## DEPARTMENT OF MENTAL HEALTH

## STRATEGIC PLAN HIGHLIGHTS

**FY15 First Quarter** 

## **HOUSING GRANT**

The Substance Abuse and Mental Health Services Administration (SAMHSA) has awarded the Mississippi Department of Mental Health's Division of Community Living a grant

for the implementation of the Mississippi Housing 4 Recovery initiative.

DMH received notification in September that the agency has been selected by SAMHSA to receive \$1,189,391 for the first year of implementation of the Mississippi Housing 4 Recovery (MH4R) initiative to address housing and support service needs of persons who are experiencing chronic homelessness with substance use or co-occurring substance use and mental health disorders.

Also referred to as Cooperative Agreement to Benefit Homeless Individuals or CABHI-States grants, SAMHSA was expected to award up to 11 of these grants in 2014. This important initiative

is designed to combine provision of resources and services while supporting the dissemination of best practices statewide and incorporating recovery at every level of service. "What this means for DMH is the opportunity to expand and enhance programs and services that are already proving to be effective in supporting individuals to enable them to live successfully in the community," said Trisha Hinson, Director of the DMH Division of Community Living.

**Goal 1:** To increase access to community-based care and supports through a network of service providers that are committed to a recovery and resiliency-oriented system of care

**Objective 1.3:** Provide a comprehensive, recovery-oriented system of community supports for persons transitioning to the community and to prevent out-of-home placements

will be implemented over a three year period. During that time frame, it is expected to enroll and serve a total of 297 individuals. It includes a commitment from five service providers of approximately 109 housing slots per year, for a total of 327 housing slots.

The MH4R initiative

It will expand or enhance a number of best-practice models that are already in use in the Department of Mental Health, including Housing First and the

Oxford House models. Housing First is a model that advocates getting homeless individuals into their own apartment or house immediately, without transitional steps such as shelters or group homes. The Oxford

House model is another concept in which a group of individuals in recovery from drug and alcohol use run their own self-sustaining and drug-free household.





In an effort to continue to expand community-based services, the Mississippi Department of Mental Health (DMH) is under way with the development of four additional Program of Assertive Community Treatment (PACT) Teams.

The new teams will be operating in Mississippi's Gulf Coast region, the Hattiesburg region, DeSoto County and to the Jackson Metro area. Pine Belt Mental Healthcare Resources will operate the teams in the Hattiesburg and coastal counties, Timber Hills Mental Health Services will operate the team in DeSoto County and Hinds Behavioral Health Services will operate the team based in Jackson.

PACT is an individual-centered, recovery-oriented, mental health service delivery model for facilitating community living, psychological rehabilitation and recovery for persons who have the most severe and persistent mental illnesses and have not benefited from traditional outpatient services.

"We have developed a motto with our PACT teams, and that is 'Whatever it takes,'" said Andrew Day, Director of Adult Services in the DMH Bureau of Community Mental Health Services. "That's what we do. It's all



about the individuals we're serving. The teams figure out how to deliver services in the best way possible to each individual."

These four new teams will be in addition to the two DMH currently has in the state, one operated by Life Help Community Mental Health Center based out of Greenwood and one operated by Warren Yazoo Mental Health Center based out of Vicksburg.

PACT Teams serve individuals who may have gone without appropriate services. They are mobile, delivering services in the community and enabling individuals to avoid treatment in an inpatient setting. Each PACT team is made of individuals from multidisciplinary backgrounds who share responsibility for addressing the needs of the individuals served. The services they deliver are individually tailored for each individual to address their goals and preferences.

The PACT teams that have al-

ready been operating have made a significant difference for the individuals they have served, said Charles Stampley, Team Leader for the Warren-Yazoo PACT program.

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"I think there is a strong need for programs like PACT," he said. "All of the services are individualized for each client, and are as hands-on as any program could get. I believe for the underserved and less responsive to traditional mental health clients, a program such as this that encompasses a holistic approach is what the client would need."

Stampley said the PACT teams have had a significant impact for individuals who are homeless, and approximately 25 percent of those the team serves are homeless or in imminent danger of becoming homeless. They often have significant financial conflicts, he said.

"PACT has seen dramatic benefits within this area, as all but one individual of the 25 percent has been paired with housing. About one third of the 25 percent has allowed PACT to assist them with money management.

"It has meant a lot to the individuals served, as it has meant for us to provide the service," Stampley said.

