ORANGE COUNTY
Definitions for System of Care

Bridge Housing is a relatively new term, which describes Emergency Shelter or Transitional Housing program models that have reduced the average length of stay for participants and yielded increased Permanent Housing placement outcomes. Bridge Housing has become a term used by service providers that are focused on permanent housing navigation and placement services, providing the shortest term sheltering required to achieve this outcome.

Comprehensive Health Assessment Team-Homeless (CHAT-H): The OC Health Care Agency's Comprehensive Health Assessment Team-Homeless (CHAT-H) is comprised of Public Health Nurses who provide targeted nursing case management for Orange County residents in housing crisis. Clients are seen in shelters, soup kitchens, motels and on the streets. The primary goal is to link clients to health insurance and a health care home.

Coordinated Entry System (CES) is a mechanism for allocating available housing units into a systematic resource targeting process designed to implement localized priorities for program participants via intake assessment. The Coordinated Entry System covers the geographic area of the County and is regionally focused by Service Planning Areas, is easily accessed by individuals and families seeking housing and services, and includes a comprehensive and standardized process used by all service providers in the System of Care.

County Health Assessment Response Team (CHART): The County of Orange will make available Coordinated Homeless Assessment and Response Teams (CHART) to assist Orange County Cities with local homeless issues, including encampments. CHART will consist of staff from the OC Health Care Agency Behavioral Health and Public Health Services divisions, OC Community Resources/CityNet, OC Social Services Agency, the Orange County Sheriff's Department, OC Probation, OC Public Works and CalOptima. Upon request by and in partnership with a City office, the CHART team will determine the appropriate date(s) and location to assemble and provide adequate advance notice to homeless persons and, as possible, individuals. CHART will bring resources to the City, including clinical staff to conduct screenings/assessment for physical and mental health, substance use disorders, and housing needs. Those assessed to need services will be referred to the appropriate programs and transportation will be offered. Applications for social service programs will be accepted onsite, and assistance will be provided to obtain proper identification cards. CHART will provide an opportunity to make the most impact through coordination of resources across multiple jurisdictions and connect to Regional Navigation Center.

Crisis Assessment Team (CAT): The OC Health Care Agency's Crisis Assessment Team (CAT) provides a 24-hour mobile response service to anyone experiencing a behavioral health crisis. They provide crisis intervention to individuals living with mental health issues, and also facilitate involuntary holds for hospitalization as appropriate.

Crisis Residential Programs (CRP) provide short-term crisis residential services to meet the needs of individuals in a behavioral health crisis and who may be at risk of psychiatric hospitalization. These facilitate a home-like environment in which intensive and structured psychosocial recovery services are offered around the clock. Stays are voluntary and average 7-14 days. CRP is person-centered and recovery oriented and focuses on having individuals take responsibility for themselves and reintegrate into the community. Services include crisis intervention, development of a Wellness Recovery Action Plan, group education and rehabilitation, assistance with self-administration of medications, case management and discharge planning.

ORANGE COUNTY
Definitions for System of Care

Crisis Stabilization Unit (CSU) provides emergency psychiatric evaluation and crisis stabilization to adults experiencing a behavioral health crisis. As an outpatient facility, the CSU may evaluate and treat clients for no longer than 23 hours and 59 minutes; i.e., the client does not reside at the facility. The primary goal of the CSU is to help stabilize and treat individuals in order to refer them to the most appropriate, hospital diversion when indicated or to facilitate admission to psychiatric inpatient units when the need for this level of care is present.

Emergency Shelter (ES) refers to a variety of sheltering models, which by HUD guidelines are 90 days or less in duration. These programs are generally considered to be entry points to a broader array of supportive services, with linkages to longer term programs or permanent housing opportunities. The primary purpose is to address the sheltering crisis for general and specialized populations of both homeless individuals and/or families. Emergency Shelters do not require occupants to sign leases or occupancy agreements.

Full Service Partnership (FSP) program focuses on the person rather than their disease and utilizes a wide variety of programs and services in providing support to individuals with the highest level of behavioral health impairments. Because FSPs are funded by Mental Health Services Act funds, participants must be diagnosed with a severe mental illness in order to qualify. Intensive, wraparound services may include emergency response, housing search and placement, job coaching, outreach and engagement, linkage to financial benefits/entitlements, medication support, case management, transportation and more.

Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry. Supportive services are voluntarily offered and to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals as eligibility for permanent housing referrals.

Medical Detoxification is a free-standing chemical dependency recovery facility staffed with doctors and nurses that provides detoxification from drugs and/or alcohol using prescription medication.

Navigation Centers are regional resource hubs that provide emergency shelter beds and co-located supportive services provided by the Coordinated Homeless Assessment and Response Team (CHART) and community organizations. CHART is a group of county department sto complete intake, assessment and linkages to public benefits, mental health, behavioral health, physical health, and employment and housing resources. Regional Navigation Centers have been identified in each of the Service Planning Areas for both individuals and families seeking assistance for homelessness. Regional Navigation Centers coordinate with the other emergency shelter, transitioinal housing and bridge housing programs within the Service Planning Area to facilitate regional targeting of resources via the Coordinated Entry System.

Outpatient Treatment refers to mental health and substance use disorder programs in which the participant does not reside at the facility where he/she receives treatment.

Permanent supportive housing (PSH) is permanent housing with indefinite duration, whereby leasing or rental assistance is paired with supportive services to assist disabled homeless persons or families with an adult or child member with a disability achieve housing stability. Disability of a household member is required for all HUD funded permanent supportive housing units.

ORANGE COUNTY
Definitions for System of Care

Psychiatric Emergency and Response Team (PERT)is comprised of OC Health Care Agency mental health clinicians who ride-along with assigned law enforcement officers to address mental health related calls in a particular city. They conduct risk assessments, initiate involuntary hospitalizations when necessary, and provide resources and education.

Rapid Re-housing (RRH) emphasizes short-and medium-term rental assistance to move homeless persons and families (with or without a disability) as rapidly as possible into permanent housing. Rapid Rehousing funds can be applied with households as a precursor to Permanent Supportive Housing, in markets where housing units are difficult to secure due to either affordability or availability.

Recovery Residence (a.k.a. Sober Living Home or Transitional Living Environment) is a supervised facility with a structured living environment that offers an alcohol and drug-free residence for adults who are recovering from a substance use disorder. While no drug or alcohol treatment services are provided on-site, residents are often required to participate in 12-step meetings offsite and pass sobriety tests as a condition of ongoing participation.

Recuperative Care provides acute and post-acute medical care for 90 days maximum in a supportive transitional housing environment for eligible participants. Additional services include linkage to applicable programs and services for which the participant qualifies and may benefit from, such as Supplemental Security Income, Social Security Disability, mental health and or/substance use disorder treatment; as well as assistance in preparing for housing readiness and obtaining any necessary forms of identification.

Social Model Detoxification program is a residential, social model that provides non-medical, around-the-clock detoxification services in a clean, supportive, and calm environment that are monitored by experienced, certified staff. Social Model Detoxification refers to the primary phase of drug and alcohol treatment, in which the process of withdrawal from the relevant substance(s) is monitored, supervised, and managed without the need for detoxification medication.

Transitional Housing (TH) is a program that provides an array of targeted supportive services, often serving a specific sub population such as veterans, families, domestic violence or transitional age youth with the purpose of facilitating the movement of homeless individuals and families to permanent housing within a prescribed length of stay, HUD regulations cap of 24 months. Federal funding for transitional housing has been deprioritized due to best practice research which has demonstrated that shorter shelter stays and expedited permanent (supportive) housing yields greater outcomes and is more cost effective.

VI-SPDAT – Vulnerability Index – Service Prioritization Decision Assistance Tool is a survey administered both to individuals and families to determine risk and prioritization when providing assistance to homeless and at-risk of homelessness persons.

Whole Person Care (WPC) is a County of Orange pilot program that focuses on the coordination of physical, behavioral health, and social services in a patient-centered approach with the goals of improved health and well-being through more efficient and effective use of Emergency Medical Services resources for Medi-Cal beneficiaries struggling with homelessness. WPC promotes increased communication between hospital emergency rooms, CalOptima, community clinics, OC Health Care Agency (HCA) Behavioral Health Services and Public Health Services as well as recuperative care providers to improve access and navigation of services for the homeless populations.