The Substance Abuse and Mental Health Services Administration Collaborative Agreements to Benefit Homeless Individuals
CSAT Cooperative Agreement : #TI025344

Illinois CABHI-States

CABHI-States is a partnership between the Center for Substance Abuse Treatment (CSAT) and Center for Mental Health Services (CMHS) of SAMHSA
In early Spring 2013, The Substance Abuse and Mental Health Services Administration (SAMHSA), the Center for Substance Abuse Treatment (CSAT) and the Center for Mental Health Services (CMHS), released the Request for Applications (RFA) for fiscal year 2013 Cooperative Agreements to Benefit Homeless Individuals for States (CABHI-States) awards.

- **Illinois Responded to the RFA**: Awarded at $711,818, for 3-years.
- **Other CABHI States**: Arizona, Colorado, Georgia, Hawaii, Louisiana, Massachusetts, Michigan, Nevada, Pennsylvania, Washington (11 states, including Illinois)
In early 2014, SAMHSA released the RFA for CABHI-States Supplemental.

- Illinois Responded to the RFA: Awarded at $499,351 for Year 2 of the project.
The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation.
SAMHSA's Mission & Vision

- **Vision** - SAMHSA provides leadership and devotes its resources, including programs, policies, information and data, contracts and grants, to help the United States act on the knowledge that:
  - Behavioral Health is essential for overall wellbeing
  - Prevention works
  - Treatment is effective
  - People recover from mental and substance use disorders
- **Mission** - It is SAMHSA's mission to reduce the impact of substance abuse and mental illness on America's communities.
The mission is to promote community-based substance abuse treatment and recovery services for individuals and families in every community. CSAT provides national leadership to improve access, reduce barriers, and promote high quality, effective treatment and recovery services.
The Center for Mental Health Services leads federal efforts to promote the prevention and treatment of mental disorders. Congress created CMHS to bring new hope to adults who have serious mental illness and children with emotional disorders.
Cooperative Agreements to Benefit Homeless Individuals for States: The purpose of this jointly funded program is:

- To enhance or develop the infrastructure of states and their treatment service systems
- To increase capacity to provide accessible, effective, comprehensive, coordinated/integrated, and evidence-based treatment services; permanent supportive housing; peer supports; CMHS-funded services and peer navigator(s); and other critical services to persons who experience chronic homelessness with substance use disorders, co-occurring substance use and mental disorders or mental health disorders.
The major goal of the CABHI-States program is to ensure, through state and local planning and service delivery, that the most vulnerable individuals who experience chronic homelessness receive access to sustainable permanent housing, treatment, recovery supports, Medicaid and other mainstream benefits.
The outcomes will include:

1) Assisting states to develop strategies associated with addressing the needs of individuals who experience chronic homelessness; and

2) Increasing the number of individuals placed in permanent supportive housing and enrolled in Medicaid and other mainstream benefits (e.g., SSI/SSDI, TANF, SNAP).
The CABHI-States Award for the State of Illinois has two primary purposes:

- The first is to develop and maintain statewide infrastructure capabilities that will be responsible for the design, monitoring, and provision of effective treatment and recovery support services for chronically homeless persons in Illinois with SUDs, Co-occurring substance use and mental health disorders or MHD.

- The second primary purpose of the award is to implement an expansion of these services to chronically homeless persons within the City of Chicago and Kane County.
An integral part of each of these dual purposes is to collaborate with the Illinois Department of Healthcare and Family Services (IHFS), our state’s Medicaid eligibility agency, in the development of a streamlined eligibility process for individuals of our population of focus, and assisting community based service organizations in becoming qualified in engaging and enrolling eligible chronically homeless persons in Medicaid and other available benefit programs.
The target population: **chronically homeless** individuals within the City of Chicago and Kane County who have diagnosable substance use disorders (SUDs), co-occurring SUDs and mental health disorders or diagnosable mental health disorders (MHD).

Chronically Homeless persons who will be admitted to services through this treatment expansion will be screened and referred by participating permanent supportive housing (PSH) providers located within the City of Chicago community areas and Kane County.
Defining Chronic Homelessness

- Homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter;
- Has been homeless and living or residing in one of the conditions listed above, continuously for at least 1 year or on at least 4 separate occasions in the last 3 years; and
- Has an adult head of household with a **substance use disorder**, **serious mental illness**, developmental disability, post traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions.
- In addition, a person who currently lives or resides in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility, and has resided there for fewer than 90 days.
Illinois CABHI-States
Project Goal 1:

- The Illinois CABHI-States cooperative agreement has the following major infrastructure and service expansion goals and objectives:

  Expand and improve the infrastructure capabilities within the State of Illinois that are responsible for coordinating, developing, planning, supporting, and providing effective treatment and recovery support services for chronically homeless persons with substance use disorders, co-occurring substance use and mental health disorders or mental health disorders.
Establish and sustain an Illinois State Interagency Council on Homelessness, and develop and implement a statewide plan.

Develop and implement a streamlined process for the enrollment of eligible chronically homeless persons in Medicaid and other mainstream benefit programs.

Improve the capabilities and resources of community-based service organizations.

Identify and assist service providers in the implementation of electronic health record (HER) and other technology-assisted care (TAC) systems.

Implement training/workforce development activities.
Expand and enhance the treatment and recovery support services that are available to chronically homeless persons in Illinois with substance use disorders, co-occurring substance use and mental health disorders or mental health disorder.
Project Goal 2: Objectives

- Execute and maintain a contract with the McDermott Center (d.b.a. Haymarket) and Renz Addiction Counseling Center-who will establish a multi-disciplinary treatment team and soon to be determined DMH providers.
- Develop and maintain linkage agreements with supportive housing providers.
- Ensure the participation and completion of clinical staff in training.
- Provide expanded and enhanced treatment and recovery support services to at least 180 chronically homeless persons over the 3 years of SAMHSA funding.
Illinois CABHI-States Project Goal 3:

Document and assess CABHI-States Infrastructure development activities, and the expanded treatment and recovery support services for chronically homeless persons.
Contract with Lighthouse Institute to conduct performance measurements

Document and measure the infrastructure development activities and accomplishments

Document and measure the expanded treatment and recovery support services and participant outcomes

Maintain a follow-up completion rate of at least 85% at each interval (3, 6, 9 and 12 month-GPRA)

Disseminate interim performance measurement reports to cooperative agreement stakeholders.
Illinois CABHI-States Partners

- McDermott Center (d.b.a. Haymarket House)
- Renz Addiction Counseling Center
- DHS/Division of Mental Health Providers
- Chestnut Health Systems (Lighthouse Institute)
- Illinois Co-Occurring Center for Excellence
- Permanent Housing Providers
  - Alexian Brothers, Catholic Charities, Chicago House
  - Christian Community Health Center, Lincoln Park Community Shelter, Renaissance Social Services, Housing Opportunities for Women, St. Leonard’s Ministries, Thresholds,
  - Additional PSH providers
The Illinois CABHI-States Project will work directly with the Vulnerability Index (VI), the tool used to prioritize homeless persons according to the fragility of their health and circumstances (i.e. physical, mental health and substance use problems) priority placement on the CRS.

Evidence-based alcohol and illegal drug use screening tools will be used by the PSH Providers in the identification and referral of eligible individuals to Haymarket, Renz’s multidisciplinary team and DMH providers.
Multiple Evidence Based Services & Practices

- Alcohol Use Disorders Identification Test-Consumption (Audit-C)
- Drug Abuse Screening Test (DAST-10)
- Patient Health Questionnaire (PHQ-9)
- Motivational Interviewing (MI)
- Contingency Management
- Recovery Management Check-up (RMC)
Individuals who screen positive will be referred to Haymarket Center, Renz Addiction Counseling Center or soon to be identified DMH providers for a full assessment.

Those individuals in need of either Level I (O.P.) or Level II (Intensive O.P.) SUD treatment or mental health services will have their services supported through the CABHI-States Award.
Achievement of the project goals will result in improved long-term recovery and post-treatment outcomes among chronically homeless persons with SUD or MHD in Illinois.

This project will serve as a learning laboratory whereby Illinois can strategize improving access to a full continuum of services during and beyond the award.