


HOMELESS & HOUSING RESOURCE CENTER

Low-Barrier Shelter Models for People Who Use Drugs



November 14, 2023



1


Disclaimer



The Homeless and Housing Resource Center is a program operated by Policy Research, Inc. and developed under grant 1H795M083003-01 from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS). Interviews, policies, and opinions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.


2

ASL Interpretation and Transcription

- We have arranged for ASL interpretation services during this meeting. The ASL interpreters are:
 - Pamela Mitchell
 - Dave Gratzler
- Live transcription is available
 - Click Live Transcript  and then select Show Subtitle
 - Subtitles can be moved within the window and re-sized
- If you are experiencing technical difficulties, please contact info@hhrctraining.org

3



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 within 1 week
- **Evaluation:** Link will be shared at the end and browser should redirect you
- **Certificate of Participation** (no CEUs are offered): Provided after the evaluation is completed

SAMHSA
Substance Abuse and Mental Health Services Administration

4

National Health Care for the Homeless Council:

- Mission Statement: Grounded in human rights and social justice, the National Health Care for the Homeless Council's mission is to build an equitable, high-quality health care system through training, research, and advocacy in the movement to end homelessness.
- Since 1986, NHCHC has brought together thousands of health care professionals, medical respite care providers, people with lived experience of homelessness, and advocates. Our 200+ Organizational Members include Health Care for the Homeless programs, respite programs, and housing and social service organizations across the country.

What We Do

- We work to improve homeless health care through training and technical assistance, researching and sharing best practices, advocating for solutions to end homelessness, and uplifting voices of people experiencing homelessness.

What You Can Do


- Learn more about how you can help support our mission: www.nhchc.org

NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL **GET INVOLVED**

5

Self-care

- These can be difficult topics as they intersect with our personal and professional experiences.
- In this webinar we discuss substance use and harm reduction. These topics may feel uncomfortable and what is discussed may be different than your personal beliefs or experience, and that is ok.
- Please take care of yourself as you need to.




NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL

6

Agenda

- Introduction to Low Barrier Shelters
- Examples from the Field
 - Camillus House - Miami, FL
 - Beacon House - Philadelphia, PA
- Panel discussion
- Q & A



NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL

7

Speakers

Jenny Gomez, LCSW (she/her/hers) – Director of Behavioral Health Services, Camillus House, Miami, Florida

Dale Tippett (he/him/they) – Director of Homeless Services, Prevention Point, Philadelphia, Pennsylvania

Kate Gleason Bachman, MPH, RN, WCC (she/her/hers) – Clinical and Quality Improvement Nurse Manager, National Health Care for the Homeless Council

Romel Castejon, Content Expert, Miami, FL

NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL

8

Low Barrier Shelter Basics

- **What does it mean to be low barrier?**
- Low barrier encompasses multiple models and individual components can be implemented based on community and organizational needs
- Consider:
 - Sobriety requirements
 - Intake process - establishing harm reduction approaches and expectations
 - Harm reduction approaches - focus on safety, overdose prevention
 - Supports for participants
 - Curfew and bed retention policies
 - Bag checks/use on site policies
 - Referrals: housing, substance use treatment, medical care
 - Retention in shelter - safety focused, collaborative approach

NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL

9


10

Learning Objectives

- Discuss essential characteristics of low-barrier programs to improve access to services for people who use drugs
- Learn strategies for addressing common challenges in implementing low-barrier shelter access
- Overview:
 - About Camillus House
 - Services provided
 - What are low barrier shelters?
 - Programs and Admissions
 - Camillus YoUniversity
 - Residential Treatment
 - Human Trafficking
 - Housing
 - Training and Education
 - IDEA Syringe Exchange
 - Safety and Harm Reduction
 - Challenges
 - Lived Expertise
 - Questions


11

About Camillus House

Our Mission:
 Rooted in the compassionate Hospitality of St. John of God, we improve the quality of life of those who are vulnerable and homeless in South Florida through the provision of a continuum of housing and supportive services.

12



Hospitaller Order of Saint John of God
Province of the Good Shepherd in North America

<https://siog-na.org/locations/>

- Albuquerque, New Mexico**
 - The Good Shepherd Center was founded in 1951 and provides food, clothing, shelter, health services, emergency assistance, and community resources. It also serves as a service outlet for other homeless programs that do not provide residential shelter including emergency medical and post-hospitalization aftercare and health care for homeless referrals.
- Momence, Illinois**
 - The Good Shepherd Manor was founded in 1981 as a residential facility that serves the needs of men with intellectual and developmental disabilities who are not capable of earning their own livelihood or meeting their basic needs in a non-structured environment.
- Westville Grove, New Jersey**
 - For nearly 50 years, St. John of God Community Services has proudly provided services to thousands of children and adults with disabilities. The participants developed their own coffee grounds called Holy Grounds Coffee. To buy some of their coffee visit: <https://www.holygroundcoffeeid.org/>
- Hamilton, Ontario Canada**
 - Good Shepherd Centre started as a men's hostel in 1961 and has grown to become the greater Hamilton area's largest social service agency providing hope, unconditional love, dignity and respect, committing to compassion, acceptance and understanding of the human condition by providing food, shelter, and rehabilitative programs focusing on harm reduction.
- Toronto, Ontario Canada**
 - The Good Shepherd Centre was established in 1963 and is a shelter providing services to the homeless and disadvantaged; Barrett House, a supportive housing residence for people living with HIV/AIDS; and St. Joseph's Residence, a supportive housing residence for seniors with a history of homelessness.
- Montreal, Quebec Canada**
 - The Brothers in Montreal serve the residents at Residence Les Deux Aires, a retirement community for those with a history of homelessness.

13



Camillus House Services

- ▶ Day center
- ▶ Emergency shelter
- ▶ Residential substance use and mental health treatment
- ▶ Human trafficking
- ▶ Transitional and permanent housing
- ▶ Homeless prevention
- ▶ Specialized street outreach
- ▶ Job training and placement
- ▶ Health care and disease prevention
- ▶ Behavioral health and maintenance

14



DAY CENTER
TOTAL NUMBER OF ESSENTIAL SERVICES PROVIDED: 75,232
NUMBER OF UNIQUE CLIENTS SERVED BY DAY CENTER: 3,731
BREAKDOWN OF SERVICES PROVIDED:

16,362	16,162	15,740	15,516	9,174	5,308
MEALS	REFRESHMENTS	CLOTHING SERVICES	HOUSING SERVICES	EMERGENCY SERVICES	OTHER
21%	21%	21%	20%	24%	7%

195,017 MEALS SERVED TO THE HOMELESS

99% OF CAMILLUS HOUSE PERMANENT HOUSING RES-CLIENTS MAINTAINED HOUSING

15,912 VOLUNTEER HRS SUPPORTED OUR PROGRAMS

WHO WE SERVE
OF 8123 CLIENTS SERVED IN HOUSING AND SERVICES PROGRAMS:

AGE	# OF PERSONS	% OF TOTAL
17 YRS OLD	728	9%
62 YRS OLD	1543	19%

ALMOST 30% WERE UNDER 17 OR OLDER THAN 62 YEARS OLD (VULNERABLE POPULATIONS)

70% MALE 29% FEMALE 1% OTHER

FAMILIES
1,389 FAMILY MEMBERS SERVED THROUGH CAMILLUS PERMANENT HOUSING & HOMELESS PREVENTION PROGRAMS

- 344 HOUSEHOLDS
- 40% OF FAMILY HOUSEHOLDS ARE CHILDREN <17 YRS OLD

THOSE NEEDING HEALING

- 235 UNIQUE CLIENTS SERVED IN MENTAL HEALTH & ADDICTION PROGRAMS
- 600+ HOURS OF GROUP THERAPY PROVIDED
- 40% OF INDIVIDUALS COMPLETED RESIDENTIAL SUBSTANCE ABUSE TREATMENT

HOUSING PROGRAMS

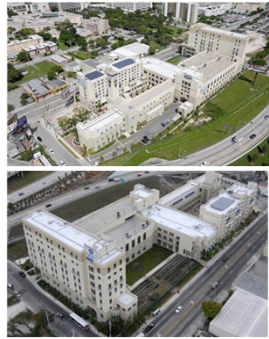
1,398	235	115	1,311	356
EMERGENCY HOUSING CLIENTS SERVED	CLIENTS RECEIVED RESIDENTIAL TREATMENT	CLIENTS WERE PROVIDED TRANSITIONAL HOUSING	RESIDENTS LIVE IN CAMILLUS PROVIDED PERMANENT HOUSING	RAPID REHOUSING CLIENTS MOVED INTO PERMANENT HOUSING

3,415 UNIQUE CLIENTS SAFELY HOUSED

15

What are low barrier shelters?

- Do not require the following in order for an individual to stay at the shelter:
 - criminal background checks, credit checks, or income verification
 - sobriety
 - identification
 - medication compliance
 - program participation (depending on the type of program)
 - allow pets
 - less rigid rules, more focus on autonomy and self-determination
- They may, however, enforce safety requirements for self, staff, and others, such as:
 - no weapons
 - no drugs or paraphernalia on campus
 - no threatening/physically aggressive behaviors towards others



16

Day Center

- First 100 unsheltered individuals can enter daily to access day center services which include:
 - Hot meals
 - Showers
 - Clean clothes
 - Laundry room
 - Mail room
 - Job placement
 - Housing referrals
 - Library
 - Computers
 - Camillus YOUniversity classes
 - Various therapeutic activities



17

Emergency Housing

- 294 beds in a congregate setting
- Various providers have contracted beds
- Assigned a case manager upon admission, clinician available upon request
- Length of stay depends on the funding source (24 hour beds, 30, 60, or 90+ days)
- Can request extensions depending on need and availability
- Check in with case manager once a week
- Curfew is 10pm, but can obtain late pass from case manager if working or going to be late
- Everyone is given up to 3 days to miss bed count before losing their bed (case by case basis)
- Kennel for up to 18 pets, supplies and food provided, mobile vet clinic once a month, dog park on campus
- Provided with all 3 meals, clothing, laundry, training programs, employment services, referral to substance use and mental health treatment
- Medical and psychiatric care available on site



18



22

Residential Substance Use and Mental Health Treatment

Co-Occurring Recovery (CORE)

- Self-referred or referred by community agencies
- 3-6 month treatment for mental health and/or substance use disorders
- Includes: pre-treatment, residential levels 2, 4, day/night, outpatient, and aftercare

State Opioid Response (SOR)



- Self-referred or referred by community agencies
- 3-9 month treatment for opioid/stimulant use disorder
- Includes: pre-treatment, residential levels 2, day/night, outpatient, and aftercare
- Highly encouraged to be on Medication-Assisted Treatment (MAT)

Jail Diversion

- Individuals referred by the 11th Judicial Mental Health Court or Federal Court for misdemeanors or felonies with a primary severe mental illness (SMI) diagnosis
- Includes Veteran Treatment Court and Marchman Act beds

Grant for the Benefit of Homeless Individuals (GBHI)

- 5 year SAMHSA grant provides up to 6 months of extended treatment for those who need longer time
- Provides assistance with employment, disability benefits, and housing


23




Human Trafficking

- Low barrier shelter model
- Accepts individuals 24/7 with staff answering hotline calls, coordinating safe rescues and immediate admissions
- Safe space with assigned badge access where only the individuals and staff in the program can enter the area
- Separate showers, living room, kitchen, and patio from the rest of the shelter
- Self referred or referred through various agencies
 - Homeland Security, State Attorneys Office, Department of Justice, hospitals, police, other shelters or community agencies
- Can stay up to 2 years and referred to housing when ready
- Provided with medical, psychiatric, and substance use treatment if needed and at their own pace

24



Brother Bill Bridge Housing

- Transitional housing for individuals with a chronic history of homelessness who use drugs; sobriety is not a requirement
- 12 remodeled 2 or 3 bedroom units, housing a total of 28 individuals
- Referred through coordinated entry
- When they feel ready, they are referred to their own permanent supportive housing program
- Provided with life skills training, therapy, case management, referral to treatment if requested, nursing and medication management

25




Training & Education for Participants

- Culinary, hospitality, GED, computer literacy, CDL and forklift, ESOL for Spanish speakers
- Partnerships with local colleges, universities, and training institutions to provide degrees and certifications
- Classes are on campus
- Any participant of Camillus House can register
- Provided with a stipend upon completion
- Connected to employment opportunities

26

University of Miami's IDEA Syringe Exchange Program

- Florida's first syringe exchange program started in 2016 right across the street from Camillus House
- Mutual participants enrolled in our programs, from street outreach to emergency shelter to treatment to human trafficking to housing
- Weekly Camillus House and IDEA team rounds to discuss participants
- Coordination of care when participants are hospitalized, need wound care, medications, are missing, graduate the program, obtain housing, etc.



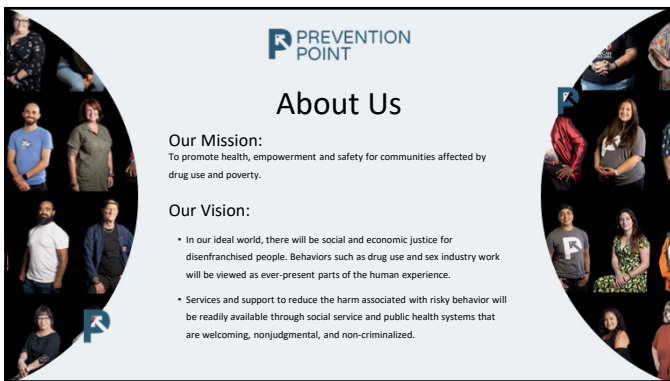
27



31



32




33

PREVENTION POINT

Our Values

Participants, staff members and the Board expressed the following values as fundamental to our mission.

- Nonjudgmental
- Respect
- Trust
- Justice
- Responsibility
- Advocacy
- Flexibility
- Transparency

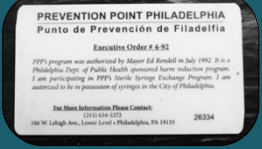


34

PREVENTION POINT

History

- PPP began in 1991 as a grassroots underground syringe services program run by members of Philly's ACT UP (AIDS Coalition to Unleash Power) chapter. Possession and distribution of syringes at that time was illegal.
- Major lobbying efforts led to Mayor Ed Rendell issuing an Executive Order (4-92) in 1992, legalizing the possession of syringes in Philadelphia and overriding the laws of the State of Pennsylvania, which are still in existence today.



35

PREVENTION POINT

WE NOW OFFER:

- Mail services
- Case management
- Medication-assisted treatment and recovery
- Oversight prevention + reversal training
- Free meals and coffee
- Free medical care
- AND MUCH MORE!
- Syringe services
- Wound Care Clinic
- Free HIV and HCV testing
- Drop-In Center
- Linkage to drug and alcohol treatment
- Housing services

36

Housing Services

- One of the lowest barrier shelters in the US
- Program space and structure designed to meet the unique needs of this population. Policies are focused on risk reduction, create flexibility, and allow for self determination
- Outreach teams provide life-sustain care until people are ready to come inside



37

OVERVIEW

- Emphasize safety and respect for the space/community
- Bag Checks?
- Amnesty Boxes / Sharps
- Curfew
- Bed Floors
- Paraphernalia and Use



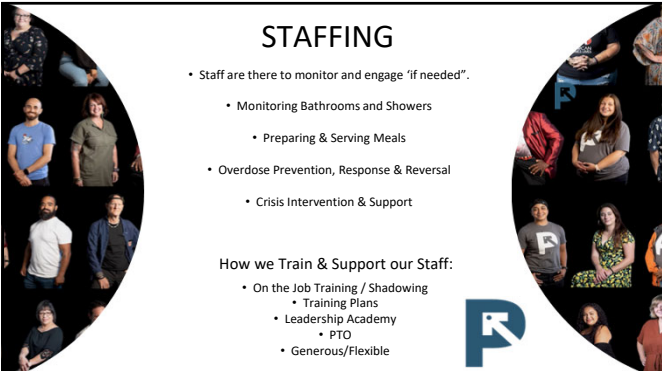
38

STAFFING


- Staff are there to monitor and engage "if needed".
 - Monitoring Bathrooms and Showers
 - Preparing & Serving Meals
- Overdose Prevention, Response & Reversal
 - Crisis Intervention & Support


How we Train & Support our Staff:


- On the Job Training / Shadowing
 - Training Plans
- Leadership Academy
 - PTO
- Generous/Flexible




39

 All paraphernalia (including syringes) must be turned over to staff for safekeeping while in the facility.

 Please be respectful of our neighbors and do not use in the area immediately around any Prevention Point building.

 **Use of illegal drugs is absolutely not allowed in the facility at any time. In addition, use immediately around the building will be considered use on-site.** If you are found actively using in or around the facility the following protocol will be followed:

- First time will be a verbal warning and conversation with on-site staff
- After the first instance, future instances will lead to a meeting with case management staff and possibly being asked to stay out of the facility for 1-3 nights.
- Frequent and continual on-site use may lead to discharge from the facility

 **Dealing illegal drugs in or around the building is not permitted.** If you are found dealing any drugs in or near the building, the following protocol will be followed:

- First time will be a required meeting with case management staff and a recommitment letter, as well as possibly being asked to stay out of the facility for 1-3 days.
- After the first instance, if this behavior continues, you will be discharged from the program.

40


Taking Breaks & Discharge

- Substance use disorder can affect how a person eats, sleeps, and processes new information – therefore affecting how they interact with others
- Increases in K2 and Meth use have (unfortunately) led to an increase in aggressive and violent behavior
- We first attempt verbal de-escalation
- "Taking a break" holds an individual accountable to inappropriate behavior and removes them from the community while giving an opportunity to recommit to program expectations
 - Can be as short as a one hour "cool off" or as long as a few days
 - Useful for more minor infractions, first time offenses
- When discharging, what other resources can be made available?

41

Questions?

Dale Tippett, dale@pponline.org



42

Panelists

- DALE TIPPETT (HE/HIM/THEY),
Director of Homeless Services, Prevention Point Philadelphia, Philadelphia, PA
- JENNY GOMEZ (SHE/HER/HERS), LCSW
Director of Behavioral Health Services, Capillus House, North Miami, FL
- Romel Castañon
Content Expert, Miami, FL

NATIONAL HEALTH CARE HOMELESS COUNCIL

43

Evaluation and Certificate of Participation

<https://lanitek.com/P?s=987365>

(If you receive an error message, try again in a few minutes)

HHRC SAMHSA

44

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:

<http://hhrctraining.org/> | info@hhrctraining.org | 518-439-7415x4

HOMELESS & HOUSING RESOURCE CENTER | PRI POLICY RESEARCH, INC. | SAMHSA Substance Abuse and Mental Health Services Administration

45
