe and complex needs, towards a path of self-sufficiency. Permanent supportive housing will improve the lives of those individuals who need it; and our communities will be all the better for it.



VCEH convened a Permanent Supportive Housing Advisory Workgroup with members representing urban and rural areas and a cross section of regions of the Commonwealth, along with members with diversity of experience in housing, services, and permanent supportive housing. This Advisory Workgroup set the framework for the report. It identified key challenges and policy solutions to the development and sustainability of permanent supportive housing in Virginia.

The Advisory Workgroup reviewed the definition of permanent supportive housing created by the Corporation for Supportive Housing (CSH) and discussed its relevance to current supportive housing in Virginia. The group agreed that the CSH definition fit the purposes of this project and thus, this definition was utilized in this report with only minor revisions.

VCEH used data submitted to the U.S. Department of Housing and Urban Development in the McKinney-Vento Homeless Assistance Grants applications to compile an initial list of all permanent supportive housing units in the Commonwealth of Virginia. Agencies were then contacted to confirm the accuracy of the information and request additional information on existing permanent supportive housing capacity. For the purposes of this report, the author did not capture additional units of housing that are not targeted to people experiencing homelessness but may in fact be preventing homelessness among a similar population. This would include housing provided by community services boards to people with mental illness and substance abuse issues along with other chronic health conditions.

VCEH reviewed national, state, and local research on permanent supportive housing for the purposes of this report. The author spoke with many individuals and agency representatives, including non profits and local and state government representatives, about permanent supportive housing in Virginia.

VCEH surveyed several permanent supportive housing programs to obtain their housing stability data. Agencies that submitted housing stability data included Arlington County Department of Human Services, New Hope Housing, Pathway Homes, and Virginia Supportive Housing.

VCEH requested the 2010 Point in Time data (the annual or biennial enumeration of people experiencing homelessness conducted by local Continuums of Care (CoC) required by the U.S. Department of Housing and Urban Development) from all 22 local Continuums of Care. This data was used to identify the number of people experiencing chronic homelessness. 2009 data for the Petersburg and Chesapeake Continuums of Care was included as these CoCs did not participate in the optional 2010 count. The author also requested data from the Virginia Department of Behavioral Health and Developmental Services, the Virginia Department of Corrections, and the Virginia Department of Social Services to determine additional permanent supportive housing need.

Why Permanent Supportive Housing?

It works.

Permanent supportive housing is designed to serve those who are the most vulnerable and those with the most severe needs, including mental illness, chemical dependency and long-term homelessness.

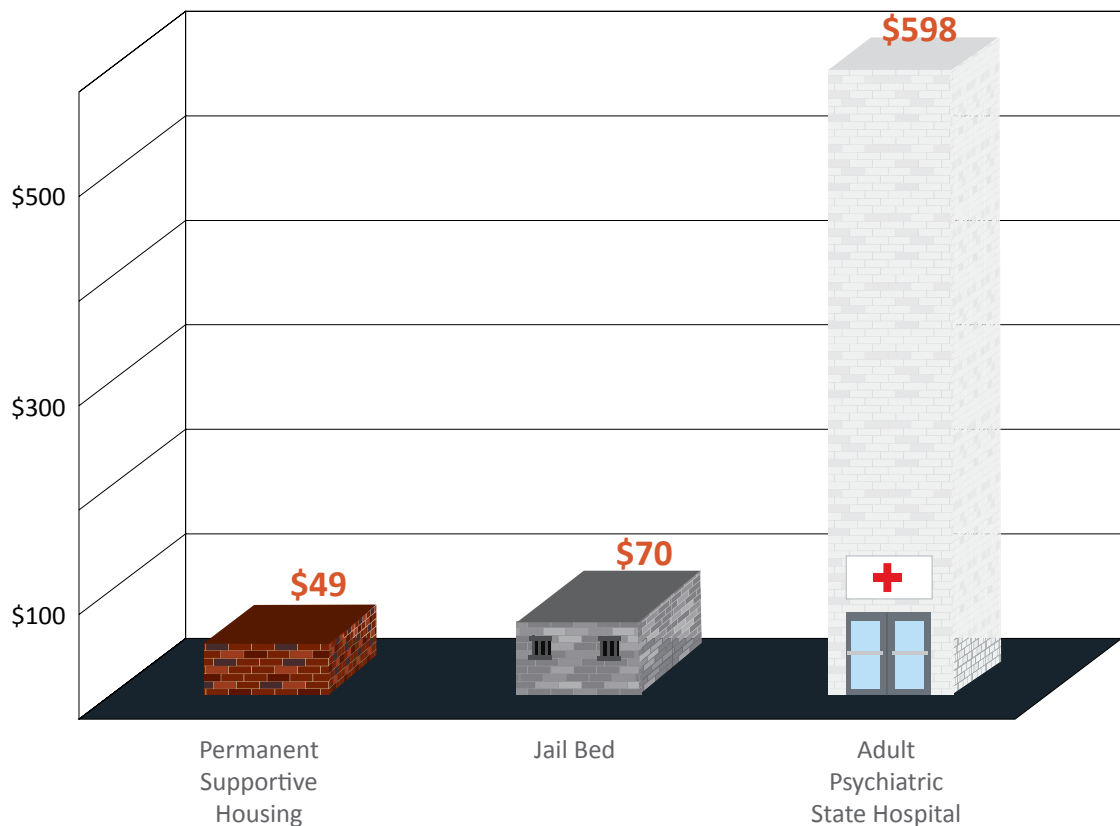
Many believe that this group of people cannot be housed. It simply is not true.

Between 85 and 100 percent of tenants in several permanent supportive housing programs in Virginia did not return to homelessness.¹

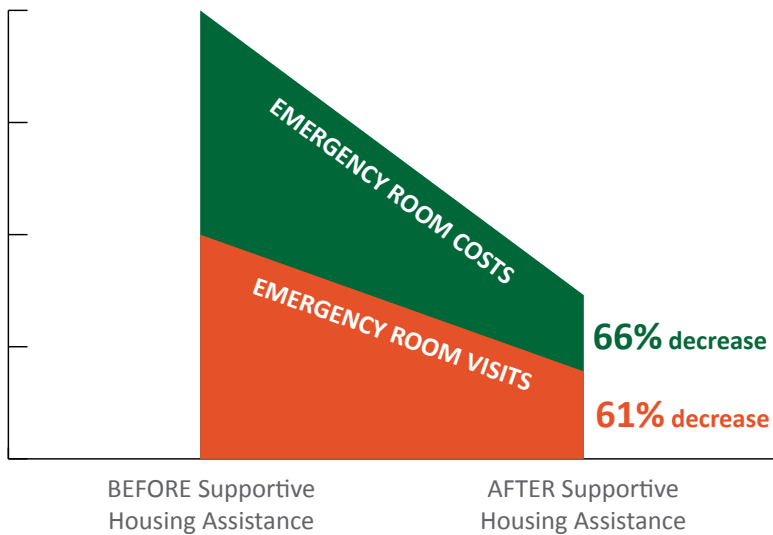
It saves money.

The target population often cycles between life on the street, hospital emergency rooms, mental health facilities, and local jail. That costs money.

The chart below compares the daily cost of permanent supportive housing - in Virginia Supportive Housing's A Place To Start program - to the daily cost of jail and hospital beds.²



- ¹ This data is based on a VCEH survey of several permanent supportive housing programs in Virginia that track this data. See methodology for the list of programs.
- ² The cost of permanent supportive housing is the rate per day for operating and service costs in Virginia Supportive Housing's A Place To Start (APTS) program.



A 2010 analysis conducted by Virginia Supportive Housing of clients in their programs showed a decrease of 61 percent in emergency room visits,³ and a decrease of 66 percent in emergency room costs.⁴

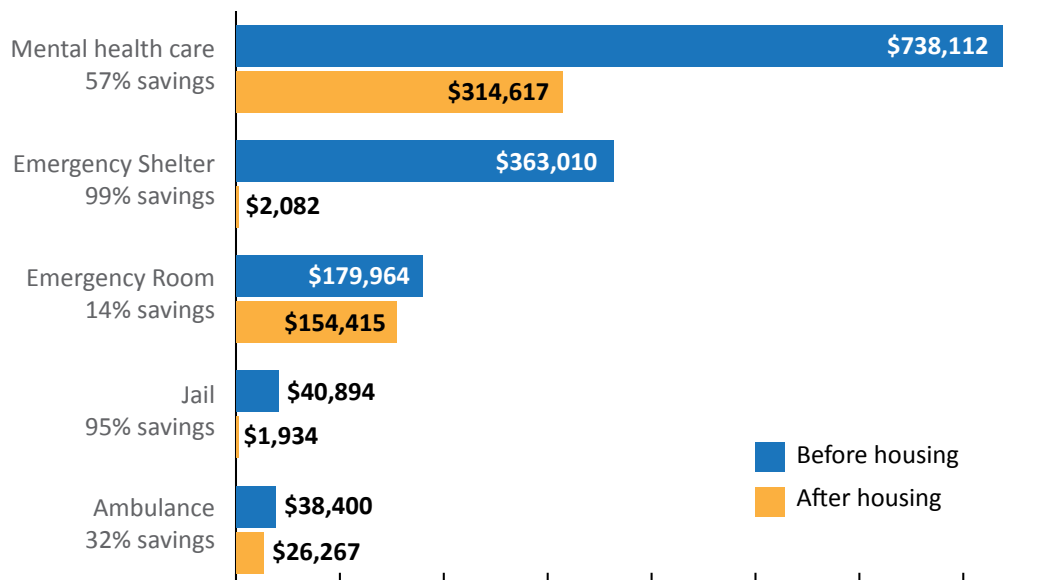
Multiple studies have demonstrated cost savings to public systems of care due to permanent supportive housing. A cost analysis of permanent supportive housing in rural Maine found:

- 32% reduction in service cost

by providing permanent supportive housing to people with disabilities experiencing homelessness in rural areas

- 57% reduction on expenditures for Mental Health Services, illustrating a shift away from expensive psychiatric inpatient care to less expensive outpatient community-based services
- Permanent supportive housing placements reduced service costs: shelter by 99%, emergency room by 14%, incarceration by 95%, and ambulance transportation by 32%
- \$1,348 per person cost avoidance
- \$219,791 six month cost avoidance total for all 163 tenants⁵

COST SAVINGS OF PERMANENT SUPPORTIVE HOUSING



³ According to Virginia Supportive Housing, for the average of 20 months since entering the A Place To Start (APTS) program, clients' emergency room visits have decreased 61 percent for the previous 20 months prior to program entry.

⁴ According to Virginia Supportive Housing, there was a 66 percent savings in emergency room costs in the first 20 months of the APTS program from the previous 20 months prior to program entry.

⁵ Mondello, M., Bradley, J., Chalmers, T., Shore, N. 2009. Cost of Rural Homelessness: Rural Permanent Supportive Housing Cost Analysis, State of Maine. Corporation for Supportive Housing, MaineHousing, Maine Department of Health and Human Services.

It improves lives.

The impact of permanent supportive housing on the individual cannot be overstated. Often, when no other program has worked for an individual and they have spent years living on the street and struggling with chronic health conditions, permanent supporting housing places them in their own home. Once placed with housing an individual may be able to work—53 percent of those with no income at move-in secured income in Virginia Supportive Housing’s programs, and 50 percent of tenants increased their income in New Hope Housing’s permanent supportive housing program⁶.

It benefits the community.

Permanent supportive housing usually looks like any other type of housing in the community and therefore can increase property values and encourage community renewal. This renewal is especially true when it is created by purchasing and renovating dilapidated properties.

Increasing the supply of permanent supportive housing would not only provide stable housing for the community’s most vulnerable; it would also help businesses. When there is a decrease in the number of people without homes loitering in front of downtown businesses the overall business atmosphere improves.



⁶ For many tenants of permanent supportive housing, their disabilities may hinder their ability to work.

What Is Permanent Supportive Housing?

AFFORDABLE AND APPROPRIATE HOUSING + SUPPORT SERVICES = STABILITY

Permanent supportive housing is intended to stably house people who are poor, struggle with chronic health conditions that are disabling—such as mental illness, HIV/AIDS, and/or chemical dependency—and who have been unable to access and maintain stable housing without some level of support services.

Permanent supportive housing uses a housing first philosophy (which says that people need housing first), and then combines that housing with supportive services. These support services either directly provide or connect individuals to services in their community. Support services include case management that focuses on housing stabilization and

can also include direct or coordinated care in the areas of mental health, substance abuse, health care, dental care, education, employment, and access to benefits.

“It is a proven permanent solution to homelessness. Permanent supportive housing stabilizes the person; the services help the person stay in housing and help them become as independent as they possibly can.”

~ Alice Tousignant, Executive Director,
Virginia Supportive Housing, Richmond, VA

What is Housing First?

Housing First is an approach to ending homelessness that centers on providing individuals and families experiencing homelessness with housing as quickly as possible and then providing services as needed. This approach has the benefit of being consistent with what most people experiencing homelessness want and seek help to achieve. Housing First programs share critical elements:

- A focus on helping individuals and families access and sustain permanent rental housing as quickly as possible without time limits;
- A variety of services delivered to promote housing stability and individual well-being on an as-needed basis;
- A standard lease agreement to housing as opposed to mandated therapy or services compliance.

~ National Alliance to End Homelessness

Permanent supportive housing is one model that uses a housing first philosophy.

A Definition

Supportive housing is a successful, cost-effective combination of affordable housing with services that helps people live more stable, productive lives.⁷

A permanent supportive housing unit is defined by the following elements:

“Supportive housing is successful because it provides affordable rents through subsidies for clients who, because of their disabilities, have limited incomes through Supplemental Security Income (SSI). Without the subsidy, rental housing is out of reach for this population. Another reason supportive housing is successful is because case management and other supportive services are offered to all clients. For individuals and families coming out of homelessness, especially those who are chronically homeless, this additional support is critical. Without it, many will fall back into homelessness.”

~ Allison Wingfield, Executive Director, Rush Homes, Lynchburg, VA

- The unit is available to, and intended for, a person or family whose head of household is homeless or at-risk of homelessness and has multiple barriers to employment and housing stability, which might include mental illness, chemical dependency, and/or other disabling or chronic health conditions.
- The tenant household ideally pays no more than 30% of household income towards rent and utilities and never pays more than 50% of income toward such housing expenses.

- The tenant household has a lease (or similar form of occupancy agreement) with no limits on length of tenancy, as long as the terms and conditions of the lease or agreement are met.
- The unit’s operations are managed through an effective partnership among representatives of the project owner and/or sponsor, the property management agent, the supportive services providers, the relevant public agencies, and the tenants.
- All members of the tenant household have easy, facilitated access to a flexible and comprehensive array of supportive services designed to assist the tenants to achieve and sustain housing stability.
- Service providers proactively seek to engage tenants in on-site and community-based supportive services, but participation in such supportive services is not a condition of ongoing tenancy.
- Service and property management strategies include effective, coordinated approaches for addressing issues resulting from substance abuse, relapse, and mental health crises, with a focus on fostering housing stability.

The housing setting will vary dramatically and be based on a range of factors including the tenant’s preference, the type of housing stock available, and the norms and history of a local community’s real estate market. Type of housing might include:

- Scattered site rent-subsidized apartments leased in the open market;
- Apartment or single-room occupancy (SRO) buildings, townhouses, or single-family homes that exclusively house formerly homeless individuals and/or families;
- Apartment or SRO buildings, or townhouses that mix special-needs housing with general affordable housing; and
- Long-term set-asides of units within privately owned buildings.

⁷ *The Virginia Coalition to End Homelessness Board of Directors and Permanent Supportive Housing Advisory Council has adopted the slightly modified definition of permanent supportive housing created by the Corporation for Supportive Housing.*

Permanent Supportive Housing: The Solution For...

Individuals and Families Experiencing Chronic Homelessness

Permanent supportive housing has emerged as a solution to chronic homelessness.⁸ Those experiencing chronic homelessness have experienced homelessness for long periods of time and have a disabling condition—a diagnosable substance abuse disorder, serious mental illness, developmental disability, chronic physical illness, or the co-occurrence of two or more of these conditions. This population often bounces from emergency shelter to hospital emergency rooms to jail, never receiving the support needed to stop this tragic cycle.

Those experiencing chronic homelessness are often vulnerable and often have complex service needs. Supportive housing works to keep them in housing. It ends their homelessness permanently.

Ex Offenders

One of the most pressing societal problems is the number of people released from jail and prison who are ill prepared for re-entering community life. Virginia will release 10,958 people from prison in calendar years 2011 and 2012. Those released from jail and prison face additional barriers to housing and employment—many are barred from public and private housing, and employers often will not hire them.

In addition, mental illness and chemical dependency rates are high among Virginia's jail and prison population. Sixteen percent of Virginia's local and regional jail inmate population are known to experience mental illness. Nine percent of the general population of Virginia jails have been diagnosed with a serious mental illness.⁹ Ten percent (1,048) of individuals exiting prison in 2011 and 2012 have a mild to severe mental health impairment. 15 percent (1,616) of individuals exiting prison in 2011 and 2012 report heavy heavy alcohol use. Without housing or a job and with additional barriers of mental illness and substance abuse, too often those with criminal histories re-offend and end up back in jail or prison.

The Virginia Department of Corrections tracks reincarceration, including those stemming from parole violations, for three years after release from an adult correctional facility. According to the latest data available, about 29 percent of (prison) inmates are reincarcerated within 36 months of being released from prison.¹⁰ This does not include the re-occurrences of arrest and convict which add additional cost to the criminal justice system.

Stable housing has been shown to reduce recidivism. A 2010 analysis conducted by Virginia Supportive Housing of clients in their programs showed: a decrease of 83 percent in the number of arrests.¹¹

Data from other communities across the country has demonstrated that permanent housing with wrap

8 *The U.S. Department of Housing and Urban Development defines a person who is "chronically homeless" as an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, or has at least four episodes of homelessness in the past three years. In order to be considered chronically homeless, a person must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency homeless shelter. A disabling condition is defined as a diagnosable substance abuse disorder, serious mental illness, developmental disability including the co-occurrence of two or more of these conditions. A disabling condition limits an individual's ability to work or perform one or more activities of daily living. The HEARTH Act (federal legislation reauthorizing the McKinney-Vento Act) expands the definition of chronic homelessness to include families. This expanded definition of chronic homelessness will take effect in 2011.*

9 *Compensation Board, Commonwealth of Virginia. 2009 Mental Illness in Jails Report. Richmond, VA: November 1, 2009.*

10 *Measuring Recidivism in Virginia: Virginia Performs. <http://vaperforms.virginia.gov/indicators/publicsafety/recidivism.php>*

11 *According to Virginia Supportive Housing, the number of arrests decreased by 83 percent from the 20 months prior to APTS program entry.*

around services has created a:

- 76 percent reduction in days spent in jail or prison in Denver;
- 57 percent reduction in the rate of prison incarceration and a 30 percent reduction in the rate of jail incarceration among those with mental illness in New York; and
- Decreased recidivism rate from 50 percent to 7 percent in Maryland.¹²

Veterans

The Virginia Joint Legislative and Audit Review Commission (JLARC) recently released a report on the needs of veterans experiencing homelessness and included information on veterans who experience chronic homelessness. According to JLARC, in many parts of Virginia, services provided to chronically homeless veterans are inadequate to help them exit homelessness and secure permanent housing. Key problems with the current system include (1) inadequate funding for housing and supportive services, (2) program requirements that make services inaccessible to some chronically homeless veterans, (3) lack of needed medical and behavioral healthcare, and (4) eligible veterans not being connected to benefits.¹³

While veterans look like most other populations of people experiencing homelessness, they have unique factors which may put them at higher risk for homelessness. One in five Iraq and Afghanistan Veterans suffer from post-traumatic stress disorder (PTSD) or major depression, yet only half have sought treatment.¹⁴ Nineteen percent of returning service members experienced possible traumatic brain injury.¹⁵

Youth Aging Out of Foster Care

The outlook for youth who “age out” of foster care without a permanent family is often bleak. More than 20 percent will experience homelessness at some time after age 18. One in four will be incarcerated within the first two years after they leave the system. Of youth who aged out of foster care and are over the age of 25, less than three percent earned their college degrees, compared with 28 percent of the general population.¹⁶

Homelessness of former foster care children can occur due to a combination of inadequate transition planning and the lack of appropriate housing and service support to transition youth to adulthood. One of the main reasons for homelessness is the lack of a family and friend support network. Often youth who have aged out without a permanent family do not have the support system upon which many others heavily rely.

For those youth with disabling conditions, without a support network, and without adequate financial resources to afford housing, supportive housing can prevent them from living on the street or in emergency shelter.

¹² *Corporation for Supportive Housing*. Getting Out With Nowhere to Go: The Case for Re-Entry Supportive Housing.

¹³ *Virginia Joint Legislative and Audit Review Commission*. Reducing Veteran Homelessness in Virginia. June 14, 2010: Richmond, VA.

¹⁴ *The RAND Corporation*. Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery. 2008.

¹⁵ *Ibid*.

¹⁶ *The Pew Charitable Trusts*. Time for Reform: Aging Out and On Their Own - More Teens Leaving Foster Care Without a Permanent Family. Washington, DC, 2007.

Youth Aging Out of Foster Care

Arlington County's Permanent Supportive Housing Program targets individuals with disabilities, as well as youth who are aging out of foster care. Many of these youth are enrolled in Virginia's Independent Living Program, which prepares them for self-sufficiency. The Independent Living Program (ILP) is in Arlington County's Child and Family Services Division of the Department of Human Services. ILP participants are enrolled in college courses or employed. Once the youths turn 21, they no longer receive case management support through Child and Family Services, but seamlessly continue to receive needed housing support and housing based case management through the Permanent Supportive Housing program. The combination of participation in ILP and the Permanent Supportive Housing program allows for youths who have very little or no family support to learn how to live independently in the community.



A Note About Homeless Prevention

This report focuses on the need for permanent supportive housing and does not document strategies to prevent homelessness before it occurs. However, prevention of homelessness is more humane and cost effective than homelessness.

There are several critical strategies to prevent homelessness among those with mental illness, substance abuse disorders and chronic health conditions. Two effective interventions include mental health courts and discharge planning.

Individuals with criminal backgrounds face additional housing and employment barriers which create high risk of homelessness. For those individuals with both criminal backgrounds and disabling conditions, risk of homelessness is even greater. The Norfolk Mental Health Court offers a case study on the impact of jail diversion.

The Norfolk Mental Health Court offers individuals living with a mental health disorder the opportunity to accept treatment instead of going to jail. Participants have been found guilty of a non-violent crime that is symptomatic of their illness. Close supervision of participants by case managers and regular meetings with the judge and probation officers prompted participants to stick with their treatment plans to remain clean and sober.

In FY 08, the Mental Health Court saved \$1.63 million in jail costs, according to an 18-month evaluation study by the Social Science Research Center at Old Dominion University. Jail time was reduced by 11,610 days during enrollment in Mental Health Court and by 9,600 days after program completion. Only 3 out of 24 graduates reoffended after completion of the program.¹⁷

Hospitals, jails, and prisons create discharge plans for individuals ready to exit the facility. These discharge plans must include realistic expectations regarding the individuals' living arrangements, in order to prevent homelessness for those at risk. The most effective discharge plans involve agencies that have housing and service resources who agree to serve those in need.

¹⁷ Virginia Association of Community Services Boards. 2009 Annual Report: Recovery and Independence Investments return positive outcomes for consumers and communities. Richmond, VA: 2009.

Current Permanent Supportive Housing Capacity

Current Capacity of Permanent Supportive Housing For People Experiencing Homelessness¹⁸

Total Number of People Currently Housed in Permanent Supportive Housing in Virginia: 2,138

Single Adults: 1,661

People in Families: 477

Total Number of Existing Units of Permanent Supportive Housing in Virginia: 1,784

Existing Units Currently Housing Single Adults: 1,603

Existing Units Currently Housing Families: 181

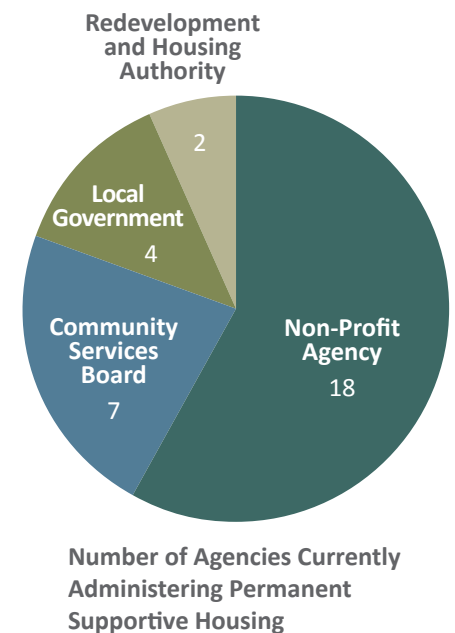
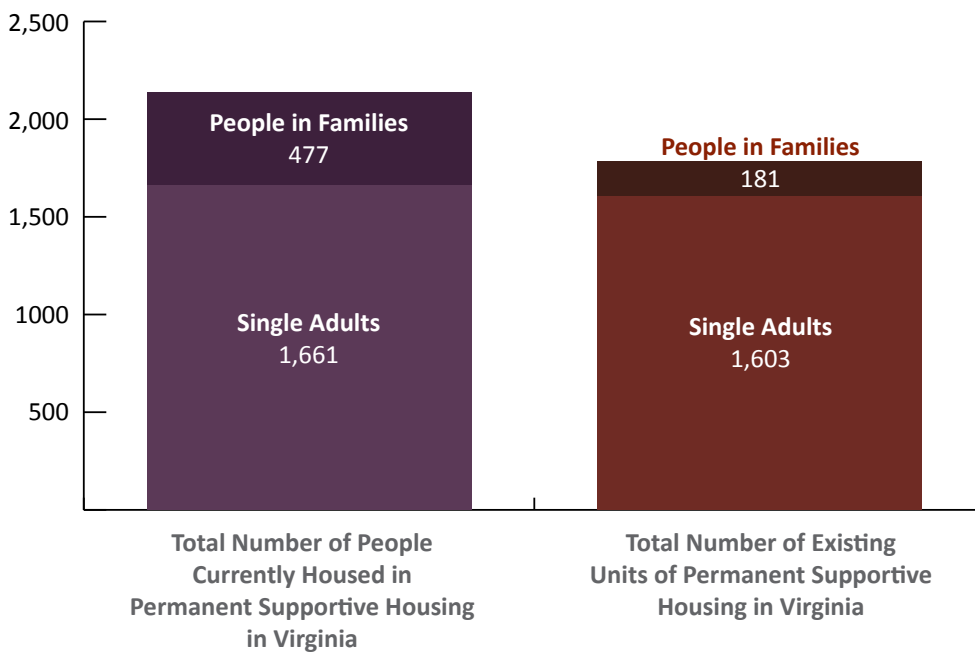
Number of Agencies Currently Administering Permanent Supportive Housing¹⁹: 31

Nonprofit Agency: 18

Community Services Board: 7

Local Government: 4

Redevelopment and Housing Authority: 2



¹⁸ This inventory includes permanent supportive housing units currently housing those individuals or families who experienced homelessness. It does not include the units that house individuals with mental illness, substance abuse, and co-occurring disorders who are not documented with previous homeless episodes. Many of these units, often provided by community services boards, are likely preventing homelessness for a vulnerable population.

¹⁹ The number of agencies administering permanent supportive housing does not include the many additional agencies that serve as partners on some aspects of delivering permanent supportive housing.

Estimated Permanent Supportive Housing Need

Number of **new** Permanent Supportive Housing Units Needed in Virginia: 6,839

The development and maintenance of these 6,839 new units of PSH will:

- House individuals and families currently experiencing chronic homelessness, including veterans.
- House individuals exiting state hospitals who are at risk of experiencing chronic homelessness.
- House individuals exiting jail and prison who are at risk of experiencing chronic homelessness.



Virginia's Permanent Supportive Housing Goals

- **To re-house** those experiencing chronic homelessness in Virginia, we need 1,347 units of permanent supportive housing.
- To stably house individuals exiting state hospitals who are at risk of chronic homelessness, we need 465 new units of permanent supportive housing.
- To prevent chronic homelessness and prevent recidivism for those exiting jail and prison, we need 5,027 new units of permanent supportive housing.



Who Provides or Could Provide Permanent Supportive Housing?

There are several options regarding the type of agency and organization that develops and administers permanent supportive housing.

Housing Developer and Service Provider Partnerships

The best permanent supportive housing projects develop when those involved have the expertise to deliver what is needed. Permanent supportive housing consists of affordable housing and access to appropriate and tailored support services. In many situations, a housing developer does not have the expertise or capacity to deliver services and a service agency does not have the expertise or capacity to develop and operate housing. Therefore, many supportive housing programs are a result of collaborative

“Why do we do housing? Because housing works! With housing in place all the other pieces of the puzzle for persons with mental disabilities more effectively come together.”

~ Joy A. Cipriano, Director, Office of Property and Resource Development, Hampton-Newport News Community Services Board

relationships between those who specialize in housing and those who specialize in services.

Example - Lynchburg, VA: Through the Supportive Housing Program, Rush Homes and Miriam’s House collaborate to provide housing and services

that assist clients with their transition from homelessness to permanent housing and independent living. Rush Homes operates the housing while case management is provided by Miriam’s House, a homeless services agency with expertise in delivering services.

Community Services Board as Partner or Provider of Permanent Supportive Housing

Forty community services boards or behavioral health authorities across the Commonwealth exist to ensure the delivery of community-based mental health, intellectual disability, and substance abuse disorder services to citizens with those disabilities.²⁰ Several have elected to focus on housing—either developing or administering housing programs.

For example: the Fairfax-Falls Church Community Services Board has taken on housing as a critical component of their menu of services. The goal, according to Executive Director George Braunstein, is to track housing stability outcomes as a measure of success and improve the percentage of clients who are sustaining stable homes. The CSB utilizes a portion of their services dollars to supplement housing costs, while at the same time aggressively pursuing additional funds for housing for their clients.

Housing is also critical to Piedmont Community Services, the community services board serving Martinsville and Henry County. The agency has conducted a permanent supportive housing needs assessment to define the need for permanent supportive housing in the City and County, and to lay out a blueprint for the development of permanent supportive housing.

²⁰ The Virginia Association of Community Services Board. <http://www.vacsb.org/csb-bha.html>. The Virginia Code requires every local government jurisdiction to form or combine with other local governments to form a community services board or behavioral health authority. CSB / BHAs are responsible for assuring, with allocated resources, the delivery of community-based mental health, intellectual disability, and substance abuse disorder services to citizens with those disabilities.

Permanent Supportive Housing Provider

An agency can primarily provide the specific model of permanent supportive housing.²¹ This agency must have the capacity, expertise, and experience in developing housing, operating the program, and delivering essential services.

“Stable housing is a necessary part of our clients’ (those with mental health, intellectual disability, and substance abuse issues) treatment plan. Without housing, it becomes almost impossible to address higher level goals like recovery and wellness.”

~ Jim Tobin, Executive Director, Piedmont Community Services, Martinsville, VA

Why Would a Community Services Board Focus on Housing?

The Hampton-Newport News Community Services Board (HNNCSB) has been involved with housing for consumers of mental health services, individuals with intellectual and developmental disabilities, and individuals with substance abuse disorders since its beginning in 1971. However, since the late-1990s, the commitment and involvement of the HNNCSB increased tremendously in response to two basic factors.

First, consumers of their services indicated via surveys, interviews, and case management meetings, that “housing”—safe, decent, and affordable—was one of their top unmet needs. This need was unattainable by many consumers because other landlords would not lease to them. Factors affecting their ability to obtain adequate housing included: criminal histories; poor or no credit due to low income levels (often below 14% of the area median income); considerable time in the ranks of the homeless—all making them very unattractive as tenants. In short, many of the people for whom the CSB developed housing options are those others would and did reject as tenants.

Secondly, people with mental disabilities can successfully navigate many other issues in their lives once they have stable and decent housing. They

meet regularly with behavioral health staff, attend doctor’s appointments, take medicine as prescribed, identify and follow-up on employment or other program goals, and require much less time in hospitals and jails, once they have their own place to live, bathe, eat, and receive mail, phone calls, and visitors, etc. Other housing and service providers constantly put requirements in front of individuals, demanding that service expectations be met before housing is offered, instead of the other way around.

Since other providers did not want to serve people with serious mental disabilities and screened them out, the Hampton-Newport News Community Services Board was left in a position of having to provide the housing itself. So it did.

The Hampton-Newport News Community Services Board went into the housing business because housing makes mental health treatment and recovery possible and more successful. The most successful housing has used the Housing First-type models, which they began using in the late 1990’s. The HNNCSB has expanded its housing resources until today it makes affordable housing available and attainable to more than 350 households in the cities of Hampton and Newport News.

²¹ See the definition of permanent supportive housing included in this report.

Traditional Homeless Service Provider as Permanent Supportive Housing Provider

“We are considering a plan to go to housing first as a pilot program in Roanoke. We want to test the waters to see how successful we might be in providing enough support services to exit women from the continuing cycle of recurrent homelessness. With wrap around services, they would be more equipped to maintain permanent housing. Our hope is to incorporate a program that might assist women with varying challenges such as mental health, substance abuse or even past incarceration issues.”

**~ Melissa Woodson, Executive Director
of YWCA of the Roanoke Valley**

An agency, that has traditionally operated emergency shelter and transitional housing programs aimed at sheltering and delivering services to those experiencing homelessness, can change its core business or add permanent supportive housing as part of its offerings.

Agencies operating homeless services programs, including emergency shelter and transitional housing, may choose to develop the expertise to develop or operate permanent supportive housing. It is not easy to develop permanent supportive housing, and any agency that wishes to begin providing permanent supportive housing must have the proper training to administer effective programs.



Rural Virginia: Permanent Supportive Housing Can and Should Be Developed in Virginia’s Small Towns and Rural Communities

“Often referred to as the “hidden homeless”...”

Homelessness is not solely an urban phenomenon. Homelessness and housing instability are significant problems in Virginia’s rural communities.

Due simply to population figures, the number of people who experience homelessness in rural Virginia is much smaller than that found in urban and suburban jurisdictions. But the problem is larger than what it appears to be. Those experiencing homelessness in rural Virginia often go unseen. They are not often living on the streets. Because emergency shelters and transitional housing programs are far fewer, there is nowhere for those experiencing homelessness to go to be recognized. They more often double up with family and friends, which is sometimes a stable housing situation and sometimes not.

“When you talk about creating homelessness services and programs, you often hear the response: ‘But if you build it, they will come.’ But when you look at the statistics on homelessness, you understand that ‘homelessness is already here.’ Leaving this issue un-addressed isn’t aligned with our values - it’s not who we are as a community.”

~ The Honorable Kai Degner, Mayor, City of Harrisonburg, VA

The higher rates of poverty in rural areas and the lack of service networks make those living in rural Virginia at high risk of homelessness.

The primary target population for permanent supportive housing is those living with disabilities; including mental illness and substance abuse disorders. These individuals are also living in Virginia’s rural regions. Therefore, permanent supportive housing—while it may look different than in urban areas—is needed to address housing for this subset of the population in rural areas too.

A review of best practices in supportive housing in rural areas by Virginia Supportive Housing revealed few differences with strategies employed in urban areas to develop and sustain permanent supportive housing. According to Virginia Supportive Housing, several characteristics for successful supportive housing developments that are especially critical in rural communities are:

1. Property management and support services that work together are essential and may be provided by the same or partnering organizations;
2. Studio or efficiency apartments are not as popular or acceptable in rural areas where one-bedroom units are more appropriate and flexible; and
3. The number of units in a new rental housing development should reflect similar apartment communities in the area.²²

²² Virginia Supportive Housing. Supportive Housing Needs Assessment: Martinsville - Henry County, Virginia. July 2010.

Martinsville and Henry County community leaders are planning for the creation of permanent supportive housing as a part of a larger economic development and community transformation initiative. One of the most economically depressed areas of the state, Martinsville has embarked on a community transformation initiative with the goal of restoring community vitality, encouraging economic development, and making Martinsville into a regional destination once again.²³ Leaders of this community transformation initiative recognized the integral role of housing to fulfilling economic and community development goals. Specifically, there was a need to ensure housing for those living unstably in downtown Martinsville hotel and motels which were in the process of being sold and redeveloped. Local partners developed a Supportive Housing Needs Assessment to identify the number of units of permanent supportive housing needed and by whom, to consider the models appropriate to a rural setting, and to increase knowledge of the efficacy of this model.



²³ *Uptown Martinsville*. <http://uptownmartinsville.com/>

Current Funding Streams for Permanent Supportive Housing

There are three types of financing needed to create and sustain permanent supportive housing:

- **Capital:** Funding to build or rehabilitate housing for project-based developments and including pre-development costs;
- **Operating:** Funding for the ongoing rental assistance;
- **Services:** Funding to provide sufficient support services.

There are 0 state funding sources targeted for permanent supportive housing.

There are 8 state funding sources that can be used for permanent supportive housing.

There are 4 federal funding sources targeted for permanent supportive housing.

There are 26 federal funding sources that can be used for permanent supportive housing.

Current and new public and private funding resources can and should be used for permanent supportive housing.

The following chart (beginning on page 26) lists the federal and state funding sources that are targeted to permanent supportive housing and the sources that are or could be utilized for permanent supportive housing.²⁴ Each administering agency must review the accessibility of the funding source for permanent supportive housing purposes.

This report does not document private and local resources targeted to or used for permanent supportive housing. However, there are a number of examples of innovative uses of local public and private dollars to develop and sustain permanent supportive housing.

²⁴ The list is divided by sources funded from the federal government and sources funded by the state government. In many cases, state and local government administers federally-funded programs, and the list also includes the “administering agency.”

**FEDERAL FUNDS:
TARGETED FOR PERMANENT SUPPORTIVE HOUSING**

Funding Source	Eligible Activities	Administering Agency	Financing Type
Supportive Housing Program (SHP)	Funds development of permanent supportive housing, operating costs and supportive services.	U.S. Department of Housing and Urban Development (HUD)	Capital Operating Services
Shelter Plus Care Program	Provides rental subsidies for homeless persons with chronic disabilities.	HUD	Operating
Section 8 Moderate Rehabilitation Program for Single-Room Occupancy Dwellings	Provides rental subsidies (that are unit-based not tenant-based) to make SROs more affordable for homeless persons.	HUD	Operating
SAMHSA Services in Supportive Housing	Funds services in existing permanent supportive housing programs.	U.S. Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services	Services

**FEDERAL FUNDS:
CAN BE USED FOR PERMANENT SUPPORTIVE HOUSING**

Funding Source	Eligible Activities	Administering Agency	Financing Type
Community Development Block Grants (CDBG) Program	Funds development of housing, and provides supportive services.	HUD Virginia Department of Housing and Community Development (DHCD) Local Government	Capital Services
HOME Investment Partnership (HOME) Program	Funds development of affordable and supportive housing units and provides rental subsidies.	HUD Virginia DHCD Local Government	Capital Operating
Section 811 Supportive Housing for Persons with Disabilities	Funds development of housing, provides rental subsidies and provides services for people with disabilities.	HUD	Capital Operating Services
Section 202 Supportive Housing for the Elderly Program	Funds development of housing and provides rental subsidies for elderly persons who need supportive housing.	HUD	Capital Operating
Housing Opportunities for Persons with AIDS (HOPWA) Program	Funds development of housing, provides rental assistance, and provides services to persons living with HIV/AIDS.	HUD Virginia DHCD Local Government	Capital Operating Services
Title V Program	Makes surplus federal properties available to assist homeless persons. Program provides no funding.	HUD	Capital
Base Realignment and Closure Program (BRAC)	Makes closed military bases available to assist homeless persons.	HUD	Capital
Neighborhood Stabilization Program (NSP)	Funds acquisition and redevelopment of vacant and foreclosed properties.	HUD Virginia DHCD Select Local Governments	Capital

Funding Source	Eligible Activities	Administering Agency	Financing Type
Section 515	Funds development of multi-family affordable housing units.	United States Department of Agriculture (USDA) Rural Housing Service	Capital
Housing Choice Voucher Program (Section 8)	Provides rental subsidies to tenants	HUD Public Housing Agencies (PHAs) under contract with HUD	Operating
Mainstream Housing Opportunities	Provides Section 8 vouchers for people with disabilities.	HUD	Operating
Section 521	Project-based rental subsidy for tenants in properties developed with programs like Section 515.	USDA Rural Rental Assistance Program	Operating
HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Provides vouchers for homeless veterans with serious mental illnesses and substance use disorders. VA provides services.	US Department of Veterans Affairs (VA) and HUD	Operating Services
Treatment for Homeless	Funds substance abuse services, mental health services, or both.	HHS/SAMHSA's Center for Substance Abuse Treatment	Services
Health Care for the Homeless	Funds health care services to people experiencing homelessness. Can provide health care services to people in permanent housing for 12 months after housing entry.	HHS Health Resources and Services Administration (HRSA)	Services
Community Health Centers	Provides preventive and primary care services to medically underserved populations.	HHS HRSA	Services
SAMHSA Discretionary Grants	Supports services, infrastructure, best practices planning and implementation, and "Service-to-Science" activities.	HHS SAMHSA	Services

Funding Source	Eligible Activities	Administering Agency	Financing Type
Medicaid	Funds mental health and substance abuse services. Also home- and community-based waivers to allow persons with AIDS, elderly persons, and persons with disabilities avoid institutionalization.	HHS Centers for Medicare and Medicaid Services (CMS) Virginia Department of Medical Assistance Services (DMAS)	Services
Community Mental Health Services Block Grant	Provides health, mental health, rehabilitation, employment, housing, other supportive services, and substance abuse treatment mostly to community services boards.	HHS Virginia Department of Behavioral Health and Developmental Services (DBHDS)	Services
Projects for Assistance in Transition from Homelessness (PATH)	Funds mental health services, substance abuse treatment, provision of or linkage to supportive services, and a limited set of housing services.	Virginia DBHDS	Services
Substance Abuse Prevention and Treatment Block Grants	Provides alcohol and other drug prevention and treatment activities.	HHS Virginia DBHDS	Services
Community Services Block Grants	Provides services to fight poverty and to promote self-sufficiency.	HHS Virginia Department of Social Services (DSS)	Services
Social Services Block Grants	Provides services to promote self-sufficiency.	HHS Virginia DSS	Services
Ryan White Comprehensive AIDS Resources Emergency (CARE) Act Programs	Provides health care and support services to persons with AIDS.	HHS	Services
Homeless Veterans Reintegration Program	Provides employment assistance for veterans with significant barriers to work.	VA	Services
SSI program	Provides cash assistance to low-income individuals and persons with disabilities, including homeless persons with serious mental illnesses.	Social Security Administration	Cash Assistance

**STATE FUNDS:
CAN BE USED FOR PERMANENT SUPPORTIVE HOUSING**

State Funds	Eligible Activities	Administering Agency	Financing Type
Low Income Housing Tax Credit (LIHTC)	Funds development of affordable housing.	Virginia Housing Development Authority (VHDA)	Capital Capitalized Operating costs
Rental Unit Accessibility Modification program	Modifies rental units to make them accessible for people with disabilities.	VHDA	Capital
Tax-Exempt Bond Financing	Funds development of multi-family affordable rental housing.	VHDA	Capital
Taxable Bond Financing	Funds development of multi-family affordable rental housing.	VHDA	Capital
Mixed-Income Financing	Funds development of multi-family affordable rental housing.	VHDA	Capital
SPARC Multifamily	Funds development of housing.	VHDA	Capital
Grants to Localities	Funds residential services programs administered by community services boards	Virginia DBHDS	Operating Services
DAP (Discharge Assistance Program)	Controlled by community services boards on a regional level, provides funds for the services and supports needed by people who are ready for state hospital discharge.	Virginia DBHDS	Operating Services

Public Policy and Capacity Building Recommendations

In Virginia, there are inadequate funds to create and sustain the necessary number of new permanent supportive housing units. This has resulted in Virginia agencies not developing adequate capacity to provide permanent supportive housing.

The following recommendations are suggested strategies to fill the gaps in policy, funding, and capacity that are barriers to developing and maintaining additional units of permanent supportive housing in Virginia. VCEH will prioritize these strategies for implementation on an annual basis. The end result will be an adequate supply of permanent supportive housing in Virginia; reduced reliance on emergency shelters, hospitals, jails, and prisons as the depositories for those who have no housing; cost savings to hospitals, jails, and prisons; and an increase in taxpaying citizens with stable homes and lives.

PUBLIC POLICY RECOMMENDATIONS

Goal 1: Improve utilization of existing federal, state, and local resources for permanent supportive housing.

Specific strategies would include:

PRE-DEVELOPMENT

- Identify existing resources within the Virginia Housing Development Authority and the Virginia Department of Housing and Community Development that could be used for pre-development costs.

CAPITAL

- Set aside 25 percent of state and local Community Development Block Grant (CDBG) funds and HOME Investment Partnership (HOME) funds.
- Expand the eligibility requirements of the existing non-competitive pool within the Low Income Housing Tax Credit program to include permanent supportive housing.
- Incentivize set asides for permanent supportive housing in mixed income communities.
- Partner with faith communities to utilize un- and under-developed land.

OPERATING

- Target available federally funded Section 8 housing choice vouchers for permanent supportive housing.
- Utilize new Section 8 housing choice vouchers that are appropriate to permanent supportive housing use, such as HUD-VASH (U.S. Department of Housing and Urban Development and U.S. Department of Veterans Affairs Supportive Housing Program.)
- Restructure the Auxiliary Grant (AG) program to pay for rent in private market housing and permanent supportive housing.
- Reduce restrictions on Section 8 housing choice vouchers for those with criminal backgrounds for the purpose of providing permanent supportive housing.

SERVICES

- Target Medicaid resources to frequent users of systems including private hospitals, mental health hospitals, jails, and prisons.
- Explore opportunities to maximize the use of Medicaid to be more effectively utilized for services in permanent supportive housing.
- Expand training for SOAR (SSI/SSDI Outreach, Access, and Recovery) to increase permanent supportive housing resident income by accessing mainstream benefits.
- Increase partnerships with workforce development agencies to ensure tenants of permanent supportive housing are accessing existing workforce development resources.
- Establish clear outcome expectations for stable housing for individuals with mental illness and substance abuse disorders within existing service delivery programs.
- Allow services in permanent supportive housing to be an eligible activity under the Emergency Shelter Grant (ESG) and the State Shelter Grant (SSG) programs.
- Utilize increased mental health block grant funds for permanent supportive housing, through a competitive application, for community services boards, nonprofit providers, and private providers.

Goal 2: Target any new federal, state, and local resources for permanent supportive housing.

Specific strategies would include:

- Designate at least 25 percent of funds through the federally funded National Housing Trust Fund for permanent supportive housing capital and operating costs.
- Create employment opportunities and address job training needs for individuals with mental health or substance abuse disorders residing in permanent supportive housing through the Governor's Economic Development and Job Creation Commission.

CAPACITY BUILDING RECOMMENDATIONS

Goal: Increase and expand the capacity of providers to provide permanent supportive housing.

Specific strategies would include:

- Provide intensive training and technical assistance, combining state agency and nonprofit technical assistance resources, to develop the capacity of providers to operate and fund permanent supportive housing.
- Create state-coordinated local housing councils to coordinate affordable housing opportunities for people experiencing mental illness, substance abuse, and co-occurring disorders.
- Assist communities to write successful federal McKinney-Vento Homeless Assistance Grants applications.

- Provide intensive training and technical assistance to improve the quality of permanent supportive housing and ensure high housing stability outcomes.
- Build partnerships among housing providers including housing authorities and permanent supportive housing and service providers including community services boards to provide permanent supportive housing.
- Combine available state agency resources for pre-development, capital, operating, and service into one funding package and one application.



Appendix A:

Inventory of Current Permanent Supportive Housing in Virginia

Primary Provider Organization	Name of Project	Geographic Area Served	# of Units for Single Individuals	# of Single Individuals Housed	# of Units for Families	# of People in Family Units
ACCESS AIDS Care	CHAP-Norfolk	Hampton Roads			10	33
ACCESS AIDS Care	Housing Solutions	Hampton Roads	15	15	1	2
ACCESS AIDS Care	CHAP-Peninsula	Hampton Roads	17	17	4	9
AIDS/HIV Services Group	AIDS/HIV Support Group	Charlottesville	10	10	8	19
Alexandria CSB	Family Condos	Alexandria			3	10
Alexandria CSB	Notabene	Alexandria	10	10		
Alexandria CSB	Columbus Wythe	Alexandria	7	7		
Alexandria CSB	Safe Haven	Alexandria	12	12		
Alexandria CSB	Canterbury and Mayflower	Alexandria	8	8		
Arlington County DHS	Milestones I Program (S+C)	Arlington County	9	9	0	
Arlington County DHS	Milestones II Program (S+C)	Arlington County	5	5	1	0
Arlington County DHS	Milestones III Program (S+C)	Arlington County	4	4	2	4
Arlington County DHS	Local Rental Assistance Program	Arlington County	96	96		
Arlington County DHS	LPACAP	Arlington County	8	8		
Arlington County DHS	Section 8 Project Based	Arlington County	9	9		
Arlington Street People's Assistance Network	In-Roads	Arlington County	6	6		
Arlington Street People's Assistance Network	Striving Home	Arlington County	12	12		
CAMG, Inc.	CAMG	Virginia Beach	145	145	4	9

Primary Provider Organization	Name of Project	Geographic Area Served	# of Units for Single Individuals	# of Single Individuals Housed	# of Units for Families	# of People in Family Units
Chesapeake Community Services Board	Shelter Plus Care	Chesapeake	1	1	2	
City of Lynchburg	Shelter Plus Care	Lynchburg	5	5	8	8
City of Roanoke	Shelter Plus Care - Home at Last	Roanoke	19	19	5	12
CHP	Warwick SRO	Virginia Peninsula	88	88		
Fairfax-Falls Church CSB	Community Treatment Team North	Fairfax County	11	11		
Fairfax-Falls Church CSB	PACT Residential Supported Housing	Fairfax County	19	19		
Fairfax-Falls Church CSB	Residential Intensive Care	Fairfax County	14	14		
Fairfax-Falls Church CSB	Supported Shared Housing Program (SSHHP), Inc., FCRP & Audubon	Fairfax County	15	15		
Fairfax-Falls Church CSB	CSB/HCD/ nonprofit partnership with TBRA vouchers	Fairfax County	4	4		
ForKids, Inc.	Legacy	Hampton Roads			6	18
ForKids, Inc.	Dillon Place	Hampton Roads			4	12
Good Shepherd Housing Foundation	Shepherd Homes Leasing	Prince William County	10	10		
Good Shepherd Housing Foundation	Shepherd Homes	Prince William County	15	15		
Hampton-Newport News CSB	Safe Harbors	Virginia Peninsula	22	22		
Hampton-Newport News CSB	Shelter Plus Care Project	Virginia Peninsula	16	16		
Hampton-Newport News CSB	Project Onward	Virginia Peninsula	6	6		
LINK	CANLINK I	Hampton Roads	15	15	12	37
LINK	CANLINK II	Hampton Roads	17	17	4	8
LINK	CANLINK III	Hampton Roads	9	9		

Primary Provider Organization	Name of Project	Geographic Area Served	# of Units for Single Individuals	# of Single Individuals Housed	# of Units for Families	# of People in Family Units
Loudoun County Department of Family Services	Loudoun County Department of Family Services	Loudoun County	1	1		
Lynchburg Neighborhood Development Fund	Cornerstone	Lynchburg	8	8	2	2
New Hope Housing	Max's Place	Fairfax County	8	8		
New Hope Housing	Housing First Apartment Program	Fairfax County	16	16		
New Hope Housing	Gartlan House	Fairfax County	8	8		
New Hope Housing	Susan's Place	Arlington County	4	4		
New Hope Housing	Milestones	Fairfax County			6	31
New Hope Housing	Just Home	Arlington County	3	3		
Norfolk Community Services Board	Shelter Plus Care	Hampton Roads	40	40	10	34
Norfolk Community Services Board	Housing First III	Hampton Roads	28	28		
Norfolk Community Services Board	Housing First IV	Hampton Roads	6	6		
Norfolk Community Services Board	Housing First V	Hampton Roads				
Northwestern Community Services Board	Shelter Plus Care	Winchester, Shenandoah, Frederick and Warren Counties	17	17	8	21
Northwestern Community Services Board	Permanent Housing Program	Winchester, Shenandoah, Frederick and Warren Counties	1	1		
Pathway Homes	Stevenson Place	Fairfax County	36	36		
Pathway Homes	Discharge Assistance and Diversion Group Home	Fairfax County	8	8		
Pathway Homes	In-Home Support Programs	Fairfax County	16	16		
Pathway Homes	Semi-Independent Homes	Fairfax County	6	18		

Primary Provider Organization	Name of Project	Geographic Area Served	# of Units for Single Individuals	# of Single Individuals Housed	# of Units for Families	# of People in Family Units
Pathway Homes	McKinney Homes	Fairfax County	15	56		
Pathway Homes	SHOP/Shelter Plus Care	Fairfax County	137	137		
Pathway Homes	SHP 2007	Fairfax County	7	7		
People Inc.	Kings Mountain	Abingdon	12	12		
Portsmouth Area Resources Coalition	SABRE	Portsmouth	10	10		
Portsmouth Area Resources Coalition	SABRE 2	Portsmouth	4	4		
PRS, Inc.	Willow Lane: PRS Intensive Supported Housing	Fairfax County	6	6		
PRS, Inc.	Supportive Housing Program	Fairfax County	12	12		
Region Ten	Shelter Plus Care	Charlottesville, Albemarle County	17	17	17	22
Region Ten	Monticello Place	Charlottesville, Albemarle County	4	4		
Region Ten	Dual Recovery Center	Charlottesville, Albemarle County	5	10		
Residential Options, Inc.	Housing First I	Hampton Roads	10	10		
Residential Options, Inc.	Housing First II	Hampton Roads	6	6		
Residential Options, Inc.	Guy Avenue Apts	Hampton Roads	37	37		
Residential Options, Inc.	Fenner Street Apts	Hampton Roads	4	4		
Roanoke Re-development and Housing Authority	VASH Rental Assistance Program	Roanoke	35	35		
Rush Homes	Rush Homes Permanent Supportive Housing	Lynchburg	5	5		7
Second Chances	Second Chances/ Harbor House	Hampton Roads	16	16		
Total Action Against Poverty	Permanent Supportive Housing - Vinton Apartments	Roanoke			6	19

Primary Provider Organization	Name of Project	Geographic Area Served	# of Units for Single Individuals	# of Single Individuals Housed	# of Units for Families	# of People in Family Units
Virginia Supportive Housing	Cloverleaf Apartments	Norfolk, Virginia Beach, Portsmouth, and Chesapeake	60	60		
Virginia Supportive Housing	Gosnold Apartments	Norfolk, Virginia Beach, Suffolk	60	60		
Virginia Supportive Housing	New Clay House	Greater Richmond Region	47	47		
Virginia Supportive Housing	South Richmond	Greater Richmond Region	39	39		
Virginia Supportive Housing	Bliley Manor	Greater Richmond Region	8	8		
Virginia Supportive Housing	Independence House	Greater Richmond Region	6	6		
Virginia Supportive Housing	James River	Greater Richmond Region	14	14		
Virginia Supportive Housing	Stratford House	Greater Richmond Region	8	8		
Virginia Supportive Housing	Veterans Apartments	Greater Richmond Region	8	8		
Virginia Supportive Housing	Cary Street, Highland Park, Southern Barton Heights	Greater Richmond Region			16	
Virginia Supportive Housing	South Bay Apartments	Portsmouth	60	60		
Virginia Supportive Housing	Shelter Plus Care	Greater Richmond Region	68	68	42	160
Waynesboro Re-development & Housing Authority	Canterbury Commons	Waynesboro	18	18		
TOTAL			1603	1661	181	477

Appendix B: Resources

The following list contains resources cited as well as additional resources on permanent supportive housing.

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United States Department of Agriculture (USDA) Rural Development (www.rurdev.usda.gov)

United States Department of Health and Human Services (HHS) (www.hhs.gov)

United States HHS Substance Abuse and Mental Health Services Administration (SAMHSA)
(<http://www.samhsa.gov/>)

United States Interagency Council on Homelessness (www.usich.gov)

United States Department of Housing and Urban Development (HUD) (www.hud.gov)

United States Department of Veterans Affairs Veteran Homelessness Info
(<http://www1.va.gov/homeless>)

United States HUD Homelessness Resource Center (www.hudhre.info)

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Richmond, VA: July 2010.

Appendix C: Glossary of Terms

Chronically Homeless: The U.S. Department of Housing and Urban Development defines a person who is “chronically homeless” as an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, or has experienced at least four episodes of homelessness in the past three years. In order to be considered chronically homeless, a person must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency homeless shelter. A disabling condition is defined as a diagnosable substance abuse disorder, serious mental illness, or developmental disability, including the co-occurrence of two or more of these conditions. A disabling condition limits an individual’s ability to work or perform one or more activities of daily living. The HEARTH Act (federal legislation reauthorizing the McKinney-Vento Act) expands the definition of chronic homelessness to include families. This expanded definition of chronic homelessness will take effect in 2011.

Continuum of Care (CoC): Agencies that wish to apply for the federal McKinney-Vento Homeless Assistance Grants through the U.S. Department of Housing and Urban Development must organize themselves into local, regional, or state Continuums of Care to create a collaborative application.

CSB: According to the Virginia Association of Community Services Boards, forty community services boards or behavioral health authorities across the Commonwealth exist to ensure the delivery of community-based mental health, intellectual disability, and substance abuse disorder services to citizens with those disabilities.

DBHDS: Virginia Department of Behavioral Health and Developmental Services

DHCD: Virginia Department of Housing and Community Development

DMAS: Virginia Department of Medical Assistance Services

DSS: Virginia Department of Social Services

HHS: United States Department of Health and Human Services

HUD: United States Department of Housing and Urban Development

HUD-VASH: HUD-Veterans Affairs Supportive Housing program which provides rental assistance in the form of Section 8 housing choice vouchers for homeless veterans with case management and clinical services provided by the Veterans Affairs at its medical centers and in the community.

Housing First: A service delivery philosophy that says that people first need housing and then they need wrap around services to assist them in maintaining this housing.

Point in Time Count: Continuums of Care are required to conduct a biennial count (in January of each odd-numbered year) of the number of people experiencing homelessness at that point in time. Many communities conduct these counts annually.

SAMHSA: Substance Abuse and Mental Health Services Administration

USDA: United States Department of Agriculture

VA: United States Department of Veterans Affairs

VHDA: Virginia Housing Development Authority

