

# NYC Street Medicine A Human-Centered Approach in Healthcare to Housing, and Housing to Health

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## Today's Learning Objectives

*After participating in this session, attendees will be able to:*

- 1. Demonstrate how a street medicine program can be designed and built, using NYC H+H as an example
- 2. Identify the key barriers facing Street Medicine and how to overcome or work-around them
- 3. Discuss and define actionable next steps that attendees can bring back to their work and organizations towards advancing street medicine and care for individuals experiencing homelessness



## Street Medicine in NYC - Setting the Context

- The population of New York City is 8.3 million people
- As of December 2023, the city's homeless population was 92,879
- 2024 HOPE Count: 4,024 people experiencing unsheltered homelessness
- From 2013 to 2023, the number of homeless single adults in NYC increased 115%



## SHOW Timeline

- *April 2021:* Program launch as part of COVID-19 Test + Trace program (vendor-staffed model)
- *January 2022-December 2022:* Development of H+H in-house model, application and approval process with NYS DOH
- *January 2023:* First H+H staffed SHOW unit launches in the Lower East Side neighborhood of Manhattan
- *March 2023:* Second H+H unit launches in Bed-Stuy Brooklyn
- *May 2023:* Third H+H unit launches in Elmhurst/Jackson Heights Queens
- *September 2023:* Fourth H+H Unit launches in Harlem
- *March 2024:* H+H SHOW passes the 10,000 engagement milestone



## Our Street Medicine Ecosystem

- The SHOW program fits within a larger ecosystem at H+H that includes Primary Care Safety Net, Inpatient, Specialty, and Medical Respite
- The H+H services work alongside other key community partners including NYC DHS, street and subway outreach teams, shelter operators and providers, and other community-based organizations
- Our goal is to defragment care and connect patients to the care, resources, and support systems that can help make progress towards both health and housing



## SHOW's "S's"

- *Services:* SHOW provides street-based medical services including basic evaluation and wound care, social service linkages, connections to behavioral health care, harm reduction education and supplies, and material goods
- *Staffing:* Each H+H team is staffed with a medical provider, registered nurse, patient care assistant, community health worker, social worker, addiction counselor, peer counselor, and clerk
- *Space:* SHOW is a mobile medicine model; each team has a modified mini-bus as its base and "medical office", and roves an approximate 1-mile radius around the base
- *Schedule:* Units operate Monday-Friday, 9am-5pm
- *\$:* SHOW is funded by a combination of city tax levy dollars (75% of total funding), opioid settlement funds (20% of total funding), patient service revenue (2% of total funding) and philanthropic support (2% of total funding)
- *Sustainability and Impact:* The SHOW program developed a logic model (see handout) that outlines short-term and long term targets



## Let's Take a Look...

*Here's a spotlight on one of our SHOW teams in action!*



## Let's Share!

- Who else works in or runs a street medicine program?
- How have you funded your work, and what is your context?
- What do you want the room to know about Street Medicine in your space?





## Small Group Breakouts

*We'll break into groups of 4-5; in each group, please discuss the following:*

- Why did you choose to attend this session?
- In your context, what are the top barriers to Street Medicine?
- Who are key partners and how can you engage start?
- What indicators/measures will you focus on to start? And what are long-term targets?
- What is the next step you can take towards either establishing, strengthening, or sustaining Street Medicine at your organization?



## Lessons Learned

- Whatever our resources, tying them together programmatically is fundamental to success
- Street medicine programs like SHOW exist in a landscape of existing community-based organizations and providers—partnership and collaboration is key!
- Organizational buy-in is also crucial, and developing tangible targets, metrics, and tools like the Logic Model can help
- Our patients can be the guide and teach us what they need!
- Key ingredients of culture include passion, compassion, perseverance, and patience

