



MILWAUKEE COUNTY AMERICAN RESCUE PLAN ACT ALLOCATION

Community Support Program Proposal

Trauma/Crisis Response

COMMUNITY SUPPORT CATEGORY

Please select the community support category that applies to this proposal:

- Household Assistance.** Proposals may include expenditures related to food programs; rent, mortgage, and utility aid; cash transfers; internet access programs; eviction prevention; unemployment benefits or cash assistance to unemployed workers; housing support: affordable housing; and housing support: services for unhoused people.
- Mental & Behavioral Health.** Proposals may include expenditures related to mental health services; substance abuse services; and other public health services.
- Other Social Determinants of Health.** Proposals may include expenditures related to job training assistance; small business economic assistance; aid to nonprofit organizations; aid to other impacted industries; healthy childhood environments: home visiting and services to foster youth or families involved in child welfare system; social determinants of health: community health workers or benefit navigators and community violence interventions; clean water; drinking water; and broadband.

PROJECT DESIGN

Provide an overview of how the community support project being proposed addresses an urgent community need brought on by the COVID-19 pandemic. Demonstrate how the project provides a feasible solution to the demonstrated need and is being coordinated with partners. Include any collaboration that will occur during the project. Explain how the proposal falls within Milwaukee County's scope of services. (500-word max response)

This project would provide \$2 million for the development of crisis beds in the community for those who are experiencing various forms of trauma or going through a mental health crisis. This project would be a partnership between Housing Services (HS) and Behavioral Health Services (BHS) within the Milwaukee County Department of Health and Human Services. HS and BHS have had a long-standing partnership linking housing resources to those who also receive mental health services. Housing Services Homeless Outreach Team frequently will find individuals with long histories of trauma who are actively engaged in a mental health crisis. Often, there is not an immediate place to take individuals who frequently refuse to go to traditional homeless shelters. This is also true when first responders encounter domestic violence situations that could be potentially defused if there were emergency housing options available. Through this partnership, Housing Services would work to locate and rehabilitate a facility to house these crisis beds in partnership with a private real estate developer. Behavioral Health Services would assist with building the staffing plan at the facility as well as bringing potential revenue to cover mental health and substance abuse services on site. Both service areas would also coordinate care with the private healthcare systems.

TRACKABLE PERFORMANCE INDICATORS

Provide an overview of the project's goals, objectives, outcomes, and/or outputs that will be achieved by December 31, 2024. Please ensure that proposed project outcomes align with the Milwaukee County vision to achieve racial equity and eliminate health disparities. (250-word max response)

There would be multiple performance indicators for this proposal that would include the following: 1) number of individuals assisted on an annual basis, 2) reduction in overall homelessness, 3) reductions in inpatient hospitalizations, 4) number of individuals diverted from the criminal justice system experiencing mental health or substance use disorder, and 5) individuals gaining access to permanent housing.

INVEST IN EQUITY & INTENTIONAL INCLUSION

Provide an overview of how the proposed project supports historically underserved, marginalized and/or adversely affected groups. Projects will be scored by their alignment with Milwaukee County's strategic objectives to (1) achieve racial and health equity, (2) dismantle barriers and (3) invest "upstream" to address root causes of health. Demonstrate how this proposal supports any or all of these objectives. If applicable, include how this proposal was informed by community input and builds capacity of community organizations. (500-word max response).

Housing is seen as one of the main social determinates of health. Through Milwaukee County's successful Housing First model, it has been shown that virtually 100 percent of participants will accept voluntary case management services when offered an unconditional housing solution. Individuals cannot focus on healing from trauma or be successful in managing a mental health crisis without being provided housing and voluntary services. Through data collected by Housing Services, it can be shown that housing instability is an issue of racial equity. African Americans represent between 75 and 80 percent of those assisted through the Division's prevention and homelessness programs. This proposal was influenced by several community stakeholders. Service partners throughout Milwaukee County, including HD and BHS staff, have long discussed the need for an increase in low barrier crisis beds in our community. The Resident Advisory Council, led by a group for formerly homeless individuals, advises Housing Services staff on how to best reduce homelessness also sees the provision of housing as the key to ending homelessness. Data also shows that the current inventory of crisis beds remains at capacity.

EVIDENCE-BASED STRATEGY

Please select the statement that aligns with the community support project. This project was developed with:

- Strong Evidence:** can support casual conclusions for the specific program with the highest level of confidence. This consists of one or more well-designed and well-implemented experimental studies conducted on the proposed program with positive findings on one or more intended outcomes.
- Moderate Evidence:** reasonably developed evidence base that can support casual conclusions. The evidence-base consists of one or more quasi-experimental studies with positive findings on one or more intended outcomes OR two or more nonexperimental studies with positive findings on one or more intended outcomes. Examples of research that meet the standards include well-designed and well-implemented quasiexperimental studies that compare outcomes between the group receiving the intervention and a matched comparison group (i.e., a similar population that does not receive the intervention).
- Preliminary Evidence:** can support conclusions about the program's contribution to observed

outcomes. The evidence-base consists of at least one nonexperimental study. A study that demonstrates improvement in program beneficiaries over time on one or more intended outcomes OR an implementation (process evaluation) study used to learn and improve program operations would constitute preliminary evidence. Examples of research that meet the standards include: (1) outcome studies that track program beneficiaries through a service pipeline and measure beneficiaries' responses at the end of the program; and (2) pre- and post-test research that determines whether beneficiaries have improved on an intended outcome.

Provide an explanation to support the statement that most aligns with the project. Include the experimental studies conducted on the proposed project. *Evidence-based strategies can be found through the following: [Results First Clearinghouse Database](#) | [The Pew Charitable Trusts \(pewtrusts.org\)](#) and [Homepage | CLEAR \(dol.gov\)](#). (250-word max)

Pew Charitable Trusts has covered extensive research on the link between housing and health. Housing-related factors have the potential to help—or harm—the health of Americans in significant ways. Research suggests that housing should be an important consideration in efforts to address complex and urgent health concerns such as child mortality and the rise in preventable pregnancy-related deaths in the U.S. over the past 30 years.

Policymakers, community-based groups, government agencies, and health providers increasingly recognize housing as a key driver of health outcomes. For example, in December 2019 Delaware announced six evidence-based grants to community organizations aimed at narrowing the state's wide variance in birth outcomes between black women and white women; more than twice as many black infants die before their first birthday than white infants, according to Delaware's vital statistics data. The grants were the first of their kind in the state; two specifically target housing issues as a root cause of infant mortality.

ARPA REPORTING REQUIREMENTS

Provide a detailed overview of the applicant's experience managing federal funds. Detail any experience ensuring accurate data collection and adherence to federal reporting requirements. If this is an internal application, detail any experience managing contracts and ensuring reporting deadlines are met. If this is an external applicant, detail any experience receiving funding from Milwaukee County and ensuring reporting deadlines are met.

A majority of the Housing Division's annual funding is from federal grants so staff has extensive experience in this area. Annual federal reporting requirements need to be met in several areas of the Division including Community Development Block Grant (CDBG) and HOME funds, Section 8 Rental Assistance, and all HUD funded homeless programs. The Division has already received and implemented two ARPA programs for Right to Counsel and Flexible Rental Assistance.

ARPA FUNDS REQUESTED

Provide the total request amount to be spent between 2022 – 2026. Explain how funds will be incurred and encumbered by December 31, 2024. Include if the project has matching funds or resources. (250-work max)

The total amount requested for this proposal is \$2 million. Expenses related to housing acquisition and rehabilitation will be expended by the middle of 2023. The remaining funds will be used for the purposes

of staffing the facility and all funds for staff will be encumbered before the end of 2024. HD and BHD expect matching funds will come in form of new grants related to mental health and trauma informed care as well as the potential for Medicaid reimbursement for services provided in this development.

BUDGET

Complete the short-form budget and provide a formula for your calculation by defining the expense item, number of units, and cost per unit for the requested project period. Please add rows as necessary. In the table below, outline any matching funds or resources.

Expense Item	Description	Total Cost
Personnel Expenses (including fringe benefits)		
1. Clinical staff	On-site staffing at facility	\$700,000
2. Contract and fiscal staff	Financial management and contract coordination	\$92,000
Professional Services		
1.		
Supplies & Equipment		
1. Acquisition and rehab	Acquire and fully rehab a facility for crisis beds	\$1,000,000
2.		
Total Calculations		
Direct Expenses Total		\$1,792,000
Indirect Expenses** (10%)		\$179,200
Total Expenses		\$1,971,200

10% de minimis indirect cost rate for ARPA projects includes rent/space allocation costs, utilities, support and administrative staff time across **County departments, cost of databases and software, etc.

Other Revenue Source (s)	Committed or Available Revenue Amount	Potential Revenue Amount
Medicaid reimbursement/mental health grants		\$700,000
Total Other Revenue Amount	\$0	\$700,000