Overview

- According to the 2017 Annual Homeless Assessment Report to Congress prepared by the Department of Housing and Urban Development, California's total homeless population was 134,278; about a quarter of the nation’s total.

- Media reports have surfaced alleging that homeless patients were being discharged from hospitals in unsafe conditions, but because of strict privacy laws, hospitals are unable to respond to these reports. Senator Ed Hernandez introduced SB 1152 in February 2018, in response to the reports of patient “dumping”.

- The original bill was extremely burdensome on hospitals, however with the support of the California Hospital Association, the bill was revised and became effective January 1, 2019.
Providence St. Joseph Health

Providence St. Joseph Health, is a national, Catholic, not-for-profit health system. We are rooted in the founding missions of the Sisters of Providence and the Sisters of St. Joseph of Orange, courageous women ahead of their time who brought healthcare and other social services to the American West when it was still a rugged, untamed frontier, we share a singular commitment to improve the health of all.

Today we offer a comprehensive range of services across Alaska, California, Montana, New Mexico, Oregon, Texas and Washington. With 119,000 caregivers, serving in 51 hospitals and over 800 medical clinics, we are committed to our more than 100 year tradition of serving the poor and vulnerable.
St. Joseph Hospital

- Founded in 1929, St. Joseph Hospital has become one of the largest and busiest hospitals in Orange County.
- Magnet designated hospital, three times
- 425 licensed beds
- Busiest Emergency Department in Orange County, second busiest ER in California serving more than 101,000 patients last year
- We welcome nearly 5,000 newborns each year
- Centers of Excellence for: Behavioral Health, Bariatric Surgery, Cancer, Heart and Vascular, Kidney Transplant, Maternity, Nasal and Sinus, and Orthopedics
SB 1152

- Two part law. First part went into effect 1/1/19, second part goes into effect 7/1/19.
- Requires all California hospitals to comply with the same discharge planning requirements.
- Applies to all patients cared for in any acute care hospital (including critical access hospitals) and acute psychiatric hospitals.
- The discharge could be from the Emergency Department, inpatient setting or from an ambulatory surgery center within the hospital.
- Must be followed for all homeless discharges 24/7.
- Ensures that all homeless patients have received a minimum level of assistance for their transition back into the community.
- Requires that ALL patients be assessed for homelessness
Definition of homelessness

A “homeless patient” is defined in the law as an individual who:

1. Lacks a fixed and regular nighttime residence, or
2. Has a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations, or
3. Is residing in a public or private place that was not designed to provide temporary living accommodations or to be used as a sleeping accommodation for human beings.

Examples include:
Living in a car or RV, even if parked in the same spot every night.
Living in a domestic violence shelter or sober living center
Living in a tent on a sidewalk
Required Components

1. All hospitals discharge planning policy must include a homeless patient discharge planning component.
2. All patients must be assessed for homelessness.
3. All information must be provided in a culturally competent manner and in a language the patient understands.
4. An individualized discharge plan must be created guided by the best interests of the patient, his/her physical and mental condition and his/her preferences for placement post discharge.
5. Must identify a post discharge destination that the patient agrees to go to and must document the name of the person who accepted the patient.
6. A physician examination and determination of stability for discharge
7. Referral for follow up care, medical and/or behavioral health care
8. A meal prior to discharge
9. Weather appropriate clothing
10. Discharge medications or prescription. If the hospital has an onsite pharmacy licensed and staffed to dispense outpatient medication, an appropriate supply of all necessary medication must be provided to the patient, not just the prescription.

11. Offer a screening for infectious disease common to the region as determined by the local health department or refer the patient to another location for such screening.

12. Offer vaccinations appropriate to their presenting medical condition.

13. Offer transportation to his/her post discharge destination, if that destination is within 30 minutes or 30 miles of the hospital.

Our Approach

A homeless task force was created across all of PSJH’s California ministries, which included frontline caregivers and leadership from:

- Case Management
- Social Services
- Emergency room
- Behavioral Health
- Pharmacy
- Risk Management
- Quality Management
- Clinical Informatics (IT)
- Registration
Task Force Responsibilities & Efforts

Since the task force is responsible for ensuring the hospitals compliance, education, and workflow needs, the following was designed and implemented:

1. Created a standard policy that each ministry adopted
2. Created a regional subgroup to discuss purchasing power for clothing
3. Develop homeless discharge plan form
4. Develop query for homeless identification in EMR
5. Develop education for all caregivers & physicians
6. Attend nursing daily huddles to support and answer questions
<table>
<thead>
<tr>
<th>Health Determinant</th>
<th>Elements Addressed in Homeless Patient Protocol/Plan for Discharge</th>
<th>Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mediations</td>
<td>□ On-site outpatient pharmacy offered and provided medications, as determined by MD</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ No on-site outpatient pharmacy available, prescription provided</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>□ Patient offered medications but refused</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Medications not prescribed</td>
<td></td>
</tr>
<tr>
<td>Infectious Disease</td>
<td>□ Patient screened for infectious diseases</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ Patient offered infectious disease screening but refused</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>□ Patient was referred for infectious disease screening to...</td>
<td></td>
</tr>
<tr>
<td>Vaccinations</td>
<td>□ Patient offered and given vaccination(s)</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ Patient offered vaccination(s) but refused</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>□ No vaccination(s) ordered</td>
<td></td>
</tr>
<tr>
<td>Food/Meal</td>
<td>□ Offered and provided</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ Offered, but patient refused</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>□ Medically contraindicated</td>
<td></td>
</tr>
<tr>
<td>Clothing</td>
<td>□ Wheelchair removed</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ Clothing in weather appropriate</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>□ Clothing inadequate, whether appropriate offered but refused</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Clothing is inadequate, weather appropriate clothing offered</td>
<td></td>
</tr>
<tr>
<td></td>
<td>and provided</td>
<td></td>
</tr>
<tr>
<td>Continuity of Care - Behaviors Health</td>
<td>□ Follow-up behavioral health care is not needed</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ Resources provided</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>Appointment made: Provider ___________________________ Phone __________ Date/Time ______________</td>
<td></td>
</tr>
<tr>
<td>Continuity of Care - Medical Health</td>
<td>□ Follow-up care is not medically necessary</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ Resources provided</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>Appointment made: Provider ___________________________ Phone __________ Date/Time ______________</td>
<td></td>
</tr>
<tr>
<td>Discharge Destination</td>
<td>□ Discharge destination: ___________________________</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>Name of person who agreed to accept the patient: ___________</td>
<td>□ as documented in EMR</td>
</tr>
<tr>
<td></td>
<td>□ Patient declines to state where he/she will go after discharge</td>
<td></td>
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<tr>
<td>Transportation</td>
<td>□ Taxi</td>
<td>□ as documented in “elements section”</td>
</tr>
<tr>
<td></td>
<td>□ Bus Pass</td>
<td>□ as documented in EMR</td>
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<tr>
<td></td>
<td>□ Declined</td>
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<tr>
<td></td>
<td>□ Other/Comment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ as documented in “elements section”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ as documented in EMR</td>
<td></td>
</tr>
</tbody>
</table>

I have been involved in my plan and understand it:

Patient Signature: ________________ Date/Time: ________________

Patient refused to sign

Staff Signature: ____________________ Date/Time: ________________
<table>
<thead>
<tr>
<th>Living Situation</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental Issues</td>
<td>Lives In A ICF/NH</td>
</tr>
<tr>
<td>Foster/Board &amp; Care</td>
<td>Lives In A Shelter</td>
</tr>
<tr>
<td>Homeless</td>
<td>Lives In A SNF</td>
</tr>
<tr>
<td>Lives In A Sober Living</td>
<td>Lives W/Significant Other</td>
</tr>
<tr>
<td>Lives Alone</td>
<td>Residential Treatment Ctr</td>
</tr>
</tbody>
</table>

Homeless = staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, or in a park
Challenges and Lessons Learned

- It takes a village
- Buy in from ALL stakeholders is key
- Homeless advocacy groups should have been pulled into the conversation earlier
- A lot of miscommunication in and out of the hospital
- Clothing is expensive
- Communication is key to success
July 2019

By 7/1/19, all hospitals must implement a written plan for coordinating services and referrals for homeless patients with the county behavioral health agency, health care and social services agencies in the region, other health care providers and nonprofit social services providers to assist with ensuring appropriate homeless patient discharges.

The plan must be updated annually and must include:

1. A list of local shelters including
   a. Hours of operation
   b. Admission procedures and requirement
   c. Population served
2. The hospital’s procedure for homeless patient discharge referral to shelter, medical and behavior health care

3. Training protocols for discharge planning staff

4. Each hospital is required to maintain a log of homeless patients discharged and the destination to which they were released. Must also maintain evidence of completion of the homeless patient discharge protocol in the log or in the patients medical record.
DOMESTIC VIOLENCE RESOURCES

Women's Transitional Living Center
Phone: 877-531-5522
Wtlc.org
Offers emergency shelter or emergency relocation services, personal empowerment program and counseling for survivors

Human Options
Phone: 877-854-3594
Humanoptions.org
Offers emergency safety house, crisis intervention, counseling, legal advocacy, support and education, and parenting classes for survivors

Interval House
Phone: 714-891-8121
www.intervalhouse.org
Provides emergency shelter, transitional housing, rapid rehousing, support and education for survivors

Laura's House
Phone: 866-498-1511
www.laurashouse.org
Emergency shelter, legal advocacy, therapeutic counseling, education and supportive services to survivors

LEGAL SERVICES

Orange County Bar Association
Phone: 949-440-6747
Hours: MON – FRI 8:30 AM – 5 PM
Affordable legal assistance, lawyer referral and information service

Legal Aid Society of Orange County
250 E. Center Street
Anaheim, CA 92805
Phone: 714-572-5209

EMERGENCY SHELTER INDIVIDUALS

Bridges at Kraemer Place
For more information visit: Mercyhouse.net/portfolios/bridges-at-kraemer-place/
24-hour emergency shelter facility that primarily focuses in assisting program participants in creating a housing plan.

Hospitality House
818 E. Third Street,
Santa Ana, CA 92701
Phone: 714-542-9576
www.salvationarmyoc.org
Intake Hours: MON – SUN 3:30 PM
Emergency shelter for men and supportive services. Stay is up to 21 nights and guest must wait 45 days to re-enter.

Courtyard Transitional Center
400 W. Santa Ana Blvd
Santa Ana, CA 92701
Low threshold, low barrier emergency shelter with 400 beds. Provides a safe and secure environment for those seeking respite from streets.

EMERGENCY SHELTER FAMILIES

Pathways of Hope
Phone: 714-680-3691
Email: info@pathwaysofhope.us
Intake Hours: MON – FRI 9 AM – 5 PM
Provides emergency shelter for adults with at least one minor child. Services include case management, life skills classes, counseling, and assistance with other essentials as needed

HomeAid Family Care Center
Phone: 714-263-1449
Hours: MON, WED, SAT 3 PM – 6 PM

HELP & EMERGENCY HOTLINES

Adult Protective Services 800-451-5155
Alcoholics Anonymous 714-773-4357
Child Abuse Registry 800-207-4464
Domestic Violence – National 800-799-7233
Fair Housing Foundation 800-446-3247
Narcotics Anonymous 800-333-3610
National Sexual Assault Hotline 800-656-4673
OC Health Care Agency Crisis Assessment Team 866-830-6011
OC Health Care Agency Crisis Stabilization Unit 714-334-6900
OC Health Care Agency OCLINKS Behavioral Health Services Information and Referral Line 855-OC-LINKS/625-4657
OC Health Care Agency Warmline 877-910-9276
Suicide Prevention Hotline 877-727-4747
Trevor Project: Suicide Prevention for LGBT 866-488-7386
2-1-1 Orange County 211 or 888-600-4357

Pocket Guide
Resource Directory for North Service Planning Area

North SPA includes: Anaheim, Brea, Buena Park, Cypress, Fullerton, La Habra, La Palma, Los Alamitos, Orange, Placentia, Rossmoor, Stanton, Villa Park, and Yorba Linda
<table>
<thead>
<tr>
<th><strong>PUBLIC AGENCIES</strong></th>
<th><strong>COMMUNITY HEALTH CLINICS</strong></th>
<th><strong>SOUP KITCHENS &amp; FOOD PANTRIES</strong></th>
<th><strong>VETERAN SERVICES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Services Agency – CalFresh, Medical, CalWORKS 3320 East La Palma, Anaheim, CA 92806 Phone: 714-541-4855 <a href="http://www.mybenefitscalwin.org">www.mybenefitscalwin.org</a></td>
<td>North Orange County Regional Health Foundation Medical Clinic 901 W. Orangethorpe Avenue Fullerton, CA 92832 Phone: 714-441-0411 <a href="http://www.noctr.org">www.noctr.org</a></td>
<td>The Storehouse 1001 E. Lincoln Ave Orange, CA 92865 Phone: 714-998-3181 Hot Meal: THURS 5:30 PM – 6:30 PM Food Pantry: MON – WED, FRI 3 PM – 4 PM</td>
<td>OC Health Care Agency OC4Vets 1300 S. Grand Ave., Building B, Santa Ana, CA 92705 Phone: 714-460-6476 Hours: MON – FRI 8 AM – 5 PM Services are aimed at assisting military veterans and their families become aware of and to access needed community and behavioral health services.</td>
</tr>
<tr>
<td>Social Services Agency – General Relief 2020 West Walnut Street Santa Ana, CA 92703 Phone: 714-834-8899 ssa.ocgov.com/calfresh/apply/general</td>
<td></td>
<td>Mary's Kitchen 517 W. Struck Avenue Orange, CA 92867 Breakfast: MON – SAT 9 AM – 10 AM Lunch: MON – SAT 12:45 PM – 2 PM Provides a hot meal and also offer the use of showers, washing machines, and address for mail delivery.</td>
<td>Veterans Service Office 1300 S. Grand Avenue, Building B, 2nd Floor, Santa Ana, CA 92705 Phone: 714-480-6555 Hours: MON, WED, FRI 8 AM – 4 PM TUE 9:30 AM – 4 PM Provides assistance to veterans and their dependents or survivors in obtaining benefits from the VA.</td>
</tr>
<tr>
<td>Social Security Administration 930 S. Harbor Blvd. Anaheim, CA 92805 Phone: 866-867-3133 Brea Office 3230 E. Imperial Hwy, Suite 150 Brea, CA 92821 Phone: 866-559-2757</td>
<td></td>
<td>Pathways of Hope Food Pantry 611 S. Ford Avenue Fullerton, CA 92832 Phone: 714-680-3691 ext. 220 Hours: MON – FRI 9 AM – 9 PM Provides primary care services including pharmacy and laboratory services.</td>
<td>VA Community Resource and Referral Center 888 W. Santa Ana Blvd., Suite 150 Santa Ana CA 92701 Phone: 844-838-8300 Hours: MON – FRI 8 AM – 4 PM</td>
</tr>
<tr>
<td>Employment Services One-Stop Center 6281 Beach Boulevard, Suite 333 Buena Park, CA 90621 Phone: 714-562-9200 <a href="http://www.oconestop.com">www.oconestop.com</a></td>
<td>BEHAVIORAL HEALTH SERVICES OC Health Care Agency Outreach &amp; Engagement Phone: 800-364-2221 Reaches out to individuals who are at-risk or struggling with homelessness, mental health and/or substance use problem.</td>
<td>First Lutheran Church 215 N. Lemon Street Fullerton, CA 92832 Phone: 714-871-7820 Hot Meal: TUE 5:30 PM – 7:30 PM Food Pantry: WED 10 AM – 12 PM Provides hot meals, perishable and nonperishable groceries. Provides clothing, blankets, and personal hygiene items when available.</td>
<td>Volunteers of America 2100 N. Broadway, Suite 300 Santa Ana, CA 92705 Phone: 714-426-9834 Phone: 949-486-8525 Hours: MON – FRI 8 AM – 4:30 PM</td>
</tr>
<tr>
<td>California State Employment</td>
<td>OC Health Care Agency Mental Health &amp; Substance Use Disorder Services 2035 E. Ball Road, Suite 200 Anaheim CA 92806 Phone: 714-517-6300 Hours: MON – THURS 8 AM – 6 PM FRI 8 AM – 5 PM</td>
<td>HIS Picnic 951 N. Idaho Street La Habra, CA 90631 Phone: 562-691-3296</td>
<td>Provides homelessness assistance with house placement and accessing VA healthcare and benefits.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Offers financial and supportive services to veterans who are without housing or at risk of homelessness including rental assistance, case management, and financial planning. Offers peer-to-peer support to veterans and their families.</td>
</tr>
</tbody>
</table>
Planning for July

- Ensure representation at all HASC/WPC committee meetings
- Work with IT to ensure a report can be built to pull required data for the log
- Prepare language to update the policy
- Prepare an annual competency for all caregivers
- Continue to partner with community social service agencies to ensure effective transition planning/coordination
- Continue monthly California hospital meetings to share best practices
- Educate all Care Management leaders throughout the enterprise
Contact

Melissa Ramirez, MSW, LCSW, CT, ACM
Director, Case Management & Social Services
1100 W. Stewart Drive
Orange, CA 92868
T: (714) 771-8115
Melissa.Ramirez@stjoe.org