

Services For People Who Are Experiencing Homelessness or At Risk of Homelessness

Joanette Robertson Mental Health Services Section Chief Bureau of Prevention Treatment and Recovery March 22, 2021

To protect and promote the health and safety of the people of Wisconsin.

Programs and Services

- The Division of Care and Treatment Services supports public behavioral health services.
- Community-based services primarily are administered by county agencies.
- Examples of these services include:
 - Emergency/crisis services.
 - Outpatient mental health and substance use.
 - Comprehensive Community Services.
 - Community Support Programs.
 - Community Recovery Services.

Programs and Services

For clients experiencing or at-risk for homelessness, the priority of all programs is to assist the client in securing stable housing.

Projects for Assistance in Transition from Homelessness (PATH)

- PATH is a mix of federal and state funds to support people with serious mental illness experiencing or at-risk for homelessness.
- Eight agencies receive funding to provide outreach, screening, treatment, and support services in eight counties (Brown, Dane, Kenosha, Milwaukee, Outagamie, Racine, Rock, and Waukesha).
- In the last contract period (July 2019-June 2020), 1,582 people were contacted and 865 people were enrolled in the program.

SSI/SSDI Outreach, Access, and Recovery (SOAR)

- SOAR is a program designed to increase access to SSI/SSDI for eligible adults and children who are experiencing or at risk of homelessness and live with serious mental illness or a co-occurring substance use disorder.
- Five agencies receive funding: Fox Valley region, La Crosse County, Milwaukee County, Racine County, and Waukesha County.
- Case managers are trained and certified to utilize the SOAR model utilizing an online SOAR training program either for children or adults.
- Across the country, about 65% of the applications submitted using the SOAR model results in benefits.



Milwaukee Continuum of Care



VISION

The Milwaukee CoC is a cohesive force of influence consisting of homeless service providers, advocates, activists and governments that can avail and create substantial resources and research and lead the community in the collective, compassionate and evidence-based pursuit of ending and preventing homelessness.

- The Milwaukee Continuum of Care covers the City of Milwaukee, City of West Allis, City of Wauwatosa and the remainder of Milwaukee County.
- The Milwaukee Continuum of Care is a 100+ member strong coalition open to any organization or individual interested in services and advocacy for people experiencing homelessness.
- > Number of individuals experiencing homelessness in Milwaukee County (according to the 2020 Point In Time Count)
 - 970 Total
 - Sheltered 883
 - Unsheltered 87
- 2021 Point in Time Count will be available in May (preliminary numbers show we are not seeing a big difference from 2020). We did see a decrease of individuals outside because our response to COVID/hotels.



MKE CoC Response to COVID March 12, 2020



- Decompress our congregate shelters by half.
- Create non-congregate isolation space:
 - 3 Hotels
 - Clare Hall (Symptomatic and COVID positive guests)
 - COVID testing at Clare Hall for our homelessness service providers.
 - 189 guests (singles and families).
 - Since March of 2020, we served and exited 239 households from hotels.
 - 95% of guests on our hotels have an assigned case manager.
- Our goal is to get our hotel guests into stable housing through our Rapid Rehousing program.
- Provided personal protective equipment to all of our staff and guests system wide.
- Working closely with the Milwaukee Health Department to provide COVID testing and now vaccines.



Homeless Services Consortium of Dane County

- Partnership of agencies, funders, advocates and people with lived experience committed to preventing and ending homelessness
- Vision: All persons should have the opportunity to secure and maintain safe, stable and affordable housing. Members believe that housing is a human right.
- Number of people experiencing homelessness as of March 19, 2021
 - Data from Housing Priority List
 - Single Adults: 494 individuals (521 a year ago)
 - Households with Children: 136 households (128 a year ago)



COVID-19 Shelter Response

- Families moved into hotels
- Men's shelter moved to temporary location for social distancing
- Women's shelter, more space, became 24 hours
- Day Centers limit number of guests, implement public health polices
- Vulnerable Population Hotels
 - People age 65+ and/or with certain medical conditions
 - Support services, 3 meals/day
- Isolation & Quarantine Hotel



Aging and Disability Resource Center Services Overview

Christine See, ADRC Program Manager Office for Resource Center Development March 22, 2021



Agenda

- Locations:
 - Aging and disability resource center (ADRC)
 - Tribal Aging and Disability Resource Specialist (ADRS)
- Populations served
- Services available at ADRCs and tribes
- Questions



Aging and Disability Resource Centers

- Locate an ADRC or tribal ADRS office.
- Choose county of customer's residency.
- Or choose from the list of tribes.
- Provides ADRC or tribal ADRS name, phone number, email, and physical address.



Populations Served

- Adults with disabilities (age 17 years 6 months and older)
- Adults age 60 years or older



• Families, friends, caregivers, advocates, and others on behalf of individuals within the target population



Information and Assistance Service

- **Information and assistance (I&A)** is determining a customer's needs and providing resource information to meet the identified needs.
- Gather customer's information to determine needs.
- Identify what services or programs are available to meet needs.
- Provide accurate and objective resource information to the customer.

Methods for Providing I&A

- Remotely
 - Telephone
 - Email



- Other electronic or written correspondence
- In-person at the ADRC office
 - Appointment
 - Walk-in

- In-person in the person's home (in-person or virtual)

Options Counseling Service

- **Options counseling** is a continuation of I&A that is offered to customers who need further assistance.
- Learn the customer's values and preferences.
- Help the customer to evaluate and weigh long-term care service options.
- Develop an action plan to determine next steps.
- Provide follow-up contact to check on the action plan.

Methods for Providing Options Counseling

- In-person in the person's home (in-person or virtual)
- In-person at the ADRC office
 - Appointment
 - Walk-in
- Remotely
 - Telephone
 - Email
 - Other electronic or written correspondence

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Information and Assistance to Options Counseling



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Assess need for **Options Counseling**

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Perform Options Counseling to determine customer's preferences and needs

3



Enrollment Counseling Service

- **Enrollment counseling** is explaining the basic features of publicly-funded managed care, fee-for-service Medicaid, and self-directed support programs that are available to the individual. Review, discuss, and provide objective information about:
- Covered benefits
- Provider networks and care coordination
- Self-direction and choice
- Quality and performance indicators

Publicly-funded Long Term Care Program Eligibility

- Financial eligibility criteria
 - Current full-benefit Medicaid recipient
 - Assistance with applying for Medicaid
- Functional eligibility criteria
 - Determined by the adult long-term care functional screen (LTCFS)

Entitlement

- Eligible individuals can enroll without delay.
- There are no waiting lists (as of March 1, 2021).
- All 72 counties are at entitlement now.

Benefit Specialists Program

- Disability benefit specialists (DBS) serve people ages 17 and 9 months to 59 years with a disability.
- Elder benefit specialists (EBS) serve people ages 60 and older.
- Tribal benefit specialists are also available.
- The Office for the Deaf and Hard of Hearing employs a Deaf Disability Benefit Specialist who is fluent in American Sign Language.

Benefit Specialist Services

Benefit specialists help people:

- Address questions and problems related to benefits such as Medicare, Medicaid, Social Security, FoodShare, and health insurance.
- Identify and apply for programs.
- File an appeal with eligibility or coverage is denied.
- Provide a referral to an appropriate attorney when necessary.

Dementia Care Specialist (DCS) Program

- 33 DCS positions statewide cover 56 counties and five tribes
 - 34 out of 48 ADRCs (some ADRCs cover more than one county)
 - 5 out of 11 tribes

DCS Program Pillars

- Increase the dementia capability of the local ADRCs as well as other county and tribal agencies.
- Facilitate local efforts to build dementia-friendly communities.
- Support people with dementia and family caregivers to remain active and able to stay in their own homes in the community.

Questions

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COVID-19 Vaccination Updates





Vaccine Successes!

- Over 2.1 million doses administered in Wisconsin
- 23% of Wisconsin residents have received at least 1 dose
- 13% have completed the series
- Over 70% of individuals 65+ have been vaccinated.

But...there still are many more who need to be vaccinated!





Currently Authorized Vaccines

There are currently 3 vaccines which have received Emergency Use Authorization (EUA)

- Pfizer BioNTech- mRNA vaccine
- Moderna mRNA vaccine
- Johnson and Johnson (Janssen)- viral vector vaccine
- All three use the spike protein from the SARS-CoV-2 virus to elicit the immune response.





COVID-19 Vaccine Comparison

	Age Indication	Number of doses per series	Interval between doses
Pfizer	16+ years	2	3 weeks (21 days)
Moderna	18+ years	2	1 month (28 days)
Janssen	18+ years	1	N/A





Vaccine Supply

- Impossible to accurately predict vaccine supply, but there is reason for optimism
- Wisconsin is receiving roughly 135,000 "first doses" per week right now
- By early April, Wisconsin's allocation may increase significantly as Pfizer, Moderna, and Johnson & Johnson ramp up









Eligible Groups



Currently Eligible

- Frontline health care personnel
- Residents and staff in skilled nursing and long-term care facilities
- Police and fire personnel, correctional staff
- Adults ages 65 and over
- Child care and educators
- Individuals enrolled in Medicaid LTC programs
- Public-facing essential workers (incl. 911, utility, public transit, food chain)
- Non-frontline essential health care personnel
- Staff and residents in congregate living facilities
- Faith leaders (clergy)
- Judges, prosecutors, district attorneys and public defenders

Individuals age 16 and older with:

- Asthma (moderate-to-severe)
- Cancer
- Cerebrovascular disease
- Chronic kidney disease
- COPD
- Cystic fibrosis
- Diabetes
- Down syndrome
- Heart conditions
- Hypertension
- Immunocompromised state
- Liver disease
- Neurologic conditions (i.e., intellectual disabilities and dementia)
- Obesity (body mass index [BMI] of 30-39 kg/m2)
- Overweight (BMI of 25-29)

Future

Tentatively May 1

- All Individuals age 16 and older
- Pregnancy
- Pulmonary fibrosis (having damaged or scarred lung tissues)
- Severe Obesity (BMI 40 kg/m2 or more)
- Sickle cell disease
- Thalassemia (a type of blood disorder)



Congregate Living Facility Staff and Residents (cont)

Staff and residents of congregate living facilities.

- Shelters: Shelter provided to those who are homeless and/or in need of protection (e.g., domestic violence shelters).
- Transitional housing: A project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living when such facilities include shared bedrooms.



 Incarcerated individuals: Individuals in jails, prisons, and mental health institutes.



Newly Eligible Group

As of March 22, individuals age 16 years and older with certain medical conditions will be eligible:

- Asthma (moderate-to-severe)
- Cancer
- Cerebrovascular disease (affects blood vessels and blood supply to the brain)
- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Cystic fibrosis
- Down syndrome
- Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
- Hypertension or high blood pressure





Newly Eligible Group

Continued

- Immunocompromised state (weakened immune system) from solid organ transplant, blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids, or use of other immune weakening medicines
- Liver disease
- Neurologic conditions, such as dementia
- Obesity (body mass index [BMI] of 30-39 kg/m2)
- Overweight (BMI of 25-29 kg/m2)
- Pregnancy
- Pulmonary fibrosis (having damaged or scarred lung tissues)
- Severe Obesity (BMI 40 kg/m2 or more)
- Sickle cell disease
- Type 1 or 2 diabetes mellitus
- Thalassemia (a type of blood disorder)



Vaccination Access

- Vaccination will be supported by:
 - Local and Tribal Health Departments (LTHD)
 - pharmacy partners
 - hospitals and clinics
 - employers
 - home health agencies/community and commercial vaccinators
 - through State and Federal assistance in the form of
 - community-based vaccination clinics
 - mobile vaccination teams





Resources

- Vaccine Provider Map
- Vaccine Registry
- Hotline: 1-844-684-1065
 - Available in Spanish, Hmong, Chinese Mandarin, Hindi, and Somali
- Email
 - DHSCOVIDVACCINEPUBLIC@wisconsin.gov





HOW OUR BODIES RESPOND TO THE COVID-19 VACCINE



HOW VACCINES WORK

Vaccines provide protection against bacteria or viruses that make us sick. They work by triggering our immune system to recognize a particular bacteria or virus and build immunity to defend against it if it return.

HOW THE COVID-19 VACCINE WORKS

Both the Pfizer and Moderna vaccines are mRNA vaccines, while vaccine is a viral vector vaccine. These vaccines use a different t GETTING A COVID-19 VACCINE same response in our bodies. None of these vaccines can give yo

- Pfizer and Moderna vaccines contain mRNA that instruct out coronavirus spike protein, the same protein that is found on COVID-19 virus.
- The Johnson & Johnson vaccine uses a harmless virus to deli on how to make the coronavirus spike protein.
- The coronavirus spike protein is harmless on its own.
- By making the spike protein, it allows our immune system to that can defend against COVID-19. This helps protect us from virus enters our bodies because our immune system can now to defend itself from infection.

SIDE EFFECTS ARE NORMAL

Our immune cells work throughout the body and produce side efforts and







The nurse will put the

vaccine in your arm. It will

feel like a pinch or a prick

COVID-19 can make people

sick and some people

can die.

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You will most likely go to the

clinic or pharmacy to get

your vaccine.



Band-Aid on your arm

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You will check in when you

arrive and wait for the nurse

to call your name.



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rou should ask, "Do I need to come back later for a second COVID-19 vaccine?"

COVID-19 Vaccine Safety

In the U.S., the Food and Drug Administration (FDA), the Advisory Committee on Immunization Practices (ACIP), and the Centers for Disease Control and Prevention (CDC) make sure all vaccines are safe and effective before approving them and continue to monitor their safety after approval.

Safety is the top priority during all phases of vaccine development, authorization or approval, and use.



In an emergency, FDA can issue an Emergency Use Authorization (EUA) to let people get a vaccine before all the trials are complete.

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- An EUA ensures that the best medical products are available as soon as possible, while still making sure that scientific and safety standards are met.
- The FDA only grants emergency use authorization of COVID-19 vaccines with current phase 3 trial data showing the vaccine is safe and effective.

Vaccine Safety Monitoring

After a vaccine gets authorized with an EUA or fully approved, CDC and FDA will continue to track the safety of COVID-19 vaccines for many years.

- V-safe, a new smartphone-based health checker, will make it even easier for people to report any health problems after they get their COVID-19 vaccine.
- Vaccine Adverse Event Reporting System (VAERS) is a national vaccine safety surveilance program that has been used to detect possible safety issues with vaccines for many years.
 - Anyone can, but doctors must, report adverse events (possible side effects or health problems) that occur after vaccination using VAERS.
- Clinical Immunization Safety Assessment (CISA) Project researches vaccine safety in special populations and helps U.S. clinicians answer vaccine safety questions about specific patients.

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Vaccine Side Effects

The common side effects include: fever, chills, body aches, and soreness at the injection site.



It is normal to have these, and is a sign that your body is building protection to the virus.



Most side effects go away in a few days. The likelihood of a severe side effect is less than 0.5%.



Some individuals are reporting more side effects after the second dose or if they have had COVID-19 disease.



Take Home Messages

- Eligibility groups have expanded recently- check to see when you are eligible.
- There are many different vaccinators/locations where you can receive a vaccine. Choose what works for you.
- All 3 vaccines are safe and effective (and free!).





Thank you!



