

**RESOLUTION NO. 20201203-048**

**WHEREAS**, in May of 2019, the Downtown Austin Alliance convened providers to identify gaps and redundancies in our community's behavioral health response and continuum of care system; and

**WHEREAS**, the key priorities that emerged from this process included increasing capacity to lower wait times for behavioral health services, developing the ability to transport clients to the right resource, providing shelter for individuals waiting for housing, and increasing diversion from the legal system; and

**WHEREAS**, according to Integral Care, our community's lead mental health authority, more than 65% of individuals experiencing homelessness reported to Integral Care that they experience co-occurring substance use and mental health disorders; and

**WHEREAS**, Integral Care and the Downtown Austin Alliance have crafted a proposal to expand outreach and assistance for individuals experiencing homelessness who are in need of behavioral health resources; and

**WHEREAS**, in the proposal from Integral Care and the Downtown Austin Alliance, individuals identified by the Homelessness Outreach Street Team (HOST) and the Downtown Austin Community Court (DACC) would be referred to a Specialty Intensive Integrated Management Treatment Team managed by Integral Care and based out of the Terrace at Oak Springs Clinic; and

**WHEREAS**, the Terrace at Oak Springs Clinic specializes in providing care to individuals experiencing homelessness who also experience chronic health conditions, substance use, or behavioral health issues; and

**WHEREAS**, the Specialty Intensive Integrated Management Treatment Team would include five dedicated full-time employees to provide intensive case management and housing navigation and one clinical psychiatrist to provide services to individuals referred to the facility by HOST and DACC; and

**WHEREAS**, Integral Care estimates that the proposed Specialty Intensive Integrated Management Treatment Team could treat between 150 and 175 individuals annually; and

**WHEREAS**, as the draft budget in Exhibit A indicates, the proposal requires a financial commitment of a little more than \$500,000 each fiscal year; and

**WHEREAS**, the Downtown Austin Alliance will commit \$260,000 in one-time funding to this proposal for the first year, with the possibility of a recurring contribution if needed; and

**WHEREAS**, our current homelessness response system cannot meet the demand for behavioral health treatment by those experiencing homelessness, and additional funding is warranted; and

**WHEREAS**, a partnership such as the Specialty Intensive Integrated Management Treatment Team will leverage city funds to provide critical resources to our unhoused neighbors; **NOW, THEREFORE**,

**BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF AUSTIN:**

The City Manager is directed to support the proposed collaboration between the DACC, HOST, and Integral Care and to identify any unencumbered funds that could help fund the Specialty Intensive Integrated Management Treatment Team, including funds for housing subsidies.

The City Manager is directed to provide an update regarding available funding to Council no later than December 8, 2020, and, if funding is found, return with the appropriate items to authorize this funding by December 10, 2020.

**BE IT FURTHER RESOLVED:**

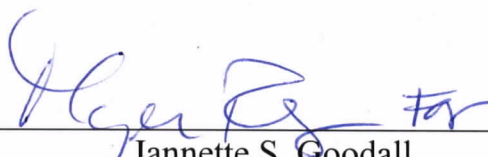
The City Manager is directed to identify potential partners and available resources to expand this program to individuals experiencing homelessness in areas of the city outside the downtown area. The City Manager is directed to provide this information to Council no later than January 5, 2021.

The City Manager shall ensure that the program is aligned with the City's overall Homeless Strategy and provide a report outlining the program's progress and accomplishments. The City Manager shall also engage with program partners and other homeless healthcare service providers, including CommUnity Care's Healthcare for the Homeless program, Ending Community Homelessness Coalition (ECHO), Texas Harm Reduction Alliance, and EMS Community Health Paramedics, to evaluate the program and

provide recommendations for additional partners and program improvements to enhance coordination, delivery, access, and expansion of healthcare services.

ADOPTED: December 3, 2020

ATTEST:

  
Jannette S. Goodall  
City clerk





## Health Care for the Homeless Health & Wellness Center Proposal

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Integral Care helps individuals build health and well-being so everyone has the foundation to reach their full potential. When individuals have a safe and stable place to live and the support services to address their health care needs, they do well and thrive. However, recovery from mental illness, substance use disorders and chronic health conditions is almost impossible without a place to call home. Integral Care has served individuals experiencing homelessness for over 20 years, providing the largest continuum of homeless services in Travis County. In fiscal year 2020, Integral Care served over 5,400 individuals experiencing homelessness, providing a wide array of services, including homeless outreach, shelter, permanent supportive housing, substance use treatment and specialty integrated medical services, among other programs.

Despite our continued efforts to increase access to care for this population, the need for services and integrated behavioral health and primary care treatment exceeds the resources available. When individuals have limited access to primary care, poor health outcomes and a lack of preventive care for chronic conditions prevail. The majority of adults who experience homelessness have more than one health issue. In fiscal year 2019, 65% of individuals experiencing homelessness served by Integral Care had at least one co-occurring mental health and substance use disorder, while 45% also had a co-morbid chronic medical condition. Hypertension was the most common chronic medical condition, followed by diabetes and asthma. The most significant contributors to excess emergency-room usage in Travis County by this population were hypertension, substance use, mood disorders and schizophrenia or psychotic disorders.

Over the last year, Integral Care established a new standard of care to meet the complex health care needs of our homeless neighbors moving into permanent supportive housing. As the lead behavioral health care provider for those experiencing homelessness, Integral Care is leading the development and implementation of an integrated behavioral health clinic at Terrace at Oak Springs. The 3000 Oak Springs clinic specializes in serving those experiencing homelessness who struggle with severe and persistent mental illness, substance use disorders and chronic health conditions.

As the number of individuals experiencing homelessness with complex health conditions continues to increase, the need for additional behavioral health services that are fully integrated with primary care continues to grow. To increase access to care, we have developed



a plan to expand our services at our 3000 Oak Springs Clinic over the next three years, establishing a Health Care for the Homeless Health and Wellness Center. Our proposed plan expands our continuum of services from outreach and engagement to permanent housing by increasing access to specialty mental health, substance use treatment and primary care for individuals identified by the Homeless Outreach Street Team (HOST). Currently individuals identified by the HOST team are referred to Downtown Austin Community Court (DACC) for support or to Integral Care's East 2nd Street clinic for central intake. Both of these systems are at or over capacity. DACC has over 200 individuals on a waitlist and our East 2nd Street Clinic has over 2,000 patients enrolled. ***Our proposal focuses on meeting the needs of individuals identified by HOST and DACC and linking them directly to a specialty intensive integrated treatment team to access the care individuals need as an extension of the HOST team. The 3000 Oak Springs Clinic will serve as the centralized health care HUB for this population serving the most in need in the Downtown area. An additional team of 5 dedicated staff and one psychiatrist will provide intensive case management and rehabilitation services to up to 100 individuals at a time. As individuals move through the system, achieving health and stability, additional people can be referred by HOST. We anticipate being able to treat 150-175 persons per year. This team will leverage a variety of resources available at the 3000 Oak Springs Clinic including but not limited to mental health and substance use treatment, primary care services, housing navigation, benefit assistance, supported employment and peer support services.***

Integral Care has committed over \$1.7 million to support the operations of the 3000 Oak Springs Clinic through grants from Health and Human Services Commission and Episcopal Health Foundation. Additional resources are needed to support the growing need of individuals experiencing homelessness and to expand access to care. The total projected need in funding to develop this ***specialty intensive integrated treatment team*** over the next three years is \$ 1,564,066. The proposed pro-forma is included below.

Integral Care is committed to exploring new avenues for supporting the behavioral health needs of our neighbors experiencing homelessness. We would like to invite Downtown Austin Alliance to join us in order to make the Health Care for the Homeless Health & Wellness Center a place where our neighbors without homes can get the care they need in Austin.



## EXHIBIT A



Intensive Community Integrated Service Team- Health Care for the Homeless HUB				
BUDGET CATEGORY	Year 1 TAOS Clinic	Year 2 TAOS Clinic	Year 3 TAOS Clinic	Total
Salaries	\$ 214,619	\$ 221,058	\$ 221,058	\$ 656,735
Employee Benefits	\$ 62,244	\$ 64,111	\$ 64,111	\$ 190,466
Network and Insurance	\$ 19,655	\$ 20,245	\$ 20,245	\$ 60,145
Training/Travel	\$ 16,677	\$ 17,177	\$ 17,177	\$ 51,031
Contractors/ Psychiatrist	\$ 66,720	\$ 68,722	\$ 68,722	\$ 204,164
Facilities Expense	\$ 55,991	\$ 57,671	\$ 57,671	\$ 171,333
Vehicle Expense	\$ -	\$ -	\$ -	\$ -
Capital Expense	\$ -	\$ -	\$ -	\$ -
Computers	\$ 10,000	\$ -	\$ -	\$ 10,000
Supplies	\$ 500	\$ 515	\$ 515	\$ 1,530
Client Expenses	\$ 20,000	\$ 20,600	\$ 20,600	\$ 61,200
Other	\$ 345	\$ 355	\$ 355	\$ 1,055
<b>Total Program Expenses</b>	<b>\$ 466,751</b>	<b>\$ 470,454</b>	<b>\$ 470,454</b>	<b>\$ 1,407,659</b>
<b>Total Indirect Expense</b>	<b>\$ 51,861</b>	<b>\$ 52,273</b>	<b>\$ 52,273</b>	<b>\$ 156,407</b>
<b>TOTAL EXPENSES</b>	<b>\$ 518,612</b>	<b>\$ 522,727</b>	<b>\$ 522,727</b>	<b>\$ 1,564,066</b>