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|----------------------------|---|-------------------------|---------------|
| Priority: | Safety Net Services | Lead Agency: | County Human |
| Program Offer Type: | Existing Operating | Program Contact: | Nancy Winters |
| Related Programs: | 25046, 25055, 25056 | | |
| Frameworks: | Poverty Framework, 10-year Plan to End Homelessness | | |

Executive Summary

Staff facilitate referral, screening, placement, treatment planning and follow-up services for severe and persistently mentally ill adults requiring licensed, structured, residential housing; monitor clients and facilities for health and safety, ensure ORS', OAR's, and Administrative Rules for licensure are met, and ensure licensed capacity is not under or over utilized.

Program Description

This program has five FTE Mental Health Consultants (MHC), designated as Residential Specialists. One MHC is dedicated to the development of new structured, licensed residential beds in Multnomah County which directly links this program to the 10-year Plan to Eliminated Homelessness. Other staff work to place severely and persistently mentally ill adults in structured, licensed housing. The Residential Specialists provide comprehensive community supports and services, as well as oversight for vulnerable individuals, in two hundred eighty-nine structured, licensed, residential beds that provide a continuum of structured care in the community including: sixteen-bed Secure Residential Facilities(locked facilities), sixteen-bed Residential Treatment Facilities, five-bed Residential Treatment Homes, five-bed Adult Foster Care Homes, and Relative Adult Foster Care.

Residential Specialists function as gatekeepers of all referrals for structured, licensed, residential mental health care in Multnomah County, facilitating screening and placement in residential facilities, and completion of Residential Plans of Care for all clients. They work with public and private partnerships to create seamless service delivery and maximize cost-effectiveness. Residential Specialists monitor critical incidents, identify and address service gaps, provide technical assistance aimed at follow-up and resolution, train staff in residential facilities, and assist in the development and siting of residential facilities.

The program also serves clients of the Psychiatric Security Review Board (PSRB). PSRB clients have been convicted of a crime in Oregon under the insanity plea and are under the jurisdiction of PSRB. Residential Specialists provide the same array of services, described above, for PSRB clients who are deemed ready for community placement. The Residential Services supervisor authorizes discharge from the Oregon State Hospital and the placement of PSRB clients.

Program Justification

The Residential Services program links directly to the Basic Living Needs Priority, the Poverty Framework, and the 10-Year Plan to End Homelessness by ensuring a client's ability to meet his/her basic needs, especially the need for adequate, stable and affordable housing. It facilitates client discharge to the community from local acute care psychiatric facilities and the Oregon State Hospital, increasing client independence and freeing up limited resources. It links to the Safety Priority by providing for client and community safety, through monitoring of clients as they return to the community.

Performance Measures

Total Number of Referrals, Total Number of Residential Placements, and Percent Referrals Placed in Residential Settings. The percentage of placements links directly to housing availability and reflects improved community capacity. Total Number of Individuals Monitored.

Average Decrease in Inpatient Psychiatric Days Per Client During 12 Months Before and After Start of Residential Monitoring.

Average Decrease in Days Between Inpatient Psychiatric Hospitalizations Per Client During 12 Months Before and After Start of Residential Monitoring.

The primary goal of the residential program is to help the most severely mentally ill people live in the community and not the hospital. While many of the individuals being monitored will require hospitalization the goal is to lengthen the time between hospitalizations and decrease the total hospital days which reflects improvement in behavioral health.

Summary of last year's program results and this year's expected results

Total Number of Referrals FY04 was 265.

Total Number of Placements FY04 was 110.

Percent of Referrals Placed FY04 was 42%.

Total Number of Individuals Monitored FY04 was 339.

Average Decrease in Inpatient Psychiatric Days Per Client During 12 Months Before and After Start of Residential Monitoring is a new measure for FY06.

Average Decrease in Days Between Inpatient Psychiatric Hospitalizations Per Client During 12 Months Before and After Start of Residential Monitoring is a new measure for FY06.

Program Mandate: 3 Program Choice but No Funding/Service Level Choice

ORS 161.295 – ORS 161.430, ORS 192.690, ORS 428.210 & ORS 430.041
 OAR 309.032-0450 – 309-032-0515

Revenue/Expense Detail

| | Proposed General Fund | Proposed Other Funds | Proposed General Fund | Proposed Other Funds |
|---------------------------|-----------------------|----------------------|-----------------------|----------------------|
| Program Expenses | 2005 | 2005 | 2006 | 2006 |
| Personnel | \$235,992 | \$0 | \$397,515 | \$100,503 |
| Contracts | \$820,034 | \$844,099 | \$180,000 | \$1,365,691 |
| Materials & Supplies | \$3,884 | \$0 | \$3,884 | \$0 |
| Internal Services | \$14,674 | \$0 | \$183,825 | \$3,098 |
| Subtotal: Direct Exps: | \$1,074,584 | \$844,099 | \$765,224 | \$1,469,292 |
| Administration | \$0 | \$0 | \$18,095 | \$51,210 |
| Program Support | \$0 | \$0 | \$51,753 | \$59,423 |
| Subtotal: Other Exps: | \$0 | \$0 | \$69,848 | \$110,633 |
| Total GF/non-GF: | \$1,074,584 | \$844,099 | \$835,072 | \$1,579,925 |
| Program Total: | \$1,918,683 | | \$2,414,997 | |
| Program FTE | 0.00 | 0.00 | 5.00 | 1.00 |
| Program Revenues | | | | |
| Intergovernmental | \$0 | \$844,099 | \$0 | \$1,469,292 |
| Program Revenue for Admin | \$0 | \$0 | \$0 | \$110,633 |
| Total Revenue: | \$0 | \$844,099 | \$0 | \$1,579,925 |

Explanation of Revenues

This program is a combination of State General Funds (\$1,469,292) and ITAX dollars (\$765,224).

Significant Program Changes

Dollars from State of Oregon, Department of Human Services, Office of Mental Health and Addiction Services provided for the addition of one FTE Residential Specialist, dedicated to community structured housing bed development. The staff is responsible for recruitment, siting, training and technical assistance.