

Breaking Down Silos: Coordinating Federal Resources for PLWH Experiencing Unstable Housing -- Housing Institute 201 December 13, 2018

Homeless and Housing Workgroup
HIV/AIDS Bureau (HAB)
Health Resources and Services Administration (HRSA)

US Department of Housing and Urban Development
Office of HIV/AIDS Housing



Health Resources and Services Administration (HRSA) Overview

- Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically vulnerable through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities
- Every year, HRSA programs serve tens of millions of people, including people living with HIV/AIDS, pregnant women, mothers and their families, and those otherwise unable to access quality health care



HIV/AIDS Bureau Vision and Mission

Vision

Optimal HIV/AIDS care and treatment for all.

Mission

Provide leadership and resources to assure access to and retention in high quality, integrated care, and treatment services for vulnerable people living with HIV/AIDS and their families.



Ryan White HIV/AIDS Program

- Provides comprehensive system of HIV primary medical care, medications, and essential support services for low-income people living with HIV
 - More than half of people living with diagnosed HIV in the United States – more than 550,000 people – receive care through the Ryan White HIV/AIDS Program (RWHAP)
- Funds grants to states, cities/counties, and local community based organizations
 - Recipients determine service delivery and funding priorities based on local needs and planning process
- Payor of last resort statutory provision: RWHAP funds may not be used for services if another state or federal payer is available
- 84.9% of Ryan White HIV/AIDS Program clients were virally suppressed in 2016, exceeding national average of 59.8%



Source: HRSA. Ryan White HIV/AIDS Program Annual Client-Level Data Report 2016; CDC. HIV Surveillance Supplemental Report 2016;21(No. 4)



Welcome to Housing Institute

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Disclosures

Presenter(s) has no financial interest to disclose.

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Commercial Support was not received for this activity.

Housing Institute Learning Objectives

- Participants in this Session Will Learn How :
 - To maximize federal resources through coordination and community planning
 - Raise awareness of the impact of unstable housing on HIV health outcomes.
 - To identify strategies to improve the coordination of HIV healthcare and housing services.
 - To create local action plans for leveraging HIV health and housing services.

Institute Format

- Housing 101

- Provide an overview of both the HOPWA program and the RWHAP
- Discuss the impact of housing on health outcomes
- Provide information about how best to coordinate these programs to maximize the reach of the federal resources.

- Housing 201

- Detail the community planning processes required for both the RWHAP and the HOPWA program
- Discuss ways that HIV health and housing community-planning processes may work together to support PLWH experiencing unstable housing
- Provide recipient examples of how to integrate HOPWA and RWHAP planning.



Institute Format

- Housing 301

- Provide participating recipients with tools for assessing local coordination
- Examine action steps for developing a local plan to improve coordination among providers serving PLWH experiencing unstable housing

Ryan White HIV/AIDS Program Planning Requirements

Planning Bodies and Planning Processes



Why Housing?

Summary of Research Data

- For persons who lack a safe, stable place to live, housing assistance is a proven, cost-effective health care intervention.
- Stable housing has a direct, independent, and powerful impact on HIV incidence, health outcomes, and health disparities.
- Housing status is a more significant predictor of health care access and HIV outcomes than individual characteristics, behavioral health issues, or access to other services.

Taken from the US. Housing and Urban Development Publication, *HIV CARE CONTINUUM The Connection Between Housing And Improved Outcomes Along The HIV Care Continuum (2013)*. Available for download at <https://www.hudexchange.info/resources/documents/The-Connection-Between-Housing-and-Improved-Outcomes-Along-the-HIV-Care-Continuum.pdf>



Housing Impacts on the HIV Care Continuum

- Compared to stably housed persons, persons who are homeless or unstably housed:
 - Are more likely to become HIV infected
 - Are more likely to be diagnosed late, after infection has progressed to AIDS
 - Are more likely to delay entry into HIV care
 - Experience higher rates of discontinuous health care
 - Are less likely to be prescribed Antiretroviral (ARV) treatment
 - Are less likely to achieve sustained viral suppression
 - Have worse health outcomes, with greater reliance on emergency and inpatient care
 - Experience higher rates of HIV-related mortality

Taken from the US. Housing and Urban Development Publication, *HIV CARE CONTINUUM The Connection Between Housing And Improved Outcomes Along The HIV Care Continuum (2013)*. Available for download at <https://www.hudexchange.info/resources/documents/The-Connection-Between-Housing-and-Improved-Outcomes-Along-the-HIV-Care-Continuum.pdf>



Ryan White HIV/AIDS Program

History of Community Planning

- Since its inception in 1990 as the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, the RWHAP has included community planning provisions for the purposes of:
 - Developing service priorities and resource allocation
 - Conducting needs assessments
 - Convening planning bodies comprised of community, service providers, and government for data-driven decision making
- Although planning requirements vary by RWHAP Part, in general, the legislation defines an array of providers that should be included on planning bodies:
 - People living with HIV (PLWH)
 - Cross RWHAP Part Representation
 - Other HIV Care and Treatment providers such as the VA and Medicaid
 - Social service providers, including providers of housing and homeless services



Key Planning Requirements

RWHAP Part A and Part B

RWHAP Part A

- Must convene a Planning Council with representation from:
 - PLWH
 - Recipients from the other RWHAP Parts
 - Social service providers including those that provide housing (see Section 2602(b)(2) of RWHAP legislation for full list)
- **Roles and responsibilities include:**
 - Coordinate with other HIV service providers
 - Develop service standards
 - Evaluate program effectiveness
 - Allocate and prioritize resources
 - Complete comprehensive plans

RWHAP Part B

- Must periodically convene stakeholders including:
 - PLWH
 - Members of Federally recognized Indian Tribes
 - Recipients from other RWHAP Parts, providers and other public agencies.
- **Roles and responsibilities**
 - Participate in the statewide coordinated statement of need which includes an assessment of the service system and service gaps
 - Advise the RWHAP Part B recipient on the comprehensive plan including strategies for addressing the service needs of those lost to care and disproportionately affected subpopulations



Integrated HIV Prevention and Care Planning CY 2017 -2021

- **What is it?**

- Integrated planning is the sharing, merging, or integration of a state's HIV/AIDS prevention (Centers for Disease Control and Prevention (CDC)-sponsored) and care (RWHAP-sponsored) planning groups
- May be accomplished through collaboration on joint projects, sharing planning products, sharing members, or totally integrating into one planning body

Partnerships and Collaboration

The Integrated Plan Guidance sets the expectation for jurisdictions to:

- Assess HIV service delivery system including non-RWHAP and CDC-funded providers
- Identify resource gaps in the service delivery system
- Collaborate, partner, and coordinate planning and implementation of services between multiple sources of treatment, care, and prevention service providers

Considerations for Joint RWHAP – HOPWA Planning

- Ensure key decision makers represent housing on RWHAP planning bodies so that they can
 - Recommend joint or leveraged funding opportunities
 - Suggest integrated program designs
 - Participate in planning
- Create data sharing opportunities
 - Talk to your local HOPWA recipient to explore data sets
 - Look to RWHAP peers who have done this work for data agreement templates
 - Explore electronic solutions (e.g., data bridges)
 - Discuss ways better data could inform planning
- RWHAP representatives should find ways to participate in HOPWA planning processes
 - Many jurisdictions identified housing as an unmet need and are struggling with identifying ways to address this need
 - Participation can assist in the identification of non-traditional housing providers



Potential Impacts of Integrated Planning across RWHAP and HOPWA

- Better alignment and use of service dollars
 - Joint procurement processes
 - Allocations that maximize housing service dollars to address gaps
- Improving the use of data system to address client needs
 - Opportunities to target outreach for PLWH experiencing unstable housing
 - Better respond to funding opportunities
 - Identify the impact of unstable housing on the HIV Care Continuum
- Identification innovative models for integrating HIV housing and health service delivery systems
 - Population specific HIV supportive transitional housing
 - Co-located HIV clinic and housing services
 - Integrated HIV housing, substance use treatment, and HIV care services
 - Visit <https://targethiv.org/ihip>



Action Steps for RWHAP Recipients

What Are The Questions to Ask?

- Identify key partners within the local housing system who can participate on planning bodies and formalize those relationships
 - Who administers your local HOPWA program? Do you have a working relationship with this office/person?
 - Which agencies receive HOPWA funding?
 - What data do housing providers in your area have on those who are living with HIV?
 - Does the RWHAP recipient have formal ways to connect the housing system or is it left up to Case Managers to create those relationships?
 - Visit www.hudexchange.info
- Examine RWHAP data to see how unstable housing impacts health outcomes
 - Do you use data to leverage and maximize housing services for PLWH?
 - How are the needs of unstably housed individuals addressed in your service system? Are they virally suppressed? Are they adequately linked to care?
 - How can your data help you to target interventions?
 - What gaps exist in your data sets and how can you fill them?



Action Steps for RWHAP Recipients - Continued

What Are The Questions to Ask?

- Create opportunities for cross training?
 - What do you need to know about the housing system of care? Do you know the types of housing funded? Do you know gaps in service? How do RWHAP clients enter this system of care?
 - How well are HOPWA/housing providers connecting clients to the RWHAP care and treatment system?
 - How well do HOPWA/housing systems understand the importance of access to treatment?
 - Do HOPWA/housing providers understand viral suppression and the impact of viral suppression on both transmission of HIV and HIV Health outcomes?
- Work with your housing colleagues to create meaningful needs assessments for PLWH
 - What do you know about the needs of populations experiencing unstable housing?
 - What services would stabilize this population and/or improve health outcomes for those in crisis?
 - Does your needs assessment break down housing needs that looks at who is becoming unstably housed?
 - Can you use your data to better target gaps within the HIV housing service system?



Technical Assistance

For assistance in learning about RWHAP Planning Requirements or to discuss ways to better integrate to RWHAP systems of care

- Integrated HIV/AIDS Planning (IHAP) Technical Assistance Center
 - Provides TA ,training, and resources to support RWHAP jurisdictions and their planning bodies with the implementation and monitoring of their Integrated HIV Prevention and Care Plans <https://targethiv.org/ihap>
- Visit the TargetHIV
 - Planning resources: <https://targethiv.org/category/topics/planning>
 - Housing resources: <https://targethiv.org/category/topics/housing-homelessness>
- Contact your Project Officer

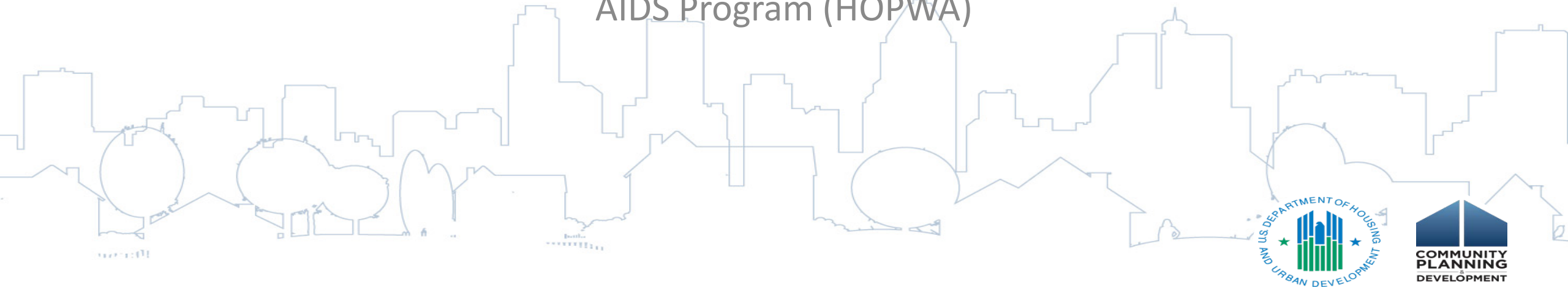
RWHAP Resources

- HIV Prevention and Care Integrated Planning Guidance
 - <https://www.cdc.gov/hiv/pdf/funding/announcements/ps12-1201/cdc-hiv-integrated-hiv-prevention-care-plan-guidance.pdf>
- Integrated HIV/AIDS Planning (IHAP) Technical Assistance Center
 - <https://targethiv.org/ihap>
- Find a RWHAP Recipient
 - <https://www.careacttarget.org/grants-map/all>



De-mystifying the US Department of Housing

Overview of the planning process for the Housing Opportunities for
AIDS Program (HOPWA)



What is the Consolidated Plan?

- Eligible state and local governments receive annual grants for community development and affordable housing from HUD:
 - Community Development Block Grant Program (CDBG);
 - HOME Investment Partnerships Program (HOME);
 - Emergency Solutions Grants Program (ESG);
 - Housing Trust Fund (HTF); and
 - **Housing Opportunities for Persons With AIDS Program (HOPWA)**
- For each program, HUD describes a broad range of eligible activities, and grantees determine which of the activities will best serve the needs of their community.
- In order to determine the most pressing needs and develop effective, place-based market-driven strategies to meet those needs, HUD requires grantees to develop a Consolidated Plan (“Con Plan”).

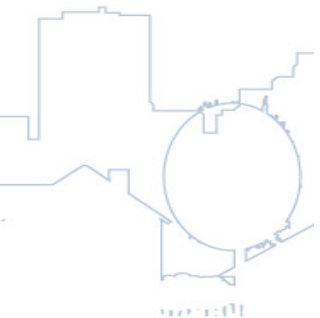


What is the Consolidated Plan?

- Designed to help states and local jurisdictions assess their affordable housing and community development needs and market conditions, including the needs of low-income PLWH.
- Framework for a community-wide dialogue to identify housing and community development priorities that align and focus funding.
- Carried out through Annual Action Plans that summarize the actions, activities, and the specific federal and non-federal resources that will be used each year to address priority needs and specific goals.
- Identifies the method of selecting project sponsors



Phases



Citizen Participation and Consultation

- Citizen participation and consultation are incorporated throughout each phase.
- Ensures that input from a wide range of providers, citizens, advocacy groups, public and private agencies and community leaders is incorporated into both the development and implementation of the Con Plan.
- A Con Plan which has received “buy-in” from the community during its formulation is more likely to be successful.



Consultation Requirements

- Public and private agencies that provide assisted housing, health services, and social services (including those serving PLWHA);
- Organizations that represent protected class members;
- Organizations that enforce fair housing laws;
- Broadband internet service providers;
- Organizations engaged in narrowing the digital divide;
- Agencies whose primary responsibilities include the management of flood prone areas, public land or water resources; and
- Emergency management agencies



HOPWA-Specific Consultation Requirements for Local Governments

- The largest city in each HOPWA EMSA must consult broadly to develop a metropolitan-wide strategy for addressing the needs of persons with HIV/AIDS and their families living throughout the EMSA.
- All jurisdictions within the EMSA must assist the jurisdiction that is applying for a HOPWA allocation in the preparation of the HOPWA submission.



Citizen Participation Requirements

- Jurisdictions are required to adopt a citizen participation plan that sets forth its policies procedures for citizen participation.
- Appropriate actions must be taken to encourage the participation of all citizens, including low and moderate income persons, minorities and non-English speaking persons.
- A reasonable time frame must be provided for interested parties to examine the proposed Con Plan and submit comments.



Citizen Participation Requirements

- At least one public hearing must be held to obtain residents' views and respond to proposals and questions before the proposed Con Plan is published for comment.
- The hearing must be held at a time/location convenient to potential and actual beneficiaries, and with accommodation for persons with disabilities.
- The jurisdiction must consider all comments received in writing or orally at hearings, and a summary of comments received and comments not accepted with reasons why must be attached to the final plan.



Determining Needs

- Jurisdictions are required to assess the varying needs within the community in the areas of affordable housing, community development, and homelessness.
- The Con Plan must provide a concise summary of the estimated housing needs in the jurisdiction projected for the ensuing five-year period.
- The plan must identify the size and characteristics of the population of persons living with HIV/AIDS and their families within the area it will serve.
- This data should reflect the consultation and citizen participation processes.



Needs Assessments

- Resource ID is an eligible HOPWA activity for Formula Grants
 - System coordination
 - HIV/AIDS housing needs assessments and research
- HOPWA and Ryan White providers can work together to identify data needs
- Incorporating housing/housing stability questions to RW client surveys and focus group questions
- Ex. Build/maintain an HIV Housing Care Continuum



Setting Priorities

- The level of need in a community will always be greater than the resources available to meet the need, so needs must be prioritized.
- A jurisdiction's priority needs are the needs that will be addressed by the goals outlined in the Con Plan.
- The plan should make clear the rationale for establishing the priority needs, and these priorities should be based on the needs assessment/market analysis.



Setting Priorities

- In addition to the Citizen Participation requirements, coalition building with housing and HIV/AIDS service providers in communities can provide a platform to engage informed service providers and PLWH on needs assessment results, priority setting and long-term planning.

Examples of who could be included in priority setting:

- Ryan White Part A Planning Council
- Ryan White Part B grantee
- HOPWA formula and competitive providers in the area
- PLWH
- Housing service providers



Determining Resources

- Jurisdictions identify the financial and organizational resources available to address its priority needs.
- Level of anticipated resources available play a key role in determining strategies and goals.
- Grantees should consider all resources within the jurisdiction's control that can be reasonably expected to be available, including federal, state, and local resources.



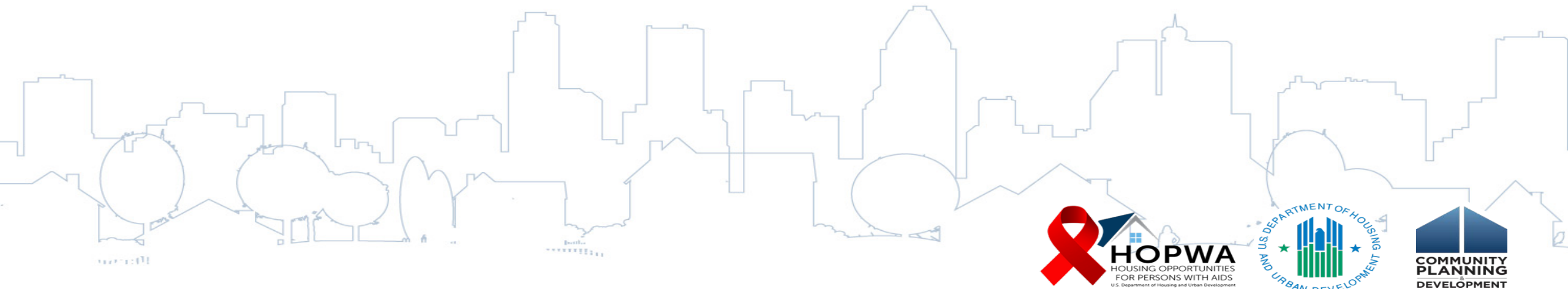
Setting Goals

- Once priorities have been established, grantees must develop a set of goals based on the availability of resources, and local organizational capacity.
- The goals should be:
 - Specific;
 - Measurable;
 - Action-Oriented;
 - Realistic; and
 - Time-Bound



Administering the Programs

- Program delivery encompasses all of the actions a grantee undertakes throughout a given program year.
- The grantee describes the work it plans to undertake with available grant funds each year in Annual Action Plans.



Evaluating Performance

- Within 90 days after the end of its program year, a grantee must submit a Consolidated Annual Performance and Evaluation Report (CAPER) to HUD.
- Purpose of the CAPER:
 - Report on accomplishments within the program year; and
 - Evaluate progress in meeting one-year Annual Action Plan goals and long-term Con Plan goals.
- CAPER provides grantees an opportunity to evaluate the effectiveness of their programs.
- Evaluation should identify programs and projects that performed well/experienced issues.



Effective Community Planning

- Allows grantees and partners to evaluate program activities and focus on the successes and challenges of those activities
- Builds support and trust among community members, including PLWHA and professionals serving this population
- Educates community members about existing challenges and successful programs
- Builds consensus on how to make the changes necessary to improve housing opportunities
- Helps HOPWA grantees administer their programs more effectively



Con Plan Resources

Con Plan Regulations:

https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title24/24cfr91_main_02.tpl

Grantee Consolidated Plans, Annual Action Plans, and CAPERS:

<https://www.hudexchange.info/programs/consolidated-plan/consolidated-plans-aaps-capers/>

Grantee Contact Information:

<https://www.hudexchange.info/grantees/>



Continuum of Care (CoC) Program Planning

- Responsible for developing a plan for a coordinated housing and service system that meets the needs of individuals, unaccompanied youth, and families experiencing homelessness.
- Includes annual point-in-time count of unsheltered and sheltered persons who are homeless and gaps analysis of the homeless needs and services available.
- CoC contact information:
<https://www.hudexchange.info/grantees/>



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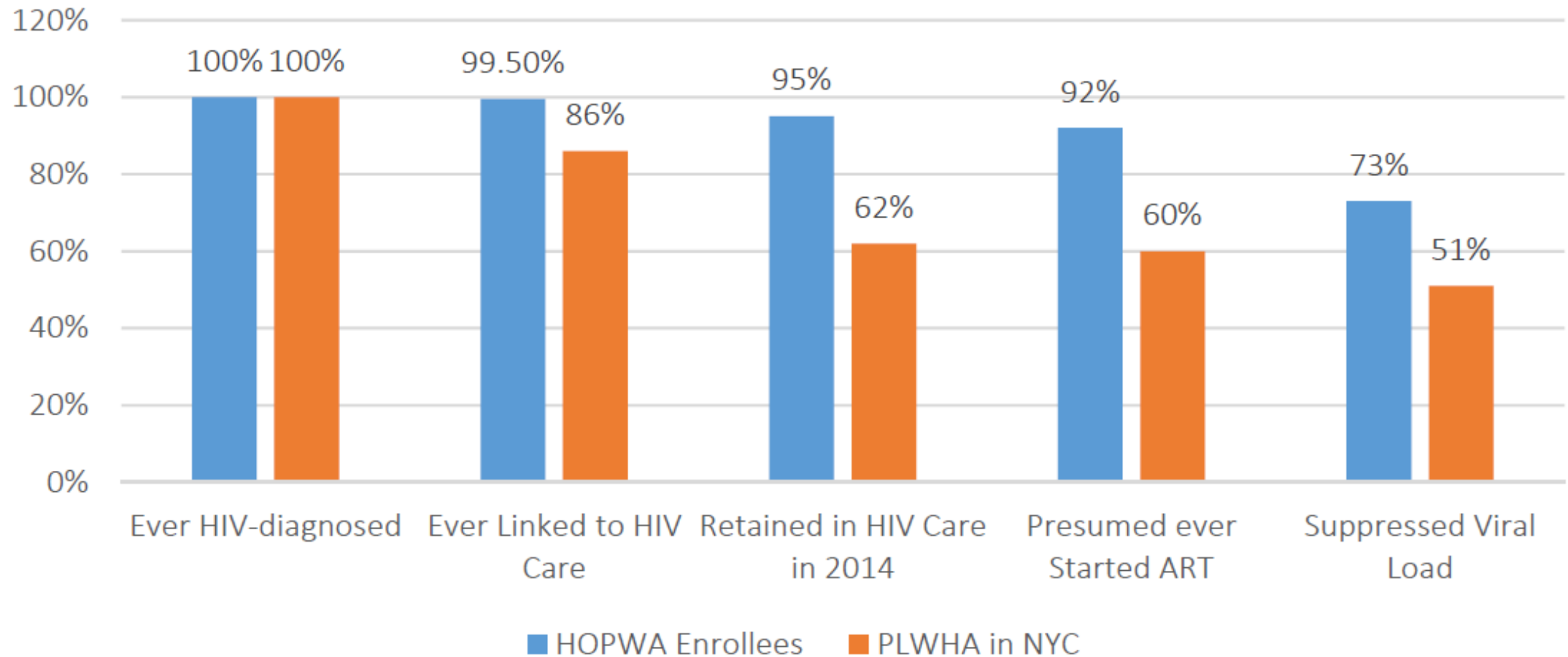
Strategies for Aligning HIV Care and Treatment and Housing Systems of Care

Further Considerations for Planning

Further considerations

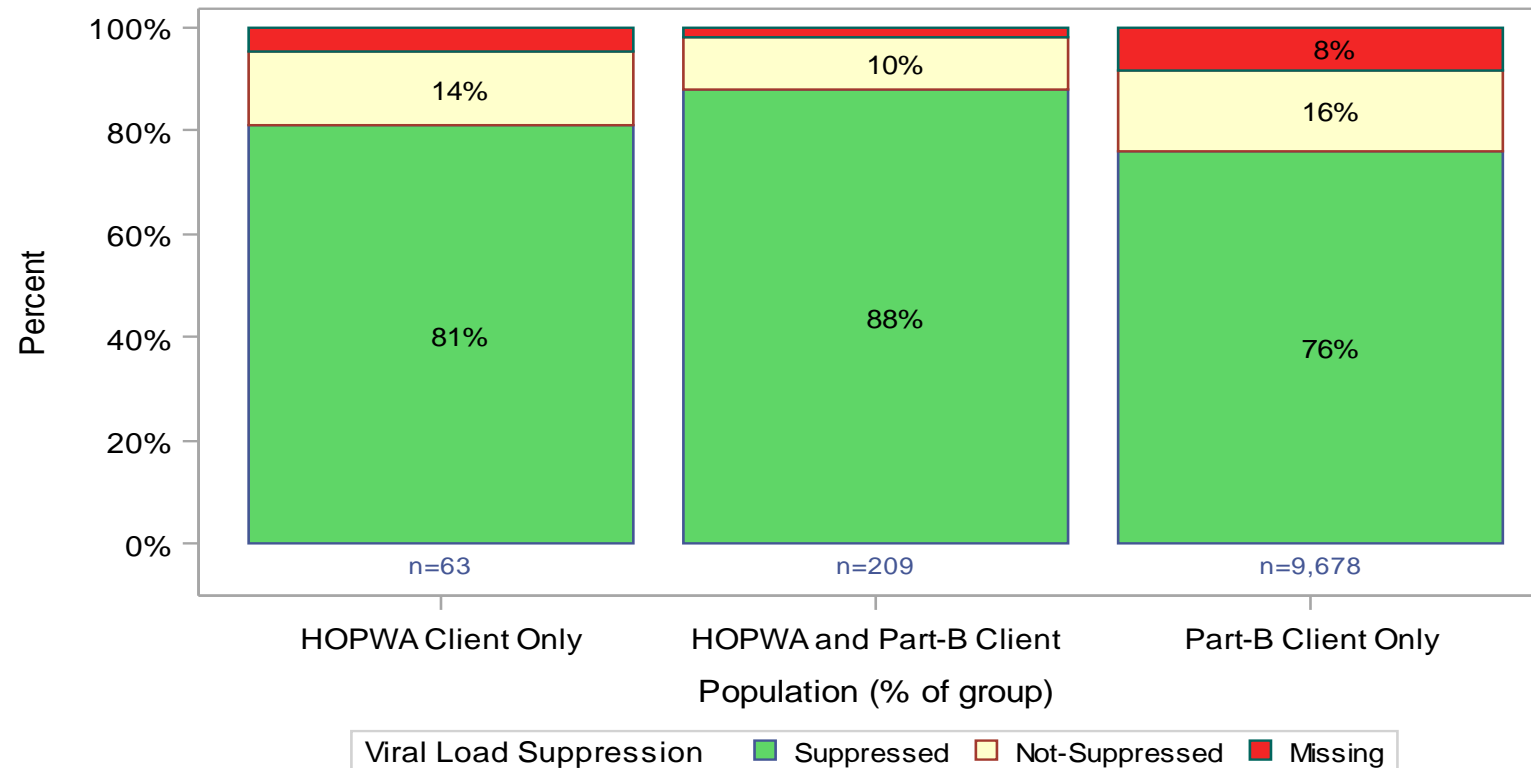
- Does your RWHAP Needs Assessment include housing measures?
- How can your client-level data help you to target interventions?
- Can you use your RWHAP data to better target gaps within the HIV housing service system?

NYC PLWHA & HOPWA Care Continuum, 2014



NC Care Continuum

HIV Viral Load Suppression: HOPWA and Part-B Clients



Clients Receiving HOPWA and/or Part-B Services during Calendar Year 2016

Clients Only Receiving Part-B Funded Bridge Counseling Services Excluded

HOPWA Funded Services include: TBRA, STRMU, PHP

Viral Load Outcomes Data from NC ECHO Combined Labs & Services

Viral Load Suppression Defined as ≤ 200 copies/mL from Last Viral Load in Calendar Year 2016

Housing Services Comparison

HOPWA

- Housing information services
- Transitional housing
- Resource identification
- Permanent Housing
- Permanent Housing Placement
- Short-term rent, mortgage, and utility payments
- Supportive services (including case management)
- Operating costs for facilities
- Acquisition, rehabilitation, conversion, lease, and repair of facilities
- New construction

RWHAP Parts A - D

- Housing referral services
- Transitional housing
- Short-term housing assistance
- Emergency housing assistance
- Emergency Financial Assistance
- One-time payment for rent or utility
- Non-Medical Case Management

HOPWA & Ryan White Parts A, B, C, and D

Integrated Housing Plan

An Example

HOPWA

- Resource identification
- Permanent Housing Placement
- Permanent Housing
- Short-term rent, mortgage, and utility payments

Ryan White

Non-Medical Case Management Housing

- Housing referral services
- Transitional housing
- Emergency housing assistance

Even Further Considerations

Outside of the formal processes required by statute and regulations, a best practice for communities is the development of a housing committee.

Coordinated planning helps communities reach the outcomes they seek.

Breaking Down the Silos

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Amanda Hurley, Manager of HIV Care Services

Multnomah County Health Department

Ryan White Part A Portland, OR TGA Grantee

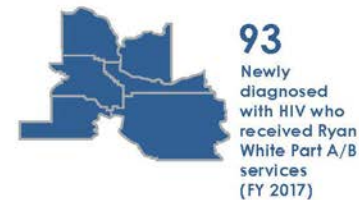
Ryan White Portland, OR TGA

HIV Profile: US to the Portland Metro Area

Prevalence



Incidence



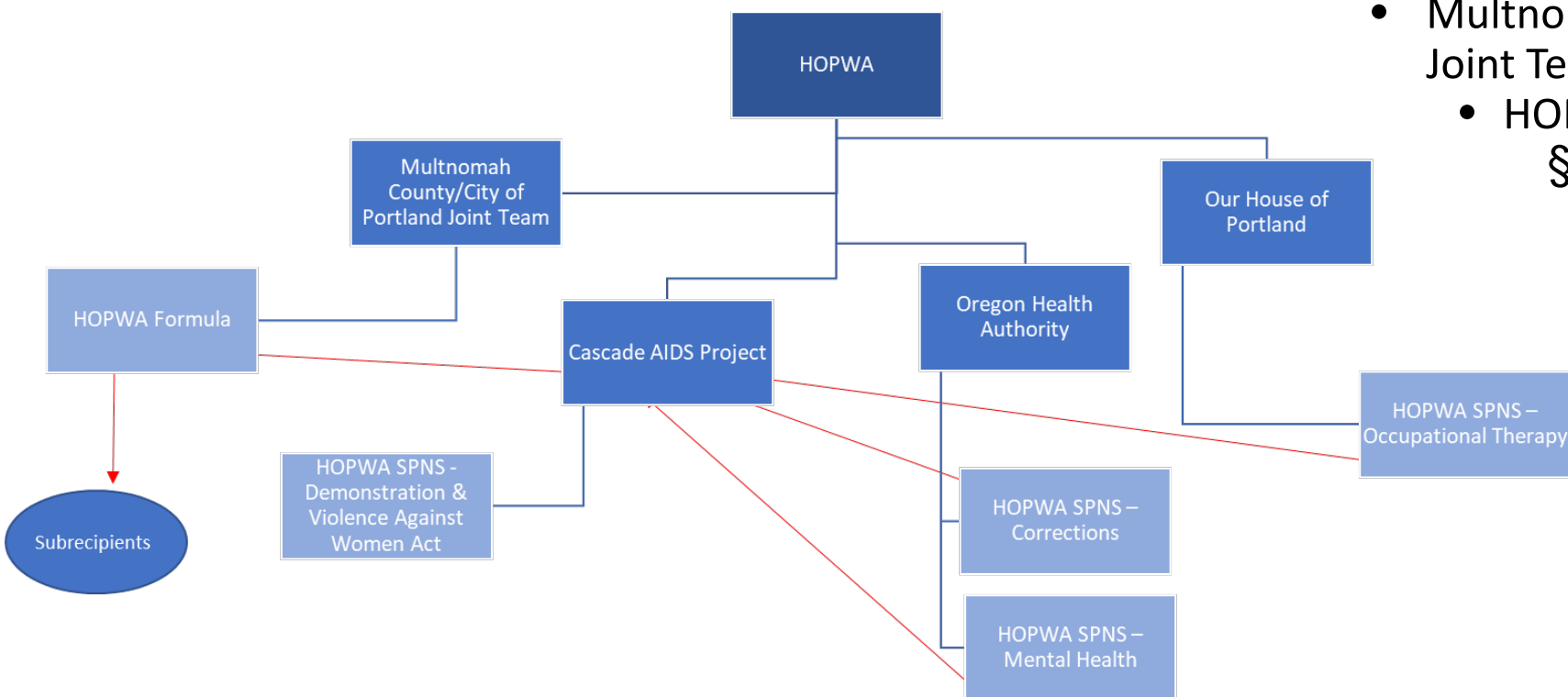
VL Suppression Rate



Produced by Multnomah County Health Department / HIV Care Services / June 2018

- Ryan White
 - Cascade AIDS Project
 - HRSA SPNS – Data Integration
 - Multnomah County Health Department
 - HIV/STD/Sexual Health Equity
 - (Public Health) - Subrecipients
 - Part A
 - Minority AIDS Initiative
 - Program Income from Part B
 - HIV Health Services Center (ICS)
 - Part C
 - Part D
 - Oregon Health Authority - Subrecipients
 - Part B
 - Program Income from Part B
 - Oregon Health Sciences University – Russell St. Dental
 - Part F

Ryan White Allocation of Funds



HOPWA Allocation of Funds

•HOPWA

- Multnomah County/City of Portland Joint Team
 - HOPWA Formula (Subrecipients)
 - § Cascade AIDS Project
 - HOPWA SPNS - Demonstration & Violence Against Women Act
 - HOPWA SPNS – Occupational Therapy
 - HOPWA SPNS – Corrections
 - HOPWA SPNS – Mental Health
- Our House of Portland
 - HOPWA SPNS – Occupational Therapy
- Oregon Health Authority
 - HOPWA SPNS – Corrections
 - HOPWA SPNS – Mental Health

HOPWA vs RW

HOPWA

- Rent Assistance – PBRA/TBRA/STRMU
- Housing Case Management
- Permanent Placement Assistance
- Mental Health Support
- Resource Identification

Ryan White Part A

- Medical
- Health Insurance
- Mental Health
- Oral Health
- Medical Case Management
- Early Intervention Services
- Housing
- Psychosocial
- Food/Home Delivered Meals
- Non-Medical Case Management
- Residential Substance Use Treatment

Other Leveraged Resources

- Shelter Plus Care vouchers
- HUD Care Continuum chronically homeless vouchers
- Veterans Administration Supportive Housing
- State mental health housing funds
- Local city/county short term rent assistance funds
- Shelter system
- Project based rent assistance units
- Other Ryan White Parts – B, C, D

Why Focus on Housing?

- Portland Housing Crisis - < 3% vacancy rate
- Rents increased by 20% in the last 5 years
- Patterns of gentrification push marginalized people further from services
- Significant difference of viral suppression rates of RW clients (FY2017)
 - unstably housed = 65% virally suppressed
 - stably housed = 91% virally suppressed
- Slightly lower rate of RW clients getting annual labs if unstably housed
- Housing is the 3rd highest service that people new to the RW system access

Opportunities for Coordination & Integration

Data Sharing

- Coalitions/Planning Bodies
- Allocation of Funds
- Program Design & Implementation
- Partnerships

Examples of Coalitions/Planning Bodies

- Ensure representation from RW and HOPWA providers or grantees
 - Integrated Planning Group (HIV Prevention/Care)
 - HOPWA Advisory Council (to be reconvened)
 - Ryan White Planning Council
 - A Home for Everyone – Continuum of Care to End Homelessness
 - End HIV Oregon
- Housing must be part of the discussion

Allocation of Funds

- Request for proposal process
 - Align language for service standards where applicable
 - Participate in each other's process when conflicts don't exist
 - Align reporting standards where applicable for providers that receive multiple funding
 - Add expectations for creating partnerships
- Regular formal and informal communication
 - Regular check-in meetings
 - Maintain positive relationships
 - Stay informed
- Leverage resources to avoid duplication and force integration
 - Case management (RW) vs rent assistance (HUD)
 - Security deposits (HOPWA) vs short term rent assistance (RW)

Examples of Program Design

- Housing navigators stationed at Medical Case Management sites
- Home Based Recovery model – beds purchased for outpatient treatment program
- Viral suppression support plan
- Trauma informed care learning collaborative
- Quality improvement projects
- Ad hoc work groups

Partnerships

- These have been a critical component to coordination within our TGA and have been woven into the way agencies work early on
- As an administrator/grantee, we bring people together regularly through:
 - Quarterly Contractors Meetings
 - Targeted interventions that impact all programs (currently, Trauma Informed Care, viral suppression support plan) need strong partnerships in order to be successful
 - Being responsive to requests for support by connecting agencies who are doing “best practices” with those seeking technical assistance
- Some RW contracts require formalized partnerships or referral systems
- Maintain mutual accountability

Housing Navigator at Medical Case Management Sites

Program Design: *“It has been invaluable to add a Housing Navigator to our primary care medical home and has greatly increased our ability to respond to and support our patients experiencing homelessness. Because the connection between housing and healthcare is undeniable, our clinic needed to increase our internal resources to connect clients to housing resources and services in our community. Our Housing Navigator has filled this gap and regularly ensures that our most medically fragile patients are connected to all the resources available to them, however limited those may be, and that the medical team is aware of what the client is dealing with so all of their needs can be addressed in a comprehensive and well-coordinated way.”*

Partnership: *“Having a Housing Navigator on site allows for easier and quicker communication between her, MCMs, RNCM, Intake and Assistor. It is easier for MCM to review cases and next steps when she is on site. She is meeting clients at Partnership which is helpful in creating deeper relationships with clients to her and other MCM staff. It then becomes more efficient for clients if she meets with them and a MCM or RNCM has a need to see the client as well. It has been a wonderful addition to our collaboration with Cascade AIDS Project.”*

Data Sharing

- Shared eligibility system across RW providers – can use some documentation for HOPWA recertifications
- Import state surveillance data into CAREWare for RW clients
- Import HMIS (HUD) data into CAREWare for RW clients
 - HOPWA agency has access to RW client data including medical engagement, viral load, housing status

Thank you.

Please contact us for any follow up questions.

Questions

Thank you for participating!!



Contact Information

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