

Making the Connection: Improving the Relationship Between Shelter and Health Center

Wednesday March 7, 2018

2:00 PM Central



2018 Spring Virtual Training

NATIONAL
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HOMELESS
COUNCIL

Disclaimer

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Presenter

Cindy Manginelli

TennCare Shelter Enrollment Project Coordinator
National Health Care for the Homeless Council
Nashville, TN



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Learning Objectives

- Identify at least three barriers to health care in the shelter environment.
- Identify at least two ways to engage staff and residents in an emergency shelter regarding health care.
- Identify unique barriers to health and health care for at least one special population of homeless people – victims of domestic violence, unaccompanied youth, or those with substance abuse disorder.



Shelters and Clinics

**Same passion, same people
Different Priorities**



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Health and Health Care in the Community Living Setting for People Experiencing Homelessness

- Barriers to *Health*
 - Obvious barriers: cramped living conditions, lack of privacy, inability to maintain proper hygiene, exposure to disease, community in crisis/trauma, etc.
 - Lack of resources to allow for proper nutrition and hydration, personal hygiene products, clean facilities, etc.
 - Segregation of residents and staff
 - Mission/Priority: to provide emergency shelter to as many as possible



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Health and Health Care in the Community Living Setting for People Experiencing Homelessness

- Barriers to *Health Care*
 - Lack of training among staff
 - Housing First – health is not a priority
 - Inability to regulate medications or needed medical care
 - *Ignorance is bliss* or *Don't ask, Don't tell* philosophy regarding health care



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Outreach is Needed and *Desired!*

- Shelter staff understands the problem
- Poor health keeps consumers from reaching their goals!
- A healthy community living environment is better for everyone – staff and residents
- What do we do?!?



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The TennCare Shelter Enrollment Project

- A partnership between the Bureau of TennCare (Medicaid in Tennessee) and the NHCHC
- Your clinic or facility may be able to do some of the same projects!



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The TennCare Shelter Enrollment Project

- Assisting consumers
 - Medicaid Enrollment Assistance (complicated in TN)
 - Trainings (insurance basics, explanation of benefits, etc.)
 - Resources for those in the coverage gap



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Outreach to Shelter Residents

- Remember the disorientation of homelessness and life in crisis
- Address *their* health concerns and priorities
- Provide checklists, calendars, etc.
- Emergency Care, Preventive Care, Primary Care
- Discuss the value of documentation
- Challenge fears and misconceptions



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The TennCare Shelter Enrollment Project

- Assisting shelter staff (WHO?!?)
 - Regional trainings (bringing together service providers)
 - Trainings specific to individual shelters and the clients they serve
 - Helpline
 - Shelter visits
 - Referrals
 - Making connections as needed



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Outreach to Shelter Staff

- High rate of turnover
- Provide trainings appropriate for all staff levels – front desk to administration, volunteers and interns
- Trainings that primarily address *their* health concerns – understand their priorities
- Understanding the limitations of shelter staff (**affirmation** vs. shame)
- Just the basics of insurance, etc. – avoid medical jargon



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Special Populations – Victims of Domestic Violence

- Medical issues as a primary reason for returning to abuser
- Securing documentation, medication
- Discussing DV with the medical community
- Fears: losing custody, litigation, contact with abuser



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Special Populations – Unaccompanied Youth

- Fear of medical community (and all authority figures)
- Lack of guardian
- Lack of documentation
- Inability to navigate system and jargon



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Special Populations – Substance Abuse and Mental Illness

- Lack of confidence in medical community
- Medical community discredits and disregards them
- Inability or unwillingness to follow through



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Unseen Barriers to Health and Health Care

- Chronic disease or chronic pain



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Unseen Barriers to Health and Health Care

- Shame
- Feelings of worthlessness
- Hopelessness



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Questions?



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The TennCare Shelter Enrollment Project

cmanginelli@nhchc.org



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