

Spotlight 2.01

Building Partnerships and Breaking the Cycle Between Unsheltered Homelessness and Other Systems



 February 26–28, 2025  Los Angeles, CA  #NAEH2025

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People without housing frequently cycle between hospitals, jails, shelters and the streets. From hospitals discharging people to homelessness, to prisons that release people to the streets or couch-surfing, no one system can address it all. Join us as one community shares why they saw the impacts of homelessness as an opportunity, how they created a coordinated program and the tangible results --people being housed--realized.



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Housing @ Risk Program

- ▶ H@RP was established in March 2009.
- ▶ This program was designed to:
 - ▶ Provide highly coordinated health and housing support to patients who are homeless or unstably housed
 - ▶ Improve health outcomes
 - ▶ Reduce preventable Emergency Department visits and hospital admissions



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Statistics

- ▶ Median household income is \$47,260 per year (2022)
- ▶ Last out of 62 counties in several categories:
 - ▶ Quality of life for its residents
 - ▶ Health factors
 - ▶ The availability of clinical care
 - ▶ Social and economic factors
 - ▶ Physical environment
- ▶ Housing Costs
 - ▶ 50% of income towards rent
 - ▶ 1br start at \$1800



Population Served



**H@RP
Target
Population**

Homeless patients

- Sleeping in abandoned buildings, parks, subway, etc.
- Residing in a shelter or transitional residence

Unstably housed patients

- Couch Surfing
- Doubled-up
- No lease agreement
- Illegal room rentals

Potentially homeless patients

- Rental arrears
- At-risk of eviction
- Head of household has a chronic illness and may not be able to continue working

Unmet housing needs

- Needs accommodation due to medical condition
- Extensive housing repairs

Recently housed with history of homelessness

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How Does H@RP Work?

Alert System

Referrals

- Case Consultation
- Intensive Housing Support

Housing Clinic & Ongoing Education

Comunilife Respite

Notifications



Epic-No-Reply@montefiore.org

Yesterday, 8:19 AM

HARP_IP_Admission ▾

Label: MMC2YR (2 years) Expires: 4/24/2021 8:19 AM



Phish Alert

IP Admission H@RP Alert

Moses Hospital

04/25/19 8:18 AM

~~XXXXXXXXXX~~

DOB: ~~XXXXXXXXXX~~

MRN: ~~XXXXXXXXXX~~ // CSN: ~~XXXXXXXXXX~~

Admission Diagnosis:

Chest pain [R07.9]

Alert Instruction:

None.

An alert is triggered when:

Patients address states "undomiciled" or address of a shelter

They have a specific PCP who work with the homeless population

They have the undomiciled ICD 10 Code on their problem list (Z59.0)

They have the "undomiciled" flag

The H@RP Team manually enters the flag

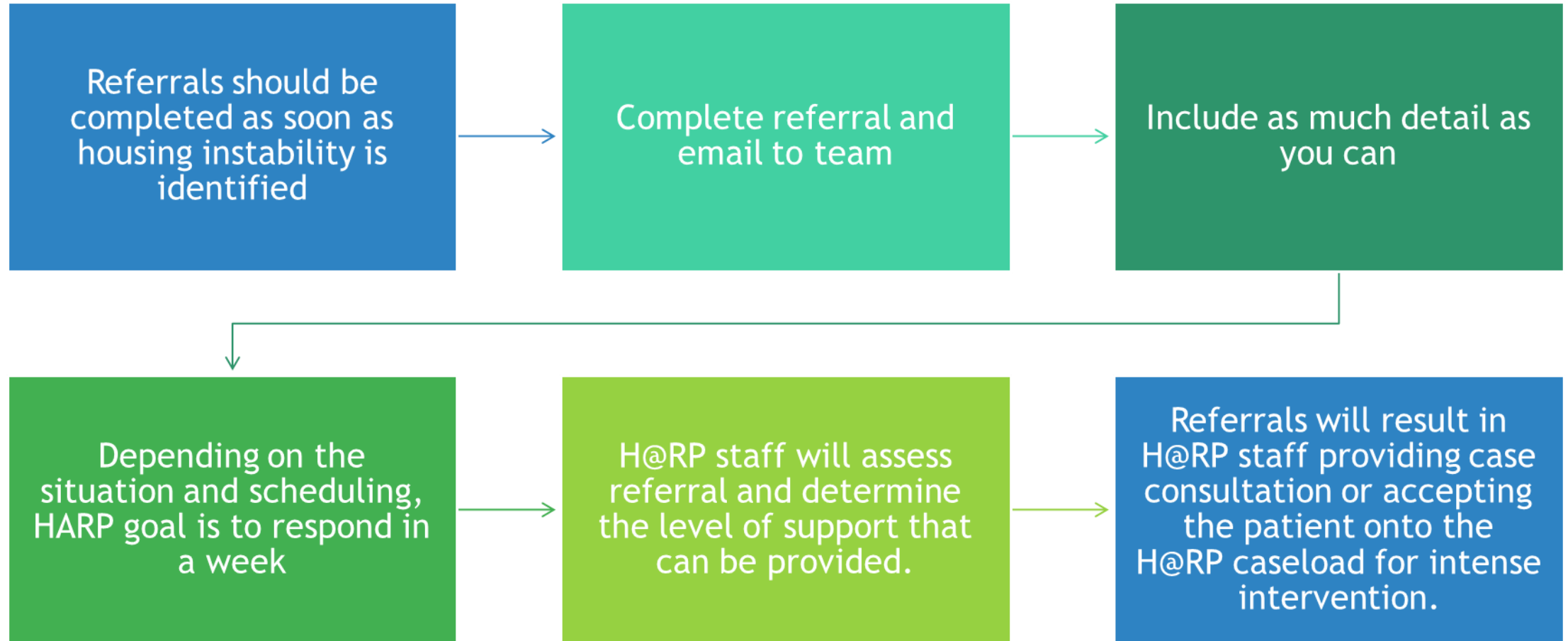
Email alerts several key players:

ED and IP Social Workers & HARP Team

Inbasket and Email Alerts:
*When patient is registers in the ED
*Transferred to IP
*DC from IP

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Referral Process



Referral Process 'cont.

Outpatient Referral Process

1. Complete fillable H@RP referral form

2. E-mail referral form to H@RP team for review

Referral Form

Please FAX completed referral to: (718)325-9356

Patient Name:	John Doe	Current Address:	123 Fairytale Lane, Bronx, NY 10467
MRN#:	12345678	Current Phone:	000-000-0000
Patient DOB:	11/4/1966	Alt Contact Phone:	000-000-0000
Patient Age:	53	Referral Date:	01/03/2020
Preferred Language:	English		

(Please verify any data pulled from EPIC)

Medical Utilization History:

Number of ED Visits in the past 12 Months	0
Number of Hospital Admissions in the past 12 Months	0
Medical and Psychiatric Conditions (Problem list)	Chronic Kidney Disease

Relevant Community Providers: (PCP, HomeBase, Case Manager, Emergency Contact, Health Home, etc.)

Name	Phone	Relationship
Jane Doe	000-000-0000	Wife

Current Housing Situation:

Current Housing Level: (See below for instructions)	Level 2- Open/pending housing court case
Description of Patients Housing Dilemma: (Reason for referral)	Patient has an open housing court case for owing rental arrears. Patient owes \$4,800 after losing employment due to current medical condition. Patient monthly rent is \$1,200 a month. Patient does not have a rental subsidy. Patient lives alone.
Specific Housing Needs & Accommodations: (lower floor, elevator, etc.)	None
Please explain any exhausted housing options the patient has applied for:	HRA one-shot deal
Please list desired housing (room rental, new apartment, supportive housing, housing subsidy, rental arrears paid, repairs advocacy)	Housing Subsidy, Rental Arrears Paid

+ Income and Entitlements: (Please enter dollar amounts)

Employment Wages	\$0	Veterans Benefits	\$0
Social Security Income	\$0	Child Support	\$0
Social Security Disability	\$0	Retirement/Pension	\$0
Public Assistance Cash	\$0	Workers Comp/Unemployment	\$0
SNAP Food Stamps	\$0	Other:	\$0
Non-Cash Benefits:	No		
Housing Voucher? Section 8 (HPD or NYCHA, LINC, FHPS, CITY FHPS, HUD VASH, etc.)	No	Medicaid CIN ID	XYZ123456
Medical Transportation	No	Medicare ID	

Instructions for H@RP Alert Textbox (if needed):

Referral Information: (Person completing this form)

Name: Mary Jane	Role/Specialty: Care Manager	Contact Phone & Email: 718-920-1234
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Assessment



Housing Severity Levels

Level 1	Level 2	Level 3	Level 4
Stable	Unstable	Very Unstable	Extremely Unstable
No risk of instability	Could lose unit, but not immediately	Could lose unit quickly	Most unstable level of homelessness
This is permanent housing	This is unstable, temporary housing	This is unstable housing that could be lost quickly, rendering someone Level 4 homeless	Someone has no shelter
Patient has lease & can afford rent	Patient will have to move at some point into a stable unit they can afford and is suitable	Housing is usually controlled by someone else	Often sleeping in a public space
Someone living with family on a permanent basis	Open eviction case	There is no lease for patient	Staying at a church or places not suitable for living
May need to move if their circumstances change		Housing that is linked to program participation/transitional housing	Facilities like a drop-in center where there is no guarantee of a bed
		Court cases with eviction date	
Examples			
Supportive Housing	Renting a room	DV Shelter	Street
Apartment with permanent subsidy	Lack of future ability to pay rent	Shelter	Subway/Car
Affordable housing	Accruing rental arrears	Couch surfing	Park
Permanent Skilled Nursing Facility	Open/pending housing court case	Doubled up/squatting	Squatting in empty apartment or abandoned building
Permanent institutional placement	Patients' apartment is not suitable due to medical condition or mobility issues	Safe Haven	Church
Adult Home	Correctional Facility	3/4 or 1/2 House	Drop-in Center
Reunified with family	Foster care	Lost court eviction process	Hospital
Assisted living	State psych center	Marshall letter	
	Transitional Housing	Treatment facility	
	Unaddressed repair issues	Respite bed	
	Needs higher level of care		
	SRO		

For single adult shelter referrals: Please complete the referral form, send to DHS, and please CC the H@RP Team- Keona Serrano, Madeline Gotay & Deirdre Sekulic. H@RP Team will add patient to alert system.

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Housing at Risk Program (H@RP) Clinic

Please join us **each Wednesday at 12:00 PM** for an interactive webinar to answer your questions about patients experiencing housing instability, provide case consultation and get suggestions about available resources.

Microsoft Teams Meeting

Join on your computer or mobile app

[Click here to join the meeting](#)

Or call-in (audio only)

+1 347-352-6762,,839870093#

Phone conference ID: 839 870 093#

[Find a local number](#) | [Reset PIN](#)

H@RP assists patients who are currently:

- Admitted into the hospital without a safe discharge plan
- Homeless; sleeping in abandoned buildings, parks, subways or public locations
- Residing in a shelter or transitional residence
- Accruing rental arrears or at risk of eviction
- In need of advocacy due to unaddressed housing repairs
- In need of a housing accommodation due to a medical condition
- Residing temporarily with family and friends or in an illegal room rental
- Housed with a history of chronic homelessness

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Types of H@RP Interventions



ASSIST PATIENTS WITH
GETTING VITAL
DOCUMENTS



ASSIST PATIENTS WITH
GETTING INCOME
FROM PA OR SSI/SSD



HOUSING SEARCH



PREVENTING
EVICTION &
HOMEBASE INITIATIVE



REPAIRS ADVOCACY



ONGOING
COLLABORATION &
CASE CONFERENCING



ADDRESSING
PSYCHOSOCIAL
STRESSORS

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Comunilife Respite Program



Goal: Provide safe, appropriate level of care for individuals who are homeless or become unstably housed during a hospitalization, including patients who are unable to safely discharge to shelter.



Montefiore rents 4 beds from CBO



CBO provides case management support related to finding permanent housing



Montefiore H@RP remains involved to facilitate follow-up medical care

Comunilife Program Requirements



PATIENT MUST BE
INDEPENDENT IN ADL'S



PATIENT SHOULD HAVE
A RESPITE DISCHARGE
GOAL



PATIENT CAN BE IN A
WHEELCHAIR BUT MUST
BE ABLE TO
INDEPENDENTLY
TRANSFER



PATIENT CAN HAVE A
SUBSTANCE ABUSE
HISTORY AND RECENT
USE BUT MUST BE
ALREADY LINKED TO
OUTPATIENT
TREATMENT



ELIGIBLE CASES WILL BE
INTERVIEWED VIA
TELEPHONE BY THE
COMUNILIFE STAFF

Thank You!

Contact Information

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