

Revised May 16, 2007

**GUIDING PRINCIPLES FOR THE REDESIGN OF
THE OFFICE OF MENTAL HEALTH HOUSING AND COMMUNITY SUPPORT
POLICIES**

Introduction: Safe, decent and affordable housing is a cornerstone of recovery from mental illness, as well as a mainstay of “the American Dream.” Stable access to good housing is a fundamental problem for many people with mental illness because of their poverty, the limited supply of very-low-income housing, the rising cost of rental market housing and discrimination. Given this context any approach to reforming housing for people with a mental illness must stress:

- expansion of low income housing in general
- flexible supports that do not condition housing on services
- expansion of specialty “supported housing” developed for people with a mental illness

Additionally, to reduce stigma, assuage “community resistance” and provide opportunities for recovery and rehabilitation, housing in normal/mixed neighborhoods and settings is preferable.

Unmet Needs: The unmet need for decent, safe and affordable housing--often with supports--is very substantial for people with mental illness. As a consequence of poor access to community housing, inadequate levels of mental health housing, and clinical programs that do not support people in getting/keeping housing successfully, many people with a mental illness are poorly housed or institutionalized. Thus, many people with a mental illness are “stuck” in:

- homelessness and the shelter system
- institutional settings (nursing homes, state psychiatric centers)
- family-supported housing that cannot be sustained (e.g., with aging parents)
- staffed residential programs (instead of a home)
- adult homes.

Reform must balance improved access to housing for all of these individuals with the need to improve “old” models of residential care, to move toward local systems of care that can arrange, provide, and support people in housing that is appropriate to their needs and preferences at any level of recovery.

Current Services: The New York State Office of Mental Health funds and oversees a large array of housing resources and residential rehabilitation programs. These resources include:

Adult Programs

| | | |
|---|--------|--------------------|
| Congregate Treatment (Group Homes) | 5,071 | units in 348 sites |
| Residential Care Centers for Adults (Treatment and Support) | 802 | units in 7 sites |
| Licensed Apartments | 4,133 | units |
| CR-SROs | 1,720 | units in 35 sites |
| Supported (uncertified) SROs | 2,453 | units in 65 sites |
| Supported Housing | 11,135 | units |
| Family Care | 2,413 | units |

Children's Programs

| | | |
|------------------------------------|-----|-------------------|
| Congregate Treatment (Group Homes) | 272 | units in 38 sites |
| Family Based Treatment | 490 | units |

27,285 of these units are operated by not-for-profit agencies and 1,204 are State operated.

In addition, 8,843 units are in development including 1,825 units of supported housing, 6,738 SRO units and 280 children's units.

These are valuable and also expensive resources that are assets for the local mental health systems throughout the State. Many of these units were developed using approaches put in place in the 1980s and early 1990s, which emphasized a "residential treatment" strategy with services and supports provided in and sometimes as a condition of housing.

The New York State community-based mental health system has expanded dramatically during this time. Treatment, rehabilitation and pharmacological interventions have made great strides forward and the consumer empowerment movement has taken hold. Recovery is truly possible with the proper access to these resources.

Guiding Principles: It is time, then, to revisit the structures that govern the mental health housing assets in New York. Additional flexibility is needed for this housing to be responsive to individual recipient wishes and needs, system goals and to work effectively as a tool in the creation of local systems of care that reduce institutionalization, homelessness, people stuck in acute care settings, and waste. To achieve this it is appropriate to outline guiding principles which can be used as a compass to focus these restructuring efforts. These principles include the following:

- Housing is a basic need and necessary for recovery. Most people want permanent, integrated housing that is not bundled with support services (housing as housing).
- Within an accountable system of care there is also a finite need for staffed specialty housing and time-limited residential treatment programs.
- The primary goal of housing reform will focus on the individual and emphasize expanding access to supported housing. Person-centered principles of recovery will guide the work.
- On the community systems level, the local mental health housing resources will be viewed as an asset to expand access to supported housing and to facilitate broader reforms (i.e., accountability, recovery focus).
- As restructuring progresses recipient satisfaction and recovery outcomes will be monitored.
- The new resource commitments in the 2007-08 budget will be used to facilitate restructuring.
- OMH will partner with affordable housing agencies to develop integrated, permanent housing.

OMH will work with stakeholders (local government, consumers, family advocates, providers) to incorporate flexibility into housing funding, regulation and oversight to introduce the above stated principles into OMH funded housing.

Action Implications:

- Continue development of additional housing units:
 - in/via mainstream housing programs
 - via OMH resources
- Emphasize supported housing models and integrated mixed settings.
- Explore conversion of staffed housing programs to:
 - neighborhood-based supported housing
 - more specialized staffed housing
- Blend new OMH housing resources with existing OMH housing/residential programs to achieve reform.
- Balance these development goals with meeting needs of identified populations.
- Increase the supply/focus on treatment/support programs that help individuals with a mental illness choose, get and keep housing.

We welcome comments and feedback on these principles and look forward to working with all stakeholders in this ambitious and timely effort. Please send any feedback or suggestions to:

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