

Homes Within Reach Conference

December 2024

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Year Two Data and Outcomes

What the data was telling us

| Barriers | # Of Clients Identified |
|--------------------------|-------------------------|
| Alcohol Abuse | 118 |
| Chronic Health Condition | 285 |
| Developmental Disability | 73 |
| Drug Abuse | 196 |
| HIV/AIDS | 6 |
| Mental Health | 479 |
| Physical Disability | 203 |
| Depression | 1 |
| Diabetic | 1 |
| Needs Driver's License | 1 |
| Disabling Condition | 429 |

...untreated and undiagnosed health conditions, exacerbated by the state of homelessness, can lead to emergencies which could have otherwise been addressed through preventative care.

Our Inspiration and Vision

Meeting people, wherever they are,
with extraordinary care.

We were seeing negative outcomes:

- Unmanaged chronic health conditions
- Pregnancy with no prenatal care
- Overdoses
- Amputation
- Hospital admissions
- Arrests
- Death

We knew we could make a difference:

- Preventative care
- Health screenings
- Vaccinations
- Wound Care
- Linkage to PCPs and Specialty Care
- Mental Health and Substance Use Care
- Disease and health education
- Reduce Emergency Department utilization
- Restore **TRUST**

Implementation

Financial Partners:

- Bucks County Housing & Community Development
- Bristol Township
- St. Mary Medical Center
- Keystone First
- Penn Community Bank

Community Agency Partners:

- Bucks County Behavioral Health
- Bucks County Human Services
- Bucks County Drug & Alcohol Commission
- Penn del Mental Health Center
- Valley Youth House
- Bucks County Opportunity Council
- Code Blue Shelters

Future Partners:

- Physical & Behavioral Health MCOs
- Hospitals
- Physicians & APPs
- Bucks County D&A Commission



New & Emerging Partnerships



Demographics

Unique Clients:

83 – Year 1

91 – Year 2

Average Age: 52 years

Race:

White 84%

Black 13%

Hispanic 3%

Sex assigned at birth:

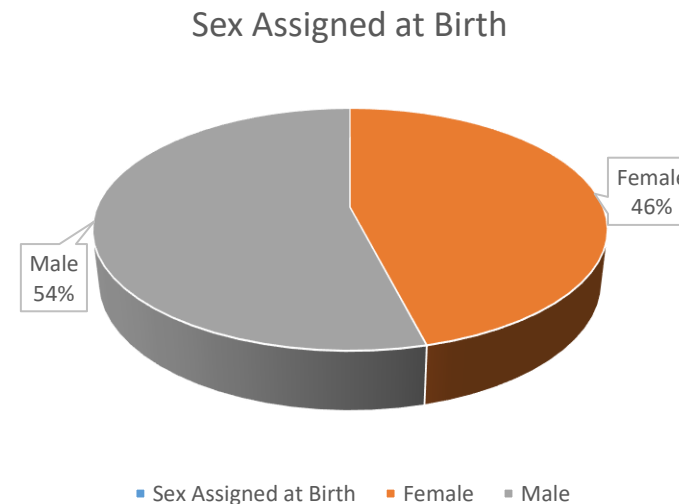
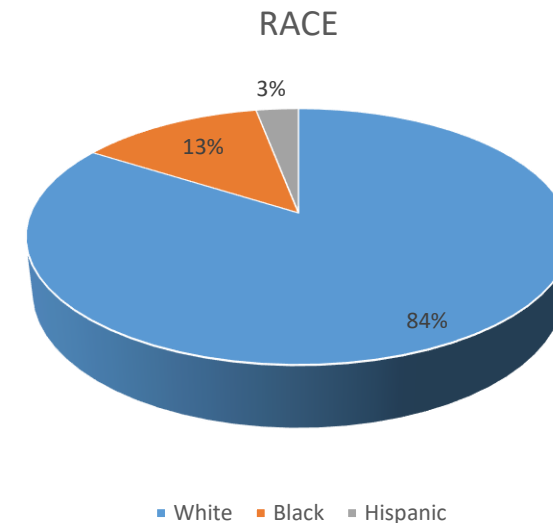
Male 54%

Female 46%

Veteran Status: 5%

Pregnant 3.4%

Data are from launch in March 2022 through March 2024

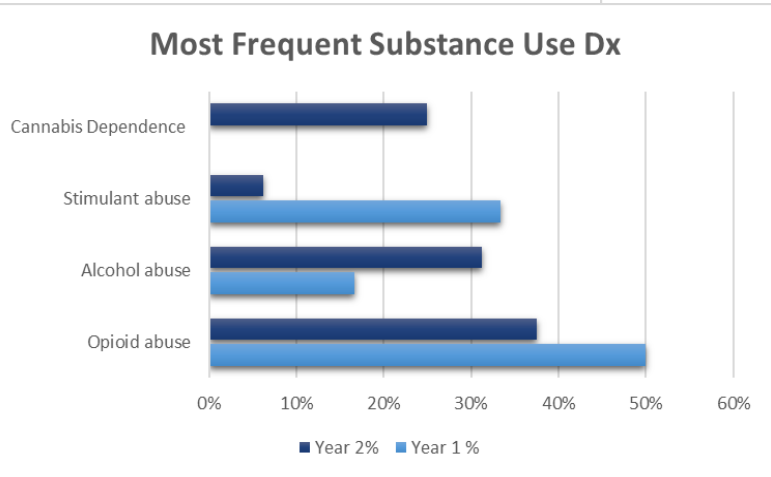
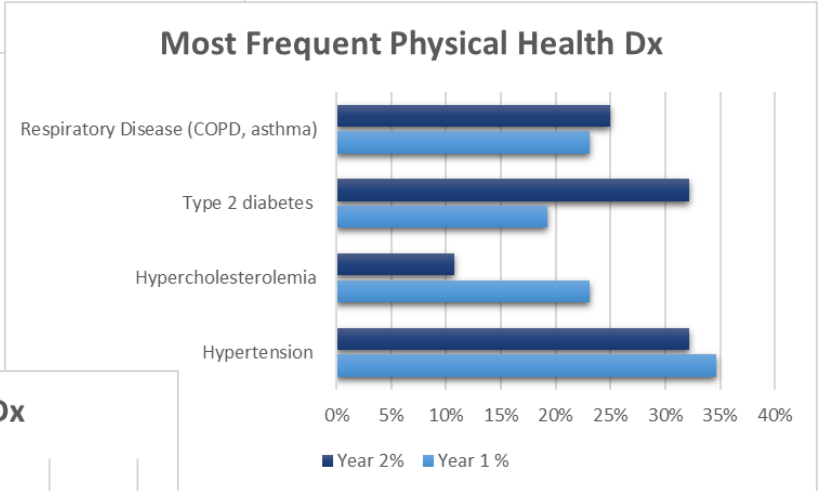
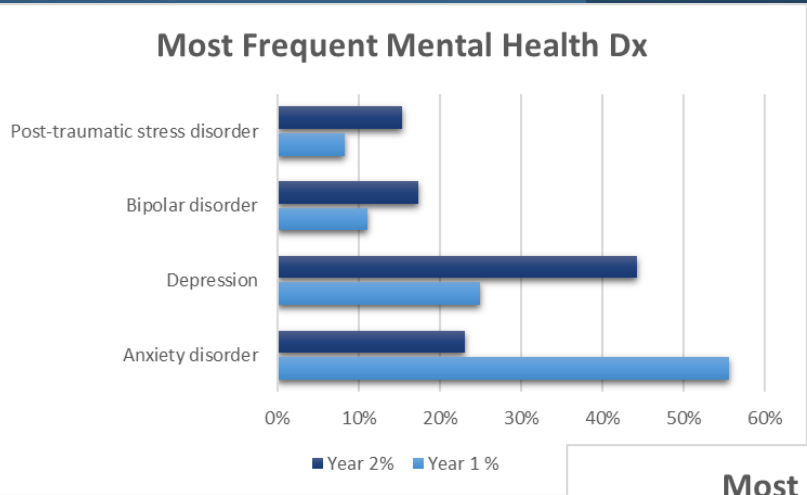


Most Frequent Diagnoses:

| Most frequent mental health diagnoses | Year 1 % | Year 2 % |
|---------------------------------------|----------|----------|
| Anxiety disorder | 56% | 23% |
| Depression | 25% | 44% |
| Bipolar disorder | 11% | 17% |
| Post-traumatic stress disorder | 8% | 15% |

| Most frequent physical health diagnoses | Year 1 % | Year 2 % |
|---|----------|----------|
| Hypertension | 35% | 32% |
| Hypercholesterolemia | 23% | 11% |
| Type 2 diabetes | 19% | 32% |
| Respiratory Disease (COPD, asthma) | 23% | 25% |

| Most frequent substance use diagnoses | Year 1 % | Year 2 % |
|---------------------------------------|----------|----------|
| Opioid abuse | 50% | 38% |
| Alcohol abuse | 17% | 31% |
| Stimulant abuse | 33% | 6% |
| Cannabis Dependence | | 25% |

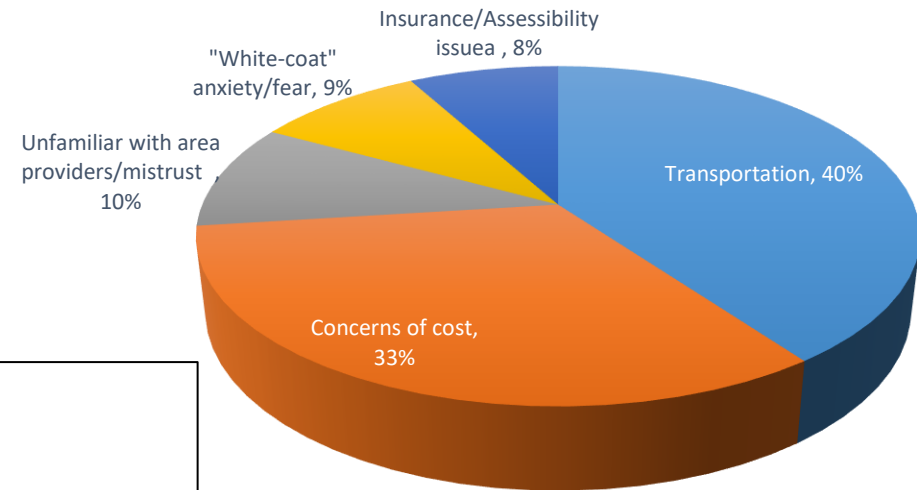


Source: Credible Electronic Health Record Database

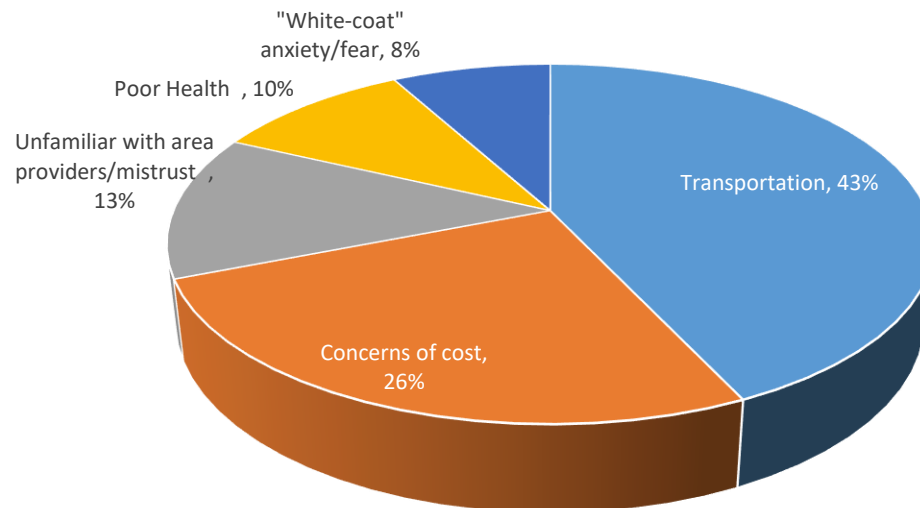
Barriers to Care

- **Transportation >40%**
- **Cost >30%**
- “White-coat” fear
- Unfamiliar with area providers
- Mistrust of the system

Barriers to Medical Care



Barriers to Behavioral Health



Source: Client self-report

Services:

Year 1: 600 encounters; 902 services

Year 2: 648 encounters; 921 services

| Service: | Year 1 | Year 2 |
|--|--------|--------|
| Providing pantry or household items | 282 | 172 |
| Nursing exam, wellness check, or providing medical supplies | 95 | 150 |
| Help obtaining medication, medical records, or bloodwork | 57 | 122 |
| Assisting client with paperwork to obtain documents/services | 45 | 79 |
| Completing Street Medicine intake | 57 | 77 |
| Connecting or transporting client to a specialty provider, including dentist or vision | 54 | 76 |
| Help procuring clothing, laundry, or a shower | 65 | 42 |
| Connecting or transporting client to mental health or drug/alcohol treatment | 57 | 38 |
| Connecting or transporting client to primary care provider | 33 | 38 |
| Discussing or preparing for an upcoming appointment | NA | 38 |
| Helping client secure housing, shelter, or transportation | 21 | 28 |
| Calling or going looking for a client, or fielding a call about them | 11 | 27 |
| Helping client get insurance | NA | 13 |

| | Year 1 | Year 2 | Δ |
|-----------------|--------|--------|------|
| Case Management | 413 | 321 | ↓22% |
| Medical | 364 | 579 | ↑59% |



Harm Reduction, Dignity, and More

Loving our neighbors in tangible ways

Encampments

Relationship Building

Wound Care

Education about safe drug use

Cold and Heat protection

Resource Sharing

Addressing Barriers

Basic needs

Bringing back quality of life

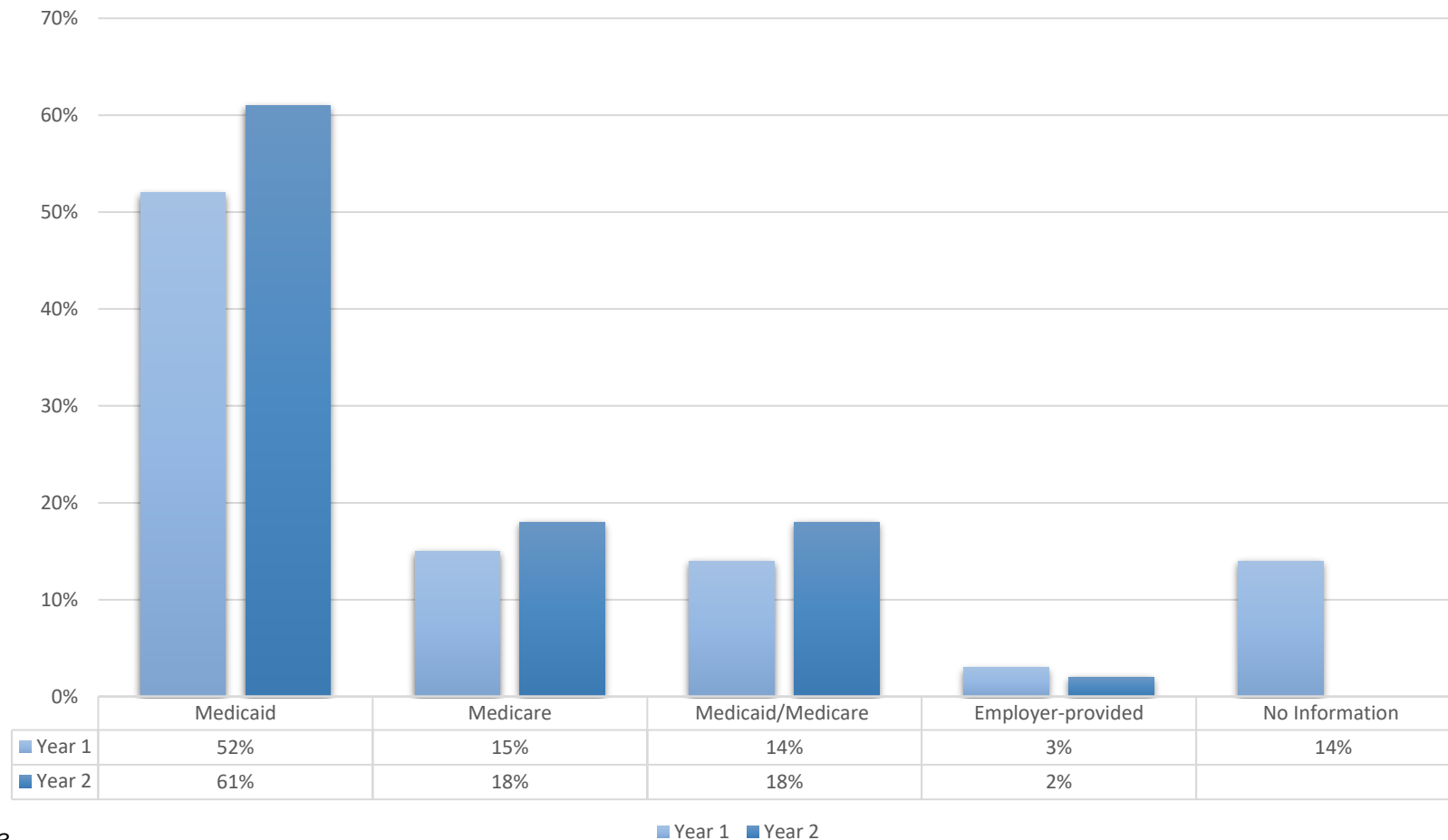
Dental care: Giving them back their smile 😊

Just sitting with them and caring about their story



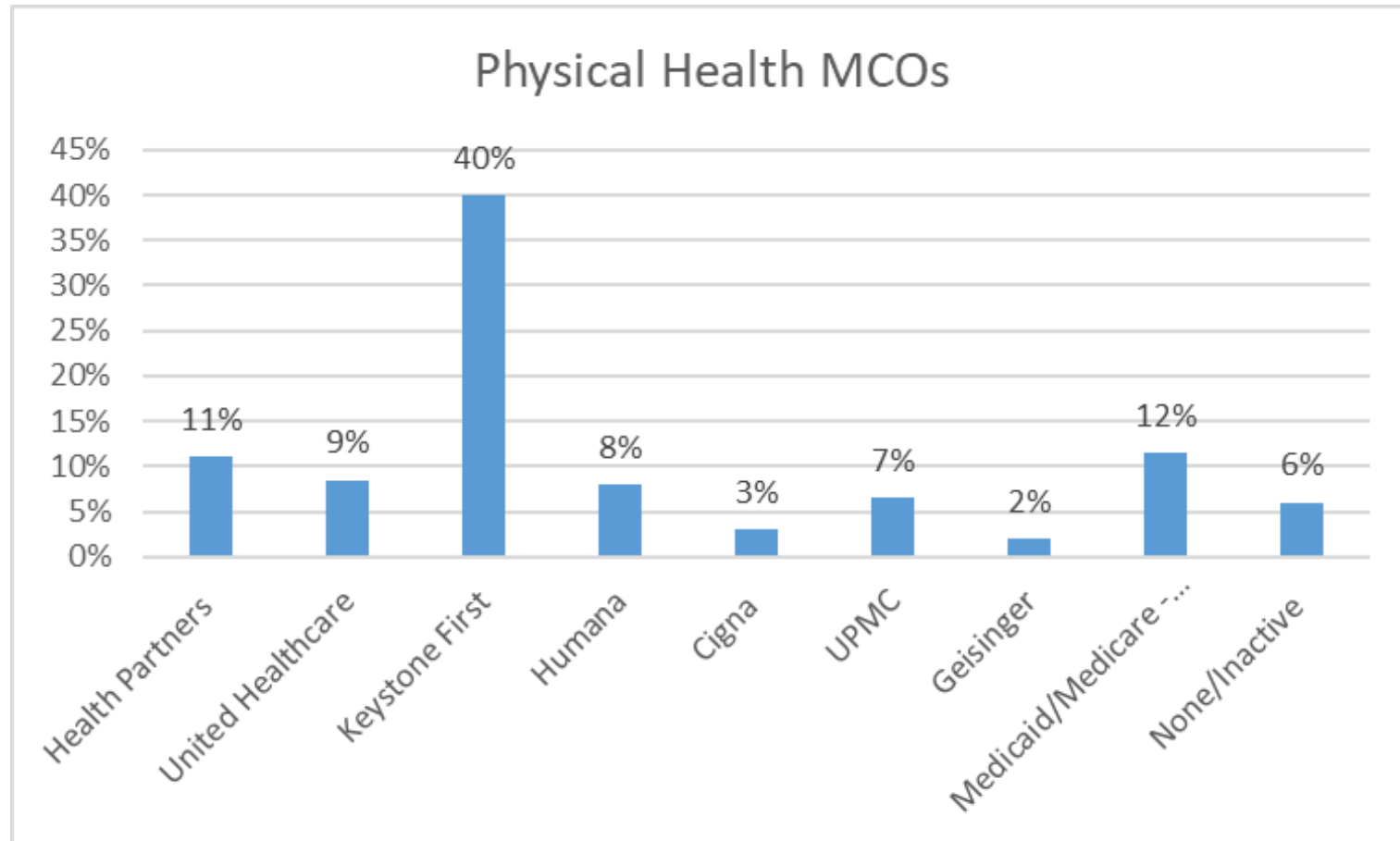
Health Insurance – The key to sustainability

Insurance



Source: HMIS Database

Medicaid Physical Health MCOs



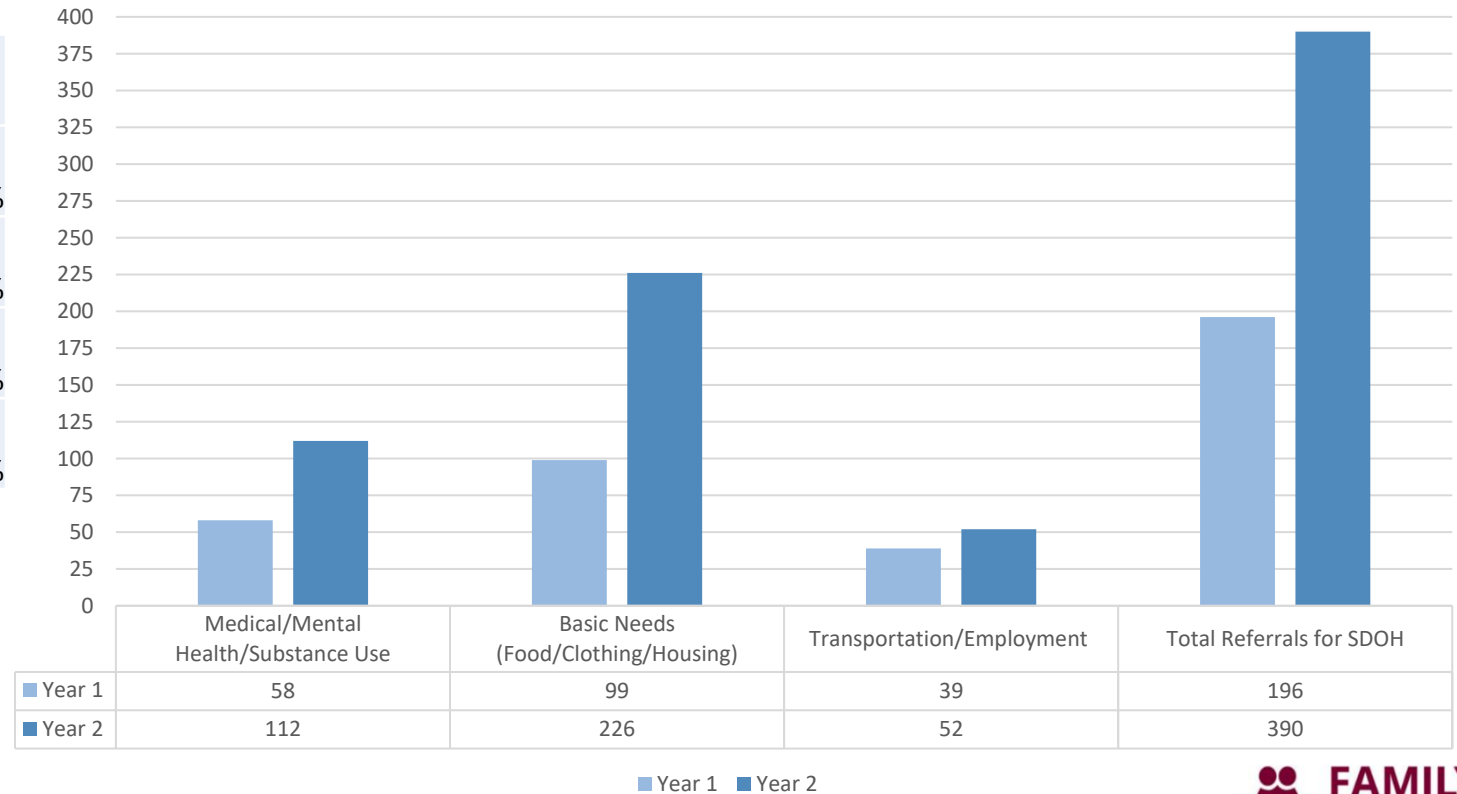
Source: HMIS Database

Keystone First

YR 1 - 196 Unique Referrals
 YR 2 – 390 Unique Referrals

| Type of Referral: | Year 1 | Year 2 | % Increase |
|-------------------------------------|--------|--------|------------|
| Medical/Mental Health/Substance Use | 58 | 112 | 93% |
| Basic Needs (Food/Clothing/Housing) | 99 | 226 | 128% |
| Transportation/Employment | 39 | 52 | 33% |
| Total Referrals for SDOH | 196 | 390 | 99% |

Keystone First Referrals
 Social Determinants of Health (SDOH)

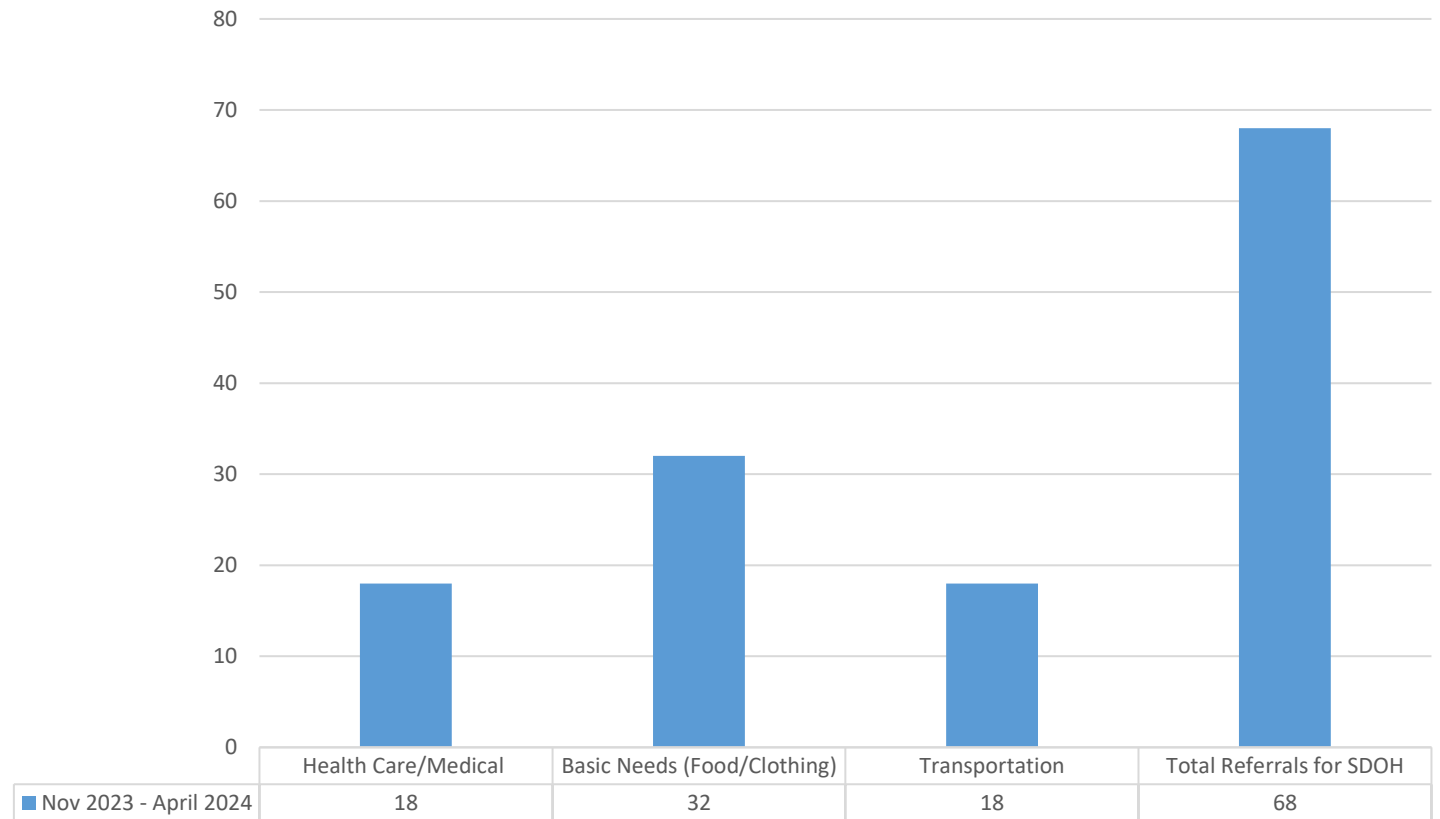


Health Partners Plan

68 Unique Referrals

| Type of Referral: | |
|-----------------------------|----|
| Health Care/Medical | 18 |
| Basic Needs (Food/Clothing) | 32 |
| Transportation | 18 |
| Total Referrals for SDOH | 68 |

Health Partners Plan Referrals
Social Determinants of Health (SDOH)



Nov 2023 - April 2024

Source: Health Partners Plan Excel Tracking Sheet
Dates: November 1, 2023 thru April 30, 2024

Past and Current Funding

| | | Funding Sources | | | | | |
|---------|------|-----------------|----------------|-----------------|----------|------------|--|
| | | County/HUD | Keystone First | Health Partners | St. Mary | Total Cost | |
| Past | 2022 | 536,700 | 87,900 | | | 624,600 | |
| | 2023 | 184,763 | 40,961 | 47,000 | | 272,724 | |
| Current | 2024 | 614,629 | 97,741 | 53,000 | | 765,370 | |
| Future | 2025 | 669,143 | 97,741 | 53,000 | 10,000 | 829,884 | |
| | 2026 | 676,199 | 97,741 | 53,000 | 10,000 | 836,940 | |

| | Notes |
|-------|---------------------------------|
| | 2% salary increases annually |
| 2,023 | Added a medical case manager |
| 2,024 | Added 6 hotel rooms |
| 2,025 | Requested additional nurse time |

Promising Changes on the Horizon



Centers for Medicare and Medicaid Services (CMS)

- June 2023 Officially recognize that medical care can be delivered on the street
- October 2023 – Street Medicine providers nationwide able to be reimbursed



1115 Waiver

- Housing is Health Care and Health Care is Housing
- Health Related Social Needs (HRSN): States will consider requests to use section 1115 demonstration flexibilities to cover certain evidence-based services designed to mitigate the negative health impacts of unmet HRSN
- Supports to keep people housed billable under Medicaid

Lessons Learned & thoughts from our team

“I was struck by not only the sheer volume of the services you provided (as many as 59 encounters with one person!), but the humanity and compassion you bring to the job. It is clear that you go above and beyond and that you really care about the people you are working with.” –Lynn, Program Evaluator

Start before you think you're ready



- **Hiring** the right staff is the #1 key to success – We ❤️ our team!
- Developing **procedures** is difficult – start anyway and refine
- **Stocking supplies** is challenging – supply chain issues/unknown needs/storage
- **Boundaries** are necessary – with clients AND other agencies

Collecting data is messy but critical



- Multiple data collection methods (Credible, HMIS, Keystone, Excel Sheets, Google Docs)
- Lack of standardized definitions (What constitutes “case management” services?)
- Year 2 data is cleaner but still work to do
- Claims data from MCOs will be where the real story is told

Progress Notes show the humanity in this work



- Christine informed cm that she might be pregnant and need a pregnancy test.
- Dawn informed cm & nurse that her teeth hurt her; appt. made: drove her to Hi-Teck Dental Group
- Beatrice informed cm that she's in need of some incontinence underwear; delivered to encampment
- Drove Melissa to Rothman Institute located in Bensalem
- Cm dropped oxygen supplies off to Darrell in Bensalem
- Cm delivered wound care supplies to George in Levittown
- Dawn informed cm that she has an appointment with the Cardiologist; needs a ride
- Picked up Darrell's medication from CVS: \$79.07 co payment required; Cm paid for it



Q&A

Contact us!

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[Street Medicine |
Family Service
\(fsabc.org\)](http://www.fsabc.org)



Street Medicine 2024

Christine Nepple CRNP

Yomari Salvador Rivera, Program Supervisor

Street Medicine

- Primary and preventative care to unsheltered homeless, shelter residents, housing insecure individuals
- Deliver equitable and patient-centered primary and acute healthcare to homeless individuals
- Increase accessibility to healthcare through telehealth services
- Reintroduce patients to healthcare services
- Increase continuity of healthcare by helping to establish healthcare
- Education on primary and preventative healthcare
- Educate patients on available community services and resources



Street Medicine Team Members



Core Physicians



CRNP, Clinical Director



RN Case Manager, Program Manager



Program Supervisor



Community Health Worker



100's of clinical and nonclinical volunteers

Goals of Street Medicine

- Improve access to care by connecting patients to primary care services.
- For patients who are unable to access primary care services we not only act a bridge to service, but maintain a steady relationship through clinic visits, maintaining continuity of care similar to a PCP office.
- Stress the importance of routine health maintenance and primary prevention through screenings including mammography, colonoscopy, low dose lung CTs, diabetic eye exams, and routine lab work
- Preventative medicine increases quality of life, helps to identify potential health problems at earlier stages, saves healthcare costs, decreases disability and death.





Services Provided

- Primary and preventative care
- Addiction medicine - MAT
- Psychiatric care, LAI
- OB/GYN
- Pediatrics
- Diabetes education
- Respiratory education on chronic conditions, evaluation by Pulmonologist, Respiratory therapist
- Specialty clinics
 - Podiatry
 - Eye clinic
 - Neuro clinic
 - Pulmonary clinic

Specialty Clinics

- Eye screening clinic
- Color blindness screening
- Field of vision screening
- Glaucoma screening
- Visualization of the retinas
- Visual acuity changes
- Pulmonary
- Screening for sleep apnea
- Evaluation for low-dose CT lung cancer screening
- Tobacco cessation education
- Respiratory disease management (COPD, Asthma, OSA) education
- Review of respiratory medications such as inhalers and nebulizers

Specialty Clinics

- **Podiatry**
- Staffed by podiatrist as available
- Evaluation of foot and ankle disorders
- A4 clinic follow up
- Surgical evaluations, post surgical care
- Foot wounds
- **Neurology clinic**
- Our newest specialty clinic
- Evaluation of neurologic complaints such as palsy, drop, neuropathy
- Comprehensive neurological examination

Telemedicine

Telemedicine kiosk in HRM

Allow community members access to care on non-clinic days

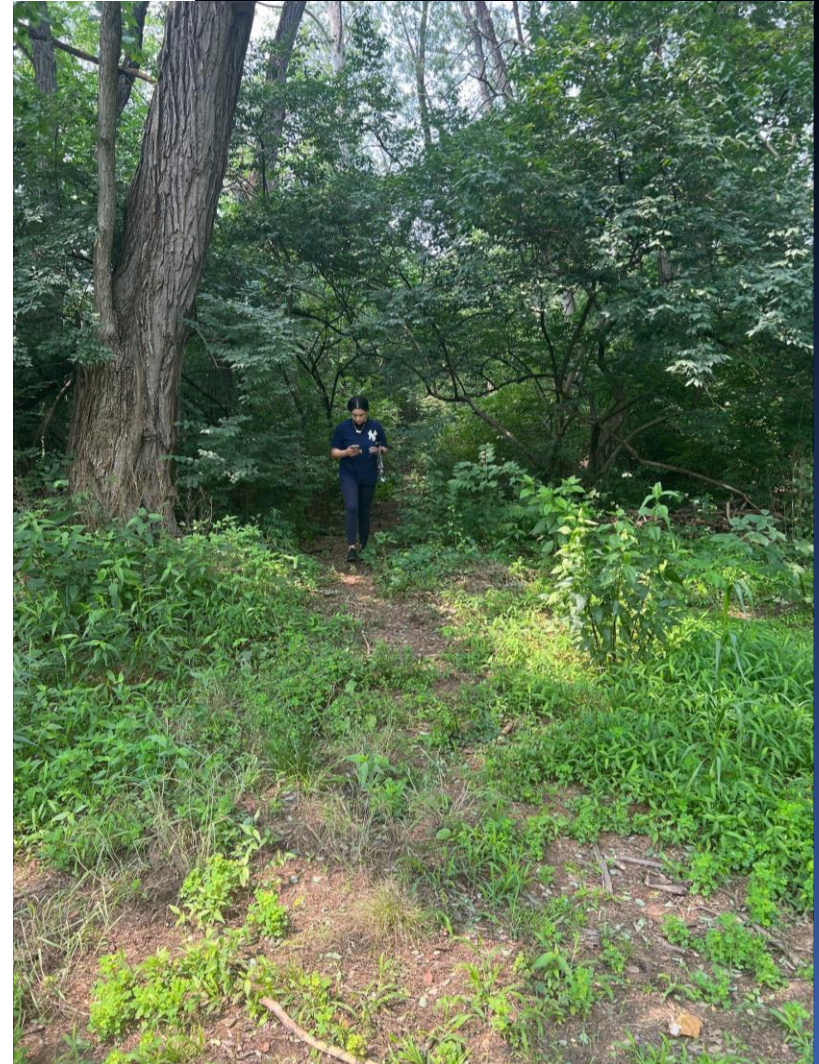
Staffing assistance with Drexel Medical students

Ability to remotely take vital signs, assess lungs, heart sounds, visualize ears and throat.

Accessible care three times a week in four-hour blocks at various times throughout the day.

Street Outreach

- Tent sites, encampments
- Parks
- Under bridges
- Along trails and riverbanks
- Mountain sites
- Any location that a patient might be staying at that time
- We meet patients where they are to increase access and ease of care

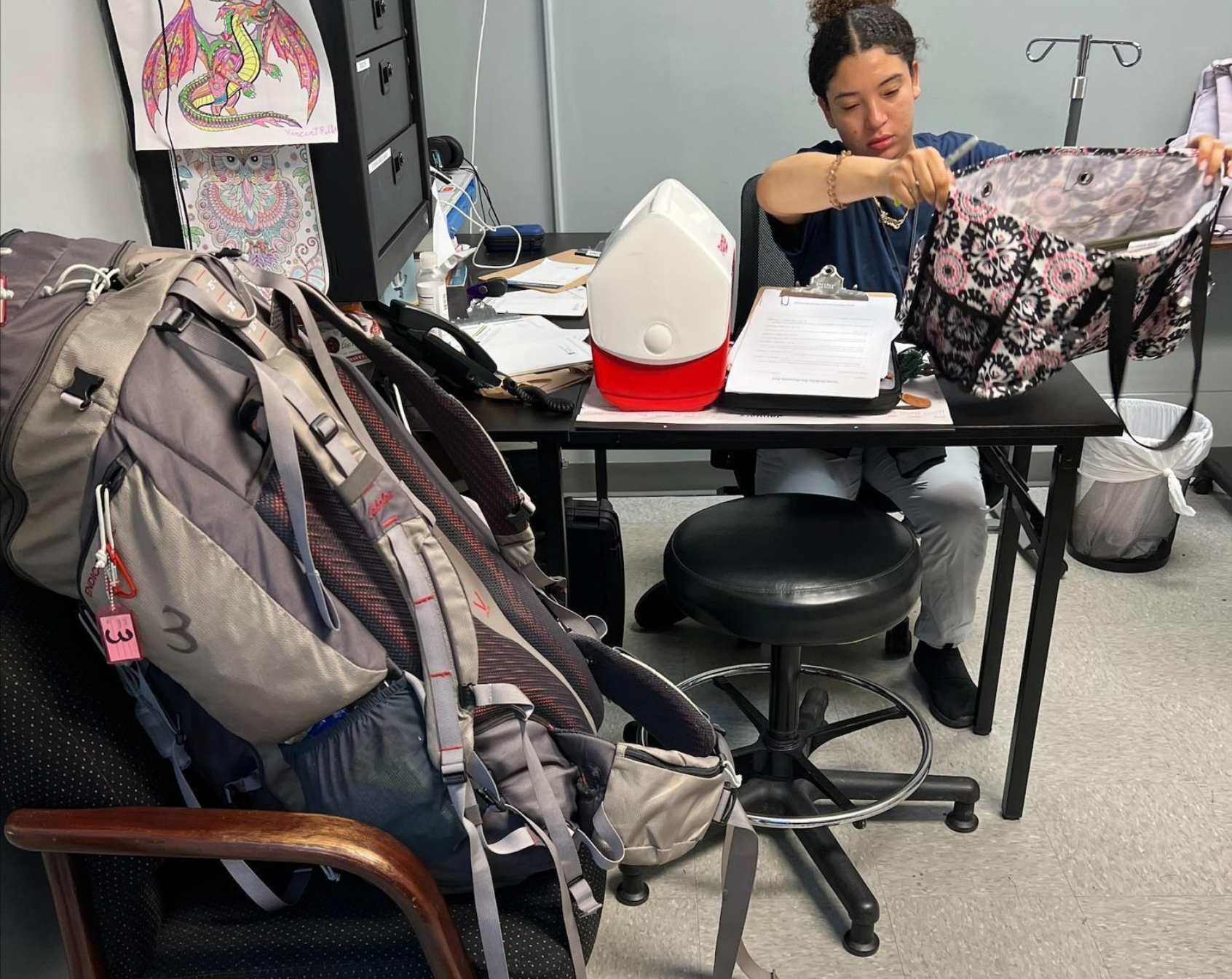


Street Medicine Community Based Partners

- City Lights Ministry
- Mary's Shelter – adolescent youth
- YMCA
- New Journey Community Outreach
- Hope Rescue Mission
- Lighthouse Women and Childrens Shelter







- Hope Rescue Mission
- Specialty clinic site
- Addiction medicine site
- Psychiatry site
- Telehealth site

Lighthouse



- Fully functioning stand-alone clinic site
- Pediatrics, OB/GYN, Adult primary and specialty care
- Dr. Holly Metzgar
- Dr. Jody Musso

POCT HIV testing

- Needle exchange site
- 3rd Friday of the month
- CPH staff, SM, COE staff with the winnie
- Ten minutes to result, ability to draw immediate confirmatory labs and connect with resources
- High risk patient population
- Unlimited repeat testing





ry Store

CANOS - HISPANIC FOOD

THE CENTER FOR PUBLIC HEALTH
FREE & CONFIDENTIAL
HIV TESTING

THE CENTER FOR PUBLIC HEALTH

ESB

Yellow traffic light

Hepatitis C Pilot, Treat on the Street

- ▶ Purchased POCT test supplies – test high risk individuals where they are
- ▶ Obtained CLIA, Fibroscan
- ▶ Worked with gastroenterology to develop a protocol for treatment on the street
- ▶ Began pilot this month with three patients currently in various stages of treatment plan. Goal of ten this fiscal year...
- ▶ Decrease steps to treat, decrease points of failure





Medication Management

Addiction Medicine on the Street

- ▶ We utilize Community Wellness specialty services to increase access to care for patients experiencing homelessness.
- ▶ We have partnered with COE to bring Addiction Medicine to patients who are willing to participate but may be unable to access traditional care.
- ▶ Medication Assisted Treatment/MAT bridge to Addiction Med appointment
- ▶ Continued transportation assistance.
- ▶ Frequent check ins

Community Wellness Specialty Services

- COE – Center for Opioid Excellence
 - care coordination program for adults struggling with SUD
 - remove barriers and find recovery tools that work best for the individual
 - not dependent on insurance status
 - in community care
- Soft Landings
 - Support to pregnant and postpartum women who have used or are using opioids or stimulants
 - Offer medical care
 - Recovery and mental health support
 - Pregnancy and parenting support
 - Help applying for food stamps and housing
- CHW – community health worker
 - Link individuals to vital community resources

Psych on the Street

- Many of our patients have no access to psychiatric care, or are too disorganized to access care
- We provide psychiatric services at Hope Rescue Mission, evaluation and recommendations are completed, and if long-acting injectables are started we will administer medications on the street. Patients are tracked with an EPIC list to ensure doses are not missed.

Barriers to housing

- Lack of affordable housing, rent increased 51.6% from December 2019 to July 2023 in Reading
- Poverty rate in the city is 29.4%, median income \$38,738
- 59% of homes in the city are renter-occupied and 18% of these have owners who do not live in the city or live outside of PA
- **Homelessness has increased 69% in the past 10 years.**
- 2020-2021 school year 676 students in the RSD experienced homelessness,
- 2021-2022 887 students -RSD
- 2022-2023 583 students – RSD
- **2021-2022 2,488 Berks County STUDENTS**
- Under reported youth homelessness due to fear of separation/removal/foster care system
- Lack of family shelter beds, Over 14 male children shelter rules
- Lack of no barrier shelter spaces
- Lack of day shelter space – shower, mail, clean clothes, no space for food preparation, food storage – cost of prepared foods
- Decreased benefits post covid/rising costs
- **66.2-78% of Americans live paycheck to paycheck**
- 2022-2024 – **70-80% of Berks County housing insecure individuals identified as first time homeless**
- Chronically homeless – continuously homeless for at least a year or have experienced homelessness at least four times in the last three years for a combined length of time of at least a year.

Berks County Shelter System

- No no-barrier/low barrier shelters exist.
 - Drug addiction
 - Untreated mental health
 - DNR list
 - Megan's Law

80% of people experiencing homelessness are first time homeless

Families with male children older than 14 are exempt from shelter.....

No female CODE BLUE space

Limited family CODE BLUE space –Eckert emergency funding just approved



Available Shelter Spaces

- Safe Berks – 3 months
- Lighthouse Women and Children’s Shelter – 6 months after acceptance to program, ER shelter 1 night to 2 weeks - FULL
- Hope Rescue Mission – 6 months – 2 years depending on age/circumstance and ability to progress through program, transitional housing, CODE BLUE
- Opportunity House – no defined time limit, program requirements, transitional housing - FULL
- Mary’s Shelter – defined schedule, program dependent, application process, youth and young family shelter
- Hannah’s Hope – 12-18 months, program dependent, private shelter, transitional housing, application process

Benefits of Street Medicine



Reduced utilization of ER for non emergent complaints.

Increased utilization of preventative medicine

Bridge to traditional healthcare services

Advocacy when accessing healthcare

Decreased social isolation, provides supportive environment

Continuity of care – same core providers, same support system

Decreased disenchantment with healthcare system

Increased care coordination/collaboration with community health partners

If you would like to help **Street Medicine** carry out their mission by making a donation please visit:

TowerHealth.org/Make-A-Gift



STREET MEDICINE

To contact **Street Medicine**, call **610-816-4002** Monday through Friday **9 a.m. to 4 p.m.**

Street Medicine Clinic Locations

City Light Ministry
7:00 to 8:00 a.m.
246 N. 9th Street, Reading

New Journey Community Outreach
(the yellow church)
11:15 a.m. to 1:15 p.m.
138 S. 6th Street, Reading

Hope Rescue Mission
645 N. 6th Street, Reading

Reading YMCA
9:30 to 10:45 a.m.
631 Washington Street, Reading

Mary's Shelter
9:30 to 10:45 a.m.
615 Kenhorst Blvd, Reading

LightHouse Women and Children's Center
6:00 to 9:00 p.m.
715 N. 6th St. Reading

What is Street Medicine?

Street Medicine provides care to people in our area who are homeless or at risk of becoming homeless. Our doctors, nurses, and support staff see patients at scheduled times at:

- Hope Rescue Mission
- City Light Ministry
- LightHouse Women and Children's Center
- New Journey Community Outreach
- Mary's Shelter
- Reading YMCA

When Should I Visit the Doctor?

Doctors can see you for many health needs. Come see us if you have a new health problem or something you have had for a long time. We cannot list every problem, but here are a few examples:

- Medicine refills
- Cold symptoms
- Sore muscles and joints
- Flu shots
- Blood pressure checks
- A new or long-term wound
- Diabetes education
- Trouble with your feet

Telemedicine Virtual Visits

Telemedicine is a medical video solution that provides remote access to the **Street Medicine** health professionals. The telemedicine kiosk is located at the Hope Rescue Mission. Walk-ins are welcome at certain times. To make an appointment, call or text **610-816-4002**.



RH6101 5.24

NO APPOINTMENT NEEDED.

July

| | | | |
|---------------------------|---|---|-------------------|
| Tuesday Jul. 2 | City Light YMCA New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Jul. 9 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | Pediatrics |
| Tuesday Jul. 16 | City Light Mary's Shelter New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Jul. 23 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | OBGYN |
| Tuesday Jul. 30 | City Light YMCA New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |

August

| | | | |
|---------------------------|---|---|-------------------|
| Tuesday Aug. 6 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | Pediatrics |
| Tuesday Aug. 13 | City Light Mary's Shelter New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Aug. 20 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | OBGYN |
| Tuesday Aug. 27 | City Light YMCA New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |

September

| | | | |
|----------------------------|---|---|-------------------|
| Tuesday Sept. 3 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | Pediatrics |
| Tuesday Sept. 10 | City Light Mary's Shelter New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Sept. 17 | PLEASE CALL TO CONFIRM Hope Rescue Mission/Lighthouse | 6:00 to 9:00 p.m. | OBGYN |
| Tuesday Sept. 24 | City Light YMCA New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |

October

| | | | |
|-----------------------------|---|---|-------------------|
| Tuesday Oct. 1 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | Pediatrics |
| Wednesday Oct. 9 | City Light Mary's Shelter New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Oct. 15 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | OBGYN |
| Wednesday Oct. 23 | City Light YMCA New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Oct. 29 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | Pediatrics |

November

| | | | |
|-----------------------------|---|---|-------------------|
| Wednesday Nov. 6 | City Light Mary's Shelter New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Nov. 12 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | OBGYN |
| Wednesday Nov. 20 | City Light YMCA New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Nov. 26 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | Pediatrics |

December

| | | | |
|-----------------------------|---|---|-------------------|
| Wednesday Dec. 4 | City Light Mary's Shelter New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Tuesday Dec. 10 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | OBGYN |
| Wednesday Dec. 18 | City Light YMCA New Journey | 7 to 8 a.m. 9:30 to 10:45 p.m. 11:15 a.m. to 1 p.m. | |
| Monday Dec. 23 | Hope Rescue Mission Lighthouse | 6:00 to 9:00 p.m. | Pediatrics |
| Tuesday Dec. 24 | CHRISTMAS EVE - CLINIC CLOSED | | |

Fiscal Year 2023

- 2130 patient encounters
- Infancy to age 89
- 1847 males, 282 females.
 - Over 500 different diagnoses were noted in fiscal year 23
 - 257 documented ER/hospital saves



Fiscal Year 2024

Total encounters 3,725

Total visits 2,283

Unique patients 851

Male 2,936

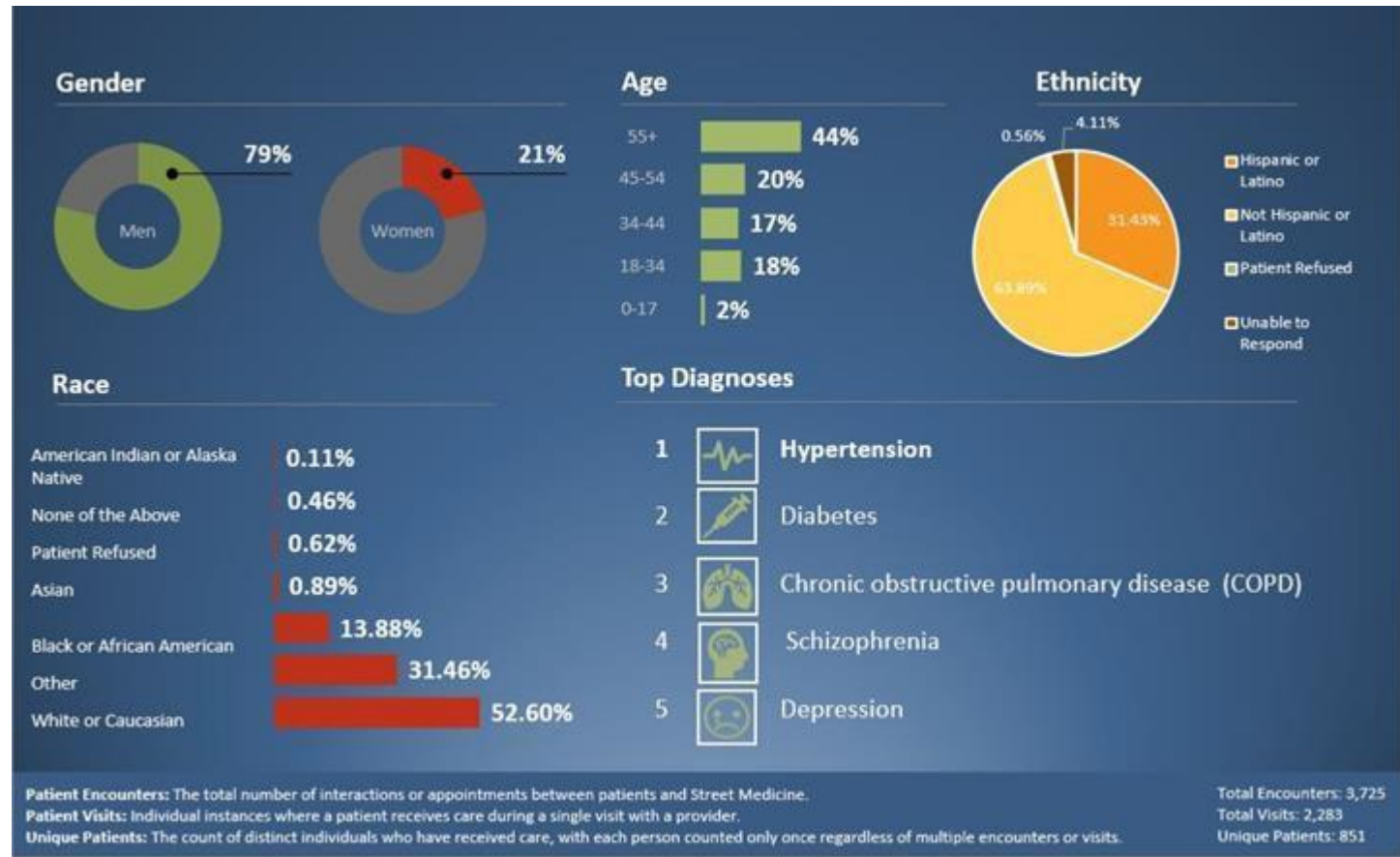
Female 789 (282 prior year)

ER/Hospital saves 413 (257 prior year)

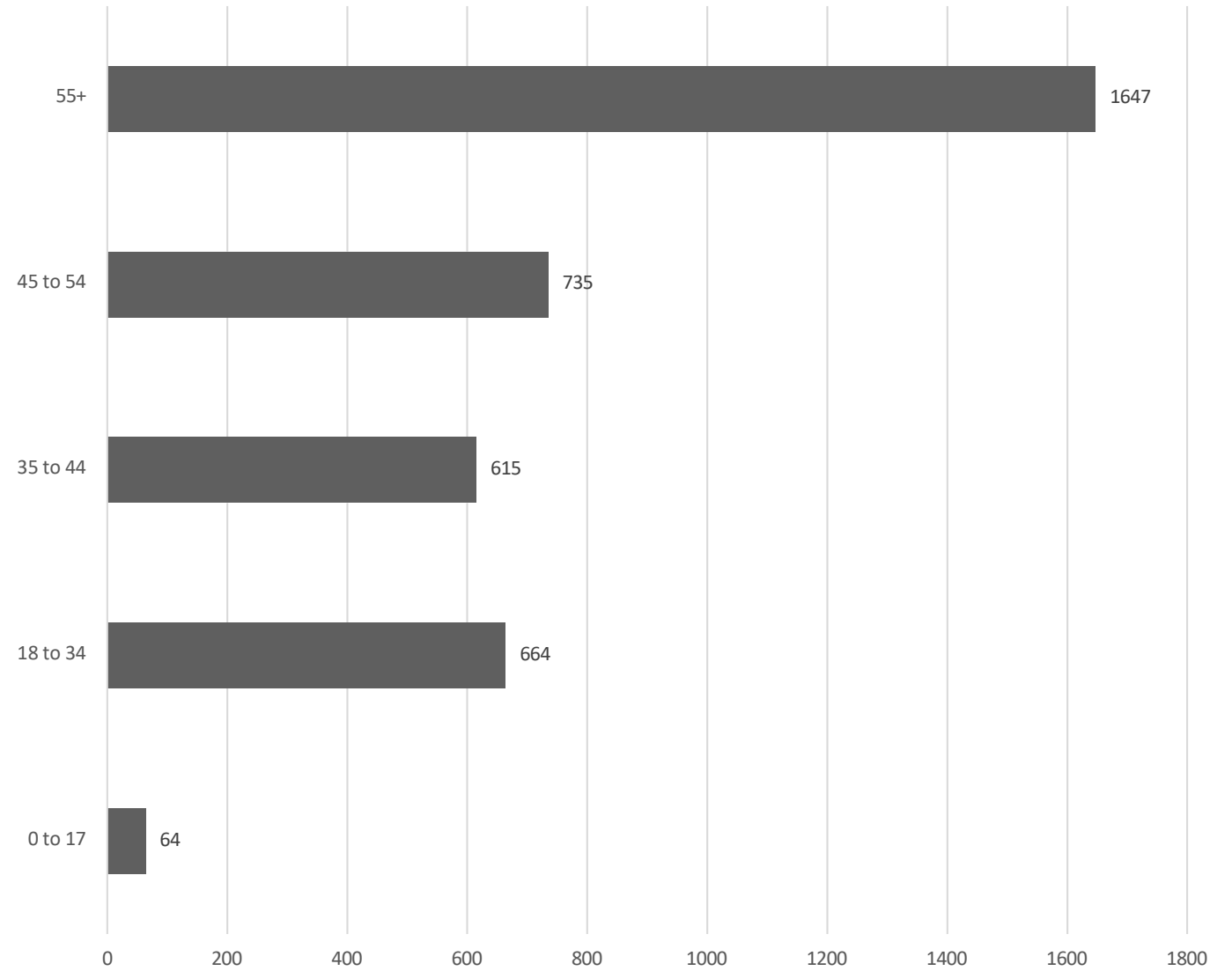
641 diagnosis codes

489 patients are insured

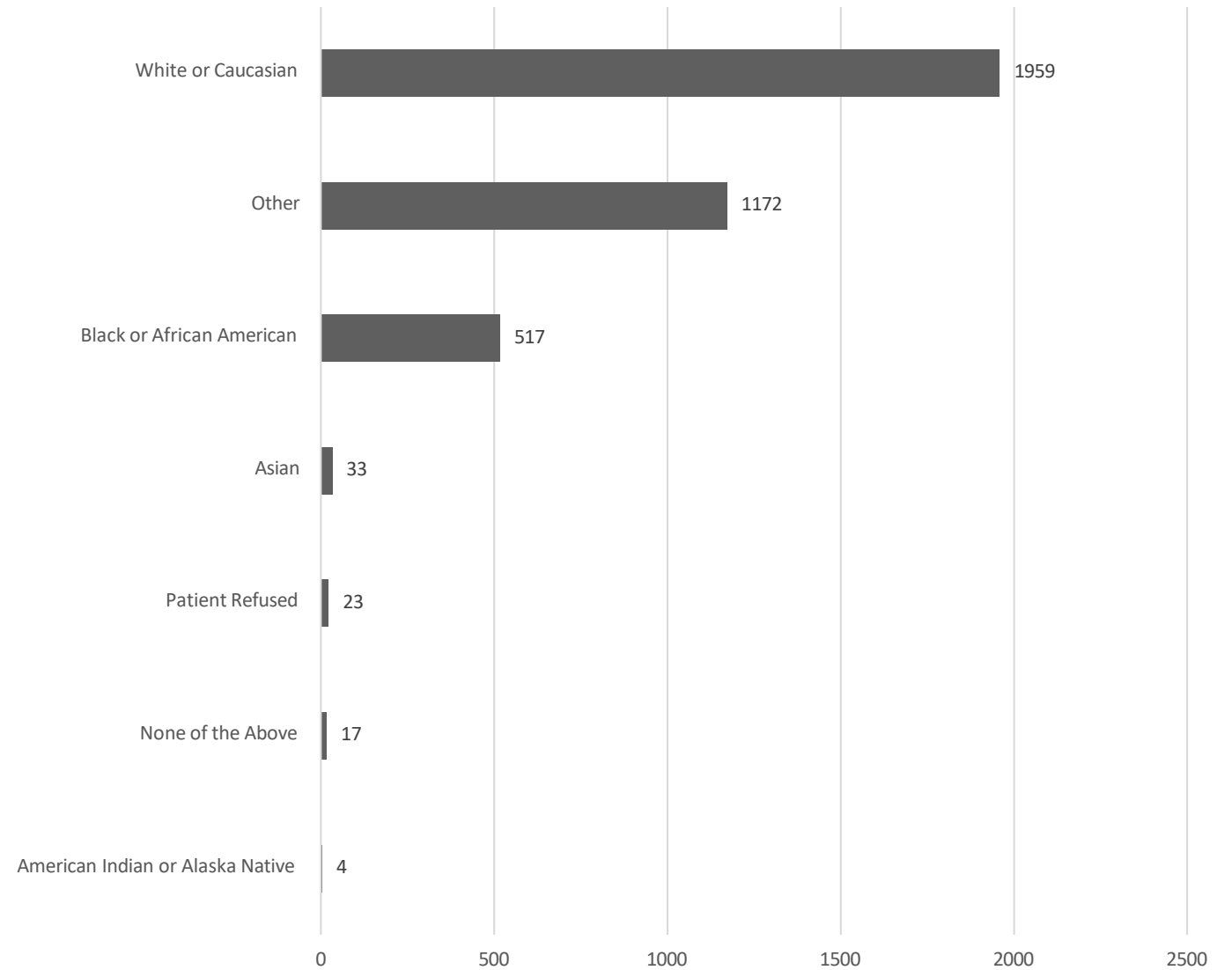
397 patients with no documented PCP



Age Distribution



Race Distribution







Questions?????

“Kindness begins with the understanding that we all struggle” - Charles Glassman

“Empathy is a quality of character that can change the world” – Barack Obama

References

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