Housing First Partners Conference – April 2018

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Housing First, Healthcare Too:

Driving Coordinated Entry through Your Local Mental Health Provider



Learning Objectives

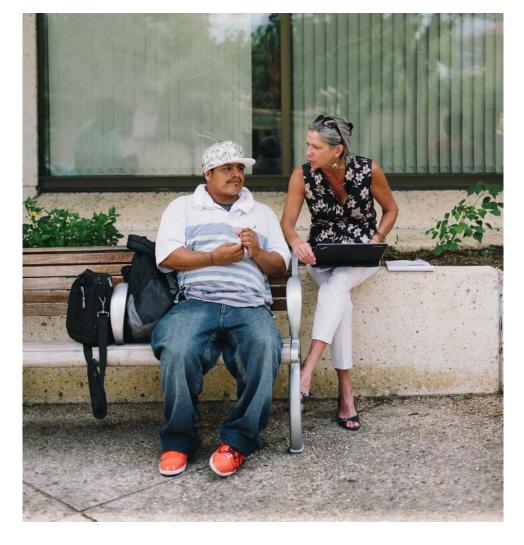
- Recognize the need for a mental health provider at the table when designing your homeless services system
- Identify the benefits of having a mental health partner in system transformation
- Discuss advantages and challenges of providing both housing and case management by the same team





Audience Question:

What have your experiences been like in working with mental health providers?







Overview

Integral Care helps people build health and well-being so everyone has the foundation to reach their full potential.

We support adults and children living with mental illness, substance use disorder and intellectual and developmental disabilities in Travis County.





About Integral Care

Integral Care provides community-based mental health, substance use disorder and developmental disabilities services in Travis County.

25,000

Travis County residents served each year

\$109M

Annual Budget

40+

Locations with direct services and mobile teams

50yrs

Of proud service across Travis County





Our Homeless & Housing Services

Initial Engagement Services

Homeless Outreach & Engagement Basic Needs Coordinated Assessment Respite Care



Short-Term Housing
Shelter for Veterans
Housing Outreach
Employment Services
Peer Support & Coaching

Housing Placement Services

Permanent Supportive Housing Affordable HUD Housing Landlord Mediation Rental Assistance







Our Impact

Our Impact

20+
Years Serving
Homeless
Community

Housing & Homeless
Programs

103
Housing
Staff

\$28.3 M Housing & Homeless Services Budget

462
Permanent
Supported
Housing Units

3000Homeless
Individuals
in Services

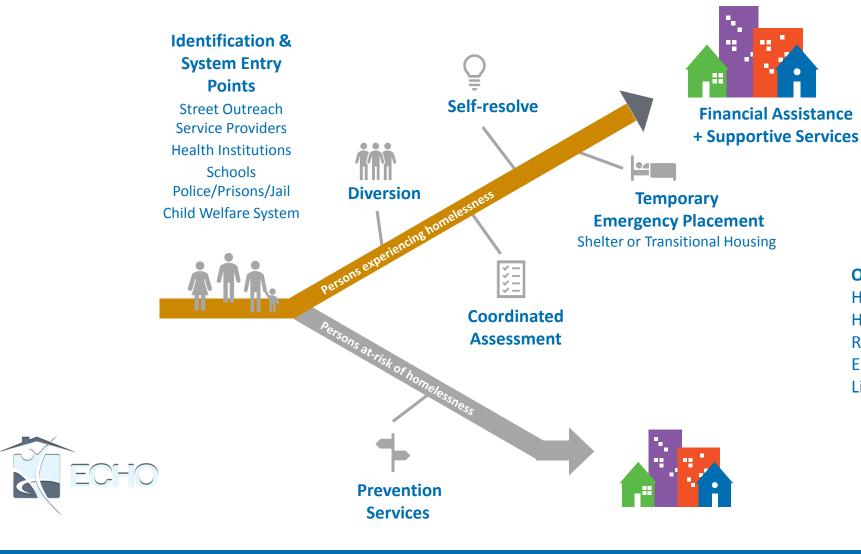




About ECHO

- The Ending Community Homelessness Coalition (ECHO) is a non-profit that plans, develops, and implements community-wide strategies to end homelessness in Austin/Travis County, Texas.
- It is the lead agency for the Austin/Travis County:
 - HUD Continuum of Care (CoC)
 - Homeless Management Information System (HMIS) Database
 - Coordinated Entry System

Our System to Prevent and End Homelessness



Outcomes

Housing Stability Health Recovery Employment Life Stability



Coordinated Assessment

Are you staying in emergency shelter, outside, or in a car?



Call 211 or visit AuntBertha.com to access community resources.

Ves

Complete a housing assessment at Front Steps, The Salvation Army, or by phone at ECHO (512-234-3630).



What happens once I complete the housing assessment?



If you are eligible for a participating program in the community, once an agency has an opening, someone from that agency will be in contact with you directly to schedule an intake.





Once you have completed an intake and are enrolled in a program, you will work with a case manager to find housing.



It is important to remember that if ANY of your contact information changes, please get in touch with any of the three agencies. If we can't find you then we can't help house you!





Salvation Army: 501 E. 8th Street Mon,Wed,Thurs,Fri 9AM-4PM Tues 9-11AM and 2-4PM

ECHO: By phone 512-234-3630 Mon-Fri 9AM-4PM

Completing the housing assessment does not guarantee housing and it is possible that you may not be eligible for any programs.

There is no fixed timeline of when an agency may be in contact with you if you are eligible for a program.

The housing assessment is the first step in your housing search. Connect with different community agencies and ask about their services.





The Truth.....

Homeless people are a population known to be highly vulnerable to trauma, a result of the triggering events to becoming homeless and the considerable social isolation, discrimination, and adversity suffered when homeless.

(Archard & Murphy, 2015)







Individuals experiencing homelessness in Travis County



67%
Can't access
employment/
do not have any
earned income



61%
Access healthcare through an emergency room or do not access any healthcare



56%
Have experienced trauma or abuse in their life



44%
Currently
experience
mental health
issues





What does partnership look like in practice?

- Mutual System Access Multiple, intentional opportunities for clients to co-enroll or "cross over" between systems
- Services Provision and Design Service standards and workflows are designed from the start with dual service needs in mind
- Expertise and Specialization Reliable service partnerships mean that respective experts can sharpen skills and be brought in where needed most, rather than everyone trying to become a jackof-all-trades
- Regular communication Real-time feedback and communication at multiple organizational levels, to catch gaps and opportunities in real-time

Where did we start?

Identified need for coordination and communication

Legal considerations/data entry systems

Specific MH referrals

Necessary? Redundant?

What does the system need to look like to serve ALL?

Building from scratch together





System Design Considerations

Ensuring privacy/confidentiality of MH/SA information

Building questions about MH into Coordinated Assessment

Easy identification of individuals on prioritization list as having MH needs

Physical proximity of CA specialists and MH staff

Availability of mobile CA and MH intake





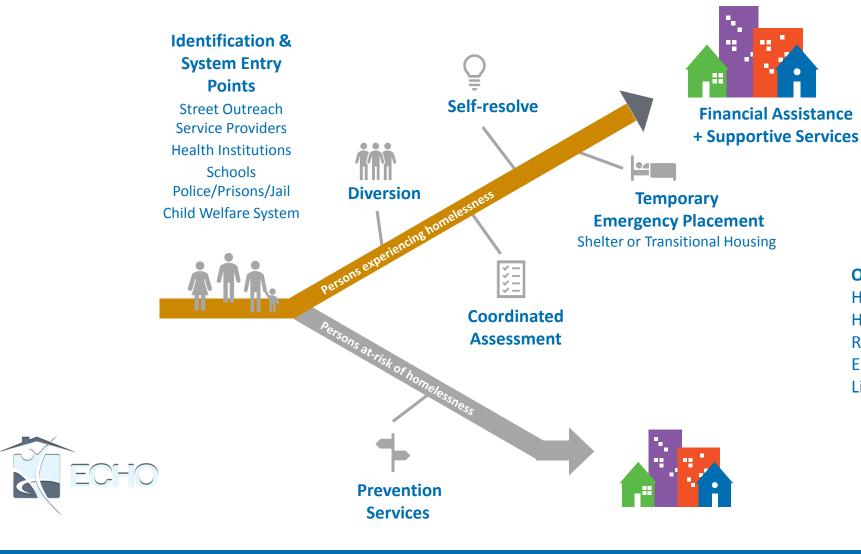
How is the LMHA involved?

- Outreach teams
- Mobile intake for entry into services
- Dedicated Landlord Outreach support
- Housing Case Management (RRH and PSH)
- Counseling
- Peer Support
- Supported Employment Specialists
- SOAR Specialists
- Staff embedded in criminal justice system





Our System to Prevent and End Homelessness



Outcomes

Housing Stability Health Recovery Employment Life Stability



Housing AND Mental Health Case Management



- Case management and supports for housing stability and for mental health provided by same individual
- Reflects reciprocal impact one has on the other – can focus more on one or the other depending upon need
- No issues with communication across providers
- May be difficult for same staff to give attention to housing issues if mental health crises arise

Housing OR Mental Health Case Management

- Highlights need for clear communication between staff as well as with the individuals being served
- What info is okay to freely share?
- Need to know who is doing what to avoid duplication or confusion
- Housing supports may end, MH supports can continue indefinitely
- Necessary recognition that one affects the other





ECHO's role in collaboration

Weekly meetings with housing providers, including Integral Care

Maintenance of prioritization lists and referrals

Creation of BOLO and Outreach lists



What can happen if we do not partner?

Providers work isolated from each other

 Can duplicate services OR not provide necessary critical services Individuals seeking services experience frustration and unnecessary barriers

 Important information is not shared across providers





How do things tie back to larger systems?

Mental Health and Homeless Services Systems have complementary, but distinctive missions, roles, and goals

Two systems can actively coordinate and collaborate where missions overlap, and acknowledge and respect where they don't

Complementary service design can lead to exponential outcomes, even for the most service-intensive, vulnerable populations

Funding opportunities can be braided and specialized, rather than competed

What is next?

Additional areas/resources to build into the system

• Employment, benefits, peers?



More partners to provide services

Mobile VI-SPDATs



Expanding capacity for all areas

Navigation AND services











Questions????

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