What Makes Health Care for the Homeless (HCH) Health Centers Valuable to their Patients and Communities?



IMPROVE ACCESS TO CARE

Core Services Provided:

- Primary Care
- Addiction Treatment
- Case Management
- Outreach
- Mental Health
- Benefits Enrollment
- Trauma Informed Care



Culturally Appropriate Care Provided Where the Patients are:

- On the Street
- In Shelters
- In Tent Cities
- By Mobile Unit
- Care to All, No One Turned Away

PROVIDE QUALITY PATIENT TAILORED SERVICES







Food Pantry







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Showers & Personal Hygiene Kits

BENEFIT AND ADD VALUE TO COMMUNITIES



Housing is Health Care. Many HCH health centers provide housing to patients both health center owned and through community partnerships.



Community Safety. Several HCH health centers collaborate with Law Enforcement for safer communities and help with the decriminalization of homelessness.



Appropriate Discharge Planning. There are HCH health centers who provide Medical Respite Care for those too well to stay in the hospital or too sick to return to the street or shelter.



Addressing Food Security. Some HCH health centers sponsor Community Gardens to produce food for their patients and their community.



Critical Partners to Hospitals. HCH health centers partner with hospitals (and the broader health care system) to provide coordinated care, resulting in fewer ED visits, shorter patient stays, collaborations with community providers for follow-up care.

QUALITY HEALTH CARE

Tobacco: 77% of patients aged 18 and older screened and found to use tobacco, received cessation counseling**

Asthma: 74% of patients aged 5 to 40 diagnosed with persistent asthma received acceptable pharmacological treatment plans** J

Heart Disease: 73% of patients aged 18 and older diagnosed with Coronary Artery Disease (CAD) were prescribed a lipid lowering therapy**

HIV: 66% of patients first ever diagnosed with HIV received follow-up treatment within 90 days of diagnosis**

TWO IMPORTANT FACTS

People who are homeless have higher rates of chronic disease and live on average 12 years less than the general US population (66.5 vs. 78.8 years)*

Prevalence of Specific Health Conditions among the Homeless Population in Comparison to the General US Population*

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18%	Diabetes	9.3%
50%	Hypertension	29%
35%	Heart attack	17%
20%	HIV	0.6%
36%	Hepatitis C	0.7%
49%	Depression	8%
58%	Substance use disorders	16%

SOURCES

*National Health Care for the Homeless Council. (June 2016) Advance Care Planning for Individuals Experiencing Homelessness: A Quarterly Research Review of the National HCH Council, 4:2. [Author: Claudia Davidson, Research Associate]. Nashville, TN: Available at: www.nhchc.org **Uniform Data System. Data analysis related to 60 health centers receiving 330(h) funding only, 2015. N A TIONAL HEALTH CARE for the HOMELESS COUNCIL

Disclaimer:

This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U30CS09746, a National Training and Technical Assistance Cooperative Agreement for \$1,625,741, with 0% match from nongovernmental sources. This information or content and conclusions are those of the author and should bot be construed as the official position or policy of, nor should any endorsements be intended by HRSA, HHS, or the U.S. Government.