Update: Healthcare + Homelessness Collaboration

Housing and Supportive Services Network (HSSN) CoC Board

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Background – how we got here

Early 2020 – County launched **Metro 300 partnership** with Health Share, Clackamas and Joint Office – $5 million flexible funding from Kaiser Permanente for homeless seniors, including a data sharing component.

Fall 2020: Justin Keller from Collective Medical proposed **data sharing concept** - flag to alert health systems of patients' housing status.

January 2021: County joined the national **Healthcare + Homelessness (H+H) Pilot Initiative**, along with Kaiser Permanente, Providence, and Health Share.

Goal of H+H Pilot Initiative: **Health care organizations make a meaningful, measurable, and transformative contribution to help end chronic homelessness** across a community, with a focus on building racially equitable systems.

Exploring new ways to work together

We recently launched a **Winter Shelter Case Conferencing Pilot** for medically fragile shelter guests.

After **testing for 4-6 meetings**, we will assess the project and report back to housing and health system leadership.

We want to build on learnings from the shelter pilot to develop a second pilot around **care coordination**.

The Vision

Unhoused and newly housed people in Washington County receive the health care they need. Health systems and the County homeless response system are coordinating care in an efficient and trauma-informed way to support vulnerable people in our community.

The Concept

A limited-scope pilot to test out new ways of collaborating with health care through improved care coordination.

Start with Providence and Kaiser Permanente patients who are on the County's Chronic By Name List and/or are newly housed through SHS funding.

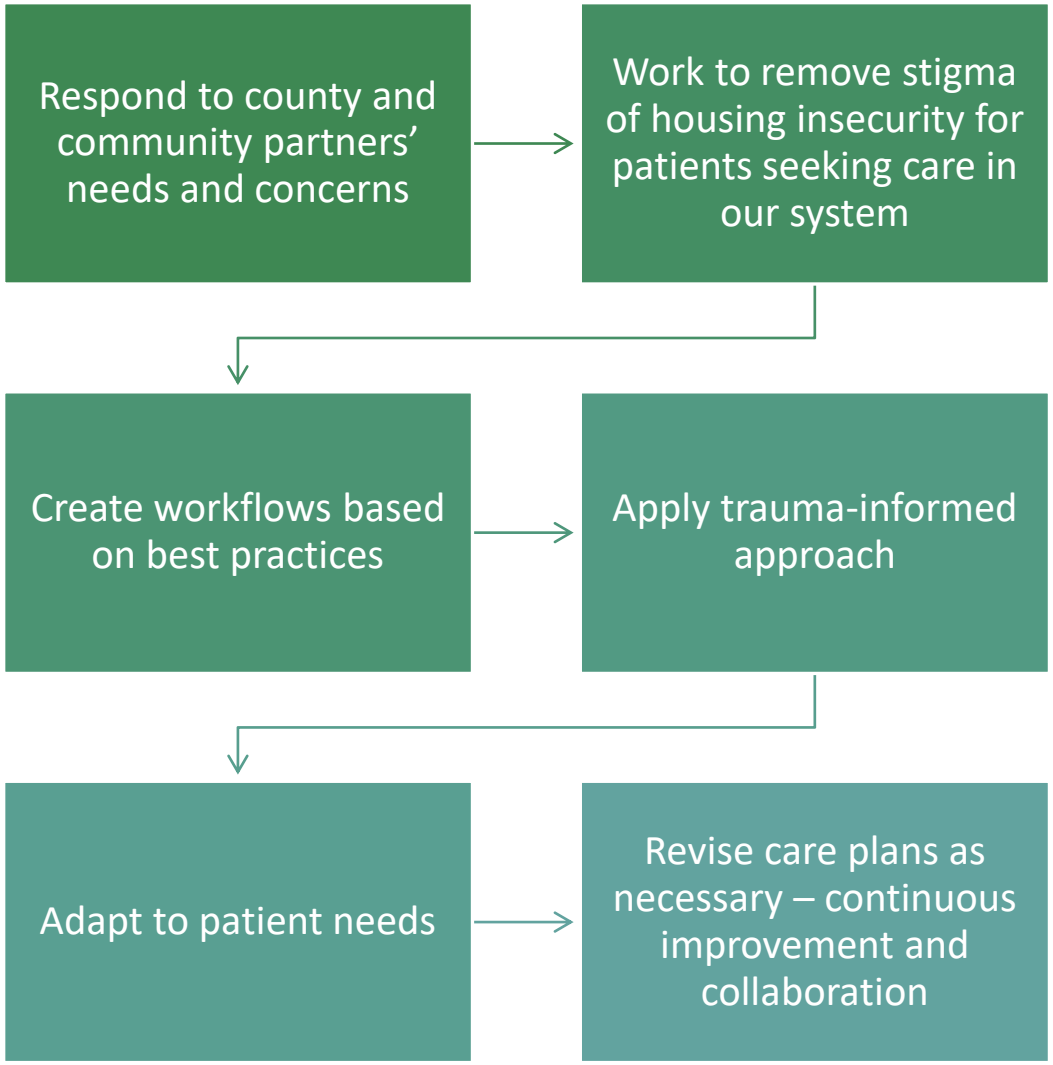
How this will help the County

We continue to see an urgent and unmet need for both unhoused and newly housed clients: **getting connected to the health care they need**.

Housing navigators lack a clear and effective **pathway to engage** with health care systems.

SHS program ready to co-design a **care coordination pilot** to test out new ways of intervening collaboratively to support people served by our system.

Not a full data sharing agreement - a **limited-scope pilot** from which we will learn, refine, and if successful, can consider scaling up in the future.



Commitment by Healthcare Systems

Proposed next steps

February-April

- Engage Washington CoC Board, HSSN and other partners
- Refine and finalize pilot concept with input from all stakeholders

May 2022 (tentative)

- Establish pilot scope and plan, including limited data-sharing/consenting mechanism
- Begin pilot with County providers and health care provider team

May-October 2022

- Ongoing collaborative process improvement, learning and reflection

December 2022 (tentative)

- Report back on initial outcomes and recommended next steps

Questions?
Thank you!

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APPENDIX

Why health systems want to partner

We know that **housing is critical to health**. We are working on multiple fronts to do our part to support housing stability for our patients and the communities we serve.

We provide community benefit funding (such as the Metro 300 program) and are committed to **partnering collaboratively with the homeless response systems** that lead this work.

Internally, we are investing in Community Health Workers, Peer Support Specialists, Navigators, and are improving the ways that we screen for and **respond to our patients' social needs**.

But **we do not have housing expertise**. We lack a connection point to coordinate care with the homeless response system and thus better serve our most vulnerable patients.

Care coordination pilot concept DRAFT workflow example