Upstream Homelessness Prevention and Diversion

Working Together to End Homelessness

Kettering Health Network

Homefull

Background

- High Profile shared clients
- Frequent flyers
- System silos
- Not sharing information
- Mission centered organizations

General Overview

- Why
  - To reduce hospital readmissions
  - To reduce discharges to homelessness
  - To improve coordination between Grandview Psych Unit and the homeless system
- When
  - May 2018
- Amount
  - $15,000 initial and additional $15,000 to complete a year
- How:
  - Homefull staff onsite 3 days per week to work as part of the Grandview team
- Target population
  - Those who identify as homeless upon admission
  - Those with multiple hospitalizations (frequent flyers)
  - High Profile Homeless

Notable demographics

- 111 Individuals
  - 1 youth
  - 64 Males
  - 47 Females
  - 10 Veterans
  - 46% between 45-61 years old
  - 100% Severe and Persistent Mental Illness
  - 38% Dually Diagnosed with Addiction Disorders/Mental Illness
  - 58% Chronic health and physical disabilities
  - 14% Developmental Disabilities
  - 43% Zero income (100% were below poverty line)
  - Of those with income 83% report their source as SSI/SSDI
  - 95% had Medicaid/Medicare

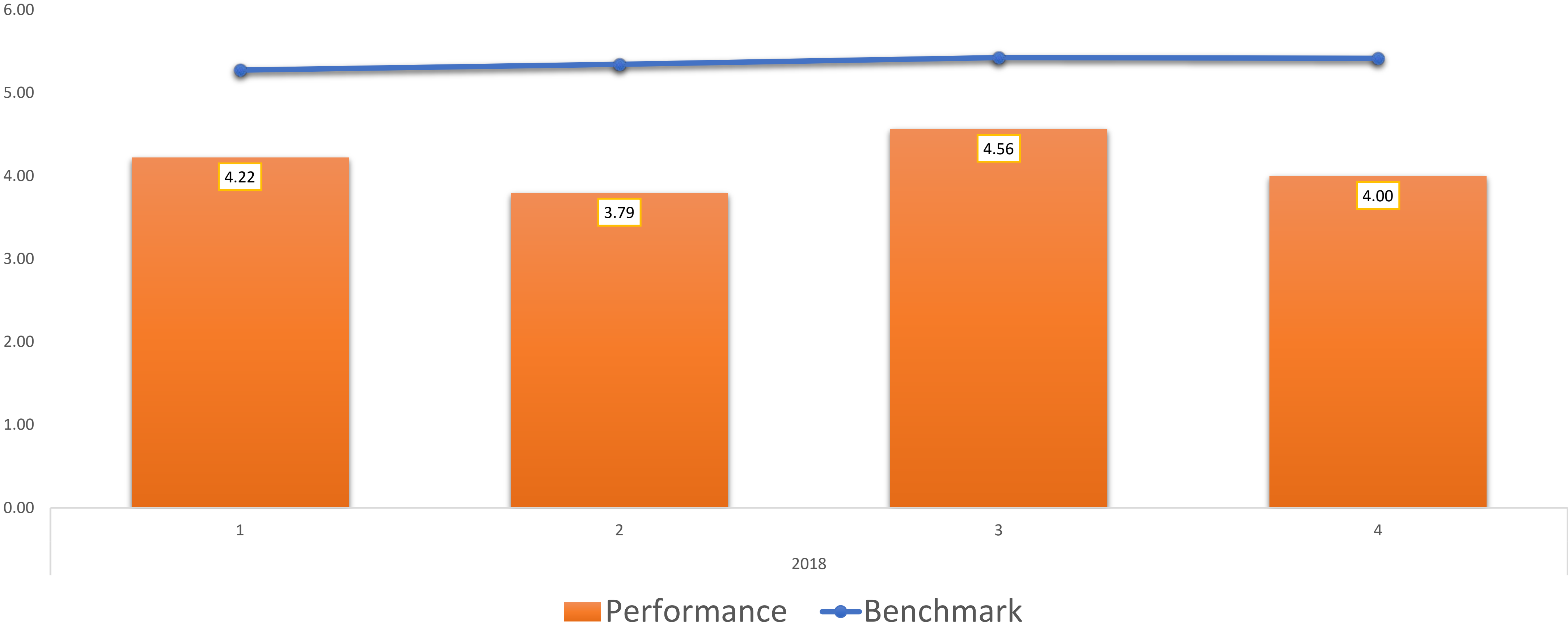
What we did together

- Full integration of Homefull staff into the Grandview Team
- Cross training between healthcare and homeless systems
- Coordination of homeless system resources
- Referrals to homeless programs
- Facilitated appropriate discharge placements to group homes, nursing homes, Veterans Services, and long term treatment
- Shared critical client information regarding homelessness history
- Advocacy for appropriate housing discharge based on level of care
- Negotiated with family and friends for safe housing when appropriate

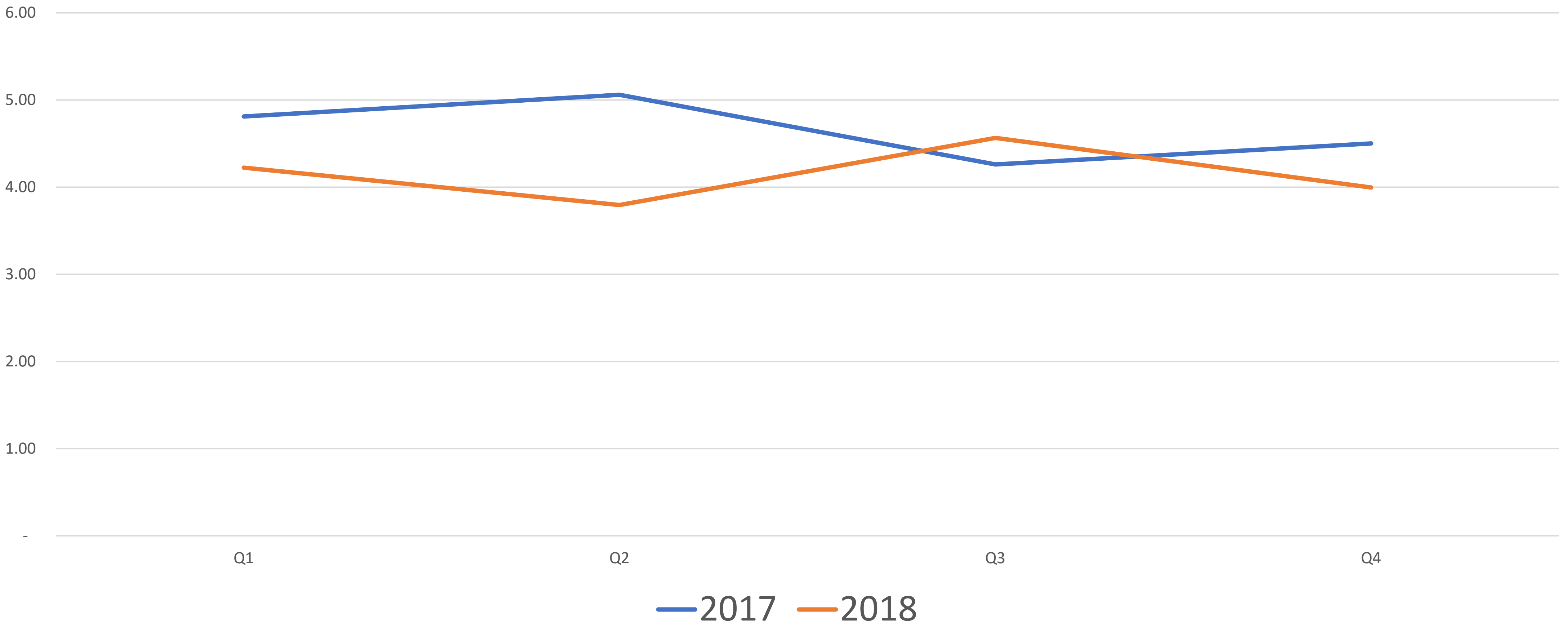
Outcomes

- 78% Exited to a Positive next step Housing destination
  - 42% Exited to Permanent Housing Programs for Homeless
  - 23% Exited to Long Term Health Care Facilities
  - 12 returned safely to family or friends
- Hospital Readmissions and ALOS impacts

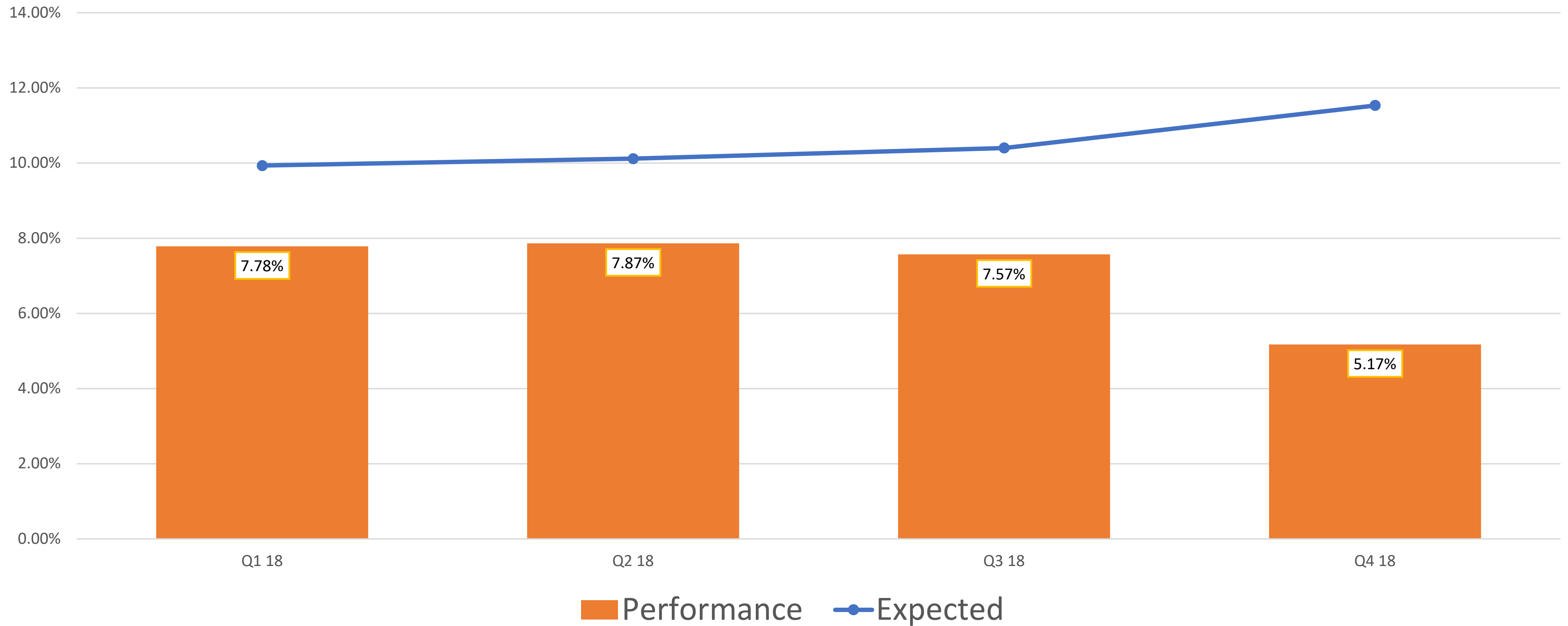
ALOS (average length of stay (Days)



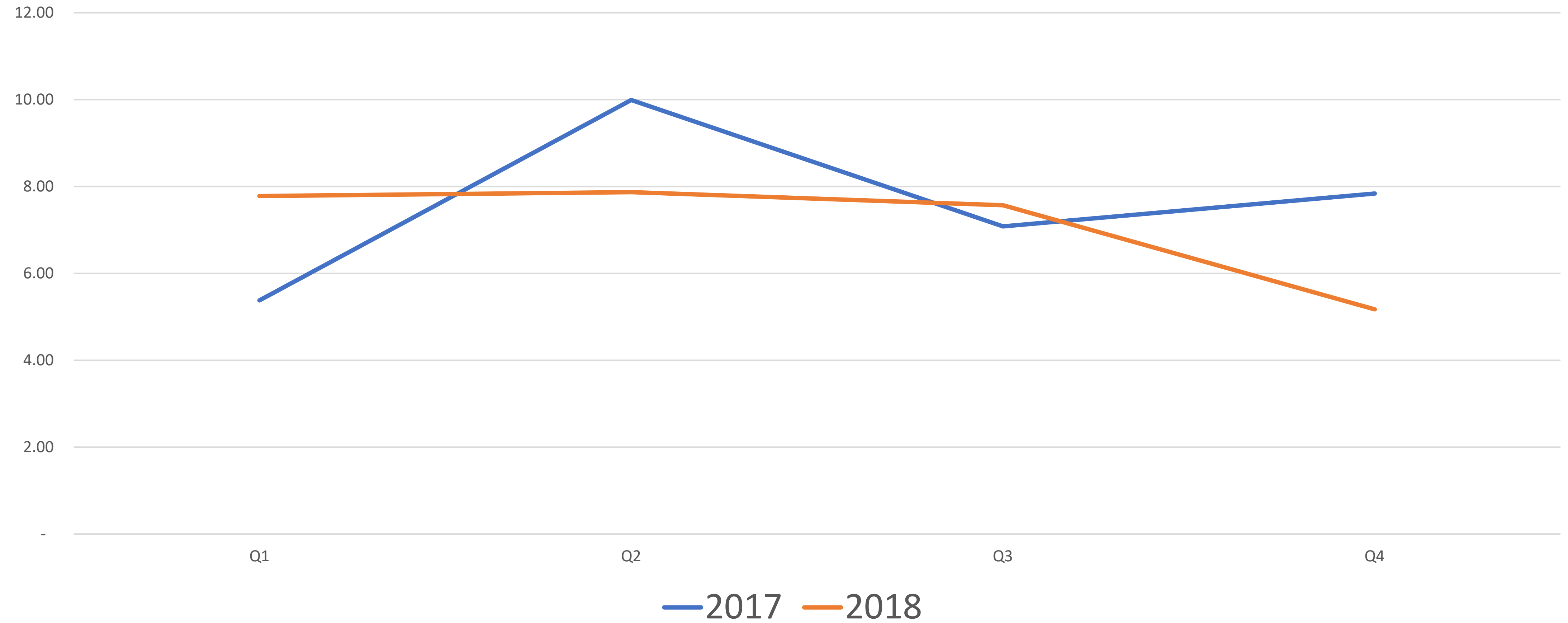
ALOS Comparison 2017 to 2018



Readmission Rate Performance



Readmission Comparison 2017-2018



Next Steps

- Implement the project system wide
- Replicate the project in other hospitals in Dayton and Montgomery County
- Study the financial impacts of reduced readmissions

Thank you