

SUBJECT: Single Point of Access (SPOA) Applications for Adult Clients	APPLICABLE TO: All DHS Directly Operated or Funded Facilities/Programs Serving Individuals and Families Experiencing Homelessness, and DHS Staff	ISSUED: March 02, 2020
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ADMINISTERED BY: Division of Family Services Division of Adult Services Street Homeless Solutions	APPROVED BY: Joslyn Carter, Administrator Department of Social Services/ Department of Homeless Services
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■ PURPOSE

SPOA (“Single Point of Access”) is designed to link New Yorkers who have a severe mental illness but who are not currently receiving mental health care with the appropriate level of services. Through a Memorandum of Understanding between the New York City Department of Health and Mental Hygiene (DOHMH) and the Department of Homeless Services (DHS), DHS and provider staff (“Staff”) can submit SPOA referrals without client consent for clients who demonstrate a clear need for services.

SPOA determines eligibility for the following programs¹:

- Assertive Community Treatment (ACT)
 - Treatment for people with a serious mental illness who have high service needs that are not being met in traditional settings. People with serious mental illness who are otherwise unable to connect to community treatment can receive clinical support from an interdisciplinary team.
- Shelter-Partnered Assertive Community Treatment (Shelter ACT, or SPACT)
 - Available to people with serious mental illness who are eligible for ACT and currently in a New York City mental health shelter
- Forensic Assertive Community Treatment (FACT)

¹ Mental Health Services: Single Point of Access (SPOA). (N.d.). Retrieved December 26, 2019, from <https://www1.nyc.gov/site/doh/providers/resources/mental-illness-single-point-of-access.page>.

- Available to people with serious mental illness who are eligible for ACT and have current forensic involvement
- Intensive Mobile Treatment (IMT)
 - Intended for people with serious mental illness who have been difficult to engage, including those who are transient and have high service needs
- Non-Medicaid Care Coordination (NMCC)
 - Available only for people with a serious mental illness

■ POLICY

Staff should refer clients currently disconnected from mental health services who have serious mental illness. This may be demonstrated by either:

- A documented diagnosis of or hospitalization for severe mental illness and/or
- Presenting with behaviors that warrant additional psychiatric supports or mental health services that go beyond the facility's capabilities.

Clients can be referred for SPOA regardless of their insurance or immigration status.

Important: If the primary reason for seeking services is related to intellectual disability, traumatic brain injury, or substance misuse, staff should prioritize referrals for services directly related to those issues (see below). SPOA is a referral program specifically for clients whose primary need is related to a severe mental illness.

A SPOA application may be submitted for people with co-occurring substance use disorders, but if substance use is the primary reason for seeking services, SPOA should not be used.

Other Referrals

Intellectual disability:

Contact the appropriate Office for People with Developmental Disabilities (OPWDD) county office eligibility coordinator.²

Traumatic Brain Injury (TBI):

Refer the client to the primary care provider for a medical evaluation. They may be eligible for services through the NYS TBI Medicaid Waiver Program.³

² Contact information for the county OPWDD office can be found at https://opwdd.ny.gov/opwdd_services_supports/eligibility/documents/eligibility_contacts_ddsos

³ Referrals are made through the Regional Resource Development Center; <http://vnasi.org/rrdc/>

Substance use:

An on-staff clinical worker (Client Care Coordinator (CCC), Social Worker (SW), etc.) should assess for inpatient or outpatient substance use services in the community. If neither a CCC nor SW is available, staff should refer the client to a substance use disorder provider for evaluation and treatment.

■ PROCEDURE

Decision to Submit an Application

A SPOA application may be completed at any time a need is identified.

If a client in a general or employment shelter begins presenting with symptoms of severe mental illness, the client should first be referred to a treatment provider in the community. If the client does not engage with these services, a SPOA application should be submitted.

When possible, staff should refer clients to mental health services in the community before considering a SPOA application. In cases when a client is unable or unwilling to acknowledge their mental health status, a SPOA application should be considered.

The SPOA application requires either a psychiatric evaluation within the last six (6) months or, in its absence, an Observational Psychiatric Evaluation.

When considering a SPOA application for a client, case managers may also consider the option of transferring said client to a mental health shelter. This SPOA application procedure is not intended to interfere with or change any existing procedures involving transfer to a mental health shelter. However, the effect of a consistent and familiar environment on a client's mental health should be considered.

Observational Psychiatric Evaluations

If a client does not have a psychosocial evaluation on file, or if that evaluation does not reflect the symptoms/behaviors that prompted the referral, the case manager may instead obtain an Observational Psychiatric Evaluation.

An Observational Psychiatric Evaluation must be completed by a licensed clinical social worker (LCSW), psychiatrist, or licensed psychiatric nurse practitioner.

If the facility does not have any of the above on staff, they must refer to a community resource with the needed clinical staff. If this is not feasible:

- Single Adults/Adult Families staff should transfer the client/family to a shelter with the needed clinical staff
- Families with Children staff should refer to the Clinical Services Unit, PATH Floating Hospital, or HRA

Submitting an Application

- Social service staff will submit the SPOA application, with support provided by a LCSW, psychiatrist, and/or psychiatric nurse practitioner, as described above.
- Applications should be submitted through DOHMH's secure online portal NYCMED, at <https://a816-healthpsi.nyc.gov>
- Social services staff must sign up for a NYCMED account to submit an application
 - Staff should create a plan for how to manage NYCMED accounts
 - Staff can share an account or choose to use multiple accounts
 - SPOA applications will be linked to the account that submitted them
- Staff must answer follow-up questions from DOHMH as necessary to facilitate processing the applications.
- HIV status must not be mentioned anywhere in the application; making mention of either positive or negative status will result in the application being rejected.
- Throughout the application, describe behaviors concretely, e.g., "client paces back and forth and yells." Using words such as "tripping," "bugging out," etcetera may make an application more likely to be returned for clarification.
- Make sure the application is complete.

CARES Documentation:

All actions taken regarding a SPOA referral should be documented in CARES. This includes:

- The decision to submit a referral (and supporting reasons)
- Any actions taken to arrange a psychiatric evaluation
- Confirmation that a scheduled psychiatric evaluation took place (or was rescheduled)
- Submission of the referral

Points to Consider

There are specific points where an application should especially be considered:

- When reviewing Institutional Referrals, if the client meets criteria for ACT, FACT, or IMT services, staff should ask the hospital to submit a SPOA application prior to discharge. The client should also be fast-tracked to a mental health shelter.
 - If the client does not consent for the hospital to submit a SPOA application, staff should request the medical and psychiatric evaluation completed during hospitalization, fast-track the client to a mental health shelter, and submit the SPOA application at that point using the hospital's supporting documents.
- For clients still in assessment shelters, medical providers should identify clients who meet criteria for SPOA-linked services and prepare supporting documents for shelter staff. Shelter staff will then submit the application, and the client should be fast-tracked to a mental health shelter.

- When a client arrives at a mental health shelter, staff should review the assessment shelter's evaluation, obtain updated information from the client, and develop a comprehensive treatment plan. If the client is not engaged in community or onsite care and meets criteria for SPOA-linked services, staff should submit a SPOA application.

DOHMH regularly conducts SPOA trainings at 33 Beaver St and around the city. To request a list of upcoming training dates and locations, email: **SPOA@health.nyc.gov**

Effective Immediately