alameda county care connect

A Whole Person Care Pilot

PARTNER UPDATE

Alameda Healthcare Services Agency **August 2017**

Number of Clients Enrolled: 13

Days Until Grants End: 1226 (December 31, 2020)

Did You Know?

That at least 30,000 Alameda County residents are living with severe mental health and substance abuse issues?

For the past 8 years, Behavioral Health Care Services (BHCS) has been building its integrated behavioral health (IBH) programming and Alameda County's Whole Person Care pilot is building on this foundation.

One of the main goals in the Integrated Behavioral Health Programs is to focus not only on the mental health needs of our consumers, but also their physical health, with the understanding that one has impacts on the other. To be assigned to a BHCS program, an adult resident must have been determined to have a serious and persistent mental illness which has caused substantial functional impairment due to their diagnosis of either schizophrenia, bipolar disorder, or persistent major depressive disorder which has resulted in multiple psychiatric hospitalizations.

The initial analysis of the pre-eligible AC Care Connect population identified 300 severely mentally ill consumers have not seen a medical provider for a year or more. One of our very first quality improvement projects will focus on how to improve connecting our most vulnerable mental health consumers to primary care services, so that we achieve our goal of providing whole person care.

The Community Health Record: a Tool for System of Care Coordination

The Alameda County Care Connect Project is developing an electronic Community Health Record (CHR) aimed towards being a rich, single-point information source/ tool that care providers and managers can quickly access to find real-time opportunities for interventions. These interventions will initially focus on physical health, behavioral health and housing, expanding over time to incorporate data from other critical elements of whole person care.

The Two Phases of CHR Development

Phase 1: Implement prototype pCHR to test workflow processes with an initial small user group.
Phase 2: An RFP will be issued, informed by the learnings from Phase 1, to identify a data exchange solution that will be used for the remaining duration of the Whole Person Care pilot…and beyond.

The Current Challenge

We are committed to respecting clients' privacy and data security, while maximizing coordination and collaboration to deliver the best possible services. Policies & practices and data-sharing agreements that are compliant with federal consent and privacy regulations are a key piece of this puzzle, and we are currently exploring the legal and regulatory landscape, what has been successful elsewhere, and developing solutions that will work here in Alameda County.

What are the Housing Services Provided by Alameda County Care Connect?

With all the various services anticipated through the AC Care Connect project, it is easy to get confused about what exactly will be available for our clients. Here is a quick reference guide to upcoming housing services and what AC Care Connect clients may or may not be eligible for:

Service Bundles (requires a referral based on specific eligibility criteria and prioritization through Housing Resource Centers)

Housing Transitions —(anticipated start date 10/2017)—Using the Home Stretch registry as a prioritized registry, this service will provide housing navigation for eligible AC Care Connect enrolled individuals to obtain permanent housing. This service will also facilitate access to mainstream services including health care.

Client Move-in Fund—managed by Housing Resource Centers to assist individuals enrolled in the Housing Transitions (above), this fund is intended to cover move-in expenses needed to secure housing and establish a basic household, and give clients the best start in maintaining housing.

Tenancy Sustaining —(anticipated start date 10/2017)—once an individual is successfully matched to permanent supportive housing through Home Stretch, they will be matched to supportive services, which may include enrollment in the Tenancy Sustaining Bundle, which helps clients maintain their permanent supportive housing through developing a housing retention plan, helping clients integrate into their communities, and identifying behaviors that might jeopardize housing.

SNF Transitions (Active)—Intensive housing navigation services for residents of skilled nursing facilities (SNF) who do not meet medical necessity requirements of a SNF but lack the resource to transition into a more independent community setting. East Bay Innovations (EBI) is the contracted partner providing housing navigation services for SNF referrals from Alameda Health System.

Other Housing Services available to AC Care Connect Enrolled Clients:

Housing Legal Services —(anticipated start date 10/2017)— A legal call center, housing education workshops, and individual legal assistance will be available to AC Care Connect enrolled clients. These services are focused on giving individuals information and legal support to help resolve housing barriers.

Outreach Services—Outreach workers will engage unsheltered individuals to enable and support them in accessing intensive health care and housing services.