THE CITY OF FULLERON

REPORT OF THE FULLERTON TASK FORCE ON HOMELESSNESS AND MENTAL HEALTH SERVICES

VOLUME 1: REPORT



JUNE 5, 2012

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Acknowledgements

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¹ Task Force Members' Biographies and Dedications are located under separate cover within Volume 2: Appendices.

Executive Summary

As Abraham Lincoln stated, "We can succeed only by concert. It is not 'can any of us imagine better?" but 'can we all do better?"

In September 2011, the Fullerton City Council established the Fullerton Task Force on Homelessness and Mental Health Services in response to the tragic death of Kelly Thomas, a member of the Fullerton community who was homeless and suffered from schizophrenia. The City Council charged the Task Force with five duties, all focused on improving the resources and services available in Fullerton for mentally ill and homeless members of the community.

The Fullerton Task Force on Homelessness and Mental Health Services was comprised of exceptionally dedicated and experienced individuals who met 13 times over a six-month period as an independent body and twice were present for City Council meetings focused on the Task Force's recommendations. The Task Force prepared the following equally-valued recommendations for consideration by the City Council:

- 1. <u>Year-Round Shelter</u>: Collaborate with the County of Orange, surrounding cities, and service providers to identify and secure a site to create a regional year-round multi-service center that includes a low threshold emergency shelter for the homeless that is accessible to Fullerton residents.
- Census and Needs Assessment of Homeless: Direct City staff to work with Mercy House and/or other organizations to conduct a census and needs assessment of Fullerton's homeless population.
- 3. <u>Information Accessibility</u>: Direct City staff to identify specific opportunities to effectively disseminate useful information to the mentally ill homeless (e.g. bulletin boards, kiosks, website, etc.) and support efforts to disseminate useful information through financial assistance, in-kind services, referrals, etc.
- 4. <u>Laura's Law:</u> Prepare and submit a letter from the Fullerton City Council to the Orange County Board of Supervisors supporting the implementation of Laura's Law or alternative that achieves the objectives of Laura's Law.
- 5. <u>Permanent Supportive Housing</u>: Work with the County of Orange to identify and acquire land in Fullerton for a permanent supportive housing development to serve the mentally ill homeless (e.g. Diamond Apartments in Anaheim).
- 6. Affordable Housing for Very-Low and Extremely-Low Income Residents:
 Consistent with the City of Fullerton Housing Element and State law, support efforts to create affordable housing for very-low and extremely-low income residents through a range of techniques that may include: re-use of existing

buildings for single resident occupancy use; conversion of storefronts in existing unused buildings into very-low and extremely-low income apartments; inclusion of very-low income housing as small parts of larger multi-income projects; etc.

- 7. Outreach Clinicians: Request from the County of Orange Health Care Agency Behavioral Health Services the provision of a clinician to the Fullerton Police Department to conduct outreach to the mentally ill homeless independently and in tandem with police officers.
- 8. <u>Continue Task Force</u>: Continue the Fullerton Task Force on Homelessness and Mental Health Services and alter its charge to oversee implementation of the recommendations approved by the City Council.

Based on its accomplishment of the City Council's assigned duties and responsibilities, the Task Force has expressed – in no uncertain terms – that it intends to be a hands-on participant in the next steps. Specifically, the Task Force recommendations are premised on an expressed need to implement – that is, to make the recommendations a reality that serve as sustained resources for the homeless and mentally ill in Fullerton.

Overview of the Task Force

Background and Charge of the Task Force

In response to the tragic death of Kelly Thomas, a member of the Fullerton community who was homeless and suffered from schizophrenia, in August 2011, the Fullerton City Council directed City staff to develop a proposal for the formation of an ad hoc Task Force to assess the state of homelessness in Fullerton and survey mental health services available to residents and the larger Orange County community.

Working with professionals from a wide variety of public, private, and nonprofit agencies and organizations, staff presented Council with a set of recommendations on how such a Task Force could be organized and how it might function. In September 2011 the Council approved staff's recommendations and formed the Fullerton Task Force on Homelessness and Mental Health Services. The Task Force was charged with the following duties:

- Prepare a base assessment of homelessness in Fullerton and survey mental health services available to residents of Fullerton and surrounding Orange County communities, including services offered by the City, the county of Orange, non-profit organizations, the faith-based community, and other public or private organizations;
- Identify best practices relative to homelessness and mental health currently observed in other communities;
- Identify possible steps the City could take to build upon homelessness and mental health services already available;
- Host a forum(s) to solicit public input; and
- Make recommendations to the City Council for further consideration.

The Task Force was chaired by Rusty Kennedy, Executive Director of the OC Human Relations Commission. The Task Force's work was divided into two distinct elements: Education and Deliberation. First, the Task Force coordinated with Fullerton faith-based institutions to conduct a series of Listening Conferences with the community to discuss homeless and mental health issues. Each of these sessions were public and encouraged an open dialogue. At the same time, the Task Force invited representatives from local homeless and mental health service providers to speak at Task Force meetings and educate members and the public about the various services they provide.

Once the Listening Conferences and educational sessions had been completed, the Task Force engaged in the second work element, deliberation. This process began with a public, "Round Table" discussion where Task Force and community members could present broad ideas as to how Fullerton could better respond to homeless and mental health needs in the community. This process, which continued over several sessions, was meant to hone recommendations, making them as specific as possible.

City staff was directed to provide administrative support to the Task Force, arranging meetings and coordinating meeting agendas, as well as compiling information for the Task Force on Homelessness and Mental Health Services. This effort was led by Community Development Director Al Zelinka, with support from Assistant to the City Manager Rob Ferrier, Police Lieutenant Alex Bastreri, Executive Assistant Janelle Pasillas, and Intern Andrew Pasillas.

Over a 6-month plus period, the Task Force convened on the following dates:

- October 20, 2011
- November 3, 2011
- November 17, 2011
- December 1, 2011
- December 15, 2011
- January 5, 2012
- January 19, 2012
- February 2, 2012
- February 16, 2012
- March 1, 2012
- March 15, 2012
- March 29, 2012
- April 26, 2012

Additionally, the Task Force members were in attendance for presentations of Task Force City Council and General Recommendations at a City Council Study Session on May 15, 2012, and at the June 5, 2012, City Council meeting, wherein the recommendations were considered as a Regular Business Item. *Please refer to Volume 2: Appendices, Tab 3, for the Task Force meeting agenda and meeting minutes.*

Task Force Process and Key Findings

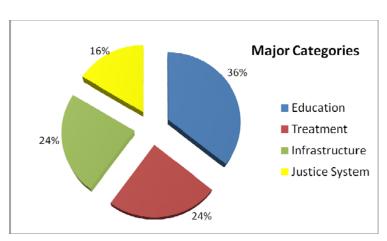
The six-month process of the Task Force entailed significant learning opportunities, exchange of information and ideas, and much discussion and deliberation to arrive at the priority recommendations requisite to improve the resources and services available in Fullerton for the mentally ill and homeless.

Listening Conferences²

The Fullerton Faith and Community Forum, who organized and conducted the Listening Conferences, has as its mission: To provide training & awareness of available resources and advocacy for additional resources. The specific goal of the Listening Conferences (LC) was to better understand the resources needed for the homeless and mentally ill through active listening. Please refer to Volume 2: Appendices, Tab 4, for the complete report on the Listening Conferences.

Listening Conference I & II: The Solutions Question

LC I occurred on October 27, 2011, at First Christian Church in Fullerton. LC II occurred on November 12, 2011, at Temple Beth Tikvah, also in Fullerton. LC I & II were focused on seeking insights to the following question: "What might an ideal future look like when it comes to the community's engagement with the severely mentally ill homeless?"



Approximately 100 people, largely from Fullerton's interfaith community, attended LC I & II. There were slightly more women than men with an age range from young adults to retired seniors. Attendees represented a wide variety of occupations from professionals to laypersons. Each conference format consisted of listening groups of three to six people answering a short questionnaire intended to prompt personal stories and experiences surrounding the issues. A group leader documented answers to questions and presented this to the entire LC assembly.

²Adapted from "Fullerton Listening Conferences I, II, and III: A Report presented to the Fullerton Homeless Task Force on January 19, 2012," Fullerton Faith and Community Forum. The full report may be found in the Appendices.

Notes of both the small group presentations and some ancillary discussions at the large assembly are included in the data where it was relevant.

Results from LC I & II revealed four large themes running through answers to the solutions question. Themes were assigned the following categories: Education, Treatment, Infrastructure, and the Justice System. The top three ideas for each of these categories are presented below.

TOP THREE EDUCATION IDEAS:

- 1. Launch public awareness campaigns and conduct public lectures to educate the community and reduce the stigma of mental illness
- 2. Train police and social services professionals on the handling and management of the severely mentally ill
- 3. Create pamphlets and web content on mental illness/homelessness for families and the general public

TOP THREE TREATMENT IDEAS:

- Prevent homelessness of mentally ill through early intervention, reducing "red tape", and partnering with police and families in the early stages of disease
- 2. Provide a wide variety of social and health services which also involve support for families of mentally ill
- 3. Create locally based case management services that are "one-on-one" oriented and focused on long-term/sustainable results for the "client".

TOP THREE INFRASTRUCTURE IDEAS:

- Provide single room occupancy housing near centralized services (e.g. Fullerton City Lights)
- 2. Open a mental health facility in North Orange County which provides full care services and drop-in capability
- 3. Create a centralized information resource that is kept up to date, easy to use, and accessible via the internet and cell phone apps

TOP THREE JUSTICE SYSTEM IDEAS:

- Strengthen the focus on implementing Laura's Law (AB1421) in Orange County
- 2. Advocate /lobby for laws which support mental illness and help the homeless
- Provide better tools for law enforcement & courts to increase their effectiveness in dealing with mental illness & homelessness (including review of critical incidents)

Listening Conference III: The Voice of the Homeless

LC III occurred on December 13, 2011, at the Hunt Branch Library in Fullerton. Approximately 20 homeless individuals were interviewed by about 25 volunteers in a team setting. The following comments were the most representative of the 95 comments and suggestions given by the homeless participants at LC III.

- "Need affordable housing..."
- "[Need] storage for personal belongings"
- "Need a job with medical care [benefits]"
- "Need showers, medical, locker system, laundry, bus passes, bathroom..."
- "2-1-1 is of no help to a single man that is not an alcoholic or drug addict"
- "Need dental care."
- "...it's too crowded [and] noisy to sleep at the Armory, and needing to leave at 4:45A.M. is hard..."
- "More transitional living available for single men with no addiction[s]..."
- "[We need a] social worker at the Armory to help find housing not just a phone number and not a meeting in 1 to 1.5 hours... [this needs to change to] "there's a space for you."
- "Too many crazy people at the Armory."
- "...jobs available only through agencies and are very limited [temporary] work programs."
- "All my ID was stolen."

Educational Presentations

To provide a foundation of understanding for Task Force members and the public on a range of topics, the first several months of meetings by the Task Force included educational topics. These topics included the following, and are summarized below:

- October 20, 2011 Topic: Community Forums on Mentally III and Homeless
- November 3, 2011 Topic: Shelter and Food Providers
- November 17, 2011 Topic: Parent, Family, and First-Responders Perspectives
- December 1, 2011 Topic: Lived Experiences Presented by Current and Formerly Homeless
- December 15, 2011 Topic: Behavioral Health Care
- January 5, 2012 Topic: Orange County's Ten-Year Plan to End Homelessness

References to additional materials located within the Appendices may be noted following the educational presentation summaries below.

October 20, 2011 – Topic: Community Forums on Mentally III and Homeless

Reverend Darrell McGowan, First Christian Church of Fullerton, Rabbi Ken Milhander, Temple Beth Tikvah, Kerry Gallagher, Orange County Congregation Community Organization, and Pam Keller, Fullerton Collaborative — Presented information on a Listening Conference that was held with the Fullerton Collaborative, and plans for future Listening Conferences. Please refer the information presented above regarding the Listening Conferences as well as to Volume 2: Appendices, Tab 4, for the complete report on the Listening Conferences.

November 3, 2011 - Topic: Shelter and Food Providers

<u>Pam Lee, Fullerton Interfaith Emergency Services</u> – Ms. Lee explained the handouts that had been provided, and also provided the Task Force with an understanding of the different housing types, and the number of beds under each type, in Fullerton.

<u>James Brooks, Mercy House</u> — Mr. Brooks explained how the Armory's seasonal program worked, and that he was expecting it to open on December 1 and hopefully remain open until April 1, unless funding ran out sooner. He provided information on the services provided, as well as some of the social services that were offered.

Please refer to Volume 2: Appendices, Tab 5, for materials pertinent to these Educational Presentations.

November 17, 2011 – Topic: Parent, Family, and First-Responders Perspectives

<u>Sue Serbin</u> – Ms. Serbin shared her experiences as a parent of a mentally ill child. She stressed the need for: laws that would allow patients to receive treatment before they become a danger to themselves or others; treatment centers that could treat the mentally ill over their objections if it was determined they were unable to make a reasonable decision; regular training for the police department; a way to track the mentally ill; and increased funding from the state.

<u>Janice DeLoof</u> – Ms. DeLoof discussed her experience as the parent of two mentally ill children, one of whom had committed suicide. She explained the need to help families get effective treatment for their mentally ill family members who lack of insight about their illness and to deal with the threats of violence that sometimes accompany mental illness, along with help dealing with the police department and criminal justice system.

<u>Corporal JD DiCaprio, FPD</u> – Corporal DiCaprio explained his position working with the homeless in the City and some of the challenges he faces. Some of his

suggestions were: a year-round emergency shelter; bus passes he could hand out; the need for detox centers, primarily for alcohol. He also discussed how the Armory let people who stayed there out at 5 a.m., and the fact that they had nowhere to go at that hour (parks don't open until 7 a.m.)

<u>Ron Thomas</u> — Mr. Thomas explained his experience with having a mentally ill child and made the following suggestions: need for board and care facilities that would offer structure and monitor medications; need for bus passes, food, clothing, and rain gear; need for lock-up facilities; need for a police department oversight committee.

Please refer to Volume 2: Appendices, Tab 5, for materials pertinent to these Educational Presentations.

December 1, 2011 – Topic: Lived Experiences Presented by Current and Formerly Homeless

<u>Madeline Leon</u> – Currently a resident at Diamond Apartments in Anaheim (operated by HOMES Inc. in conjunction with OCHA and Jamboree Housing), she explained the mental health and case management services she receives through Telecare Corporation. She was originally assisted by WTLC and participated in their transitional housing program, but due to her need for mental health services she was not successful on her own and could not retain employment or care for her two sons. She next participated in the Peer-to-Peer classes offered by NAMI, which helped her understand her mental health challenges, and also connected her with Homes, Inc. and Telecare. She now has her two boys living with her.

<u>Don Haylock</u> – Don explained that he suffers with Bipolar Disorder and described a number of "dark" years during which time he was institutionalized, and then spent time on the street. He described circumstances of physical, mental and emotional pain, with an outcome of "survival". Don stated that he found it therapeutic to tell his story to others, but now feels it is more effective to talk about how he feels today.

Don was asked what turned things around for him. He responded that earlier in life he never truly understood his own disorder, and was improperly medicated. When he arrived in Orange County he met people in the community that reached out to him and provided him with services that made him feel confident in himself, and loved.

In later comments Don stated that he felt the economy had made homelessness a permanent issue that was no longer preventable. He expressed hope that there could be more locations like the Diamond Apartments made available, particularly for people that have some ability to pay (SSI, etc). He also wondered if the City could purchase foreclosed homes and make them available for housing individuals that have some ability to pay a small amount of rent.

Joy Torres – Joy shared that she was diagnosed as paranoid schizophrenic at age five. She arrived in Orange County in 1989, with a one-year-old child and pregnant. At that time she was not aware of any services or how to find them, and she became entrenched in life on the street, spending most of her time at the Salvation Army in Santa Ana. Joy has had eight children, which have all been placed "in the system". She described circumstances in which she feared the police, but ultimately was helped by a police officer that took her to the Drop-In Center. It was through the services she was offered there that she became stronger and began to trust the people that wanted to help her. She now feels that if you want something in life you can get it, but the right person has to come along and reach out to you. Joy now has shelter, sees a doctor regularly, and spends time volunteering to help others. Joy also stated that "you cannot force a program on people" and that some people find support and family among their homeless peers on the street rather than through a program.

<u>Curtis Gamble</u> – Curtis has been homeless for approximately $2\frac{1}{2}$ years. Prior to that time he lived in Anaheim for 16 years and worked as a bus driver for the OCTA. He stated that he became a taxi driver after he was fired by the OCTA as a result of his union activities. Curtis was unable earn enough money to keep his licensing current and ultimately lost his taxi business when his vehicle was impounded. It was at that point that he became homeless and lived in local parks supported by handouts offered by friends. One day a bus driver handed him a flyer about Mary's Kitchen. He spoke very highly of the services offered by this shelter including: food, shelter, showers, laundry facilities, an address to use to receive mail, and a telephone. A woman volunteering at the shelter took him to her own dentist and paid for him to get dental work done.

Curtis was asked if he still lives on the street. He responded that he sleeps on bus benches and camps in the river bed with other homeless. He stated that he does not choose to use the Armory because of the time restrictions.

When asked what would help him to get off the street, Curtis felt that (1) transportation, such as 30-day bus passes would help him get to the locations that offered the services he needs, and (2) a place to sleep overnight, such as a hotel voucher. Curtis explained that sleeping on the streets means staying out of the way, and thus staying up late until businesses close and getting up before they open again. Sleep deprivation is a problem. Rest is very important, especially for those struggling with mental illness.

<u>Kimmyn Kadera</u> – Also a resident at Diamond Apartments, Kimmyn receives services through Telecare that have allowed her to keep her two children with her. She expressed a desire to return to her hometown of Fullerton if the City could provide a similar development.

<u>Mike</u> – Age 57 and homeless, Mike described "pioneering" as camping in two locations in Fullerton (near the 57 Freeway and on Rosecrans). He explained that without a residential address a person cannot obtain a post office box, or register for school. This has made things difficult for him to progress out of his situation. Previously Mike lived inside the garage of a friend, which he noted is illegal in Fullerton. Mike chooses not to use the Armory facility because he fears getting sick from people that come there that are ill. However, he does think it would be beneficial to have shelters like the Armory available in other parts of town so that people do not all have to go to one place. In later comments Mike added that it would be helpful to have storage lockers for personal possessions (such as the bike lockers he previously utilized). He explained that it is hard for people to move around with their belongings, or to leave them behind during the day without them getting stolen or cleared away before they return.

December 15, 2011 - Topic: Behavioral Health Care

Mark Refowitz, Annette Mugrditchian, Tony Delgado, and Dr. Clayton Chau, Orange County Health Care Agency – Their individual presentations explained the various services provided by Orange County. Mr. Refowitz explained that funding was available to create permanent housing for the homeless, and he urged the City to work with the County on this type of project.

<u>Dr. Jody Rawles</u> – Dr. Rawles explained the requirements for involuntary treatment of the mentally ill, and the various laws that pertained to such holds. He introduced the strengths of Laura's Law, which could be used to compel people to seek treatment before there is a need for a 5150. Laura's Law is currently not adopted in Orange County and it would be the role of the Board of Supervisors to do so.

January 5, 2012 – Topic: Orange County's Ten-Year Plan to End Homelessness

Carolyn McInerney, Ending Homelessness 2020 Board — Ms. McInerney outlined the Ten-Year Plan and stressed its importance for the County's efforts to remain competitive for Federal Homeless Assistance Funding. The plan's aim is to initiate changes in the ways homelessness is systematically addressed throughout the County. Nine distinct goals were presented as part of the plan, including, prevention, outreach, increased community support, and improving the efficacy of emergency shelters, transitional, and permanent housing. The presentation was concluded with reference to the many partners from around the County working in the Ten-Year Plan Working Group, including members of the Ending Homelessness 2020 Board, and description of the group implementation strategy for the plan.

<u>Karen Roper, Director OC Community Services</u> – Ms. Roper assessed how the City of Fullerton can align its resources to support the larger efforts to end homelessness

being put forth by the County with the Ten-Year Plan. She detailed the initiatives being made by OC Community Services to align the many resources throughout the County that can be used to aid in ending homelessness through examples.

After their presentations both speakers addressed questions from Task Force members regarding the Ten-Year Plan and its use for Fullerton.

Please refer to Volume 2: Appendices, Tab 5, for materials pertinent to these Educational Presentations.

Public Comments

In an effort to maximize public input and promote a constructive dialogue, three basic strategies were employed:

- Public comments were encouraged at Task Force meetings. In addition to the comments received by the public at each Task Force meeting, two Task Force meetings included agendized presentations by members of the public as follows:
 - January 5, 2012 Sandy Stiassni delivered a presentation entitled "Faces of the Houselessness in Fullerton"
 - February 2, 2012 Susan Garfield Wright delivered a presentation entitled "A Concrete Answer to Homelessness"
- 2. A comment board was provided at Task Force meetings for comments to be made on sticky-notes; and,
- 3. The City with the Task Force's concurrence engaged the services of MindMixer, a company that specializes in web-based portals that allow for public comment and information sharing. For MindMixer, a webpage was developed (http://www.fullertontaskforce.info/) to solicit ideas and feedback regarding Fullerton's mentally ill homeless and the services available to them; site visitors were encouraged to respond to conversation topics and offer suggestions.

The public comments and the input provided by MindMixer, combined with the Listening Conference input, the educational sessions, and the deliberations of the Task Force created the basis for the recommendations developed by the public and the Task Force during the February 2, 2012, roundtable session.

Please refer to Volume 2: Appendices, Tab 6, for materials pertinent to the Public Comments.

Roundtables

Based upon all information received and discussed to date, the Task Force participated with members of the public in five roundtable sessions that occurred at the February 2, 2012, meeting of the Fullerton Task Force on Homelessness and Mental Health Services. The purpose of the Roundtables was to arrive at recommendations for further discussion and refinement that would ultimately be approved by the Task Force for City Council consideration. The Roundtables arrived at the following 24 transcribed recommendations, organized by Roundtable theme. Additionally, two key questions on the topic of implementation were raised during the Roundtable session. The information generated below served as the basis for subsequent Task Force meetings on City Council recommendations.

A. Emergency Shelter | Transitional Shelter | Services

- 1. <u>Year-Round Shelter</u>: Create a year-round transitional, emergency shelter for the homeless with a variety of services.
- 2. <u>Mentorship Program</u>: Develop a mentorship program to walk homeless individuals through the process of obtaining IDs (e.g. birth certificates, California IDs, driver's license, social security cards, etc.).
- 3. <u>Alternative IDs</u>: Develop an alternative ID system for homeless individuals in Fullerton.
- 4. <u>Partnerships</u>: Facilitate partnerships between educational and religious institutions for rotating showers, laundry services, etc. (much like hot meal programs).
- 5. <u>Retirees</u>: Connect retired doctors, nurses, dentists, and other health providers with existing resources to meet medical and dental needs.
- 6. <u>Medi-Cal Outreach</u>: Provide Medi-Cal outreach staff to help people obtain Medi-Cal services.
- 7. <u>Transportation</u>: Group non-profits to purchase bus passes at group rate and work with OCTA to provide special passes for non-profits to pass out.

B. Information | Education | Advocacy

- 1. <u>Census of Homeless</u>: Conduct a census of Fullerton's homeless population and identification of needs.
- 2. <u>Best Practices</u>: Review models of best practices in other communities and match them to the needs of Fullerton.
- 3. Accessible Information: Compile data and information into an interactive on-line database to be shared via website, phone apps, and other communication vehicles (e.g. bulletin boards, kiosks, information centers, etc.)
- 4. <u>211 Providers</u>. Work with providers of 211 to provide better delivery of information.
- 5. <u>Coordination of Services</u>: Coordinate with resource providers the integration and delivery of services.

6. <u>Support Partnerships</u>: Encourage partnerships among non-profits, faith communities, and public agencies to work toward common goals.

C. Lack of Insight | Laura's Law

- 1. Laura's Law: Support the implementation of Laura's Law.
- 2. <u>Lack of Insight</u>: Identify people needing support before the effects of psychosis occur.
- 3. <u>Intervention</u>: Support court-ordered intervention, when warranted for individuals, to prevent crises through civil treatment and full services.
- 4. <u>Transportation</u>: Facilitate the provision of transportation to get individuals to needed services.
- 5. <u>Peer Mentoring</u>: Increase peer mentoring independent, of as well as in tandem with, Laura's Law.

D. Permanent Housing

- 1. <u>Land Acquisition</u>: Identify and acquire land for a "shelter plus care" development for mentally ill homeless (e.g. Diamond Isle in Anaheim).
- 2. <u>Building Re-Use</u>: Identify and convert existing buildings for single resident occupancy use.
- 3. <u>Storefront Housing</u>: Facilitate storefront conversion opportunities of existing unused buildings into very low and extremely low income apartments.
- 4. <u>Mixed Income Housing</u>: Include very low income housing as small parts of larger multi-income projects (i.e. inclusionary housing).

E. Supportive Services

- 1. <u>Wrap-Around Services</u>: Create a one-stop shop for wrap-around services to the mentally ill and homeless, including medical, social, spiritual, career services, peer-to-peer help, and a centralized address.
- 2. <u>Police Department Clinician</u>: Provide a Police Department Clinician(s) to conduct outreach to the mentally ill homeless independently and in tandem with police officers.

F. Implementation Questions

- Organization: Who leads the implementation of the Task Force recommendations? A coalition of non-profit service providers, faith-based organizations, public agencies, private sector, etc.? A city committee, working group, or commission? Other?
- 2. <u>Scale</u>: At what geographic scale do the recommendations of the Task Force apply? To the City of Fullerton only? To North Orange County? Other?

Task Force Recommendations

Building upon the recommendations prepared during its Roundtables with the public on February 2, 2012, the Fullerton Task Force on Homelessness and Mental Health Services worked over several meetings to prepare recommendations organized into the following two categories: those to be considered by the City Council and those to be considered generally by other partners. The Task Force finalized and approved the following recommendations at its March 29, 2012, meeting; additionally, refinements to City Council Recommendation No. 8 were approved by the Task Force at its April 26, 2012, meeting.

City Council Recommendations

The Fullerton Task Force on Homelessness and Mental Health Services recommends that the Fullerton City Council implement the following equally-valued recommendations.

- Year-Round Shelter: Collaborate with the county of Orange, surrounding cities, and service providers to identify and secure a site to create a regional yearround multi-service center that includes a low threshold emergency shelter for the homeless that is accessible to Fullerton residents.
- 2. <u>Census and Needs Assessment of Homeless</u>: Direct City staff to work with Mercy House and/or other organizations to conduct a census and needs assessment of Fullerton's homeless population.
- 3. <u>Information Accessibility</u>: Direct City staff to identify specific opportunities to effectively disseminate useful information to the mentally ill homeless (e.g. bulletin boards, kiosks, website, etc.) and support efforts to disseminate useful information through financial assistance, in-kind services, referrals, etc.
- 4. <u>Laura's Law:</u> Prepare and submit a letter from the Fullerton City Council to the Orange County Board of Supervisors supporting the implementation of Laura's Law or alternative that achieves the objectives of Laura's Law.
- 5. <u>Permanent Supportive Housing</u>: Work with the County of Orange to identify and acquire land in Fullerton for a permanent supportive housing development to serve the mentally ill homeless (e.g. Diamond Apartments in Anaheim).
- 6. Affordable Housing for Very-Low and Extremely-Low Income Residents:
 Consistent with the City of Fullerton Housing Element and State law, support efforts to create affordable housing for very-low and extremely-low income residents through a range of techniques that may include: re-use of existing buildings for single resident occupancy use; conversion of storefronts in existing

unused buildings into very-low and extremely-low income apartments; inclusion of very-low income housing as small parts of larger multi-income projects; etc.

- 7. Outreach Clinicians: Request from the County of Orange Health Care Agency Behavioral Health Services the provision of a clinician to the Fullerton Police Department to conduct outreach to the mentally ill homeless independently and in tandem with police officers.
- 8. <u>Continue Task Force</u>: Continue the Fullerton Task Force on Homelessness and Mental Health Services and alter its charge to oversee implementation of the recommendations approved by the City Council.

General Recommendations

The Fullerton Task Force on Homelessness and Mental Health Services recommends that community partners providing resources and services to the mentally ill and homeless in Fullerton implement or support the implementation of the following equally-valued recommendations.

A. Emergency Shelter

Refer to City Council Recommendations Above

B. Information | Education | Advocacy

- 1. <u>Best Practices</u>: Support "best practices" models, including those identified by the Commission to End Homelessness, that address homelessness used by other communities and match them to the needs of Fullerton.
- 2. <u>Delivery of 211 Assistance</u>: Service providers should work with providers of 211 to better coordinate delivery of information and assistance.
- 3. <u>Coordination of Services</u>: Support the integration and delivery of the varied services offered by homeless and mental health service providers.
- 4. <u>Cultivation of Support Partnerships</u>: Encourage partnerships between non-profits, the faith-based community, and public agencies that provide complementary services and share common goals.

C. Severely Mentally III Resistant to Treatment

- 1. Lack of Insight:
 - a) Educate the public to identify the mentally ill (i.e. those individuals with lack of insight into their illness), who need support before the effects of psychosis occur.
 - b) Support court-ordered intervention, when warranted, for individuals, to prevent crises through civil treatment and full services.
- Promote Conservatorship with Medication: Support the use of conservatorship with the order to include mandatory use of prescription medicines.

D. Permanent Supportive Housing

Refer to City Council Recommendations Above

E. Supportive Services

- Wrap-Around Services: Create a one-stop shop for wrap-around services to the mentally ill and homeless, including medical, social, spiritual, career services, peer-to-peer help, and a centralized address.
- Mentorship Program: Develop a mentorship program to walk homeless individuals through the process of obtaining IDs (e.g. birth certificates, California IDs, driver's license, social security cards, etc.)
- 3. <u>Alternative IDs</u>: Develop an alternative ID system for homeless individuals in Fullerton.
- 4. <u>Partnerships</u>: Facilitate partnerships by and among educational and religious institutions for rotating showers, laundry services, etc. (similar to hot meal programs).
- 5. <u>Retirees</u>: Connect retired doctors, nurses, dentists, and other health providers with existing resources to meet medical and dental needs.
- 6. <u>Transportation</u>: Group non-profits to purchase bus passes at group rates and work with OCTA to provide special passes for non-profits to distribute.
- 7. <u>Detox Centers</u>: Increase the number of detox centers that primarily provide alcohol treatment.
- 8. Rain Gear: Make rain gear available to the homeless.
- 9. Arts: Use the arts as a tool to educate the public on homelessness and mental illness.

Conclusion and Next Steps

The Fullerton Task Force on Homelessness and Mental Health Services achieved the September 2011 assignments of the Fullerton City Council. Here's how:

- <u>City Council-assigned Duty</u>: Prepare a base assessment of homelessness in Fullerton and survey mental health services available to residents of Fullerton and surrounding Orange County communities, including services offered by the City, the county of Orange, non-profit organizations, the faith-based community, and other public or private organizations;
 - <u>Task Force Follow-Through</u>: The educational presentations and information considered and deliberated throughout the six-month Task Force process provided an understanding and qualitative assessment of the available services and resources for the mentally ill homeless in Fullerton.
- <u>City Council-assigned Duty</u>: Identify best practices relative to homelessness and mental health currently observed in other communities;

- <u>Task Force Follow-Through</u>: The Task Force identified best practices relative
 to homelessness and mental health in other communities through the
 educational presentations and information sharing that occurred during
 Task Force meetings, regular articles included with agenda packets, and
 through the significant body of best practices included in the Orange
 County 2012 Ten-Year Plan to End Homelessness.
- <u>City Council-assigned Duty</u>: Identify possible steps the City could take to build upon homelessness and mental health services already available;
 - <u>Task Force Follow-Through</u>: The Task Force identified possible steps for the
 City to supplement the existing homelessness and mental health services
 through dialogue and deliberation during Task Force meetings, including its
 roundtable session, and as evidenced through the City Council and General
 Recommendations it produced.
- <u>City Council-assigned Duty</u>: Host a forum(s) to solicit public input;
 - Task Force Follow-Through: The Task Force facilitated significant public input through: 1) hosting three Listening Conferences; 2) public comments received at Task Force meetings; 3) a comment board at Task Force meetings for public input on sticky-notes; and, 4) the creation of a MindMixer public comment webpage at www.fullertontaskforce.info.
- <u>City Council-assigned Duty</u>: Make recommendations to the City Council for further consideration.
 - <u>Task Force Follow-Through</u>: The Task Force prepared City Council and General Recommendations presented in a City Council Study Session on May 15, 2012, and for consideration as a Regular Business Agenda Item at the June 5, 2012, City Council meeting.

Based on its accomplishment of the City Council's assigned duties and responsibilities, the Task Force has expressed – in no uncertain terms – that it intends to be hands-on participants in the next steps. Specifically, the Task Force recommendations are premised on an expressed need to implement – that is, to make the recommendations a reality that serve as sustained resources for the mentally ill homeless.

Through the Task Force, essential needs have been identified (i.e. the "ends"), and these needs are soundly rooted in on-the-ground realities; the Task Force is also aware, through the information sharing and deliberations that have occurred over the past several months, that the Fullerton community, as well as Orange County, have the collective capacity and resources to implement (i.e. the "means"). Thus, the next steps are focused on bringing together the "means" to implement the "ends" defined by the Task Force through its recommendations – including City Council Recommendation 8, which states:

<u>Continue Task Force</u>: Continue the Fullerton Task Force on Homelessness and Mental Health Services and alter its charge to oversee implementation of the recommendations approved by the City Council.

As the following quote by William Barclay expresses, implementation of the Task Force recommendations deserve focused effort by all within an atmosphere of importance and urgency:

"In the time we have it is surely our duty to do all the good we can to all the people we can in all the ways we can."