



Statement of Work

Homeless Outreach Stabilization Team (HOST)

PURPOSE

Homeless Outreach Stabilization Teams (HOST) serve people who are living with serious substance use disorders or co-occurring substance use disorders and behavioral health conditions, are experiencing homelessness, and whose severity of behavioral health symptom acuity level creates a barrier to accessing and receiving conventional behavioral health services and outreach models.

1. Provide field-based outreach services and intensive case management support to engage the most vulnerable individuals into services with the ultimate goals of addressing their behavioral and physical health needs, increasing stability, obtaining housing, and transitioning them into long-term services for their substance use disorders or co-occurring substance use disorders and behavioral health conditions.
2. HOST programs will utilize the principles consistent with modified Assertive Community Treatment (ACT) model that will best serve targeted population.

SERVICE POPULATION

Priority populations should focus serving individuals who are living with serious substance use disorders or co-occurring substance use disorders and behavioral health conditions, are experiencing homelessness, and whose severity of behavioral health symptom acuity level creates a barrier to accessing and receiving conventional behavioral health services and outreach models.

Homeless means lacking fixed, regular, and adequate night-time residence, or having a primary night-time residence that is:

1. A supervised publicly or privately operated shelter designed to provide temporary living accommodations;
2. An institution that provides a temporary residence for individuals; and
3. A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

SERVICES

HOST programs employ a multidisciplinary team to include but not limited to licensed Mental Health Professionals (MHPs), Substance Use Disorder Professionals (SUDPs), Advanced Registered Nurse Practitioners (ARNPs), SUD Peer Specialists who:

1. Provide outreach and engagement activities in locations typically outside of a traditional office setting and include making initial contact with the individual and building rapport.
 2. Complete an assessment of basic needs, including behavioral health and substance use disorder conditions, medical, housing, benefits, legal, safety and cultural needs, as appropriate.
 3. Provide ongoing field-based outreach case management support, intensive case management and other comprehensive employment and housing supportive services.
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4. Provide prescribing and medication management.
5. Employ field-based strategies to identify individuals with substance use disorders and other behavioral health needs in a culturally competent, harm reduction, recovery oriented, trauma sensitive manner.
6. Maintain referral pathways for community members, emergency services, treatment providers and other community-based entities.
7. Support direct linkages to treatment supports to include short and long-term housing, facility-based stabilization, withdrawal management, outpatient, medical services or other behavioral health or community-based care as appropriate.
8. Create transition plan for individuals exiting program to include information about referrals made, linkage to services, as well as any future made with the individual to address their ongoing needs.
9. Maintain individual service records to include assessments, determination of eligibility, service plan that includes individualized goals utilizing person centered approach and progress notes.

PROGRAM STAFFING

HOST programs will employ a multidisciplinary team to include licensed professionals. Programs will have established lines of appropriate supervision. Case Loads will range from 10-15 for specialist staff (MHPs, SUDPs), 15-20 for Intensive Case Managers and 20-30 for Outreach Case Managers.

COORDINATION

1. HOST programs will coordinate closely with parallel outreach programs in the service area, crisis services and/or community-based diversion programs.
2. HOST programs will coordinate closely with emergency services, criminal justice systems, inpatient/residential service providers, tribal governments, Indian Health Care Providers (IHCP) and outpatient providers to ensure access to timely and appropriate behavioral health treatment.

DATA/REPORTING

Reporting may include but are not limited to:

1. Monthly status reports pertaining to outreach and engagement services provided by the HOST team. Reporting will include, number of individuals served, outcomes of services provided and a narrative describing successes and challenges.
2. Program services and contact interactions between a HOST-funded worker or workers and an individual who is potentially HOST eligible or enrolled in HOST.

DELIVERABLES

HOST Workbook

HOST Narrative Document

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