

Homelessness and Incarceration

Build on Full Serve Partnerships to Reduce Criminal Justice Involvement and Homelessness
April 28, 2020

For some, COVID-19 is a crisis upon crisis. The most visible and tragic reminders of the failures of the community mental health systems are those individuals who fall into homelessness and the criminal justice system. State and community leaders, allied with service providers and community organizations, have struggled with these complex challenges in “ordinary times,” which are aggravated now by a highly contagious virus that imperils the medically fragile.

Discovering the Full Promise of Full Service Partnerships

The Mental Health Services Oversight and Accountability Commission and several county partners are assessing and improving a promising approach to meeting “high-need” individuals. The Full Service Partnership, in which service providers do “whatever it takes” to support consumers in their recovery, was developed specifically to prevent homelessness, incarceration and hospitalization of people with severe and persistent mental illnesses.

Full Service Partnerships (FSPs) represent a \$1 billion annual investment in the highest level of voluntary, community-based, recovery-oriented care available in California. Strengthening this approach remains one of the most promising pathways to reducing negative outcomes.

The Commission over the last two years has analyzed state-held data on Full Service Partnerships. The analysis reveals that 70 percent of FSP clients had no criminal justice involvement and among those with prior arrests, FSPs significantly reduced rearrests. Outcomes also vary across counties. In some counties, some 40 percent of FSP consumers report meeting goals upon discharge, while in other counties success rates are 10 percent. Less is known about how well FSPs serve those who are homeless or at risk of homelessness, but the potential for high-performing FSPs to reduce homelessness appears significant.

Efforts are underway to strengthen FSPs

Based on this analysis, the Commission launched two projects to help counties assess and improve FSPs. The first project – involving Los Angeles, Orange, Ventura and Amador counties – is aligning data on programs, services, consumers and key outcomes to identify how and how well their FSPs are working. The second project – involving Ventura, Fresno, San Bernardino, San Mateo, Sacramento and Siskiyou counties – is helping those counties design, execute and evaluate innovative improvements to their FSPs. While these projects support system change at the county level, they also have revealed ways the State could better support that change.

Cross-system analysis of state-level data will inform program choices. As the lead agency on MHSa-funded Community Services and Support programs, the Department of Health Care Services collects data on FSP clients. Additional analysis could determine how well FSPs are meeting the needs of the homeless or those at risk of homelessness; serving everyone who is eligible for care; and linking clients who are discharged from FSPs to ongoing services. This analysis is likely to reveal strategies to improve outcomes, including reducing the number of mental health consumers who are homeless and involved in the criminal justice system.

A systemwide fiscal analysis also could identify a sustainable funding model. Counties may not be fully accessing federal funds to support FSP-provided services. Some services for some clients may be fully or partially funded through commercial insurance plans, particularly for youth and young adults who may have insurance and are at risk for homelessness because of unmet mental health needs. A comprehensive fiscal analysis could help counties tap these other resources and better align state funds, such as prioritizing MHSa Workforce Education and Training funds to train FSP staff on ways to help deliver the promise of the FSP model.

Take Action Now

Funding alone cannot meet the complex needs of individuals with severe and persistent mental health needs. Full Service Partnerships are the strongest available models for providing integrated and tailored care and have the potential to be a much more effective way to reduce homelessness and criminal justice involvement among those with unmet mental health needs.

Recommendation: Strengthen and coordinate analysis by state-level partners to provide counties the information they need to use all available funding to improve services and outcomes.

- > The Health and Human Services Agency should bring together the Department of Health Care Services, the Department of State Hospitals, the Commission, interested counties and service providers to share and analyze data. The project could determine the full potential for Full Service Partnerships in reducing homelessness and justice involvement and guide the expansion and improvement of these programs so that counties can increase capacity, lower costs and improve outcomes.
- > Many of these Full Service Partnerships and other mental health services are eligible for Medicaid billing, but the State does not know whether counties are fully accessing federal funds to support those efforts. It also is unclear if these services can be fully or partially funded through commercial insurance plans, particularly for youth and young adults who may have commercial insurance but are at risk for homelessness because of unmet mental health needs.

Disrupt the Emerging Mental Health Crisis

COVID-19 is impacting the mental health of millions of Californians. Physical distancing may be reducing the spread of disease, but the strategy also weakens the links between Californians and supportive services. The State can disrupt this emerging mental health crisis now by increasing funding and fortifying critical public mental health infrastructure. This brief supplements the Commission's April 28, 2020 letter to the Governor and Legislature.