

DSHS/BHSIA efforts to improve employment & housing outcomes for individuals with behavioral health issues

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Presentation and Panelist Overview

- **Overview of DSHS/BHSIA efforts to improve employment & housing outcomes for individuals with behavioral health issues**
 - Melodie Pazolt, Department of Social and Health Services
- **Voices from the Field in Washington**
 - Kate Baber, Washington Low Income Housing Alliance
 - Nicole Macri, Downtown Emergency Service Center
- **National efforts on financing and implementing supportive housing**
 - Carol Wilkins
- **National efforts on financing and implementing supported employment and Washington Pilots**
 - Sandy Reese, Dartmouth Psychiatric Research Center

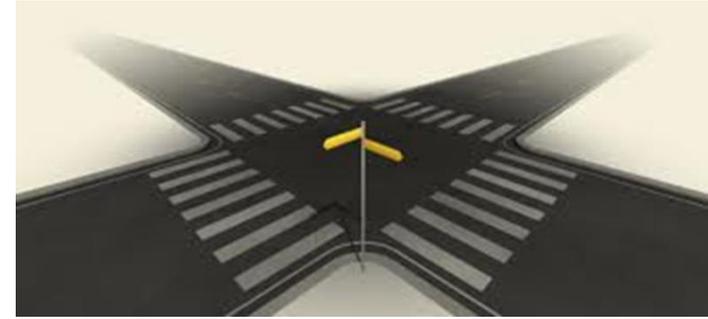


Building on Opportunities

- Legislative direction to improve client outcomes including employment and housing status – SB5732- HB1519
- National attention and assistance from Policy Academies
 - Supportive Housing White Paper
 - Supported Employment strategic planning
- Recognized as potential promising interventions within the Healthier Washington Initiative (SHCIP/CMMI SIM grant)
- Supportive Housing and Supported Employment Medicaid coverage authorized in SB 6312



The Intersection between Housing & Employment



SAMHSA's goal is a high-quality, self-directed, satisfying life integrated in a community for all people in America. This includes:

A Healthy Life

A Home

A Purpose

A Community



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Why improve Employment outcomes?

- Legislative direction to improve client outcomes – SB5732- HB1519
- 2/3 of people with serious mental illness want to work
- Supported Employment (IPS) is a research based practice (SAMHSA has identified it as an EBP)
- Employment services can save the state money – fewer health care services
- Olmstead Decision mandates services must enable individuals to fully integrate into the community



Unemployment is unhealthy!

Side Effects of Unemployment in the General Population

- Increased substance abuse
- Increased physical problems
- Increased psychiatric disorders
- Reduced self-esteem
- Loss of social contacts
- Alienation and apathy

(Warr, 1987)



Employment Rate through UI data for adults in outpatient mental health services WA State

Individuals	2013:Q1	2013:Q2	2013:Q3	2013:Q4	2014:Q1
Total with SSNs	50,387	50,834	48,812	47,962	51,165
Employed Clients	4,514	5,183	5,184	4,960	5,142
% Emp	9%	10%	11%	10%	10%
WAGES					
Monthly Wages	\$754	\$764	\$766	\$782	\$788
Wage Rate	\$12.10	\$11.97	\$11.80	\$12.15	\$11.99
HOURS					
Weekly Hours	14	15	15	15	15



Changing Our Belief System: One Turn of the Kaleidoscope



- **From:** Work is too stressful. People can only hope for “maintenance” and “stabilization.”

- **To:** Work helps with **recovery!** People can and do work!

“Recovery-oriented practice . . . reverses the conventional wisdom . . . that people become less symptomatic first before trying to return to work . . . work reduces symptoms while sustained unemployment and inactivity do not.”

(Davidson, 2010)



Opportunities in WA State

- SAMHSA sponsored Olmstead Policy Academy
 - Strategic planning to increase employment outcomes:
 - Increasing the knowledge/skills of the behavioral health workforce
 - Pursue financing for Supported Employment
 - Educate the community – individuals, families, business
- Submitted Ticket to Work Employment Network application to generate new revenue
- 2SSB 6312 – Behavioral Health Integration
 - BHO's may provide Supported Employment



Opportunities in WA State

- Participation in DOL/ODEP Employment First Initiative
 - Technical Assistance to develop a multi-system strategic plan (DDA, HCS, DVR)
- Coordination with the Governor's Task Force on Employment for people w/Disabilities
- SAMHSA Grant – Becoming Employed Starts Today (BEST) awarded 9/14
 - 2 communities will implement SE

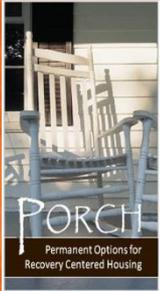


DSHS/BHSIA efforts to address homelessness

- Active in seeking grant funding to increase efforts (PORCH, BRIDGES etc.)
- Core elements that are common through all of our grant funded efforts
 - Partnership with Housing Systems (HUD/Dept. of Commerce)
 - Utilize individuals with lived experience to engage individuals who are homeless
 - Address the whole health needs of the individual while addressing Maslow's hierarchy of needs



DSHS/BHSIA efforts to address homelessness



- Chronic Homeless Policy Academy
- Permanent Options for Recovery Centered Housing (PORCH) – **served 200**
- Projects for Assistance in Transition from Homelessness (PATH)

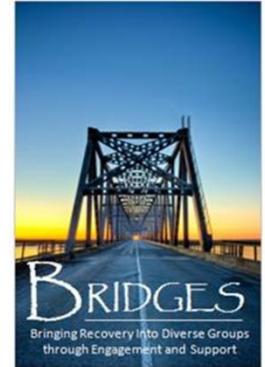


- **served 5136 through outreach efforts**
- Offender Re-Entry Community Support Program (ORCSP)
- Oxford – **239 Houses**



DSHS/BHSIA's New Opportunities

- Bringing Recovery Into Diverse Groups through Engagement and Support (BRIDGES)
 - outreach to **600 individuals**
- BRIDGES Supplemental Grant
 - outreach to **200 individuals**
- Housing & Recovery through Peer Services (HARPS) – **1000 to receive subsidies – 200 to receive services**

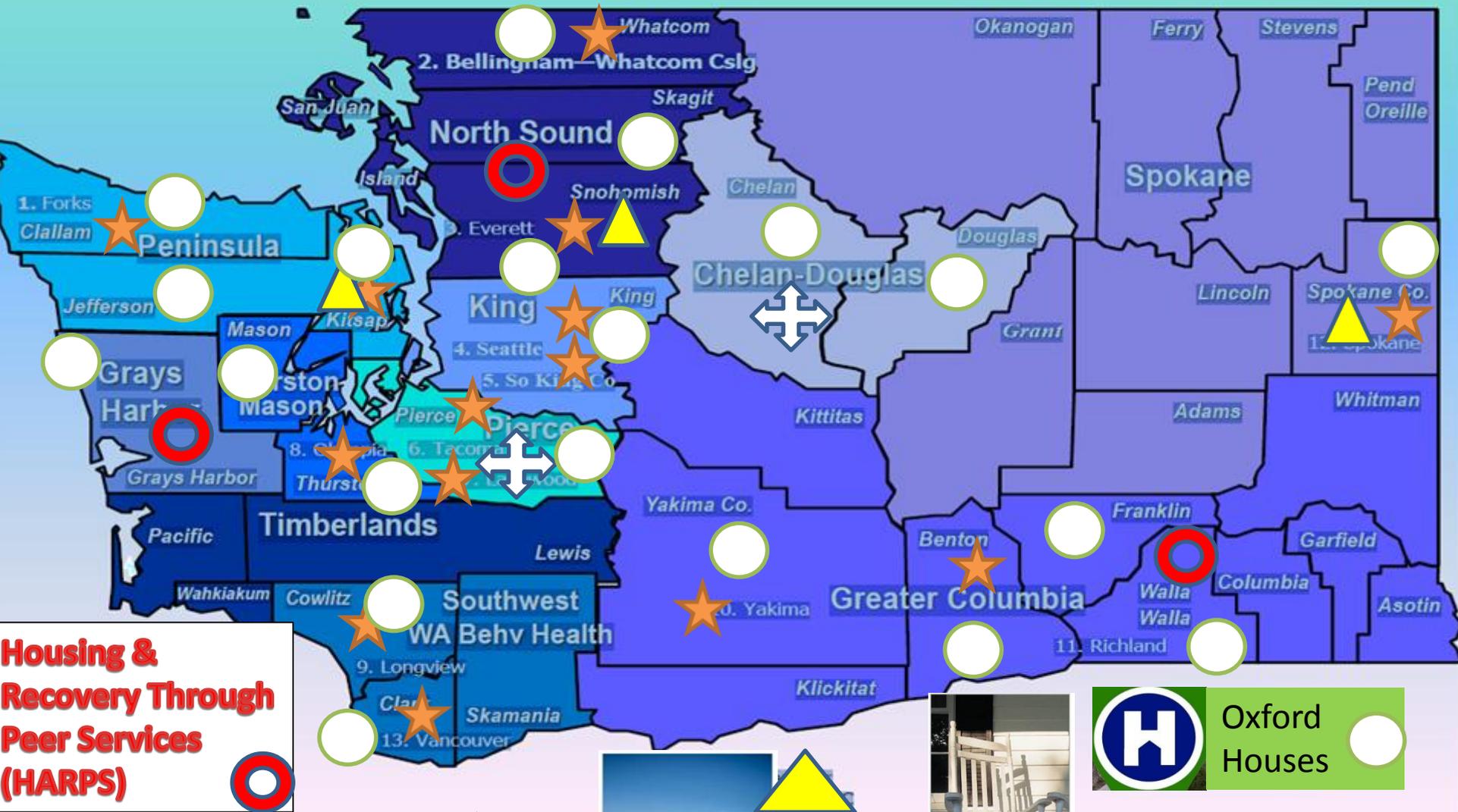


Permanent Options for Recovery-Centered Housing (PORCH)



- 2 sites within WA state (Pierce County & Chelan/Douglas Counties)
- Utilize Peer Support to provide Evidence-Based Permanent Supportive Housing
- Utilize Illness Management & Recovery to measure recovery
- Partnerships with Housing System (Dept. of Commerce provided \$300,000 in TBRA in C/D Counties)

Washington State PATH Providers by Location 3-8-13



Housing & Recovery Through Peer Services (HARPS)



Oxford Houses

PATH Projects for Assistance in Transition from Homelessness

BRIDGES
Bringing Recovery into Diverse Groups through Engagement and Support

Department of Social & Community Services

PORCH
Permanent Options for Recovery Centered Housing



Photovoice Presentation



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