SUPPORTIVE HOUSING PROJECT

Identifying The Problem

- Lack of behavioral health services leads to incarceration of persons with mental illness
- Arrest and detention is retraumatizing and destabilizing and can result in a crisis
- Consumes millions of dollars in police, judicial, and correctional resources
- Contributes to the overpopulation of the detention center
- Release without services often leads to decompensation and recidivism

The Extent of the Problem

Supportive Housing Plan Development Process

- Weekly planning meetings between County officials, Pretrial Diversion and Jail Health and Human Services
- Monthly meetings between county and community partners to discuss progress
- Monthly planning meetings to coordinate housing resources
- Monthly meetings to review and attend to community needs
- Ongoing feedback and oversight to ensure the success of the initiative

Finding The Solution

- NIDA Memorial Task Force 2012
- HUD-HUD Task Force 2011
- NIDA-DHHS Task Force 2006
- The Integrated Behavioral Health Services Model and Blueprint Study 2012
- National Coalition for the Homeless
- National Alliance to End Homelessness
- National Council on Disability
- National Institute of Justice

Key As Intercept Point with Behavioral Health Services

- At the present time, jail provides initial intake and stabilization services
- Ex-post refills help to identify and connect with less homeless persons in need of services
- Programmatic intake provided to identify, provide, and arrange for appropriate referrals and transitional services
- Community-based services such as MATS are also available in entry point to these services

Best Practices to Be Provided

- Involvement of behavioral health services
- Assessment and acceptance prior to discharge
- Discharge planning
- Continuity of treatment
- Coordination/support for criminal justice requirements
- Wrap-around services
- Long-term planning

Homelessness, Mental Health, and Incarceration

- 1 in 5 of homeless individuals nationally report prior incarceration
- In the local human services study, 87.5% of the homeless study group reported prior incarceration
- 78% of the samples had been in jail in the prior year
- 10% of jail inmates nationally report having been homeless in the prior year
- Persons with mental health problems are five times more likely to have been homeless

Prevalence of SMI

- 1 in 5 in jail inmates have a mental illness
- SMI inmates are more likely to have a history of drug and alcohol use

Impact of Homelessness on Pretrial Detention

- CCP will not approve CCP without housing (2B needed in last 6 months)
- Pretrial Services will not accept Third Party custody without housing
- Risk assessment scores increase without stable housing
- Lack of housing is a predictor of failure to appear in court resulting in higher bonds

Population to be Served

- Persons with mental illness, substance addiction, or behavioral health issues
- Persons on probation, parole, or other special needs
- Persons on parole
- Persons on probation
- Persons on release

Funding Strategies

- County funding: $1.1 million
- 8% of jail inmates needed $1 million

- Emergency rapid rehousing
- $1M grant: request pending $300,000
- 8 year for 8 units
- Additional community resources

Expected System Outcomes

- Increased use of emergent resources
- Fewer inpatient admissions
- Decreased overtime and court filings
- Decreased recidivism
- Decreased jail population
- Decreased need for CYFD
- Decreased need for CYFD
- Decreased need for CYFD
- Increased Public Safety

Expected Individual Outcomes

- Stable housing
- Increased income
- Improved housing stability
- Improved economic stability
- Increased health
- Increased support for sobriety
- Support in meeting medical and social needs
- Improved overall quality of life

Program Structure

Current Justice Diversion

Prevention

Detainment

Rehabsilation
SUPPORTIVE HOUSING PROJECT

IDENTIFYING THE PROBLEM

- Lack of behavioral health services leads to incarceration of persons with mental illness
- Arrest and detention is retraumatizing and destabilizing and can result in a crisis
- Consumes millions of dollars in police, judicial, and correctional resources
- Contributes to the overpopulation of the detention center
- Release without services often leads to decompensation and recidivism

THE EXTENT OF THE PROBLEM

- Finding The Solution
  - HUD Demonstration Task Force 2012
  - National Preventative Task Force 2013
  - National Justice Task Force 2015
  - National Collaborative Planning Initiative 2018
  - Supportive Housing Principles on Behavioral Health and Homelessness 2019

- The Supportive Housing Services Model and Best Practices Study 2009
- The HOME Continuum of Care Model

- Supportive Housing Plan Development Process
  - Weekly planning meetings between County, HUD, Pre-Release, and Jail Health and Human Services departments
  - Weekly meeting of county, city, and funding partners
  - Monthly meeting of behavioral health stakeholders
  - Monthly meeting of jail and mental health stakeholders

- Jail as an Intercept Point with Behavioral Health Services
  - At the present time, jail provides intake and stabilization services prior to housing placement
  - Establishing the jail as a site to identify and connect with some homeless persons in need of services

- Best Practices to be Provided
  - In-reach programming
  - Assessment and acceptance prior to discharge
  - Discharge planning
  - Continuity of Treatment
  - Coordination/support for criminal justice requirements
  - Wrap-around services
  - Long-term planning

- Prevalence of SMI

- Homelessness, Mental Health, and Incarceration
  - 1.6% of homeless encounter, nationally
  - In the local homeless count study, 20% of the homeless study group reported prior incarceration
  - 72% of the local study had been in jail in the prior year
  - 20% of jail inmates nationally report having been homeless in the prior year

- Impact of Homelessness on Pretrial Detention
  - CCP will not approve CCP without housing (CLF needed in last 3 months)
  - Pretrial Services will not accept Third Party Custody without housing
  - Risk assessment score increases without stable housing
  - Loss of housing is a predictor of failing to appear in court resulting in higher bond

- Expected System Outcomes
  - Decreased use of expensive resources
  - Fewer inpatient admissions
  - Reduced arrests and court filings
  - Increased recidivism
  - Decrease in jail population
  - Decreased need for CyFD intervention
  - Cost savings associated with above results
  - Increased Public Safety

- Expected Individual Outcomes
  - Stable housing
  - Increased income
  - Reduced+ recidivism
  - Fewer psychiatric crises
  - Increased health
  - Increased support for sobriety

- Population to be Served
  - Persons with mental illness, substance addiction on receiving case management, cognitive impairments, or other special needs

- Funding Strategies
  - 3M grant: request pending, $300,000
  - 2 year for two years
  - Medical reinvestment
  - Additional financial resources

- Prezi

- Community outreach
Identifying The Problem

- Lack of behavioral health services leads to incarceration of persons with mental illness
- Arrest and detention is retraumatizing and destabilizing and can result in a crisis
- Consumes millions of dollars in police, judicial, and correctional resources
- Contributes to the overpopulation of the detention center
- Release without services often leads to decompensation and recidivism
The Extent of the Problem

Finding The Solution
Prevalence of SMI
Homelessness, Mental Health, and Incarceration

- 54% of homeless individuals, nationally, report prior incarceration
- In the local Heading Home study, 90% of the homeless study group reported prior incarceration
- 27% in the local study had been incarcerated in the prior year
- 15% of jail inmates, nationally, report having been homeless in the prior year
- Inmates with mental health problems are twice as likely to have been homeless
Impact of Homelessness on Pretrial Detention

- CCP will not approve CCP without housing (116 denied in last 6 months)
- Pretrial Services will not accept Third Party Custody without housing
- Risk Assessment Scores increase without stable housing
- Lack of housing is a predictor of failure to appear in court resulting in higher bonds
Finding The Solution

- House Memorial 45 Task Force 2012
- Bazelon Center Task Force 2012
- House Joint Memorial Task Force 2011
- West Mesa Task Force 2009
- Chronic Inebriate Task Force
- Gain's Center Crisis Triage Planning Initiative 2004
- Mayor's Symposium on Behavioral Health and Homelessness 2003
- The Statewide Behavioral Health Services Needs and Gaps study 2002
- Annual Continuum of Care Review

Identified Service Priorities
- Crisis Triage Center with linkage to services
- Supportive Housing identified repeatedly as a critical need
- Specialized services for individuals exiting jails and prisons because of inadequate transition planning and unique needs
Identified Service Priorities

- Crisis Triage Center with linkage to services
- Supportive Housing identified repeatedly as a critical need
- Specialized services for individuals exiting jails and prisons because of inadequate transition planning and unique needs
Supportive Housing Plan Development Process

• Weekly planning meeting for 9 months between County Public Safety Division and City Health and Human Services Division
• Monthly meeting of County, City and participating providers for 9 months
• Monthly meeting of criminal justice working group
• Periodic meeting of sub-working group of criminal justice mental health stakeholders
• On-going input and oversight by Bernalillo County Criminal Justice Review Commission
Jail as Intercept Point with Behavioral Health Services

- At the present time, jail provides triage and stabilization needed prior to housing placement.
- Jail can be the best place to identify and connect with some homeless persons in need of services.
- Persons in jail can be stabilized, assessed, provided an appropriate medication regimen, and transitioned smoothly into community based services.
- Other crisis stabilization services such as MATS could also serve as an entry point into these services.
Population to be Served

- Persons with mental illness, substance addiction, co-occurring disorders, cognitive impairments, or other special need
- Homeless or precariously housed
- Pretrial or sentenced
- Criminal Justice system involved
Program Structure

Project Director

Criminal Justice Stakeholders

Courts

Pretrial Services

Public Defender

PSU

Other law enforcement

County Coordinator

Provider Assessment

Court Approved Release

Judicial Oversight
- PTS
- CCP

Community Providers selected by RFP process
Best Practices to be Provided

- In-reach programming
- Assessment and acceptance prior to discharge
- Discharge planning
- Continuity of treatment
- Coordination/support for criminal justice requirements
- Wrap-around services
- Long term planning

Wrap-Around Services

- Case management in range of 10-15:1
- Vocational assistance where appropriate
- Life skills education
- Assistance accessing public benefits
- Counseling
- Substance abuse treatment
- Access to psychiatry and medical care
- Housing
Wrap-Around Services

- Case management in range of 10-15:1
- Vocational assistance where appropriate
- Life skills education
- Assistance accessing public benefits
- Counseling
- Substance abuse treatment
- Access to psychiatry and medical care
- Housing
Funding Strategies

County Funding Requested $1.1 million
  • 75 units with intensive services

City funding request pending $1.1 million
  • additional 75 units with intensive services

Leveraged funds and services:
  • BJA grant request pending $300,000 a year for two years
  • Medicaid reimbursement
  • Additional community resources

Cost Savings

Jail Population Reduction Savings to Date:
  Reduced out of county beds from October high of 760 inmates:
  $990,000 a month

Jail Population Reduction Savings from Supportive Housing program:
  Annual cost of 75 beds in the jail is $1.85 million (at higher cost of psych services inmates, closer to $2.7 million)
Cost Savings

Jail Population Reduction Savings to Date:
Reduced out of county beds from October high of 700 inmates-$990,000 a month

Jail Population Reduction Savings from Supportive Housing program:
Annual cost of 75 beds in the jail is $1.65 million (at higher cost of psych services inmates, closer to $2.7 million)
• Lack of housing is a predictor of failure to appear in court resulting in higher bonds

Expected System Outcomes

• Decreased use of emergent resources
• Fewer in-patient admissions
• Reduced arrests and court filings
• Reduced recidivism
• Decrease in jail population
• Decreased need for CYFD intervention
• Cost savings associated with above results
• Increased Public Safety
Expected Individual Outcomes

- Stable housing
- Increased income
- Family stability/reunification
- Fewer psychiatric crises
- Improved health
- Increased support for sobriety
- Support in meeting judicial obligations improving opportunity for favorable resolution of system involvement
SUPPORTIVE HOUSING PROJECT

Identifying The Problem
- Lack of behavioral health services leads to incarceration of persons with mental illness
- Arrest and detention is retraumatizing and destabilizing and can result in a crisis
- Consumes millions of dollars in police, judicial, and correctional resources
- Contributes to the overpopulation of the detention center
- Release without services often leads to decompensation and recidivism

The Extent of the Problem

Finding The Solution
- Keep People in Community
- Early intervention
- Behavioral Health Treatment
- Housing
- Support Services

Impact of Homelessness on Pretrial Detention
- CCP will not approve CCP without housing
- CCP needed in last 3 months
- Pretrial Services will not accept Third Party Custody without housing
- Risk assessment scores increase without stable housing
- Lack of housing is a predictor of failure to appear in court resulting in higher bail

Expected System Outcomes
- Decreased use of emergent resources
- Fewer inpatient admissions
- Reduced arrests and court filings
- Reduced recidivism
- Decreased in jail population
- Decreased need for CYFD intervention
- Cost savings associated with above results
- Increased Public Safety

Expected Individual Outcomes
- Stable housing
- Increased Income
- Reduced or eliminated symptomatology
- Increased health
- Increased support for sobriety

Supervised Intensive Inpatient Treatment Program (SIITP)
- Most effective treatment program for severe psychiatric illness
- Medically monitored, medication management
- Intensive care
- Case management
- Medically monitored
- Clinical staff skilled in comprehensive treatment

Population to be Served
- Persons with mental illness, substance addiction, or co-occurring disorders
- Serious mental illness, severe substance addiction
- Have not succeeded in other treatment
- Lost system
- Criminal justice involvement

Funding Strategies
- County funds
- Grant funding
- Federal funding
- Additional community resources

Best Practices to Be Provided
- In-take programming
- Assessment and acceptance prior to discharge
- Discharge planning
- Continuity of treatment
- Coordination/support for criminal justice requirements
- Wrap-around services
- Long-term planning

Homelessness, Mental Health, and Incarceration
- 1 in 10 homeless respondents nationally, report prior incarceration
- In the local Methadone Clinic study, over 50% of the homeless study group reported prior incarceration
- 78% of inmates in a local study had been arrested 10 times or more in the prior year
- 95% of jail inmates nationally report having been homeless in the prior year
- Persons with mental health problems are twice as likely to be homeless