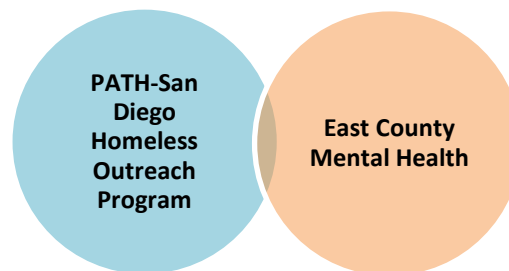


Homeless Outreach Services

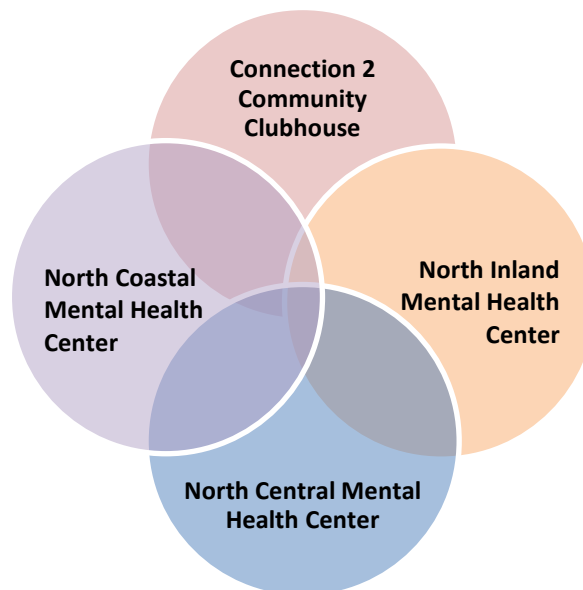
SAN DIEGO BEHAVIORAL HEALTH SYSTEM OF CARE - HOMELESS OUTREACH WORKERS (HOW)

Behavioral Health Services (BHS) began providing street outreach for individuals experiencing homelessness and mental health issues in the mid-1980s. Service design evolved over the decades to expand the focus population to include individuals with substance use disorder (SUD) and serious mental illness (SMI). In 2021, the outreach design evolved again to include countywide services funded through the Mental Health Services Act (MHSA) and Projects for Assistance in Transition from Homelessness (PATH).

MHSA Funded Programs:



PATH Funded Programs:



PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH) FUNDING

Substance Abuse and Mental Health Services Administration ([SAMHSA](#)) [PATH](#) funding is authorized by the Stewart B. McKinney Homeless Assistance Amendments Act of 1990 and reauthorized by Section 9004 of the 21st Century Cures Act. Block grants are sent to states for allocations to respective counties. The County of San Diego BHS department has received PATH funding since the early 1990s.

Annual Application: BHS submits an annual application in Spring for the following Fiscal Year (FY) funding. The application includes budgets and narrative descriptions for each of the provider programs, along with a summary of the program. BHS submits these documents to the California State Department of Health Care Services (DHCS) for approval.

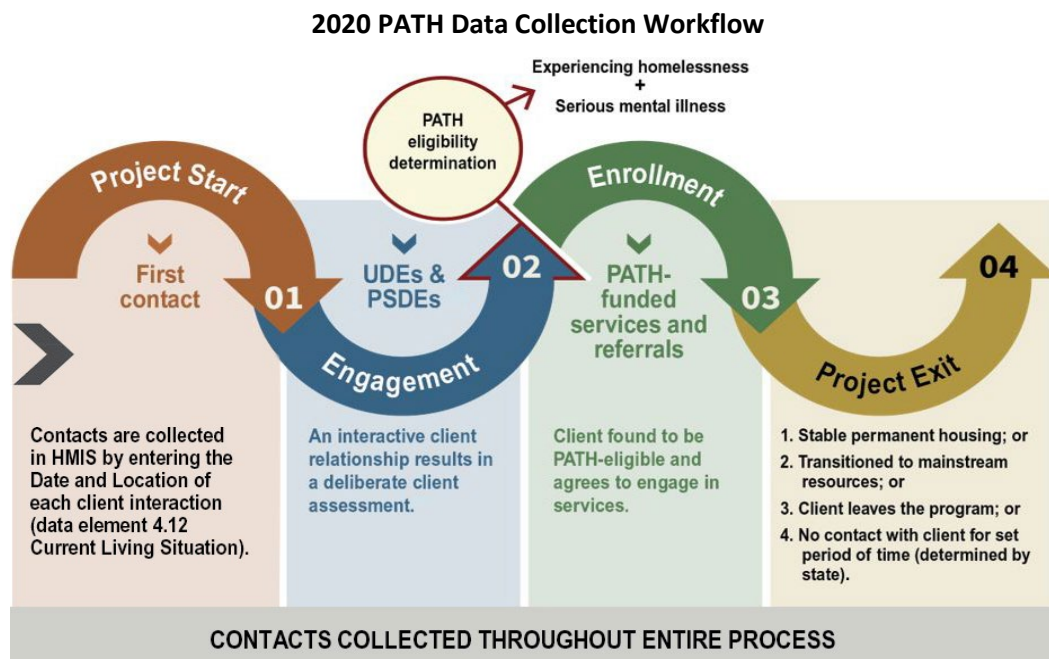
Supported Activities for PATH:

- Outreach
- Screening and diagnostic treatment
- Habilitation and rehabilitation
- Community mental health
- Substance use disorder treatment
- Referrals for primary health care, job training, educational services, and housing
- Housing services as specified in Section 522(b)(10) of the Public Health Service Act
- Some PATH providers offer all the services, while others focus on providing one or two of them.

Homeless Outreach Workers (HOWs) engage, assess, and collaboratively develop a recovery-oriented treatment plan that incorporates identified needs and preferences of the person served. Service referrals may include, but are not limited to:

- Primary Care/Accountable Care Organizations (ACO)
- Access to federal and/or state benefits (social security, legal services, health insurance, transportation, and food)
- Behavioral health (Psychiatry/Counseling)
- Specialized therapy to address post-traumatic stress disorder (PTSD)
- Substance use disorder supports: recovery coaching, Medication Assisted Treatment (MAT), harm/risk reduction, rehabilitation, sober living, and detoxification
- Department of Mental Health Services
- Intensive case management

PATH personnel provide services to individuals residing in emergency shelters, streets, or encampments throughout San Diego County. PATH HOW’s work in conjunction with several federal, state, and local community agencies to coordinate services and assist clients with making a successful transition to community housing.



**** All street outreach projects are expected to record every contact made with each client.**

PATH Data submission requirement:

- **Enrollment (project start date) vs. Engagement**
 - **Enrollment/Project Start Date:** The date that a client is first assisted by your program. For outreach programs, this means the date of first contact with the client.
 - Contact: Street outreach projects are expected to record every contact made with each client in the Homeless Management Information System (HMIS). A contact is defined as an interaction between a worker and a client designed to engage the client.
 - Contacts include activities such as:
 - Conversations between the street outreach worker and the client about the client's wellbeing or needs.
 - An office visit to discuss their housing plan, or a referral to another community service.
 - A contact must be recorded anytime a client is met (including on the same date the client is enrolled into the program (i.e., the Project Start Date) as well as the Date of Engagement (which will be defined below).
 - **Engagement/Date of Engagement:** Engagement date is the date on which an interactive client relationship results in a deliberate client assessment or beginning of a case plan.
 - The date of engagement should be entered into HMIS at the point when the client has been engaged by the outreach worker. The date may be on or after the date that the client is enrolled in the program (project start date) and must be prior to the date the client exits from the program. If the client exits without becoming engaged, the engagement date should be left blank.

Project Exit:

- **Project Exit Date:** Exit from a program in HMIS represents the end of a client's participation with the program. Exit date should be entered on **the date the client is no longer considered to be participating in street outreach services**. This can be harder to determine for street outreach programs than other program types because of the inconsistent/irregular nature of contacts with a client. However, there are several reasons you may use to determine that a client has exited the program, including:
 - The client has entered another project type (e.g., Transitional Housing, Permanent Supportive Housing, or otherwise found housing).
 - The client is engaged with another outreach worker or program.
 - The client is deceased.
 - The outreach worker has been unable to locate the client for an extended period (e.g., 90 days from last contact) and there are no recorded contacts.

***If the client returns after a project exit, a new Project Start Date and a new Date of Engagement is to be established.

***Reporting on data quality for street outreach projects is limited to clients with a Date of Engagement. All Universal Data Elements and applicable Program Specific Data Elements should be reviewed for completeness and accuracy on the Date of Engagement.

***Refer to guidance in the Federal Partner HMIS Program Manuals (PATH, Continuum of Care (CoC), Emergency Solutions Grant (ESG), or Runaway and Homeless Youth (RHY)) for more details.

Reporting:

- Quarterly reports pulled from HMIS-Clarity; July 1 to end date of respective quarter.

HUD Reports

v3.5 [HUDX-224] PATH Annual Report [FY 2022]

★ | ⏪ RUN |

- Information vetted by program and connected with respective program staff to address any potential data errors.

| | |
|----------------------------|---|
| Switch Access Agency(-ies) | <p>Choose...</p> <p>All</p> <p>County BHS</p> <p>Family Health Centers (FHCS)</p> |
| Program CoC(s) | <p>Choose...</p> <p>San Diego City and County CoC</p> |
| Program Type | <p>Choose...</p> <p>All</p> <p>Services Only</p> <p>Street Outreach</p> |
| Program Status | All Programs ▼ |
| PATH Program(s) | <p>CRI - Outreach - Jane Weston Center (6743)</p> <p>HHS - Outreach - North Central MH Center (6872)</p> <p>MHS - Outreach - North Coastal MH Clinic (6708)</p> <p>MHS - Outreach - North Inland MH Clinic (6707)</p> <p>NAMI - Outreach - C2C PATH</p> |

- Once information is reviewed for accuracy, run final report including all programs.
- Re-enter information into [PATH Data Exchange \(PDX\)](#)
 - Box identifying database source must be checked (HMIS-Clarity).
 - Must click on “submit” button at end of report.
- Review annual report with respective programs and address any systematic questions.

FY 22-23 STATUS:

COR Team Lead: Robert Castillo, Administrative Analyst III

Fiscal Lead: Amelia Guingab, Departmental Budget Manager