



Health Care for the Homeless Network • 2015 Annual Report

Public Health
Seattle & King County



Health Care for the Homeless Network (HCHN)

Mission Statement

HCHN provides high-quality, low-barrier health care services to homeless individuals and families. We lead efforts to change the conditions that deprive our neighbors of home and health.



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ABOUT US

**Health Care for the Homeless Network (HCHN)
has cared for people experiencing homelessness
in King County for 31 years.**

This past year demanded a renewed call to action.
HCHN joined community-wide efforts in response
to the local State of Emergency on homelessness.

We leveraged our experience and secured more health care
resources for the city and county.

This annual report highlights our key accomplishments and
the opportunities ahead to improve our community's health.

Most importantly, it shows how our multidisciplinary network
of innovative providers comes together to remove individual,
institutional, and systemic barriers to health care and housing.

We do so by literally and figuratively meeting people
'where they are at.'

**Thank you for taking time to learn more
about the Health Care for the Homeless Network.**

HCHN PLANNING COUNCIL

Maureen Brown, Co-Chair/MD, Swedish Family Practice
Gregory Francis, Co-Chair/Consumer Representative

Carole Antoncich, Plymouth Housing Group

Rebekah Demirel, Community Advocate

Sinan Demirel, Consultant

Edward Dwyer-O'Connor, Harborview Medical Center

Francesca Martin, Compass Housing Alliance

Maria Metzler, Downtown Emergency Service Center

Mark Putnam/Kira Zylstra, All Home - King County

Eva Ruiz, Consumer Representative

Jeff Sakuma, City of Seattle, Human Services Department

Charlotte Sanders, UW School of Social Work

Sheila Sebron, Veterans Advocate

Kate Speltz, King Co. Dept. of Community/Human Services

Susan Vaughn, YouthCare

The Health Care for the Homeless Network is a Community
Health Services program of Public Health – Seattle and
King County (PHSKC). The Planning Council advises both
Public Health and the King County Board of Health.

NETWORK PARTNERS & APPROACH

We deliver high-quality and low-barrier medical, dental, and behavioral health care to patients in 3 ways:

- 1 Directly at King County Federally Qualified Public Health Center sites
- 2 Through 2 mobile medical vans & our Kids Plus program
- 3 By 9 partners at nearly 50 sites and on the streets.

2015 SUBCONTRACTED PARTNERS

Country Doctor Community Health Centers
Evergreen Treatment Services
Harborview Medical Center
HealthPoint
Neighborcare Health
Seattle Indian Health Board
University of Washington Adolescent Medicine
Valley Cities Counseling & Consultation
YWCA – Seattle/King/Snohomish

We invest time in relationship building and trust. To do that, we go directly to where homeless individuals sleep, find support, and meet their basic needs. Our entire network recognizes that time is running out on far too many of our patients.

BY THE NUMBERS. BY THE HEART



TOTAL INDIVIDUALS SERVED

16,888

TOTAL VISITS

97,503

2015 VISITS FOR:

Hypertension

4,717

Diabetes

3,686

Heart Disease

2,123

Behavioral Health

22,237

Substance Use

15,460

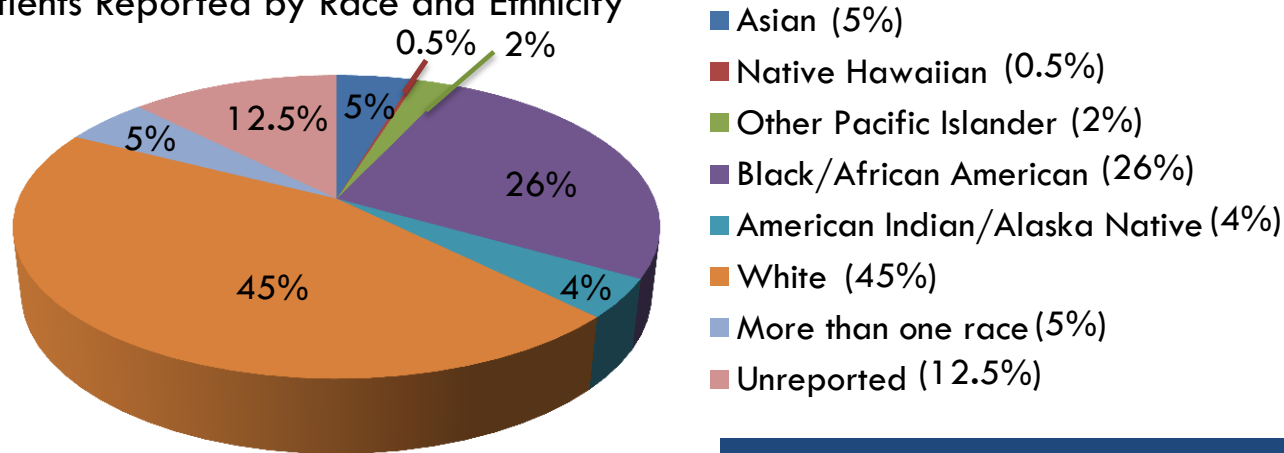
Dental Services

13,949



UNDERSTANDING WHERE THE NEEDS ARE GREATEST

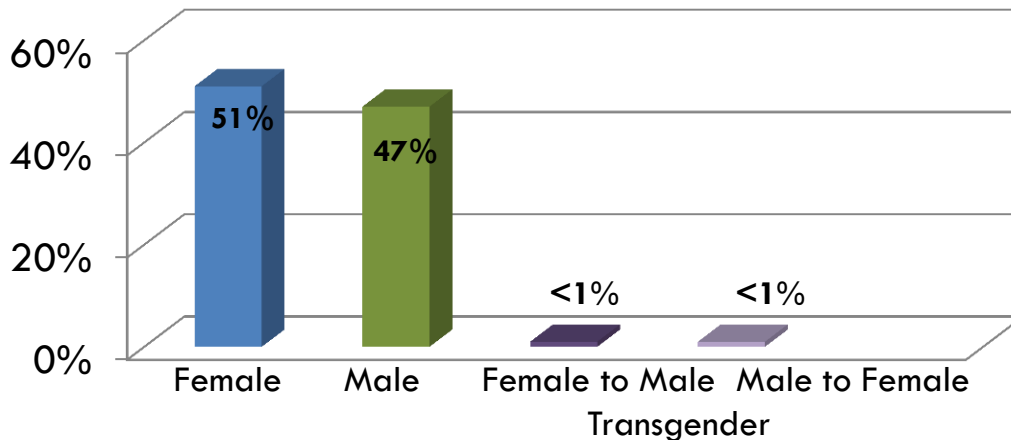
Homeless Patients Reported by Race and Ethnicity



Hispanic or Latino = 17.5%

Race and Ethnicity Data Source: 2015 Uniform Data System for HRSA 330h grant

Gender Identity



Like the majority of health and housing data sets, our information shows:

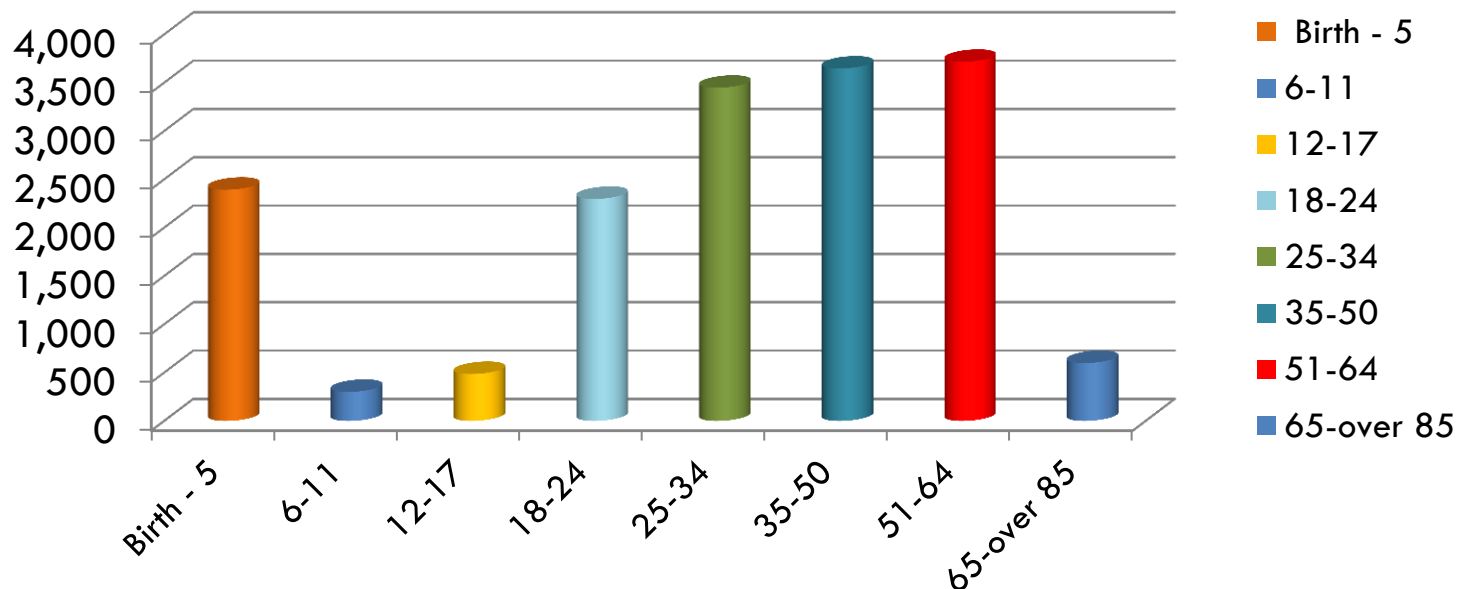
- ✓ Stark racial and ethnic disparities.
- ✓ Need for better information on smaller populations.
- ✓ Many opportunities to align with equity & social justice initiatives happening throughout King County.

Gender Identity Data Source: 2015 Health Care for the Homeless Network Full Client Database.
HRSA's Uniform Data System will begin collecting gender identity in 2016

ACROSS THE LIFE CYCLE

HCHN assures homeless individuals and families are treated with dignity and receive high-quality services from prenatal to palliative, and end-of-life care.

Patients by Age



Age-specific planning and engagement efforts

Youth and Young Adults

HCHN engages youth and young adult service providers, and community organizations, to improve access to age-appropriate health care and housing.

Aging in Place Initiative

HCHN partners with permanent supportive housing providers, and other funders, to identify and meet the complex and costly needs of people over 50.

THE POWER OF THE HCHN NETWORK

Mike is a veteran. He was in and out of hospital and criminal justice systems for years with multiple chronic health conditions and an undiagnosed traumatic brain injury. With the help of HCHN network partners, Mike moved into permanent supportive housing. It was his first home in 15 years.

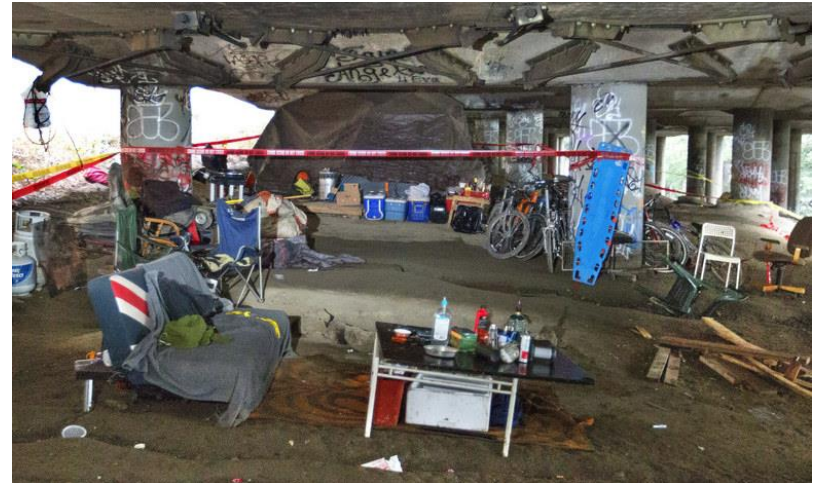
How HCHN and Community Partners Helped:

The Housing Health Outreach Team (HHOT): Helped Mike reduce his drinking. He could then better communicate his health concerns. The team also advocated successfully for Mike to be diverted from jail and into treatment.

Harborview Medical Center: Properly diagnosed his traumatic brain injury. Mike better understood how his impulse control issues related to being in and out of jail.

Plymouth Housing Group: Provided permanent supportive housing and an array of critical social supports.

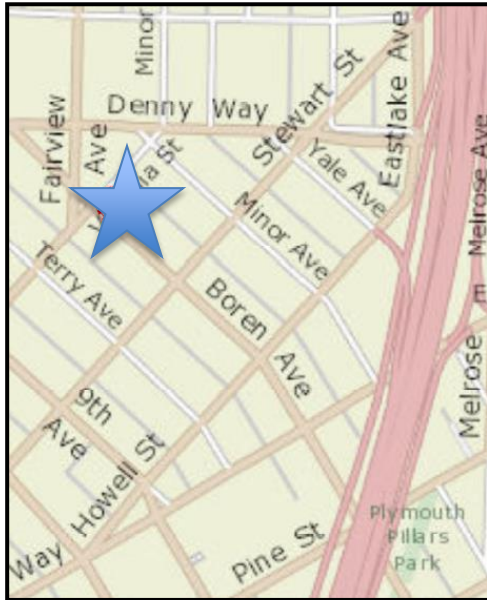
Together, HCHN partners helped Mike get an electronic wheel chair. He felt happy that he was able to be more independent and care for himself.



At the last meeting with his HHOT Nurse before he died in 2015, Mike stood up out of his chair, straightened to look her in the eyes, and said, ***“I appreciate everything you do for me.”***

NEW INTEGRATED CARE CLINIC FOR NORTH DOWNTOWN SEATTLE

HRSA awards the Health Care for the Homeless Network \$650,000



The Neighborcare Health Boren Clinic, 1930 Boren Ave., Seattle
Co-located with Dutch Shisler Sobering Center

UNDER THE SAME ROOF

These Partners



Neighborcare Health
Pioneer Human Services
Evergreen Treatment Services –
REACH Program
King Co. Community & Human Services
University of Washington

will provide

These Integrated Services



Medical and dental
Substance use treatment
Behavioral health
Crisis intervention
Housing & shelter linkages

TO 1,650 PATIENTS ANNUALLY

“Our hope for the evolving Neighborcare Health at the Boren Clinic, at the Sobering Center, is to achieve what health care should be for everyone: low-barrier, highly accessible, and patient-centered at its core.”

Dr. Richard Waters, Neighborcare Health



Warm welcome from the Boren Clinic

HCHN SECURES RESOURCES FOR SECOND MOBILE MEDICAL VAN

Combined support from the City of Seattle and HRSA helps expand mobile services

EXISTING SOUTH KING CO. MOBILE MEDICAL SITES



**“We are a bridge to other services,
a bridge on wheels.”**

Patty Hayes, RN, MN, Director
Public Health – Seattle & King Co

PLANNED EXPANSION SEATTLE SITES



“For people living unsheltered, day-to-day life is usually organized around basic survival issues. Our success with the Mobile Medical Program has resulted largely from our ability to adapt to these challenges. We provide patient-centered treatment, integrated behavioral health services, and case management that doesn’t require people to make appointments or travel.”

John Gilvar, Manager, King County Health Care for the Homeless Network

INNOVATION & INTEGRATION: URGENTLY NEEDED SUBSTANCE USE SERVICES

HRSA funds support new clinicians across three community-based sites

Like many parts of the country, King County is facing a significant public health crisis due to rising rates of heroin and prescription opiate use, and related fatal overdoses.

Homeless individuals are particularly vulnerable as we face an overall shortage of prevention and treatment services equipped to meet their needs.

By the Numbers:

28%

of the 2,144 clients entering Medication-assisted Treatment reported being homeless at the time of admit in 2015.

Data Source: King County Department of Community and Human Services

39%

of clients accessing King County-funded needle exchange programs reported being homeless in 2015.

Data Source: Public Health – Seattle and King County

Goal of Substance-Use Service Expansion Project:

Integrate chemical dependency and mental health counseling and case management services at 3 clinics:

- 1. Methadone Clinic, Evergreen Treatment Services**
South Seattle – SODO Neighborhood
- 2. Navos Mental Health & Wellness Campus**
Burien, Southwest Seattle
- 3. Neighborcare Health, Ballard Clinic**, co-located with Nyer Urness Permanent Supportive Housing, Ballard, North Seattle

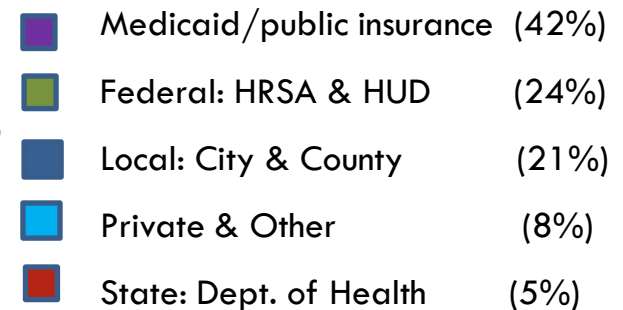
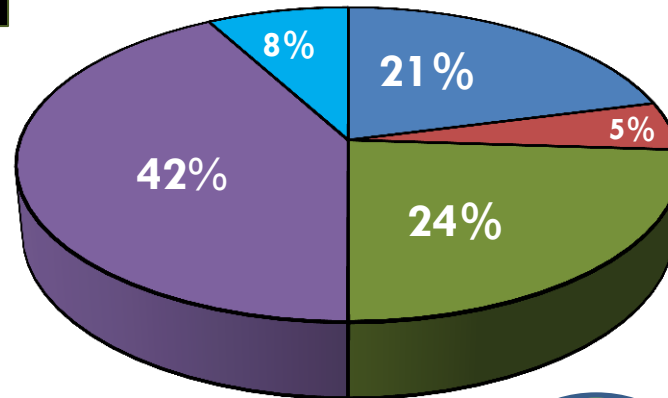
STRATEGIC GROWTH FOR BETTER CARE, BETTER HEALTH AT LOWER COSTS

HUMAN & FISCAL COSTS: KEY PRIORITIES



- A.** Our top services rendered are for substance use and behavioral health.
- B.** We pursue many opportunities to improve health at lower costs. Our partnerships with permanent supportive housing partners and medical respite are two examples.
- C.** We continue to focus on access and enrollment. 21% of patients are uninsured; down from 42% in 2014.

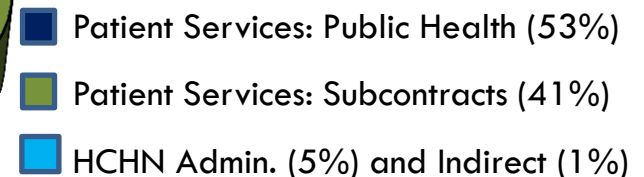
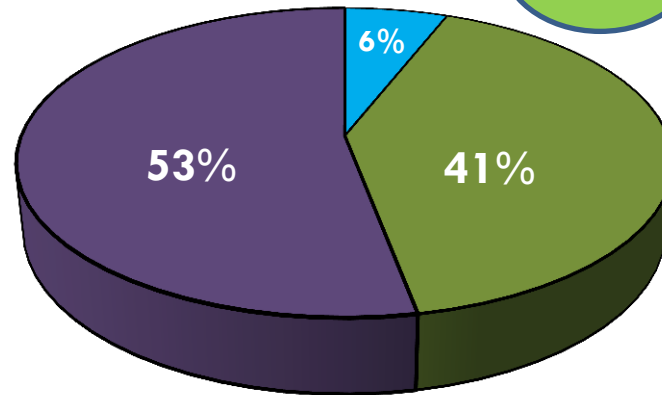
2015 REVENUE: \$20.1 million



94%

goes directly to patient services

2015 EXPENSES: \$20.1 million



Patient services include medical, dental, and behavioral health at nearly 50 clinic and community-based sites.

2015 - 2016 HCHN PLANNING COUNCIL PRIORITIES

- Strengthen community partnerships to integrate *health care and housing* services for people experiencing or exiting homelessness.
- Offer assistance and support to State of Emergency initiatives focused on the unsheltered population, including outreach and navigation to housing and health services.
- Help lead community efforts to increase access to behavioral health and substance use services for the homeless population.
- Increase HCHN's impact on the health of youth and families experiencing homelessness.
- Expand homeless dental care capacity where possible.
- Better define HCHN program outcomes and align them with outcomes sought by initiatives related to Medicaid reform.
- Increase the input of consumers and direct service providers into HCHN needs assessments and planning.
- Improve HCHN's capacity to assure that HCHN providers adopt best practices and meet high standards of quality in caring for the homeless population.
- Enhance healthcare support for homeless housing agencies helping residents age in place.

ACKNOWLEDGMENTS

Funders

Anonymous donors • Building Changes •
City of Seattle Human Services Department •
King County Veterans and Human Services Levy •
King County Mental Illness and Drug Dependency
Sales Tax • United Way of King County •
U.S. Department of Health & Human Services,
Health Resources and Services Administration,
Bureau of Primary Health Care •
U.S. Department of Housing & Urban
Development • Washington State Department
of Health • Wyncote Foundation Northwest

Edward Thomas House Medical Respite Partners

Harborview Medical Center • University of
Washington Medical Center • Valley Medical Center •
Virginia Mason Medical Center • United Way of King
County • King County Department of Community and
Human Services -Mental Illness and Drug Dependency
Action Plan • Seattle Housing Authority • Swedish
Medical Center • Northwest Hospital • United Health
Plan of Washington

**This report is dedicated to the 16,888
homeless individuals who allowed us into
their lives, shared their stories and hold us
accountable to our mission.**

The Health Care for the Homeless Network,
a Community Health Services program of

Public Health 
Seattle & King County