

August 21, 2018

MEMO TO HCHN Governance Council:

Welcome to Health Care for the Homeless Network (HCHN)! As Co-Chairs of the previous HCHN Planning Council, we wish to share the following key priorities to consider as you conduct your oversight activities:

1. Service Expansion and Resource Development Considerations

a. HRSA New Access Point and other grant opportunities:

- i. The focus of the proposal in terms of the specific population to be served (who), geographic area (where), service model (how), etc. should be as driven as possible by the most recent community data, for example, The Point in Time Count report and the data it contains regarding growth in the unsheltered population and health conditions
- ii. Accessibility of services.
 1. Proposals should also focus on service locations where other services are already being provided and where partnerships/collaborations with other agencies are possible.
 2. There should be an outreach component to any proposal.
 3. Have the transportation needs of clients been sufficiently understood and addressed in the proposal?

- b. Expanding access to respite.** Although residential respite/recuperative care may not meet HRSA's New Access Point grant criteria, HCHN should prioritize identifying partnership opportunities and funding for a **lower acuity respite facility**, i.e., a recuperative care building for people who do not require 24/7 nursing services

2. Coordination of planning, communication and data sharing strategies

King County's growing crisis of homelessness has led to various parallel strategies led by various agencies that all involve (A) community-driven planning, (B) data collection and analysis and (C) community communications/information sharing. Work in these three areas that is led by All Home, One Table, the City of Seattle, King County Department of Community and Human Services' Housing and Behavioral Health divisions, and HCHN often overlaps in its mission and areas of focus. HCHN is unique among these various entities in its focus on the health issues and challenges faced by people living homeless, but HCHN's planning, analysis, and communications work must address the housing and other needs that are not strictly within the bounds of health. An example is the Coordinated Entry process through which people are able to be placed in a queue for housing based on a standardized assessment that only partially addresses their health needs. It is critically important that HCHN's ongoing work in these three areas be as coordinated as possible with the work of the entities listed above as well as others, such as Healthier Here and Building Changes.

3. Advocacy

The Planning Council continues to find that there are many aspects of the County's ongoing homeless crisis that cry out for potential input and advocacy from a community planning and oversight body that is focused primarily on the health needs of people living homeless. Given that there are more issues than the Governing Council (GC) will likely have bandwidth to address, we recommend that the GC consider the following issues as potential priorities:

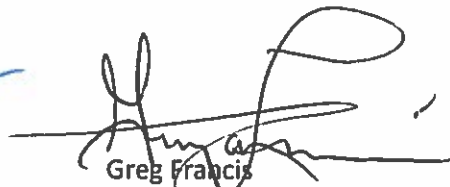
- a. **Insufficient access to hygiene facilities.** The Planning Council and HCHN staff have been actively tracking the Hepatitis A outbreaks in California and several Midwestern states and have raised the alarm with Public Health officials about the vulnerability of the homeless population, in particular people living outside, to contracting and spreading Hep A and other infectious diseases. Another example is Group A Strep. Especially as the City of Seattle doubles down on its expansion of sanctioned encampments/tiny house villages, there is a need for continued advocacy around insufficient access to toilets, handwashing, showering, and other hygiene facilities for people living outside.
- b. **Need for greater community awareness of the medical, mental health, and substance use treatment access barriers faced by people experiencing homelessness.** Strategic planning, data collection and analysis, and community communications/information sharing that is conducted by All Home, One Table, and other entities broadly addressing homelessness must have a greater focus on the health needs and health care access barriers that often contribute to people becoming homeless and compromise their ability to find and maintain safe, stable housing.
- c. **Cuts to federal insurance navigator program.** The Planning Council has identified a need for research and information sharing around the impact of cuts to federal support for local insurance enrollment navigation work on barriers to Medicaid enrollment among the homeless population.
- d. **Western State Hospital access problems.** Funding, regulatory, and capacity challenges plaguing Western State Hospital directly impact access to needed intensive treatment for King County residents who struggle with both homelessness and serious mental illness.

We thank you for your dedication to support the needs of people experiencing homelessness in Seattle/King County.

Sincerely,



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Homeless Network Planning Council



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