Integration of Care Through Community Partnerships: Housing First, What’s Second?

PVAHCS HEALTH CARE FOR HOMELESS VETERANS SERVICES

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Integration of Care Through Community Partnerships: Housing First, What’s Second?

Presentation Designed To:

- Increase understanding of housing homeless Veterans through:
  - Overview of HCHV /CRRC Services

- Discuss implementation of critical elements:
  - Prevention and transitional homeless veterans programs
  - Benefits and Employment
  - Embedding VA providers in the community

- Housing 1st Initiative and beyond
  - Utilizing effective case management systems
  - Community partners as wrap around services
  - Interventions: Harm Reduction & Mental Health

VETERANS HEALTH ADMINISTRATION
GOAL
• Assist homeless Vets or those in untenable housing situations
• Move homeless Veterans rapidly into stable housing
• Provide homeless prevention services
• Ensure a continuous community based service for our housing needs

Functions as a Service Hub
• Incorporates a Homeless Patient Aligned Care Team (PACT)
• A broad spectrum of needs that include health care, housing and prevention services.
• That provides 6 days a week rapid re-housing services
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CRRC “One-Stop Center”

✓ Co-locate community agency support services

✓ Collaboration with local community-based homeless providers & other Federal & state providers

✓ Future Site to be centrally located within the Phoenix area with close proximity to the PVAHCS

✓ Interim Site on the Human Resource Campus within Lodestar Day Resource Center & CASS, 1125 W Jackson, Phoenix AZ 85007

✓ Transportation linkages from VAMC to CRRC

✓ Community Outreach systems linked to CRRC for Veterans care
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**CRRC**
- Admin Assistant
- Employment Specialist
- Addiction Therapist

**Staffing**
- CRRC Coordinator
- Program Support Assist
- Outreach
- Peer Supports

**HPACT Team**
- Med Support Assistant
- Nurse Practitioner
- RN
- Social Worker
- LPN

VETERANS HEALTH ADMINISTRATION
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Prevention and Outreach
“Where Assessment Begins”

Community Outreach Stake Holders
Programs Outreach Teams
LDRC/CASS Outreach
Transit Enforcement Unit-TEU STOP

Vets

Light Rail
Tele-health
Pet
Bicycle

VETERANS HEALTH ADMINISTRATION
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Prevention and Outreach “Where Assessment Begins”

- Women
- Rural Veterans
- Chronically Homeless
- Seriously Mentally Ill
- Native American
- Special Homeless Populations

VETERANS HEALTH ADMINISTRATION
The proportion of males & females who cited Economic reasons was about equal

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Prevention and Outreach “Where Assessment Begins”

CRRC

Women Veterans

2000-2012 Women Veteran Health Care Services doubled to 354,000

15% of Active Duty Military

18% of National Guard & Reserve Forces

Females more likely than males to cite Interpersonal reasons

The proportion of males & females who cited Economic reasons was about equal

Females more likely than males to report Eviction as a reason for becoming homeless

VETERANS HEALTH ADMINISTRATION
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CRRC

22 Native American Tribes

Pollen Circles
Navajo Traditional Healing

Veteran Justice Outreach
Southern Navajo County (Holbrook)

Bringing Nations Together

Indian Veteran Population

(The Department of Veterans AIAN 2012 Report)
The VJO initiative is designed to:

Prevent homelessness by connecting eligible justice-involved Veterans with needed mental health, substance abuse, and other VA services, when possible, as an alternative to incarceration or other traditional criminal sanctions.

About 50% of homeless Veterans are believed to have a lifetime history of incarceration.
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VJO Initiative Program Goals

- Provide support, information & resources for transition from the justice system to the community
- Reduce impact of medical, psychiatric & substance abuse issues
- Build a network of care that includes VA & non-VA resources
- Decrease re-incarceration rates
- Prevent homelessness
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**VJO**

Assessment & Intervention

- Court Docket Review
- Intake Assessment
- Attorney / Probation/ RBHA/ Judge
- Jail Visit /Transport
- Strengths Based Intervention
- Probation / Attorney Follow up
- Forensic Psych Staffing
- Coordinate Treatment Placement
- Court Monitors Treatment & Completion

VETERANS HEALTH ADMINISTRATION
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Community Transitional Housing

- 5 Transitional Homeless Programs
  - 191 Beds
- 2 Contract Housing Programs
  - 70 Beds

Capacity of 261 Beds
Community Transitional Housing

- Average Stay 90-120 Days
- Maximum Length of Stay 6 to 24 Months
- Program Specialties
  - Employment Services
  - Benefits
- Advantages
  - Levels of case management & Support
  - Assessment over a period of time
  - Structure
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VA Supportive Housing 1st Initiative

- HUD-VASH Case Management
- 655 Section 8 Vouchers
- Multiple Community Partnerships

Enhance Housing 1st Initiative Package

Assertive Community Treatment

Tenant & Project Based

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VASH Housing 1st Initiative

Assertive Community Treatment
(An evidence based practice)

A team that provides:

- Case Management
  - Initial/Ongoing Assessments
  - Psychiatric Services
  - Employment & Housing Assistance
  - Family Support & Education
  - Substance Abuse Services

Other services & supports critical to live successfully in the community.
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VASH Housing 1st Initiative Package

30 Social Work Case Managers

4 Substance Abuse Case Managers

5 Veteran Peer Supports

3 VASH Supervisors

2 Nurses

1 Rec Therapist

2 Psychiatrist for Consultation
Project H3: Home, Health, Hope

• Housing homeless, connect wrap-around services
  ➢ April 19-23, 2010 ACEH with over 50 agencies conducted survey
  ➢ VASH vouchers (Veterans), Supportive Housing “vouchers” (ABC) & project based units from Arizona Housing, Inc.
  ➢ 36 teams out of 170 community volunteers canvassed the streets of targeted areas in Phoenix, Mesa and Glendale

• Outcomes
  ➢ 262 individuals experiencing street homelessness
  ➢ 106 (40%) were found to have health conditions associated with a high mortality risk & 21% were Veterans
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Project H3

• Goal: First 50 Most Vulnerable to be Housed

- 1st vulnerable homeless housed was a Veteran in 2010
- 1st VASH to nationally utilize housing 1st initiative
- United Way funded H3VETS Program 2011 (Veteran surveys conducted on Nov. 7, 8 and 9, 2011)
- Dec 2011 VHA Memo, all VAMC to participate in Project H3 events
**Housing 1st Initiative**

Different philosophies and interpretations

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**Utilizes Harm Reduction**

- Works on needs and goals identified by veteran
- Raises awareness of risk and strategies to reduce harm
- Prioritizes risks that may cause serious harm
- Offers user friendly services

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**Motivational Interview**

- Open ended questioning
- Affirming, validating feelings
- Reflective Listening, ensuring common understanding
Housing 1\textsuperscript{st} Initiative

(Utilizes Harm Reduction Cont.)

- **Summarizing**, transition and/or focus the discussion
- **Roll with Resistance**, empathetic reflection and problem solving

STAGES OF CHANGE

**VALUE OF STAGES OF CHANGE**

- Normal for persons to try to change several times
- Relapse is normal
- Interventions should match person’s stage
- Resistance is often the result of not understanding where a person is at
- Focus on raising awareness & increasing motivation to change
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Housing 1st Initiative

(STAGES OF CHANGE Cont.)

Pre-contemplation

Contemplation

Preparation

Action/ Early Recovery

Middle Recovery

Maintenance
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Housing 1st Initiative

• Assessment Process Is Critical
  ✓ Chronic Homelessness
  ✓ Barriers Perpetuating Homelessness
  ✓ Co-Occurring Disorders
  ✓ Developmental Disorders
  ✓ Housing as Intervention vs. Placement
  ✓ Therapeutic vs. Non-Therapeutic
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Housing 1st Initiative

- Bringing the Hospital to the Home
  - Mental Health Case Management
  - Substance Abuse Case Management
  - Medical Nurse
  - Peer Support

- Emphasis on Recovery and Independence
  - Navigating & Connecting to Resources
    - Connecting to Support Groups
    - Following up with health care services
    - Maintaining a Healthy Life Style
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