

**NATIONAL
HEALTH CARE**
for the
**HOMELESS
COUNCIL**

Assessing and Addressing Health Management in HCH and Medical Respite Settings

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Land and Labor Acknowledgment



St. Petersburg rests on the current and historical land of **Seminole, Timucua, and Miccosukee tribes.**

Philadelphia rests on the historical lands of the **Lenapehoking tribe.**

These communities reside on these unceded ancestral lands of people past and present and **honor with gratitude the land itself, and its people.**

We honor the brilliance and humanity of all immigrant labor, including voluntary, involuntary, trafficked, forced, and undocumented peoples, **whose labor**, remains hidden in the shadows **but still contributes to the wellbeing of our collective community.**

Agenda

1

Defining Health Management

2

Considerations for Health Management in HCH
and Medical Respite Care Clients

3

Recommendations for Assessing Health
Management

4

Case Example

?

Q&A and Discussion

Objectives

1

Attendees will be able to define health management and explain why it is important

2

Attendees will understand how experiences of homelessness may impact health management

3

Attendees will understand how to apply formal and informal health management assessment tools

HRSA Disclaimer

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Overview of Health Management

Defining Health Management

- **Any activities related to developing, managing, and maintaining health and wellness routines, including self-management**
- Health management activities may include:
 - Symptom and condition management
 - Communicating with the health care system
 - Medication management
 - Physical activity
 - Nutrition management
 - Personal care device management
 - Social and emotional health promotion and maintenance

What Affects Health Management in People Experiencing Homelessness?

- Focus on basic needs over health management 
- Self-assessment and decision making 
- Appointment management 
- Medication management 
- Stigma and health care provider bias 
- Use of durable medical equipment 



Assessing Health Management

Assessing Health Management

“Health assessment is a process involving systematic collection and analysis of health-related information on patients for use by patients, clinicians, and health care teams to identify and support beneficial health behaviors” ([AHRQ, 2013](#))

- Used by providers to work with the client to identify care and treatment plan goals
- Identifies strengths and existing skills
- Identifies needed resources and supports

Assessing Health Management: Skills to Evaluate

Health literacy

Medication
self-
management

Physical skills
for health
management

Time
management

Self-advocacy

Self-assessment
and decision
making

Assessing Health Management: Process

**1- Discussion
with the client**



**2 - Observation
of skills**



**3 -
Environmental
assessment**

Assessing Health Management: Standardized vs. Non-Standardized Tools

Standardized assessments are tools that have been developed to evaluate a set of skills, knowledge, or behaviors

- Delivered in the same way across all clients
- Valid and reliable that ensures information is gained and interpreted consistently
- Results can be compared to larger populations or over time
- However – often testing is not inclusive of people experiencing homelessness or with multiple or complex conditions

Non-standardized assessments are tools that generally have a structure but are flexible in administration

- Responsive to the client
- Adapted to focus on knowledge and needs of the client or provider
- However – often is more open to bias, inconsistent results, and hard to compare over time

Assessing Health Management: Discussion with the Client

This involves talking with, interviewing, and/or providing a questionnaire to the client to learn more about their perspectives, experiences, and priorities.

Motivational
Interviewing

Perceptions of
health

Priorities and
health goals

Concerns
about health
management
activities

Current health
knowledge

Current health
management
activities

Standardized
questionnaires

Assessing Health Management: Observation of Skills

Observing a person's skills gives the provider an opportunity to see "how" the person goes about health management tasks.

- Although the **provider may not be seeing the person** in the exact environment where they complete health management tasks, it can be helpful to see the steps the person takes, skills the person has, and areas where they might struggle.
- **Mobile clinics, shelter or street medicine** providers may have the opportunity to observe the person in the environment where they usually are.

Assessing Health Management: Observation without Interfering

Ask the person to perform the task

This can be any health management related activity

Observe what they do without instruction

Let the person know you want to see how they do things typically

Identify issues/errors

Write down notes as the person is doing the task to help inform teaching

Provide education on issues identified

Provide opportunity for the person to practice information and use different teaching strategies



- You'll be able to see what the person does without support
- Works well with tasks familiar to the person

- Allowing errors may have consequences
- Requires clinical judgment about when to intervene
- Person may learn/remember steps incorrectly

Assessing Health Management: Observation with Teaching

Ask the person to perform the task

This can be any health management related activity

Identify/point out when errors are made

Let the person know you want to see how they do things typically but will provide instruction as needed

Provide education on issues identified

Interfere or provide instructions when the errors happen, don't let the person complete them incorrectly

Provide additional learning opportunities

Give education and opportunity for practice on select skills that you provided instruction for during observation



- You'll be able to correct errors in real time
- Prevents dangerous errors

- Task may take a long time to get through
- Person may be distracted by teaching/education
- May not remember all of the education provided

Assessing Health Management: Observation through Standardized Assessments



Structured way for providers to evaluate specific health management skills.

Can be used to measure changes over time or after a specific intervention.

Provides a standardized score that can determine the extent of the limitations or provide context for the person's skills.

Clients may have difficulty using testing equipment instead of their own supplies, and they may show more errors.

Can feel like “testing” and increase anxiety of the client.

Limit the flexibility of the provider to adapt or intervene during the assessment

Assessing Health Management: Understanding the Environment

The environmental assessment is used to gain a picture of the external supports or barriers to health management experienced by the person.

Can be done by:

- Visiting the space where the person lives
- Through questions and discussion with the client
- Conversation with providers/staff familiar with the space the person is staying

What is their housing status?

What resources are available?

What is their access to medical supplies?

What is their ability to carry and store medications?

What are safety needs?

Creating a Holistic Clinical Picture

- What are strengths?
- What are barriers?
- What supports are needed?

Adjusting medications and dosing schedules

Referrals or further evaluation

Connection to community supports

Accessing DME

Address sensory impairments

Education and teaching

Adjusting frequency of follow-up visits



Case Examples

Case Example 1



Photo used with permission from Brown et al., 2019

- 58 year-old cisgendered white male referred for medical respite after several toe amputations and recovery from frostbite.
- Assessment:
 - Engaged in PCP care for the first time in 15 years after unsheltered homelessness
 - Identified chronic heart condition with frequently changing med dosages
 - Limited knowledge of medication management skills
 - Issues with memory complicated by ongoing alcohol use
- Teaching and skill-building/Interventions:
 - General health management – how to refill prescriptions, schedule appointments
 - Use of pillbox to organize medications and support recall
 - Started notebook to monitor symptoms and record questions for doctors
 - Self-advocacy skills and engagement with providers with harm reduction approach


Case Example 2

- 61 year-old cisgendered Black male who presented to clinic with a foot ulcer and was found to have uncontrolled diabetes
- Assessment:
 - Limited understanding of relationship between diabetes and wounds
 - Had not used insulin before
 - Difficulty storing and accessing medications while in shelter
 - Difficulty managing diet in shelter
- Teaching and skill-building/Interventions:
 - Diabetes and dietary basics
 - Use of insulin
 - Wound management
 - Medication management support
 - Housing support





Questions and Discussion



Evaluation & Wrap-up

Upcoming Activities

Virtual Symposium: Trauma Informed Design in MRC, April 3rd 1-5:00 ET

- Convening that will provide information and strategies for programs to incorporate trauma-informed design
- In partnership with Shopworks Architecture

Webinar: Gender Affirming Care in Medical Respite – April 8th

- Are you interested in creating a welcoming environment for trans and non-binary clients at your medical respite program?
- Are you curious how other programs support gender-affirmation for staff and clients?
- Join the National Health Care for the Homeless Council and the National Institute for Medical Respite Care for a discussion on promising practices for Gender-Affirming Medical Respite Care

National Health Care for the Homeless Annual Conference, May 13-16th

- Phoenix, AZ

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