


HOMELESS & HOUSING RESOURCE CENTER

Trauma Informed Outreach and Engagement Learning Community

Session #4
Providing Behavioral Health Care in Unsheltered Environments



August 2, 2022



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Disclaimer



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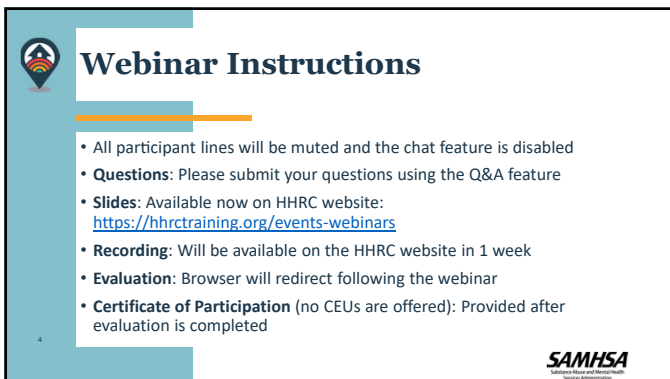
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ASL Interpretation and Transcription

- We have arranged for ASL interpretation services during this meeting. The ASL interpreters are:
 - Justin Anderson
 - Katie Lambe
- Live transcription is available
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 - Subtitles can be moved within the window and re-sized
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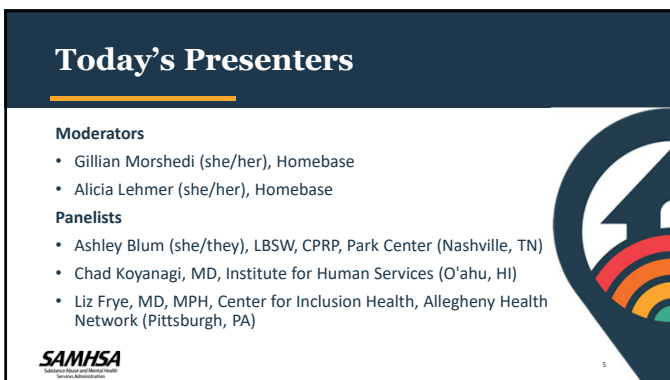


Webinar Instructions

- All participant lines will be muted and the chat feature is disabled
- **Questions:** Please submit your questions using the Q&A feature
- **Slides:** Available now on HHRC website: <https://hhrctraining.org/events-webinars>
- **Recording:** Will be available on the HHRC website in 1 week
- **Evaluation:** Browser will redirect following the webinar
- **Certificate of Participation** (no CEUs are offered): Provided after evaluation is completed

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Today's Presenters

Moderators

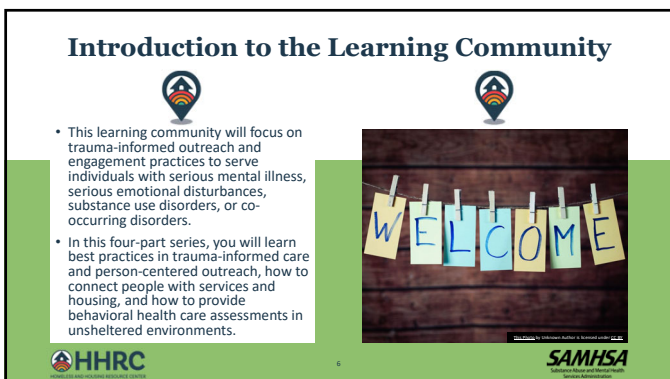
- Gillian Morshedi (she/her), Homebase
- Alicia Lehmer (she/her), Homebase

Panelists

- Ashley Blum (she/they), LBSW, CPRP, Park Center (Nashville, TN)
- Chad Koyanagi, MD, Institute for Human Services (O'ahu, HI)
- Liz Frye, MD, MPH, Center for Inclusion Health, Allegheny Health Network (Pittsburgh, PA)

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Introduction to the Learning Community

- This learning community will focus on trauma-informed outreach and engagement practices to serve individuals with serious mental illness, serious emotional disturbances, substance use disorders, or co-occurring disorders.
- In this four-part series, you will learn best practices in trauma-informed care and person-centered outreach, how to connect people with services and housing, and how to provide behavioral health care assessments in unsheltered environments.

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Learning Community Series

- Session 1 Trauma-Informed Care: Responding to the Trauma of Homelessness
- Session 2 Best Practices for Person-Centered Outreach
- Session 3 Making the Connection to the Homeless Response System
- Session 4 Providing Behavioral Health Care in Unsheltered Environments




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Recap of Sessions 1-3: Trauma-Informed Care, Person-Centered Outreach

Trauma Informed Care	Role of Person-Centered Outreach	Outreach and Engagement Best Practices
Key Concepts: Time and Trust	Homeless Response System	Cross-System Connection




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Today's Learning Objectives

- Understand potential needs associated with SMI, SUD, and SED for people living in unsheltered environments
- Learn benefits of assessing behavioral health needs and providing care to people working toward housing
- Identify strategies and tools used to assess behavioral health needs and provide care to people in unsheltered environments



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Poll #1: Tell Us About Yourself!

• Which would best describe the focus of your work?

- Behavioral health care
- Physical health care
- Homeless services
- Housing
- Social services
- Outreach





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Poll #2: Working with People Experiencing Homelessness

How much of your work is with people experiencing homelessness?

- **100%** dedicated to serving people experiencing homelessness
- **Most** of our program participants are experiencing homelessness
- **Some** of our program participants are experiencing homelessness
- **A few** of our program participants are experiencing homelessness







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Poll #3: Ability to Prescribe Medication


Are you a prescriber / able to prescribe medication?

- Yes
- No


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Understanding the Need

People living unsheltered with Serious Mental Illness (SMI), Substance Use Disorders (SUD), Serious Emotional Disturbance (SED) or co-occurring disorders

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Key Barriers to Behavioral Health Care for People Living Unsheltered

-  Lack of safe, stable housing/environment
-  Difficulty identifying and diagnosing conditions
-  Little or no access to mainstream behavioral health care providers
-  Disconnect between homeless response and health systems

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Meeting the Needs of People Living Unsheltered with SMI, SUD, SED

- Services and treatments (including medications) designed to be trauma-informed and work specifically with the realities of living unsheltered
- Interim behavioral health care, including harm reduction and overdose prevention, while awaiting housing resources
- Support procuring ID or documents necessary for accessing varied resources, including insurance, medications, and certain other behavioral health services and treatments
- Connections to ongoing, community-based mental health care and/or substance use treatment, including peer supports

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Benefits of Assessing and Providing Care in Unsheltered Environments

- 1 Provide care to highly vulnerable people
- 2 Reduce barriers
- 3 Prepare for traditional medical care
- 4 Learn about people's living environment

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Key Concepts and Evidence Based Practices

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Unsheltered Assessments

Key Concepts <ul style="list-style-type: none">• Safety• Confidentiality• Environment	Practical Tips <ul style="list-style-type: none">• Be concise• Review consent• Identify person's goals for visit• Gather needed information• Do no harm
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Trauma-Informed Care Refresher

A strengths-based service delivery approach grounded in understanding of and responsiveness to impacts of trauma. Emphasizes physical, psychological, and emotional safety for both providers and survivors, and creates opportunities for survivors to rebuild a sense of control and empowerment.

Realize the widespread impact of trauma and understand potential paths for recovery	Recognize signs and symptoms of trauma in people you are working with	Respond by fully integrating knowledge about trauma into policies and practices	Resist re-traumatization of people you're working with and for
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Evidence Based Practice: SBIRT

- Screening: quickly assess the severity
- Brief Intervention: increase insight/awareness and motivation
- Refer to treatment: access to specialty care

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SBIRT on the Street

Screening	Brief Intervention	Refer to Treatment
<ul style="list-style-type: none"> • Ask Permission • Use Short Validated Tools where possible 	<ul style="list-style-type: none"> • Person-centered and non-confrontational • Improve insight and enhance motivation 	<ul style="list-style-type: none"> • Emergency room • Detox center • Outpatient care • Ongoing engagement



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Techniques for Brief Intervention



<p>Motivational Interviewing</p> <ul style="list-style-type: none"> • Conversations about change • Help enhance motivation for both harm reduction and treatment/abstinence • Remember: PACE & OARS 	<p>The 5 As</p> <ul style="list-style-type: none"> • Ask • Advise • Assess • Assist • Arrange
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Best Practice: Harm Reduction

- Focuses on meeting people where they are to help them minimize the risks associated with behaviors that can cause harm, such as substance use.
- Honors a person's autonomy (control and choice) in defining their path and timeline while still promoting greater health and safety.
- Success is measured by positive behavior change, no matter how big or small.
- Critical for street-based care for people with serious mental illness and/or substance used disorders




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Practitioner Panel



Discussion and Questions & Answers


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Panelist Introductions

- Ashley Blum, LBSW, CPRP
 - Homeless Outreach Services Director, Park Center (Nashville, TN)
- Chad Koyanagi, MD
 - Community Psychiatrist, Institute for Human Services' Street Medicine Team and Psychiatric Hospitalist, Adventist Castle Hospital (O'ahu, HI)
- Liz Frye, MD, MPH
 - Street Psychiatrist, Center for Inclusion Health, Allegheny Health Network (Pittsburgh, PA)

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Discussion & Q&A




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Closing Poll

What is one thing you will take into your work based on what was shared today?

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Series Overview

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Evaluation and Certificate of Participation

<https://lanitek.com/P?s=852744>

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Thank You!

SAMHSA's Homeless and Housing Resource Center provides high-quality, no-cost training for health and housing professionals in evidence-based practices that contributes to housing stability, recovery, and an end to homelessness.

Contact Us:

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