

TENNESSEE -- 2001 Real Choice Systems Change Grant

Identified Problems with the States' Long-Term Care System

- Existing housing options for persons with mental illness are too few, inadequate, and/or inappropriate.
- Many persons with mental illness are cared for in state hospitals because of a lack of adequate community services.
- There are increasing numbers of mentally ill persons in the criminal justice system. Recent statistics indicate that 20 percent of the people in the criminal justice system have a mental illness.
- Critical residential placements for a specific population of dually diagnosed consumers are not currently funded under the state's 1115 Waiver until multiple hospitalizations occur, which may provide incentives for more restrictive, costly hospitalizations.
- The state lacks an easily usable and accessible housing information resource database.
- Some state non-profits have difficulties implementing housing strategies due to varied funding sources; lack of knowledge and resources for obtaining timely information about accessing new funding streams and housing options; and complex application requirements.
- The Not In My Back Yard (NIMBY) syndrome hinders or blocks successful community innovations due to stigmatization of and discrimination against mentally ill persons.

Perceived Strengths

- The Tennessee Department of Mental Health and Developmental Disabilities (TDMHDD) created the Office of Housing Planning and Development (OHPD) to focus on the housing needs of persons with mental illness.
- TDMHDD, OHPD has created and facilitates the Creating Homes Initiative (CHI) Task Force that has been successful in expanding the number of permanent community housing options for persons with mental illness in four targeted areas of the state. To date, 1,774 permanent housing options for persons with mental illness have been created.
- TennCare Partners, the mental health component of the TennCare 1115 Medicaid waiver program, is a program for Medicaid-eligible, uninsured, and/or uninsurable persons or with serious and persistent mental illness.
- Extensive experience with a wide range of partners through the CHI. Some of the partners include: Fannie Mae, Homebuilders Associations, United Way, Mental Health Centers, Mental Health Social Service Agencies, National Alliance for the Mentally Ill (NAMI), Housing Authorities, statewide/regional planning councils, Habitat for Humanity, Department of Housing and Urban Development, Housing and Community Development, Association of Realtors, Office of Economic and Community Development, Inner City Development Corporation, local government, Foundations, Business Community, Tennessee Housing Development Agency, Tennessee Association of Mental Health

Organizations, TennCare Partners, Behavioral Health Organization, Faith-based Community, Tennessee Mental Health Consumers Association, Local Banks, Landlords, Supportive Living and Group Home Operators, Housing Counselors, Federal Home Loan Bank, Federal Reserve Bank, Mental Health Associations, Architects and Builders, and Other Interested Community Persons.

Primary Focus of Grant Activities

- Address the need for accessible and appropriate housing for persons with mental illness through strategic partnerships.
- Create comprehensive educational programs related to housing opportunities and use of housing options.
- Overcome community stigma.

Goals, Objectives, and Activities

Overall Goal. To increase access to appropriate, affordable, consumer-directed housing options for persons with serious and persistent mental illness.

Goal. Design and implement an effective, consumer-directed, and accessible housing resource system for persons with mental illness to increase the number of persons in quality, affordable housing.

Objectives/Activities

- Hire consumer community housing specialists in the four target cities (Nashville, Memphis, Chattanooga, and Jackson) to partner with existing community housing stakeholders in creating linkages, developing resources, and in community education and outreach efforts.
- Create a comprehensive Housing Resource Web Site to provide practical housing information and assist mental health consumers and providers in obtaining appropriate housing. Install computer hardware at community drop-in centers and other advocacy agencies to promote access to the Housing Resource Web Site.
- Hold an annual one-week “Housing Academy” for consumers, providers, agencies, local housing developers, and other stakeholders to provide specialized training on housing issues to increase housing placement options and knowledge.
- Conduct a longitudinal evaluation, based on surveys of 200 consumers over 3 years, to assess the changing housing and care needs of persons moving from institutional settings to the community.
- Establish a “Housing Hotline” for consumers, agency staff, and other community persons to access up-to-date housing information and guidance.

Goal. Reduce the stigma of mental illness statewide to provide a more welcoming neighborhood environment for persons with mental illness.

Objectives/Activities

- Implement a broad-based, prime-time television, mass media campaign to change community attitudes and misconceptions regarding community housing for persons with mental illness.
- Host a biannual “Mental Health Housing Solutions Summit” to bring together key stakeholders across the state to identify housing development priorities.

Key Activities and Products

- Hire consumer housing specialists and, through their relationship-building and outreach efforts, improve coordination among social service agencies and expand consumer involvement.
- Provide practical housing information to mental health consumers and providers through the Housing Resource Web Site, and supply computer hardware at drop-in centers to facilitate access to the web site.
- Influence community attitudes and misconceptions regarding community housing for persons with mental illness through a mass media campaign.
- Survey a sample of consumers regarding their knowledge of available housing options, their utilization of available resources (including the Housing Resource Web Site and the Housing Hotline), their service needs, and their housing preferences in order to develop consumer-directed and appropriate housing service options.

Consumer Partners and Consumer Involvement in Planning Activities

Consumer members of the local CHI Task Forces, the Tennessee Mental Health Consumers’ Association, and NAMI actively participated in approximately 24 community meetings conducted by the CHI to get input on the CHI and the grant.

Consumer Partners and Consumer Involvement in Implementation Activities

- Mental health consumers will be hired to partner with community housing specialists in the four target cities, thus ensuring that housing efforts involve, respect, and support the choices of people with disabilities.
- Key informant interviews and focus groups with consumers will be conducted and a cohort of 200 consumers with mental illnesses will be followed and surveyed over 3 years. Consumers will also be involved in training on available resources.
- The Project Oversight Committee includes 2 consumer representatives from each targeted community, representatives from the TN Mental Health Consumers’ Association, and NAMI, as well as other stakeholder groups.

Public Partners

- Tennessee Department of Mental Health and Developmental Disabilities.
- Office of Housing Planning and Development.
- TennCare Partners.
- Tennessee Housing Development Agency.
- Housing and Urban Development.
- City, Regional, and Statewide Planning Councils.
- Regional Mental Health Institutes and Community Mental Health Centers.
- Public Housing Authorities.
- County and City Commissioners.

Private Partners and Subcontractors

- Advertising Agency (TBD).
- AdvoCare (the major Behavioral Health Organization for TennCare Partners which oversees service utilization, including control of residential rehabilitation services).
- Dual Diagnosis Management.
- Tennessee Association of Mental Health Consumers.
- Community Mental Health Centers.
- National Alliance for the Mentally Ill.
- United Way.
- Fannie Mae.
- Federal Home Loan Bank.

Public and Private Partnership Development/Involvement in the Planning Phase

TDMHDD, OHPD spearheaded and facilitated a community- and consumer-based, grassroots task force, called the CHI Task Force, in four major Tennessee communities. To date, 24 task force meetings have been conducted in the targeted areas with input from a wide range of stakeholders. The CHI Task Force efforts formed the basis of Tennessee's Real Choice grant project and involved all of the public and private partners listed in previous sections. This grant application opportunity was discussed at all CHI Task Force meetings with feedback and direction given from the community and partners.

Public and Private Partnership Development/Involvement in Implementation

Partners involved in the planning and implementation of the CHI Task Force will be involved in similar capacities/roles during implementation.

Existing Partnerships That Will Be Utilized to Leverage or Support Project Activities

- TDMHDD/OHPD funds.
- THDA funds.
- HUD Section 8 vouchers under the Consolidated Plan (Con Plan), the Public Housing Agency Plan (PHA Plan), and the Continuum of Care Plan (Homeless Assistance), HOME dollars.
- CHI Community Not-For-Profit Leverage.
- Federal Home Loan Bank.
- Private foundations.

Oversight/Advisory Committee

The project will be implemented and supervised jointly by the Oversight Committee, which includes consumers, family members, mental health agencies, social service agencies, AdvoCare, the OHPD, and other stakeholders.

Formative Learning and Evaluation Activities

Quantitative and qualitative techniques will be used to assess programmatic and quality of life issues. Evaluation reports based on the results of the interviews and focus groups with consumers, key informants, and staff will be presented to the Oversight Committee on a quarterly basis.

Evidence of Enduring Change/Sustainability

- The educational campaign and outreach effort for consumers and providers regarding housing information and resources will close an important gap and emphasize the importance of housing for persons with mental illness in addition to treatment.
- Consortium and educational efforts actively engage consumers and provider groups in the development of long-range solutions, which will endure beyond the grant period.
- A targeted community education program will reduce community acceptance problems beyond the grant period.
- The Housing Resource Web Site will be maintained after the conclusion of the project.

Geographic Focus

Memphis, Jackson, Nashville, and Chattanooga.