

Health & Homelessness: Collaboration Across Systems

Honora Ruth, LaQuetta Rouser-Greer, Meg Arsenault, Ben Bradley, and Andi Broffman

Overview

A deep dive into replicable models and frameworks from Built for Zero (BFZ) communities that built relationships and created collaborative projects across systems at the intersection of health and homelessness. This interactive session aims to provide attendees with a roadmap of how they might replicate this cross-sector collaborative work with health systems and public health agencies in their own community. We'll cover topics including Data Sharing, Medical Respite, Medicaid Waivers, and more!

Additional Details

The intersection of health and homelessness is critical because individuals experiencing homelessness often face severe barriers to accessing healthcare, leading to worse health outcomes and higher public costs. Addressing homelessness through health system partnerships can reduce emergency room visits, hospital admissions and overall health care costs, while improving the quality of life for this vulnerable population. With an increasing focus on public health and the social determinants of health, these collaborative approaches between health systems and homelessness services are essential to closing gaps in care.

The goal of this session is to highlight examples from communities who have made progress with cross-sector partnerships to share concrete learnings and foster a community of practice around models aimed at driving better health and housing outcomes for people experiencing homelessness.

So, what actions can communities take in this area?

Develop relationships across health and homeless response systems, pursue data-sharing agreements, leverage Medicaid waivers and other funding sources, establish cross-sector task forces or work groups, pilot and scale collaborative models, and implement medical respite programs.

KEY TAKEAWAYS

Cross-Sector Collaboration Works: Successful communities have shown that building strong relationships and joint projects/goals between health systems, homelessness services, and public health agencies can reduce homelessness and improve health outcomes. Attendees will be provided

examples of cross-sector partnerships across traditionally siloed sectors and hear ideas on how to begin to establish or build upon collaboration within their communities.

Data Integration is a Game-Changer: Sharing data between health systems and HMIS (Homeless Management Information System) can unlock powerful information and new ways of working to support individuals' needs, coordinate care, and measure progress. Attendees will gain insight into the barriers and progress made in establishing secure and compliant data-sharing systems.

Medical Respite Fills a Critical Gap: Many individuals experiencing homelessness are discharged from hospitals without a safe place to recover. Medical respite programs provide a solution by offering a temporary, supportive environment where people can heal and be connected to housing services, preventing hospital readmissions and discharge to homelessness.

Medicaid Waivers Enable Innovative Funding: Certain states have established Medicaid Waivers that have unlocked federal funds for non-traditional services like housing support, behavioral health, and care coordination. Communities that have leveraged these waivers are able to fund comprehensive care models and encourage an unprecedented level of coordination between systems.

Enabling conditions, key partnerships, and strategies for cross-sector collaboration at the intersection of health and homelessness

Some of the **enabling conditions** include strong commitment from leadership in both the health care and homelessness sectors, along with communities that can demonstrate local or state policy support that prioritize housing and Medicaid expansion. Other enabling conditions include communities that can access flexible funding sources through federal grants or philanthropic organizations, and those that have strong data and coordinated entry.

Key Partnerships can include: health systems and hospitals, public health agencies, managed care plans, homelessness service providers, housing authorities, and advocacy groups.

Key Strategies to consider include: integrated care models, data sharing and tech integration, community engagement, race equity frameworks, and pilot programs that are replicable and scalable.

By leveraging these enabling conditions, partnerships, and strategies, communities can effectively build sustainable collaborations that address the complex health and housing needs of individuals experiencing homelessness

Considerations for Equity

- It is essential to this work to make sure everyone is intentionally thinking about implicit bias, equity vs. equality, and inclusive communication.

