Planning Advisory Committee Meeting



### Today's Agenda

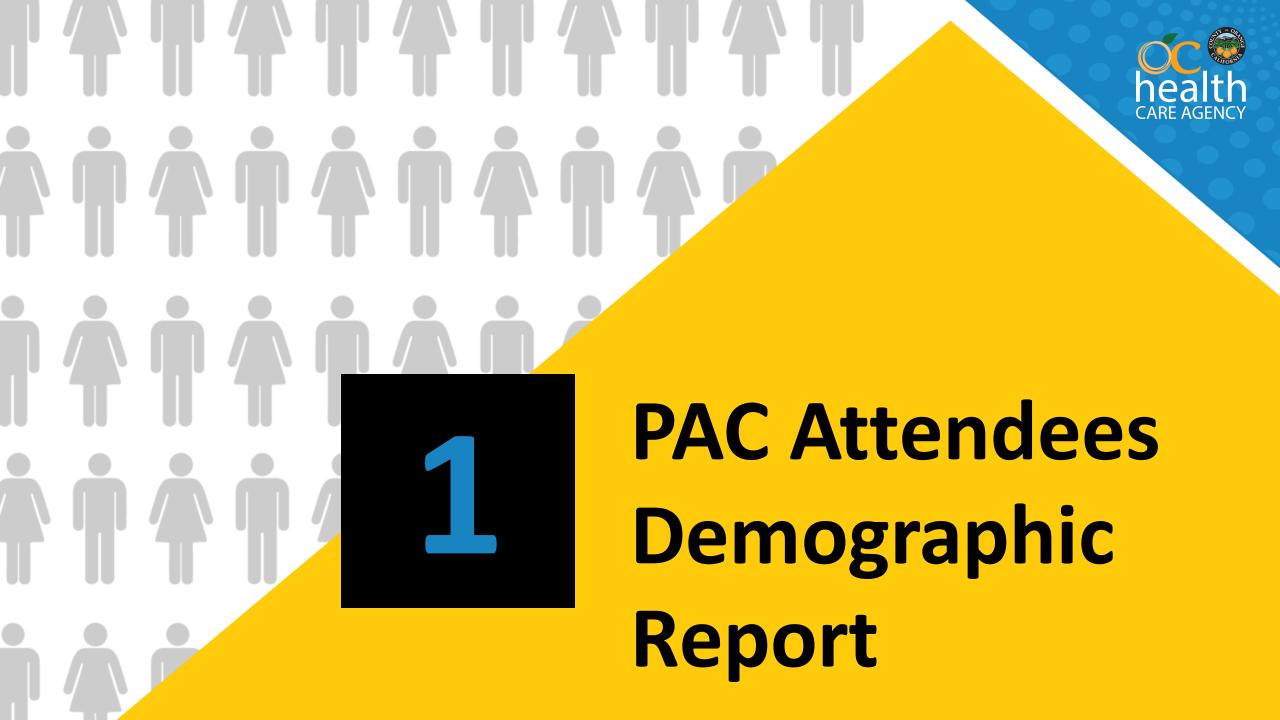
Time	Topic	Presenter
10:00 -10:10	<ul><li>Welcome and Introductions</li><li>Review of MHSA and previous PAC Meeting</li></ul>	Michelle Smith
10:10 - 10:40	Homeless Outreach and Engagement	Christina Weckerly
10:40 - 11:00	Housing Services and Supports	Lisa Row
11:00 - 11:50	Outreach and Housing Panel Discussion	<ul> <li>Facilitator:</li> <li>Michelle Smith</li> <li>Panel:</li> <li>Michelle Manchester</li> <li>Lisa Row</li> <li>Allyson Triglia</li> <li>Christina Weckerly</li> <li>Agatha Wise</li> </ul>
11:50 - 12:00	Debrief, Next Months Priorities, Announcements, and Closing	Michelle Smith
Next Meeting	January 18, 2024 Topic: Infant and Early Childhood Continuum Overview and Update 10:00 am - 12:00 pm Via Zoom	



### Planning Advisory Post Meeting Report





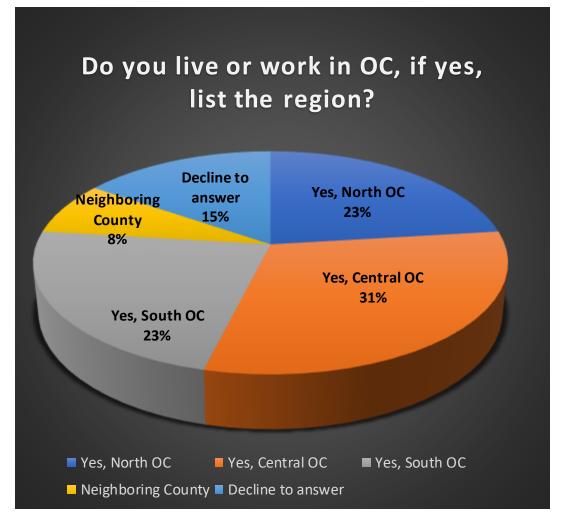


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### **November PAC Attendees Report**

#### November PAC Meeting:

- 88 Registered
- 70 Attended in Person
- 26 Completed Demographic and Satisfaction Survey

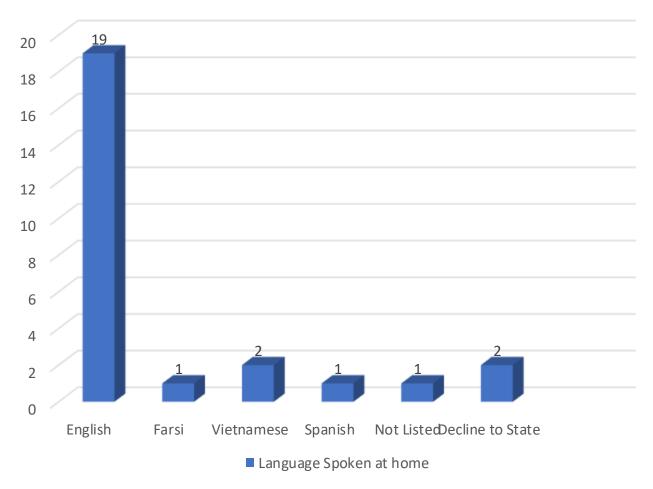


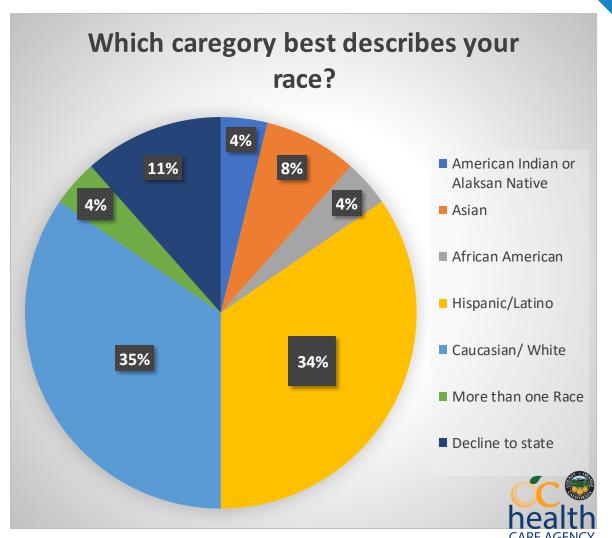


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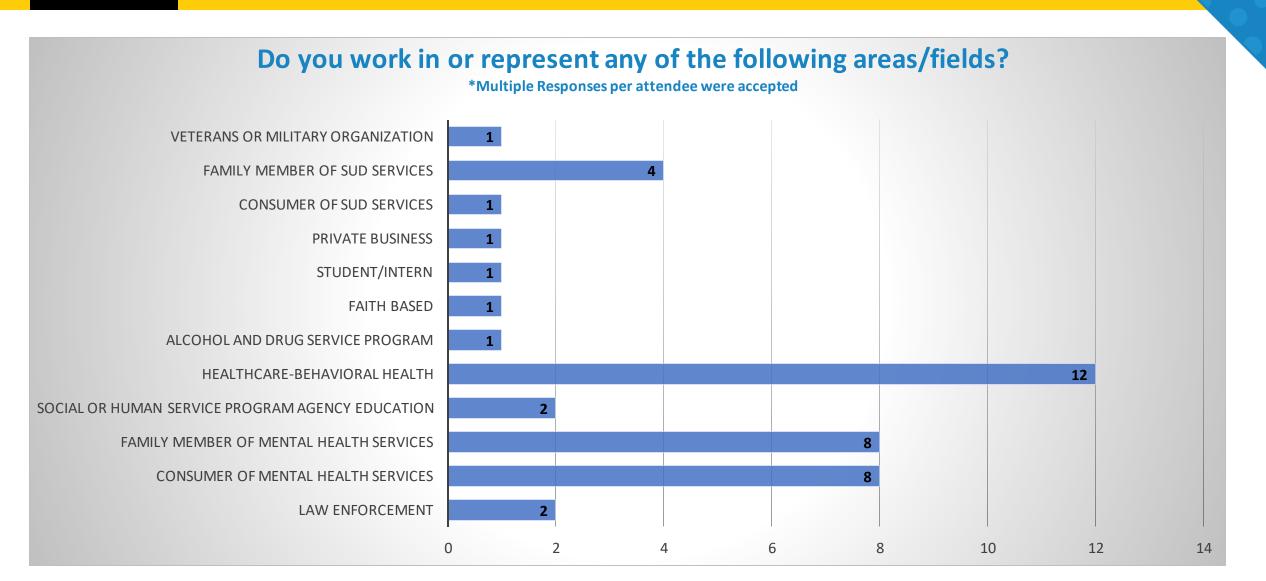






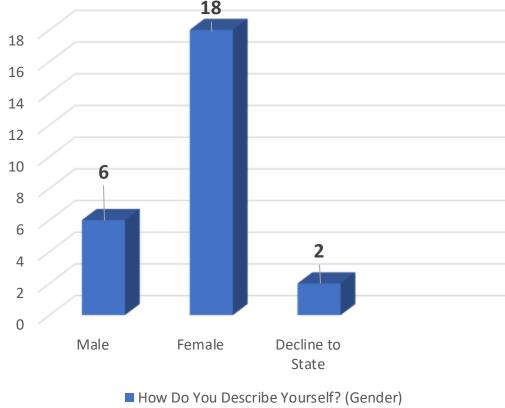
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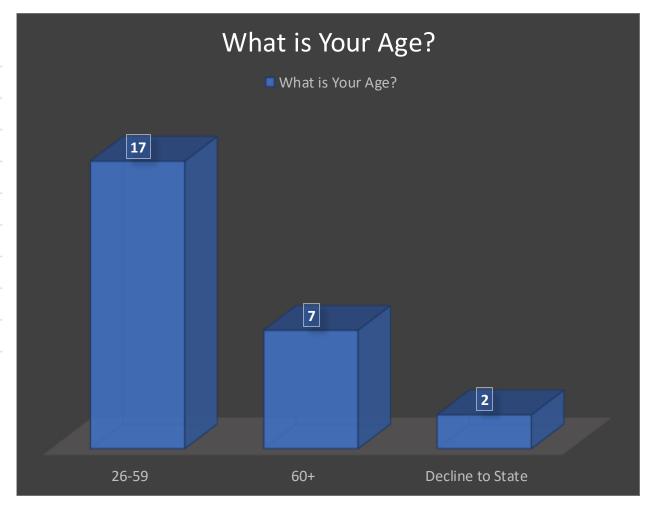
### **November PAC Attendees Report**



### **November PAC Attendees Report**







### What We Heard

#### **General findings:**

- Focus on the one <call> option to access support that has the best chance of being remembered AND has the capacity to respond appropriately.
- Create multilingual materials

## Possible target audience groups called out in the research:

- Youth and students
- Those living with substance use disorders
- Seniors (particularly those in isolation)
- PTSD sufferers/veterans/law enforcement
- LGBTQ+ community
- Unhoused and low-income residents

# Feedback reflected that priorities being seen today include:

- Homelessness
- Substance Use/overdosing
- Isolated Senior population
- Eating disorders
- Current world events triggering stress
- Financial insecurity
- Domestic violence
- Schizophrenia
- Suicidal thoughts



### **Key Messaging Insights**

#### To those who need services:

- 1. Services are available
- 2. How to easily access services, recognizing that their ability to overcome any type of bureaucratic steps might cause them to abandon the effort
- 3. You will be heard and treated with respect, given stigma-free support
- Free and low-cost options will be provided confidentially

# To peers/family/support professionals/school counselors:

- Identifying the signs that someone is likely to need support
- 2. How to easily access services
- 3. How to take the first step



### **Campaign Approach Considerations**

Having someone who can provide a testimonial about these concerns, followed by an appropriate call to action, may help overcome this significant barrier, making communication more actionable.

"When you see people like you, you are more willing to receive help." Have people (actors) describe what a mental health crisis "feels" like. Tap into the emotional side and what to do. Utilize raw emotion.

People who need help are most likely to take direction from people they trust: family and peers.





Our team is here to provide resources to individuals who are experiencing homelessness in Orange County.



### What is Outreach & Engagement (0&E)



#### **Outreach:**

actively reaching out to unserved or underserved populations as the first step to ending their homelessness by providing linkages to help people connect to services and ultimately into the community

#### **Engagement:**

the process by which a trusting relationship between the outreach team and participant is established and comprehensive services are provided on their journey to end their episode of homelessness

### **Strong Roots: Our Story**





- Started as a program with a public health and behavioral health lens reaching high-risk unsheltered substance users
- In 2009: began as BHS 0&E focused on individuals experiencing homelessness
- In 2014: combined to be one BHS outreach team to include a focus on individuals with severe and persistent mental illness
- In 2015: became the "blue shirts"
- On July 1, 2022: implemented an expanded model of care as OC O&E, with the ability to serve anyone experiencing homelessness

### OC O&E's Aim





MHSA Plan: To provide field-based access and linkage to treatment and/or support services for individuals experiencing homelessness and who have difficulty engaging in mental health, housing, and other supportive services on their own.

### **O&E** strives to improve the health and well-being of the population by:

- Connecting with individuals experiencing homelessness where they are at
- Providing cross-sector coordination and services across the continuum of care
- Serving individuals, communities/neighborhoods, and the county

### Who We Serve and How



OC O&E serves: Anyone currently residing in Orange County who is experiencing unsheltered homelessness

#### **Principles:**

- Building trust through human connections
- Developing a sense of community
- Treating others with honesty, dignity, respect, compassion, and equity
- Progressive engagement

#### **Strategies:**

- Person-centered
- No wrong door approach
- Trauma-informed

- Harm reduction
- Motivational interviewing
- Housing First

- Warm-hand off
- Recovery model





# The Team

#### OC 0&E utilizes a multi-disciplinary team comprised of:

Behavioral Health Clinicians Public Health Nurses Mental Health Specialists Field Supervisors and Mentors Addiction Certified Specialists Peers with Lived Life Experience

### What We Do





## Utilizing multidisciplinary and collaborative teams, we serve as:

- Agency ambassadors, navigators, and case managers
- Coordinators for other field-based services and multi-agency responses
- Collaborators through community and multi-disciplinary meetings

Current language capabilities: Spanish, Vietnamese, Farsi



they are

Stories from the field: partnerships and collaboration





### What to expect from 0C 0&E





- Staff point of contact for referrals and follow-up
- Referrals to shelters- Shelter bed reservation system
- Access point for Coordinated Entry System
- Transportation to appointments or bus pass/ride
- Treat whole person with physical health linkage
- Multidisciplinary approach
- Behavioral health assessment and linkage
- Housing First Approach
- Warm link to Regional Care Coordination

### How we Measure Success





FY 22 - 23

- # of contacts: **23,289**
- # case managed: N/A
- Top referrals:
   Housing,
   Document
   Acquisition,
   Behavioral Health
   Outpatient

FY 21 - 22

- # of contacts: **29,424**
- # case managed:
  301
- Top referrals:
   Crisis programs,
   Behavioral Health
   Outpatient,
   Housing

FY 20 - 21

- # of contacts:27,496
- # case managed:
- Top referrals:
   Recovery
   Support Services,
   Housing,
   Behavioral Health
   Outpatient

### Referrals





- Received 24/7 through the program's triage line at (800) 364-2221
- Assigned to regional teams in the Central, North, and South Service Planning Areas for response during business hours
- OC 0&E operates
  - Monday through Friday, 7 a.m. to 7 p.m.
  - Saturday and Sunday, 8 a.m. to 5:30 p.m.



# Contact Us at (800) 364-2221

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Senior Manager (714) 834-8344

cweckerly@ochca.com



# Types of Housing



12/14/2023

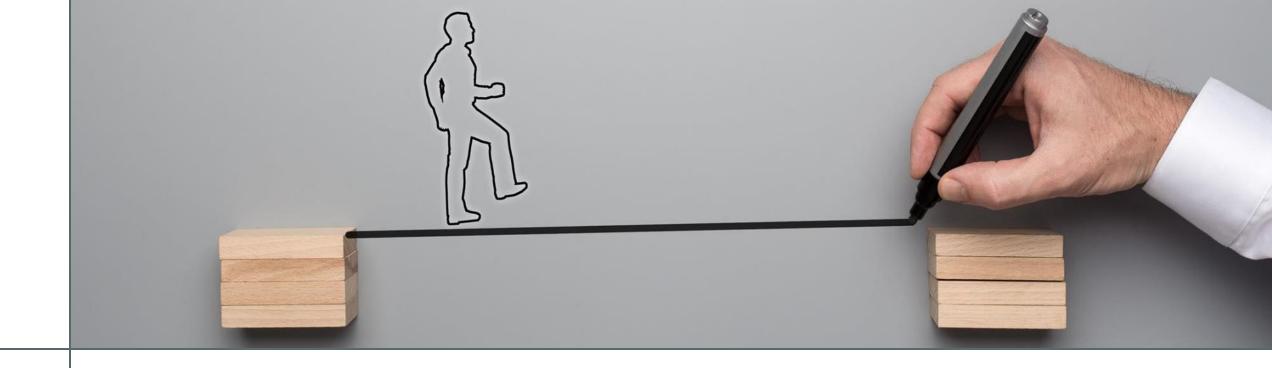


#### **Emergency Shelter**

#### Year-Round Emergency Shelter Program

- This program provides temporary emergency shelter to adult clients experiencing homelessness who are currently enrolled in MHRS County or County contracted outpatient mental health clinics. Length of stay is approximately 180 days.
- MHSA and Realignment





#### **Bridge Housing**

#### Homeless Bridge Housing Program

- This program provides interim housing and intensive housing coordination and navigation. The target population is adult clients experiencing homelessness who are currently enrolled in in MHRS County or County contracted outpatient mental health clinics. The goal is to assist clients in achieving permanent, stable housing. Length of stay is approximately 12 to 24 months.
- MHSA Funded

Behavioral Health Bridge Housing – Coming soon!





#### **Permanent Housing**

#### MHSA Housing

- The MHSA Housing program provides supportive housing apartment units at multiple sites throughout the County for individuals with serious mental illness who are chronically homeless, homeless, at risk of chronic homelessness or at risk of homelessness. Collaborations between the Orange County Housing Authority, Health Care Agency, various developers and property managers have created 444 units thus far with more in development (approximately 300). HCA provides on-site supportive services to MHSA tenants via County contracted FSPs and MHRS Residential Services Coordinators (RCSC). MHRS Housing Supportive Services provides oversight of these services.
- MHSA Funded



### Collaboration/ Partnering Agencies

MHSA is one source of funding that provides permanent supportive housing in Orange County for persons who are experiencing homelessness and are living with a serious mental illness.

#### **MHSA Projects Completed**

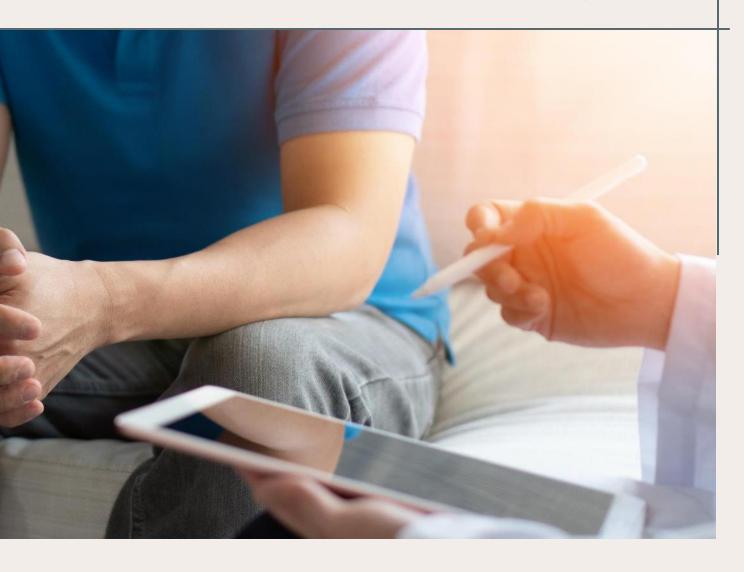
- 24 MHSA Projects
- 444 MHSA Units

#### MHSA Projects In the Pipeline

- 21 Projects at different stages of development
- 303 MHSA Units

Orange County is projecting to have **747** MHSA units within **45** MHSA funded permanent supportive housing projects by 2026.

#### **Board and Care**



- Residential Rehabilitation (Res Rehab)- Licensed community care facilities, the Res Rehab program provides augmented services in addition to the basic board and care services. Services focuses on individual centered rehabilitation mental health services which includes behavioral management services, social skills training, physical activities, individual and group recreational outing, transportation to essential appointment and medication support services. Target population is adults ages 18-59 who are living with a serious mental illness.
  - ✓ SAMSA funded
- Enhanced Res Rehab- Provided within licensed community care facilities, the Enhanced Res Rehab program provides the same services as the Res Rehabs with an added component wherein staff work with clients more exclusively to ensure successful integration into the community. Target population is adults ages 18-59 who are living with a serious mental illness and who are coming from or have a history of placement in Institutions for Mental Disease (IMD).
  - ✓ MHSA funded.

#### Permanent Supportive Housing (funded by MHSA)





#### Permanent Supportive Housing (funded by MHSA)







#### **Debrief**

- Please complete zoom poll!
- January 18, 2024
- Virtual Meeting 10 am 12 pm
  - Infant and Early Childhood Continuum Of Overview and Update

MHSA Office <a href="mhsa@ochca.com">mhsa@ochca.com</a> 714-834-3104

