ROAD TO RECOVERY:
ACT Services & CIT Law Enforcement Collaborative Outreach Effort to Homeless SMI Clients

Felicia Skaggs, Alexis Villegas, & Mark Stadler
Overview

• SMI Overview
• Overview of AOT in Ventura County
• ACT Model
• Housing First Model
• Relationship with Local Law Enforcement
• Ventura County Results
• COVID-19 Impacts
SMI Clients Statistics

• **United States** ¹
  - 169,000 homeless persons living with SMI
  - 383,000 inmates with mental illness in jail

• **Ventura** ², ³
  - 1,299 homeless individuals; 28% with MH problems
  - 20% of VC inmates use some kind of psychotropic medication

• **Costs?** ⁴
  - VC inmate housing costs: $114 a day ($41,610 a year)
  - VC IPU cost per day: $7,986.00 (Medi-Cal $2,221.99)
SMI Clients

- **Higher risks for:** $^5, ^6, ^7$
  - Homelessness
  - Incarcerations
  - Psychiatric hospitalizations
  - Victimization
  - Suicidality
  - Substance use
  - Unemployment
VCBH’s AOT Program

• **Who?**
  - Ventura County
  - Population size: 846,006
  - SMI population: ~3.7%
  - SMI in U.S.: 11.2 million (4.5% of population)

• **What?**
  - Assembly Bill 1421
  - “Laura’s Law”
  - Passed in CA: 2002

---

[1] Link to additional information about SMI in the U.S.
[8] Data source for Ventura County population size.
[9] Percentage of SMI population in Ventura County.
VCBH’s AOT Program

- **When?**
  - Program started January 30, 2017
  - Program transition from contractor to VCBH: July 2018

- **How?**
  - Awarded SAMHSA grant
  - 1 of 16 grantees across the United States
AOT Overview

• Target Population:
  • Clients with a SMI
  • Clients at risk for psychiatric hospitalizations, incarcerations, or homelessness
  • Previously struggled to engage in treatment
ACT Model

- Assertive Community Treatment (ACT)
  - Multidisciplinary team
  - Low staff to client ratios
  - Community based services
  - 24 hour coverage
Housing First Model

*HF Model Combined with ACT model*

- **How this looks:**
  - Apply HF model to clients during outreach phase and throughout treatment
  - Supportive services provided through the ACT model

- **Combination helps:**
  - Build relationships
  - Support treatment process
Meet Our Team!

From left to right:

1st Row: Denise Ferrer-Navarro, Paulina Lopez, Dr. Carolyn Kimura, Toni Gooden, Felicia Skaggs, Christina Bailey & Diane Palacios

2nd Row: Dustin Kerr, Erik Gonzalez, Daniel Gray, Kaj Swanson, Ann Koons & Alvaro Martinez
AOT Criteria

1. 18 years of age or older.
2. Suffering from a SMI.
3. Unlikely to survive safely in the community w/out supervision.
4. Non-compliant treatment history where at least one of the following is true:
   1. 2 psychiatric hospitalizations within last 36 months OR received MH services in a correctional facility
   2. 1 incident of violent behavior within last 48 months
5. Voluntary treatment & services offered and declined.
6. The person’s condition is substantially deteriorating.
7. Participation in the AOT program would be the least restrictive environment.
8. AOT treatment would prevent a relapse or deterioration as defined in W&IC 5150.
9. The person will likely benefit from AOT.
Referral Source Criteria

1. Parents
2. Spouses
3. Siblings
4. Children 18+ years of age
5. Adults who reside with individual
6. Director of agency/facility providing residential MH treatment
7. Director of a hospital in which individual is hospitalized
8. Licensed, outpatient, MH treatment provider treating individual
9. Peace officer, parole officer, or probation officer assigned to supervise individuals
CIT - Law Enforcement
Ventura County Law Enforcement’s Crisis Intervention Team
CIT Program Goals

• **Reduce**
  • Intensity of crisis using de-escalation strategies
  • Necessity for the use of force

• **Promote**
  • Pre-custody diversion

• **Collaborate**
  • Mental health consumers
  • Families
  • Community
  • Stakeholders
How Did We Get Here?

• **Late 1990’s – Office Involved Shootings**
  - Loss of life
  - Loss of Officers
  - Loss of public confidence
  - Civil litigation

• “There has to be a better way!” – LE leadership

• Why me?
Research & Collaboration

• **Memphis Model (1988)**
  - Following a proven path
  - San Jose PD, May 2001

• **Ventura County**
  - Major Sam Cochran (Ret.)
  - Partnership begins to expand
  - VPD, OPD, VCSO, VCBH, & NAMI
CIT Cards

• **Card Information**
  - VC law enforcement completes
  - FI VS CIT Card

• **Cards Allow:**
  - CIT staff to identify persons w/ frequent contacts
  - Gather data
  - Utilize data for grants, staff reports, & future projects

• **Accessibility:**
  - iCop App
CIT Card Statistics

Calendar Year 2019

- Contacts
  - N = 2,115 contacts
- Gender
  - Male 51%
  - Female 49%
- Housing Status
  - 11% homeless

CIT Incidents by Month
CIT Card Statistics

CIT Incidents by Hour
Rapid Integrated Support & Engagement
RISE Overview

• **Goal**
  - Build bridges to treatment
  - Encourage individuals to get assessments & treatment

• **Services:**
  - Field-based outreach
  - On-going support navigating access to care
  - Case management
  - Partnered with CIT law enforcement
RISE Overview

• **Target Population**
  - Individuals with SMI
  - Inability / unwilling to access treatment on their own

• **Funding**
  - Triage Grant Funding
  - SB 82
  - Lead to the RISE Expansion
  - Law enforcement partnership teams
  - 4 law enforcement agency partnerships
RISE Team

• **Staffing**
  - Behavioral Health Clinician IV Team Lead → 1
  - Behavioral Health Clinician III → 4
  - Community Services Coordinators → 8
  - Peer Recovery Coaches → 4
Collaboration is Key

- **RISE & Law Enforcement Partnership**
  - Managing the caseload
- **CIT Trained Officers**
  - Dedicated *specifically* for the partnership
- **Assist**
  - Utilize the ability of partnership to enhance outreach
Collaboration Examples

Success story – Paula

• Before AOT
  • Homeless for 13 years
  • Experienced traumatic events

• Collaboration
  • RISE made multiple attempts to engage her into treatment
  • Enrolled into Assist program; tx team provided intensive field based services
  • Connected to Club House in Oxnard
  • Maintained housing for 2 years
  • Opened a savings account

*Client gave consent to share treatment experience
Results

Nights Homeless
• Average of a 2 day decrease
• 96 decrease in days

Psychiatric Hospitalization
• Average of a 4 day decrease
• 179 decrease in days
Results

Housing

• Total housing days from 2018-2019:
  • 4,498 days
• Average length of placement:
  • 70 days
COVID-19 Impacts
COVID-19 Impacts

• Impacted Areas
  • Housing clients
  • Locating / contacting clients
  • Missed appointments
  • Temporary halt in court services
  • Outreach efforts
  • Clients at risk of contracting COVID-19
Contact Information

Felicia Skaggs
Clinic Administrator
Felicia.Skaggs@ventura.org
(805) 981-9265

Alexis Villegas
Program Administrator
Alexis.Villegas@ventura.org
(805) 981-4219

Mark Stadler
Program Administrator
Mark.Stadler@ventura.org
(805) 388-5107
References

4. Costs pulled from agency
5. https://www.treatmentadvocacycenter.org/key-issues/consequences-of-non-treatment
6. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5864578/
7. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4182106/
8. https://www.census.gov/quickfacts/venturacountycalifornia
9. Grant proposal incorporated analyses completed by VCBH staff (2016).