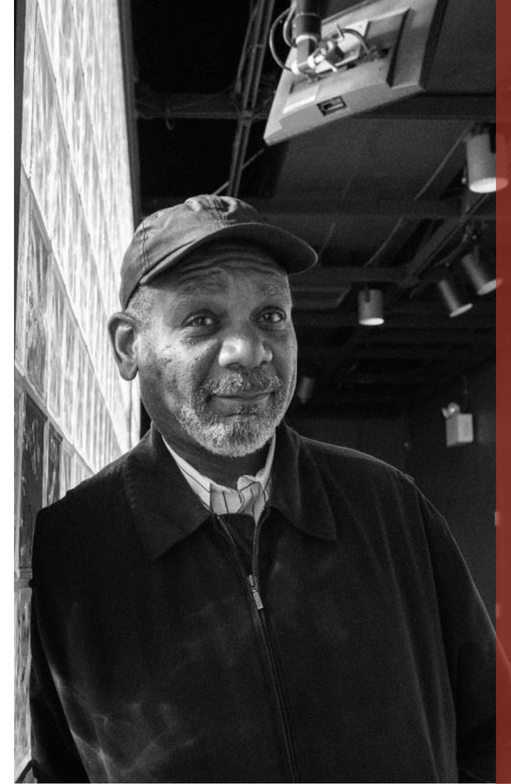

Integrated Care & Housing First

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Learning Objectives

- Define the role of Integrated Care in the Housing First model
- Discuss strategies for conducting participant needs assessments and matching appropriate medical and behavioral health care services to level of need
- Describe the role of telehealth in meeting the needs of high needs program participants

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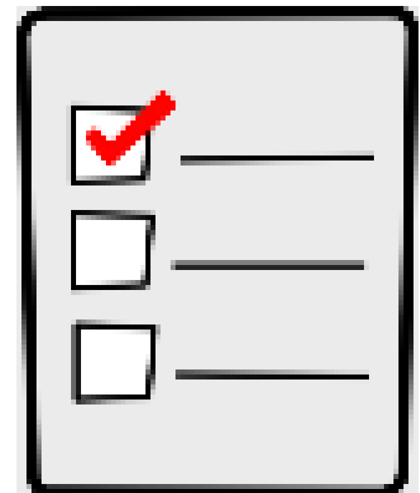
Today's Agenda

- What is Integrated Healthcare?
- Meet the Integrated Care team
  - Case study and questions
- Communication and Support planning
  - Case study and questions
- Best Practices and Next Steps



The Basics of Integrated Care

Integrated Healthcare: Beyond the Medical

- Participant-centered
- Intentional provider coordination
- Holistic perspective
- Proactive/responsive blend
- Housing First-informed

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Medical Clinic

- On-site, partnership with Project HOME Healthcare Services
  - Federally Qualified Health Center status through HRSA
  - Staffing
    - Clinic Practice Manager
    - Medical Assistants
    - Behavioral Health Consultant
    - Clinic Nurse Care Manager
    - Primary care providers:
      - Nurse Practitioners
      - WOC Certified NP
      - Physicians

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Medical Clinic

- PTHPA team nurses coordinate medical care for shared patients
- Clinic walk-in hours mirror PTHPA open office hours for participants
- Service Provision
  - In-office
  - Community
  - Home visits
  - Telehealth
  - Hospital care
  - Specialty care

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MOUD Supports

Medication for Opioid Use Disorder (MOUD) Program

- Collaboration with Project HOME & Prevention Point
- Center of Opioid Excellence (COE) designation
- Low Threshold Model
  - Same Day Entry
  - Home Induction
  - Harm Reduction Approach
  - Non-Traditional Settings
  - Flexible Programming

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Center of Excellence

- Spanning 4 geographies critically impacted by the opioid epidemic
- Enhancing community-based services already provided to individuals with substance use disorders to provide additional treatment and support services.
- Increase access and adherence to MOUD
- Diverse group of providers including; Licensed Clinical Social Workers, counselors, Certified Recovery Specialists, nurses, peer navigators, care managers, and physicians

Sublocade

- Long acting injectable buprenorphine (sublocade)
- Micro, standard and macro induction methods
- Typically prescribed with 300mg induction dosing and 100mg maintenance
  - The Integrated Care Clinic provides 300mg maintenance injections
- Incentivized pilot program
  - $50 visa gift cards per injection for 6 consecutive months

Ancillary Supports

Technology

- GrandPad
- Implementing automatic medication dispensers for our most vulnerable participants struggling with medication adherence
- Remote blood pressure monitoring
- Amazon RING products
- Additional MCO contract agreements

GrandPad®

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Behavioral Health Department

- Initial, ongoing and crisis care
- Referrals and collaboration
- Staffing
  - Psychiatrists embedded with teams
  - Psychiatric Nurse Practitioner
  - Therapist serves across teams
  - Telehealth and home visits

Case Management Teams

- Support with medication, appointments, crisis care (24/7 on call)
- Nurses embedded with teams
- Medical case managers
- Substance use specialists
- Forensic liaison
- Employment liaison
- Certified Peer Specialists

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Additional Integrated Care Supports

- Health Services Navigator
- Vocational Specialist
- Community Inclusion Department
- Housing Department
- Outside agencies

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“Alex”

- 63 y/o female with diagnoses of severe alcohol use disorder and generalized anxiety disorder
- Housed by Pathways (PTH) yet visited Emergency Department (ED) frequently
- Integrated Care analysis of PTH ED visits from 10/21-9/22:
  - 405 total ED visits by PTH participants
  - 123 total ED visits by Alex
- Case management, clinic, behavioral, health services navigation responses
- Drastic reduction in ED visits, improved stability in home

Communication

- Clinic
  - Morning huddle, weekly integrated care rounds, weekly MOUD rounds, integrated care partnership leadership meetings
- Teams
  - Morning rounds, monthly medical rounds
- Behavioral health
  - Attend rounds, telemedicine as needed
- Case conferences
- Text/email threads for care coordination

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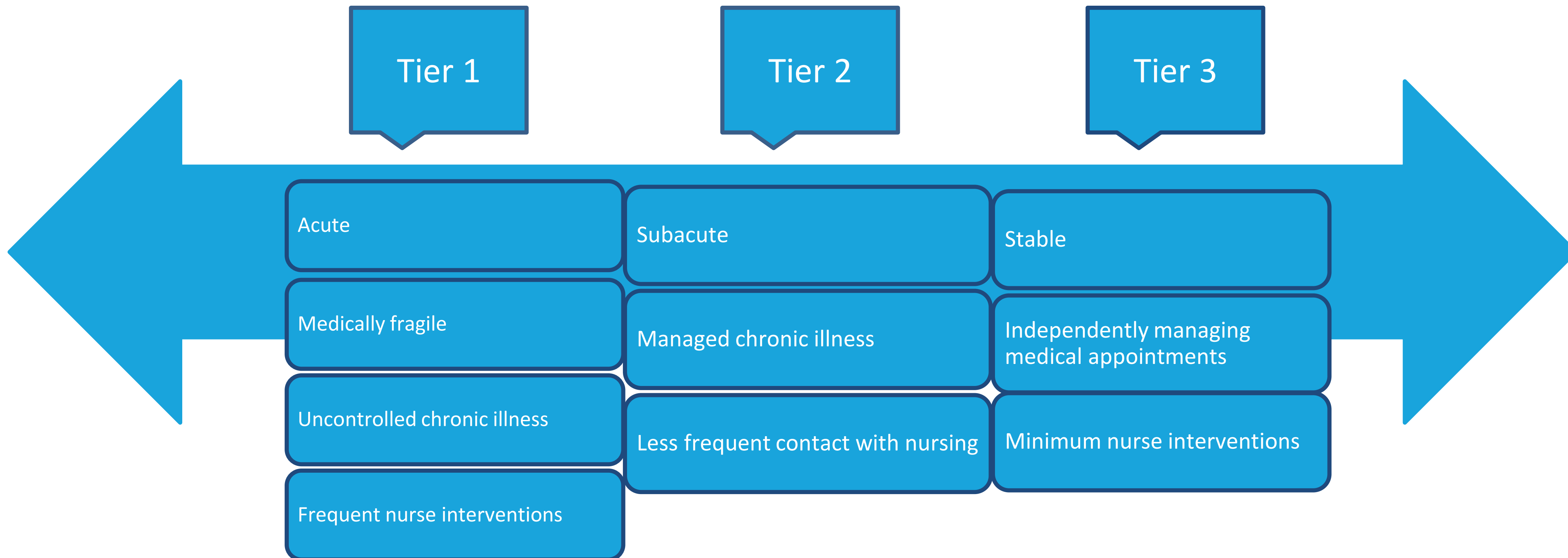
Medical Tiers

Medical Tier System

- Determined by team nurse in consultation w/integrated care clinic
- Based on initial/annual nursing assessments and ongoing evaluation of health status
- Tier designation is revisited monthly
- May change based on acute or emerging needs
- Informed by behavioral health/social needs to determine frequency of contact
  - Housing status, substance use, behavioral health needs, social supports

Medical Tier System for Participants



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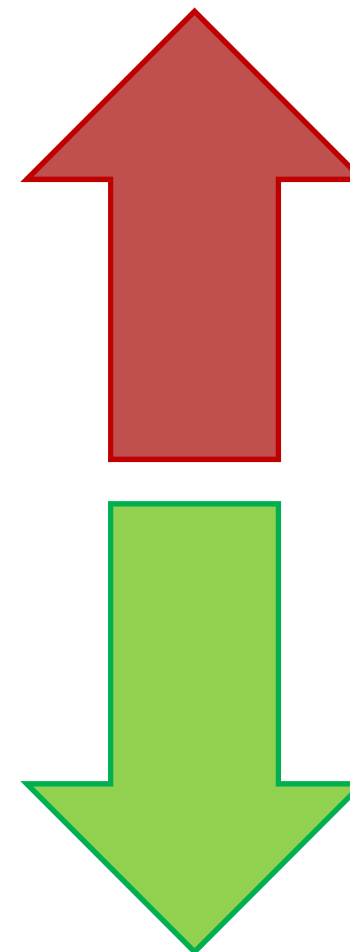
Getting Started with Tiers

- **Medical Needs Assessment**
  - Acute or untreated medical conditions
  - Recent change in functional status
- **Behavioral Health Assessment**
  - Stability and connection to care
  - Recent 201 or 302s
  - Current substance use
- **Housing status**
  - Relations with neighbors and neighborhood
  - Maintenance or safety concerns



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“Adrian”

- 48 y/o male w/ history of IV & intranasal opioid use (heroin/fentanyl), as well as cocaine & K2 use
- Reports long history of familial trauma and anger management concerns when using
- attempted Suboxone MAT at different outpt programs; reported often selling films to fund continued substance use
- was evicted/temporarily lost housing due to K2-fueled confrontations with neighbors
- Requested transitioning to our PTH Clinic for integrated primary and MAT care
- Seen on biweekly basis for suboxone; also able to manage HIV care and treat Hep C reinfection during visits

“Adrian”

- Presented to clinic escalated when using K2; BHC routinely engaged during clinic visits; coordinated w/ psychiatrist to also meet biweekly
- Team worked to support toward inpatient dual diagnosis treatment
- upon discharge from inpatient treatment, team supported directly to clinic where he received long acting injectable buprenorphine (Sublocade)
- Sublocade intervention supported stabilization regarding use (gradual decrease in use, increased motivation to attend IOP and psychiatric appt follow up, and employment)
- Team was able to advocate for rehousing w/ stabilized behavior
- Now maintaining apt, employment, and OP, regular Sublocade, primary care, psych follow up

Conclusion

Continuous Improvement

- Project HOME Street Medicine program working with PTHPA engagement cases to support toward primary care early on
- Integrating electronic health records and/or healthcare-specific care coordination tools
- Population health management
- 340B Program with neighborhood partner pharmacy
- Level of care transitions

What are your next steps?

Integrated Care Brainstorm

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Best Practices Review

- Promote/normalize continuous communication
- Schedule regular small-group meetings/huddles, reporting out essentials to larger team
- Warm handoffs as standard practice
- Streamline electronic communications
- Minimize physical barriers between offices/departments
- Emphasize a team approach and support team members' work within their area of expertise
- Use a harm reduction, patient driven approach

References

- Alford, D., LaBelle, C., Richardson, J., O'Connell, J., Hohl, C., Cheng, D., et al. (2007). Treating homeless opioid dependent patients with buprenorphine in an office-based setting. Journal of general internal medicine, 22(2), 171-176.
- Araujo de Carvalho, I., Epping-Jordan, J., Pot, A. M., Kelley, E., Toro, N., Thiyagarajan, J. A., & Beard, J. R. (2017). Organizing integrated health-care services to meet older people's needs. Bulletin of the World Health Organization, 95(11), 756-763. doi:10.2471/blt.16.187617
- Bachhuber, M., Thompson, C., Prybylowski, A., Benitez MSW, J., Mazzella MA, S., & Barclay, D. (2018). Description and outcomes of a buprenorphine maintenance treatment program integrated within Prevention Point Philadelphia, an urban syringe exchange program. Substance abuse, 39(2), 167-172.
- Bhatraju, E., Grossman, E., Tofighi, B., McNeely, J., DiRocco, D., Flannery, M., et al. (2017). Public sector low threshold office-based buprenorphine treatment: outcomes at year 7. Addiction Science & Clinical Practice, 12(1), 7.
- Carter, J., Zevin, B., & Lum, P. (2019). Low barrier buprenorphine treatment for persons experiencing homelessness and injecting heroin in San Francisco. Addiction science & clinical practice, 14(1), 20.
- Doorley, S., Ho, C., Echeverria, E., Preston, C., Ngo, H., Kamal, A., et al. (2017). Buprenorphine shared medical appointments for the treatment of opioid dependence in a homeless clinic. Substance abuse, 38(1), 26-30.

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References

- Druss, B. G., Von Esenwein, S. A., Glick, G. E., Deubler, E., Lally, C., Ward, M. C., & Rask, K. J. (2017). Randomized trial of an integrated behavioral health home: The health outcomes management and evaluation (home) study. American Journal of Psychiatry, 174(3), 246-255. doi:10.1176/appi.ajp.2016.16050507
- Haddad, M. S., Zelenev, A., & Altice, F. L. (2013). Integrating buprenorphine maintenance therapy into federally qualified health centers: Real-world substance abuse treatment outcomes. Drug and Alcohol Dependence,131(1-2), 127-135.
- Hsu, Y.-J., Marsteller, J. A., Kachur, S. G., & Fingerhood, M. I. (2019). Integration of Buprenorphine Treatment with Primary Care: Comparative Effectiveness on Retention, Utilization, and Cost. Population Health Management, 22(4), 292–299.
- Schaps, Margie & Post, Sharon, *Best Practices in Behavioral-Physical Health Integration: A Working Paper for the Behavioral Health Integration Learning Collaborative*, Health & Medicine Policy Research Group, July 2015.
- Smith, T. E., Erlich, M. D., & Sederer, L. I. (2013). Integrated care: INTEGRATING general medical and behavioral health care: The New York State Perspective. Psychiatric Services, 64(9), 828-831. doi:10.1176/appi.ps.201300197
- Tsemberis, S. J. (2010). *Housing first manual: The Pathways model to end homelessness for people with mental illness and addiction.* Center City, MN: Hazelden.

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