Building a Medical Home for Multiply-Diagnosed HIV Homeless/Unstably Housed Populations

Medical Home Path to Health, Hope, Recovery

Homeless Initiative

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Disclaimer

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Presentation Outline

• Intervention Model
• Capacity
• Implementation
• Lessons Learned
• Sustaining the Program
• Recommendations
• Resources
Overview

PHNTX Health, Hope and Recovery: Intervention Model

Setting: AIDS Arms, Inc. dba Prism Health North Texas (PHNTX)

- A community based organization
- Provides HIV medical care and comprehensive psychosocial support services through two clinics, including:
  - care coordination,
  - behavioral health, and
  - other necessary care
PHNTX Health, Hope and Recovery: Intervention Model

● Population of focus
  o HIV positive individuals age 18 and older
  o Diagnosed with mental health and/or substance use disorders
  o Homeless, at risk for homelessness or fleeing from domestic violence

● Goals/Objectives
  o Increase engagement and retention in care and treatment
  o Improve housing stability
Health Hope and Recovery functions within the Agency’s integrated model of care for people living with HIV (PLWH) which includes:

- HIV primary medical care
- Integrated behavioral health care
- Case management/psychosocial support services
- Risk reduction counseling
- Co-located pharmacy services
- Empowerment for PLWH at the HIVE
PHNTX Health, Hope and Recovery: Implementation Process 1

- Intensive person-centered care coordination and behavioral interventions
- Provided by three full-time social workers:
  - Knowledgeable about treatment of HIV as well as mental health and/or substance use disorders
  - Knowledgeable about necessary community resources
  - Skilled in providing care to people with complex needs
  - Mobile – able to meet with clients at places and times convenient to them
  - Able to advocate effectively for clients with housing, behavioral health, medical and other providers
  - Able to build bridges to necessary care
Strategic focus on strengthening/sustaining partnerships with:

- Metro Dallas Homeless Alliance
- Individual permanent housing providers including City of Dallas and others
- Rental property managers/owners
- Shelters
- Motels
- Mental health/substance use disorder treatment providers
- Hospitals and medical providers
- Respite care providers
PHNTX Health, Hope and Recovery: Implementation Challenges

- Inadequate availability of affordable permanent housing
- Resistance to and inadequate adoption of Housing First model
- Changing rules and interpretation of program requirements related to eligibility for housing assistance and other services
- Increasing requirements related to documents needed to establish eligibility and frequency of updates
- Stigmatizing attitudes and behaviors from housing, psychosocial support and other providers
- Inadequate understanding of the needs of HIV positive individuals with mental health and/or substance use disorders, experiencing homelessness
Importance of ongoing and rigorous process evaluation

Ongoing attention to establishing, nurturing and sustaining relationships with community partners and stakeholders

Each component of the care process is critical but the care coordinators are the glue

Every step taken may not yield success – it takes many steps to get expected results

‘Failure’ presents opportunities

Paying attention to staff needs

Responding to requests for support of clients – food, emergency housing, clothing, etc.

Providing support related to self-care

Proactive and strength based supervision and guidance
Although PHNTX had served the population of focus for many years, the initiative provided substantive information about what is necessary to optimize health outcomes for HIV positive persons with mental health and/or substance use disorders who are homeless or unstably housed.
PHNTX Health, Hope and Recovery: Sustaining the Program

- Process must be intentional starting at program inception
- Key components:
  - Ongoing process evaluation to determine which components are essential for optimal outcomes
  - Rigorous documentation
  - Capacity building to enhance organizational ability to care for population of focus
  - Transition of services to a specialized case management team with the necessary skills to serve the population of focus
  - Active participation in Metro Dallas Homeless Alliance and other partnerships
  - Strategic fundraising
PHNTX Health, Hope and Recovery: Barriers

- Increased demand - more people experiencing homelessness.
- Inadequate supply of affordable housing.
- Increased requirements related to documentation to establish eligibility for services.
PHNTX Health, Hope and Recovery: Successes 1

- A total of 157 clients served
- 120 clients enrolled in multi-site study
  - Staff recorded 5761 encounters with clients during a 3 year period (Jan 1, 2013 - Feb 1, 2016)
  - 75% achieved stable housing
  - 85% achieved viral suppression (viral load <200) compared to 43% at baseline
PHNTX Health, Hope and Recovery: Successes 2

- Obtaining/utilizing the Housing Management Information System (HMIS) to help expedite client access to permanent housing
- Ongoing education and technical assistance for internal/external direct service and support staff on:
  - Needs and challenges of homeless clients
  - Housing First principles
  - Trauma informed care
  - Best practices for providing person-centered care for homeless individuals
  - Motivational interviewing, strength based and solution focused counseling techniques
  - Emerging trends related to regulations and requirements for documentation to establish eligibility for services
PHNTX Health, Hope and Recovery: Recommendations

- Maintain structure and organization while remaining flexible and nimble
- Keep key stakeholders informed on an ongoing basis
- Accept failures as opportunities for learning and improvement
- Learn from successes as well as challenges
- Build capacity as part of overall program implementation.
PHNTX Health, Hope and Recovery: Resources

- **Health, Hope and Recovery Manual**
- Prism Health North Texas website:
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