

Connecting on The Road to Home MONTHLY WEBINAR SERIES - SEPTEMBER 27, 2021

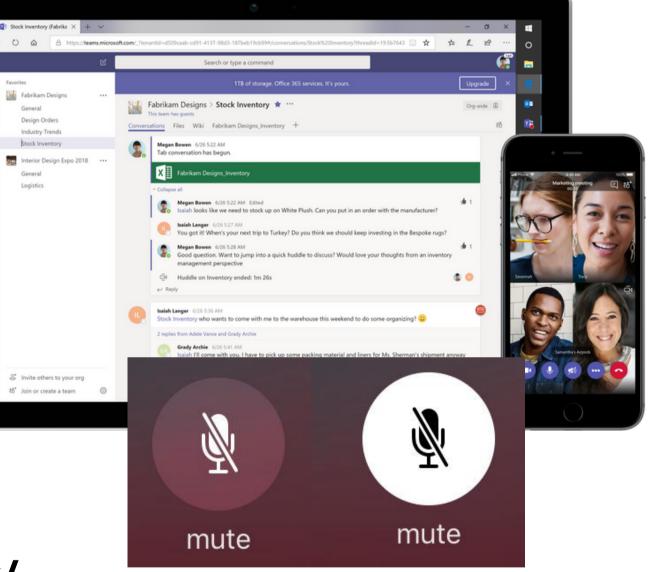


Housekeeping Reminders

Please Mute Your Microphone. Enter Questions in the Chat Box.

A recording of this webinar and copies of the presentation materials will be available online at:

https://homelessness.hawaii.gov/monthly-webinars/



General Updates

Oahu Rent & Utility Relief Program Re-opened on September 16th

- For more information or to apply for assistance go to https://oneoahu.org/renthelp.
- Please also visit https://homelessness.hawaii.gov/eviction-moratorium-resources for information about other rental assistance programs statewide, legal assistance, and information about mediation services.

Continuum of Care Notice of Funding Opportunity (NOFO)

- Partners in Care (PIC) RFP for CoC Competition released on September 13, 2021 with proposals due at 12:00 p.m. (HST) on October 6, 2021. For more information: https://www.partnersincareoahu.org/fy21-coc-application.
- Bridging the Gap RFP for CoC Competition released on September 24, 2021 with proposals due at 5:00 p.m. (HST) on October 14, 2021. For more information: https://www.btghawaii.org/media/uploads/fy2021_btg_coc_program_rfp_final_-_9.24.21.pdf.

Statewide Homeless Awareness Conference (November 19, 2021)

• For more information and to register, go to: https://partnersincareoahu.org/2021-conference.

State ID and Vital Record Assistance

New Website Link: https://homelessness.hawaii.gov/id-assistance

Need a Hawai'i State I.D. but don't have a permanent address?

Facts you need to know about getting an I.D.

1 Can I obtain a Hawai'i State I.D. if I am currently unsheltered and do not have an address? Yes, For homeless individuals, a signed sworn statement from an authorized service provider can be used to verify your primary place of residence.

Is there a fee to get a Hawai'i State I.D.? What about a Hawai'i birth certificate?

- The fee for obtaining an I.D. can be waived for homeless applicants with a letter from an authorized service provider. The Hawai'i Department of Health may waive the fee for homeless applicants requesting a
- birth or marriage certificate through an authorized service provider.

3 Can I still apply for a Hawai'i State I.D. if I lost my Social Security card?

 While you are required to have a valid Social Security number, you do not need to show the physical card when applying for a State I.D.

4 What can I use for a mailing address?

- PO Boxes and General Delivery can be used. Consult with an outreach worker to see if you can use your outreach program's business address to receive mail
- With their permission, use the mailing address or PO Box of a trusted family member or friend.
- individuals to sign up for mail services at their location

Some drop-in centers allow homeless

Are you homeless and seeking help with vital documents? Oahu: (808) 536-4302 Legal Aid Society of Hawaii Statewide: 1-800-499-4302

OFFICE OF THE GOVERNOR'S COORDINATOR ON HOMELESSNESS 586-0193 | GOV.HOMELESSNESS@HAWAII.GOV | HTTP://HOMELESSNESS.HAWAII.GOV This sheet is intended for general information purposes only.

How can I get help to get an I.D. or other documents?

Certificate?

What if I don't have a Social Security card? How can I get a replacement?

What if I need a replacement I-94?

What if I cannot afford the fee for a State I.D. or Hawaii Birth



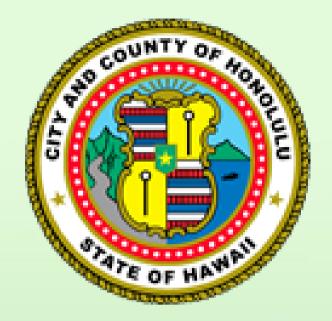
Anton Krucky Executive Director of Housing Office of the Mayor, City & County of Honolulu

Director Krucky will provide an update on the City and County's new C.O.R.E program, which will respond to homelessness-related calls that do not require law enforcement intervention.

Amy Curtis Behavioral Health Administration Hawaii State Department of Health

Dr. Curtis will discuss the expansion of 24-hour stabilization services and intensive case management to Hawaii island, especially for individuals who may be eligible for Act 26 intervention, and will highlight AMHD's broader work to better target services for those with very intensive behavioral health needs.





Office of Housing and Homelessness

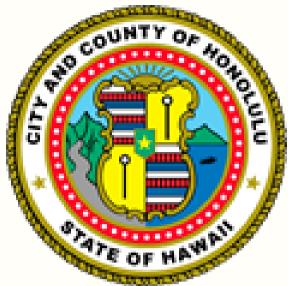
C.O.R.E

Crisis Outreach Response & Engagement

C.O.R.E.

Homelessness is a convergence of health care issues and lack of available affordable housing. Health care issues may include chronic medical conditions, mental health issues and/or alcoholism and drug addiction. It has been clear that Honolulu/Oahu has seen a significant presence of people experiencing various levels of homelessness.

Recognizing there are some types of potential crises that may not be bestaddressed by a law enforcement response, C.O.R.E can carry out its central role of crisis, outreach, response, and engagement in situations that are not otherwise presenting with a danger to others or the community.

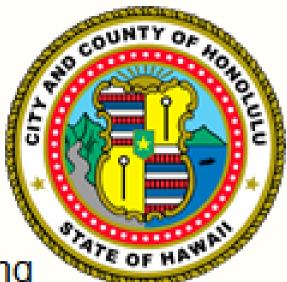


C.O.R.E.

RESPONDING TO THE NEEDS:

The range of responses to health related needs, shelter options, and housing access is complex and diverse. In all cases, the homeless individual plays a key role, as the decision to become sheltered, housed or in treatment lies with them. In many cases, enlisting police and emergency services for situations that are not necessarily criminal in nature, have drawn resources away from actual incidents requiring law enforcement intervention. That being said, the policy oversight is within the Department of Housing and Homelessness. The program will be managed and housed in the Honolulu Emergency Services Department (HESD).

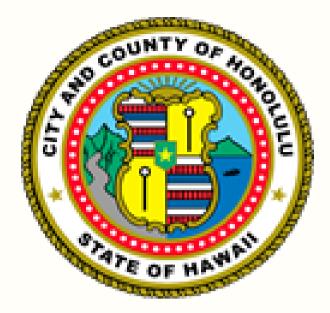
At the center of defining the City's approach to individuals experiencing a crisis and living on the street, is the deep consensus to embrace the person with respect, care, and dignity. This agreement is in the interest of effective planning, collaboration and coordination. With the aspiration of reducing a substantial encumbrance on law enforcement, C.O.R.E. was born.



C.O.R.E

Moving Forward:

The Honolulu Emergency Services Department will adopt the C.O.R.E. program as one of its many divisions. The C.O.R.E. program will be stationed in Iwilei at the Health Services building, next to the Punawai Rest Stop. Initially, teams will consist of trained healthcare, mental health or human services professionals and will respond in an ambulance-style vehicle to assist an individual in need, primarily an unsheltered person.



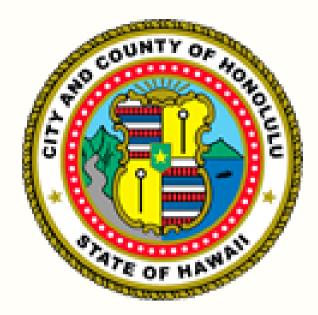
C.O.R.E

The Process:

Calls will come into the 911 Communication Center. The call will either be transferred to HPD or EMS.

C.O.R.E. will be dispatched to the location of the individual in need. During the engagement, the team will determine appropriate care and services. If warranted, a referral to a stabilization agency will be made for follow up care. There will also be a direct line to C.O.R.E. for the public.

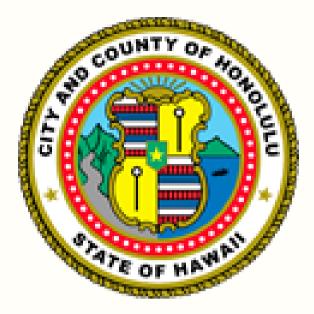
The new program plans to save police efforts and funding, allowing the officers to respond to calls of a criminal or serious nature. C.O.R.E. also plans to see a reduction in EMS response calls that direct individuals to emergency rooms for minor medical care.



C.O.R.E.

Metrics and Evaluation

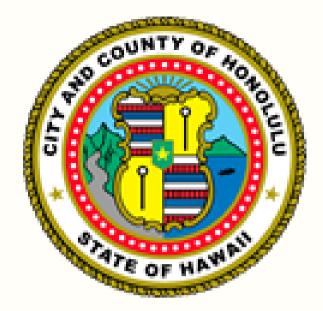
- Unique Individuals Served
- Calls for Service
- Follow-ups and Referrals, Types of Referrals, Placements
- Number Treated in Place
- Number Transported to Shelter/Housing/Medical Facilities
- Direct Mental Health/Substance Use Placement



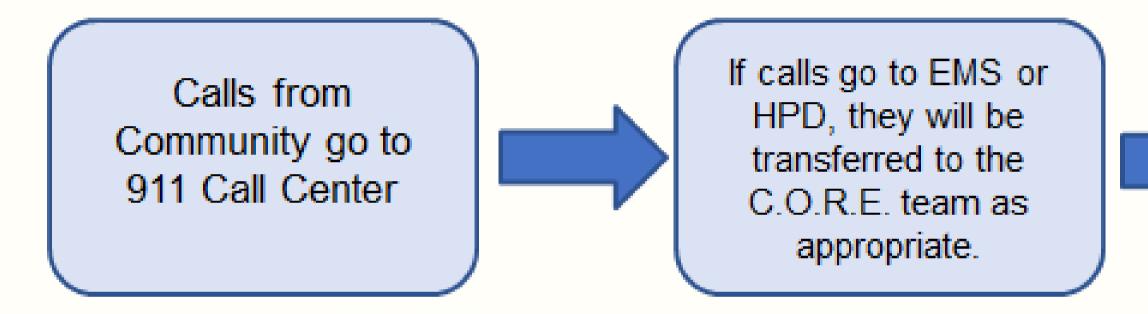
C.O.R.E

Staffing:

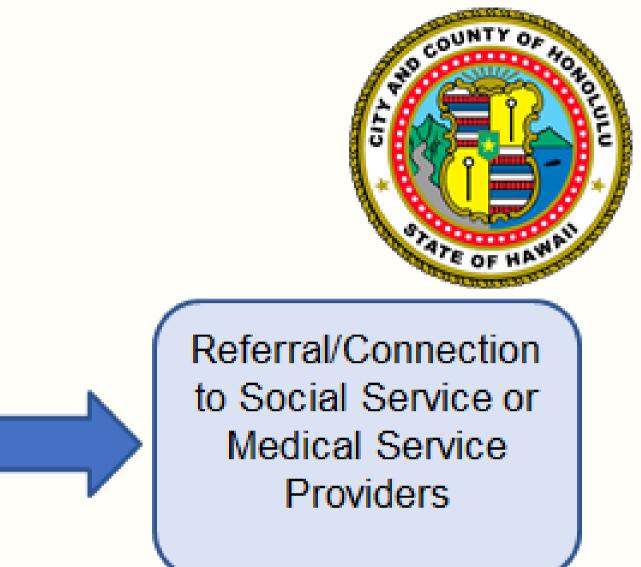
- Six nurse practitioners
- Each vehicle could house two EMTs with one nurse practitioner.

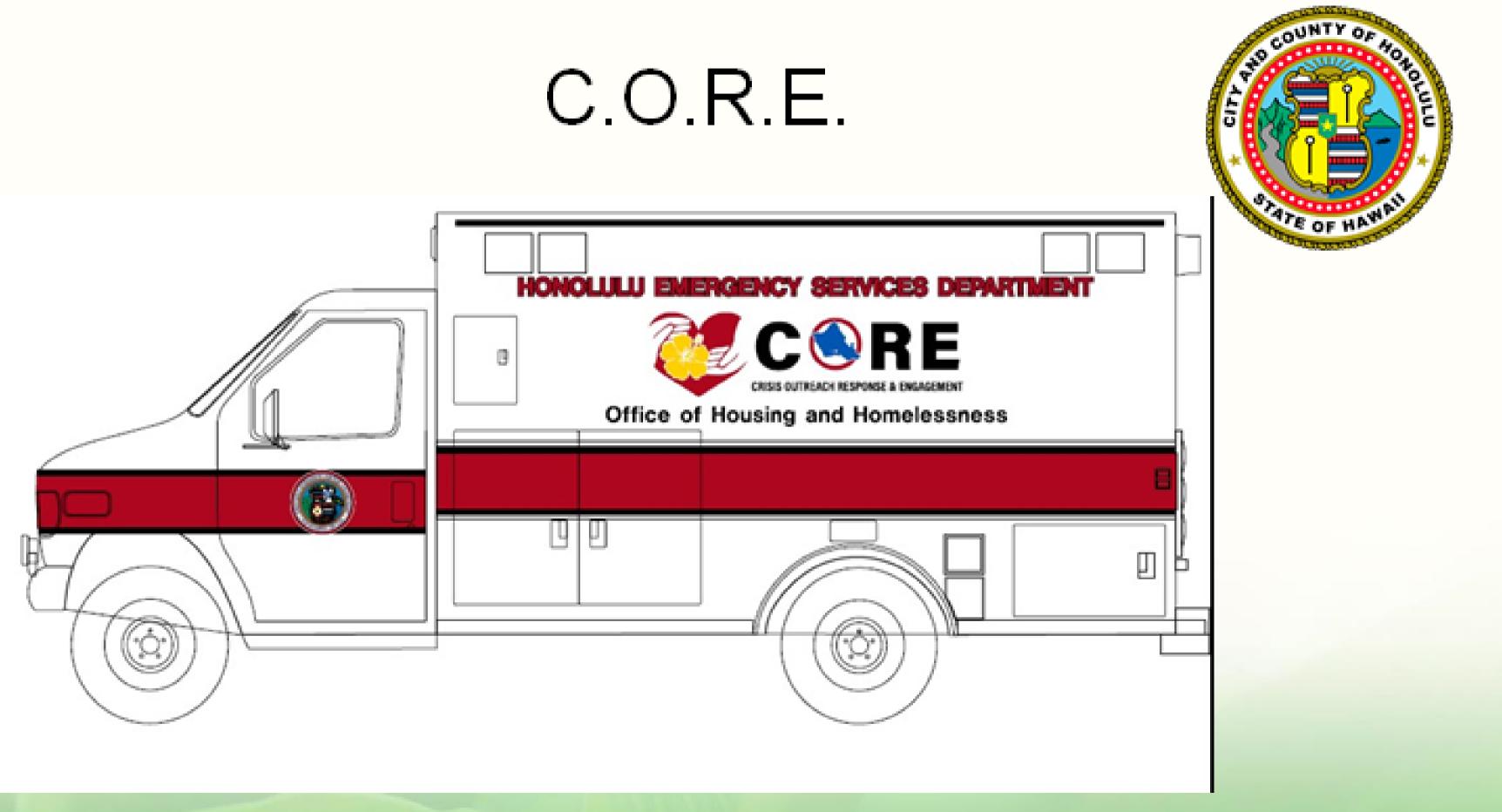


C.O.R.E. Response



C.O.R.E. will respond to citizens, businesses, or agencies who call 911 (HPD or EMS) dispatch or a non-emergency line. The program is meant to respond to a person with an immediate need. If someone who is homeless is stable, regular outreach from providers such as IHS, Achieve Zero, Kealahou West Oahu, Hawaii Health and Harm Reduction Center, etc. will be called.





Mahalo



Act 26 and Bed Stabilization Updates

September 27, 2021

Amy Curtis, Ph.D., M.P.H., Administrator Adult Mental Health Division Behavioral Health Administration Department of Health

Outline

AMHD Services

- 404s
- Act 26 Oahu Pilot Outcomes
- BI

Bed Stabilization (BI)

Role of Peer Specialists



Mental Illness and Justice Involvement

Act 26 Data, Processes, and Outcomes

AMHD Services



AMHD Service Array

Least Intensive

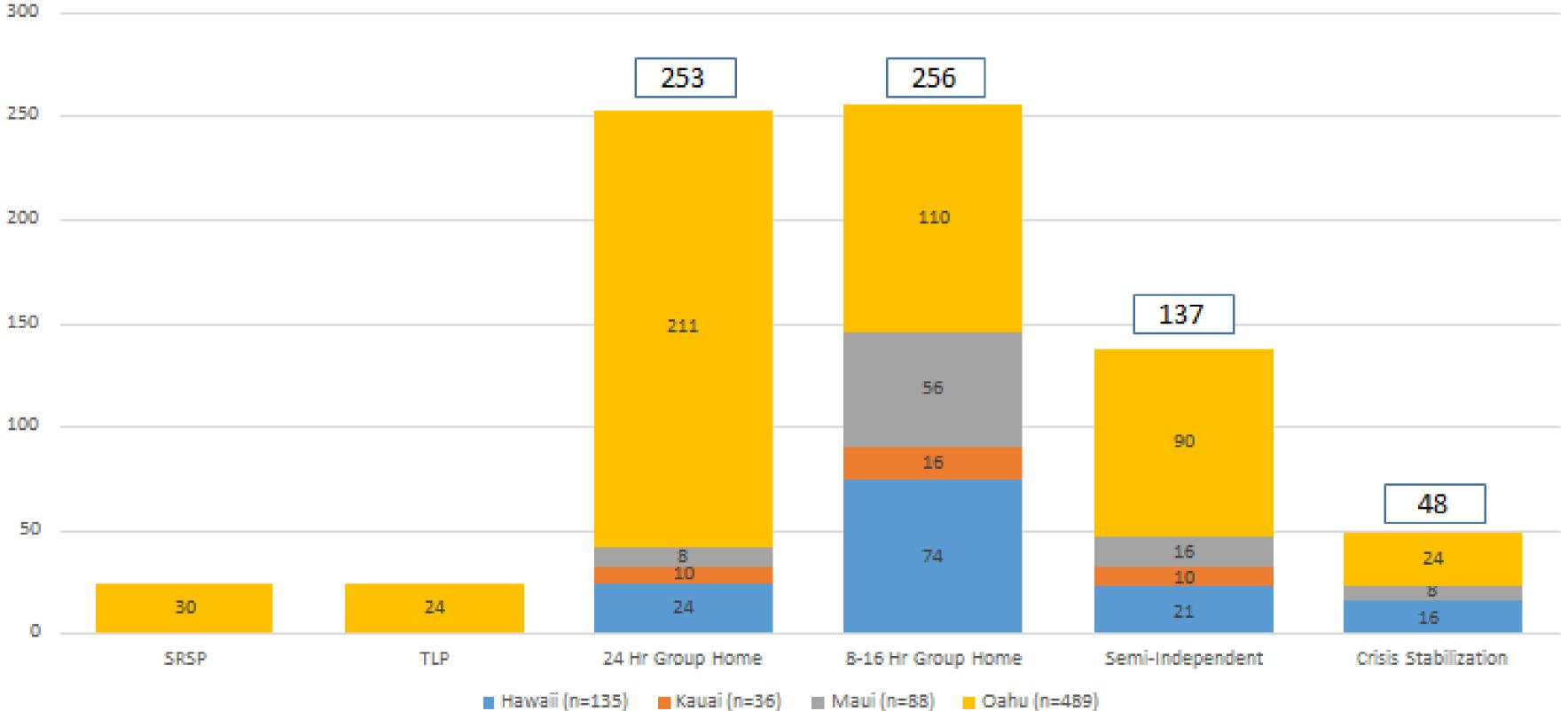
Outreach and Linkages	Recovery Services	Outpatient and Integrated Care		Intensive Community- Based Support	Comprehensive Crisis Services	Inpatient Hospitalization	
Case Management (avail to all AMHD consumers; required for forensic consumers)							
Homelessoutreach Eligibility determination	Clubhouse Peer coaching	Outpt psychotherapy Medication management	Specialized residential services population	Intensive CM (ICM+): -High utilizers	24/7 CARES line Crisis Mobile Outreach	Hawai'i State Hospital Community hospitals	
	Peer specialist Shelter+care (homeless) Supported employment Supported education Representative payee	Day treatment Intensive Outpt Hosp	Expanded adult res care home Therapeutic Living Program 24 hr group home	-Homeless	Crisis Support Mgmt Crisis Stabilization beds Licensed Crisis Res Serv ICM ⁺ based model Disaster services		
			8-16 hr group home Semi-independent housing Supported housing		Mental health emergency worker (MHEW)		

Forensic Services:

Jail-based clinical services * Court-ordered forensic evaluations * Jail diversion * Mental Health Court * Fitness restoration * Conditional Release Exit Support and Transition Program

Most Intensive

AMHD Residential/Housing Services (N=748 beds)



Mental Illness and Justice Involvement



The Mental Health-Criminal Justice Challenge

Arrested more often... More stressed during incarcerated... Incarcerated longer... Not a pathway for access to treatment...

More likely to "fail" community supervision...

Cycle: back before the bench...

*14.5% of men and 31% of women in jails Vera Institute of Justice, Council of State Governments. Justice Center.

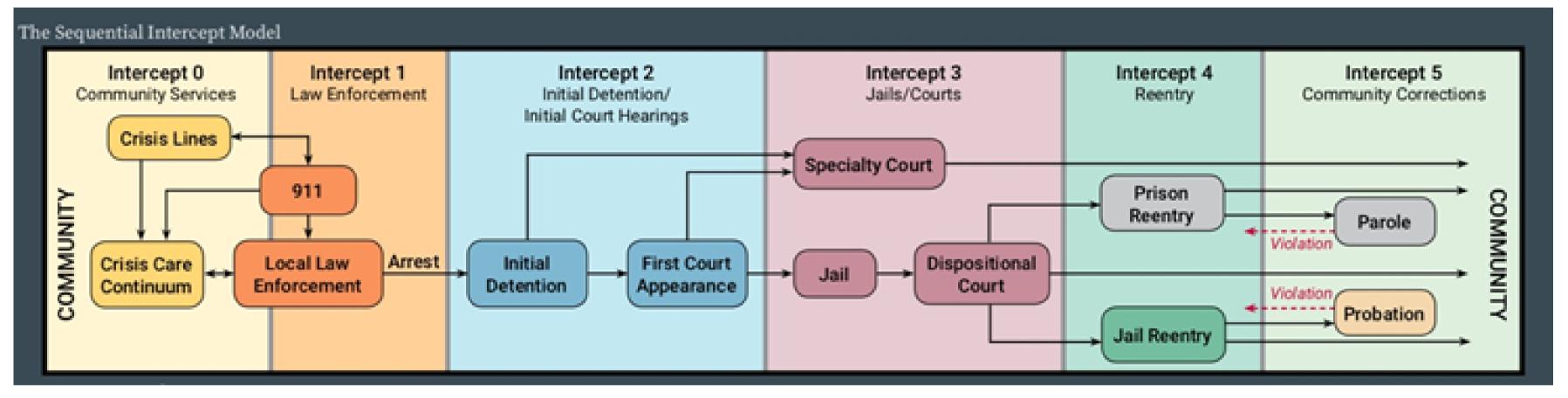
The rate of serious mental illness is four to six times higher in jail than in the general population*

How are we spending our resources?

Housing an inmate with mental illness in jail costs \$31,000 annually, while community mental health services cost about \$10,000 (NAMI 2015) The annual cost of technical violations while on community supervision is \$2.8 billion and people with mental health conditions are 38% more likely to experience a revocation while on community supervision

More than 91,000 competency evaluations were conducted in 2019; researchers also estimate that about half of these evaluations were for people charged with misdemeanors Each year more than 2 million people with serious mental illness are booked into jail (NAMI 2015)

The Sequential Intercept Model



Policy Research Associates (with NIMH grant support) 2005-2018

- Strategic planning tool 1.
- Blueprint for a justice informed mental health system 2.
- Promotes community-based strategies to reduce the involvement of people with mental illness in the 3. criminal justice system and decriminalize mental illness

Act 26 Data, Processes, and Outcomes



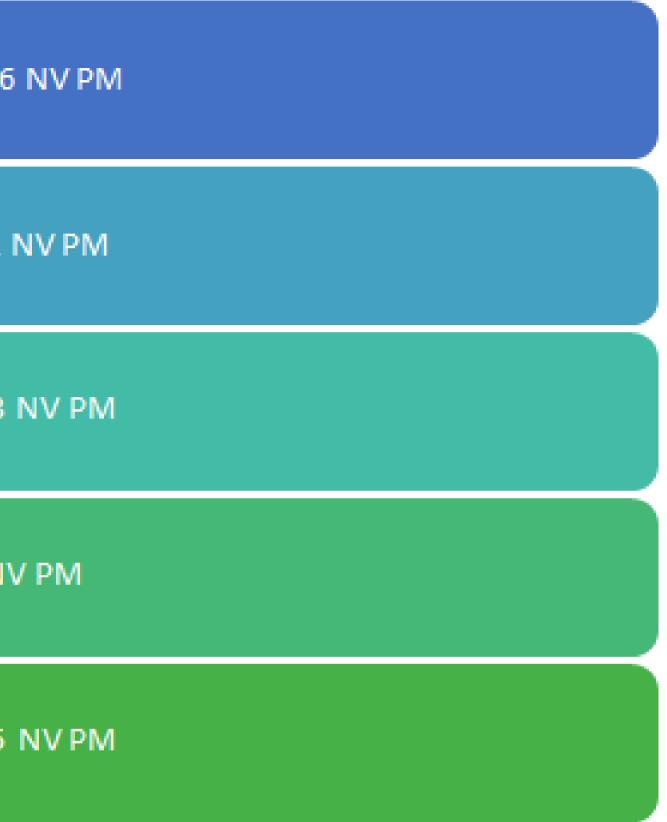
Act 26

- Became law fall 2020
- Allows those with petty nonviolent misdemeanors where fitness to stand trial is a concern to have an expedited fitness review (if courtbased clinician is available) within 2 days and court date within 2 days after that
 - If fitness is an outstanding issue sent to custody of the director of DOH for 7 days
 - During stay with DOH, fitness evaluation is re-evaluated
 - if now fit, return to court
 - If remain unfit, charges are dropped and:
 - can have civil commitment if danger to themselves or others
 - if civil commitment is not appropriate, is discharged with linkage to case management and treatment as willing to accept

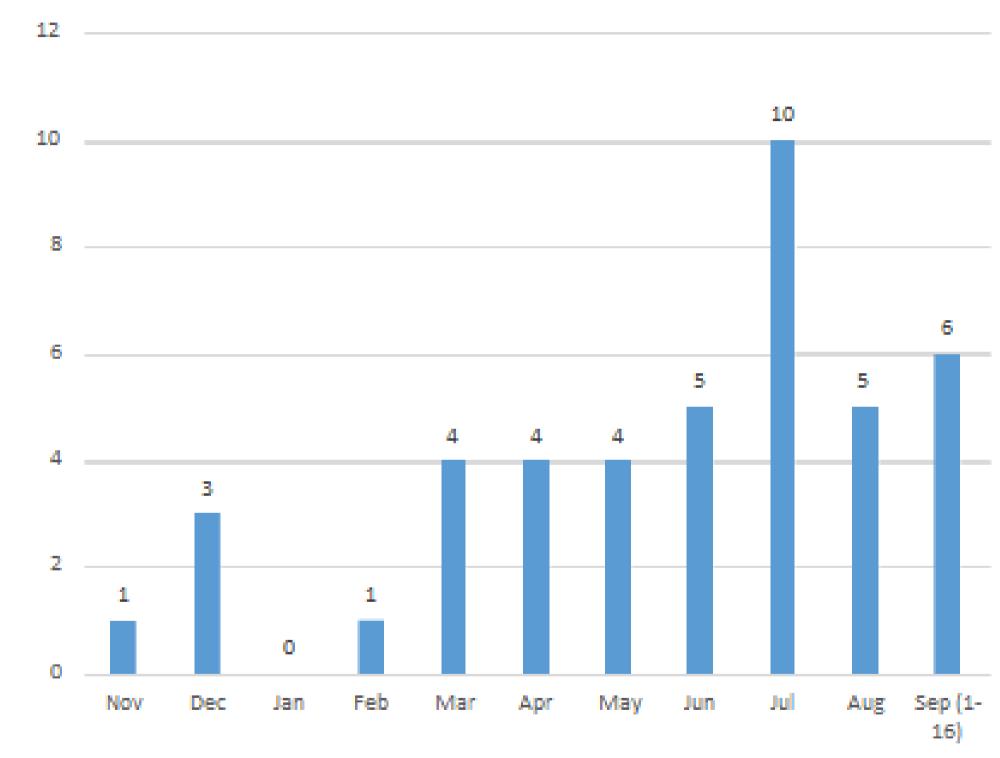
Number of 404 exams Ordered, FY 2019 with NV PM Breakdown

Oahu	453 tot	al 56
Maui	52 total	1
ві	422 tota	al 73
Kauai	110	15 N\
Total	1037	145

59 of the 145 were found unfit and sent to HSH; of those, 45% ended up being civilly committed at the end of the 60 days (when "Act 53" timed out)



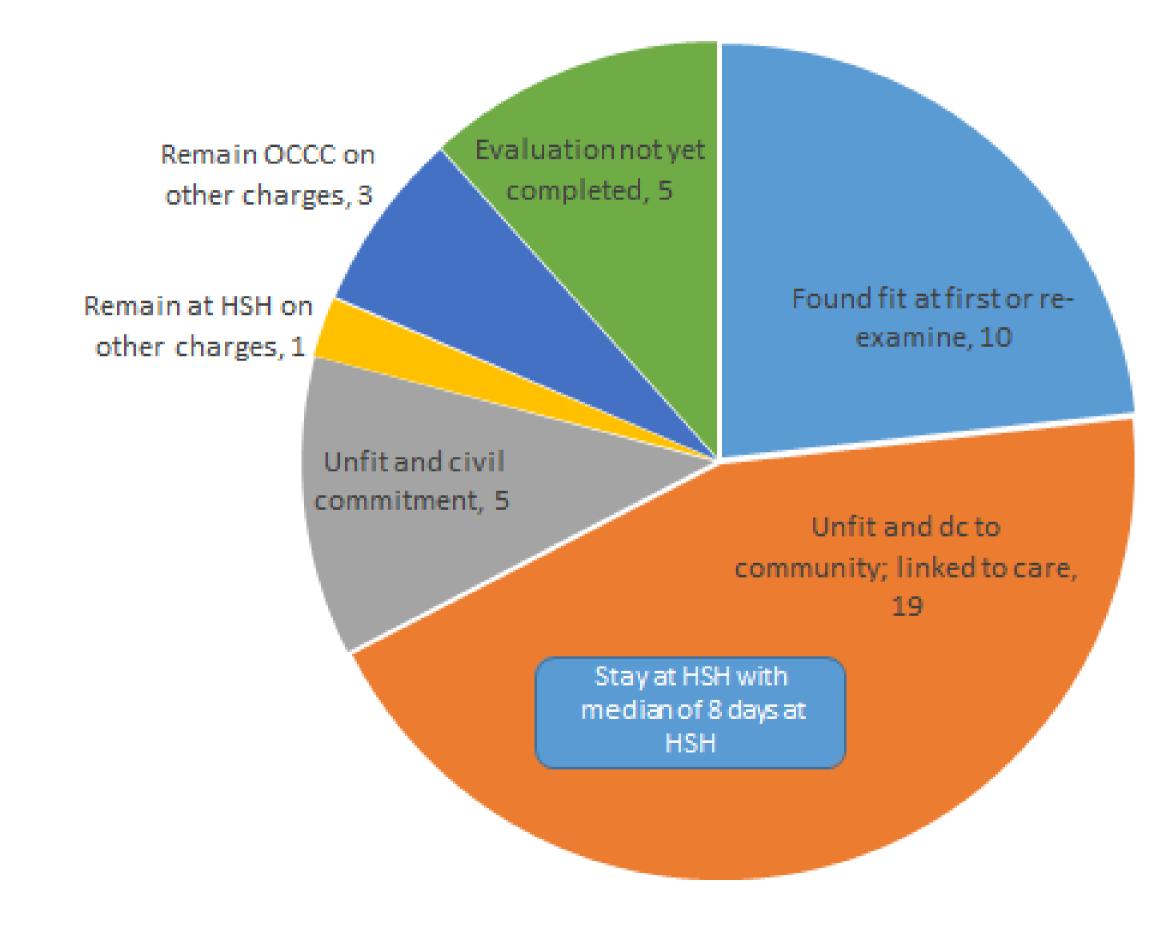
Number of Act 26 Cases by Month



Number

Number

Number of Act 26 Cases by Outcome (N=41)

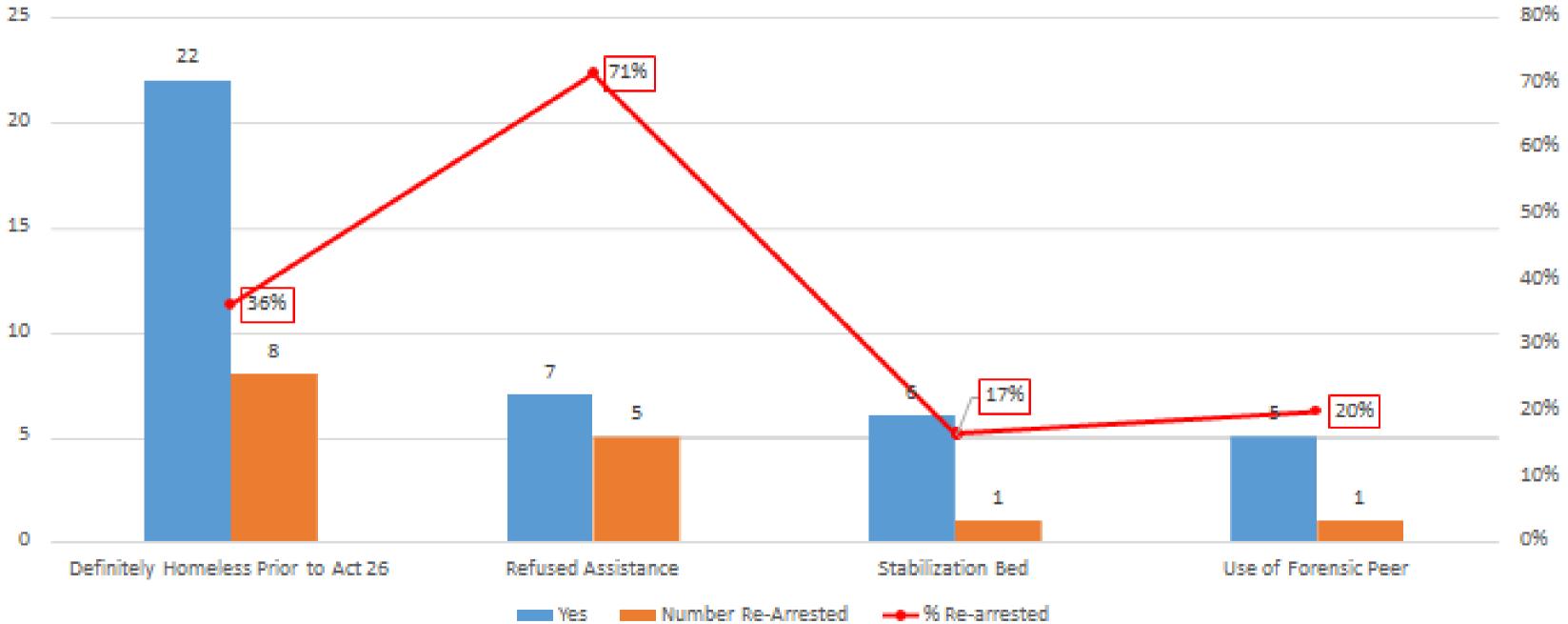


<u>9 re-arrests total of unfit:</u>

- Only 1 that has been admitted to a stabilization bed after HSH
- Only 1 where a forensic peer was utilized

22 of 41 (54%) were known to be homeless prior to arrest

Use of Services, & Re-Arrests of Those Found to be Unfit



Public Health Impact

- 10 (53% of total) individuals found unfit and released to community were able to avoid incarceration, have not been re-arrested, instead were evaluated and linked to services
- Only 1 of those linked to stabilization bed or forensic peer has been re-arrested

Resource Impact

- OCCC has saved approx. \$325,215 due to less inmate stays while waiting for fitness
 - evaluation
- For 22 individuals alone that were discharged to community (n=20) or found to be fit (n=2), HSH has saved \$1,268,696 compared to usual 60-day court-ordered stay
 - while waiting for 2nd fitness evaluation
- For 43 first fitness evaluations, thousands of dollars and over 300 hours of CEB staff time saved
- We estimate over 120 hours of ACSB time saved due to no need for record collection

Role of Peer Specialists and Bed Stabilization on BI



Forensic Peer Specialists

- We currently have 19 qualified certified peer specialist linked to AMHD that qualified to enter the Forensic Peer Specialist training
- 10 of 19 just completed forensic peer specialist training
 - 1 from BI, 1 from Maui, 8 from Oahu
 - Training is intensive over the span of 2 weeks/ 40 hours.
 - Provider is nationally recognized by SAMHSA for their EBP training
- Next Training is being planned for Spring 2022.

Bed Stabilization on Bl

Kona side – near Kona Hospital

Uses intensive case management

Someone on-site 24/7

Referred by calling CARES line

Crisis mobile outreach teams can transport

Opened Aug 30th

*14.5% of men and 31% of women in jails Vera Institute of Justice, Council of State Governments. Justice Center.

Short term bed stabilization: 3-14 days

What Services Are Available on BI for Act 26 Defendants Released to the Community?

Assessment and treatment

Case management

Homeless outreach and less than severe mental illness homeless outreach

Intensive case management

Palekana Elua

Stabilization beds

Forensic peer specialists (Training completed 9/24/21)

Summary and Discussion



Summary

AMHD Services being expanded: stabilization beds and forensic peer specialists

- are not fit and charged with nonviolent PM
- For those who are fit, jail diversion can be used. Act 26 provides pathway for those with mental illness who

outcomes

- Less time waiting for fitness evaluation while incarcerated or in community prior to linkage to mental health services
- Linkages to needed mental health services
- Saves state money and staff time
- Uses bed stabilization and forensic peer specialists in programming

For those with MI and justice involvement:

Act 26 Pilot in Oahu demonstrates promising

Let's Connect!

If you have any questions regarding the webinars, or have suggestions for future topics, please contact our office

Jason Kasamoto GCH Special Assistant 808-208-3712 gov.homelessness@hawaii.gov.





Connecting on The Road to Home

THANK YOU FOR ATTENDING



