

Leveraging the HCH Community during the COVID Response to Advocate for Policy Change

National Health Care for the Homeless Council Conference

May 11, 2022

Objectives

1. Provide actionable steps, planning tools, and sample policy proposal briefs to inform policy change in local responses to public health emergencies.
2. Discuss development of policy proposal briefs and reflect on how to utilize similar tools to collaborate both internally and externally to achieve effective policy action.
3. Gain and contribute insights on meaningful collaborative engagement across HCHs, shelter provider partners, health care systems, and public health departments as a critical component of effective policy action during public health emergencies.

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 in 1985.
- 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 5,000 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.



AHCH COVID-19 3 Phase Response

Phase 1 Pre-Event

- Preparation/Planning – Systems Development / Prevention
- Systems work for continuity of care at largest city shelter
- new Mayoral administration in 2019 that rallied more “mainstream” participants (not just homeless services)

Phase 2 Response – Scale Up of COVID-19 Operations

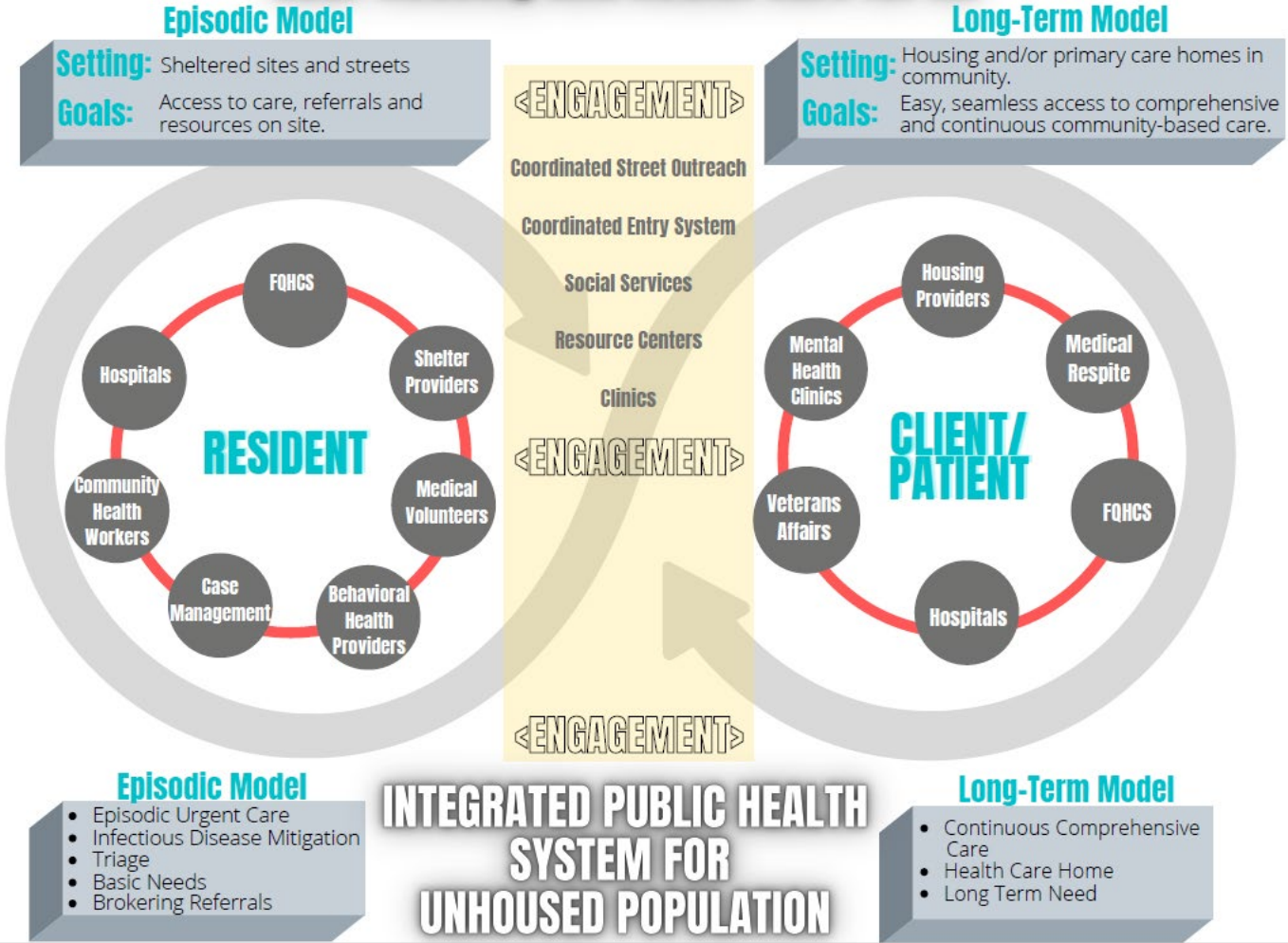
- Intensive and frequent communication via Emergency Operation Center and internal central command that were aligned
- Setting up isolation/ quarantine areas for persons experiencing homelessness
- De-intensifying shelters
- Removing high-risk individuals for grave morbidity with COVID from large congregate settings
- Percent of AHCH staff time on outreach increased
- Focus on supporting individuals in time of COVID **and** on preventing further morbidity in other areas of health.

Phase 3 Response – Post-Event/New Normal

- Individuals will present in a sicker state as many will have been out of care and medication for several months
- Estimated increase in number of people experiencing homelessness by 40 to 45%

Pre-Event Infinity Model

Goal: Housing and Health Care for All



Pre-Event Planning

1. WEHC Coordination:

- pre-COVID-19 collaboration structure and system of care at the Westside Emergency Housing Center (WEHC) – largest shelter in Albuquerque

2. Continuity

3. Street Medicine

4. Coordinated Street Outreach

Event

AHCH Street Medicine

- Field-based care is a hallmark of AHCH's model for delivery of integrated health services with the purpose of engagement and breaking down barriers and a two-pronged goal of taking services out to the field and/or linking people into AHCH or other site-based services.
- "...the provision of medical care directly to those living and sleeping on the streets through mobile services such as walking teams, medical vans and outdoor clinics." (streetmedicine.org)



Event

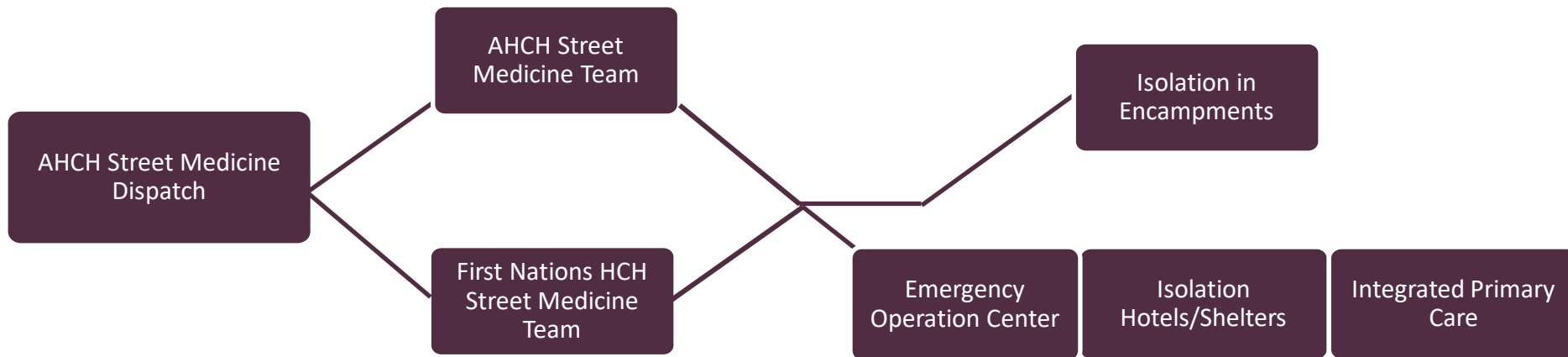
AHCH COVID-19 Street Medicine

- COVID-specific street medicine outreach and dispatch coordinated with First Nations HCH and ERs
- Outreach teams scout locations and report back to medical teams
- Emphasis on engagement, meeting people where they are, and COVID-19 education
- Integrated primary care at shelters and isolation hotels through extensive collaboration
- Mobile COVID-19 testing



Event

COVID-19 Street Medicine Response System



AHCH mobilized street medicine response team through increased coordination with City, shelters, and Emergency Departments, to respond to rough sleepers affected by this pandemic.

Event

Harm Reduction and COVID-19

- Increased need for Harm Reduction Services including:
 - Syringe Exchange
 - Narcan
- Extensive COVID-19 harm reduction specific education
- Leadership in coordinated street outreach response system with the City of Albuquerque



Event

COVID-19 Outreach Education Examples

COVID-19 Guidance for Street Outreach Workers April 6, 2020

What is COVID-19?

COVID-19, an illness caused by a newly identified type of coronavirus, can cause a respiratory infection and lead to health problems. It's usually mild and most people recover quickly if they have it, but it can be very serious for people with stressed immune systems or underlying conditions or older adults, so it's important to stay informed. COVID-19 is spread from person-to-person by coughing or sneezing and getting exposed to droplets that have the virus in them.

What are the symptoms of COVID-19?

The main symptoms feel like the flu or a really bad cold:

- Fever
- Cough
- Pain when taking a deep breath
- Shortness of breath/difficulty breathing
- Fatigue
- Diarrhea
- Loss of sense of smell

Who is at increased risk?

- People 60 years old and older
- People with certain medical conditions such as heart disease, lung disease, diabetes, kidney disease and weakened immune systems

Prevention

- Wash your hands often with soap and water for at least 20 seconds. Using an alcohol-based hand sanitizer—it must have at least 60% alcohol in it—can also kill the virus.
- Avoid close contact with people who are sick.
- Cover your cough and sneeze with a tissue and throw it away in a lined trash can, or if you don't have a tissue, cough into the bend in your elbow. Wash hands with soap and water afterwards.
- Give a mask to anyone who is coughing and ask them to wear it.

COVID-19 Guidance for People Living on the Street April 6, 2020

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Prevention

- Good hand washing is the most effective way to prevent yourself from getting sick. This means washing your hands often with soap and water and rubbing for at least 20 seconds.
- Make sure you know where restrooms and handwashing stations are. If you do not have access to water—use hand sanitizer.
- Social distancing is important to prevent spread – for example, stand 6 feet away from others, don't share utensils, and do not gather in groups larger than 5 people.
- The CDC recently updated recommendations that everyone wear a mask while in public. If you are sleeping in close quarters with others or must go out into crowded places, please consider covering your face.

Tents

- Try not to share or hang out in tents with anyone else unless you share space with your partner.
- Set up your tents/sleeping quarters with at least 12 feet x 12 feet of space per individual.
- Do not hang out in large groups (more than 5 people) and try to limit your time in large groups and crowds.



Event

HCHs Role in COVID-19 Response

HCHs play essential role in bridging gap between homeless assistance providers and public health:

- Hold crucial role in standing up a response across homeless service providers including training staff across systems with health care for the homeless lens, coordinating provision of services, and serving as resources for emergency shelter and outreach workflows.
- Assist in keeping homeless service programs operational by providing health care expertise.
- Through the National HCH Council and peer-to-peer, HCHs are continuously linked to a practice community within communities nationally. AHCH's strategic priority, intent, and practice/role in this crisis is to identify, synthesize, and share/recommend policy and practice locally.
- Ensure public resources are applied and accessible through a race equity lens.

Event

Policy Recommendations

AHCH PRACTICE AND POLICY RECOMMENDATIONS

AHCH, with input from the National Health Care for the Homeless Council (NHCHC) network, has compiled best practices and policy recommendations specific to the COVID-19 response to people without homes.

Recommendations have been distributed as resource and advocacy to:

- Department of Family and Community Services, City of Albuquerque
- Albuquerque City Council
- AHCH advocacy partners including the NM Center on Law and Poverty
- Albuquerque homeless service providers
- New Mexico Human Services Department
- New Mexico Department of Health/General Counsel
- NM HCH Caucus of six 330(h) HCH grantees across the state
- New Mexico Primary Care Association
- Governor's Office and Congressional Staff

Primary recommendations continue to be realized and aligned with AHCH internal and community systems.

EMERGENCY FUNDING FOR RESOURCES

- Rapid COVID-19 testing should be prioritized for the population of people experiencing homelessness as a vulnerable, higher risk, and more mobile population.
- State or City-managed pipeline of supplies for street medicine, homeless health clinics, medical respite:
 - Disposable masks, personal protective equipment (PPEs), hand sanitizers, and to provide outreach and shelter health supplies needed to contain spread of disease.
 - See [CDC guidance](#) on PPEs for health care workers.
 - See Seattle King County guidance on [COVID-19 for Homeless Service Providers](#).
- Emergency funding for street medicine services to deliver care in the field.
- Additional funding for shelter providers to expand homeless shelter services to:
 - Enable them to institute social distancing
 - Provide protection to shelter residents (including isolation for high-risk)
 - Provide isolated shelter housing for infected/mild-to-moderate illness homeless residents
 - Increase meal deliveries
 - See Seattle King County [emergency funding package](#)



Albuquerque Health Care for the Homeless, Inc. marks 35 years of continued commitment to serving the health care needs of people experiencing homelessness.

- Ensure resources and protocols to support harm reduction approaches to isolation and quarantine including medical assistance for detox, substance use treatment, and low barrier isolation and quarantine spaces.
- Funding to provide [medical respite care](#) to population of people without homes quarantined in motels.
- Motel vouchers for high-risk populations of people experiencing homelessness as outlined by the CDC. See [Vermont emergency motel voucher](#) program for seniors with underlying medical conditions.

ENCAMPMENT EVICTION MORATORIUM

- [CDC has issued guidance](#) advising against clearing encampments during the COVID-19 pandemic. Stable encampments are necessary for sustained public health outreach and disease control:
 - [Stable encampments limit movement of people](#) who may unknowingly be sick, and moving people unnecessarily, from a public health perspective, can introduce the virus to a new community where it can spread.
 - Stable encampments enable better contact investigation and epidemiological controls necessary for outbreak control.
 - See [HUD guidance on Preventing the Spread of Disease within Encampments](#).

EMERGENCY HOUSING VOUCHERS

Post-Event

- 1. Potential for increased discrimination**
- 2. Regressive public policy proposals**
- 3. Continued advocacy after flood of federal funding**

Discussion

1. How have you leveraged the HCH Community in your public health response to COVID-19?
2. What resources were helpful, or would be helpful, in your ability to inform public policy change?
3. How are you continuing to advocate for system change in Phase 3 of the response?



Contact Information

Jennifer Metzler, MPH
Chief Executive Officer
jennymetzler@abqhch.org

Nadia Fazel, DMD, MPH
Chief Clinical Officer
nadiafazel@abqhch.org

Rachel Biggs, MA
Chief Strategy Officer
RachelBiggs@abqhch.org

Albuquerque Health Care for the Homeless
abqhch.org

