

DEPARTMENT OF MENTAL HEALTH

INTERIM HOUSING PROGRAM

MENTAL HEALTH PROVIDER REFERENCE INFORMATION

The Department of Mental Health (DMH) Interim Housing Program (IHP) provides a temporary place for adults with mental illness and their minor children who are homeless to stay while they work with their interim housing and mental health provider to transition to permanent housing. The IHP provides safe and clean shelter, 24-hour general oversight, three meals each day, clean linens, clothing, toiletries and case management services.

CLIENT ELIGIBILITY CRITERIA

- Age 18 or older
- Homeless
- Has a serious mental illness and is receiving or willing to receive services from a DMH directly operated clinic or DMH contract provider
- Independent with all Activities of Daily Living (ADLs) including bathing, grooming, dressing, feeding and toileting
- Able and willing to self-administer medication
- Independent with mobility and transfers including being able to safely use Durable Medical Equipment such as walkers/wheelchairs/assistive devices
- Continent of bowel and bladder or independent with the use of incontinence supplies
- Cognitively alert and oriented to name, place, date and situation
- Willing to sign and adhere to the IHP Client Agreement specifications

CLIENT EXCLUSION CRITERIA

- Requires psychiatric or physical health emergency/inpatient hospitalization or other 24-hour treatment
- Requires daily physician oversight for acute care needs or 24-hour nursing support Requires Skilled Nursing Facility (SNF) level of care, acute physical rehabilitation services, licensed residential care or other 24/7 care and supervision
- Currently exhibits combative, aggressive or threatening behavior
- Cognitive impairments that require constant supervision, monitoring, redirection or verbal cues or that place the participants at risk of wandering
- Needs or is on mental health conservatorship
- Wounds/ulcers that require more than two (2) dressing changes per day
- Income/financial benefits to pay for interim housing

MENTAL HEALTH PROVIDER RESPONSIBILITIES

The mental health provider is expected to work in frequent, close collaboration with their client and the IHP provider during the referral process and throughout their stay in the program. The IHP provider's staffing does not include clinical staff. The mental health

provider is expected to provide any clinical or other supports that are needed for their client to be successful in the IHP.

Referral Determination

The mental health provider needs to:

- Determine the client's IHP eligibility
- Contact DMH IHP Administration to discuss any exceptions to the IHP eligibility criteria.
- Review the IHP Provider Information that can be found at Department of Mental Health\Services\Countywide Services\Housing\Interim Housing Program with the client to: help the client understand what is expected of them in the IHP; confirm their willingness to meet the expectations; and determine the client's preference(s) for an IHP placement in one or more Service Areas or with a specific provider.

Referral Submission

The mental health provider needs to:

- Review the DHS/DMH/LAHSAs Referral Guidelines for Interim Housing Programs.
- Complete the DHS/DMH/LAHSAs Standardized Referral Form accurately and in its entirety and submit the Authorizations to Release Protected Health Information required. Incomplete forms will be returned and delay the disposition of them.
- Securely email the completed DHS/DMH/LAHSAs Standardized Referral Form for Interim Housing Programs to IHP@dmh.lacounty.gov. Do not submit the Referral form to DHS or LAHSA. Should the client's needs be more appropriately met in DHS or LAHSA's interim housing programs, the referral will be triaged/discussed with them by DMH IHP Administration.

Referral Disposition

DMH IHP Administration will review the referral and send an email to the mental health provider to inform them of the disposition of the referral. This will include if the referral was denied and the reason for the denial approved and for which IHP site, approved but waitlisted or forwarded/triaged to a LAHSA or DHS. If the referral was forwarded/triaged to LAHSA or DHS, they will inform the mental health provider of the disposition of the triaging including whether the client has been accepted at one of their facilities.

Approved Referrals

The mental health provider needs to:

- Coordinate the client's date and time of arrival with the IHP provider.
- Provide transportation for the client to the IHP site unless they have a car. If the client does not arrive at the IHP site by 4:00 p.m. within one business day following approval of the referral, the IHP bed will become available to another client.
- If the mental health provider was notified of a vacancy for a waitlisted client and the client does not arrive at the IHP site by 4:00 p.m. within one business day of receiving the notification, the client will not be put back on the waitlist. A new IHP referral will need to be made if the client is still in need of IHP services.
- Exceptions to the arrival time may be made on a case-by-case basis with the IHP provider.

- Exceptions to the arrival date require approval by DMH IHP Administration. Requests to extend the arrival date should be sent to IHP@dmh.lacounty.gov. DMH IHP Administration will send an email to inform the mental health provider if the request is approved.

Waitlisted Approvals

Clients that are approved for an IHP bed may be waitlisted because there are no vacant beds to which the client can be matched or there is a vacant bed to which the client can be matched but it is not in the desired SA and/or for a specific IHP Provider requested. An email will be sent to the mental health provider twice a month to determine if the client is still in need of IHP services and if there is any change in the client's Service Area and/or IHP provider preferences, mobility and current living situation.

Should there be IHP vacancies, DMH IHP Administrative staff may inform the mental health provider of these at any time. If the mental health provider responds and indicates the client is not interested in these, the client will remain on the waitlist.

When an IHP bed becomes available for a waitlisted client, the mental health provider will receive an email informing them. See above Approved Referrals section for what the mental health provider needs to do.

Collaboration Between the Mental Health Provider and the IHP Provider

The mental health provider and IHP provider need to maintain frequent contact and closely collaborate with regard to providing supportive services to their mutual client. This includes, but is not limited to addressing the following:

Housing Plans

The mental health provider and IHP provider should participate in calls with each other a minimum of once a month to coordinate the development and implementation of a housing plan using a Housing First approach that takes into consideration the available housing resources that are aligned with the client's preferences and the CES triage tool acuity score. A housing plan should include which staff from each of the supportive service teams including the mental health provider, IHP provider or Intensive Case Management Services (ICMS) provider, if applicable, will be responsible for:

- Assisting the client to apply for any income/financial benefits, if applicable. This includes assisting the client to access the Countywide Benefits Entitlement Services Team (CBEST) to apply for SSI/SSDI.
- Contacting the CES matcher to discuss the client's prioritization and a potential housing resource match.
- Participating in CES case conferences.
- Assisting the client to obtain the documents required for housing including a birth certificate, California ID and Social Security card.
- Assisting the client to complete the appropriate housing subsidy application depending on the housing resource to which the client is matched.
- Assisting the client with locating housing.

Clinical Support

The mental health provider will immediately respond to requests from the IHP provider or DMH IHP Administration to address any mental health issues, concerns about the

client's participation in the IHP, the client's violation of the IHP provider's house rules or other behavior that puts the client at risk of termination from the IHP program.

The mental health provider should immediately inform the IHP provider of any clinical or other issues that may impact IHP participation including if the client discontinues mental health services.

Client Hospitalizations, Incarcerations and Passes

The mental health provider should inform the IHP provider if the client has been hospitalized or incarcerated. The client's IHP bed can be held if the client is hospitalized or incarcerated for less than 14 days without approval from DMH administration. The mental health provider needs to request approval from DMH IHP Administration to hold the IHP bed if the client will be in the hospital or incarcerated more than 14 days.

The IHP provider cannot approve overnight passes; only the mental health provider can approve them. The mental health provider needs to request approval from DMH IHP Administration for any overnight passes for individuals/families over three days and for more than two overnight family visits per month regardless of the length of time of the visits.

If the client requires emergency/inpatient hospitalization during their IHP stay, the mental health provider needs to assess the client to determine their appropriateness to return to the IHP upon hospital discharge.

Other Mental Health Provider Responsibilities

- Informing DMH IHP Administration of any concerns about an IHP provider that are observed when visiting the IHP site or reported by the client. Participate in the plan to address the concern if requested by DMH IHP Administration.
- Participating in calls with DMH IHP Administration staff at any time.