

Albuquerque Health Care for the Homeless, Inc.

Albuquerque Mortality Data Work Group
October 16, 2019

Goals

1. Show AHCH's approach to starting mortality data reporting.
2. Receive feedback from NHCHC Mortality Data Work Group on Albuquerque process.
3. Share Albuquerque templates and tools for NHCHC Mortality Data Toolkit and help other cities get started with this work.

Albuquerque Health Care for the Homeless (AHCH)

- Albuquerque was one of the original 19 cities nationwide to participate in the pilot and develop the HCH model.
- AHCH is a freestanding FQHC and standalone 330(h) HCH project.
- Provides integrated primary medical and dental, behavioral health and social services through extensive outreach and at its central services campus.



AHCH

- Over 100 staff
- Serves nearly 7,000 people without homes each year.
- Serves exclusively people without homes, 95-98% at or below 100% Federal Poverty Line.
- NM expanded Medicaid in 2014. Clients were traditionally 85-95% uninsured, now that is flipped.



Albuquerque Homeless Mortality Work Group

Purpose:

- AHCH established a local mortality review of people who are homeless as an important public health activity to inform prevention and intervention strategies and to understand the extent of early mortality and loss of life due to homelessness.

Anticipated Outcomes:

- Improved public policy
- Improved education and training (training of OMI field investigators)
- Improved quality of system and services
- Development of a death review model for the public health crisis of homelessness

Albuquerque Homeless Mortality Work Group

Local work group participants:

- Anita Córdova, MA, AHCH Chief Advancement Officer
- Rachel Biggs, MA, AHCH Policy Director
- Neil Greene, PhD Candidate, Sociology, University of New Mexico
- Mattias Vega, MD, former AHCH Medical Director and founding HCH clinician

Key partners to date:

- Sarah L. Lathrop, DVM, PhD, Professor of Pathology and OMI Epidemiologist
- Garon Bodor, Research Scientist, New Mexico OMI
- New Mexico Intimate Partner Violence Death Review Team, UNM School of Medicine

Anticipated partnerships/data sources:

- New Mexico Coalition to End Homelessness/HMIS data
- First Nations Community HealthSource
- Criminal justice data

Sample Mortality Review Forms



Confidential Case Review Form

CASE TYPE: **IPV homicide; IPV Bystander homicide; Sexual Assault homicide; Prostitution Related homicide; Stalking Related homicide; IPV Related Suicide; Other (specify)**

CASE #:

DATE OF REVIEW:

REVIEW BODY: **Team; Native American Committee; Teen Dating Violence Committee; Ad Hoc Case Review Committee**

DECEDENT INFORMATION

Name:
Other Names/AKA's:
Date of Birth: _____ Age: _____
Date of Death:
County of Residence:
Race/Ethnicity: **White; Black; Hispanic; Native American; Other (specify)**
Tribal Affiliation:
Sex: **Male; Female; Other (specify)**
Highest level of educational attainment:
Employment at time of incident:

	Yes	No	Unknown	Description
Any known history of alcohol abuse?				
Abuse of illicit drugs?				
Abuse of prescription drugs?				
	Yes	No	Unknown	Toxicology Results
Use of alcohol at time of death incident?				
Use of illicit drugs?				
Use of prescription drugs?				
	Yes	No	Unknown	Description
Any known history of mental health issue?				
Mental health related diagnosis or treatment?				
Victim of child abuse/neglect-physical?				
Victim of child abuse-sexual?				
	Yes	No	Unknown	Description
Criminal History				See offense descripti

New Mexico Intimate Partner Violence Death Review Team Member Feedback Form

Case Number: _____

Instructions

1. Complete the case review worksheet in column one during the reading of the case narrative;
2. Use the numbered spaces at the bottom of the case review worksheet to make a list of system successes, gaps or failures observed in this case;
3. Following the group discussion, complete one "feedback and recommendation" column for each system success, gap, or failure identified.

Please note: we want to capture all system issues in the written feedback; however, it may be necessary to prioritize gaps and failures for discussion

Case Review Worksheet			Feedback and Recommendation #1
Would you define this case as either intimate partner violence or sexual assault related? If no, please explain. <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:			Briefly state one system success, gap, or failure from the worksheet that you are addressing.
Background Characteristics / Fatality Risk Factors	IPV/SA Perpetrator	IPV/SA Victim	
Less than high school education	<input type="checkbox"/>	<input type="checkbox"/>	To which system area does this system success, gap or failure primarily relate? <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Prosecution <input type="checkbox"/> Courts <input type="checkbox"/> Corrections <input type="checkbox"/> Probation & Parole <input type="checkbox"/> Victim Services <input type="checkbox"/> Medical Services <input type="checkbox"/> Mental Health Services <input type="checkbox"/> Substance Abuse Services <input type="checkbox"/> Legislation/Policy <input type="checkbox"/> Other, specify (e.g. social services, schools, community)
Unemployed	<input type="checkbox"/>	<input type="checkbox"/>	
Alcohol abuse	<input type="checkbox"/>	<input type="checkbox"/>	
Illicit drug abuse	<input type="checkbox"/>	<input type="checkbox"/>	

Initial Data Request – Office of the Medical Investigator (OMI)

Living Location	Total
RV	2435
Car	7536
Family	3724
Shelter	41
Treatment	590
Rehab	479
"living in car"	1
"staying with family"	0
hotel	148
motel	184
Common Terms	
Homeless	137
Indigent	0
Transient	18
Incarceration	
In custody	46
jail	52
prison	30
Total Hits	15421

Priority	Case Numbers Total
1 - Red	49
2 - Green	139
3 - Blue	80
4 - Yellow	5037
Total	5325

Initial Data Review - OMI

Additional keywords used for inclusion criteria:

- shopping cart
 - camps
 - tent
 - no next of kin
 - unknown address, no known address
 - exposure, heat stroke, hyperthermia, dehydration
 - bus bench, bus stop, train
 - starvation, malnutrition
 - seizure
 - mouthwash
-
- **OMI identified an initial dataset of 49 cases.**
 - **Total n = 53 as AHCH identified 3 additional from total universe of cases with above terms**
 - **Timeframe and location = Calendar year 2018 and statewide data**

Initial Data Review - OMI

Keywords = homeless, indigent, transient; n= 49

- Statewide: 18% Female and 82% Male
 - In Albuquerque: 25% Female and 75% Male
- Statewide:
 - 27% American Indian/Native American
 - 2% Black/African American
 - 70% White
- Statewide: 25% Hispanic
- Statewide: Average Age: 52.8
 - 60.6 female
 - 51 male
- 41% of all deaths occurred in Albuquerque

Initial Data Review – OMI

Keywords = homeless, indigent, transient; n= 49

Manner of Death

- 51% named accidental; 27% natural; 6% homicide: 6% suicide; 10% not coded/undetermined

Causes of Death

- 24% had a medical issue sited as cause of death. Of those:
 - 33% were from exposure
 - 17% Diabetic ketoacidosis
 - 33% acute pneumonia
 - 17% upper gastrointestinal hemorrhage
 - 12% Blunt force trauma
- 24% multi-drug toxicity
- 16% single drug toxicity

Sample Case 1 – OMI Autopsy

54-Year-Old White Male Died 2/22/2018 at 10:30 AM

Scene Address: Ditch behind well-known warehouse store

Manner of Death: Natural

Cause of Death A: Streptococcus pneumoniae sepsis

Cause B: Pneumonia

Field Circumstances: On 2/22 at 09:40, APD Officer contacted the OMI to report an unattended death. I arrived on scene at 10:20 and was briefed by Officer Montoya. At 08:56 this morning an employee of Costco contacted APD to advise an unknown male subject was lying on the ground, unresponsive inside a fenced area directly behind the Costco building. Officer Montoya was the first officer to arrive on scene and quickly determined the subject was, in fact deceased. The area was secured, an APD field investigator was dispatched and OMI was contacted. The decedent is known to loiter inside the Costco and appears to be camping in the open lot where he was discovered.

Sample Case 1 – OMI Autopsy

Log Comments: Poss exposure, homeless. Dec known by employees of Costco to frequent area where discovered. Found this AM unresponsive on ground w/911 at 08:56. Bedding, clothing and backpack near body. Several alcohol bottles, no illicit.

Field Scene Description: The decedent is lying in a supine position on the ground of a large, currently dry water retaining pond. The area is south of the Costco building, partially fenced in except for an opening at the east side of the pond. The decedent is clad in a poly-filled winter coat, a red hooded sweatshirt, two tee shirts, blue jeans, knitted cap and hiking style boots. The decedent is not properly dressed for overnight temperatures in the upper 20's. A crude encampment is located just west of the decedents body. I observed pillows and several blankets lying on the ground. A backpack containing vodka bottles, packaged food, clothing and other personal items were also noted. I did not discover illicit drugs, weapons or tobacco.

OMI Autopsy Questions

1. Describe possible system successes, gaps, and failures observed in this case.
2. What change or changes to the system you identified would you recommend to promote this observed success or address this gap or failure?
3. Additional comments or suggestions?

Sample Case 2 – OMI Autopsy

DecedentAge	Gender	Race	Manner	CauseA	FieldCircumstances	LogComments
39 Years	Female	American Indian	Natural	Gastrointestinal hemorrhage due to chronic alcoholic liver disease	The decedent is located directly behind the Market. She is lying in a supine position on the sidewalk having been moved off of the mattress by EMS. The decedent is fully clothed. I observed bloody vomit on the mattress, blankets and the ground next to the mattress. I noted a shopping cart near the decedent that appears to be contain the decedents clothing, toiletries and food items. Several empty alcohol containers were also observed near the body.	Aunt-Y TAG#19899LS A 06:30 9/16 by aunt, c/o severe stomach pain & vomiting blood. Found on sidewalk unresponsive, 911 9:43, worked 25min w/o pulses. discharge from Pres 9/15 for acute pancreatitis, cholelithiasis. Consuming ETOH last night. PMHx Cirrhosis, jaundice, ascites accumulation, polysubstance abuse

Questions for National Mortality Data Workgroup

1. If you could ask OMI field investigators what to document, what would you say/ask?
2. How do you document mortality/deaths in your EHRs?
3. If we ask OMI to include a flag or field for homelessness in their field investigations, are there downsides? Will we miss unique cases like the additional 3 AHCH was able to identify?
4. Of the possible points of intervention, how do you identify who should be the target of education and training?

Next Steps

1. Training with OMI field investigators
2. Review pedestrian deaths dataset from UNM
3. Review Intimate Partner Violence dataset flagged as homeless
4. Continued discussion of inclusionary criteria that may or may not become a “homeless” flag for OMI
5. Development of a Homeless Mortality Review Committee

Contact Information

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