



RHIP Social Determinants of Health Housing Workgroup

Agenda: November 18, 2016 from 10:30 am-11:30 am

Deschutes County Health Dept. (Stan Owen Room) – 2577 NE Courtney Drive in Bend

- 10:30-10:40** **Introductions and updates - All**
- 10:40-10:50** **Coordination with other affordable housing efforts**
- **Review “Coordination of affordable housing efforts in Central Oregon v5” – proposed responsibilities among SDH-Housing, HLC, COIC, Bend 2030, City of Bend, and City of Redmond**
- 10:50-11:15** **Housing Work Plan/Subcommittee reports**
- **Data collection/service study**
 - **Stories and pictures to share with the legislature**
 - **Implications for scaled back SDH-Housing workgroup (proposed modifications and additions to target metrics, timeline, etc.)**
- 11:15-11:25** **Potential grant proposals**
- **Meyer Memorial Trust**
 - **COHC**
 - **Other?**
- 11:25-11:30** **Action Items - All**
- **Who is missing from around the table?**
 - **Developing the agenda for the December 16 meeting**
 - **Next steps**
- Next Meeting:** **Friday, December 16 from 10:30 am – 11:30 am (in Redmond)**

Coordination of affordable housing efforts in Central Oregon DRAFT v5

The lack of safe and affordable housing in Central Oregon has become more than just a question of access and availability – it has become an economic development barrier, and in many instances, a public health crisis. The lack of workforce housing (for low to moderate income families) is limiting the ability of people to come to the region and accept jobs they have been offered – or requiring them to live in outlying communities and commute to Bend or Redmond – and is also becoming a barrier for businesses seeking to relocate to or expand in Central Oregon. Low-income families in all three counties struggle to find affordable housing with rental vacancies often hovering around 1%. Homelessness persists and is becoming more widespread, while in many instances, it remains relatively invisible (i.e. youth and seniors are typically less public with their situation). Given all we know about the importance of housing to health, the current housing environment in this region is widening and exacerbating inequities and health disparities that impact people with fewer financial and support resources. This is particularly true for individuals and families often trapped in a cycle of crisis and housing instability due to growing poverty, trauma, violence, mental illness, addiction or other chronic health conditions.

The housing continuum can be thought of as stretching from homeless (literally a complete lack of shelter and/or without sufficient resources to obtain adequate shelter) to homeownership. There is a strong correlation between income/assets and the likelihood of where an individual and/or household appears along the continuum. There are several key areas of the housing continuum (although there is also some overlap): 1) Emergency shelter, 2) Supportive housing, 3) Rental housing, and 4) Homeownership:

- **Emergency Shelter** - any facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for the homeless in general or for specific populations of the homeless. May provide additional services depending upon length of stay and capacity to deliver assistance.
- **Supportive housing** – is a combination of often deeply subsidized housing and “wrap-around” services to accommodate people with special needs or who have been recently homeless or are at risk of homelessness. This form of housing can be both transitional and permanent and is meant to bridge the gap from homelessness to more stable/permanent housing by providing low/no-barrier housing and offering structure, supervision, support (e.g. for addictions and mental health), life skills, and in some cases, education and training.
- **Rental housing** - is available to many households on the open market, but additional support is needed to make it available and affordable across multiple income levels. Market rent is often too expensive for many residents so additional support from the government or other sources, or policies that allow housing to be built at a lower cost, is needed to maintain and create rental housing that is affordable to the local workforce.
- **Homeownership** - can provide families with increased housing stability and financial security, but additional support is often needed to help low and moderate income residents move into this category. Again, this support can take the form of direct subsidies or policies that allow housing to be built at a lower cost with the savings passed on to the purchaser.

We believe these different housing elements are linked (i.e. building a house for affordable homeownership may allow someone living in a rental unit to purchase it, thereby freeing up space in the rental market for someone living in supportive housing to make the step up the housing continuum. Similarly, building an affordable rental unit may allow someone living in a shelter to move out into more stable housing.

There are currently six groups that are working on some aspect of the affordable housing issue in Central Oregon:

Workgroup	Duration, Purpose/focus, Participants, Resources/capacity,
Collaborative Housing Workgroup (Bend 2030)	New group (launched summer 2016), focus on policies and tools for increasing workforce housing (80%-175% of AMI) in Bend, very strong private/public sector and building industry participation, relatively well funded and has hired consultants
Homeless Leadership Coalition (HLC)	Been in existence over 15 years, tri-county focus (although most participants are from Deschutes County), participants are providers of shelter and services for the homeless and those at-risk of homelessness, oversees the federal Continuum of Care grant and the Point in Time shelter count, extensive networking and information sharing resource, volunteer/no staff
COHC – Housing Workgroup	New group (launched spring 2016), focus is tri-county, goal is to explore policies and mobilize support/advocacy to increase the supply of affordable housing (homeless shelter up through workforce housing), sees housing through a health lens, volunteer/no staff
Central Oregon Intergovernmental Council (COIC)	This group will focus on tri-county workforce housing needs with emphasis on housing market research and best practice policies and regulations, sees housing through an economic development lens, comprised of local cities and counties, non-profits, and private developers, can play an advocacy role, would be able to bring staff/resources to the table
City of Bend Affordable Housing Committee	Initially formed to help oversee the process of allocating federal CDBG (Community Development Block Grant) funds, has expanded to oversee the allocation of the City’s Affordable Housing Fee funds
City of Redmond Housing and Community Development Committee	Initially formed to help oversee the process of allocating federal CDBG (Community Development Block Grant) funds, has expanded role to include education of elected officials and the broader community

Representatives of the first four of these workgroups met on October 18 to explore whether there were ways to collaborate and share resources while minimizing duplication. We are optimistic about this joint approach! Some of the efforts focus on different portions of the housing continuum and some of the efforts are tri-county while others focus solely on Bend. But, all felt that the ideas around policies and regulations that might be suggested in Bend could also be presented as options to other Central Oregon communities, and vice versa, plus we recognized the value in working together on advocacy and outreach/engagement.

Next steps:

- Spell out proposed roles and responsibilities and get buy-in from the respective workgroups
 - ✚ Allow the Collaborative Housing Workgroup and COIC to take the lead on workforce housing (research, policies, etc.). The former can continue to focus on Bend while COIC can share findings and possible solutions with the other Central Oregon communities and bring potential ideas from surrounding communities back to the Collaborative Housing Workgroup.
 - ✚ Allow HLC and COHC-Housing Workgroup to focus their attention on the far end of the housing continuum (i.e. homeless, emergency shelter, Housing First, very-low and low-income households) with respect to policy and funding opportunities
 - ✚ HLC, COHC-Housing Workgroup and COIC would work to coordinate advocacy and outreach where needed. This can include joint efforts to collect both quantitative data and qualitative information (for stories) and get volunteers willing to testify and write letters
- Ask the Collaborative Housing Workgroup to consider broadening the scope of research to better understand who lives in our cities and what types of housing they will need (consider creating a document similar to one put out by Metro that puts occupations and salaries to the types of housing that would be affordable to them)
- Bring data reps from all work groups together (including 211) to share resources and ideas
- Bring outreach/awareness reps from all groups together to develop stories to help shape public opinion
- Ask COHC-Housing Workgroup if willing to provide advocacy for workforce housing options
- Reach out to the respective affordable housing committees at the City of Bend and City of Redmond to make them aware of these new resources
- Explore potential joint grant opportunities (Meyer Memorial Trust, RHIR, etc.)

2016-2019 Central Oregon Regional Health Improvement Plan Work Plan DRAFT v8

RHIP Priority: Housing

The lack of safe and affordable housing in Central Oregon has become more than just a question of access and availability – it has become a public health crisis. Low-income families in all three counties struggle to find affordable housing. Homelessness persists and is becoming more widespread, while in many instances, it remains relatively invisible. Given all we know about the importance of housing to health, the current housing environment in this region is widening and exacerbating inequities and health disparities that impact people with fewer financial and support resources. This is particularly true for individuals and families trapped in a cycle of crisis and housing instability due to growing poverty, trauma, violence, mental illness, addiction or other chronic health conditions.

The Social Determinants of Health - Housing Workgroup (“Housing Workgroup”) is comprised of individuals, organizations and agencies across many areas – affordable housing, homelessness, health care, social services, education and transportation - who are focused on promoting the vulnerable and at-risk end of the housing spectrum: those who are homeless and those in need of very low income, low income and workforce housing. The Housing Workgroup acknowledges that we must bridge housing solutions with the health system. As such, this group will work to address issues of housing using a health lens, beginning with laying a strong foundation of developing agreed upon definitions around key terms (i.e. homelessness, workforce housing, housing stressed, etc.) and identifying the data needs and resources to develop meaningful analysis. These data will then be used to focus on our current priority areas and goals which include:

- 1. Organizational Capacity** – To develop shared definitions and conduct a data needs assessment
- 2. Policy** - To be an effective resource to local municipalities on developing policies and programs that increase affordable housing options and supports
- 3. Advocacy** - To help support projects and pass specific legislation and ordinances that impact local and state housing policies and counter a NIMBY perspective
- 4. Outreach and Awareness** - To gather and analyze data and share actionable information on homelessness and affordable housing
- 5. New Initiatives** - To support new cross sector initiatives with a focus on non-traditional, disruptive innovation

Goal 1: Organizational Capacity – To develop shared definitions and conduct a data needs assessment

Health Indicator(s) addressed	RHIP Strategy	Activity addressing strategy	Timeline
NA or TBD	<ul style="list-style-type: none"> • Develop shared definitions around key terms (i.e. homelessness, housing stressed, etc.) • Conduct a data inventory to determine who is gathering/tracking what data and what is missing 	<ul style="list-style-type: none"> • Contact all key stakeholders to determine what definitions and parameters they are using in working with different populations • Conduct data inventory with breakout between <18 and >18 wherever possible • Identify gaps or new data that we should try to gather as a region 	<p>August-end of October</p> <p>Ongoing, initial data inventory completed by end of December</p> <p>To be done concurrent with data inventory</p>
Parties Responsible	Target Metric	Implementation Progress and Status	
Housing Workgroup members (see to the right)	TBD/NA (may include a shared definition of various housing-related terms)	<p>Still in the early stages on both the shared definitions and data inventory – we see these actions as predominantly one-time efforts to form a foundation upon which the other Housing goals will proceed.</p> <p>Housing Workgroup members working in this Goal area include Kristin Chatfield (OHSU), Dave Huntley, Gwenn Wysling (Bethlehem Inn), Elaine Knobbs-Seasholtz (Mosaic Medical), and Molly Taroli (PacificSource)</p> <p>Potential additional people to add include: Alan Burke (SCMC) and the new HMIS person at NeighborImpact</p>	

Goal 2: Policy - To be an effective resource to local municipalities on developing policies and programs that increase affordable housing options and supports

Health Indicator(s) addressed	RHIP Strategy	Activity addressing strategy	Timeline
NA or TBD	<ul style="list-style-type: none"> • Research existing housing-related policies (e.g. land use, development code, etc.) both around Central Oregon and outside the region • Research potential funding strategies and options (including Medicaid) for affordable housing and support services • Build effective networks through increased collaboration • Develop relationships with key stakeholders (i.e. planners, elected officials) 	<ul style="list-style-type: none"> • Develop research “team” and begin identifying housing-related policies and funding options for the region • Identify key contacts in local city and county municipalities and set up meetings with them 	<p>Ongoing – first meeting by September</p> <p>Ongoing – initial contact and/or introduction made by October</p>
Parties Responsible	Target Metric	Implementation Progress and Status	
Research Team (see to the right), local municipalities (cities and counties)	TBD – will likely be housing related (i.e. housing stock, support services provided, affordability, etc.)	<p>Research Team members include Bruce Abernethy (Bend-La Pine Schools), Molly Taroli (PacificSource), Lynne McConnell (NeighborImpact), Geoff Wall (Housing Works), Larry Kogovsek, Rachael Marble (Deschutes County)</p> <p>COVO will take the lead on identifying municipal contacts</p> <p>There is a desire to figure out how (and who) to include Warm Springs in this effort</p>	

Goal 3: Advocacy - To help support projects and pass specific legislation and ordinances that impact local and state housing policies and counter a NIMBY perspective

Health Indicator(s) addressed	RHIP Strategy	Activity addressing strategy	Timeline
NA or TBD	<ul style="list-style-type: none"> • Mobilize community-wide responses on housing-related topics • Connect with various faith-based social justice committees 	<ul style="list-style-type: none"> • Submit letters of support for policies and projects (or opposition as applicable) • Testify at hearings (locally and in Salem) • Identify and utilize effective subject matter experts to help shape opinions • Provide housing advocacy training to the community on 	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>First training will take place in the Fall</p>
Parties Responsible	Target Metric	Implementation Progress and Status	
Housing Workgroup members (see to the right), HLC, other affordable housing groups	TBD	<p>Subcommittee comprised of Bruce Abernethy (Bend-La Pine Schools), Don Senecal (HLC), and Larry Kogovsek, with need to approach Cody Standiford (COVO), Deedee Johnson (Bend Area Habitat for Humanity) and a Bethlehem Inn rep (TBD).</p> <p>Early stages on all activities and still figuring out what this will look like (i.e. who decides when to weigh in and what exactly to say? task of subcommittee? What is the tie to Goal 2 - Policy)?</p>	

Goal 4: Outreach and Awareness - To gather and analyze data and share actionable information on homelessness and affordable housing

Health Indicator(s) addressed	RHIP Strategy	Activity addressing strategy	Timeline
NA or TBD	<ul style="list-style-type: none"> • Devise an outreach strategy to build awareness about housing and health, educate the community, and develop relationships (i.e. create the “stories” that help shape opinions) • Formalize data collection and analysis • Develop effective channels for sharing information 	<ul style="list-style-type: none"> • Develop data repository or system for collecting current data on affordable housing and homelessness • Develop materials (e.g. handouts, powerpoint) for presentations in schools and the community • Work to educate builders on implementing health components into design and construction • Develop relationships with local media and submit press releases/media advisories as warranted • Develop social media campaign as funding allows 	<p>Established by December</p> <p>Available by end of September</p> <p>Materials developed by October and presentations starting November</p> <p>Contacts/relationships made by end of September</p> <p>Plan developed by end of September (funding?)</p>
Parties Responsible	Target Metric	Implementation Progress and Status	
Housing Workgroup members (see to the right)	Major depressive disorder (TBD) Link impacts on young children to other SDH focus area (Early Learning)	<p>Already have the data repository/system for tracking homeless Early stages on affordable housing (much information will be gathered through the data inventory and by the Research Team).</p> <p>Outreach and Awareness Committee members include: Judy Watts (COIC), Holly Wenzell (Crook County Health Dept.), and Dave Huntley.</p>	

Goal 5: New Initiatives - To support new cross sector initiatives with a focus on non-traditional, disruptive innovation

Health Indicator(s) addressed	RHIP Strategy	Activity addressing strategy	Timeline
NA or TBD	<ul style="list-style-type: none"> Support new cross sector initiatives (i.e. housing and health) with a focus on non-traditional, disruptive innovation 	<ul style="list-style-type: none"> Engage additional stakeholders in the conversation Resource development for projects and programs (e.g. grantwriting, fundraising) Support initiatives from other plans (10 Year Plan to End Homelessness, City of Bend Comprehensive Plan, Bend Livability Project, etc.) 	<p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
Parties Responsible	Target Metric	Implementation Progress and Status	
Health orgs (PacificSource, St Charles et al)	TBD	<p>Early stages, need to determine what resource development looks like (how can this workgroup actually add value?)</p> <p>Preliminary members of this committee include: Elaine Knobbs-Seasholtz (Mosaic Medical), Rob Roy/Rima Wilson (Pacific Crest Affordable Housing), Geoff Wall (Housing Works). Others to ask include: Michael Hinton (NeighborImpact) and Shimiko Montgomery (First United Methodist Church)</p>	

RHIP Workgroup Updates: October

Behavioral Health: Identification & Awareness (Support: Rebeckah Berry & Steve Strang)

- This group meets the fourth Tuesday of every month from 8:15-9:15am and currently has 20 members.
- In October, the group discussed the RHIP health indicator of how they would begin to develop a baseline of successful referral and engagement in specialty care from primary care. The group will begin by working with the four primary care clinic settings throughout the region that have agreed to pilot this effort. In November, the group will be reviewing more RHIP proposals as well as continuing their involvement in the MindYourMind regional campaign.

Behavioral Health: Substance Use and Chronic Pain (Support: Rebeckah Berry & Rick Treleven)

- This group meets the third Wednesday of every month from 4-5pm and currently has 23 members.
- In October the group edited and finalized a clear and standardized pathways algorithm for patients who display substance use risk within primary care settings. The group discussed additional accompanying documents that will be shared and developed along with this algorithm. A sub-group of organizations that agreed to pilot expedited referrals to treatment met for the first time this month and worked out basic action steps to begin their efforts.

Cardiovascular Disease—Clinical (Support: Rebeckah Berry)

- This group meets the fourth Tuesday of every month from 4-5pm and currently has 11 members.
- In October this group finalized patient education documents around proper blood pressure procedures and things that raise blood pressure. These documents are being shared broadly with clinics, and the group is working to translate them into Spanish. The group also discussed the e-referral pilot for the Tobacco Quit Line, (target date of 6/30/17) and provided further input on a blood pressure control education RHIP proposal.

Diabetes—Clinical (Support: Rebeckah Berry & Megan Bielemeier)

- This group meets the second Thursday of every month from 9-10am and currently has 11 members.
- In October the group finalized a pathway/algorithm for assertively addressing Pre-Diabetes within a primary care setting. Final edits have been made to this algorithm and steps to share this and additional supporting resources are being outlined for our region. The group is waiting to hear about the Grand Rounds presentation on Pre-Diabetes for Spring 2017. The group plans to roll out their educational information in alignment with Grand Rounds.

Cardiovascular Disease & Diabetes—Prevention (Support: MaCayla Arsenault & Channa Lindsay)

- This group meets the fourth Tuesday of every month from 3:30-5pm and currently has 25 members.
- In October, the workgroup went through a consensus workshop to agree on broad strategies addressing unhealthy diet and nutrition. They revisited the strategies they developed around increasing physical activity and determined they want to initially focus on promoting school based physical activity (P.A.) and education/awareness around active modes of transportation and existing programs. They also created a subcommittee to explore best ways to support increasing P.A. in schools. In the coming months the workgroup will be selecting and implementing specific strategies.

RHIP Workgroup Updates: October

Oral Health (Support: Donna Mills & Suzanne Browning)

- This group meets the third Tuesday of every month from 11-12pm and currently has 23 members.
- The workgroup reviewed the living workplan as a matter of course. This will be a recurring exercise to affirm direction and accurate reporting up to the Ops Council. A 'fishbone diagram' exercise was executed around the Clinical Goal of Improving Oral Health for Pre-Post Natal Women. This exercise will enable the workgroup to prioritize next action steps. The prioritization will happen over email in the month of November, as there will not be a meeting in November. Suzanne Browning is moving away due to her husband's health; she has stepped down as the workgroup lead. MaryAnn Wren has stepped up to lead the group with the group's endorsement.

Reproductive Health/Maternal Child Health (Support: Donna Mills & Muriel DeLaVergne-Brown)

- This group meets the second Tuesday of every month from 4-5pm and currently has 22 members.
- This group did not meet in October.

Social Determinants of Health

- This group meets the third Friday of every month from 10-11:30am and currently has 28 members in Kindergarten Readiness and 32 members in Housing.

Education & Health (Support: Donna Mills & Desiree Margo)

- In October the workgroup reviewed the living workplan as a matter of course. This will be a recurring exercise to affirm direction and accurate reporting up to the Ops Council. Courtney Snead with Let's Talk Diversity presented to the group as a matter of education. Ken Wilhelm from United Way presented on the TRACE's steering committee's progress. Kat Mastrangelo shared a draft version of a timeline for using data to instruct our next steps regarding which school catchment areas in which to focus first. The group will meet again in December.

Housing (Support: Bruce Abernathy & MaCayla Arsenault)

- In October, the workgroup discussed ways to coordinate their efforts with six other housing workgroups in Central Oregon. Representatives from four of the workgroups met to discuss ways to collaborate, share resources, and avoid duplication. The workgroup would also like to work with others to develop and capture stories to shape public opinion and share with the legislature. They want to broaden their research scope to identify demographics in each community by occupation to identify specific housing needs.