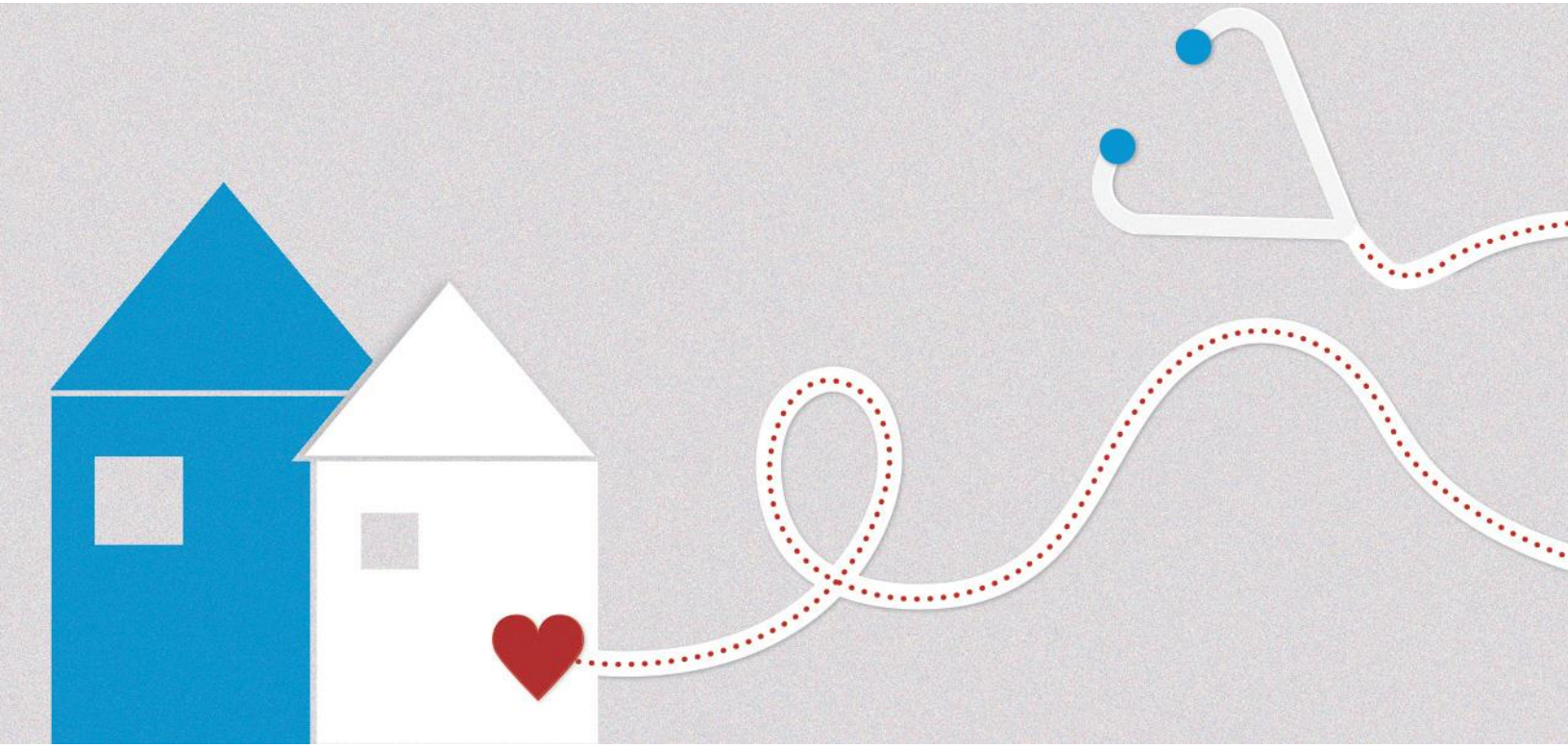

TECHNICAL ASSISTANCE GUIDE

Housing and Delivery System Reform Collaborations

Making It Real, Keeping It Real: Implementing Housing and Health Collaborations

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URBAN INSTITUTE · ELEVATE · THE · DEBATE

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ABOUT THE PROJECT

The Office of the Assistant Secretary for Planning and Evaluation at the US Department of Health and Human Services contracted with the Urban Institute in 2015 to examine existing housing and health collaborations and how health care delivery and payment system reforms may support those collaborations. This guide and the companion guide, *From Idea to Action: Building the Team for Housing and Health Collaborations*, build on previous Urban research and offer technical assistance to communities, organizations, and individuals interested in integrating health care and housing services. See also the environmental scan and issue brief produced for this project.

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Introduction

Making It Real, Keeping It Real is a guide to planning and implementing housing and health collaborations. You may have just begun to think about integrating health care with housing and supportive services to improve the lives of vulnerable individuals such as older, low-income people with complex health conditions or people experiencing homelessness and mental illness. Or you may have already taken the first steps to collaborate with like-minded partners. Either way, lessons from existing housing and health collaborations can inform your efforts.

In *From Idea to Action: Building the Team for Housing and Health Collaborations*, we focused on making the case for resources to support a health care and housing collaboration, identifying and enlisting partners, creating a shared vision and goals, and launching a working collaborative.

In this complementary guide, we dig deeper into key issues and decisions for planning, developing, and implementing a collaboration, whether it involves a relatively small number of partners to address a local problem or is more expansive and complex. This guide covers crucial steps in collaborations, including selecting a target population, building a service package around that population, and coordinating between partners through regular communication and data sharing. We include examples from successful collaborations to illustrate potential challenges and possible solutions and point to resources for more in-depth information on particular issues where available.

Structure of a Housing and Health Collaboration

Formalize Commitments

A successful housing and health collaboration requires effort and long-term commitment from all parties. Once you have identified the key partners, agreed on a shared vision for the housing and health initiative, and brought all parties to the table, you need to consider how you will keep everyone engaged throughout the process of program design and implementation.

Achieve Buy-In

- *From Idea to Action: Building the Team for Housing and Health Collaborations* highlights the importance of a champion to convene key leaders and decisionmakers. During the project's planning and implementation phases, a champion or champions can keep partners at the table and help achieve buy-in from providers and staff on the ground.

Define the Terms of Collaboration

- Decide with your partners how you will work together, and prepare written statements or agreements (if applicable) to document each partner's roles and expectations for the project.
- Develop a governance structure and policies and procedures for all aspects of collaboration, including communication, coordination of services, and conflict resolution.

Consider a Formal Partnership

- Binding agreements are not required for successful collaborations, but they can be helpful for clarifying partners' roles and responsibilities and for promoting accountability during the planning and implementation process.

Explore Technical Assistance

- Technical assistance providers and existing guides and toolkits can play a pivotal role in supporting housing and health collaborations at the state and local levels. Recipients of Department of Housing and Urban Development funding can request in-depth technical assistance online. The Center for Medicaid and CHIP Services also offers technical support to states through its State Operations and Technical Assistance (SOTA 2.0) process, which creates a coordinated point of contact for states to communicate with the agency.

CASE STUDY

In Portland, Oregon, partners in the Housing with Services project formalized their collaboration as a limited liability corporation, with equity contributions from each partner supporting part of the project's costs. The incorporation documents establish the terms of engagement, including the governance model, financial commitments, liability protection, and risk-sharing structure. The corporation itself is an administrative oversight body, staffed by a part-time project director and a full-time operations director who provide administrative support, program development, and service coordination oversight and support.

Identify Your Target Population

The target population will dictate many elements of an intervention, including the appropriate partners and their responsibilities. These decisions can involve difficult trade-offs and should be driven by a shared understanding of the data available on various potential target populations and their engagement in different systems and programs in the community. For example, you may have to choose whether to target resources to individuals with the highest health care costs, to those who are most medically vulnerable, or to those who would experience the greatest health benefits from the intervention.

Define the Target Population

- Make sure that your target population reflects the goals of your collaboration.
- Define target population parameters that align with the purpose and scope of the project. Be as specific as possible; for example, if you aim to target individuals experiencing homelessness, decide how you will define "homelessness" (e.g., living on the streets, living in emergency shelters, not having a permanent residence).

Establish Participant Eligibility Criteria

- Work with partners to establish shared data sources and analysis procedures for identifying the target population.
- Develop specific eligibility criteria for program participants based on program goals, available resources, and other factors, such as number of hospitalizations in the last six months, two or more chronic comorbid health conditions, and income thresholds.

Test the Approach

- Consider a pilot intervention with a small group of participants. This approach can help fine-tune the intervention and demonstrate impact before scaling up to serve a larger population.

CASE STUDY

Los Angeles County's 10th Decile Project targets the top 10 percent of highest-cost, highest-need individuals experiencing homelessness. Hospitals are key partners in identifying potential participants. Using a triage tool developed by the Economic Roundtable, hospital staff assess eligibility and refer eligible candidates to the program, which connects frequent users of emergency health services to housing and appropriate medical care.

Develop a Service Package

The service package will depend on the specific needs of program participants, the goals of the initiative, and available resources, including the potential contributions of other community organizations.

Identify Service Needs

- Consider surveying potential participants or their service providers to determine the scope and level of services needed. Develop or obtain assessment tools to help you tailor services to address each individual's specific needs.
- Based on the assessment, develop a draft description of desired services for your target population. Consider services needed in three areas: housing and related services, health care services, and social support services.

Explore Available Services

- Identify health care, social services, affordable housing, and housing assistance available through partnerships.
- Reach out to other health, housing, and social service providers and community-based organizations to establish connections and identify available services or supports for your target population.
- Consider establishing referral processes with other organizations including public benefit offices and social service agencies. Services or goods for your program may cost nothing but the time invested in relationship building.

Develop a Services Strategy

- Develop a detailed service package for your target population, setting up a structure and procedures for
  - how and by whom services will be delivered and documented;
  - how often and in what quantity particular services will be available;
  - how individual providers will interact and coordinate with each other; and
  - how tools such as care plans and care coordination documents will be used to track participants' needs and services delivered.
- Revise the partnership agreement as necessary to spell out the responsibilities of each partner for the delivery of specific services.

CASE STUDY

Portland's Housing with Services program coordinates health care and social services for low-income seniors and people with disabilities living in federally subsidized housing. Service package development was informed by a survey of residents, in collaboration with the resident advisory council. The initiative built strategic relationships with community organizations such as Urban Gleaners, a nonprofit that delivers food that would otherwise be thrown away to food pantries in participating buildings.

Develop Staffing Models

Robust staffing models for the collaboration and for individual partners will allow you to coordinate and deliver a range of services and supports. Staffing models will depend on the scope of services offered, the number of program participants, and the composition of the partnership.

Determine Staffing and Roles

- Determine the type and amount of staff or staff time required to
  - serve as a coordinator or liaison with coalition partners; and
  - deliver services, including housing referral, connection to ongoing assistance, health care, behavioral health care, and social support services.
- Determine whether existing staff can take on new roles and duties in addition to their current workload or whether new staff must be hired.
  - Determine whether any services or positions can be supplied through contracts with outside providers or consultants.

    - » Consider including nontraditional providers, such as peer support specialists and community health workers, and volunteers.
- Define specific roles and responsibilities for each staff member to facilitate hiring and/or training.

Build the Staffing Model

- Establish staffing ratios (e.g., number of participants per case manager), but retain flexibility to adjust staffing mix and ratios because the needs of participants and/or program goals may change over time.
- Consider physical space and alterations that may be needed to accommodate additional staff and/or new or expanded routines.

Support Staff Development

- Develop and implement training that prepares staff to meet the program expectations and requirements before the launch of the initiative.
- Prepare workflow charts, manuals, program reference materials, and other written tools to help the staff learn and adopt new policies and procedures.
- Assess and meet the need for ongoing education, training, and other supports.

CASE STUDY

In Houston, Texas, Integrated Care for the Chronically Homeless was created to deliver housing, health care, and wraparound social services and supports to individuals experiencing chronic homelessness with frequent hospitalizations and emergency room visits. The intervention is primarily centered on federally qualified health centers, which are well suited to address the complex physical and mental health needs of this population. The health center contracts with a local housing provider for housing management and with a homeless services provider for case management.

Bridge Cultures

Collaborating with organizations that have different cultures, missions, regulations, service environments, and staff backgrounds can be challenging. Be prepared to invest in up-front and ongoing efforts to get to know and understand each other's organizations. Start by learning their "language"—that is, become familiar with key terms used by your partners.

Champion Change

- Have a champion at the leadership level to help overcome staff resistance, achieve staff buy-in, and keep everyone motivated and engaged throughout the process of adopting new practices and working across providers and agencies.

Provide Support

- Be prepared to handle staff burnout. Provide adequate support, including appropriate training, education, and technical assistance, to give frontline staff the skills and tools necessary to work with the target population and adapt their normal routines and practices.
- Expect culture shock. Staff will need support to learn the language and motivations of partner organizations and to clarify new roles and responsibilities. Provide ongoing cross-team training opportunities to address issues that may arise during planning and implementation.
- Let your staff know they are appreciated, share success stories, and celebrate achievements to boost staff morale and job satisfaction.

Communicate Often

- Set up regular meetings and communications for program partners and frontline staff to keep everyone well-informed, to exchange information, and to cultivate personal connections. Establishing trust and good working relationships with your partners will help build and sustain the team and achieve efficient coordination and collaboration.

CASE STUDY

Houston Integrated Care for the Chronically Homeless brings together three distinct providers: a health center, a homeless services provider, and a housing provider. The three provider agencies began meeting regularly throughout the planning process and continue to hold monthly meetings for project leaders and weekly meetings for frontline staff. To encourage team-building, the agencies sponsor quarterly lunches for all staff.

Build a Funding Model

Funding is a challenge for any new initiative, but it can be especially difficult for projects that reach across traditional siloes. The funding landscape is always changing, but housing and health care partners should keep the following considerations in mind.

START-UP COSTS

- New initiatives can incur a range of costs, including staff time for planning, recruitment, and training, and development of physical or technical infrastructure. Explore funding options such as federal demonstrations or pilots, public-private partnerships (e.g., pay for success), and grants from philanthropies and state and local governments. Partners may need to make equity and in-kind investments.

HOUSING-RELATED SERVICES

- Housing-related activities, such as helping clients find apartments and negotiating with landlords, may be eligible for Medicaid reimbursement for certain populations. Find out whether your state Medicaid plan currently covers these activities or may be planning to cover them.
- More than 75 percent of Medicaid beneficiaries are enrolled in managed care organizations (MCOs), which may be motivated to help members find housing as a way to improve health outcomes and reduce costs for high-cost or high-risk members. Explore opportunities and strategies to address MCOs' interests through your collaboration and make the case to your local MCOs to consider covering housing-related services.

AFFORDABLE HOUSING

- Public housing authorities and state housing finance agencies can prioritize available resources for certain populations. Work with local housing entities to determine whether/how preferences may be established for your target population.
- Though federal Medicaid funds cannot be used for housing construction or rental assistance, some states are investing their savings from Medicaid reforms in housing or rental assistance, and some hospital networks and MCOs have begun investing in housing to improve care and reduce costs for vulnerable populations.

SOCIAL SUPPORT SERVICES

- Social support services are often offered by a variety of community-based organizations. Find out whether your target population is eligible for services from local nonprofit organizations and, if so, develop a system for referrals or for on-site or on-call assistance.
- If social support services are not available through community partners, account for any additional resources needed to cover these services in your funding model.

HEALTH CARE SERVICES

- Health care and substance use services may be covered by Medicaid or Medicare for program participants who are enrolled in or eligible for these programs.

- For participants without health insurance, explore possible coverage of services through community health programs or federally qualified health clinics.
- Some services, such as dental or vision care, may not be covered by health insurance or government plans. Explore community organizations and providers offering reduced prices on a sliding scale. Account for any additional resources needed to cover these services in your funding model.

WORD OF CAUTION

- Exercise good judgment and prioritize the programs, supports, and services that are essential to the initiative and can be fully supported long-term. Trying to address many different participant needs may not be realistic and could potentially derail the project if resources to support an extensive range of services are difficult to maintain.

TIP

In the planning phase, consider what kind of funding packages align best with the program model. Supportive housing programs for people who are formerly chronically homeless need flexibility to provide nonclinical services in nonclinical settings. Houston's Integrated Care for the Chronically Homeless, Massachusetts's Community Support Program for People Experiencing Chronic Homelessness, and Los Angeles County's Housing for Health have all benefited from payment models through which they receive fixed per-person payments rather than billing for services provided.

Collect and Share Data

Data sharing can contribute to the success of housing and health care collaborations in all phases: planning, start-up, implementation, and evaluation. Prepare to address data security and privacy concerns, technical barriers, and cultural differences among partner organizations to achieve desired data sharing or data integration.

DATA SHARING

- Administrative data sharing can help housing and health care partners coordinate services and ensure continuity of care when participants transition between care settings.
- Understand what information each partner can collect and share, what infrastructure is needed to share information securely and in real time, and how vital information will be communicated when administrative data sharing is not possible.

- Become familiar with privacy regulations under the Health Insurance Portability and Accountability Act and confidentiality rules under 42 CFR Part 2, as well as your state and local laws on personal health information.
  - Seek legal counsel and develop release forms and procedures to enable sharing of health information protected by these guidelines.
- Take advantage of technical assistance for data integration. Resources include the Community Health Peer Learning Program, the Healthcare and Housing (H^2) Systems Integration Initiative, the PRAPARE Implementation and Action Toolkit, and the Healthify platform for community data sharing.

OUTCOMES DATA COLLECTION

- Establish processes and schedules to regularly collect and analyze process and outcome data to help you measure program effectiveness, make course corrections as needed, and demonstrate impact to potential funders.

CASE STUDY

All Chicago, which administers the city's Homelessness Management Information System (HMIS), is working with the University of Illinois Hospital and Health Sciences System to embed data on homelessness and housing instability in the health system's electronic health records. The project's end goal is interoperability between HMIS and health systems.

Engage Your Target Population

Once you have identified your population, determined the service package, developed staffing and funding models, and worked out data sharing, the next step is to determine how to identify, engage, and assess eligible participants.

Enroll Eligible Participants

- Determine how the eligible participants will be identified, located, and engaged in the program.
  - Look for sources of administrative records or other data that can help you identify potential participants.
  - Set up referral procedures for partners or others who regularly come in contact with your target population.

- Develop and distribute flyers, program brochures, participant guides, or other recruitment materials that clearly describe the program objectives and benefits for participants and provide information on how to enroll.
- Develop an outreach and engagement plan to locate and engage people who may be difficult to reach because they are transient or distrustful of people in positions of authority.

Manage Enrollment

- Set up processes for periodic reassessments to ensure participants' continued eligibility. Develop strategies to reengage participants who drop out.
- Define the circumstances under which an individual's participation may end (other than no longer meeting established eligibility criteria). These may include noncompliance with program rules or "graduation" by participants who achieve personal goals and no longer need program services.
  - The Housing First approach, which does not place preconditions on independent living and avoids program termination and eviction whenever possible, has been shown to be particularly effective in addressing homelessness for people with complex conditions. For more details on how to implement this approach, see the US Interagency Council on Homelessness Housing First Checklist.

TIP

Consider automatic enrollment of all eligible participants with the option to opt out at enrollees' discretion. The automatic enrollment approach allows for effective targeting and introduction of the program and its benefits to all eligible participants and typically results in higher program enrollment than a voluntary, opt-in recruitment strategy.

Monitor Implementation

Launching new programs and initiatives can bring about unexpected challenges. Monitoring implementation closely can help you identify and address setbacks effectively.

Prepare for Challenges

- Study implementation of similar programs, and seek expert input to anticipate and plan for possible challenges and contingencies.

Collect Feedback

- Even the best-prepared collaborations will face unexpected challenges. Develop a process for identifying problems early. Survey program providers, participants, and stakeholders regularly throughout implementation and provide venues for feedback.

Solve Problems

- Designate a project manager or team to facilitate implementation, respond to identified issues, develop solutions, and monitor impact of program modifications.
- Some issues may require larger programmatic changes. Be prepared to go back to the drawing board and seek additional input from stakeholders.

Keep Track of Outcomes

- Evaluate the program regularly throughout the implementation period (e.g., monthly, quarterly, annually). Be prepared for early results to fall short of expectations. It often takes time for a program to mature and have a meaningful impact on outcomes.
- Make plans for long-range data collection and analysis to evaluate impacts of the intervention. Data demonstrating cost savings and improvement in participant outcomes can help you secure long-term funding to support ongoing operation and/or expansion of the program.

Keep Up the Communications

- Share outcomes—both successes and failures—with partner organizations and the public, and use the evaluation results to inform policy and programmatic changes. Refer to the companion guide, *From Idea to Action*, to learn how to strategically communicate throughout the process to keep collaboration staff and stakeholders informed about progress made and lessons learned.

TIP

Consider contracting with an analytics firm, research organization, or local university to conduct an independent evaluation of your program. Engaging an evaluator early in program design can help define appropriate outcomes measures and data collection processes to ultimately aid in program impact evaluation.

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