



National Health Care
for the Homeless

2017 CONFERENCE & POLICY SYMPOSIUM

June 21-24, 2017 | Washington, D.C.

Working Together For

- ✓ QUALITY
- 🔓 ACCESS**
- 🏛️ JUSTICE
- 👥 COMMUNITY

NATIONAL HEALTH CARE
for the HOMELESS
COUNCIL

Welcome

Hello,

Welcome to the 2017 National Health Care for the Homeless Conference!

For many of us, this Conference is the high point of the year for learning, recharging our batteries, meeting new friends in common work, and reconnecting with old friends. There's nowhere else we can be together with more than 1,000 people who truly get it – and understand how difficult, stressful, and challenging it is to have experienced homelessness, provide care to people without homes or to advocate for just social practices – sometimes in organizations or communities that don't hold our values of Quality, Access, Justice, and Community.

The theme for this year's Conference is Access. In a sense, Access is the essential beginning of everything we do. Although Ray Kinsella's states the belief in the movie Field of Dreams "if you build it, they will come," we realize this philosophy is not necessarily true. It is not enough to build health services – we must build health services that are accessible. The true measure of accessibility is whether needed services and treatment have been attained. If we believe our services and staff are culturally appropriate, environments are welcoming, hours are convenient, and services are relevant, but people experiencing homelessness don't know about them, agree with our assessment of our services, or use our services, then – plain and simple – they aren't.

Fortunately, the federal government has long been an ally in promoting greater access to health services for people experiencing homelessness (alternatively, "this special population"). To help make sure people experiencing homelessness know about Health Care for the Homeless services, outreach has long been a mandated part of every HCH program. As long as there are people without homes in our land, we want to make sure they access services that meet their needs – and we know that primary care, behavioral health care, and social services help people get into housing and remain there.

Welcome again to the National Health Care for the Homeless Conference. I hope you enjoy it, and make the most of your time here; simply put, there is nothing else like it.



In solidarity,

A handwritten signature in blue ink that reads "Bobby Watts". The signature is written in a cursive, flowing style.

Bobby Watts
Chief Executive Officer
National Health Care for the Homeless Council



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Let's Connect!

HCH
2017

Download the free HCH 2017 Conference mobile application on your Apple or Android device! Create your conference schedule, share notes and pictures, and network with other attendees in the app!

NHCHC Membership: Your Homeless Health Care Family

The National Health Care for the Homeless Council is the only national association specifically organized around the nexus of homelessness and health. Our membership body comprises the forerunners of the HCH program from the early 80s, representing a wealth of knowledge on the distinctiveness of homeless health care. When you join this community, you can **inform** our national priorities and practices, be **inspired** by the insights and achievements of your colleagues, and **influence** the Council's advocacy agenda.

Organizational Membership is **just \$500** for the first year and subsequently is negotiated according to your capacity on a sliding scale. Cost ought never be a barrier to Council membership.

[Learn more at nhchc.org/join](http://nhchc.org/join), or ask someone with a "Governing Member" ribbon!

Individual Membership is Free!

Individual Membership is your way to access any of the National HCH Council's communications, to get involved in our advocacy and research, and to contribute to setting the strategic direction of the Council. The only criterion is that you support our mission. Professional development opportunities abound through three Networks, each of which includes its own distinct benefits. When you apply as a member, you will be invited to join:



What Members Say

"The Council not only delivers state of the art technical assistance and training, it also provides a community of kindred spirits to nurture and sustain me in the struggle for basic human rights."

-Bill Friskics-Warren:

Neighborhood Health in Nashville

"The peer support through the National HCH Council is simply unparalleled anywhere else."

-Kevin Lindamood: Health Care for the Homeless, Inc. in Baltimore

inform
inspire
influence

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Conference Overview

Wednesday, June 21, 2017: Pre - Conference Day

7:00 a.m.	Registration and Check-In Open
7:00 - 8:30 a.m.	Breakfast
8:30 a.m. - 4:30 p.m.	Pre - Conference Institutes
8:30 a.m. - 4:30 p.m.	NCAB Steering Committee Meeting (Closed Meeting)
11:30 a.m. - 1:00 p.m.	Lunch (Off - site, on your own)
4:00 p.m.	Registration and Check-In Close
5:30 - 7:00 p.m.	Governing Membership Meeting (Closed Meeting)
6:30 - 8:00 p.m.	Clinicians' Network Reception
7:00 - 9:00 p.m.	NCAB Orientation Meeting (Closed Meeting)

Thursday, June 22, 2017: Main Conference Day 1

7:00 a.m.	Registration, Check-In, and Exhibitor Hall Open
7:00 - 8:30 a.m.	Breakfast
7:00 - 8:00 a.m.	Clinicians' Network and RCPN Committee Meetings (Closed Meetings)
9:00 - 10:00 a.m.	Opening Plenary and Keynote Presentation
10:00 - 10:30 a.m.	Break
10:30 - 11:30 a.m.	Session I: Think Tanks
11:30 a.m. - 1:00 p.m.	Lunch
1:00 - 2:30 p.m.	Session II: Workshops
2:30 - 3:00 p.m.	Break
3:00 - 4:30 p.m.	Session III: Workshops
4:00 p.m.	Registration and Check-In Close
4:30 - 6:00 p.m.	Welcome Reception
5:30 - 7:30 p.m.	NCAB Business Meeting (Closed Meeting)
6:00 p.m.	Exhibitor Hall Close

Friday, June 23, 2017: Main Conference Day 2

7:00 a.m.	Registration, Check-In, and Exhibitor Hall Open
7:00 - 8:30 a.m.	Breakfast
8:30 - 10:00 a.m.	Session IV: Workshops
10:00 - 10:30 a.m.	Break
10:30 - 11:30 a.m.	Session V: Think Tanks
11:30 a.m. - 1:00 p.m.	Awards Lunch
1:00 - 2:30 p.m.	Session VI: Workshops
2:30 - 3:00 p.m.	Break
3:00 - 4:30 p.m.	Session VII: Workshops
4:00 p.m.	Registration and Check-In Close
4:40 - 5:15 p.m.	Closing Plenary and Idea Exchange
5:30 - 7:00 p.m.	Social Justice Rally: Shining a Light on Health Care and Housing For All
6:00 p.m.	Exhibitor Hall Close

Saturday, June 24, 2017: Learning Labs

7:00 - 8:30 a.m.	Breakfast
8:30 a.m. - 12:30 p.m.	Learning Labs
10:30 - 11:00 a.m.	Break

Pre-Conference Institutes | Wednesday - June 21, 2017

- 7:00 a.m. - 4:00 p.m. **Registration** – 5B Registration Desk
- 7:00 - 8:30 a.m. **Breakfast** – Independence Ballroom
- 8:30 - 4:30 a.m. **NCAB Steering Committee Meeting** – Bulfinch/Renwick
- 8:30 a.m. - 4:30 pm. **Pre-Conference Institutes (lunch not included)**
- ▲ Increasing Access through Motivational Conversation – Franklin/McPherson
 - ▲ Basic Wound Care for your HCH Clinic – Lafayette Park
 - Pressing on with Health Reform in Turbulent Times: Medicaid, Homelessness, and Charting a Path Forward – Independence DE
 - Health IT Enabled Quality Improvement: Using the Guide to Improving Care Processes and Outcomes in Health Centers – Wilson/Roosevelt
 - ▲ Medical Respite Care: Accessing Health and a Pathway Home – Independence BC
 - Building Interprofessional Teams – Cabin John/Arlington
- 11:30 a.m. - 1:00 p.m. **Lunch** (off-site, on your own)
- 5:30 - 7:00 p.m. **Governing Membership Meeting (Closed Meeting)** – Independence BCDE
- 6:30 - 8:00 p.m. **Clinicians' Network Reception** – Independence FGHI
- 7:00 - 8:30 p.m. **NCAB Orientation Meeting (Closed Meeting)** – Declaration AB

Main Conference Day 1 | Thursday - June 22, 2017

- 7:00 a.m. - 4:00 p.m. **Registration and Check-In** – 5B Registration Desk
- 7:00 a.m. - 6:00 p.m. **Exhibitor Hall and Posters** – Constitution Ballroom
- 7:00 - 8:30 a.m. **Breakfast** – Independence Ballroom
- 7:30 - 8:30 a.m. **Clinicians' Network Meeting (Closed Meeting)** – Lafayette Park
RCPN Committee Meetings (Closed Meeting) – Farragut Square
- 9:00 - 10:00 a.m. **Opening Plenary and Keynote Presentation** – Independence Ballroom
- 10:00 - 10:30 a.m. **Morning Break**
- 10:30 - 11:30 a.m. **Session I: Think Tanks**
- ▲ Best Practices for Community Collaboration in Metropolitan Areas – Franklin Square
 - Common Good Action Project: Building Capacity for Social Justice Action in Nonprofit Service Organizations – Tiber Creek AB
 - Engaging Local Emergency Departments in Coordinated Entry – Cabin John/Arlington

Conference Schedule

- ▲ Health into Housing: Developing Models of Nurse-Directed, Housing-Based Primary Health Care – Farragut Square
- ▲ Implementing Buprenorphine Treatment at a Clinic without a Dedicated Onsite Addictions Team – Constitution CDE
- Lessons from Consumer Advisory Boards – Bulfinch/Renwick
- ◆ Migration in Homeless Populations - Roosevelt
- New Access Points: How to Navigate being a New HCH - Latrobe
- ▲ The Sober Circle: A Community Outreach Program to Engage Alcohol Abusers in Treatment – Lafayette Park
- When Medicaid and Housing Data Meet: Some Things are just Better Together – McPherson Square
- Who's Hungry? A Discussion on Improving Food Access through Programs and Partnerships - Burnham

11:30 a.m. - 1:00 p.m. **Lunch** – Independence Ballroom

1:00 - 2:30 p.m. **Session II: Workshops**

- Constructing Powerful Stories: Tips from the National Consumer Advisory Board's Storytelling Manual – Cabin John/Arlington
- Crisis Response: Federal, State, and Programmatic Policy Changes Addressing the Opioid Epidemic – Bulfinch/Renwick
- ▲ Dead People Don't Recover – McPherson Square
- ED Care Coordination Strategies: Collaborating with Local Hospitals to Reduce Inappropriate ED Utilization – Farragut Square
- ▲ Greater Norwalk Community Care Team: A Cost-Effective Model of Collaboration, Health Care Quality, and Housing Stability - Burnham
- Medical Respite: From Conceptualization to Realization – Constitution CDE
- ▲ New Recommendations for Treating Asthma - Roosevelt
- ◆ Patient Navigators in the Care Team: Bringing Innovation Tasks to Improve Health and Housing Outcomes - Latrobe
- ▲ Updates in Addiction Medicine 2016 – Lafayette Park
- ▲ Who's on First: Using Acuity and Chronicity Scales to Coordinate Care – Franklin Square
- Oral Presentations – Tiber Creek AB
 - ▲ Web-based MAT Treatment Support: An Innovative Tool for HCH Providers
 - ▲ SBOT: A Family Shelter-Based Buprenorphine Program in Massachusetts
 - ▲ Medical Respite for Homeless and Unstably-Housed Injection Drug Users Requiring Prolonged IV Antibiotic Therapy

2:30 - 3:00 p.m. **Afternoon Break**

3:00 - 4:30 p.m. **Session III: Workshops**

- Are We Doing Enough to End Homelessness? Part III – Constitution CDE
- Building a Culture of Philanthropy via Collaboration, Community and Innovative Consumer Engagement – Bulfinch/Renwick
- ▲ Caring for the Homeless Patient with Mental Illness: General Treatment and the Use of Integrated Team Approaches to Client-Centered Care - Burnham
- Healthy Release: Health Center Working to Improve Health and Housing Outcomes for Justice-Involved Populations - Roosevelt
- ▲ House Warming: A Consumer Developed and Driven Transitions Program for Getting into and Staying in Housing – Farragut Square

- ▲ Improving Culturally Competent, Trauma-Informed Care for Homeless LGBT Youth – Cabin John/Arlington
- Amplify Your Voice in an Accessible Medium: Social Media 101 for Health Centers - Latrobe
- The Activist Consumer Advisory Board: Empowering Consumers to Advocate and Catalyze Social Change – McPherson Square
- ▲ When Access Isn't Enough: Building an Ambulatory ICU in a HCH Setting – Franklin Square
- Oral Presentations – Tiber Creek AB
 - ▲ Evidence Based Community Collaboration to Address Chronic Disease in Homeless Adults
 - ▲ Working Together to Provide Access to Hepatitis C Treatment: A Multidisciplinary Team Approach
 - Track to Stay on Track: Effective Tracking Methods to Improve Program Management

4:30 - 6:00 p.m. **Welcome Reception** – Constitution AB

5:00 - 10:00 p.m. **Twelve Step Meeting** – Roosevelt

5:30 - 7:30 p.m. **NCAB Business Meeting (Closed Meeting)** – Farragut Square

Main Conference Day 2 | Friday – June 23, 2017

7:00 a.m. - 4:00 p.m. **Registration and Check-In** – 5B Registration Desk

7:00 a.m. - 6:00 p.m. **Exhibitor Hall and Posters** – Constitution Ballroom

7:00 - 8:30 a.m. **Breakfast** – Independence Ballroom

8:30 - 10:00 a.m. **Federal Panel Update** – Independence Ballroom

8:30 - 10:00 a.m. **Session IV: Workshops**

- ▲ Adapting Together: Efficacy of Interventions to Address the Needs of Individuals with Brain Injury within HCH Sites – Lafayette Park
- ▲ Assigned but Unengaged: Health New Patients Access Primary Care – Franklin Square
- ▲ Connecting Paradigms: A Systematic Strategy for the Implementation of a Trauma-Informed and Neurobiological Framework for Motivational Interviewing – Cabin John/Arlington
- Expanding Housing through Health Care Investment: Five Community Study - Burnham
- ▲ Health Literacy and FQHCs: Enhancing Clinic Access by Reducing Barriers to Low Health Literacy Patients - Latrobe
- Health and Supportive Housing Capital Expansion: Building Access, Impact and Equity for Vulnerable Populations in our Communities – McPherson Square
- Safety = Access: Lessons and Questions about Establishing Safety in HCH Projects – Bulfinch/Renwick
- ▲ San Mateo County Street and Field Medicine: A Private/Public Partnership Reaching Vulnerable Populations – Tiber Creek AB
- The Health Neighborhood: An Innovative, Collaborative Care Model – Farragut Square
- ◆ What's New in Homeless Health Care: A No-Jargon Summary of the Latest Research – Constitution CDE
- Oral Presentations - Roosevelt
 - ▲ Increasing Access to Gender-Affirming Health Care for Homeless/Marginally Housed Individuals within the Context of Insurance Reform
 - ▲ Baby Steps: A Nurse's Perspective on Building a Prenatal Care Program at a Family Practice FQHC
 - ▲ Outreach-Based Pregnancy Intention Screening and Prevention

Conference Schedule

10:00 - 10:30 a.m. **Morning Break**

10:30 - 11:30 a.m. **Session V: Think Tanks**

- Chronic Disease Management: Undocumented and Homeless – How to Make it Work – Tiber Creek AB
- Creating Sanctuary for Female Consumers – Lafayette Park
- From Hospital to Home: Effective Collaboration in Support of Individuals Experiencing Homelessness – Cabin John/Arlington
- ◆ How Data Systems can Impact your Health Center - Burnham
- ▲ Interdisciplinary and Experiential Learning within the Homeless Community: Connecting Community Work to Students and Schools - Latrobe
- ▲ Leap of Faith: How Spiritual Health and Wellness Impacts Recovery from Trauma and Health Outcomes – Franklin Square
- ▲ Move Toward Wellness: Integrating Access to Exercise in Programs Serving Individuals impacted by Homelessness - Roosevelt
- Paternalistic or Participatory: Where do your Services Align? – Bulfinch/Renwick
- Patient Centered Medical Homes in HCH: A Case Study Discussion – McPherson Square
- Self-Care: Taking Care of Ourselves to Sustain the Health of our Communities – Constitution CDE
- ▲ You Too Can Treat Patients with Hepatitis C – Farragut Square

11:30 a.m. - 1:00 p.m. **Awards Lunch** – Independence Ballroom

1:00 - 2:30 p.m. **Session VI: Workshops**

- Consumer Advisory Boards: Creating Effective Internal and Organizational Structures – Farragut Square
- Denver Collaborates to reach “High Utilizers” through Social Impact Bond Initiative – Bulfinch/Renwick
- ▲ Engaging Homeless, Multiply Diagnosed, HIV Positive Persons into Medical, Psychiatric, and Supportive Services – Franklin Square
- Health Care for the Homeless Outreach: A Strategic Approach – Constitution CDE
- ▲ The Integrative Pain Management Program: Results From a Pilot Expanding Options for Chronic Pain Treatment – Cabin John/Arlington
- Medicaid and Managed Care: A Discussion of Current Events and Likely Changes Impacting HCH Providers and Consumers – McPherson Square
- ▲ Shelter-based Meningitis Outbreak: Working Together to Vaccinate, Treat and Investigate - Latrobe
- Utilizing Medicaid and Health Resources for Housing Subsidies and Development – Lafayette Park
- ▲ Yes, We Can! Build Bridges Back to the HCH Medical Home after Mental Health Hospitalization - Burnham
- Film Screening: Rx, The Quiet Revolution - Tiber Creek AB
- Oral Presentations - Roosevelt
 - ▲ Why a Hospital would pay for Permanent Supportive Housing: An Innovative Partnership for Frequent ER Visitors between the Presenting Organization and Center of Housing for Health
 - ◆ Health Care and Housing Access in Older Homeless Adults: Results from the HOPE HOME Study
 - Serving up Dignity with Showers for the Homeless

2:30 - 3:00 p.m. **Afternoon Break**

3:00 - 4:30 p.m. **Session VII: Workshops**

- Building and Maintaining a Financially Stable Oral Health Program – Tiber Creek AB
- ▲ Collaborative Care: A Model for Improving the Health Outcomes of Homeless Formerly Incarcerated Women - Latrobe

- ▲ Community Health Workers and Peer Support Workers in Homelessness and Health Services - Burnham
- ▲ Joining Strengths: Collaboration between SFFD, SFHOT, and Sobering – Franklin Square
- The 5Ps to Building Accountable Collaborations to Improve Health Care Delivery: Partnerships, Person-centeredness, Pitch, Payment, and Performance – Farragut Square
- The Consumer Engagement Trifecta: Recruitment, Engagement, and Leadership – Bulfinch/Renwick
- The HRSA Operational Site Visit: Recent Updates and “Hot” Issues – Lafayette Park
- ▲ The Role of Health Plans in the Continuum of Housing & Health Care – Cabin John/Arlington
- ▲ Implementing Social Determinants of Health Screening into Practice and the Role of Quality Improvement – Constitution CDE
- Oral Presentations – McPherson Square
 - ◆ Financial Incentives for Smoking Abstinence in Homeless Smokers: A Pilot Randomized Controlled Trial
 - ◆ Are We Losing Consumer Voice in Data Sharing and Integration Efforts? Case Study: A Health Care for the Homeless Program
 - ▲ Access Street Feet

4:40 - 5:15 p.m. **Closing Plenary and Idea Exchange** – Independence Ballroom

5:00 - 10:00 p.m. **Twelve Step Meeting** – Roosevelt

5:30 - 7:00 p.m. **Social Justice Rally: Shining a Light on Health Care and Housing for All**
– Lafayette Square (off site)

Learning Labs | Saturday – June 24, 2017

7:00 - 8:30 a.m. **Breakfast** – Independence Ballroom

8:30 a.m. - 12:30 p.m. **Learning Labs**

- ▲ Equity in Substance Use Disorder Treatment – Independence BC
- Mobilizing Communities and Health Leaders to Prevent and Reduce Violence – Latrobe/Bulfinch
- Board Requirement and Beyond: How to Build an HCH Board that Meets Requirements and Exceeds Expectations – Farragut/Lafayette
- ▲ Traumatic Brain Injury Learning Lab – Independence DE
- Fostering Trauma-Informed Leadership Skills for Consumers – Independence HI
- ▲ Caring for People Experiencing Homelessness Facing End of Life – Franklin/McPherson
- Implicit Bias as a Barrier to Health Care and Health Equity – Independence FG

10:30 - 11:00 a.m. **Morning Break**

Workshops: A 90-minute workshop is an oral presentation which provides an in-depth exploration of a program innovation, emerging issue, clinical challenge, or findings from a research project or quality improvement initiative.

Think Tanks: A Think Tank is a 60-minute oral session featuring presenters who are interested in leading a discussion around an emerging issue or a key question for the HCH community

Oral Presentations: These sessions will combine three oral presentations of 30 minutes each (inclusive of questions and answers) in one 90-minute time block.

Thursday, June 22 | 9:00 a.m. | Independence Ballroom

Dr. Jeffrey Brenner



Honored in 2013 with the MacArthur “Genius” Fellowship for his groundbreaking work in identifying high-need, high cost patients in fragmented systems and improving their care, Brenner is a Camden, NJ-area family physician and Senior Vice President of Integrated Health and Human Services at UnitedHealthcare, heading the myConnections business unit. He rose to national prominence as the founding Executive Director of the Camden Coalition of Healthcare Providers, which he continues to serve as the organization searches for a new leader. In 2014, he was elected to the National Academy of Medicine (formerly the Institute of Medicine).

Friday, June 23 | 5:00 p.m. | Independence Ballroom

Susan L. Neibacher Address

Bobby Watts, MPH, MS, CPH CEO, National Health Care for the Homeless Council



A nationally recognized advocate and leader in meeting the health needs of people without homes, Watts has more than 25 years of experience in administration, direct service, and implementation of homeless health services. He began his work with people experiencing homelessness as a live-in staff member of the New York City Rescue Mission in Manhattan. He now serves as the chief executive officer for the National Health Care for the Homeless Council.

Idea Exchange

Kevin Lindamood, MSW President and CEO, Health Care for the Homeless, Baltimore



Join Council Board President, Kevin Lindamood, for our closing Idea Exchange. This highly interactive and participatory session is a chance for conference attendees to share one big idea or takeaway from the conference that they cannot wait to implement!

Phillip W. Brickner National Leadership Award

Philip W. Brickner, MD, (1928-2014) established Health Care for the Homeless as a national model of care for severely disadvantaged persons. In 1983, Dr. Brickner was chosen to direct the HCH Demonstration Program of the Robert Wood Johnson Foundation, the Pew Charitable Trust and the US Conference of Mayors. With his team from St. Vincent's Hospital, he selected projects in 19 cities and oversaw their implementation of multi-disciplinary primary care efforts that were based upon his own work in New York City. The program was replicated by the 1987 Stewart B. McKinney Homeless Assistance Act and now includes 273 federally funded HCH projects nationally.

In 2015, the Board of Directors of the National HCH Council established the Philip W. Brickner National Leadership Award to honor annually an individual from our field who exemplifies Dr. Brickner's characteristics of commitment to social justice, compassion, humility, inclusiveness, innovation, intellect and persistence.



Dr. A. Janelle Goetcheus, MD, works on behalf of underserved individuals in Washington, DC. In 1979 she founded Columbia Road Health Services, a community health center that serves the poor and uninsured of DC. In 1985, she founded Christ House as a live-in respite care facility for up to 34 sick homeless patients. Dr. Goetcheus is also Chief Medical Officer and Executive Vice President for Medical Affairs at Unity Health Care, Inc. in Washington, DC. Unity is currently the largest primary health care agency in the area and sees over 100,000 patients per year. Unity has a network of 29 health centers and a mobile medical outreach vehicle, which are strategically located within all eight wards of Washington, DC.

Ellen Daily Consumer Advocate Award

NCAB's annual Ellen Dailey Consumer Advocate Award honors the spirit and strength of founding member Ellen Dailey, a passionate champion of consumer voices in the provision of homeless services who was instrumental in starting the Consumer Advisory Board in Boston and NCAB.



Amber Gray has spent the past 16 years working as a counselor with homeless LGBTQ high-risk youth, a health educator with a mentoring program, a prevention case management in a residential housing program, and now works in a senior program management position with HIV Education and Prevention services for transgender women of color and their partners. Amber has acted as a mentor and mother to a number of LGBT youth - showing them compassion, promoting self-advocacy, and living as an example. She believes in restoring hope in broken individuals and hopes no one ever has to go through what she did for the 10 years in a transit lifestyle. Amber's dream is to reduce the stigma that continually plagues her community. She is committed to encouraging, motivating, and empowering transgender women of color. She feels healthcare is a necessity and housing should never be unattainable.

Award Presentations

Karen Rotondo Award for Outstanding Service

The Health Care for the Homeless Clinicians' Network's annual Award for Outstanding Service celebrates the memory of the Network's "Founding Mother", Karen Rotondo. This award recognizes hands-on caregivers who demonstrate vision and creativity in advancing the goals of ending and preventing homelessness, and who have made a significant contribution to improving the health and quality of life of people experiencing homelessness.



The 2017 winner of the Karen Rotondo Award for Outstanding Service is **Charita McCollers, MSW**, a Clinical Social Worker at Lincoln Community Health Center- Health Care for the Homeless Clinic in Durham, NC. Ms. McCollers meets individuals where they are and continuously goes above and beyond her job description in unwavering and constant service to her clients. She demonstrates creativity and vision, and collaborates with partners to create change in her community. Clients and colleagues laud Ms. McCollers' tireless service and her advocacy for equal rights for all people.

Willie J. Mackey National Medical Respite Award

In tribute of the service and dedication of Council advocate and Respite Care Providers' Network member Willie J. Mackey, this award honors outstanding contribution to the field of medical respite care by a person, team, or agency as determined by their efforts to improve the health and lives of people without homes.



Sarah Ciambrone, the Director of Clinical Innovations at Boston Health Care for the Homeless Program, is this year's winner of the Willie J. Mackey National Medical Respite Award. Sarah began working at Boston Health Care for the Homeless Program (BHCHP) in 1998 as the Director of the Barbara McInnis House. She considers herself lucky to have worked with such amazing colleagues and patients, both at BHCHP and other Health Care for the Homeless programs throughout the country and is proud to be a founding member of the Respite Care Provider Network.

John N. Lozier Scholarship

New this year, the John N. Lozier Scholarship for New Members supports one individual who belongs to an organizational member to attend the National HCH Conference for the first time. The scholarship is meant to inspire new leaders in the HCH movement, a sentiment dear to the heart of the award's namesake. Recently retired, John Lozier was the Council's founding executive director who shepherded the Council from a single staffer and a handful of members when he started to more than 20 staff and 220 members by his retirement. We are grateful that this scholarship furthers John's mission of broadening the HCH family.



Dr. Jennifer Bradford completed her medical training at UMass Worcester Family Medicine program in 2013 and went on to earn her Masters of Public Health while completing a Preventive Medicine Residency in 2015. Dr. Bradford has a multifaceted and dynamic medical career. She provides primary care at the Homeless Outreach and Advocacy Program (H.O.A.P) in Worcester, delivers medication assisted treatment through Spectrum Health Systems, and serves as faculty in the UMass Preventive Medicine Residency.

National Consumer Advisory Board Orientation **Wednesday, June 21 | 7:00 – 9:00 p.m. | Declaration AB**

The National Consumer Advisory Board invites all HCH consumers to find out more about conference logistics and each other. Attendees will discuss the various opportunities for learning and engagement, as well as options for support at the conference. Consumers will also discuss how to build relationships at the conference and continue engagement with NCAB and the National HCH Council after the conference.

Clinicians' Network Reception **Wednesday, June 21 | 6:30 – 8:00 p.m. | Independence Ballroom**

All conference attendees are invited to kick off HCH2017 with a networking reception hosted by the Health Care for the Homeless Clinicians' Network from 6:30-8 p.m. on Wednesday, June 21, in the Independence Ballroom. Join us to connect with others involved in homeless health care across the country, and find out ways you can engage in the Clinicians' Network and its work to improve the health and quality of life of people experiencing homelessness.

Special guest speaker **Dr. Susan Partovi**, Medical Director of Homeless Health Care Los Angeles, will describe advocacy efforts providers in L.A. have undertaken to ensure better care for chronically gravely disabled individuals experiencing homelessness.

Hill Visits **All Week | Capitol Hill**

While you are in the DC area, the National HCH Council urges you to meet with congressional offices on Capitol Hill. These meetings are important parts of our advocacy work as well as opportunities to teach our lawmakers about the work we do and how policies help or hurt our efforts to end homelessness. Meetings are scheduled prior to the conference; however, there may be opportunities to join a meeting if time and space allow. To see if you can join a meeting and learn how to get involved in our year-round advocacy work, visit the **ADVOCACY** table in the Exhibitor Hall or contact Regina Reed at rreed@nhchc.org or 443-286-5537.

Welcome Reception **Thursday, June 22 | 4:30 – 6:00 p.m. | Constitution AB**

Join your colleagues for a time of relaxing and networking at the conference reception! The event will feature light appetizers, a cash bar, and an opportunity to view and discuss poster presentations.

Twelve Step Meetings **Thursday, June 22 and Friday, June 23 | 5:00 – 10:00 p.m. | Roosevelt**

Self-directed twelve step meetings will occur in Roosevelt at 5 p.m. each day.

National Consumer Advisory Board Business Meeting **Thursday, June 22 | 5:30 – 7:30 p.m. | Farragut Square**

All NCAB members attending the conference are expected to attend. During this meeting, one NCAB consumer from each HCH project will vote for the new NCAB Steering Committee Members and changes to NCAB's Operating Procedures. This is a closed meeting.

Federal Panel Update

Friday, June 23 | 8:30 – 10:00 a.m. | Independence Ballroom

In this session, administrators from key federal agencies will discuss their priority areas, any upcoming funding or policy changes, and other issues that would affect the HCH community. Moderated by the U.S. Interagency Council on Homelessness, this session is a great opportunity to hear directly from federal officials about the programs vital to preventing and ending homelessness. Invited guests include the Health Resources and Services Administration (HRSA), the Substance Abuse and Mental Health Administration (SAMHSA), the Centers on Medicare and Medicaid Services (CMS), and the U.S. Department of Housing and Urban Development (HUD). Time will be reserved for Q&A.

Moderator: **Matthew Doherty**, Executive Director, USICH

Film Screening: Rx: The Quiet Revolution

Friday, June 23 | 1:00 – 2:30 p.m. | Tiber Creek AB

Join us for the screening of *Rx: The Quiet Revolution* to travel across America with filmmaker David Grubin as he focuses on the challenges and triumphs in our country's health care delivery system. The four segments that comprise the film introduce us to a diverse group of doctors, nurses, and health care professionals who are transforming the way we receive our medical care: lowering costs by placing the patient at the center of their practice. From Maine to Mississippi, Alaska to California, see health care professionals placing the patient at the center of their practice — transforming the way medical care is delivered while lowering costs and improving outcomes.

Join us as we tour a number of Health Care for the Homeless sites and homeless resource centers, each dedicated to providing care, respite, and assistance to people experiencing homelessness. The site visits do have limited space, so please sign up at the designated table near registration on the 5B level from 7:00 – 8:30 a.m. on Thursday, June 22. Transportation will be provided; we will depart promptly at the start of the times listed below.

So Others Might Eat

Thursday, June 22 and Friday, June 23 | 1:00 – 2:30 p.m.

SOME (So Others Might Eat) is an interfaith, community-based organization that exists to help the poor and homeless of our nation's capital. They meet the immediate daily needs of the people they serve with food, clothing, and health care. They help break the cycle of homelessness by offering services, such as affordable housing, job training, addiction treatment, and counseling, to the poor, the elderly and individuals with mental illness. Each day, SOME is restoring hope and dignity one person at a time. Join us on this site visit to see how SOME helps meet the needs of people they serve at each point on their journey from homelessness to independence.

Covenant House

Thursday, June 22 | 3:00 – 4:30 p.m.

Since 1995, Covenant House Washington has been a lifeline to over 40,000 homeless and disconnected young people in Greater Washington. As the Washington subsidiary of Covenant House International, the nation's largest nonprofit organization responding to the needs of homeless and disconnected youth, Covenant House Washington's mission is to serve these young people with absolute respect and unconditional love. Covenant House DC provides emergency, transitional, and supportive housing, workforce development training, GED and Adult Basic Education classes, and much more. Visit them to learn more and see some programs in action.

Christ House Medical Respite

Friday, June 23 | 8:30 – 10:00 a.m.

Christ House opened in December 1985 as the first 24-hour residential medical facility for homeless persons in the United States. Patients are admitted to Christ House from area hospitals, shelters, clinics, and medical outreach projects. Current programming at Christ House encompasses a broad array of services and activities to provide patients with a complete recovery. Each patient is addressed in a comprehensive, holistic manner, addressing not only the physical problems that bring them to Christ House, but also the underlying issues that may have led to their homelessness.

Unity Health Care Clinic at CCNV Federal City Shelter

Friday, June 23 | 3:00 – 4:30 p.m.

Unity Health Care, founded in 1984, is the largest private organization providing primary medical care to homeless, low-income, and uninsured District residents. Unity operates over 25 health care centers and one mobile outreach program. These sites and services are located throughout the city in areas with large numbers of people living in poverty to ensure maximum accessibility, including CCNV Federal City Shelter, the largest shelter in the nation. CCNV's Mission is to ensure that the rights of the homeless and poor are not infringed upon and that every person has access to life's basic essentials.

Self-Care Strategies

The National Health Care for the Homeless Council acknowledges that conferences can be stressful for attendees emotionally, mentally, and physically. It is important that we each care for ourselves and each other in ways that recognize and honor our needs, strengths, and self-care resources. There may be material discussed in sessions that might be emotionally challenging for some attendees, we encourage attendees to care for themselves above all else and seek support when needed. In addition to your personal wellness toolbox, we wanted to provide the following self-care options and ideas:

- **Acknowledge and work within your wellness boundaries.** Consider your own emotional well-being when choosing which sessions to attend. If at any time you feel increasingly uncomfortable, take a step back from the conference. We provide a quiet room for all attendees in Wilson. The quiet room will have a sign at the entrance. The quiet room is open between 8 a.m. – 5 p.m. on Thursday, June 22 and Friday June 23. Please use this room, your sleeping room, or anywhere that you find relaxing.
- **Eat and Sleep Well.** Maintaining healthy eating and sleeping habits can be difficult when you are in an unfamiliar space. By eating well, staying hydrated, and sleeping enough, you are giving yourself a chance to be your best self.
- **Stay Active.** Find ways to move your body throughout the conference. If you'd like, you can take advantage of the fitness center at the hotel or take a walk with others.
- **Create.** Art can be therapeutic for many people. In the Quiet Room (**Wilson**), we have provided a few supplies that you find useful to relax and/or process.
- **Call if You Need Help.** Although there are no licensed therapists on the Council staff, there are a few behavioral health professionals on call at the conference, if needed. We also have the following resources in place, in case you need assistance.
 - Katherine Cavanaugh, Consumer Advocate: 1-443-703-1320
 - National Suicide Prevention Lifeline: 1-800-273-8255
 - Crisis Help Line: 1-800-233-4357

Technical Assistance & Training

The National Health Care for the Homeless Council is a federally supported, national provider of technical assistance and training for homeless health care programs, other health centers, and communities seeking to establish health centers. We offer no-cost trainings and technical assistance on a number of topics, including HRSA Health Center Program Requirements, medical respite care, consumer involvement, and service delivery models adapted to individuals experiencing homelessness including mobile medical care, motivational interviewing, and substance use treatment. For more information, please visit nhchc.org and view our resources under the Get Assistance tab, or contact Caroline Gumpenberger, Director of Education, at cgumpenberger@nhchc.org, (615) 226-2292 ext 222.



In Memoriam

The Council grieves the death of our colleague and friend Willie Joe Mackey. Willie passed away in his home in Palo Alto, CA in October

2016. He was a member of the Respite Care Providers' Network Steering Committee and a former member of the National Consumer Advisory Board. He was a tireless advocate both locally and nationally. He always worked hard to be a model for others and to give a helping hand where he could. He leaves behind a legacy and is dearly missed by his friends and colleagues.

Objectives

After participating in this CME activity, participants should be able to describe and discuss:

1. Unique elements of the HCH approach to patient care
2. Examples from the HCH community of efforts to maintain clinical quality, consumer participation, and interdisciplinary approaches in clinical care
3. The systemic realities of barriers to care and methods to remove those barriers at clinic and community levels

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education through the joint providership of Vanderbilt University Medical Center and the National Health Care for the Homeless Council. Vanderbilt University Medical Center is accredited by the ACCME to provide continuing medical education for physicians.

Vanderbilt University Medical Center designates this live activity for a maximum 23.5 AMA PRA Category 1 Credit(s)[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

NEW METHOD FOR RECORDING ATTENDANCE AND CLAIMING CREDIT

Follow the instructions below to evaluate this CME-certified activity and for immediate access to your attendance and credit.

To report attendance and/or claim credit:

- Log in at <https://cme.mc.vanderbilt.edu>
- Visit <https://cme.mc.vanderbilt.edu/nhchc-2017>

If you are redirected to the main page after logging in, you may also locate the course by selecting Educational Activities then Courses from the top bar and searching for the course name.

- Unlock the course with the access code: Washington2017 (access code is case sensitive)

If you did not attend the entire course, review the course agenda and total your credits.

- Select the green Take Course button
- Complete Evaluation, Credit, and Certificate from the course outline
- Select the green Complete button to finish.

CONTINUING EDUCATION INFORMATION FOR NEW USERS:

You will need to be logged in and have a completed profile in order to claim your credit. If you do not yet have an account in our CME system, please use the following instructions (it should take 5 minutes or less):

- For non-Vanderbilt learners: <http://bit.ly/1Uy1HIX>
- For Vanderbilt learners: <http://bit.ly/1pXmjrx>

Participants should claim credit based on their participation time in 15 minute or .25 credit increments and should round to the nearest quarter hour. Faculty may not claim credit as a participant for their own presentation.

Credit must be claimed online before 11:59 p.m. on **July 21, 2017**

If there are any questions or concerns, click the Contact Support button from within the CME site.

Course Faculty

Course Faculty indicated they have no financial relationships related to the content of this activity to disclose.

Commercial Support

This educational activity received no commercial support.

Having Trouble?

There are known issues with some older browsers, so we recommend accessing courses with the latest version of Firefox or Chrome. We also recommend clearing your internet history (cache) as this tends to alleviate a lot of access issues.

Jule West, CME Activity Director, has no financial relationships related to the content of this activity to disclose.

Wednesday, June 21 | 8:30 a.m. – 4:30 p.m.

▲ Increasing Access through Motivational Conversation | Franklin/McPherson

This highly interactive session will introduce participants to selected Motivational Interviewing (MI) skills, strategies and processes that enhance clients' motivation to access various services and resources. In this session, participants will have an opportunity to practice the processes of engaging through open inquiry, focusing in on change goals, evoking the language of change, and planning achievable steps of action. Participants with little or no prior exposure to MI will benefit from learning and practicing skills in this session; participants with some or extensive prior exposure to MI will be able to refine their skills. This workshop can benefit direct service providers, supervisors, and key leaders within organizations.

Ken Kraybill, MSW, Senior Associate and Director of t3 training, Center for Social Innovation and **Ali Hall, JD**, Independent Consultant and Trainer, Ali Hall Training

▲ Basic Wound Care for your HCH Clinic | Lafayette Park

People experiencing homelessness often develop acute and chronic wounds. They need care that is unique to their circumstances to help these wounds heal. Homelessness presents many barriers to wound healing, including, but not limited to, difficulty elevating legs, challenges with dressing changes and exposure to extremes of temperature. In this course, you will learn the basic components of wound assessment and management. Special attention will be given to the unique challenges of providing this care for people experiencing homelessness. We will review the common materials used, how to develop a wound care plan, and the roles of different team members in providing excellent wound care.

Pat Buckley, PA-C, ND, WCC, Physician Assistant, Central City Concern - Old Town Clinic

■ Pressing on with Health Reform in Turbulent Times: Medicaid, Homelessness, and Charting a Path Forward | Independence DE

Major policy changes are happening across all sectors of federal government. Top among these changes are efforts to change current federal law and alter how Medicaid is financed and delivered. The HCH community has rapidly changed in recent years as many states expanded Medicaid, redesigned their health care systems, and/or better integrated housing and health care programs. During an uncertain environment, we continue our work to provide needed health care services while also expanding high-quality systems of care for vulnerable populations.

This PCI will feature health care industry experts who will provide an assessment of the current Congressional and Administrative landscape to understand what has already happened and what is on the horizon, and offer state Medicaid director perspectives. Leaders from the HCH community will discuss how these changes will impact homeless health care providers and consumers, as well as the importance of continuing practice transformation and demonstrating value for the services provided. Finally, participants will focus on identifying the path forward to preserve health coverage and provide high-quality, value-based health care for vulnerable populations.

Barbara DiPietro, PhD, Senior Director of Policy, National Health Care for the Homeless Council, **Kevin Lindamood, MSW**, President & CEO, Health Care for the Homeless, Baltimore, **Frances Isbell, MA**, CEO, Health Care for the Homeless Houston, **Karen Batia, PhD**, Principal, Health Management Associates, **Bobby Watts, MPH, MS, CPH**, CEO, National Health Care for the Homeless Council, **Hannah Katch**, Senior Policy Analyst, Center on Budget and Policy Priorities, **Shannon McMahon**, Deputy Secretary, Health Care Financing, Maryland Department of Health and Mental Hygiene, Board of Directors, National Association of Medicaid Directors, and **Barry Bock, RN**, CEO, Boston Health Care for the Homeless Program

● Health IT Enabled Quality Improvement: Using the Guide to Improving Care Processes and Outcomes in Health Centers | Wilson/Roosevelt

Quality improvement is a core activity as health centers try to continually enhance access for patients and maximize value and efficiency. Changes to healthcare policy increasingly tying payment to quality make effective QI a business imperative for all health centers, particularly those serving homeless and other high-need populations. In this session, we will review relevant national data and trends and possible drivers of those. We will then dig into a quality improvement approach centered on the Guide to Improving Care Processes and Outcomes in Health Centers, which provides a framework and tools for documenting, analyzing, sharing, and improving key workflows and information flows that drive improvement and outcomes. Together, we will begin to analyze the current state (What is?), including patient and staff experience, information collection, and workflows, to identify areas for improvement (What should be?), and where to find evidence-based approaches to making needed changes (What can we do?).

Jillian Maccini, MBA, JSI Research and Training as the HITEQ Center

▲ Medical Respite Care: Accessing Health & A Pathway Home | Independence BC

Medical respite programs provide a necessary service for individuals experiencing homelessness who need a safe place to heal from injury or illness. Each year, the Respite Care Providers' Network (RCPN) Steering Committee plans a full-day institute to examine emerging issues in the field of medical respite care. This year's institute will include panels, presentations, and interactive discussions of interest to both clinicians and administrators. National experts will share best practices and innovative ideas on building your medical respite program, responding to clients in challenging circumstances, and increasing access to medical respite care in every community. Additionally, information will be provided on the finalized minimum standards for medical respite care, TA resources available, and policy implications for medical respite care. Participants will have the opportunity to engage in information sharing and networking with providers from across the country.

Julia Dobbins, MSW, Project Manager, National Health Care for the Homeless Council, **Sara Jeevanjee, MD**, Medical Director, Medical Respite Program, Santa Clara Valley Health and Hospital System, **Leslie Enzian, MD**, Medical Director, Edward Thomas House Medical Respite Program, Harborview Medical Center, **Jessie Gaeta, MD**, Chief Medical Officer, Boston Health Care for the Homeless Program, **Gregory A. Morris, PA-C**, CEO, Ascending to Health Respite Care, Inc., **Regina Reed, MPH**, National Health Policy Organizer, National Health Care for the Homeless Council, **Melissa Sandoval, MD**, Medical Director, Circle the City, and **Evelyn Clay**, Program Manager, Community Medical Respite, The Daily Planet

● Building Interprofessional Teams | Cabin John/Arlington

Teamwork in health care can save lives, improve the quality of patient care, reduce errors, enhance patient flow, improve communication, and increase satisfaction, which is why interprofessional teams are so important. Lead by a team from the Community Health Center, Inc., this pre-conference institute will provide insight on how to implement team models of care. Attendees will learn how to develop interprofessional teams, and how these teams can result in practice transformation.

Anna Rogers, Community Health Center, Inc., **Mary Blankson, DNP, APRN, FNP-C**, Chief Nursing Officer, Community Health Center, Inc., **Kasey Harding-Wheeler, MPH**, Director for the Center for Key Populations, Community Health Center, Inc., **Bernalda Delgado, RN, BSN**, Wherever You Are Program Nurse Care Coordinator, Community Health Center, Inc., **Melissa Aurora**, Access to Care Coordinator, Community Health Center, Inc., **Diana Paris, MSN, FNP-BC, RN**, Nurse Practitioner, Community Health Center, Inc., **Reema Mistry, MHS**, Program Coordinator, Community Health Center, Inc.

- Policy and Advocacy
- ▲ Clinical & Hands-on Care
- ◆ Research
- Administrative

Thursday, June 22 | 10:30 – 11:30 a.m.

▲ Best Practices for Community Collaboration in Metropolitan Areas | Franklin Square

Agencies working together to empower their community's most vulnerable population is vital for continued healthcare transformation and improving community well-being. In Portland, Oregon multiple systems are taking responsibility by actively working to change the health of our community. We will share how this grassroots movement started and has continued to grow making our community an unusual example of what collective community outreach and advocacy is and how it can improve health outcomes.

Drew Grabham, Social Worker, Outreach Social Worker, Oregon Health & Science University and **Becky Wilkinson, MSW**, Hospital Outreach Worker, Legacy Health

■ Common Good Action Project: Building Capacity for Social Justice Action in Nonprofit Service Organizations | Tiber Creek AB

Five nonprofit organizations that serve persons experiencing homelessness in Albuquerque, NM participated in the Common Good Action Project to examine how their organizations are aligned and equipped to take action for effective social justice policy advocacy, and how to build collective capacity for change. Project tools designed to stimulate understanding and shared learning about readiness and capacity-building will be practiced in this workshop. How to strengthen client engagement as a critical strategy for social justice action is explored, both as a challenge for organizations and as an opportunity for mentoring other organizations to achieve effective collaboration for change.

Jennifer L. Metzler, MPH, Executive Director, Albuquerque Health Care for the Homeless, Inc., **Evelyn Kuhn**, Past-Consumer, Board Member, Albuquerque Health Care for the Homeless, and **Rachel Smith, MA**, Development Officer, Albuquerque Health Care for the Homeless

● Engaging Local Emergency Departments in Coordinated Entry | Cabin John/Arlington

In this facilitated think tank, participants will discuss innovative ways to integrate local emergency departments into community coordinated entry systems. We know that people who experience homelessness, especially those who are chronically homeless, are high utilizers of emergency services. How can we engage emergency departments to increase patients' access to homeless services to end their homelessness, reduce emergency costs, and improve their health outcomes? Are there innovative models for embedding homeless service providers into emergency departments that can be replicated? And how can we improve data sharing between health and homeless service systems to improve collaboration between them?

Noelle Porter, MPH, Program and Policy Analyst, National Alliance to End Homelessness

▲ Health into Housing: Developing Models of Nurse-Directed, Housing-Based Primary Health Care | Farragut Square

In our Think Tank session, attendees will explore of the question of why and how community health centers and supportive housing agencies can partner together to increase access to primary care, particularly in creating models of on-site primary care. We will explore the benefits of an expanded role for nurses in on-site care models. Similarly, we will discuss questions of sustainability and scalability of on-site primary care. We will introduce discussion on these topics through a reflection of the challenges and successes in our experience creating a model of nurse-directed, supportive housing-based primary care at two sites.

Melissa Ellis, RN, RN Lead, Morrison Hotel Clinic, Neighborcare Health and **Richard Waters, MD, MSc**, Site Medical Director, Downtown Homeless Programs, Neighborcare Health

▲ Implementing Buprenorphine Treatment at a Clinic without a Dedicated Onsite Addictions Team | Constitution CDE

Do you work in a healthcare for the homeless project clinic with clients that struggle with opioid use disorder? Does your clinic lack an on-site addictions department? Treating opioid use disorder often requires a complex medical and psychosocial treatment, which most non-specialty clinics aren't adequately equipped to provide. Does that relegate our role to simply referring clients to treatment programs, or is there more we can do? We will explore the inherent tension between a purely harm reduction approach and a standard approach. Can we move treatment forward without making the problem worse?

Tyler Gray, MD, Medical Director, Healthcare for the Homeless - West Baltimore and **David Hunter**, Outreach Worker, Healthcare for the Homeless

● Lessons from Consumer Advisory Boards | Bulfinch/Renwick

Consumer Advisory Boards (CABs) enhance consumer involvement in governance while advocating on behalf of consumers of an HCH project and in the community. While CABs share this underlying mission and other similarities of structure and activities, each CAB is a part of a different community and project, and thus there are a number of variations on the model. This discussion will allow space for individuals to discuss the successes and challenges of their CABs and learn from others who are engaging in the work.

Amy Grassetto, OB Scheduler, Family Health Centers

◆ Migration in Homeless Populations | Roosevelt

Migration is an important factor influencing health and spread of disease; however, it is poorly monitored in individuals with unstable housing. People experiencing homelessness are often transient and migrate for many reasons that include, work opportunities, access to more supportive services, general hospitality of the community to transient groups, escaping violent relationships, sex trafficking, personal legal issues, and family connections to name a few. A think tank will discuss emerging issues related to this topic and help identify influencers for migration.

Alaina Boyer, PhD, Director of Research, National Health Care for the Homeless Council and **Sapna Morris, MD, MBA**, Provider and Board of Directors, Mercy Care of Atlanta

● New Access Points: How to Navigate being a New HCH | Latrobe

If you are a New Access Point for a Health Care for the Homeless program, join us in this session as we review the Council's peer-learning model and opportunities available to assist your organization in being a successful HCH through the training and technical assistance (TA) program. The session will give you an opportunity to share emerging issues, practices, and successes, as well as identify and engage with peers from across the country as we seek to strengthen the network of New Access Point organizations.

Nadine Juste-Beckles, MSW, MPA, Vice President for Primary Care Operations, Housing Works Community Health Care and **Jed Heibel**, Program Manager, Homeless Service, West County Health Centers, Inc.

- Policy and Advocacy
- ▲ Clinical & Hands-on Care
- ◆ Research
- Administrative

Thursday, June 22 | 10:30 – 11:30 a.m.

▲ **The Sober Circle: A Community Outreach Program to Engage Alcohol Abusers in Treatment | Lafayette Park**

Working together for access, collaborative agencies within Sonoma County, including the Police Department, homeless service providers, clinics, funders, hospitals and others, explored the development of a pathway for positive change for homeless who suffer from serial inebriation and related issues. This is a pilot project for a larger countywide solution committed to providing a wrap-around system of care for those community members as an alternative to being cited on “drunk in public” charges. This workshop focuses on our journey to program implementation and an invitation to share in lessons learned and take home process for your community.

Annie Nicol, FNP, Director of Homeless Services, Petaluma Health Center and **Randy Clay**, Lead Outreach Specialist, COTS - Committee on the Shelterless

● **When Medicaid and Housing Data Meet: Some Things are just Better Together | McPherson Square**

Homeless service providers and Medicaid agencies share a common goal – to provide services for the most vulnerable individuals in their communities. Though both Medicaid agencies and homeless service providers frequently serve these same individuals, traditionally there has not been a lot of collaboration between them. In this session, Sam Taylor will discuss the success of three different organizations in using housing and Medicaid data to coordinate care for individuals experiencing homelessness. He will also share best practices for getting started with sharing data between housing and Medicaid programs.

Sam Taylor, Director of Solutions, HHS and Public Sector, Eccovia Solutions, Eccovia/ClientTrack

● **Who’s hungry? A Discussion on Improving Food Access through Programs and Partnerships | Burnham**

Food access is not a new issue to the Health Care for the Homeless field, but while many health centers have developed programs and partnerships with other local service providers, gaps still remain. Join the conversations around what programs health centers have been involved in that successfully improve access to food for their consumers, what they have tried but has not worked, who they have partnered with on the local, state, and/or national levels, and what barriers are they still facing when it comes to improving food access.

Alyssa Curtis, MS, Training Manager, National Health Care for the Homeless Council

Session II: Workshops & Oral Presentations

Thursday, June 22 | 1:00 – 2:30 p.m.

■ Constructing Powerful Stories: Tips from the National Consumer Advisory Board's Storytelling Manual | Cabin John/Arlington

Storytelling has the power to build empathy, connect people, and share the experiences of our consumers and our organizations. It can also help us better use our personal experiences to influence policy change and move the larger discussion of homelessness from one focused on individual failures to one focused on finding solutions to broken systems. This workshop will share the Storytelling Guide from the National Consumer Advisory Board and discuss how to effectively share our stories in order to be effective advocates.

Rodney A Dawkins, NCAB Chair, Heartland Health Outreach, **Amy Grassette**, OB Scheduler, Family Health Center, **Joseph Benson**, CHW, Community Health Worker, Health Care for the Homeless Houston, **Art Rios**, NCAB Regional Representative, Central City Concern, **Terrye Finley**, NCAB Peer Advocate, Los Angeles Christian Centers, **Philip Malebranche, BA**, NCAB Member at Large, Care for the Homeless, and **Katherine Cavanaugh, MSW**, Organizer, Consumer Advocate, National Health Care for the Homeless Council

■ Crisis Response: Federal, State, and Programmatic Policy Changes Addressing the Opioid Epidemic | Bulfinch/Renwick

Opioid use disorders and overdose have skyrocketed in recent years to the point of a national crisis. Thankfully, the scale of the crisis has garnered significant attention by public leaders at all levels and across the political spectrum. Policy changes at the state and federal level offer new opportunities for HCH projects to expand access to opioid use disorder treatment and save lives. This workshop will go over the relevant changes at the federal level, provide an example of model state legislation from Illinois, highlight the gaps that persist and provide strategies for continued advocacy.

Dan Rabbitt, MSW, Health Policy Project Manager, Heartland Alliance for Human Needs and Human Rights, **Susan Awad**, Director, Advocacy and Government Relations, American Society of Addiction Medicine, and **Matt Cuddeback, LCSW**, Supervisor of Clinical Operations, Heartland Health Outreach

▲ Dead People Don't Recover | McPherson Square

The current crisis of opioid use and corresponding overdose deaths has struck the City of Boston with force and the community of people experiencing homelessness has been disproportionately affected. The Boston Health Care for the Homeless Program (BHCHP) has developed a multi-modular approach, based harm reduction, to meet the needs of our sickest patients. In this presentation, we will highlight innovative ways to engage rather than mandate treatment with an ultimate goal of keeping people safe while affording them the ability to access care on their own terms.

David Munson, MD, Medical Director, Barbara McInnis House, Boston Health Care for the Homeless Program, **Susan Keyes, RN**, Nurse Educator, Barbara McInnis House, Boston Health Care for the Homeless Program, **Kate Orlin, BSN, RN, CARN**, SPOT Director, Boston Health Care for the Homeless Program, **Courtney Kenney, BA**, Harm Reduction Specialist, Boston Health Care for the Homeless Program, and **David Rachlin, LICSW**, Behavioral Health Clinician, Barbara McInnis House

Thursday, June 22 | 1:00 – 2:30 p.m.

● ED Care Coordination Strategies: Collaborating with Local Hospitals to Reduce Inappropriate ED Utilization | Farragut Square

This session will discuss how to identify, evaluate, and implement ED care coordination initiatives. Various models of ED care coordination will be described, with a particular focus on establishing a new site within or in close proximity to a hospital. In addition to highlighting legal considerations, including but not limited to requirements applicable to Section 330 of the Public Health Service Act and the Emergency Medical Treatment and Labor Act (EMTALA), the session will cover important tips, budgeting, referral protocols, and ensuring that any new sites and/or new services are approved by HRSA and added to the health center's scope.

Jacki Leifer, Esq., Senior Partner, Feldesman Tucker Leifer Fidell LLP and **L'Kel Little**, Esq., Associate, Feldesman Tucker Leifer Fidell LLP

▲ Greater Norwalk Community Care Team: A Cost-Effective model of Collaboration, Healthcare Quality, and Housing Stability | Burnham

The Greater Norwalk Community Care Team is a successful model of collaborative care among key stakeholders including Norwalk Hospital, Norwalk Community Health Center and the Open Door Shelter to address the medical, mental health and social needs of our most vulnerable residents. In operation for three years, the team has successfully linked over 200 residents to appropriate care and social services. As a result, health care stability has improved and emergency and acute medical care utilization has decreased. The Community Care Team is a successful--if not critical--population health strategy aligned with the goals of the Triple Aim.

Katherine Michael, MD, Medical Director, Community Behavioral Health, Western Connecticut Health Network, **Craig Glover**, MBA, CEO, Norwalk Community Health Center, **Jeannette Archer-Simons**, Executive Director, Norwalk Open Door Shelter, and **Staci Peete**, LCSW, Community Care Team Navigator, Western Connecticut Health Network

● Medical Respite: From Conceptualization to Realization | Constitution CDE

Medical respite is a growing trend in the U.S. and more and more Health Care for the Homeless recipients are looking to fill the void that exists between hospitalization and living in the streets. PrimaryOne Health in Columbus, Ohio has not only recently developed a new medical respite program, but has implemented it successfully inside the nation's largest homeless shelter. Topics of discussion include: data collection, gauging hospital interest, locating a facility, staff requisition, policy development, referral process, developing a relationship with area hospitals, acquiring medical equipment at no cost and how to navigate hospital priorities vs. homeless shelter priorities.

Lori Corey, LISW-S, Homeless Program Coordinator, Primary One Health and **Kelly Miller**, RN, Registered Nurse, Primary One Health- Healthcare for the Homeless

▲ New Recommendations for Treating Asthma | Roosevelt

People experiencing homelessness are more likely to have asthma than the general population, and the prevalence is even higher among children experiencing homelessness. Drawing on the Council's recently updated adapted clinical guidelines, this workshop will examine how clinicians who serve homeless individuals can consider their living situation and co-occurring conditions in the plan of care, improving health outcomes for their patients.

Charles Oberg, MD, MPH, Pediatrician, Hennepin County Medical Center

Session II: Workshops & Oral Presentations

Thursday, June 22 | 1:00 – 2:30 p.m.

◆ Patient Navigators in the Care Team: Bringing Innovation Tasks to Improve Health and Housing Outcomes | Latrobe

Patient navigation has emerged as a promising model to improve access and engagement in care for vulnerable populations experiencing chronic conditions. In this workshop, presenters will describe the role of patient navigators/care coordinators in working as part of care team to improve access to housing, employment, basic living skills, medical care and behavioral health services. Presenters will use case studies to illustrate their work. Data will be shared on the impact of these interventions including cost, the level of effort and types of activities by navigators that are more likely to achieve health and housing outcomes.

Serena Rajabiun, MA, MPH, Senior Evaluator, Boston University School of Public Health, **Maurice Evans**, SPNS Navigator Team Lead, Cascade AIDS Project, and **Precious Jackson**, Peer Navigator, Pasadena Public Health Department

▲ Updates in Addiction Medicine 2016 | Lafayette Park

This workshop will review advances and challenges in addiction medicine with the goal of improving the health of homeless individuals. The training will include a basic review of the neurobiology of substance effects and addiction. Topics will include updates on: the medical effects of substance use on health; Cannabis and cannabinoids; “new drugs of abuse”; substance use effects in pregnancy; Naltrexone for alcohol use disorder; buprenorphine and methadone and why they are not “substituting one addiction for another”; and treating substance users with co-occurring disorders such as ADHD, chronic pain and mental health disorders.

Barry Zevin, MD, Board Certified American Board of Addiction Medicine, Medical Director, SFDPH Street Medicine and Shelter Health and **Joanna Eveland, MD**, Board Certified American Board of Addiction Medicine, Associate Medical Director, Tom Waddell Urban Health Clinic, Mission Neighborhood Health Center

▲ Who’s on First: Using Acuity and Chronicity Scales to Coordinate Care | Franklin Square

Join us to discuss how we developed and use San Francisco Transitions Division Acuity and Chronicity tool to improve the referral processes and deliver high quality care to consumers. Taken from our experience working with integrated mobile primary care, the scale and clinical framework is used to move clients between different levels of medical, behavioral health, housing, case management, and navigation care. One of our consumers, case managers, project director, and providers will give feedback on their experience using these tools. Participants are encouraged to take this tool and mold it to fit the needs of their own community.

Deb Borne, MD, MSW, Acting Medical Director Transitions Division, San Francisco Department of Public Health, **Kate Franza, MSW**, Project Manager, Asian & Pacific Islander Wellness Center, **Siotha King-Thomas**, Drug and Alcohol Certificate, Case Manager, Homeless Outreach Team, San Francisco Department of Public Health, and **Scott Carlisle**, Consumer, Consumer, HHOME/Tace

Oral Presentations | Tiber Creek AB

▲ Web-based MAT Treatment Support: An Innovative Tool for HCH Providers – 1:00 p.m.

The United States is experiencing a public health epidemic of record proportions. The opioid epidemic is impacting people at all levels of society. This is particularly true for people living in the experience homelessness. Under funding from SAMHSA, subject matter experts, researchers, clinicians and people in recovery developed an innovative web based tool to help change the conversation about opioid use disorder and medication assisted treatment. The presentation will review how HCH providers and clinicians can use a web based shared decision making tool to better support people experiencing homelessness with opioid use disorder into evidence based treatment.

Wayne Centrone, NMD, MPH, Senior Health Advisor, Center for Social Innovation and **Steven Samra, MPA**, Associate, Center for Social Innovation

▲ SBOT: A Family Shelter-Based Buprenorphine Program in Massachusetts – 1:30 p.m.

In August 2015, we created a Shelter-Based Opioid Treatment (SBOT) program for adults in a family motel-shelter seeking treatment for opioid addiction, but unable to access traditional office-based opioid therapy. Between August 2015 and August 2016, our inter-professional team of case managers, behavioral health clinicians, nurses, and physicians enrolled ten patients in SBOT. We will review these patients' demographic characteristics, co-morbidities, and clinical outcomes. We will demonstrate that SBOT is safe and feasible, increasing access to addiction treatment for vulnerable patients. We will also discuss remaining challenges, including how best to transition care for patients leaving the shelter.

Avik Chatterjee, MD, MPH, Physician, Boston Health Care for the Homeless Program

▲ Medical Respite for Homeless and Unstably-Housed Injection Drug Users Requiring Prolonged IV Antibiotic Therapy – 2:00 p.m.

This workshop will describe an innovative medical respite care model primarily designed to improve post-acute recuperative care access for homeless and unstably-housed injection drug users with endovascular or deep tissue infections requiring prolonged courses of intravenous antibiotics. This medical respite program represents a unique hospital-community partnership with demonstration of substantial direct hospital cost savings and superior care outcomes for a patient population at high risk for unnecessarily prolonged hospitalization and/or unsafe hospital discharge. An overview of the design and implementation process, partnership strategies, staffing, and workflows will be included to help participants replicate similar programming in their own communities.

Patrick Perri, MD, Medical Director, Center for Inclusion Health, Allegheny Health Network, **Elizabeth Cuevas, MD**, Respite Program Medical Director, Center for Inclusion Health, Allegheny Health Network, and **Stuart Fisk, CRNP**, Director, Center for Inclusion Health, Allegheny Health Network

Session III: Workshops & Oral Presentations

Thursday, June 22 | 3:00 – 4:30 p.m.

■ Are We Doing Enough to End Homelessness? Part III | Constitution CDE

Mayors in cities across the nation have announced “states of emergency” over homelessness. Housing instability has hit an all-time high in some of the largest urban communities in the U.S. And, a casual walk through many areas reveals a staggering number of people experiencing homelessness. A great disconnect exists. Building on popular presentations from 2015 and 2016 HCH Conferences, this workshop will help clinicians and providers sort through the facts, figures, and media to determine critical paths to truly end homelessness. The workshop will include a moderated discussion with key thought-leaders in the homelessness field and an interactive activity.

Jim O’Connell, MD, President, Boston Health Care for the Homeless Program, **Jeff Olivet, MA**, CEO, Center for Social Innovation, **Kevin Lindamood, MSW**, President & CEO, Health Care for the Homeless, **Barbara DiPietro, PhD**, Senior Director of Policy, National Health Care for the Homeless Council, and **Wayne Centrone, NMD, MPH**, Senior Health Advisor, Center for Social Innovation

● Building a Culture of Philanthropy via Collaboration, Community and Innovative Consumer Engagement | Bulfinch/Renwick

Without funding, there is no access. Diversification of revenue and increased private support are pivotal to the financial success of health centers. This workshop will feature two case studies representing different regions that exemplify successful partnerships between development staff, program staff and consumer leaders. The session will draw from recent national projects related to consumer storytelling and link those strategies to fundraising. All health center staff and consumers are integral in successful fund development and will equally benefit from this presentation leading to opportunities for increased access to care.

Maureen Neal, CFRE, COO, Advancement, The Daily Planet, **Tammy Rocker**, Chief Development Officer, Circle the City, **Krista Graves**, Board Member, The Daily Planet Health Services, **Kim Despres**, RN Program Director, Circle the City and **Denise Miles**, Consumer Advisory, Circle the City

▲ Caring for the Homeless Patient with Mental Illness: General Treatment and the Use of Integrated Team Approaches to Client-Centered Care | Burnham

The care of the homeless mentally ill patient takes a great deal of flexibility and often requires creative approaches. This presentation will feature 2, integrated team approaches to mental illness—an office-based model and a street-based model. The office-based team will focus on general treatment approaches to the various psychiatric illness and practical interventions that address the needs specific to this population. The street-based team will review cases where initiation of long-acting, anti-psychotic injectable medications for patients with schizophrenia resulted in stabilization and housing. The presenters will use an interactive format to engage the audience and to reflect on lessons learned.

Rose Garcia, MA, Clinical Case Manager, OPCC, **Carrie Kowalski, MPAP, PA-C**, Physician Assistant, Certified, Venice Family Clinic, **Christian Neal, MD, MPA**, Attending Physician - Community Psychiatry Track, Virginia Tech Carilion School of Medicine - Carilion Clinic, and **Kathryn Johnson, DO, MA**, Psychiatry Resident PGY-4, Virginia Tech Carilion School of Medicine - Carilion Clinic

Thursday, June 22 | 3:00 – 4:30 p.m.

● **Healthy Release: Health Center Working to Improve Health and Housing Outcomes for Justice-Involved Populations | Roosevelt**

People exiting prisons and jails are disproportionately affected by chronic health, mental health, and substance use conditions. They also frequently experience housing instability and homelessness, further exacerbating health conditions and increasing the likelihood of re-offense. Health centers are uniquely situated to address health challenges for this population through coordination of access to services, including benefits access, peer engagement models, and partnering with housing providers. This session will highlight how health centers can address ex-prisoners' health challenges and how they can partner with housing providers to increase stability and reduce the likelihood of a return to prison or jail.

Kim Keaton, MPA, Senior Program Manager, Corporation for Supportive Housing

▲ **House Warming: A Consumer Developed and Driven Transitions Program for Getting into and Staying in Housing | Farragut Square**

After the achievement of getting housed, many people then face the difficulty of acclimating to a life inside. Two peer developed programs from Boston and San Francisco address a range of challenges that many people face when transitioning into housing. SF's HHOME Skills program is developing peer-to-peer mentoring, skills assessments, educational materials, and 'house warming kits'. Boston's HCH CAB members created a Housing Guide, which then transformed into a Housing Guide Network. Other peer led transitions programs are encouraged to attend and share their experiences. Participants are encouraged to take ideas and tools from this workshop back to their communities.

Deb Borne, MD, MSW, Acting Medical Director Transitions Division, San Francisco Department of Public Health, **Scott Carlisle**, Consumer, Consumer, HHOME/Tace, **Kadia Wormley**, Medical Student, HHOME Program, **Douglas Goldstein**, Volunteer, HHOME Program, **Talia Roven**, Client Advocate, Shanti Project, **Joanne Guarino**, NCAB Regional Representative, Boston Health Care for the Homeless Program, and **Lena Julia Cardoso**, Research Assistant, Boston Health Care for the Homeless Program

▲ **Improving Culturally Competent, Trauma-Informed Care for Homeless LGBT Youth | Cabin John/Arlington**

LGBT youth are disproportionately impacted by homelessness due to social stigma, family conflict, and emotional and physical abuses. The traumas experienced before and during homelessness result in negative health outcomes among LGBT youth. To effectively engage and connect LGBT youth to care, providers must understand and deliver culturally competent, trauma-informed care and services. This 90-minute workshop will cover causes of homelessness for LGBT youth and the impact of homelessness on health outcomes among LGBT youth. Presentations, best practices, and case studies will be used to enhance knowledge and build skills for identifying and implementing culturally appropriate, trauma-informed models of care.

Ryan Meyer, MPP, Manager, National Coalition for LGBT Health, **Brian Hujdich**, Executive Director, HealthHIV and National Coalition for LGBT Health, and **Michael Shankle, MPH**, Director of Capacity Building, HealthHIV

Session III: Workshops & Oral Presentations

Thursday, June 22 | 3:00 – 4:30 p.m.

● **Amplify Your Voice in an Accessible Medium: Social Media 101 for Health Centers | Latrobe**

Social media is powerful, direct, and immediate—and if you aren't already involved, you're missing a crucial opportunity to reach your constituency, tell the story of your programs and consumers, and help destigmatize homelessness. This presentation will serve as a "how-to" for entities in the homeless health care field to build or improve their institution's social media communications—from Facebook to Instagram. Learn how to highlight your initiatives to a broader constituency, showcase stories of change for advocacy and development, and incorporate voices from your CAB with this workshop's practical strategies for social media communications and measuring their impact.

Rick Brown, MA, Communications Manager, National Health Care for the Homeless Council

■ **The Activist Consumer Advisory Board: Empowering Consumers to Advocate and Catalyze Social Change | McPherson Square**

This workshop discusses the unique role that CABs can play in catalyzing social change. We incorporate a "how to approach" for CABs, providing our peers with tools to develop curriculums that enable consumers to cultivate advocacy skills. We also highlight the work of "activist" CABs in Miami, Los Angeles and Portland, Oregon in which consumers advocate on matters such as alternatives to homelessness criminalization, Medicaid expansion and health education. Key content topics include navigating legal and institutional barriers to effective advocacy; tying health education to clinical quality indicators; and sensitizing the public to homelessness issues.

David Peery, JD, NCAB Regional Representative, Camillus Health Concern, **Art Rios**, NCAB Regional Representative, Central City Concern, **T. Sukari Finley**, NCAB Peer Advocate, Los Angeles Christian Health Centers, and **Warren Berke**, Volunteer, NYU Lutheran Community Medicine

▲ **When Access Isn't Enough: Building an Ambulatory ICU in a HCH Setting | Franklin Square**

Recognizing the need for a complex care intervention, Old Town Clinic developed the first AICU in a HCH setting. Our workshop will make the case for developing an AICU for a HCH setting and will provide an overview of the team's structure and work. We will provide concrete examples of the struggles and successes that the team encountered during implementation, share key lessons learned, and showcase a video of AICU patients describing their experiences of care with the new team.

Meg Devoe, MD, Physician, Central City Concern, **Michael Everly**, Care Coordinator, Central City Concern, and **Audrey Wagner, PharmD**, BCBS, Summit Team Pharmacist, Old Town Clinic – Central City Concern

Oral Presentations | Tiber Creek AB

▲ Evidence Based Community Collaboration to Address Chronic Disease in Homeless Adults – 3:00 p.m.

This project was designed in collaboration with a homeless shelter organization and healthcare. The project improved the health of the homeless population with chronic diseases, in a metropolitan suburb. The project plan was the implementation of evidence based strategies which were demonstrated to be feasible, effective, and efficient quality improvement tools for the homeless population. The impact resulted in a 50% reduction of ED visits with homeless adults who completed the program. The retention rate was 70%, evaluated to be augmented by the innovative alignment of case manager follow-up with the participants.

Marcie Calandra, DNP, MS, RN, APRN, Executive Director, Tenet/Macneal Hospital

▲ Working Together to Provide Access to Hepatitis C Treatment: A Multidisciplinary Team Approach – 3:30 p.m.

Persons experiencing homelessness are disproportionately affected by hepatitis C (HCV) infection and face barriers that prevent many from obtaining potentially life-saving treatment. In response to this disparity, our program formed the Hepatitis C Consult Service Team (HCV Team), which is a multidisciplinary team that works with all members of a patient's health care team in order to overcome these barriers and successfully treat our population's high prevalence of infection. We hope to share our proven strategies for working together to improve access to HCV treatment with programs with similar patient populations and a shared interest in combating HCV.

Molly Ingemi, HCV Care Coordinator, Boston Health Care for the Homeless Program

● Track to Stay on Track: Effective Tracking Methods to Improve Program Management – 4:00 p.m.

The Health Education Department manages preventive health programs targeting the homeless population in multiple clinics throughout New York City. One of the primary focuses is our HIV Screening Program, which entails enhanced outreach, screening, counseling, linkage to care, monitoring monthly/annual deliverables, and maintaining quality assurance. To achieve program deliverables multiple tracking methods are utilized; these tools are consistently recognized as a best-practice by the Bureau of HIV/AIDS Prevention and Control at the New York City Department of Health and Mental Hygiene. Additionally, these tracking methods aim to improve data tracking which leads to data-driven practices and high quality care.

Isabel Odean, Health Educator, Care for the Homeless and Gabriela Gonzalez, Senior Health Educator, Care for the Homeless

Session IV: Workshops & Oral Presentations

Friday, June 23 | 8:30 – 10:00 a.m.

▲ Adapting Together: Efficacy of Interventions to Address the Needs of Individuals with Brain Injury within HCH Sites | Lafayette Park

As HCH agencies seek to increase accessibility of their services, there has been a recent initiative to better address those experiencing brain injury. This presentation will review a pilot project to increase identification of brain injury for individuals receiving mental health therapy, and increase the skills of mental health providers to better engage these clients. Changes in mental health intervention approaches occur in conjunction with rehabilitation services, and this session will discuss the results of this approach to increase client engagement and overall outcomes of those receiving services.

Caitlin Synovec, MS, OTR/L, Occupational Therapist, Baltimore Health Care for the Homeless and **Sean Berry, LCSW-C**, Behavioral Health Therapist, Health Care for the Homeless Baltimore

▲ Assigned but Unengaged: Health New Patients Access Primary Care | Franklin Square

In this 90-minute workshop, we will surface the barriers and motivations that your future patients face around establishing primary care; develop a heat map of places your future patients can be found and connected with; identify ways to improve the demographic and contact data of your future patients; and develop a strategic plan to bring more people into your clinic using Community Health Outreach Workers.

Gary Cobb, Community Outreach Coordinator, Central City Concern, **Miles Sledd**, Associate Director of Primary Care, Central City Concern, and **Catherine Hull**, Community Health Outreach Worker, Old Town Clinic/ Central City Concern

▲ Connecting Paradigms: A Systematic Strategy for the Implementation of a Trauma-Informed and Neurobiological Framework for Motivational Interviewing | Cabin John/Arlington

Health Care for the Homeless providers work in a time of rapidly evolving science and emerging best practices. Without strategic thinking, all the information can be overwhelming, and difficult to implement as congruent programming for patients. The Connecting Paradigms Workshop helps to turn information overload into a workable model for providing high-quality, integrated services.

Matt Bennett, MBA, MA, Chief Innovations Officer, Coldspring Center and **Deb Borne, MD, MSW**, Medical Director Transitions Care Coordination, San Francisco Department of Public Health

■ Expanding Housing through Health Care Investment: Five Community Study | Burnham

Housing First permanent supportive housing is an evidence based intervention to end homelessness for chronically homeless single adults. Because of specific restrictions in the Medicaid statutes, most communities around the United States have not made major investments in expanding housing stock for high users of the health care system using specific health care dollars. However, five communities around the US have dramatically expanded supportive housing stock with investments from the health care system. This session will report on the details of how these communities have succeeded and will provide specific opportunities for replication throughout the country.

Joshua Bamberger, MD, MPH, Physician, Mercy Housing, **Karen Batia, PhD**, Principal, Health Management Associates, and **Richard Samson, JD**, Consultant, Low Income Investment Fund

- Policy and Advocacy
- ▲ Clinical & Hands-on Care
- ◆ Research
- Administrative

▲ Health Literacy and FQHCs: Enhancing Clinic Access by Reducing Barriers to Low Health Literacy Patients | Latrobe

This presentation will offer an overview of health literacy, including the impact that low health literacy has on clinic access, individual health outcomes, and health disparities at the population level. It will also describe the ways in which Old Town Clinic (a FQHC in Portland, Oregon) is working to minimize barriers and increase patient access through the application of health literacy principles (including universal precautions) throughout the clinic. Join us to learn how our various staff roles are working together to ensure we minimize barriers for all patients and what your clinic can do to improve patient access.

Anne Arthur, MA, Health Educator, Old Town Clinic, Central City Concern

● Health and Supportive Housing Capital Expansion: Building Access, Impact and Equity for Vulnerable Populations in our Communities | McPherson Square

Health and housing collaborations that improve quality of life and health for vulnerable populations frequently include design and development of expanded facilities that increase services access for shared client populations. These facility collaborations – both co-located within a health center and outside in the community – provide opportunities to leverage resources and enhance care coordination efficiencies to expand access, improve impact and strengthen equity. This session builds on CSH guidance for forming health and housing partnerships, and highlights strategies for addressing supportive housing needs of patients and leveraging resources central to developing successful health and supportive housing capital expansions.

Jane Bilger, Senior Program Manager, Corporation for Supportive Housing, **Jonathan Chapman**, Director Community Health Center Advisory Services, Capital Link and **Kelly Sweeney McShane**, President and CEO, Community of Hope DC

● Safety = Access: Lessons and Questions about Establishing Safety in HCH Projects | Bulfinch/Renwick

Feeling safe is a fundamental need of all people. Finding safety is more complex for people who have experienced trauma and homelessness. For health care providers to deliver meaningful, comprehensive care, they must understand what makes consumers feel safe. Last year, the National Consumer Advisory Board (NCAB) created and administered a Consumer Participation Outreach Survey (CPO) last year to explore this question. Based on the results from that survey NCAB worked with providers, administrators, and security staff at various HCH projects to create a safety guide that contains recommendations for developing safe and healing spaces for both consumers and staff.

Rodney A Dawkins, NCAB Chair, Heartland Health Outreach, **Amy Grassetto**, OB Scheduler, Family Health Center, **Joanne Guarino**, NCAB Regional Representative, Boston Health Care for the Homeless Program, **Valarie B Dowell, BA**, NCAB Co-Chair, Cincinnati Health Network, **Terrye Finley**, NCAB Peer Advocate, Los Angeles Christian Centers, **Paul L. Tunison**, NCAB Member at Large, San Mateo Medical Center, and **Katherine Cavanaugh, MSW**, Organizer, Consumer Advocate, National Health Care for the Homeless Council

Session IV: Workshops & Oral Presentations

Friday, June 23 | 8:30 – 10:00 a.m.

▲ San Mateo County Street and Field Medicine: A Private/Public Partnership Reaching Vulnerable Populations | Tiber Creek AB

This workshop presentation will demonstrate how a public/private partnership is meeting the medical and psychiatric needs of a vulnerable population. San Mateo County's Public Health Policy and Planning program, LifeMoves' Homeless Outreach teams and Puente developed a Street and Field Medicine program that provided direct care to the street homeless and farmworker populations. In the first 9 months, the team has had 136 encounters. The Street and Field Medicine team will explain the planning stages, their challenges and tremendous client success stories in a panel like discussion.

Chloe Molla, Community Health Outreach Worker, LifeMoves, **Dashika Woodridge**, Associate Program Director, LifeMoves, **Christopher King, RN, MS, NP**, Street and Field Medicine Nurse Practitioner, San Mateo Medical Center, and **Sarah Beth Bailey, MS, AGNP, RN**, Street Medicine Nurse Practitioner, San Mateo Health System

● The Health Neighborhood: An Innovative, Collaborative Care Model | Farragut Square

This presentation will describe the planning, development, and implementation of a Health Neighborhood. This is a systems level approach to integrating care with supportive housing service providers. Through leasing licensed mental health or case management staff from supportive housing providers, the model deepens care coordination for residents whose primary care provider is HHO and increases access to care for those who may not yet be engaged in care. Financial sustainability of the model and billing processes will be discussed.

Kathleen Kelleghan, Senior Director- Community Health Initiatives, Heartland Health Outreach and **Cara Pacione, MSW, LCSW**, Associate Director, Community Health Impact, Heartland Health Outreach

◆ What's New in Homeless Health Care: A No-Jargon Summary of the Latest Research | Constitution CDE

Staying up-to-date on the growing field of homelessness research presents a considerable challenge for the busy clinician or administrator. This workshop will present a plain-language summary of selected scientific studies on the health of homeless people that have been published since January 1, 2016. The presentation will focus on scientific contributions in the following domains of homeless health: 1) health status, 2) health care access and delivery, and 3) housing. The presenters will highlight the practical implications of each study and provide attendees with an annotated bibliography containing take-home points. No expertise in research methods is required.

Travis Baggett, MD, MPH, Assistant Professor of Medicine, Massachusetts General Hospital/Harvard Medical School, **Stefan Kertesz, MD, MSc**, Associate Professor of Medicine, Birmingham VA Medical Center/University of Alabama, Birmingham, and **Margot Kushel, MD**, Professor of Medicine, UCSF/San Francisco General Hospital

Oral Presentations | Roosevelt

▲ Increasing Access to Gender-Affirming Health Care for Homeless/Marginally Housed Individuals within the Context of Insurance Reform – 8:30 a.m.

Recent changes in Medicare have resulted in increased access to medical/surgical services for transgender-identified individuals. These changes have been affirming for many members of this community who are finally able to obtain interventions that result in improved quality of life. However, homeless /marginally housed transgender individuals cannot necessarily take advantage of this increased access to care, particularly access to surgical interventions. At BHCHP, we engage the support of our respite facility to help these patients successfully access gender-affirming surgical procedures. The process of involving respite in these patients' care includes staff training/education and the development of a gender-affirming respite policy.

Pam Klein, RN, MSN, ACRN, Program Manager for Transgender Services, Boston Health Care for the Homeless and **Sara Reid, BA**, Board Member/Advocate, Boston Health Care for the Homeless

▲ Baby Steps: A Nurse's Perspective on Building a Prenatal Care Program at a Family Practice FQHC – 9:00 a.m.

Family practice FQHC's and other similar clinics provide an accessible resource to low-income communities, yet prenatal care is often excluded from the available services clinics provide. Access to early and adequate prenatal care is a major health care objective, significantly impacting maternal and neonatal outcomes. Bridging the gap between standard family health practice and specialized OB care may be achievable with the utilization of OB-GYN trained nurses to provide hands-on care, health education, and care management services. This presentation by an FQHC R.N. will assist in road mapping the journey from family practice to prenatal practice in the community health setting.

Julie Larson, BSN, RN, Nurse Care Manager, Project HOME - Stephen Klein Wellness Center

▲ Outreach-Based Pregnancy Intention Screening and Prevention – 9:30 a.m.

Higher risk of unintended pregnancy and lower access to contraception are significant health issues for homeless cisgender women of childbearing age who are out of care. We launched a pilot evaluation of One-Key Question®, a pregnancy intention screening tool, administered via outreach workers and outreach medical providers. Results of the pilot inform future directions in offering outreach-based pregnancy prevention methods which are accessible to the target population in the field. In particular, greater access to the subdermal birth control implant could be a potential method to address clients' needs.

Leah Warner, FNP, MPH, SFHOT Nurse Practitioner, San Francisco Homeless Outreach Team, Department of Public Health and **Joan Chen, BA**, San Francisco Homeless Outreach Team, Department of Homelessness and Supportive Housing

■ Chronic Disease Management: Undocumented and Homeless – How to Make it Work | Tiber Creek AB

Managing chronic diseases such as diabetes, hypertension, hepatitis C is difficult enough with language literacy, insurance and a stable living environment. Consider managing the same diseases as an undocumented immigrant with low language literacy and unstable living environment--immobilizing and often the cause for late to care diagnosis. We will discuss community partnerships and federally funded programs that have allowed many of our clients to successfully manage their diagnosis without losing what little they have.

Rigo Rodriguez, CHW, Community Health Worker, Contra Costa County Public Health Department and **Heather Cedermaz, NP**, Family Nurse Practitioner, Contra Costa County Public Health-Health Care for the Homeless

● Creating Sanctuary for Female Consumers | Lafayette Park

Women experiencing homelessness face similar struggles in meeting their basic needs and living with respect and dignity, as most men experience during homelessness. However, their experiences are compounded by the social vulnerability of being a woman in this world. Women are often forced or expected to concede their sexual freedom in exchange for necessary resources or a perception of improved safety. This workshop will describe some of the specific concerns of women experiencing homelessness when it comes to safety, and engage the audience in a discussion about ways our organizations can create safer environments for women.

Athena Haniotis, Consumer Relations Committee Member, Baltimore Health Care for the Homeless

● From Hospital to Home: Effective Collaboration in Support of Individuals Experiencing Homelessness | Cabin John/Arlington

According to Los Angeles Homeless Service Authority (LAHSA) "The 2016 Greater Los Angeles County found 28,464 homeless persons in the city of Los Angeles, an increase of almost 11% over 2015." In an effort to take action on the homeless issue in LA County, there has been a coordinated effort among homeless service providers through the Coordinated Entry System (CES) Collaborative. Efforts include wrapping services around the individuals to obtain housing, decrease recidivism and increase rates of retention. There will be a discussion on the effectiveness of the collaboration of Recuperative Care, CES and strategies to improve these efforts.

Shakoya Green, Director Recuperative Care, National Health Foundation, **Antquan Washington**, Executive Director, Broken Hearts Ministry and **Hazel Lopez**, Director of CES and Community Engagement for The People Concern, OPCC & LAMP Community United

◆ How Data Systems can Impact your Health Center | Burnham

This is a collaborative session that help to address data needs within health centers and across health centers will be addressed. The larger value of data driven metrics is evidenced by the ability to measure change in health outcomes at the community level. Systems that efficiently capture this data are imperative in order to "move the needle" and improve health outcomes for conditions that disproportionately affect those experiencing homelessness. Reporting of population health and health equity metrics not only impacts the health of community but also the systems in place to serve the communities.

Nilesh Kalyanaraman, MD, Chief Medical Officer, Health Care for the Homeless, **Alaina Boyer, PhD**, Director of Research, National Health Care for the Homeless Council, and **Dennis Culhane, PhD**, Dana and Andrew Stone Professor of Social Policy, University of Pennsylvania

▲ Interdisciplinary and Experiential Learning within the Homeless Community: Connecting Community Work to Students and Schools | Latrobe

This think tank will review how a community based program to serve homeless individuals can serve as a launching pad for the development of multiple educational opportunities and connections to academic institutions. It will provide an opportunity to discuss novel approaches to form interdisciplinary and experiential education and to create future practitioners familiar with the unique challenges and rewards in serving homeless individuals.

Megan Smith, MSW, Outreach Program Manager, Adjunct Professor, Teaching Associate, House of Hope CDC, Rhode Island College, Warren Alpert Medical School of Brown University and **Craig Kaufmann, MD**, Clinical Assistant Professor of Psychiatry, Warren Alpert Medical School of Brown University

▲ Leap of Faith: How Spiritual Health and Wellness Impacts Recovery from Trauma and Health Outcomes | Franklin Square

Spirituality is a sense of connection to something bigger than ourselves, and involves a search for meaning in life. It truly is a universal human experience—something that touches us all. For people who experience homelessness and trauma the search for meaning and connectedness to ourselves and others is a critical missing piece in healing. The impact of trauma on our brains, behavior and health is well studied. Most of our medical and counseling interventions do not account for the importance and impact of spiritual beliefs on the desire, and the ability to heal.

Matt Bennett, MBA, MA, Chief Innovations Officer, Coldspring Center and **Deb Borne, MD, MSW**, Medical Director Transitions Care Coordination, San Francisco Department of Public Health

▲ Move Toward Wellness: Integrating Access to Exercise in Programs Serving Individuals impacted by Homelessness | Roosevelt

In order to more effectively serve consumers impacted by homelessness, social service providers and agencies must consider the relationship between physical health, mental health and poverty. Programs that provide convenient access to exercise and health education are vital preventive health resources for people who have experienced homelessness. This presentation examines the prevalence of preventable health problems related to obesity and poverty among individuals impacted by homelessness, provides strategies for integrating exercise and physical activity into traditional social service settings and engages attendees in discussing how to foster an environment that promotes both physical and mental health among all community members.

David Brand, MSW, American Council on Exercise Certified Personal Trainer, Fitness Consultant, CAMBA, Inc., Lantern Community Services and **Karisa Antonio, DMA**, Director of Arts, Culture and Fitness, Lantern Community Services

■ Paternalistic of Participatory: Where Do Your Services Align? | Bulfinch/Renwick

The discussion will focus on strategies to provide the most person centered care to program participants. Attendees will be given examples of steps taken by the Colorado Coalition for the Homeless to integrate participant feedback directly into policies and program designs. The presenters will also discuss the Housing Intake and Placement structure at the Coalition and provide insight into how the HIP program design was influenced by participants who had previously experienced working with the team.

Christina Garcia, CAC II, Program Manager Housing Intake and Placement, Colorado Coalition for the Homeless and **Deanne Witzke**, Intake Coordinator, Colorado Coalition for the Homeless

● Patient Centered Medical Homes in HCH: A Case Study Discussion | McPherson Square

When it comes to Patient Centered Medical Home Status or Accreditation, HCH grantees are scattered across the spectrum related to level of understanding and training. HCH's also face different challenges in documenting for standards when working with a transient and unique population. While this session cannot cover all the training needs of our grantees, it will provide an opportunity to review a successful case study of an HCH stand-alone clinic as they journey through the process of learning about PCMH, assessing internal capacity, submitting application, implementing and reporting standards post-award, and the impact of PCMH status.

Karen McGlinn, Executive Director, Share Our Selves and **Mary Ann Huntsman, PharmD, BCSCP, CDE**, Director of Clinical Pharmacy Services, Share Our Selves Corporation

● Self-Care: Taking Care of Ourselves to Sustain the Health of our Communities | Constitution CDE

Outreach workers, including community health workers, build and maintain trust in their communities by providing critical outreach and enabling services where individuals live, work, and spend time. As a result, outreach workers take on many roles, which can leave them susceptible to burnout. For health centers and community-based organizations, it is important to promote and implement self-care practices within and beyond the workplace in order to recruit and retain outreach staff. In this session, Health Outreach Partners will provide an overview of self-care, describe various individual and organizational strategies, and facilitate a conversation on integrating self-care practices into the workplace.

Sonia Lee, MPH, Senior Manager, Client Services and Communications, Health Outreach Partners

▲ You Too Can Treat Patients with Hepatitis C | Farragut Square

Hepatitis C is associated with significant morbidity. The incidence of hepatitis C is 10-20 times higher in some groups of homeless populations. Access to treatment may be limited by the high demand for services, lack of coverage for the expensive medications or the paucity of specialty care in certain areas. Topics will include: a provider/pharmacist team approach to effectively treating patients in a primary care setting, options for accessing telemedicine specialty consultation, legal requirements allowing clinical pharmacists to practice as independent providers, navigation of the approval process for treatment medications, resources for regularly updated information on hepatitis C treatment recommendations.

Leslie Enzian, MD, Medical Director, Edward Thomas House Medical Respite Program, Harborview Medical Center and **Mary Kelly, PharmD**, Clinical Pharmacist, Harborview Medical Center Pioneer Square Clinic

● Consumer Advisory Boards: Creating Effective Internal and Organizational Structures | Farragut Square

Individuals who receive services at HCH projects have a unique and important role to help make continual improvement in services and achieve the mission of the organization. Those who have been disenfranchised and are struggling to meet their basic needs have understandable challenges engaging in governance activities; yet it is important for projects to facilitate the voice of this critical perspective. This workshop will identify best practices in fulfilling this responsibility through Consumer Advisory Boards (CABs), including both internal considerations (e.g., how to structure membership) and organizational considerations (e.g., how to incorporate feedback into the agency decision-making process).

Rodney Dawkins, NCAB Chair, Heartland Health Outreach, **Paul Tunison**, NCAB Member at Large, San Mateo Medical Center, **Joseph Benson**, CHW, Community Health Worker, Health Care for the Homeless Houston, **Derek A Winbush**, NCAB Co-Chair, Boston Health Care for the Homeless, and **Katherine Cavanaugh**, MSW, Organizer, Consumer Advocate, National Health Care for the Homeless Council

● Denver Collaborates to reach “High Utilizers: through Social Impact Bond Initiative | Bulfinch/Renwick

Panel discussion broken into three segments and a question/answer session highlighting the collaboration of community stakeholders for the Denver Social Impact Bond Initiative, which launched on February 16, 2016. The Denver Social Impact Bond program is an initiative aimed at measurably improving the lives of people most in need by driving resources towards better, more effective programs. Social Impact Bonds are a unique type of performance-based contract where private and/or philanthropic lenders loan funds to accomplish a specific objective and are repaid based on whether the program achieves its goals.

Carrie Craig, MSW, LCSW, Associate Director of Housing First and ACT Services, Colorado Coalition for the Homeless, **Katie Bonamasso**, MSW, Program Manager: Denver Social Impact Bond Initiative, Corporation for Supportive Housing, and **Jess Fear, MA, LPC**, Program Manager, Social Impact Bond- Team 1, Colorado Coalition for the Homeless

▲ Engaging Homeless, Multiply Diagnosed, HIV Positive Persons into Medical, Psychiatric, and Supportive Services | Franklin Square

People who are homeless, HIV positive, and multiply diagnosed with mental health and substance use disorders often face an array of challenges and barriers when attempting to access services and achieve optimal medical and psychosocial outcomes. This presentation will explore, through the perspective of composite client and provider narratives utilizing audio/visual media, and through participant dialogue, how persons that are members of this population manage the challenges. Interviews with providers across multiple disciplines will be presented to provide a complete picture of client and provider collaboration in promoting access and optimal outcomes.

Ben Callaway, LMSW, Care Coordinator, AIDS Arms, **Miata Everett**, MSW, Therapeutic Care Coordinator, AIDS Arms, **Luis Moreno**, BSW, Care Coordinator, AIDS Arms

Session VI: Workshops & Oral Presentations

Friday, June 23 | 1:00 – 2:30 p.m.

● Health Care for the Homeless Outreach: A Strategic Approach | Constitution CDE

Circle the City (CTC) has taken a strategic approach to outreach through collaboration with community partners to increase access to health care for individuals experiencing homelessness. During this workshop the CTC team will present four key strategies which include regional access points using our mobile medical unit, the implementation of a bus route strategy, a domestic violence collaborative, and a successful pilot project placing a Health Navigator in a neighboring hospital. Throughout the presentation, CTC will share the evolution of these four outreach strategies and thoughts for future strategy improvement.

Brandi Whisler, Director of Outpatient Programs, Circle the City

▲ The Integrative Pain Management Program: Results From a Pilot Expanding Options for Chronic Pain Treatment | Cabin John/Arlington

The San Francisco Department of Public Health completed a group based pilot of the Integrative Pain Management Program (IPMP). Situated within the primary care setting the intervention was developed to expand access to non-medication treatment options for patients with chronic pain. The IPMP included physical activity/movement groups, integrative modalities (acupuncture, massage, mindfulness), and patient education around the neuroscience of chronic pain and the role of medications in pain management. The workshop will focus on the process of developing and modifying the pilot based on patient and other stakeholder input, outcome data, and next steps in expanding access to this intervention.

Barbara Wismer, MD, MPH, Physician, Tom Waddell Urban Health Clinic, San Francisco Department of Public Health, **Joseph Pace, MD**, Director of Primary Care Homeless Services, and **Tom Waddell** Urban Health Clinic, San Francisco Department of Public Health

■ Medicaid and Managed Care: A Discussion of Current Events and Likely Changes Impacting HCH Providers and Consumers | McPherson Square

Medicaid may be undergoing significant changes as a new Presidential administration and a new Congress debate alternatives to the Affordable Care Act. This will not only have consequences for the Medicaid expansion population, but potentially to all low-income populations in all states as changes to eligibility, funding, and participation requirements are considered. Likewise, the role of managed care will change accordingly. This workshop will discuss the most recent changes to Medicaid and the implications for managed care organizations and the Medicaid beneficiaries they serve.

Barbara DiPietro, PhD, Senior Director of Policy, National Health Care for the Homeless Council and **Jenny Ismert, MPA**, Vice President, Positioning and Strategy, UnitedHealthcare

▲ Shelter-based Meningitis Outbreak: Working Together to Vaccinate, Treat and Investigate | Latrobe

Five cases of meningococcal disease, including two deaths, were reported in homeless adults in Boston, Massachusetts between January 29 and March 9, 2016. Routine meningitis surveillance does not capture housing status, so little is known about cases or risk among people experiencing homelessness. We will present lessons learned for conducting a time-sensitive public health vaccination and prophylaxis campaign in a population of transient and historically difficult to locate people experiencing homelessness. We will also present the results from this investigation including the risk factors determined and new CDC guidelines for people experiencing homelessness.

Casey Leon, MPH, Research Manager, Boston Health Care for the Homeless Program, **April Donahue, RN**, Pine Street Inn Shelter Clinic Nursing Director, Boston Health Care for the Homeless Program, and **Denise De Las Nueces, MD, MPH**, Medical Director, Boston Health Care for the Homeless Program

■ Utilizing Medicaid and Health Resources for Housing Subsidies and Development | Lafayette Park

The National AIDS Housing Coalition (NAHC) envisions a community where housing is a human right and HIV disease ends. Housing improves health outcomes of those living with HIV and other chronic conditions. The end of HIV/AIDS critically depends on an end to poverty, stigma, housing instability, and homelessness. This workshop will focus how to integrate health resources into housing subsidies and development. We will explore how communities have used local Medicaid dollars, 340b resources, private insurance and collaborations with health providers to develop housing subsidies and supportive housing units for people who are homeless, unstably housed and or low-income.

Christine Campbell, Program Consultant, National AIDS Housing Coalition and **Russell Bennett, LGSW, PhD**, Executive Director, National AIDS Housing Coalition

▲ Yes, We Can! Build Bridges Back to the HCH Medical Home after Mental Health Hospitalization | Burnham

Ensuring access to care from inpatient setting to outpatient medical home is challenging. Fragmented hospital discharge processes often result in preventable re-hospitalizations and overuse of resources, with additional stress and re-traumatization for homeless consumers - a "high need, high cost" population. A "Bridge" project uses Critical Time Intervention to increase access, patient-provider stability and positive peer support. Other features include interdisciplinary teamwork, increased hospital collaboration, and a mental health in-reach team that promotes the medical home with patients before discharge. Post-discharge continuity includes 'fast-tracking' patients using an outpatient 'Bridge to Care' group, treatment readiness preparation, and medication evaluation.

Faith Fusco, PCNS, BC, Psychiatric APRN, Duffy Health Center, **Susan Childs, CPS**, Community Health Worker, Duffy Health Center, and **Brian Diehl, LCSW**, Mental Health Therapist, Duffy Health Center

Oral Presentations | Roosevelt

▲ Why a Hospital would pay for Permanent Supportive Housing: An Innovative Partnership for Frequent ER Visitors between the Presenting Organization and Center of Housing for Health – 1:00 p.m.

The Better Health through Housing partnership between University of Illinois Hospital and Health Sciences System (UI Health) and the Center for Housing for Health is an innovative pilot program in Chicago, IL that provides permanent supportive housing to 25 high emergency room and in-patient hospital users that are experiencing homelessness. This presentation will focus on the development of, ongoing coordination, cost savings and health outcomes data of the program.

Stephen Brown, LCSW, Director of Preventive Emergency Medicine, University of Illinois Hospital, **Peter Toepfer**, Executive Director, Center for Housing and Health, **Abbie See, MS**, Support Services Coordinator, Center for Housing and Health and **Brandi G Calvert, MPH**, Director of Housing Special Initiatives and Strategy, Center for Housing and Health

◆ Health Care and Housing Access in Older Homeless Adults: Results from the HOPE HOME Study – 1:30 p.m.

We will present research findings on access to health care, use of the Emergency Department, and housing outcomes in older homeless adults. The presentation will present findings from the HOPE HOME Study, the only longitudinal study of older homeless adults. We will explore, for older homeless adults 1) changes in access to care after Medicaid expansion; 2) reasons for use of the ED, with a focus towards examining potential ways that improved engagement could reduce ED use; 3) housing outcomes, with a focus on examining barriers to rehousing. The presentation will be relevant to clinicians, advocates, and program leaders.

Margot Kushel, MD, Professor of Medicine, UCSF/San Francisco General Hospital

■ Serving up Dignity with Showers for the Homeless – 2:00 p.m.

Boston, MA has outreach services for shelter and basic medical and mental health services; however, access to bathing facilities has received less attention. In order to expand the research in this area and help inform possible solutions, a needs assessment was conducted to explore the quality/accessibility of showers. Objectives: 1) Identify barriers and facilitators that impact utilization of bathing facilities; 2) Identify physical health conditions associated with irregular personal hygiene; 3) Translate knowledge of bathroom/shower facilities and known barriers into a city map; 4) Share findings with relevant stakeholders. Structured interviews were conducted at the BHCHP medical respite facility in 2016.

Debora Perez, MPH, Student, Boston University School of Public Health

Friday, June 23 | 3:00 – 4:30 p.m.

● Building and Maintaining a Financially Stable Oral Health Program | Tiber Creek AB

This session will discuss strategies to begin or to expand oral health programs for the underserved. An experienced panel consisting of a CHC chief executive and a CHC dental director will share from their experience how to begin and/or manage a financially sustainable oral health program. Resources that are available to assist CHCs to expand their programs will be provided and described. Also, the panel will present strategies for more closely integrating primary health care and oral health care services. Strategies for both Medicaid expansion and non-expansion states will be presented.

Allen Patterson, CGMA, CPA, FACME, MHA, Chief Executive Officer, North Central Texas Community Health Care Center and **Scott Wolpin, DMD**, Chief Dental Officer, Eastern Shore Rural Health System, Inc.

▲ Collaborative Care: A Model for Improving the Health Outcomes of Homeless Formerly Incarcerated Women | Latrobe

Homeless formerly incarcerated women are a marginalized and underserved population that require a multi-disciplinary intervention to address their unique health needs. However, integrated community-based healthcare programs for this population are lacking. Without appropriate intervention, this population is at a heightened risk for chronic homelessness, poor health outcomes, and rearrests. This workshop will identify their needs, will critically examine the factors that impede access to appropriate care, and will introduce an innovative research-informed collaboration between a Federally Qualified Health Center for the homeless and a transitional housing program for formerly incarcerated women that provides a comprehensive, trauma-informed health and wellness program.

Andrea Link, MD, Program Manager, Healthcare for the Homeless Houston, **Alycia Welch, MPAff/MSSW**, Associate Director, Angela House, and **Vanessa Schick, PhD**, Assistant Professor, The University of Texas Health Science Center at Houston, School of Public Health

▲ Community Health Workers and Peer Support Workers in Homelessness and Health Services | Burnham

Community health workers (CHW) and peer support workers (PSW) deliver essential services and support to people who are homeless. Both roles engage individuals in care; assist them to access medical resources and insurance; educate them about their health conditions; and connect them to other community resources, such as housing. This workshop introduces participants to the similarities and differences between these roles and details their roles and responsibilities, recommends hiring and supervising practices, and presents strategies to integrate and support CHWs and PSW in HCH settings. This workshop will include presentations, examples from a range of work settings and discussion.

Julia Dobbins, MSW, Project Manager, National Health Care for the Homeless Council, **Rodney Dawkins**, NCAB Steering Committee Chair, Community Health Worker, Heartland Health Outreach, **Erin Hantke, MPH**, Associate Director, Refugee and Community Health Programs, Heartland Health Outreach, **Steven Samra, MPA**, Associate, Center for Social Innovation, and **Cheryl Gagne, ScD**, Senior Associate, Center for Social Innovation

Session VII: Workshops & Oral Presentations

Friday, June 23 | 3:00 – 4:30 p.m.

▲ **Joining Strengths: Collaboration between SFFD, SFHOT, and Sobering | Franklin Square**

While San Francisco has many services for people experiencing homelessness, there is a small subset of individuals who are still disconnected from care and who utilize a disproportionately high number of emergency medical services. We have created a unique collaboration in San Francisco between three agencies with frequent contact with these complex clients: the San Francisco Sobering Center, an EMS team (EMS-6), and the Homeless Outreach Team. Our novel model incorporates basic medical services, substance use services, intensive case management, and street outreach to decrease emergency department utilization, connect clients to appropriate levels of care, and improve their overall health.

Megan Kennel, MSN, RN, PHN, Registered Nurse, SF Department of Public Health/ Sobering Center, **Kathleen Lee**, Outreach Specialist, SF Homeless Outreach Team, and **April Bassett, EMT-P**, Paramedic Captain, SF Fire Department/ EMS-6

■ **The 5Ps to Building Accountable Collaborations to Improve Health Care Delivery: Partnerships, Person-centeredness, Pitch, Payment, and Performance | Farragut Square**

To thrive in a changing delivery landscape, accountable collaborations are needed to provide an enhanced level of patient care. This session will describe the formation of a cross-sector SDH Hub that targets high costs, high needs homeless populations discussing strategies such as: formalizing and sustaining partnerships; pitching the model to the funder; developing a person-centered, integrated care approach; substantiating the payment model; and building data systems to track performance metrics. This session will also describe the importance of the SDH Hub program in creating scalable baseline infrastructure to be ready to participate in value-based Medicaid payment reforms.

Mary Takach, MPH, RN, Senior Health Policy Advisor, Boston Health Care for the Homeless Program and **Barry Bock, RN**, CEO, Boston Health Care for the Homeless Program

● **The Consumer Engagement Trifecta: Recruitment, Engagement, and Leadership | Bulfinch/ Renwick**

Building on the foundation of consumer engagement central to HCH, organizations are moving beyond basic models of engagement towards partnerships that facilitate leadership development. This workshop will explore three key phases of this work: recruitment, engagement, and leadership development. We will discuss low-barrier options for any project to recruit and engage consumers; strategies for retaining consumers in the work (developing activities that people are passionate about, spaces that people want to come back to, and necessary organizational supports); and creating structures that encourage the development of skills and decision making processes that give consumers a meaningful role in genuine leadership.

Gary Cobb, Community Outreach Coordinator, Central City Concern, and **Joseph Benson, CHW**, Community Health Worker, Health Care for the Homeless Houston

Friday, June 23 | 3:00 – 4:30 p.m.

● The HRSA Operational Site Visit: Recent Updates and “Hot” Issues | Lafayette Park

Over the last few years, HRSA has significantly increased its scrutiny of health centers' compliance with the 19 health center program requirements through the on-site OSV process. Because potential consequences of non-compliance can be significant, it's crucial that health centers prepare before the review team is on-site. This session will walk participants through the OSV process and address some of the nuances of the Program Requirements and key “hot button” concerns from legal, financial and operational perspectives. Join NACHC's counsel and nationally-recognized expert in health center operation/ finance in exploring some challenges and solutions to, common high risk areas.

Marcie Zakheim, Esq., Partner, Feldesman Tucker Leifer Fidell LLP and **Warren Brodine**, President, W. J. Brodine & Co.

▲ The Role of Health Plans in the Continuum of Housing & Health Care | Cabin John/Arlington

Come learn how CareOregon, a Medicaid/Medicare plan has aligned clinical work with housing and social determinant interventions. By articulating acute conditions and outcome measures for member health, CareOregon has built a robust spectrum of services for members experiencing various stages of housing crisis. The health plan will present on explorations of programming that includes homeless outreach, respite care, housing case management for complex medical patients, supportive outreach for those in unstable housing, and interventions to help elders age at home. Member perspective and program lenses will be presented.

Rose Englert, Sr. Business Leader Community Health Innovations, CareOregon, **Pam Hester**, Health and Housing Program Manager, CareOregon, and **Diane Myers**, Community Health Engagement Advocate, CareOregon

▲ Implementing social determinants of health screening into practice and the role of quality improvement | Constitution CDE

Take a deep dive into the impact of social determinants of health (SDH), health inequity, and the importance of screening for and addressing SDH. This process will be examined by reviewing the multidisciplinary journey a CHC/ HCH organization took to implement the PRAPARE tool into the electronic health record, develop a work flow, how to gather the data, and address the barriers identified.

Courtney Pladsen, MS, FNP-BC, RN, Homeless Outreach Provider, Social Determinants of Health Quality Improvement Lead, Unity Healthcare and **Ryan Buchholz, MD, FAAP**, Medical Director for Quality Improvement, Unity Healthcare

Oral Presentations | McPherson Square

◆ Financial Incentives for Smoking Abstinence in Homeless Smokers: A Pilot Randomized Controlled Trial – 3:00 p.m.

This presentation will describe the design and results of a pilot randomized controlled trial examining the impact of financial incentives on smoking abstinence in homeless cigarette smokers. Participants assigned to the financial incentives arm received escalating monetary rewards for exhaled carbon monoxide-verified smoking abstinence. Compared to the control group, financial incentives arm participants had 7-fold higher odds of smoking abstinence over 8 weeks of follow-up, with no increase in drug or alcohol use. We conclude by considering the opportunities and challenges related to scaling up this promising approach to smoking cessation in a homeless health care setting.

Awesta Yaqubi, Clinical Research Coordinator, Massachusetts General Hospital, Division of General Internal Medicine, **Claire McGlave, BA**, Clinical Research Coordinator, Tobacco Research and Treatment Center, Division of General Internal Medicine, Massachusetts General Hospital, **Nancy A. Rigotti, MD**, Professor of Medicine, Tobacco Research and Treatment Center, Division of General Internal Medicine, Massachusetts General Hospital and Department of Medicine, Harvard Medical School, **Yuchiao Chang, PhD**, Assistant Professor of Medicine, Tobacco Research and Treatment Center, Division of General Internal Medicine, Massachusetts General Hospital and Department of Medicine, Harvard Medical School, **Stephen T. Higgins, PhD**, Professor of Psychiatry and Psychology, Vermont Center on Behavior and Health, University of Vermont, and **Travis Baggett, MD, MPH**, Assistant Professor of Medicine, Tobacco Research and Treatment Center, Division of General Internal Medicine, Massachusetts General Hospital; Department of Medicine, Harvard Medical School; and Institute for Research, Quality, and Policy in Homeless Health Care, Boston HCH Program

◆ Are We Losing Consumer Voice in Data Sharing and Integration Efforts? Case Study: A Health Care for the Homeless – 3:30 p.m.

Technological and scientific advances are now making it easier to create connected information systems and better integrate data across multiple sectors and agencies. These advancements hold great promise in our ability to improve access to care, achieve health equity, and lower health care costs with homeless individuals and families. However, these advancements also have the potential to alienate consumer voice if we are not intentional in keeping first-hand experience at the center of our efforts. Health care for the Homeless Network of King County will share relevant experiences from their recent community needs assessment.

Lee Thornhill, Social Research Scientist, Public Health - Seattle & King County

▲ Access Street Feet – 4:00 p.m.

During this 30-minute session, Laura Roehrick RN, CFCN will be presenting an 18-minute “TED style talk”, detailing her vision of how to help reduce global diabetic amputation rates by the development of foot care training centers within facilities which provide services for the homeless. To support these training centers, her vision includes a web based virtual training program to provide didactic components to the program. Also, ideas for creating “sister” foot care clinics between the homeless training clinics and clinics in developing countries will be explored. There will be 12 minutes for Q & A and networking!

Laura Roehrick, RN, CFCN, Founder, International Foot Care Alliance

Saturday, June 24 | 8:30 a.m. – 12:30 p.m.

▲ Equity in Substance Use Disorder Treatment | Independence BC

Learn new strategies from our community with complex pain substance use disorders across the safety net in Los Angeles County. This workshop will discuss real-world strategies to champion substance use disorder treatment and pain management in resistant organizations. Hear strategies to support individual clinicians, clinics, and systems to provide quality care where there is “no wrong door”

Rebecca Trotzky, MD, Director of Urgent Care and Continuity Services, Los Angeles County - University of Southern California

● Mobilizing Communities and Health Leaders to Prevent and Reduce Violence | Latrobe/Bulfinch

Violence is a devastating problem with both immediate and long-term effects. Exposure to violence negatively impacts health outcomes and has been linked to increases in chronic diseases, mental health disorders, and risk of perpetrating violence. People have the right to access safe environments, health resources, and violence-free lives. This session will cover violence as a health issue and epidemic as well as train attendees on community violence prevention and intervention models.

Shannon Cosgrove, MHA, Director of Health Policy, Cure Violence and **Johnnie Williams**, GRASP Enterprises Director/AIM Outreach, Gang Rescue and Support Project

● Board Requirements and Beyond: How to Build an HCH Board that Meets Requirements and Exceeds Expectations | Farragut/Lafayette

Participants will review and discuss 1) key areas of Board Governance including best practices for how to meet HRSA Requirements as outlined in the latest guidance (Draft Compliance Manual), and 2) strategies for how to build the best board possible. Session will include discussions and activities around processes for the recruitment and retention of quality board members, effectively engaging consumers, on-boarding new board members, improving effectiveness, and evaluating impact. Session will allow participants from a variety of types of HCHs to connect with programs similar to theirs (i.e. public entities, stand-alone HCHs, larger CHC/HCHs) through implementation of group activities throughout the learning lab.

Jennifer L. Metzler, MPH, Executive Director, Albuquerque Health Care for the Homeless, Inc., **David Modersbach, BA**, Special Programs, Alameda County Health Care for the Homeless Program, **Amy Sparks, MA**, Director of Homeless and Behavioral Health Services, Alabama Regional Medical Services and **Vincent Keane, Mdiv**, President & CEO, Unity Health Care, Inc.

▲ Traumatic Brain Injury Learning Lab | Independence DE

Traumatic Brain Injury (TBI) is often misdiagnosed as behavioral health issues, and many HCH health center grantees do not routinely screen for TBI. This Learning Lab will be an interactive, skill building session focused on how clinicians can implement the Council’s newly released Adapted Clinical Guidelines on the Diagnosis and Treatment of TBI for Unstably Housed Patients. Please note: pre-work for this Learning Lab will be required.

Carolyn Lemsky, PhD, Psych ABPP-CN, Clinical Director, Community Head Injury Resource Services

● Fostering Trauma-Informed Leadership Skills for Consumers | Independence HI

Organizations have started moving beyond consumer engagement to consumer leadership, working to achieve true shared roles within organizations. In order to support this growth, we must empower consumers and teach the skills needed to assume responsibility for CABs and other consumer-focused spaces in trauma-informed ways that create safe and respectful environments. This three-part training will walk through the basics of trauma itself, outline the principles and practices behind trauma-informed care, and share strategies and tools to maximize trauma-informed skills and atmospheres created by and for consumers.

Rodney A Dawkins, NCAB Chair, Heartland Health Outreach, **Joanne Guarino**, NCAB Regional Representative, Boston Health Care for the Homeless Program, **Valarie B Dowell, BA**, NCAB Co-Chair, Cincinnati Health Network, **Amy Grassetto**, OB Scheduler, Family Health Center, **Keith Belton**, NCAB Regional Representative, Heartland Health Outreach, **Joseph Benson, CHW**, Community Health Worker, Health Care for the Homeless Houston, **Kandi Lea Patterson**, NCAB Member at Large, San Francisco Department of Public Health, **David Peery, JD**, NCAB Regional Representative, Camillus Health Concern, **Deidre Young**, NCAB Regional Representative, Health Care for the Homeless Houston, and **Katherine Cavanaugh, MSW**, Organizer, Consumer Advocate, National Health Care for the Homeless Council

▲ Caring for People Experiencing Homelessness Facing End of Life | Franklin/McPherson

The number of older adults without homes is expected to increase to 95,000 in the United States by 2050. Health Care for the Homeless programs have already seen a 51% increase in the number of patients age 50 or older between 2008 and 2014. Drawing on the Council's recently developed adapted clinical guidelines, this Learning Lab will offer recommendations on a variety of issues related to end of life care for people experiencing homelessness, including pain management, alternative therapies, advance directives, and the role of medical respite. Participants will gain tools and skills to support their patients' preferences, improve care to prevent unnecessary suffering, and assist staff in coping with the experience of caring for people at the end of life.

Adele O'Sullivan, MD, Founder & Chief Executive Officer, Circle the City and **Melissa Sandoval, MD**, Medical Director, Circle the City

■ Implicit Bias as a Barrier to Health Care and Health Equity | Independence FG

Have you ever wondered why sometimes our thoughts don't match our actions? Through a combination of didactic lecture, video clips, interactive exercises, and discussion, participants will learn more about implicit bias and how it affects our everyday lives, such as in criminal justice, employment, health care, housing, and media. Most importantly, participants will be equipped with tips and debiasing techniques for combating implicit bias as a strategy for reducing disparities in health and health care and promoting health equity.

- Explore how implicit bias works in our everyday lives
- Recognize microaggressions, microassaults, microsinsults, and microninvalidations
- Examine implicit bias as a contributing factor to health and healthcare disparities
- Take away tips and debiasing techniques for addressing implicit bias

Cheri Wilson, MA, MHS, CHPQ, Independent Consultant

A Road to Wellness: Building a Unique Federally Qualified Health Center

Darlene Brown, Health and Wellness Coach, Lifelong Medical Care- TRUST Health Center, **Emily R. Seck**, Health and Wellness Coach, Lifelong Medical Care- TRUST Health Center, and **Elaine Colon**, Medical Receptionist, Lifelong Medical Care- TRUST Health Center

Leveraging the Maternal and Child Health Services Block Grant to Support Pregnant Women and Moms Experiencing Homelessness

Emily Eckert, Analyst, Health Reform Implementation, Association of Maternal & Child Health Programs

The Impact of Behavioral Health Counseling during Primary Care Visits on Patient Flow and Access at an Integrated Health Clinic

Nancy Elder, MD, MSPH, Medical Director / Professor of Family Medicine, Cincinnati Health Network / University of Cincinnati, **Max Schwarzer**, Student, Lewis and Clark College, and **Brian VanderHorst**, Chief Operating Officer, Cincinnati Health Network

Cognitive Function and the Prevalence of Traumatic Brain Injuries in the Homeless Population

Corinne Feldman, PA-C, Assistant Professor, DeSales University, **Kathleen Galligan**, Physician Assistant Student, DeSales University, and **Louise Marquino**, Physician Assistant Student, DeSales University

Dental Care for the Homeless and Uninsured: Wherever You Are

Melissa Aurora, Access to Care Coordinator, Community Health Center, Inc. and **Douglas Janssen, JD**, Outreach Coordinator, Community Health Center, Inc.

A community-based accompaniment model for ART delivery at a free clinic for the homeless

Kathryn Johnson, DO, MA, Psychiatry Resident PGY-4, Virginia Tech Carilion School of Medicine - Carilion Clinic, **Christian Neal, MD, MPA**, Attending Physician - Community Psychiatry Track, Virginia Tech Carilion School of Medicine - Carilion Clinic, and **Helen Ferguson, MPH**, Director of Programs, Rescue Mission Ministries, Inc.

An Evidence-Based Outcomes Model for Evaluating Health Care Access, Spirituality, and Self-Sufficiency in Faith-Based Addiction Recovery

Mary Lashley, PhD, RN, PHNCS, BC, Professor, Towson University

One-year health outcomes of a nurse-managed chronic disease care coordination model in homeless populations

Lena Petersen, RN, Registered Nurse, Care for the Homeless, **Tessa Williams**, Nursing Student Intern, Program Manager, Care for the Homeless, **Katrina Ramos**, Nursing Student Intern, Care for the Homeless, **Samantha Torres**, Nursing Student Intern, Care for the Homeless, **Yabi Amparo**, Social Worker, Care for the Homeless, **Georgina Statuto, RN**, Clinical Coordinator, Care for the Homeless, and **Regina Olasin, DO**, Chief Medical Officer, Care for the Homeless

Get your money and get out: a collaboration to facilitate discharges from state psychiatric hospitals by integrating HCH SOAR services

Bilqis Rock, LCSW-C, SOAR Coordinator, Health Care for the Homeless and **Emily N. Gordon, LGSW**, Disability Assistance Outreach Specialist, Health Care for the Homeless

High-Risk for Mortality Criteria and Rough Sleepers: 10-year study of high-risk unsheltered adults from Boston

Jill Roncarati, ScD, MPH, PA-C, Research Fellow, Harvard T.H. Chan School of Public Health & BHCHP

Homelessness and Hunger among University Students: Collaboration between University and HCH Clinic

Christine Stevens, MPH, PhD, Associate Professor, University of Washington Tacoma and **Kim Morrison**, HCH Clinic Director, Metropolitan Development Council

A Closer Look at Integrating Peer Work into a Healthcare Practice

Lynnette Verges, LCSW-R, Director of Social Work, Care for the Homeless and **Tracy Mack**, Outreach Site Relationship Manager, Care for the Homeless

The Impact of Opioid Prescribing Guidelines and EMR Supports at Boston Healthcare for the Homeless Program

Gabriel Wishik, MD, MPH, Site Medical Director, Boston Health Care for the Homeless Program, **Lena Julia P. Cardoso**, Research Assistant, Boston Health Care for the Homeless, and **Jessie Gaeta, MD**, Chief Medical Officer, Boston Health Care for the Homeless

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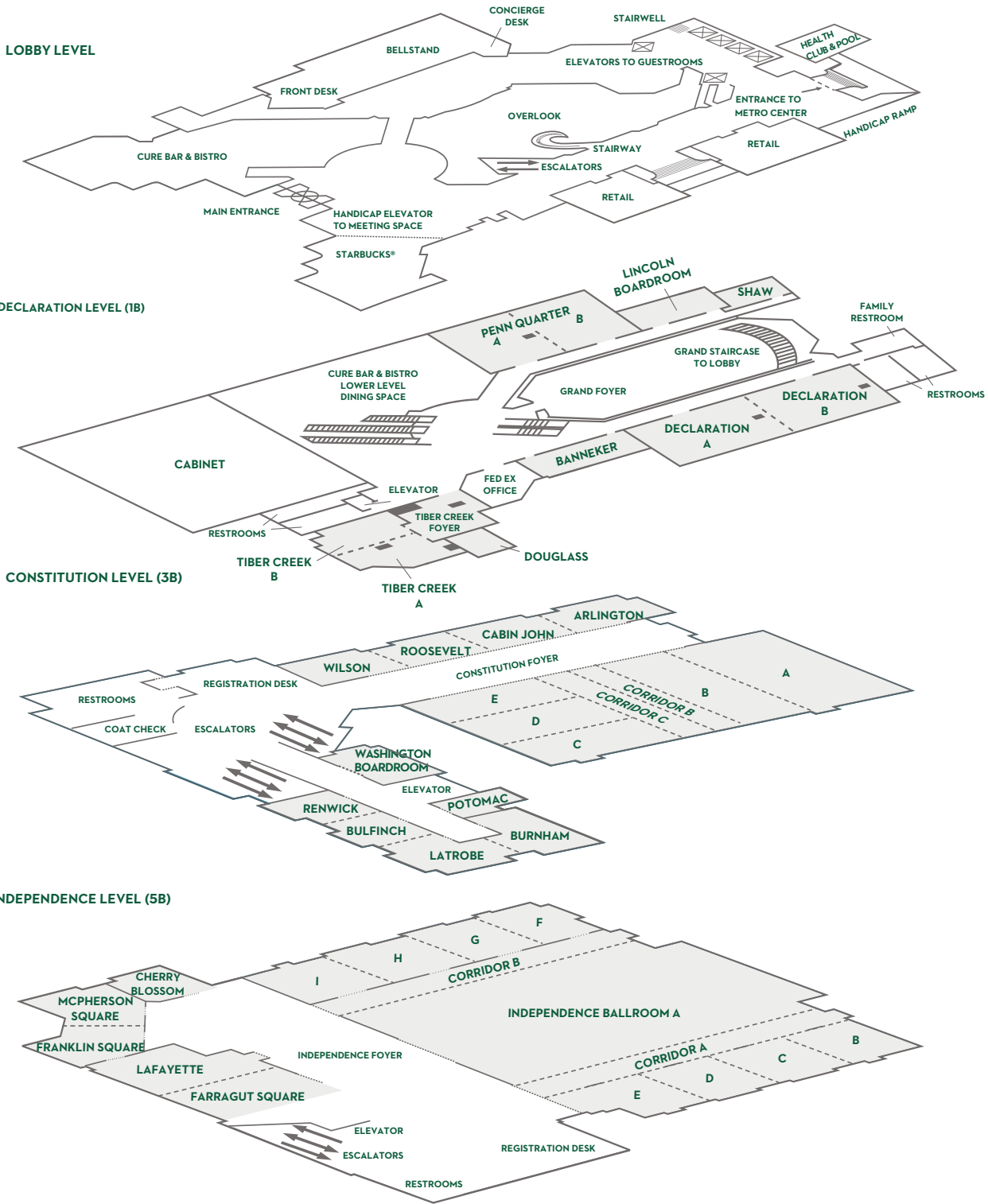
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