Synergizing Primary Care, Public Housing, & Community Development in Cleveland

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Part 1: Audience Input!
Part 2: Our Story

Care Alliance
Health Center

Our mission is to provide high-quality, comprehensive medical and dental care, patient advocacy and related services to people who need them most, regardless of their ability to pay.
Our History

- **1985:** Health Care for the Homeless
- **1993:** Independent Nonprofit Organization
- **1998:** Public Housing Primary Care
- **2000:** Ryan White Part C
- **2002:** Dental Program
- **2007:** ATLAS Program
- **2011:** Electronic Medical Record Implementation
- **2013:** PCMH Recognition, Level 3 and Electronic Dental Record Implementation
- **2014:** Behavioral Health Integration
- **2015:** Expansion into Cleveland’s Central Neighborhood
Current Locations

Clinic Sites:

1530 St. Clair Avenue
Health Care for the Homeless Clinic

6001 Woodland Avenue
Public Housing Clinic

2916 Central Avenue
Public Housing Clinic

1795 West 25th Street
Public Housing Clinic

Mobile Clinic
Permanent Supportive Housing

Outreach Partners:

- Lutheran Metropolitan Ministry’s Men’s Shelter
- The City Mission
- The Lorain Avenue Storefront
- St. Malachi
- Community Assessment & Treatment Center
- Centers for Families and Children
- Recovery Resources
- West Side Catholic Center
- Norma Herr Women’s Center
- Hitchcock Center for Women
In 2014, Care Alliance provided care to 9,953 patients, generating more than 34,000 encounters.
Demographics

- **45 percent** completely uninsured
- **93 percent** living with incomes below 100% FPL
- **55 percent** experiencing homelessness
- **45 percent** living in or around public housing

**Patient Income**

- 93% 100% and Below
- 5% 101-150%
- 1% 151-200%
- 1% Over 200%

**Patient Insurance Type**

- 47% None
- 45% Medicaid
- 2% Medicare
- 1% Private Insurance
Services

Medical Care:
• Across the lifespan
• For people living with HIV/AIDS
• HIV & STI testing
• Chronic care programming
• Women’s health services
• Podiatry
• Physical Therapy
• Immunizations

Dental Care:
• Partials & Dentures
• X-Rays
• Extractions
• Fillings
• Cleanings

Behavioral Health Care:
• Mental Health Counseling
• Chemical Dependency Counseling
• Psychiatry

Supportive Services:
• Medical Case Management
• Health Literacy
• Benefits and Medical Insurance enrollment
Unique Health Care Needs

BARRIERS TO CARE
- Lack of income
- Lack of health insurance
- Lack of personal identification
- Lack of transportation
- Distrust of the system

HEIGHTENED RISK FOR POOR HEALTH
- Prolonged exposure to the elements
- Lack of consistent medical care
- Years of untreated diseases
- Living in communal environments
- Limited food access
Our Funding

Operating Expenses

- Health Care for the Homeless: 45%
- Public Housing Primary Care: 27%
- Management and General expenses: 11%
- Ryan White: 10%
- Fundraising expenses: 2%

$6.6 million annual operating budget (FY 2014)
Care Alliance must grow to meet the needs of the community, to ensure we optimally reach and serve our patient populations

Expansion to promote economic vitality and neighborhood revitalization

Expansion to improve access to health care services, empower individuals to take charge of their health care

Focus on public housing and PSH
SWOT: Strengths, Weaknesses, Opportunities, Threats

**Strengths**
- list your:
  - advantages
  - unique and low-cost resources
  - factors mean that you "get the sale"

**Weakness**
- list your:
  - disadvantages,
  - limitations
  - what could you improve
  - factors lose you sales

**Opportunities**
- list your:
  - chances to improve performance
  - good opportunities can you spot

**Threats**
- list your:
  - external trouble for the business
  - obstacles do you face
  - what your competitors are doing
Part 3: Partnering for Our Patients

Mission-Focused Collaboration

Successful Strategies:

1. Partner with housing authority

2. Leverage health center resources to invest in housing partner and residents in strategic locations

3. Leverage housing partner’s community development efforts
Community of Collaboration

Care Alliance Health Center

Physical and Behavioral Health Integration

Neighborhood Revitalization

Quality Improvement

Medical, Dental and Specialty Care

Workforce Development

Homeless and Public Housing

- FrontLine Service
- Beech Brook
- The Centers for Families and Children*

- Cuyahoga Metropolitan Housing Authority*
- FrontLine Service
- Lutheran Metropolitan Ministries
- Drop-In locations
- Housing First

- University Hospitals Case Medical Center
- Case Western Reserve University
- CSU/NEOMED
- Tri-C
- Colleges and universities

- Cleveland Clinic Lab Services*
- St. Vincent’s Medical Center
- The MetroHealth System
- Podiatry Services
- Physical Therapy
- Prevent Blindness Ohio
- AmeriCares Foundation, Inc.*

- Promise Neighborhood Initiative
- HUD Choice Neighborhood
- Local schools

- Better Health Greater Cleveland*
- John Snow, Inc.
Housing Authority: CMHA

- 7th highest number of public housing units in the country
  - 52,000 residents in 24,000 households through 60 different developments

- Expanding partnership ➔ collaboration
  - Clinic growth – space / construction
  - Addressing the needs of residents together
  - Neighborhood revitalization
Leverage Community Development

- Cleveland Central Choice Transformation Plan (led by CMHA)
  - Over 30 partner organizations
  - 670 acres
  - Schools, libraries, local CDCs
  - Highest concentration of public housing in Northern Ohio

- Buy-in from public officials and local businesses

**Bottom Line:** Do not try to reinvent the wheel – break down silos and harness existing initiatives
Care Alliance received two capital grants from the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA)

- Total grant amount: $5.5 million
- Objective: To make much-needed renovations to the Riverview clinic in Ohio City and build a brand new, state-of-the-art facility in the Central neighborhood
Where to Invest?

- Follow your mission

- Work with housing partner:
  - Share community data, as appropriate
  - Determine sites upon greatest need and community feasibility and reception

- Contribute to greater community development efforts (e.g., Central Choice Plan)
Example 1: Riverview Clinic Renovation

- Expand formerly part-time medical clinic into a full-time hub for medical, dental, and supportive services
- Capacity increase: 500 patients to 3,800 patients
Example 2: Cleveland’s Central Neighborhood

**Before**
- 10,000 patients served
- 8 dental chairs
- 14 medical exam rooms
- 2.5 full time clinics
- 60 employees
- $5.1 million in annual community benefit
- Focus on chronic disease
- Insufficient primary care providers in the Central neighborhood

**After**
- 23,000 patients served
- 22 dental chairs
- 32 exam rooms
- 4 full time clinics
- 116 staff ranging from medical professionals to support staff
- $13.3 million in annual community benefit
- Expanded expertise in wellness, prevention, and chronic disease care
- Comprehensive, integrated physical and behavioral health care
Why Expand?

- Aligns with Care Alliance focus on serving more public housing patients
- Dental continues to be cited as the #1 unmet health care need for Ohioans
  - 1/3 of Central residents use the emergency room for non-emergent care
  - Limited pediatric care and family planning services despite the large portion of women and children in Central
of residents are younger than 18 years old

pediatricians in the Central neighborhood

increased likelihood that residents will utilize hospital care

hospital in Central (St. Vincent Charity Medical Center), providing mainly specialty care

of Central residents used the emergency room for non-emergent care in the last year

family planning services available in Central
Tools for Effective Collaboration
Let’s Get Scientific

- Research question: What are characteristics of successful local community partnerships or collaborations responsible for implementing national strategies or federal strategic plans?

- Inclusion Criteria:
  - U.S. based, peer-reviewed journal since 2000, English, human
  - Focus on a health topic
  - Discuss the experience, plans or strategies implemented by a community partnership at the local level
  - Outline partnership characteristics of success
What makes successful partnership?

- Partnerships or collaborations (or coalitions, alliances or similar related descriptor, all often used interchangeably) represents a group of local agencies, organizations and/or individuals working together to improve the health of their community.

- National strategies or federal strategic plans was expanded to include community partnerships or collaborations working together to address a public health issue of national significance.
# Literature Review: Search Strategy

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## Literature Review: Results

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<td>Leadership</td>
<td>Included in all studies, to be successful, a partnership needs to have a defined leader, supported and recognized both internally and externally. The leadership should have extensive knowledge of the issue and the external environment within which the partnership is working.</td>
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<td>Purpose and Commitment</td>
<td>The purpose and commitment of the partnership includes both a clear vision and mission (purpose) and the commitment of the partners to that stated purpose given their individual expertise. The purpose provides focus for the partnership as well as a favorable cost-to-benefit ratio ensuring individual members remain connected to one another and to the partnership. This will allow for flexibility of contributions by the individual members that are focused on the greater good of the partnership and reflective of subject matter expertise of the individual members.</td>
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<td>Communication</td>
<td>Clear and consistent communication, internally and externally, of the purpose of the partnership and benefits to the community. Communication helps to establish the partnership as the established subject-matter experts.</td>
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<td>Accountability</td>
<td>Accountability goes hand-in-hand with establishing clearly defined roles and responsibilities, and includes accountability of individual members, leadership, and in some instances, the community the partnership serves.</td>
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<td>Funding / Resources</td>
<td>Funding and resources enable the partnership to do the work. This likely includes pooled financial resources, in kind contributions of members and joint fundraising.</td>
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<td>Planning / Operations</td>
<td>Planning and operations represents the actual work of the partnership, including development, implementation and technical assistance. A feedback process, with a shared information system for data collection and analysis, should also be included to allow for outcomes measurement and continuous improvement.</td>
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Lessons Learned

- Important to establish shared vision and language
- Important to work with all levels of organization
  - Leadership
  - Housing-specific management
  - Resident representation
- Establish referral relationships with benefit-like offices and programs
- Don’t take for granted the need to market, clear signage and direct outreach
Part 4: Proactive Community Engagement

*Resident Input and Ownership*

Successful Strategies:

1. Community *wants* assessment
2. Resident input throughout clinic design, unveiling, and operation
3. Resident volunteers and employees on the ground
4. Engagement by leadership, program staff, and clinicians
5. Structured partnership with local schools
6. Leverage successes to secure additional grant funding
Get out and ask!: Community Wants Assessment
Focus Groups: Resident Input

- Focus groups where individuals are comfortable
- Focus groups at your facility
- Drill down! (Building color, chairs, art)
- Identify key (TRUSTED) resident stakeholders early and engage them throughout design, unveiling, and operation!
Key Stakeholder Evolution Process

- Resident
- Volunteer
- Advisory Board Member
- Full-Time Staff
Community Engagement From the Top Down

- Events
- Health Fairs
- Community Meetings
- Neighborhood Canvassing
- Street-Level Billboards
- Mass-Mailings
- Community newspapers & newsletters
- PSAs
Foot-in-the-Door: Fostering Structural Collaboration

- Cleveland Metropolitan School District School-Based Health Program
- Cuyahoga County WIC Program (Ohio Department of Health)
- Community Assessment & Treatment Services
- Beech Brook/Head Start
Success ➔ Funding ➔ Expand

- Successes
- Additional Funding
- Expanded Programming
Thank you!