

3B. Continuum of Care (CoC) Discharge Planning: Foster Care

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

3B-1.1 Is the discharge policy in place State Mandated Policy mandated by the State, the CoC, or other?

3B-1.1a If other, please explain. (limit 750 characters)

NA

3B-1.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge. (limit 1000 characters)

The CoC utilizes Preparation for Adult Living (PAL) and Circle of Support (COS) practices to ensure discharge planning and individual service plans include a thorough review of individual housing needs and options. COS is a youth-driven process to help youth exiting foster care plan for the future and focuses on bringing together a healthy support system for youth exiting foster care. COS can include family members, foster parents, friends, and professionals. These practices are provided to youth aged 15 – 21 and help to ensure each youth exiting foster care is not discharged into homelessness. For youth that cannot be re-united with family or find safe and suitable housing independently upon discharge from foster care or through the PAL and COS assistance, housing can be provided by ACH child and family services' Supervised Independent Living project that is specific to youth aged 18 – 21 that need additional support and includes provision for housing for those exiting foster care.

3B-1.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness. (limit 1000 characters)

Both ACH Child and Family Services, PAL, and COS workers coordinate with the Department of Family Protective Services (DFPS) within the CoC in order to connect youth exiting foster care with benefits allowed to them by the state of Texas including transitional living allowances, transitional Medicaid, and tuition and fee waivers for college attendance. It is the policy of all DFPS agencies to provide discharge planning services within one year prior to a youth aging out of foster care in coordination with PAL and COS staff and with ACH child and family services when necessary.

3B. Continuum of Care (CoC) Discharge Planning: Health Care

Instructions:

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3B-2.1 Is the discharge policy in place mandated by the State, the CoC, or other? CoC Adopted Policy

3B-2.1a If other, please explain. (limit 750 characters)

NA

3B-2.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge. (limit 1000 characters)

The CoC hospital discharge committee meets monthly to facilitate collaboration between hospitals, EMS, shelter and outreach staff. JPS Health Network is the primary indigent health care provider. JPS social workers and discharge nurses coordinate with shelters to provide discharge plans for currently homeless persons. Those with chronic health conditions are prioritized for PSH or assisted by the Housing Placement Specialists to identify long term, rehab, or assisted living care. True Worth, a new non profit serving the homeless is developing a central resource facility in collaboration with JPS that will include at least 10 respite beds that will be connected to discharge housing and is projected to be complete in 2016. When a homeless person presents at an emergency shelter with health conditions that indicate an inappropriate discharge, shelter staff will call Medstar and return the patient to the discharging hospital until appropriate care and shelter is identified.

3B-2.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness. (limit 1000 characters)

Providers responsible for homeless patients include the Day Resource Center, Presbyterian Night Shelter, Salvation Army, Union Gospel Mission, JPS Cypress Homeless Clinic, JPS Trinity Springs Pavilion, JPS Emergency Department, JPS Inpatient Department, JPS Post Hospital Discharge Clinic and MedStar. The Coordinated Assessment System CoC Resource Specialist will play a key role in identifying housing options for discharge of homeless persons with chronic conditions. JPS and MedStar utilize the HMIS to better communicate with patients and homeless service providers in coordinating after care. MedStar Community Health Program provides paramedic mobile health services that provides regular follow up and preventative care to avoid emergency department utilization and improve housing stability. The Hospital Discharge Committee is drafting a discharge procedure detailing appropriate referral for shelter placement and what other steps must be taken prior to discharge to homelessness.

3B. Continuum of Care (CoC) Discharge Planning: Mental Health

Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

3B-3.1 Is the discharge policy in place mandated by the State, the CoC, or other? CoC Adopted Policy

3B-3.1a If other, please explain. (limit 750 characters)

NA

3B-3.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge. (limit 1000 characters)

JPS is the primary provider of emergency or in patient mental health care. This includes an Emergency Psychiatric Department and the Trinity Springs Pavilion inpatient treatment facility. If a patient presents as homeless or at risk of homelessness and there are no housing options immediately available social services at JPS routinely attempts contact with family and friends of patient to arrange placement during recovery. If this is not possible, JPS locates group home providers or nursing home facilities appropriate to meet the specific needs of the patient. For severe patients, JPS refers to the on site mental health court that will determine if a longer stay at Trinity Springs or a transfer to a state hospital is warranted and discharge would be detrimental to the mental health of the individual. The hospital discharge committee reviews mental health care cases who have had difficulty with placement and provides feedback and resources to JPS to avoid discharge to homelessness.

3B-3.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness. (limit 1000 characters)

Mental health agency stakeholders include MHMR of Tarrant County, JPS Health Network, MedStar, Tarrant County, and Emergency Shelters. The most complex components regarding mental health institutional discharge is at the emergency psychiatric services at JPS Health Network. Interventions are difficult if the client will not release information or allow for external service providers to advocate within their treatment plan. JPS and MHMR have collaborated on improving the system of care prior to the presentation of an emergency detention or emergency episode. JPS discharge staff have access to the HMIS in order to document discharge instructions that can be viewable by an agency or case manager to improve a continuum of mental health care, understand medication instruction or transition therapy appointments as well as allow JPS to track repeated service utilization and target prevention resources through MHMR and prevent cycles of hospitalization and prioritize for PSH.

3B. Continuum of Care (CoC) Discharge Planning: Corrections

Instructions:

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3B-4.1 Is the discharge policy in place mandated by the State, the CoC, or other? CoC Adopted Policy

3B-4.1a If other, please explain. (limit 750 characters)

NA

3B-4.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge. (limit 1000 characters)

Cornerstone Assistance Network, along with providers within the criminal justice system, formed the Tarrant County Reentry Coalition. This coalition began in February 2013 and includes personnel from the Federal Bureau of Prisons, personnel from local jail systems, personnel from local probation and local parole departments, as well as smaller faith based halfway houses and other housing or service not for profit organizations. Jail personnel, in part because of the efforts of this coalition, have been pro-active in partnering with the community to create reentry programs within the jail system to ensure that discharge planning begins at arrest and not at release. Included in this programming is the increased effort to partner with the Texas Department of Public Safety to assist offenders in securing Texas state identification prior to release which greatly increases an ex-offender's ability to integrate back into society and avoid discharge into homelessness.

3B-4.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness. (limit 1000 characters)

The lead agency for the Tarrant County Reentry Coalition is Cornerstone Assistance Network. Other stakeholders that are the Educational Opportunity Center, Federal Bureau of Prisons, First Presbyterian Church of Fort Worth, Lena Pope Home, MentorCare, Mercy Heart, New Name Ministries, Recovery Resource Council, St. John the Apostle Church, State Government Representatives, Juvenile Justice Department -TJJD, TDCJ, Dept. Rehabilitative Services-DARS, Tarrant County Government Criminal Justice Office, County Commissioners, Child Protective Services, Housing, Drug Court, District Judge, CSCD, MHMR, and Workforce Solutions. Texas Reentry Services provides case management, job training transitional and permanent housing for ex-offenders