

Recuperative Care: Behavioral Health for the Justice Involved Population

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Helping Hearts California Background



- Helping Hearts founded in 2007 in Phoenix, Arizona providing behavioral health residential treatment to adults living with serious mental illness. Currently have seven licensed facilities and outpatient clinic.
- Contracted with San Bernardino County Department of Behavioral Health in 2015 to provide outpatient based **Social Rehabilitation** services to adults living with serious mental illness. Provide care for **64** individuals at eight licensed facilities. **Served over 400 individuals** discharged directly from local and state hospitals, IMDs, jail and the community with 90% + conserved members.
- Opened **28 bed Hulen Behavioral Health Recuperative Care center** in Riverside in November 2021. Offer Day Habilitation and Housing Tenancy and Sustaining Services. **Served nearly 850 individuals.**

Helping Hearts is Diverse



- Our program is not just about giving someone a place to sleep and food to eat
- Individual goal setting, behavioral health treatment plan and discussing **HOW** we are working together
- Trauma based approach
- Do not require formal behavioral health diagnosis – we work with those who want and need help
- Work with hard-to-place individuals – Ankle monitors, external medical equipment such as colostomy bags or holter monitors, registered sex offenders and other legal history that could pose housing exclusions.

Underlying Philosophy of Programs



- **Build on what we do best** – modifying where appropriate
 - Scalable programs that serve multiple referral and client types
 - Utilize our existing infrastructure including clinicians, clinical tools, electronic health record system and policies and procedures with minor modifications
- **Identifying unmet needs** – is it in our wheelhouse?
- **Develop Continuum of Care** – how to help a broad group of members in varying entry and exit points on their path to independence
- **Cultivate relationships with like minded providers** – how do we collaborate with others to serve the population we are all passionate about?
- **Identify others who touch our member base** – agencies and organizations that work with the same members in their cycle of institutionalization or needs
- **Recognize Olmstead and be creative** – how to help individuals in the least restrictive setting possible to help them to be the best version of themselves

Important Considerations in Program Design



General Jeff, the late unofficial Mayor of Skid Row shared his input...

- If you are not mentally ill when you become homeless, you will be after being homeless
- Don't tell us you will help get us back on our feet because most of us have never been on our feet
- No one size fits all – need options
- Recognize contributors to homelessness – how to address those factors – racial inequality, justice involvement, broken families, chronic poverty, domestic violence, addiction, LGBTQ+ and so many other causes. It isn't just about having money for rent.

Day Habilitation Services



- 24-hour behavioral health and medical staff
- Daily process groups (program schedule 7:00 a.m.- 9:00 p.m.)
- Interdisciplinary Team consist of Psychologist, Nurse Practitioner, Registered Nurses, Licensed Vocational Nurses, Certified Nursing Assistants and Licensed Clinical Therapist
- Provide daily medical and behavioral health treatment
- Coordination with ancillary doctors, psychiatric providers and pharmacy
- Transportation and accompaniment to medical appointments (as appropriate)
- Intensive Case Management to transition to appropriate housing, including assistance in acquisition of benefits such as Social Security

Day Habilitation Services

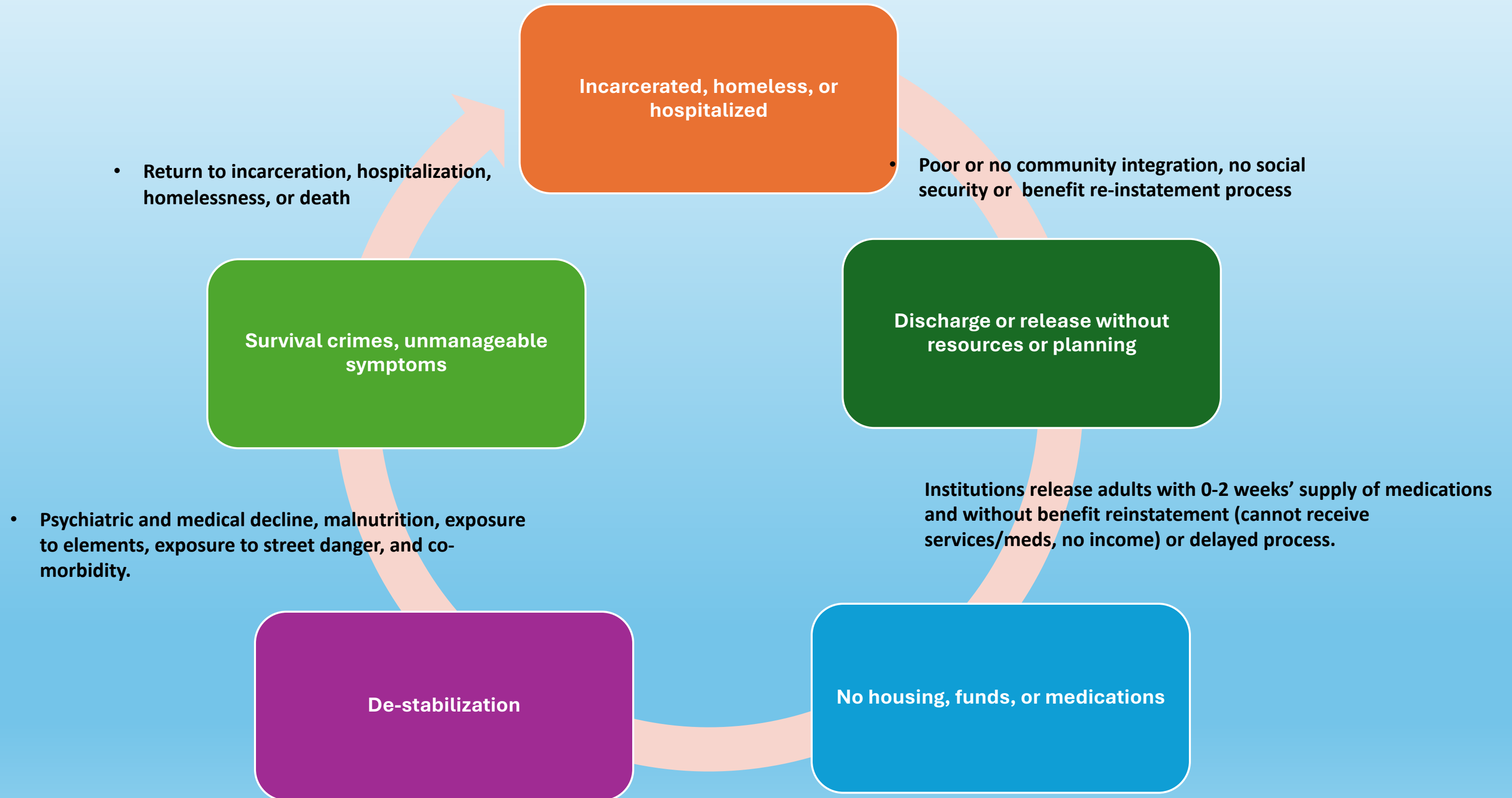


- Psychoeducation and assistance in self-administration of medications
- Routine labs completed in house to monitor clients' medical needs
- Weekly individual therapy, family therapy and individualized Treatment Plan
- Substance Use Disorder (SUD) Groups
- Enrichment classes including art, music and gardening
Physical Fitness activities including outdoor walks, hiking, Zumba and strength exercises
- Vocational Rehabilitation and volunteer opportunities
- Coordination and transportation to religious services

Helping Hearts and SBSB Partnership

- HHCA representative Dr Ashley DeVito (formerly Steves), reached out to CSRD with a cold call in Summer of 2021. Recognized the opportunity to collaborate on working with the same individuals that were in different phases of institutionalization
- Spent time learning about one another's programs and approaches. Realized aligned missions and philosophies. Moved forward with partnering to break the cycle for the same clients we were serving.
- It took a long time to formalize the relationship with contracting and County bureaucracy, but we persevered.
- We are passionate about sharing our success of a mental health and law enforcement partnership model to demonstrate that these two disciplines do not and should not operate in silos when we have shared goals for our community members.

Cycle of Institutionalization – Adult with Mental Health Challenges



Captain James Porter

San Bernardino County Sheriff's Department

Community Service & Reentry Division (CSRSD)



- 29 Years of Law Enforcement Experience
- Founded CSRSD in 2021 at the request of Sheriff Shannon Dicus
- CSRSD goals
 - Bring together allied resources to work with the hardest to serve populations
 - Reimagine and reinvent rehabilitative programming for justice involved persons
 - Build partnerships to effectively address recidivism, homelessness, mental illness, etc.



Heather Beidler, Inmate Services Manager San Bernardino County Sheriff's Department Community Service & Reentry Division (CSRD)

- 12 years of law enforcement experience as a professional staff member in a correctional setting
- 3 Years in CSRD enhancing the departments vision of rehabilitative programming and reentry
- CSRD goals
 - Bring together allied resources to work with the hardest to serve populations
 - Reimagine and reinvent rehabilitative programming for justice involved persons
 - Build partnerships to effectively address recidivism, homelessness, mental illness, etc.

WHAT SHOULD BE
THE GOAL OF THE
CRIMINAL JUSTICE
SYSTEM?



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“The end goal of the criminal justice system should be public safety.”

- Criminal justice processes should not be one size fits all
- Find and close service gaps
- Identify and work with partners to serve specific needs of given populations
- Treat the offender, not the offense
- One life at a time



ACUTE INCARCERATION MANAGEMENT (AIM)

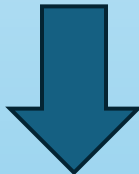
- High Utilizers – 100+/- Most Arrested People Each Year
- 2023 – 118 Individuals
 - 1654 Arrests – Only 11% were felony arrests
 - 6858 Jail Bed Days – 18.8 years of custody time - \$1.2M - \$1.4M custody costs
 - 92% Experienced homelessness at least once during the year
 - 95% Arrested for quality-of-life crimes at least once during the year – drugs, alcohol, paraphernalia, etc.
 - 65% Clients of Department of Behavioral Health
 - 55% Received medical services from Arrowhead Regional Medical Center (ARMC)
 - 33% (Approx) received medical or other services from county fire
 - 24% were 5150'd or received other mental health services from ARMC



ACUTE INCARCERATION MANAGEMENT (AIM)



START TEAM



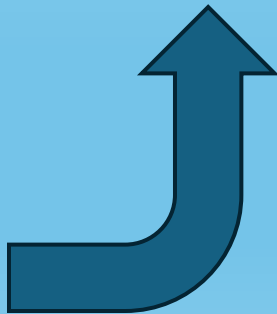
IDENTIFY
current and
likely high
utilizers



ENGAGE
both in
custody and
in the
community



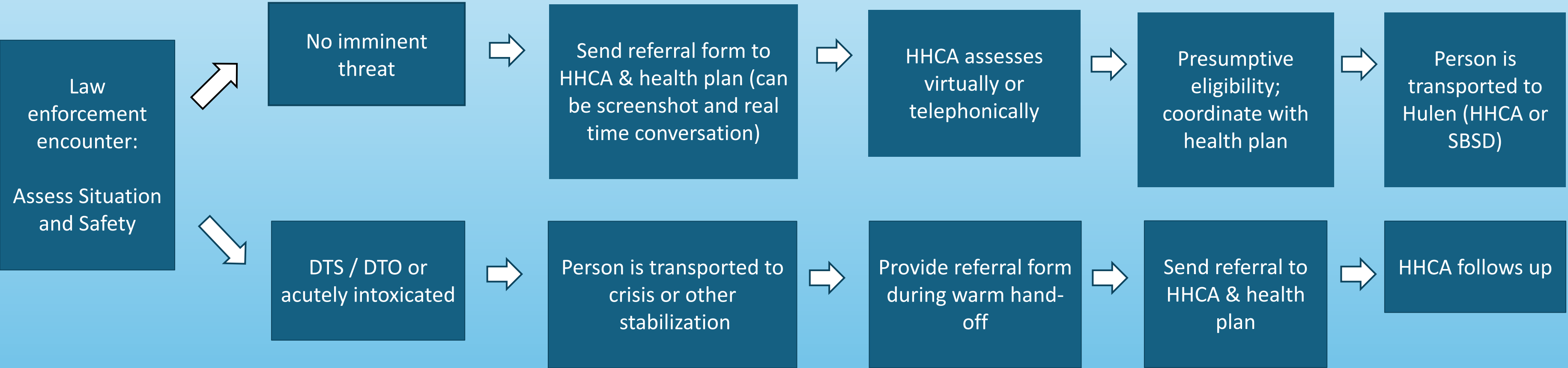
SUPPORT
with
services
and
resources



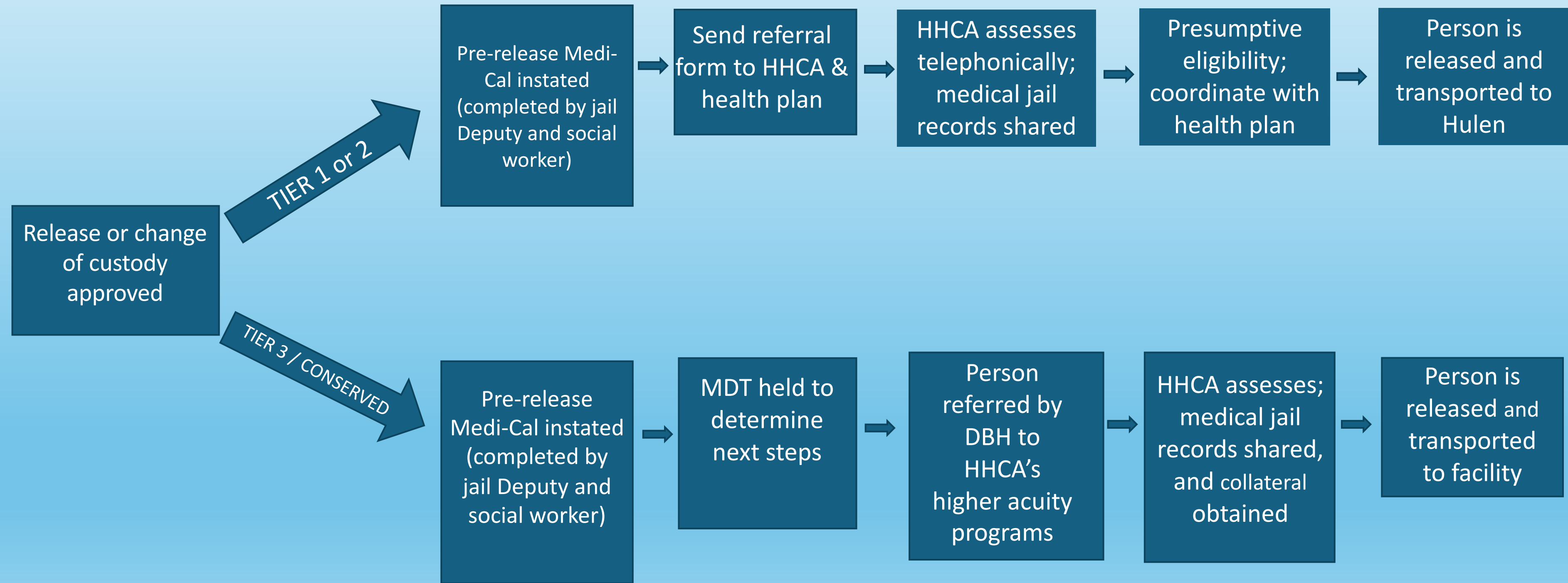
CONNECT
with
providers

VIDEO INSERT

Homeless Outreach Teams Intercept Process



In-Jail Diversion and High Utilizer Program Process Flow



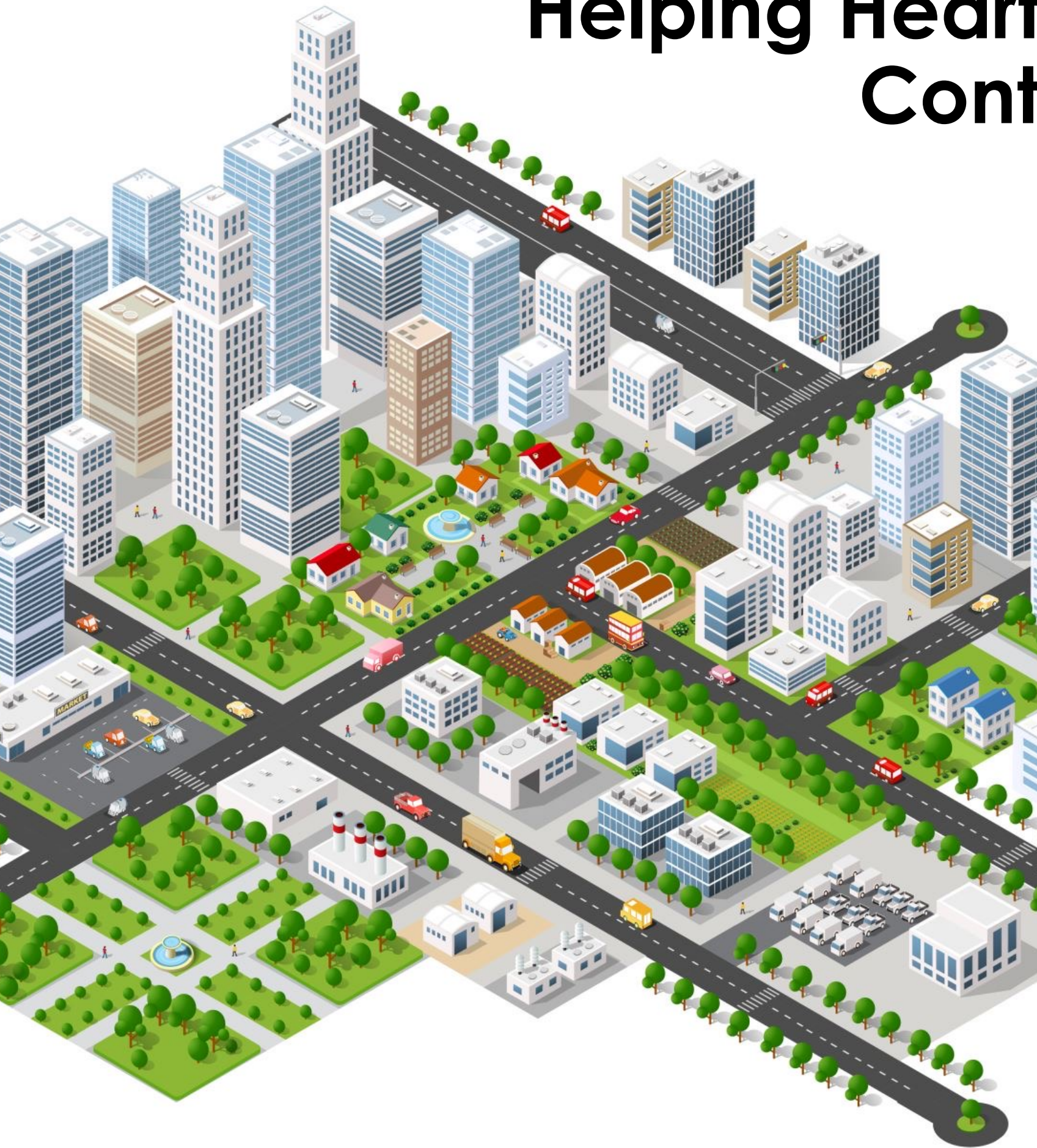
High Utilizer Justice Involved Outcomes

- 80% of voluntary participants either graduated from or are still in the program.
- Of those who did not complete the program, reasons include arrest due to warrant in another county, relapse and assault resulting in arrest, and leaving program without law enforcement involvement.

Justice Involved Graduate Stories

- Member profiled reunited with family (mother, child) and relocated to home state with coordination of probation.
- Female with history of arrest related to substance use admitted to Hulen Recuperative Care program for support with integration back into the community. During her stay at Hulen, she was able to obtain all her documents needed for employment. She began working at Salvation Army and remained sober while in the program. We supported and coordinated with visitation of her 10-year-old son thru a court order. After 3 months post discharge from the program, she got a new job at Spaghetti Factory and is still sober and now able to have visitation with her son monthly.
- Assisted member with his court issues for resolution. Maintained his sobriety while in program. Assist with Room & Board placement which member was discharged to.
- Multiple members have received assistance to get documentation needed to seek employment, maintained sobriety while in the program and discharged to short-term post hospitalization housing.

Helping Hearts Projects in Process for Continuum of Care



Several ILOS projects in process:

- **30+ bed** HH Kern Forensics Campus (enhanced ARF)
- **180-bed** Short-Term Post-Hospitalization campus in San Bernardino County with Day Habilitation, Housing Transition and Navigation Services, Housing Deposits, Housing Tenancy and Sustaining Services, ECM and Medically Tailored Meals
- **Up to 120 beds** (Recuperative Care and Short-Term Post Hospitalization, Day Habilitation, ECM and Housing Supports) in Los Angeles County.
- **16-20 bed** Sobering Center with limited Short-Term Post-Hospitalization beds and access point for other services in San Bernardino County.

QUESTIONS