
The Housing First Initiative (HFI) serves people who experience chronic, long-term homelessness in Cuyahoga County, Ohio, where over 5,600 people live in homelessness each year. These individuals and families, 17 percent of whom are military veterans, have cycled in and out of homelessness for years and have numerous challenges such as severe physical and mental issues and addiction.

HFI brings together housing and human services providers, advocates for the homeless, public sector systems and the philanthropic community, drawing on local and national expertise. Using Section 4 resources, Enterprise Community Partners leads, coordinates and evaluates the initiative by assembling financial resources, cultivating support from local leaders and providing technical consultation and capacity building assistance.

Housing First has built or rehabilitated nearly 500 apartments for people with histories of long-term homelessness and disabilities. The results are impressive, with most residents remaining housed and only 2 percent returning to homelessness. In addition to housing stability, HFI has helped residents achieve a 15 percent increase in employment rates and a 36 percent increase in average incomes, with half of residents participating in volunteer, educational or employment activities.

One of the keys to HFI’s success is the strong partnership with FrontLine Service, formerly Mental Health Services, Inc. FrontLine Service provides mental health and supportive services for more than 15,000 adults and children each year and operates the most comprehensive continuum of care for homeless people in Ohio. Frontline’s homeless assistance programs provide assertive outreach, homeless prevention and rapid rehousing, emergency shelter, residential programming, case management, psychiatric services and alcohol and other drug programming. At its North Point Transitional Housing facility, FrontLine provides job training and permanent housing placement services to 160 residents.

Enterprise is a leading advocate for the Section 4 Capacity Building for Affordable Housing and Community Development program. Over the last 20 years, Enterprise has distributed over $82 million to more than 1,200 community development organizations throughout the country. Section 4 strengthens the nation’s lower-income urban and rural communities by bolstering local nonprofit community developers.

Since Congress authorized the program in 1993, Section 4 has been the sole HUD program specifically designed for nonprofit capacity building. Section 4 is an important, unique and efficient program that leverages significant private capital using minimal federal dollars. This program creates jobs, supports small businesses, builds housing and strengthens communities.

Capacity building develops core skills that strengthen the ability of organizations to implement HUD programs, raise capital for community development and affordable housing projects, coordinate on cross-programmatic, place-based approaches and facilitate knowledge sharing. Capacity building remains a key part of HUD’s Strategic Plan for FY2010-2015. Specifically, Subgoal 4E reads: Build the capacity of local, state, and regional public and private organizations.

**Spotlight on Section 4 Grantee: Housing First and FrontLine Service**

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Local challenge

FrontLine has been successful at obtaining funding to continue to provide services to HFI, but the future is uncertain. The HUD Continuum of Care program, the major source of funding, has very few dollars available for new projects. Yet, at the same time, the Affordable Care Act creates possible opportunities to fund services in Housing First sites through Medicaid. There is considerable emphasis in the Affordable Care Act on the provision of integrated primary and behavioral health care including the development of “health homes.” With or without expansion of Medicaid eligibility, health homes offer greater flexibility in services eligible for reimbursement and incentivized rates to service providers.

Meeting the health home requirements as delineated by the Centers for Medicaid and Medicare Services and the Ohio Department of Mental Health would require significant shifts in care models and much greater capacity. The benefits, though, could be greater health and stability for Housing First residents and an ability to produce more units by making greater use of Medicaid reimbursement.

How Section 4 funds enhanced capacity of organization

Through this work, FrontLine staff has gained greater understanding of the Affordable Care Act resulting in participation in advocacy efforts at the state level to ensure that the needs of the most vulnerable citizens remain a priority. Within the housing community, this project is advancing the goals of HFI and the homeless continuum of care. The development and implementation of a medical home model that is replicable would enhance housing providers’ capacity to meet the behavioral and primary health care needs of all clients residing in permanent housing.

Already, Section 4 funding has resulted in significant capacity improvements.

• Created an economic model that will allow supportive housing and homelessness service providers to receive greater reimbursement for their services.
• Purchased an Electronic Medical Record to integrate and improve quality of care for formerly chronic homeless persons.
• Strengthened partnership with Care Alliance; without a strong primary care provider, FrontLine would not be able to meet health home health indicators and outcomes.
• Provided staff trainings on care management, resulting in Housing First residents being better able to manage their chronic and serious health conditions.

How Section 4 funds were used

Enterprise recognized the potential of the changes in health care under the Affordable Care Act and solicited innovative proposals connecting health care to housing. FrontLine Service responded to this request for proposals and was awarded $48,000 to finalize the development of a medical home model to integrate primary health and behavioral health care services for formerly homeless persons being served by HFI in Cuyahoga County, Ohio. These resources have been used to engage the National Council for Community Behavioral Healthcare—national experts in integrated care—to undertake the following:

• Assess readiness and capacity to undertake health home implementation.
• Design a work plan for health home implementation.
• Create organizational policies and procedure for health home implementation.

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