Supported by funding from
L.A. COUNTY MEASURE H
REAL HELP. LASTING CHANGE.

BUILDING SUCCESSFUL COLLABORATIONS THROUGH INTEGRATED PROGRAMS

SESSION OVERVIEW

- Overview of the Homeless Initiative and Measure H Strategies
- Integrated Care Model in Permanent Supportive Housing
- A Case Study at the Arlington Apartments

LEADING CAUSES OF HOMELESSNESS

- Insufficient income and lack of affordable housing are the leading causes of homelessness (National Law Center on Homelessness & Poverty)
- California Housing Partnership Corporation found an affordable housing gap in Los Angeles County of 527,000 units in 2015 Study.
- According to the National Law Center on Homelessness & Poverty, the top **(5) causes** among homelessness among individuals include:
    1) Lack of Affordable Housing
    2) Unemployment
    3) Poverty
    4) Mental Illness & lack of needed services
    5) Substance Abuse and lack of needed services

HOMELESS INITIATIVE OVERVIEW

- On August 17, 2015 the County launched an effort to develop a comprehensive set of recommended County strategies to combat homelessness.
- Inclusive and collaborative planning process involving over 1,100 experts and community members focused on what works, **18 policy summits**, **4 focus groups** with people who are homeless, **2 community meetings**, **over 200 public comments**.
- On February 9, 2016, the LA County Board of Supervisors adopted a coordinated set of Homeless Initiative 47 strategies to combat homelessness, including strategies in which cities, businesses and faith leaders can participate.
- New one-time funding approved: $99.7 million

MEASURE H - BALLOT INITIATIVE

- **December 2016** – LA County Board of Supervisors approves ordinance placing Measure H on the ballot – a ¼ cent County sales tax that will generate an estimated $355 million annually for 10 years, solely to prevent and combat homelessness.
- **March 2017** - County voters approve Measure H, with 69.34% favoring landmark measure.
- **February 2017** – LA County Board of Supervisors directs the Chief Executive Office to conduct an inclusive, collaborative and public Measure H Revenue Planning Process and report back with recommendations for three fiscal years.

MEASURE H – 2017 REVENUE PLANNING PROCESS

MEASURE H REVENUE PLANNING GROUP COMPRISED OF 50 STAKEHOLDERS REPRESENTING:

- LA County
- City of LA
- Councils of Government
- Community-based Organizations
- Business Community
- Faith Leaders
- Local Homeless Policy Experts
- Individuals with Lived Experience

FIVE PLANNING GROUP MEETINGS:
March 23 - May 10

COUNTYWIDE COMMUNITY WEBINAR:
April 25 with 350 Participants

LIVED EXPERIENCE ADVISORY GROUP:
April 25

PUBLIC COMMENTS:
Submitted by 244 individuals and organizations
Between April 26 - May 1

HOMELESS INITIATIVES STRATEGIES: PRIMARY MEASURE H INVESTMENTS

- Outreach – E6
- Interim/Bridge Housing – B7/E8
- Rapid Rehousing – B3
- Permanent Supportive Housing – D7
- Benefits Advocacy – C4/C5/C6
- Strengthening the Coordinated Entry System – E7

STRATEGY D7 – PROVIDE SERVICES AND RENTAL SUBSIDIES IN PERMANENT SUPPORTIVE HOUSING (PSH)

- Provides Services and Subsidies for PSH
- Integrated Care Model of health, mental health and substance use services
- On-site services in client's homes and in the field
- Maximizes the expertise of each County Department

MEASURE H: STRATEGY D7 PROVIDE SERVICES AND SUBSIDIES FOR PERMANENT SUPPORTIVE HOUSING

100% of all D7 participants will receive Intensive Case Management Services (ICMS)

Approximately 30% will receive Housing Full Service Partnership (Housing FSP) services

Services funding for existing project based sites will begin to roll out to developers

Approximately 30% will receive Client Engagement & Navigation Services (CENS)

CORE FUNCTIONS OF PSH ICMS

- Intake and Assessment
- Assist in obtaining documentation (ID, Income verification)
- Provide for Immediate Needs (food, clothing, etc.)
- Provide and facilitate transportation
- Connection to Benefits (health, income, in home care, etc.)
- Support with completing housing paperwork
- Move in Assistance
- Retention

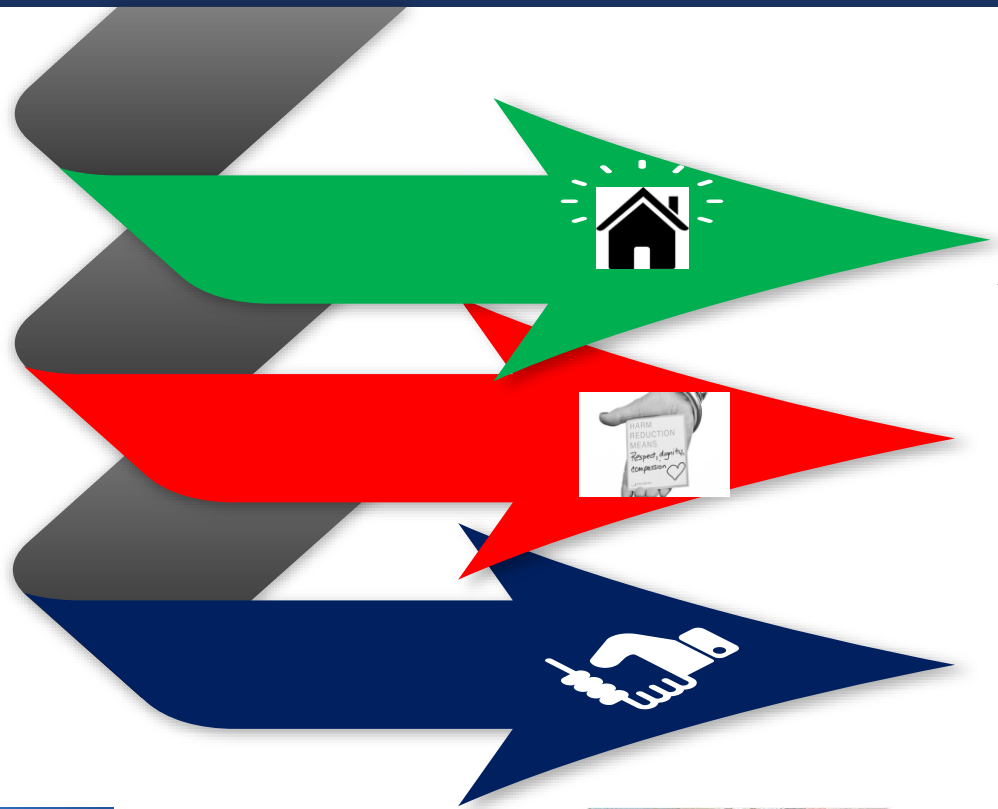
CORE FUNCTIONS OF HOUSING FSP

- Individual Therapy
- Group Therapy
- Medication Support
- Crisis Intervention
- Referral and Linkage
- Support with managing mental health symptoms
- Support in recovery goals

CORE FUNCTIONS OF CENS

- Outreach and Engagement
- Substance Use Disorder Screening and Referral to Treatment
- Service Navigation, Ancillary Referrals, and Linkages
- Care Coordination for Substance Use Disorder Services
- Health Program Eligibility and Enrollment
- Client, Community, and Agency Education

BEST PRACTICES



Housing First

Connect people experiencing homelessness to permanent housing without preconditions or barriers to entry

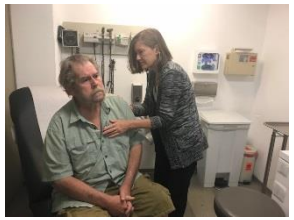
Harm Reduction

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences by meeting people where they are (emotionally and physically), client driven goals and, recognizing clients are survivors that have strengths to be agents of change.

Whatever it Takes

Whatever it Takes is a flexible approach to service delivery for people who are experiencing homelessness or are living in permanent supportive housing and dealing with mental illness, chronic health conditions and or substance use disorders.



WHAT DOES WHATEVER IT TAKES MEAN?

(1) Go above and beyond "How are you feeling today?"

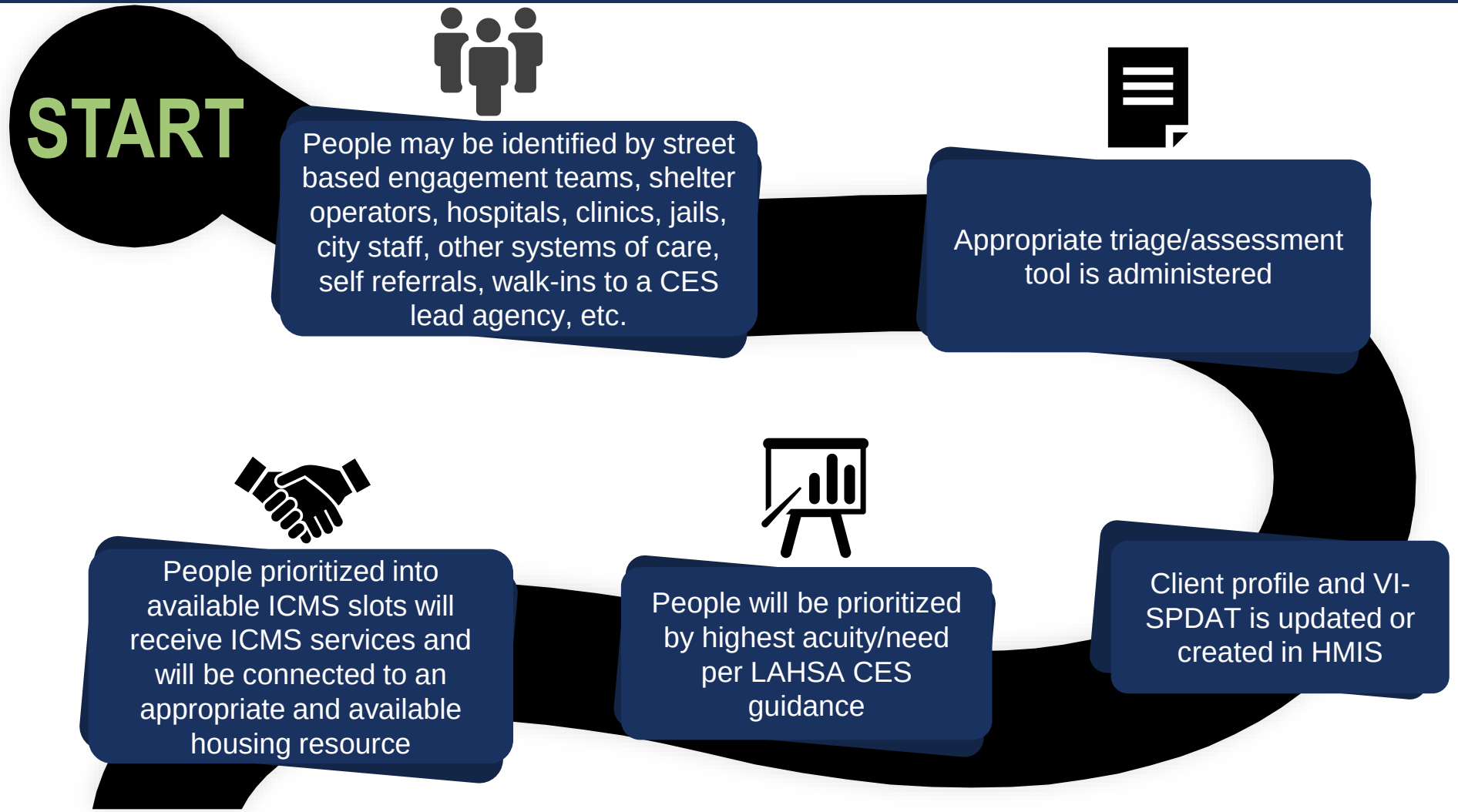
(2) Ensure clients are maintaining medication and treatment regimens.

(3) Ensure linkage to health, mental health services and specialty care.

(4) Provide a range of services such as, transportation to ensure linkages are made to other necessary services.

Monitor and follow-up with clients and communicate clients needs

HOW WILL D7 WORK FOR A PERSON EXPERIENCING HOMELESSNESS?

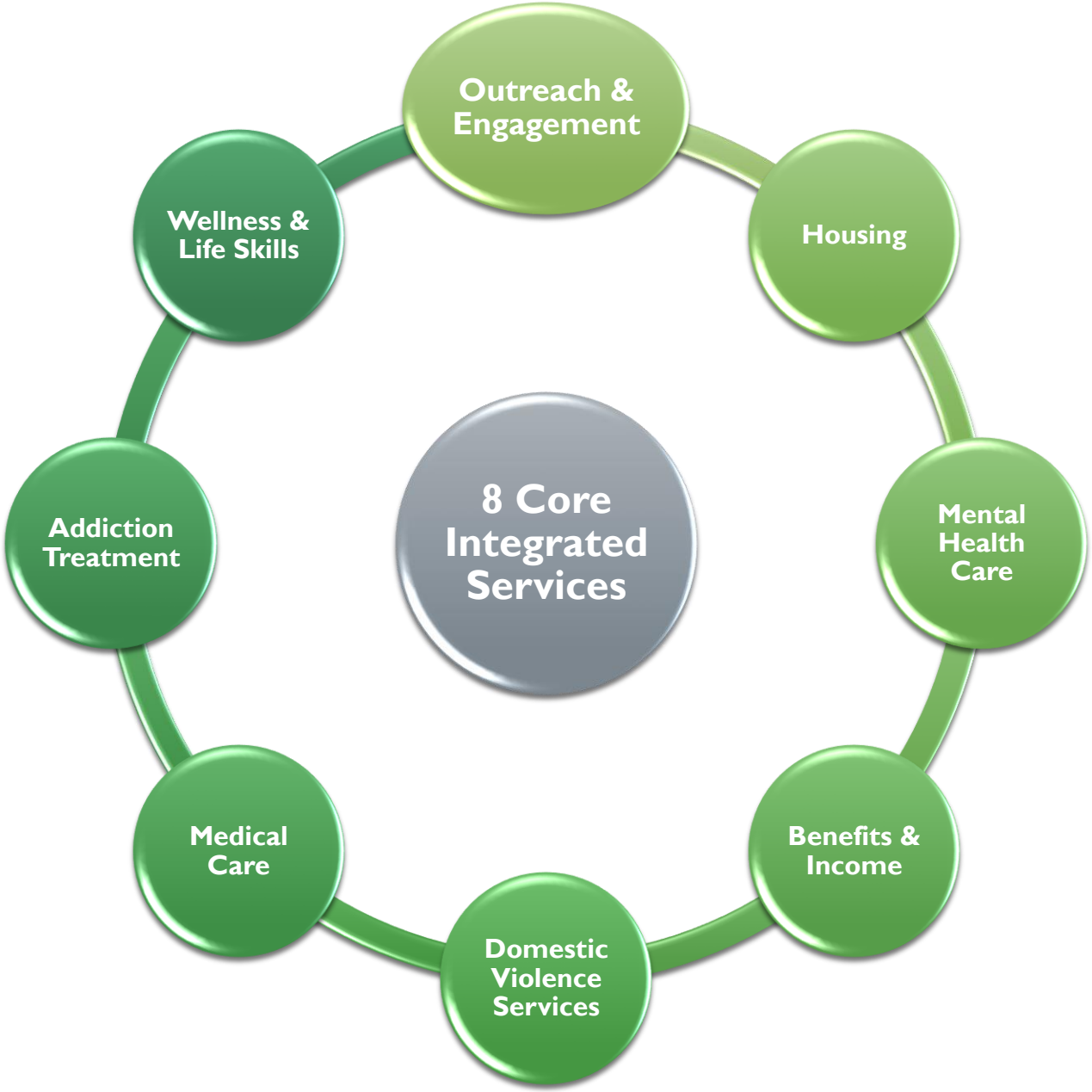


THEPEOPLECONCERN

Because everyone should be housed, healthy and safe.

OPCC & LAMP COMMUNITY UNITED

INTEGRATING SUBSTANCE USE, MENTAL HEALTH, AND PRIMARY CARE SERVICES IN OUR COMMUNITIES: ARLINGTON SQUARE


Outreach & Engagement
Housing
Mental Health Care
Benefits & Income
Domestic Violence Services
Medical Care
Addiction Treatment
Wellness & Life Skills
8 Core Integrated Services

ARLINGTON SQUARE – POPULATION

- Project Based Permanent Supportive Housing
- TPC is providing ICMS and Housing FSP services on site
- Leased up in August 2017
- 46 units
- Mixed population –
  - Veterans
  - High Utilizers of DMH and DHS
  - HOPWA

ARLINGTON SQUARE

ARLINGTON SQUARE

- Developer: ACOF
- Location: Venice and Arlington Ave
- Property Management: Barker

ARLINGTON SQUARE – BEFORE INTERGRATED SERVICES

- 2 Case managers only providers onsite
- In first 6 months – 24 hospitalizations, most were psychiatric
- 2 incarcerations
- 2 situations in which staff found tenants deceased in apartment
- 2 restraining orders against friends entering unit without permission - destroying unit

ARLINGTON SQUARE – WITH INTERGRATED SERVICE ONSITE

- ICMS is present full time onsite
- Housed FSP– psychiatrist onsite weekly
- CENS (Client Engagement and Navigation Services) onsite weekly
- The VALOR program is also onsite weekly to provide mental health services to Veterans
- DHS HFH Nurse –doing psychoeducation around medical symptoms and connection to Primary Care Services.

ARLINGTON SQUARE - NOW

Have easy access to a psychiatrist which has increased interest in discussing medication

One client agreed to Vivitrol to treat substance use disorder

One individual that was incarcerated due to his SPMH was transferred from Jail to hospital and discharged on injectable medication

DHS Nurses are doing home visits to ensure medication management and assist in connection to Primary Care Services.

Case Study/Examples

- 35 year old Caucasian female – Dually Diagnosed
- Placed in project – transitioned well
- Following period of stability, client experienced recurrence of substance use
- Co-location of intensive Case Management and Substance Abuse Outreach Services supported smooth and easy connection to treatment
- Has managed to stay housed for over 1 year

Integrating Housing - Populations

- Integrating Populations can mean many things
  - Special needs and affordable
  - Veteran and high utilizers
  - Families and individuals
- Developers, Property Management, and Services Providers set the stage and have big impact on positive integration
- Must show that they are integrated and unified in their approach
- Need to have regular collaborative meetings
- All present at community meetings

STAFF WEAR MULTIPLE HATS

LESSONS LEARNED

- Be cognizant of location of services offices within the project
- Make sure to use language that does facilitate integration
- All populations can attend all activities and so on……..
- Services providers at property need to communicate/collaborate – defining roles is integral

START-ODS

SYSTEM TRANSFORMATION TO ADVANCE RECOVERY AND TREATMENT

Los Angeles County's Substance Use Disorder Organized Delivery System

SUBSTANCE USE DISORDER CLIENT ENGAGEMENT AND NAVIGATION SERVICES

Presented by: Yanira A. Lima MPA, MHM
Chief, Adult Systems of Care

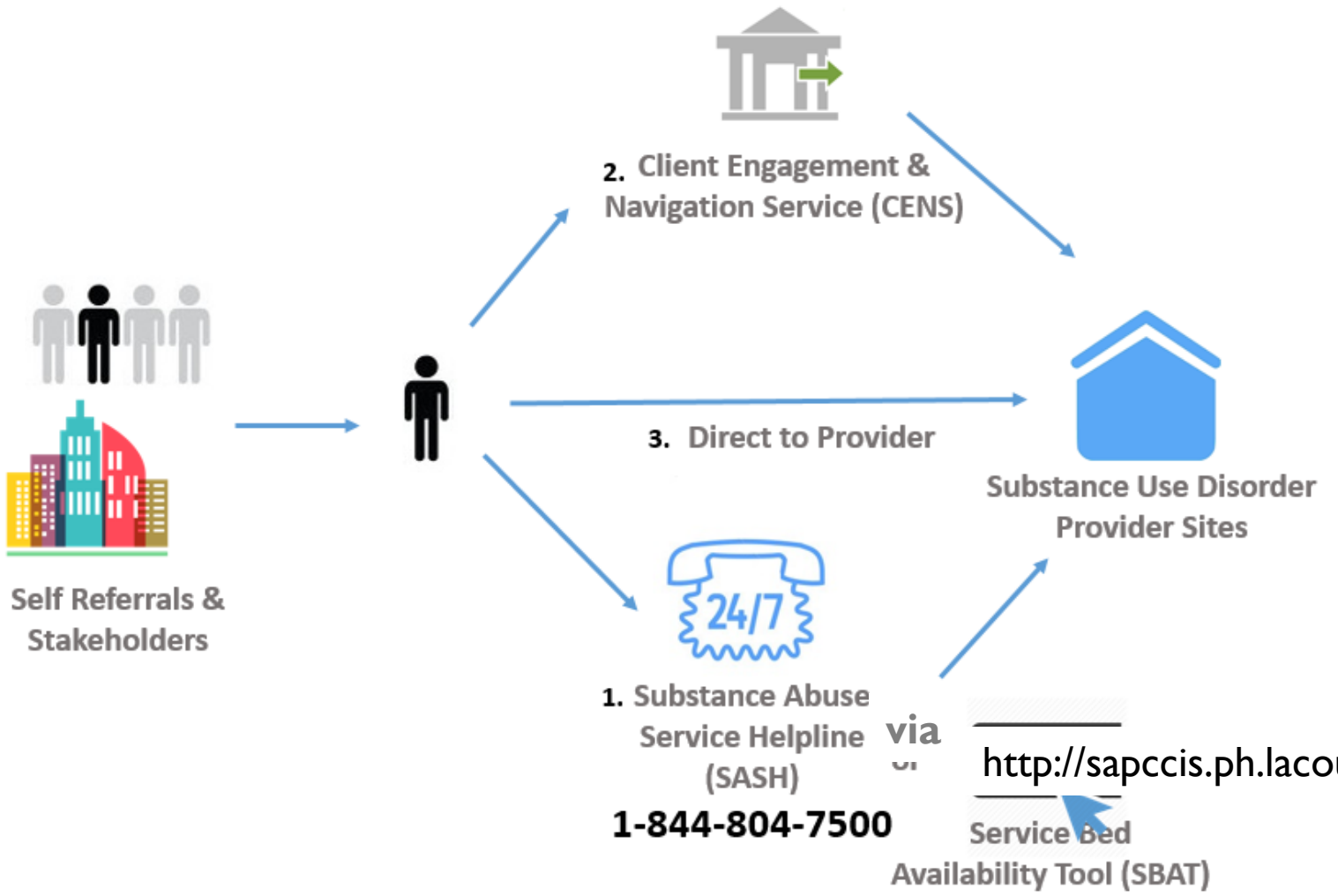
Los Angeles County Department of Public Health
Substance Abuse Prevention and Control (SAPC)

CLIENT ENGAGEMENT NAVIGATION SERVICES (CENS)

SUD TREATMENT SERVICES IN PERMANENT SUPPORTIVE HOUSING

HOMELESS HEALTH CARE LOS ANGELES

ENTRYWAYS INTO SUD TREATMENT



CLIENT ENGAGEMENT AND NAVIGATION SERVICES

- CENS is the former Community Assessment Service Centers (CASC)
- Serves as one of the entry points into the County's SUD system of care
- Targets County/City-involved individuals who are homeless or have criminal justice issues or a co-occurring disorder
- Provides face-to-face services to facilitate access to and completion of SUD treatment
- CENS offices are staffed by State-registered and/or certified SUD counselors

CENS is Comprised of Eight (8) Community-Based Organizations in Each of the Eight (8) Service Planning Areas (SPA)

SPA	Agency
SPA 1	▪ Tarzana Treatment Centers
SPA 2	▪ San Fernando Valley Community Mental Health Center
SPA 3	▪ Prototypes
SPA 4	▪ Homeless Health Care Los Angeles
SPA 5	▪ Did Hirsch Mental Health Services
SPA 6	▪ Special Service for Groups - Homeless Outreach Program Integrated Care System
SPA 7	▪ California Hispanic Commission on Alcohol and Drug Abuse
SPA 8	▪ Behavioral Health Services

CENS LOCATIONS

Locations	# Current Co-locations	# Proposed Co-locations (and Connections)	Total # Co-locations (and Connections)
CENS Area Offices	8	0	8
City Attorney	2	4	6
DCFS	13	7	20
DPSS Offices	0	6	6
Homeless Encampments	5	0	5
Mental Health	5	0	5
Office of Diversion and Reentry	1	1	2
Permanent Supportive Housing	**29 (29 Connected)**	**12**	**71**
Physical Health	7	1	8
Probation	12	1	13
Public Defender	6	6	12
Sheriff	2	1	3
Superior Court	5	0	5

CENS PROJECT-BASED PSH CO-LOCATION AND CONNECTION EXPANSION

Timeframe	#
FY 17-18	1
FY 18-19 Q1	1
FY 18-19 Q2	10
FY 18-19 Q3	30
FY 18-19 Q4 to Date	16

CENS CORE ACTIVITIES

- Outreach and Engagement
- Health Program Eligibility and Enrollment
- Client Education
- Client Screening, Appointment Scheduling, Reminders and Follow-up
- Service Navigation, Ancillary Referrals and Linkages
- Documentation and Reporting
- Agency and Community Education

CENS OPERATIONALIZED

- The key goal of CENS is to provide integration and coordination of care by:
  - Providing substance use screenings
  - Referrals to Outpatient, Residential, MAT, and Withdrawal Management services
  - Verifying MediCal eligibility and assisting individuals to enroll in Medi-Cal or My Health LA
- CENS utilizes evidence-based methodologies (e.g., Motivational Interviewing) to engage, motivate and educate clients on:
  - Behavioral Changes
  - Substance Use Disorders
  - Coping Strategies
  - HIV/AIDS Education
  - Naloxone Overdose Prevention
  - Relapse Prevention
  - Medication for Addiction Treatment for Alcohol and Opioid Use Disorders

CENS OPERATIONALIZED

- CENS screens clients using the ASAM Triage to determine a client's provisional level of care and to schedule an intake appointment with a treatment facility.

- CENS provides wraparound services, such as:
  - Appointment reminders and follow-ups
  - Coordinating and providing transportation to treatment
  - Serve as a liaison between the treatment facility and client to remove any barriers preventing clients from enrolling in a program.

- For clients who do not make it to treatment, CENS staff provides harm reduction interventions, such as:
  - Substance use education
  - Education on local needle exchange programs
  - Overdose prevention
  - Medication Assisted Treatment options

HOW MEASURE H FUNDING IS UTILIZED FOR D7

- Through Measure H funding of Homeless Initiative (HI) Strategy D7: Services and Rental Subsidies for Permanent Supportive Housing (PSH)
- **CENS provides services for both project-based and scattered PSH site residents**
  - Outreach and engagement services to residents in PSH
  - Provide SUD screening and referral to SUD treatment services.
  - Funding supports the co-location of CENS at selected PSH sites.

ROLE OF CENS IN D7

Services at project-based and scattered PSH sites:

- Services are intended for individuals who exhibit signs of SUD or have relapsed to prevent their eviction from housing.

- Approximately one-third of HI Strategy D7 participants will need CENS services.

CENS CO-LOCATION AT PSH SITES

- DPH-SAPC, DHS, and PSH-ICMS staff coordinate to accommodate CENS staff
  - Scheduled times and office space was provided at PSH sites
- Developed referral system for individuals interested in SUD services at scattered sites
- CENS staff work alongside ICMS case workers to facilitate services

CENS SERVICES AT PSH SITES

- CENS availability added to PSH calendar of activities
- Attend tenant and community meetings
- Provide education and support to clients not actively seeking treatment
- Provide workshops to clients at PSH
  - Overdose prevention
  - Stages of change
  - SUD 101
  - Harm Reduction
- Assistance with Medi-Cal and My Health LA enrollment
- Ancillary referrals and case management with ICMS worker
- Provide ASAM triage screenings and treatment referrals using SBAT to individuals seeking treatment
- Wrap around services to facilitate treatment placement

PILOT PROGRAM: CENS AT ARLINGTON SQUARE

- CENS at PSH sites was piloted at Arlington Square on June 22, 2018
- Successful intervention that increased linkages to treatment

MEETING PEOPLE WHERE THEY'RE AT

- Services provided are client centered and vary by site
  - Harm reduction
  - Relapse Prevention
  - Behavioral Health and Wellness
  - Services for Undocumented Clients
  - Services for Seniors
  - Services for Women
  - Services for Survivors of Domestic Violence

IT'S WORKING!

- Building rapport with clients and gaining their trust
- Creating a safe space encourages clients to engage with services
- Increased group attendance
  - Incentives (snacks, donuts, coffee, juice)
  - Monthly raffle for group attendees
- Individuals who access workshops and groups are more likely to engage with CENS staff about SUD treatment

CENS IS MORE THAN JUST TREATMENT

- While we are seeing successes in treatment and substance use, we are also seeing success in other domains of life.

"I had a client who was struggling with her body image and really wanted to lose weight. We spoke about her health and goals. After struggling to lose weight for a long time, she came and saw me and excitedly told me she had lost 1 pound! Although it was small, she was so excited and I was very excited for her."

"I had a client who was having a lot of trouble connecting with his family and feeling a lot of guilt about it. I met with him multiple times and was able to motivate him to call his son. He later told me that he bit the bullet and called his son and they spoke for over an hour. He was so glad to have that connection."

CHALLENGES

- Limited resident engagement
  - Fear of losing their housing for substance use
  - Lack of education around substance use options and maintaining housing
- Mental health compliance can be a barrier to accessing substance use treatment

SOLUTIONS TO INCREASE PARTICIPATION

- Harm Reduction onsite group
- Incentives
- Light refreshments during groups
- Expand use of Field Based Services

CENS CO-LOCATED SITES

- Expanded to additional 31 project-based PSH sites:
  - Metro Villa
  - Downtown Women's Center
  - Mosaic Gardens at Westlake
  - T. Bailey Manor
  - Alexandria Hotel
  - Panama Apartments
  - Berendo
  - New Pershing
  - Orbison House
  - The Selby Hotel
  - Step Up on Vine
  - Casa Carmen
  - Vendome Palms
  - Michael's Village
  - Brownstone Apartments
  - Florence Apartments
  - Gateways Apartments
  - Renato Apartments
  - Golden West
  - Angelus Inn
  - Courtland
  - Ellis
  - Ford Apartments
  - Harold
  - Haskell
  - La Jolla
  - Regal
  - Ward
  - Teague Terrace
  - Star Apartments
  - Weldon Apartments

SUD EXPANDED SYSTEM OF CARE BENEFITS

Old DMC-SUD System

- ☑ Outpatient
- ☑ Intensive Outpatient
- ☑ Residential (Perinatal Patients Only)
- ☑ Opioid Treatment Program

- ☑ Individual Sessions (Crisis Only)
- ☑ Group Sessions

New DMC-SUD System for Youth and Adults

- ☑ Outpatient ☑ Intensive Outpatient
- ☑ Residential (All Populations – 3 Levels of Care)
- ☑ Opioid Treatment Program
- ☑ Medication for Addiction Treatment
- ☑ Withdrawal Management (Detox)

- ☑ Individual Sessions (No Limits)
- ☑ Group Sessions
- ☑ Family Therapy
- ☑ Recovery Support Services
- ☑ Case Management/Care Coordination
- ☑ Field-Based Services
- ☑ Recovery Bridge Housing

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