A photograph of a city street scene. In the background, there is a light-colored building with a red-tiled roof and arched windows. Several cars are parked along the street. In the foreground, there is a grassy area and a paved sidewalk. A person is riding a bicycle on the sidewalk, and another person is standing near a tree. The scene is captured in a wide-angle shot, showing the street and surrounding environment.

Valley Healthcare for the Homeless Program (VHHP)

Larry Kwan, MD
Michael Lipman

Preview

- Who are the homeless?
- What are their barriers to care?
- How can we help?

Homelessness: A National Problem

- 2-3.5 million individuals experience homelessness per year
- Highest rate increase in past 2 decades



Homelessness: A Local Problem

- 20, 000 homeless episodes in the County per year
- 5200 clients per year at Emergency Housing Consortium



1999 Santa Clara County Homeless Survey

- 65% male
- 60% between 30 and 49
- 40% families
- 40% newly homeless, 42% chronically homeless

Santa Clara County: RACE OR ETHNICITY

Hispanic-American	36%
Caucasian	35%
African-American	17%
Native American	4%
Asian American	2%

Santa Clara County: PRECIPITANTS OF HOMELESSNESS

“Why are you homeless?”

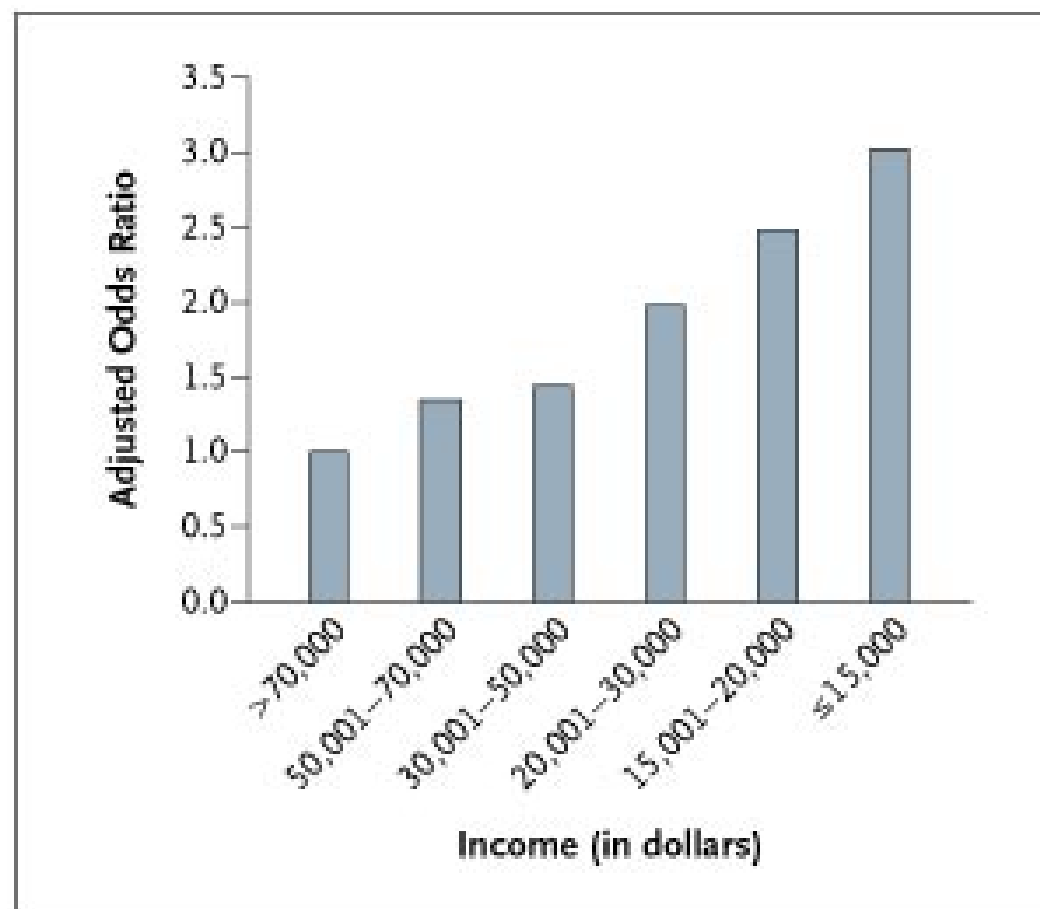
- Lost job
- Lack of affordable housing
- Not enough money
- Drug/alcohol abuse

1999 Santa Clara County Homeless Survey. Burstein JS and Woodsmall LJ

Where did all these homeless people come from?

- **1980's: Emergence of mass homelessness**
 - Largest recession since the Great Depression
 - Unemployment rate 10.8%
 - Deinstitutionalization of the mentally ill
 - Increased illicit drug use (advent of crack)
 - Decreasing amount of affordable low-cost housing

Adjusted Odds Ratio for Death from All Causes According to Annual Household Income, 1972-1989



Isaacs, S. L. et al. N Engl J Med 2004;351:1137-1142



The NEW ENGLAND
JOURNAL of MEDICINE

Average Age of Death for Homeless

<u>City</u>	<u>Age</u>
San Francisco	41
Atlanta	44
Boston	47

Mortality Rate in the Homeless Compared to the General Population

<u>City</u>	<u>Rate</u>
Philadelphia	3.5 times
New York	4 times
Boston	1.6-5.9 times

Hibbs JR et al., NEJM 1994; 331:304-309. Barrow SM et al., Am J Public Health 1999;89:529-534. Hwang SW et al., Annals of Internal Medicine 1997;126:625-628

Causes of Death in Homeless Adults in Boston

(Hwang SW et al., Ann Intern Med 1997; 126:625-628)

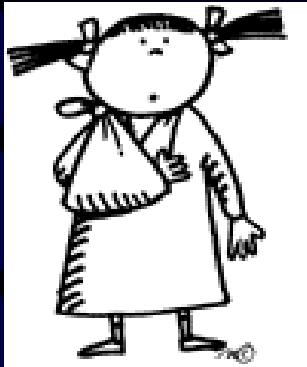
<u>Ages</u>	<u>Cause of Death</u>
18-24	Homicide
25-44	AIDS
45-64	Heart disease and cancer

Health Status: “Multiplicity of Needs”

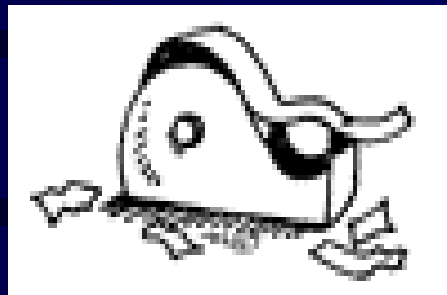
Higher prevalence of:

- HIV, TB, Hepatitis C
- Hypertension (2x)
- Poor dental health (31x)
- Tobacco
- Alcohol problems(6-7x)
- Severe, chronic mental illness

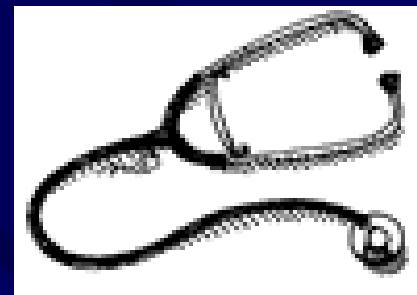
Barriers to Health Care



Patient



Health Care
System

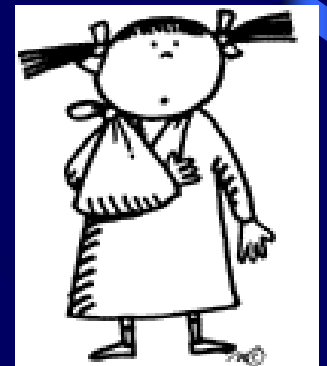


Health Care
Provider

Barriers to Care: Characteristics of Homeless Patients

- Disaffiliation
- Distrust and Disenchantment
- Mobility
- Ubiquity of Alcohol
- Multiplicity of Needs

Breakey WR. Treating the Homeless, Alcohol Health & Research World, 1987.



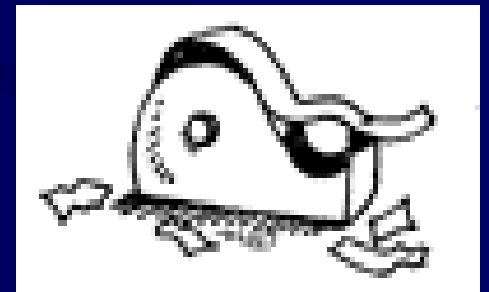
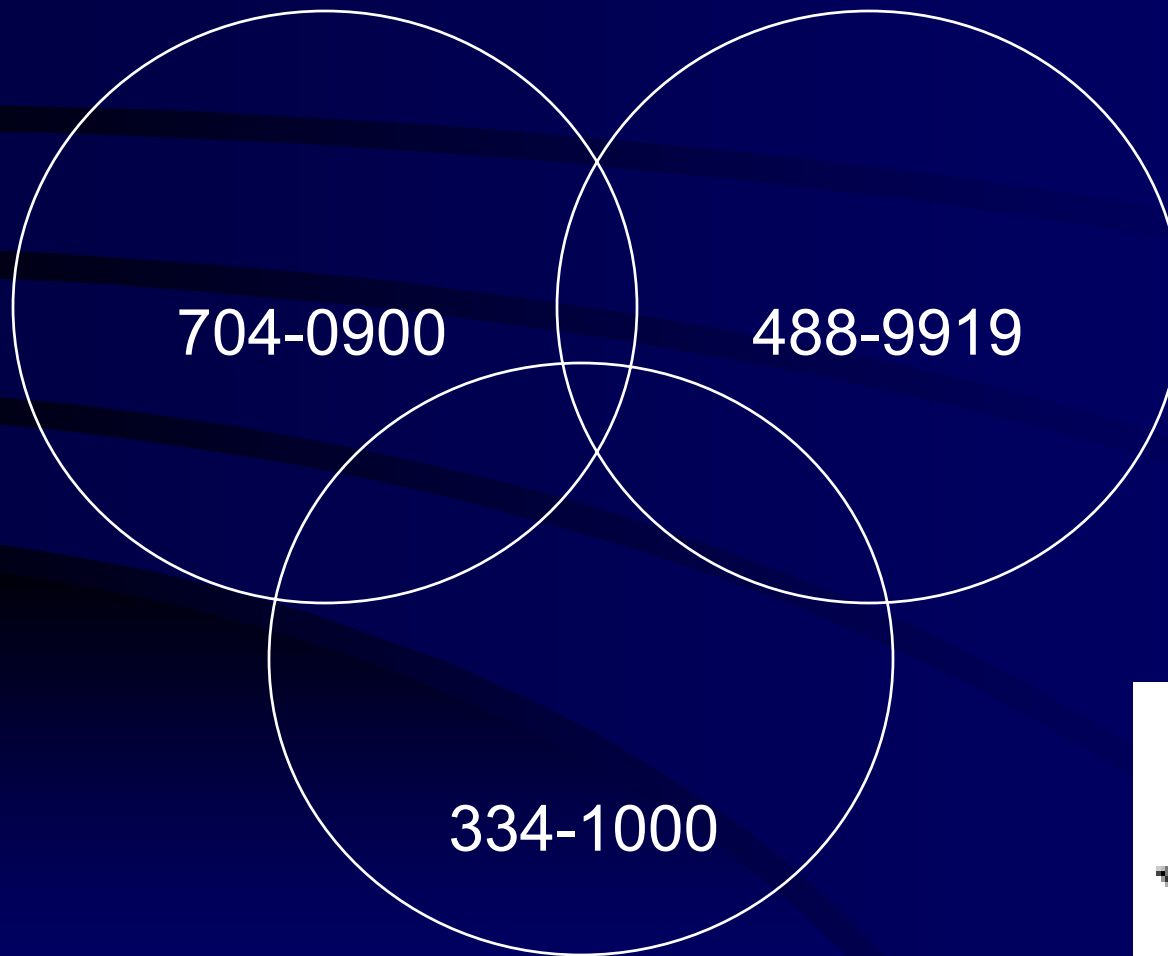
Barriers to Care: The Health Care System

- Scheduling
- Complicated intake and registration
- Fragmented care
- Cost of services
- Location

Breakey WR. Treating the Homeless, Alcohol Health & Research World, 1987.
Means RH. [Www.womanofmeans.org](http://www.womanofmeans.org)



Barriers to Care: The Health Care System



Barriers to Care: The Health Care System



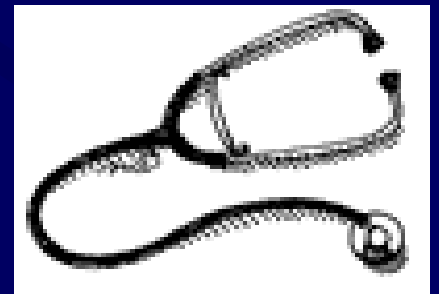
Barriers to Care: The Health Care Provider

Stigma and Bias

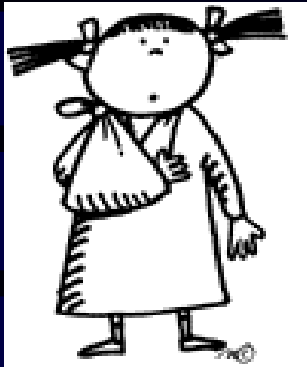
“Why can’t he work at a fast food restaurant?
There are plenty of jobs there.”

“They are all alcoholics and drug addicts.”

Breakey WR. Treating the Homeless, Alcohol Health & Research World, 1987.
Means RH. [Www.womanofmeans.org](http://www.womanofmeans.org)



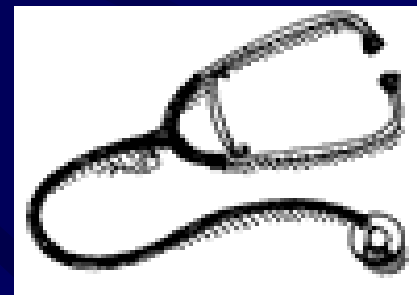
Barriers to Health Care



Patient



Health Care
System



Health Care
Provider

Barriers to Care: Utilization

- No regular source of care ¹:
 - Homeless 57%
 - Housed Poor 24%
 - General Population 18%
- Primary source of care is ED ²
- Homeless are admitted to the hospital 6 x more often than general population ³
- Hospital stays 4 days longer than low income patients ⁴

1. Burt, Interagency Council on Homelessness, 1999
2. Kushel et al., JAMA 2001
3. Winkleby MA, AJPH 1992
4. Salit et al., NEJM 1998

“Failure to deal with a social problem ‘*upstream*’
(lack of housing, education, health insurance,
substance abuse prevention) leads to added
costs for resources ‘*downstream*’
(police, prisons, hospital care).”

Paul Starr, 1998

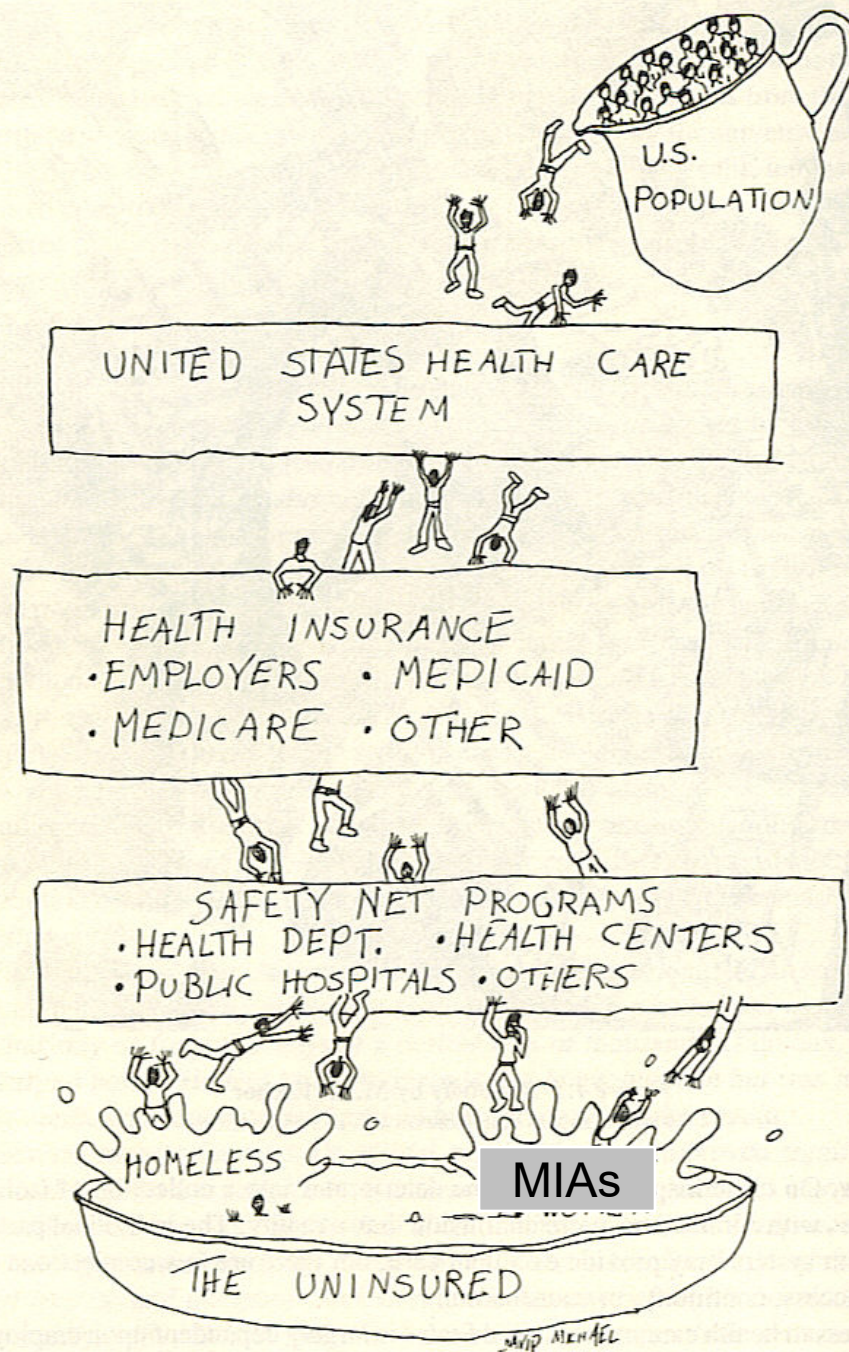


Figure 4.2

Health Policy and the Homeless

- 1980's: Increased public awareness of homelessness
- 1987 Stewart B. McKinney Homeless Assistance Act –
 - Federal dollars to support Health Care for the Homeless Initiatives around U.S.
 - FY1998 128 funded programs
 - SCVHHS received grant funding in 2003

Health Policy and the Homeless

- EXPAND
 - SCVHHS received grant funding in 2003

Valley Homeless Healthcare Program Mission Statement

“The Valley Homeless Healthcare Program seeks to improve *access to quality, compassionate health care* for homeless individuals and families in Santa Clara County.”

VHHP

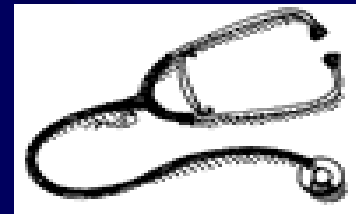
Multi-disciplinary Team

- Physicians (includes a psychiatrist)
- Nurse practitioner
- Dentist and dental assistants
- Nurse Coordinator and nursing staff
- Social Worker
- Financial Counselors
- Community Worker

VHHP

Program Categories

- Outreach Services
- QA and System Feedback
- Partners and Links
- Education



VHHP Outreach



VHHP

Mobile Units

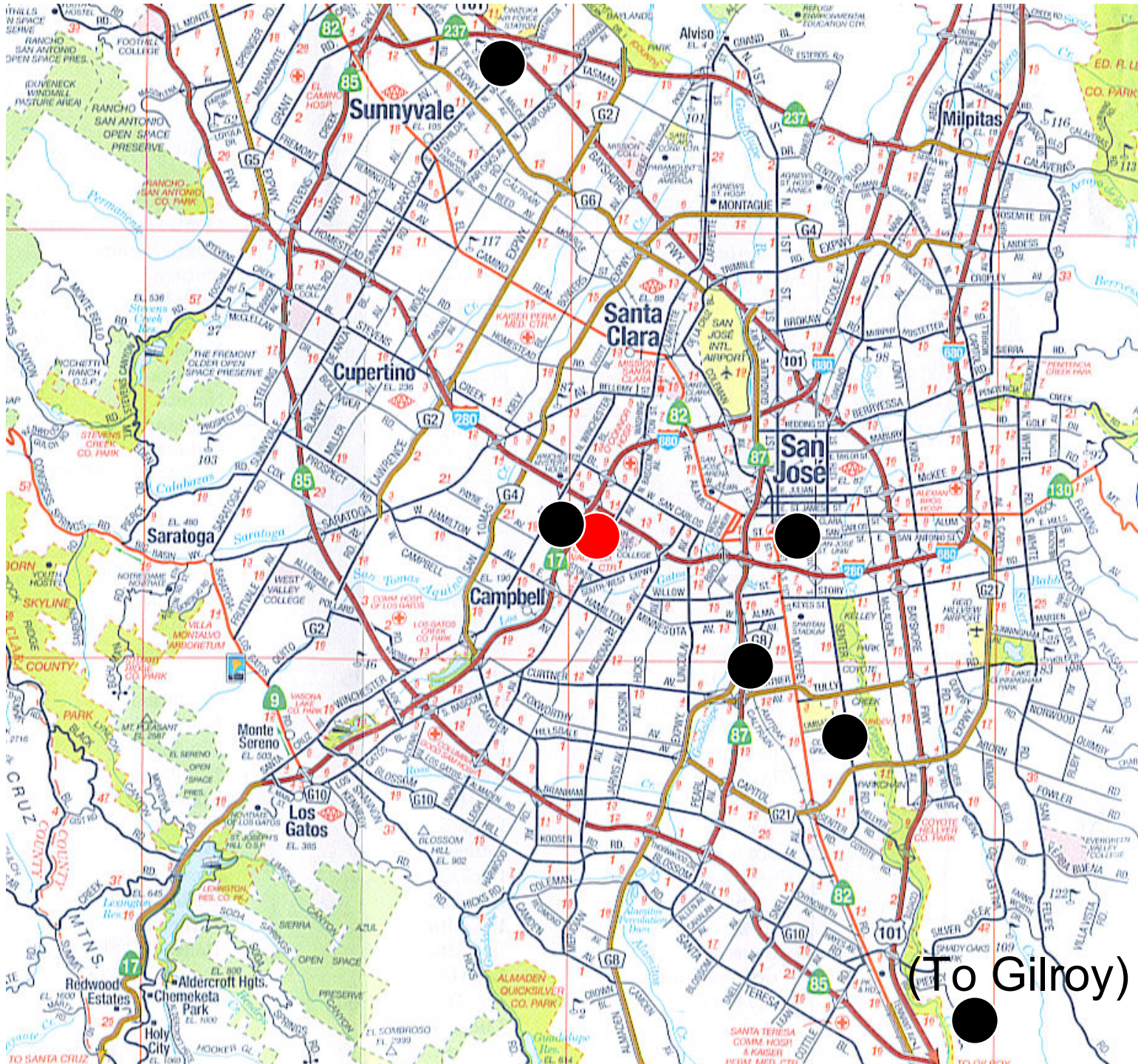



EHC Shelter
Clinic



Puentes Clinic





 You are here

 VHP Sites



(To Gilroy)

VHHP

QA and System Feedback

- Homeless Healthcare Advisory Board
- Ambulatory Quality Consortium
- Homeless encounter tracking system



VHHP



QA and System Feedback

DEMOGRAPHIC UPDATE / HOUSING STATUS

Today's Date: 6/2/09

Patient's Name: 770

Patient's Date of Birth: 6/1/77

Address: 1000 1st St City San Francisco Zip Code: 94103

Home Phone: () 415 - 444 Cell Phone: () 415 - 444 Message Phone: () 415 - 444

Insurance Changes: ☐ No ☐ Yes → If yes, what are the changes: _____

Type of address:

☐ Permanent (includes renting an apartment or room)

☒ New to United States (less than 1 year) – Living with family or sponsors.

☐ Temporary → If temporary, mark another box below.

☐ With family/friends

☐ Shelter/Motel

☐ Transitional Housing

☐ Street, bus, car, camping

☐ Jail/Treatment Program with no outside permanent housing

☐ Other _____

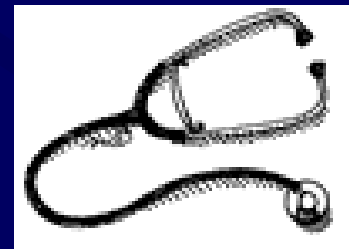
VHHP Partners

- Gardner Family Health Network
- Emergency Housing Consortium
- New Directions
- SCC Collaborative / Homeless Task Force
- Public Health Needle Exchange Program
- DADS / Methadone clinic
- Gilroy Unified School District

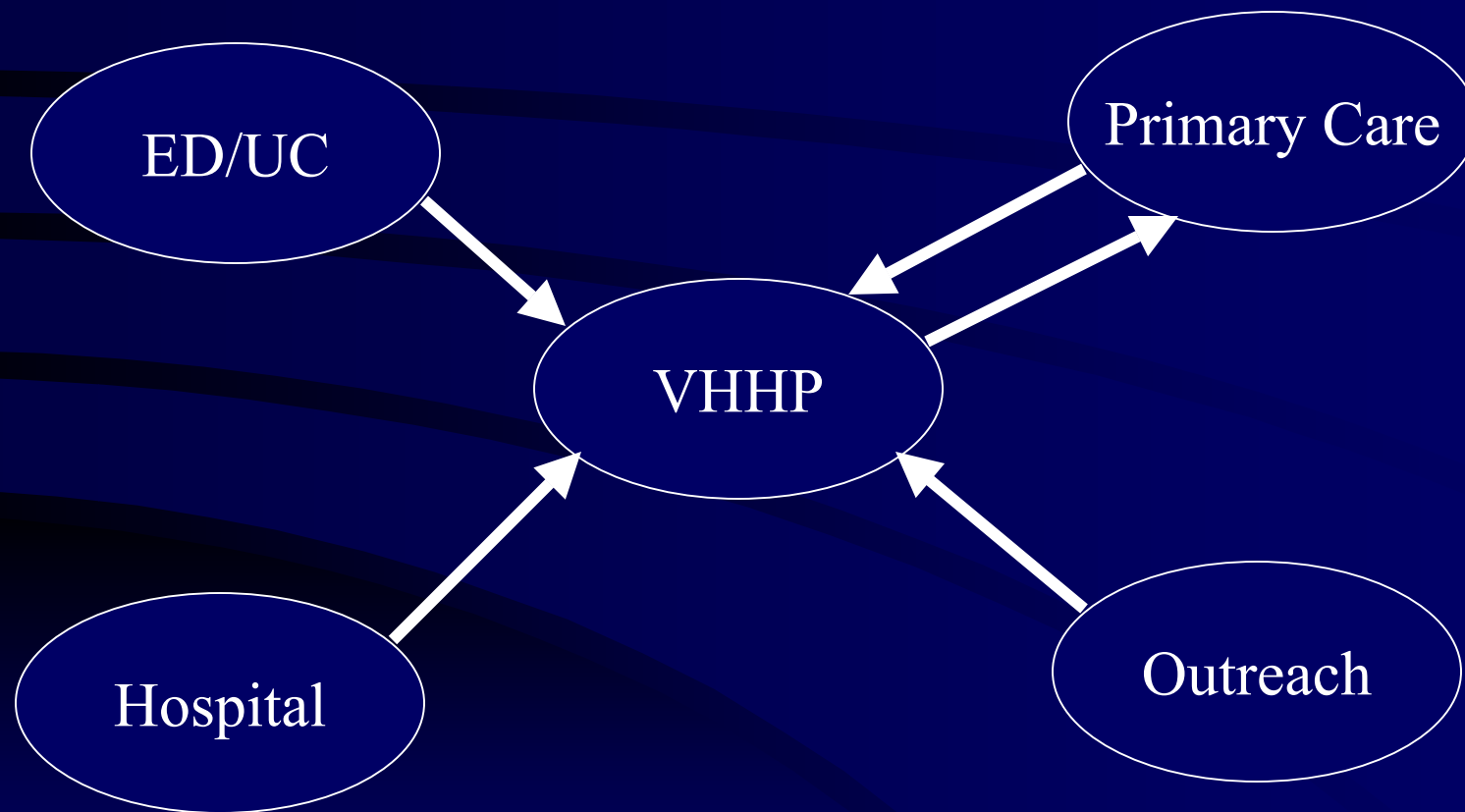


VHHP Education

- Didactics
 - Noon Conferences
 - Grand Rounds
- Rotation(s)
 - Residents
 - Nursing
 - Nurse practitioners
 - Social workers



VHHP Referral System



“Our business is not to change people but to offer hope and options.”

Barbara McInnis

Boston Health Care for the Homeless