



BOARD OF SUPERVISORS
AGENDA LETTER

Agenda Number:

Clerk of the Board of Supervisors
105 E. Anapamu Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Department Name: Public Health
Department No.: 041
For Agenda Of: April 05, 2011
Placement: Departmental
Estimated Tme: 20 Minutes
Continued Item: No
If Yes, date from:
Vote Required: Majority

TO: Board of Supervisors

FROM: Department Takashi Wada, MD, MPH, Director and Health Officer
Director(s) Public Health Department
Contact Info: Dana Gamble, LCSW, Santa Barbara Health Center Administrator

SUBJECT: Report on the Collaboration of County Departments to Address Homeless Deaths in Santa Barbara County

County Counsel Concurrence

As to form: N/A

Auditor-Controller Concurrence

As to form: N/A

Other Concurrence: N/A

Recommended Actions:

That the Board of Supervisors:

- a) Receive an oral presentation on the collaborative efforts between ADMHS, PHD and DSS to improve coordination and continuity of care for the homeless population in Santa Barbara County.
- b) Receive an oral presentation update on the 10 Year Plan to End Chronic Homelessness by Bringing Our Community Home.

Summary Text: The Homeless Death Review Team was created by County staff in 2008 to review homeless deaths and their causes, explore means to avert similar deaths and, where available, compile statistical data to identify trends. On February 2, 2010, your Board, in response to requests from concerned community members, tasked the Homeless Death Review Team to undertake a project to research deaths and violence against homeless persons from 2009 to April 2010 in Santa Barbara County and to report back to the Board. The report was presented to the Board of Supervisors on August 10, 2010. The Board directed that the departments of Public Health (PHD), Alcohol, Drug, and Mental Health Services (ADMHS), and Social Services (DSS) work together to improve continuity of care between agencies and establish a better coordination system to serve homeless. This presentation is a follow-up to address those requests.

Background

In February of 2010, the Board of Supervisors directed County departments to complete a thorough review and develop recommendations to address violence and deaths among homeless. The Public Health Department led the multi-agency Homeless Death Review Team in a systematic analysis of deaths of homeless persons between January 1, 2009 and March 31, 2010. Forty-five (45) homeless decedents were included in the review. One of the recommendations of the Homeless Death Review was to improve coordination and communication between behavioral health and physical health interventions.

The report was presented to the Board of Supervisors on August 10, 2010. The Board directed that the departments of Public Health (PHD), Alcohol, Drug, and Mental Health Services (ADMHS), and Social Services (DSS) work together to improve continuity of care between agencies and coordination system to serve homeless.

The Board also requested an update on the 10 Year Plan to End Chronic Homelessness, which will be presented by Bringing Our Community Home after this staff presentation.

Homeless Services Provided by Santa Barbara County Departments

Santa Barbara County provides a wide variety of services and support to homeless persons through a number of departments including PHD, ADMHS, DSS, and Housing and Community Development (HCD). Together in the fiscal year 2009-10, these departments provided:

- More than \$8,470,000 in funding annually for services to homeless
- More than 570 in hours per week to provide direct services and to coordinate with other service providers who serve the homeless

The attached grid (Attachment A) reflects the specific programs and services that are supported with County funding and staff. This grid is an estimate compiled with program related information. There are homeless persons who are served through multiple programs and the duplication of clients is not identified here. The grid presents a broad perspective of the level of service and investment in addressing the significant needs.

Improving coordination and communication

The systematic analysis of deaths of homeless persons revealed opportunities to improve continuity of care and coordination. County departments have identified strategies to increase coordination including:

- Facilitating referrals across county agencies
- Collaborating to secure benefits on behalf of homeless persons
- Process improvements to enhance coordination
- Implementing a “Vulnerability Index” assessment to identify the homeless individuals at greatest risk, allowing for more targeted case management

Facilitating referrals across healthcare agencies

Most homeless persons have physical health and mental health needs. They may be served by PHD, ADMHS, or both County agencies. To improve the coordination across agencies, the two departments are implementing the following strategies:

- ***Clinician to clinician communication about specific patients/clients*** – Physicians and other clinical professionals within each County department will make personal contact to discuss the needs of the individual served and how the services can be integrated. This includes a discussion about specific medications and treatment interventions.
- ***Referrals to each department through identified persons/entry points*** – When a homeless person is being served in one department and there is an assessment that the other specialty may be needed, a specific person will be contacted at each agency. For ADMHS, it will be the CARE or Access Team. For PHD, it will be the Regional Manager at the local Health Care Center.

Collaborating to secure benefits on behalf of homeless persons

Homeless individuals often have physical and mental health conditions that make them eligible for Social Security and other benefits. The process of applying for these benefits is time consuming and laborious requiring extensive documentation. Individuals at ADMHS, DSS, and PHD are assigned responsibilities related to securing the benefits for which homeless persons are eligible. To increase coordination with tasks related to securing benefits, the following strategies are being pursued:

- ***Developing a common Release of Information form that enables all three departments to share information for the purposes of securing benefits*** – The common form can be provided at any one of the three county agencies. It will facilitate timely gathering of sensitive and relevant health information for SSI and other benefit applications.
- ***Designate roles across agencies for this function*** – Each agency has specific employees that have expertise and work in the benefits area. DSS staff will take the lead in facilitating the completion of the applications and guiding the applications through the process as this is an area where they have expertise. PHD and ADMHS employees will contribute information and assist with this key task.

Process improvements to enhance coordination

In addition to specific strategies to enhance coordination, the departments have initiated changes in process and practice including:

- ***Asking patients about involvement in the other healthcare agency*** – When a homeless person seeks care at either ADMHS or PHD, the department representative will ask each patient/client if they are receiving services from the other county healthcare provider. Through this simple process, there will be early identification of dually served patients. This information will also prompt clinicians at both departments to seek consultation from the provider of service at the other county healthcare agency.
- ***Including ADMHS in quarterly Healthcare for the Homeless case reviews*** – Dr. David Lennon, Director of the Healthcare for the Homeless program at PHD, conducts quarterly meetings discussing specific homeless persons and how we can best address their healthcare needs. By including a representative of ADMHS in these meetings, a more comprehensive picture of healthcare needs and interventions will be provided, thus supporting better continuity of care.
- ***Providing clarity about release of information across County agencies*** – County Counsel has provided guidance about sharing of information across County agencies. Since PHD and ADMHS are both healthcare providers, clinicians in each of these agencies may share

information to meet the healthcare needs of patients, without any requirement for additional releases of information. This guidance will remove delays in information sharing across providers in these two county departments.

- ***Providing training to PHD clinicians*** - ADMHS has agreed to provide training to PHD clinicians on mental health related topics. Many patients served at PHD may not meet the criteria for service through ADMHS, thus their mental health needs will be met through PHD providers. The additional education will support best practice for those homeless persons with mental health needs that are served through PHD. In addition, ADMHS may also provide training for staff who work in reception and/or other general areas where staff come into contact with homeless persons with mental health needs.
- ***Clarifying expectations of cross-agency referrals*** – Eligibility for services at PHD and ADMHS are based on different criteria. A referral to ADMHS is a service request that will be assessed internally to determine if the individual is accepted for services. When a referral is made to either PHD or ADMHS, the recipient will respond back to acknowledge receipt and inform the individual about their acceptance for services.

Implementing a “Vulnerability Index” assessment to identify the homeless individuals at greatest risk, allowing for more targeted case management

Using a nationally developed “vulnerability index” assessment tool for the homeless, slightly modified to be more specific for Santa Barbara County, the county departments and community partners have initiated a process to identify the homeless individuals in the county at greatest risk for premature death.

- The vulnerability index for Santa Barbara County was developed by the Public Health Department and has been used in various clinic and health fair settings.
- The vulnerability index was used in conjunction with the HCD’s Point In Time homeless count for HUD.
- The most vulnerable homeless will be targeted for case management and supportive housing in coordination with our community partners, such as the Santa Barbara Housing Authority and Bringing Our Community Home.

Homeless persons require an extraordinary amount of time and attention to meet many complex needs. Santa Barbara County provides a unique blend of funding and interventions to meet those needs. The strategies identified and implemented here are intended to improve coordination and decrease gaps in care. It is anticipated that as national Health Care Reform is fully implemented, healthcare needs will be more comprehensively addressed.

Fiscal Analysis:

There are no fiscal or staffing impacts associated with the acceptance of this report.

Special Instructions:

Please email an electronic copy of the Minute Order to PHD Contracts Unit at: PHDcu@sbcphd.org.

Attachments:

Attachment A: Homeless Services Provided by SBC

Authored by:

Dana Gamble, LCSW, Santa Barbara Health Center Administrator

cc:

Ten-Year Plan to End Homeless

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Department of Social Services, Kathy Gallagher

Alcohol, Drug and Mental Health Services, Ann Detrick

Housing and Community Development, Sharon Friedrichson