



**HEALTHCARE & HOMELESSNESS  
PILOT INITIATIVE  
KICKOFF CALL**

# HEALTHCARE & HOMELESSNESS PILOT INITIATIVE KICKOFF CALL

1

Welcome and Introductions

# WebEx Logistics

The screenshot shows a Cisco WebEx meeting window. At the top, the title bar reads "Cisco Webex Meetings" and "Meeting Info". Below it is a menu bar with "File", "Edit", "Share", "View", "Audio & Video", "Participant", "Meeting", and "Help". The main area displays a video conference with three participants: Alys Martin, Catherine Mather, Andi Broffman, and Meg Arsenault. A large video thumbnail in the center shows a person sitting on a sidewalk with a red banner overlaid that reads "HEALTHCARE & HOMELESSNESS PILOT INITIATIVE KICKOFF CALL". A "Layout" button is visible in the top right of the video area. On the right side, a "Chat" window is open, showing a "To:" dropdown set to "Everyone" and a text input field labeled "Enter chat message here". At the bottom of the meeting window, a control bar contains buttons for "Unmute", "Start video", "Share", and a red "X" button. The Windows taskbar is visible at the very bottom, showing the search bar and system tray with the time 3:10 PM on 12/1/2020.

Annotations in the image include:

- A green arrow pointing to the "Layout" button in the top right of the video area.
- A yellow arrow pointing to the "To:" dropdown menu in the chat window.
- An orange arrow pointing to the "Unmute" button in the bottom control bar.
- A blue arrow pointing to the "Start video" button in the bottom control bar.

# Agenda

Time	Agenda Item
2:00 - 2:15 pm ET	Logistics, agenda review, icebreaker
2:15 - 2:25 pm ET	Welcome and introductions of IHI and Community Solutions team
2:25 - 2:50 pm ET	Overview of Healthcare + Homelessness Pilot Design
2:50 - 3:05 pm ET	Meet 2 - 3 teams
3:05 - 3:25 pm ET	Review Foundations Phase Packet
3:25 - 3:45 pm ET	Meet 2- 3 teams
3:45 - 3:55 pm ET	Questions & answers
3:55 - 4:00 pm ET	Wrap-up and next steps

# Working Agreements for the Pilot

**Share your  
experiences**

**Practice “Yes...and”  
vs. “Yes..but”**

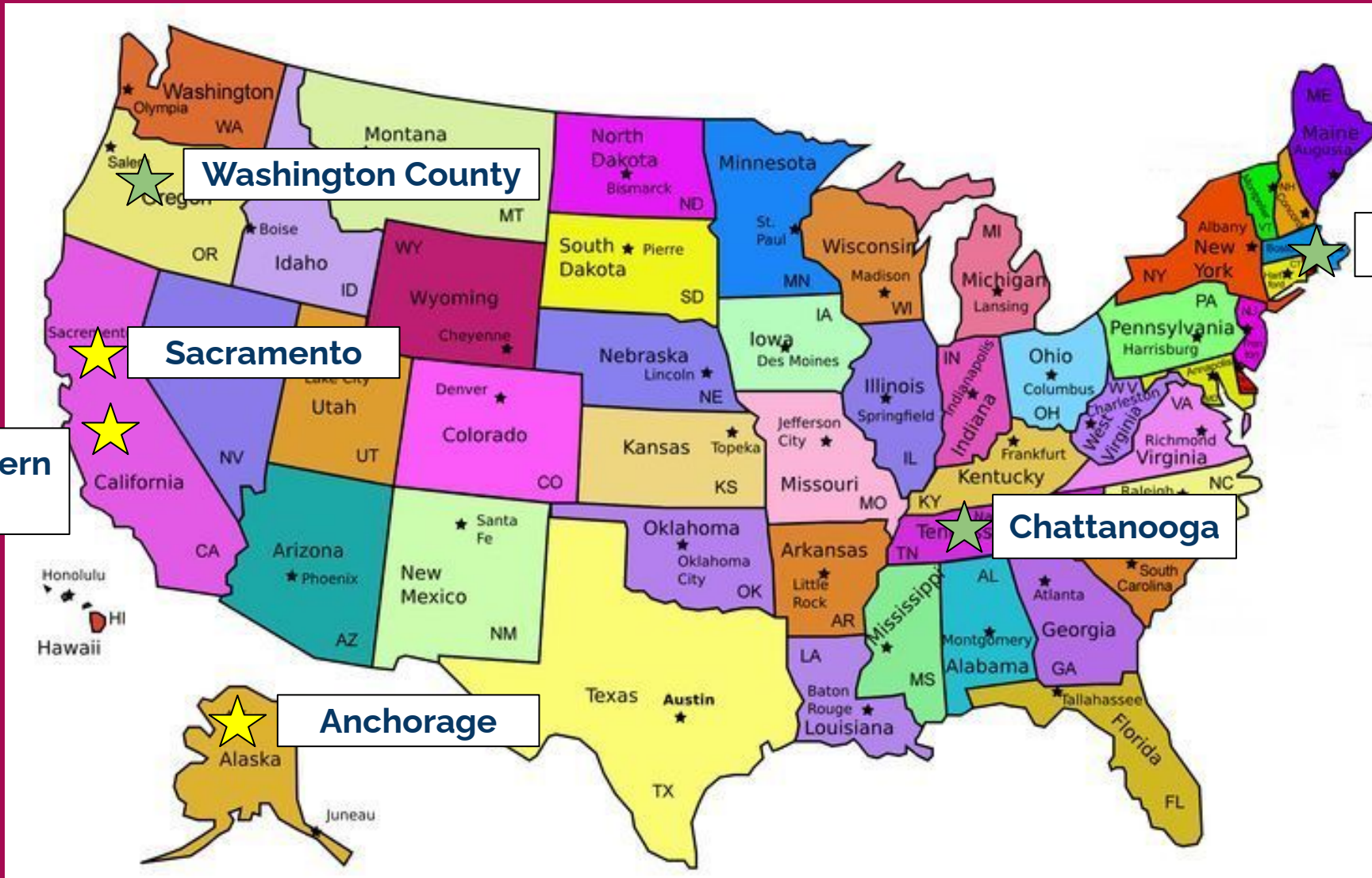
**Stay curious**

**Respect time**

**Expect to experience  
varied emotions**

**Show up, choose to  
be present**

# Where Are You Joining From?



Washington County

Sacramento

Bakersfield/Kern  
County

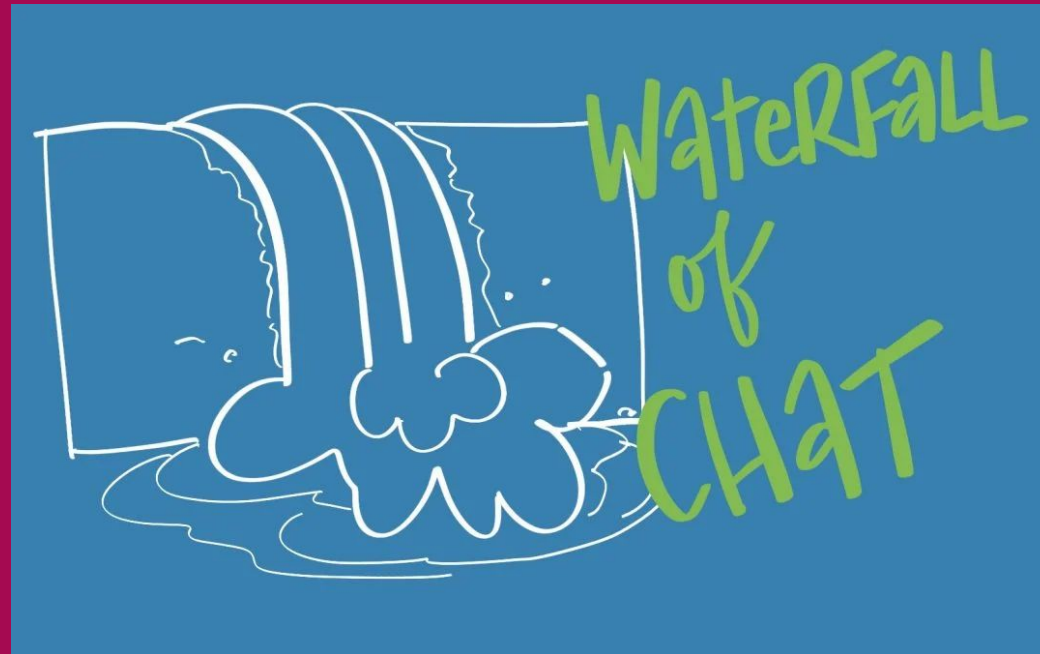
Anchorage

Chattanooga

Springfield

# Icebreaker: Waterfall of Chat

1. In the chat, type **where you're from & your community's claim to fame**
2. Don't hit send, yet!
3. Once everyone has typed their answer into the chat, we'll let you know when to send your answer to the group





## COMMUNITY SOLUTIONS

**works for a lasting end to homelessness that leaves no one behind.**

We envision a more equitable society where homelessness is never inevitable, inescapable, or a way of life.



# Introductions: Community Solutions



**Beth Sandor**  
Principal



**Andi Broffman**  
Portfolio Lead



**Meghan  
Arsenault**  
Senior Manager



**Anna Bialik**  
Improvement  
Advisor



**John Gauthier**  
Project  
Manager

# IHI Strategy

## Vision

Everyone has the best care and health possible

## Mission

Improve health and health care worldwide

## Values

Courage, Trust, Love, Equity

## Strategic Approach

IHI applies practical improvement science and methods to improve and sustain performance in health and health systems across the world. We generate optimism, spark and harvest fresh ideas, and strengthen local capabilities.



Pursue Safe and High-Quality Care

Build the Capability to Improve



Improve the Health of Populations

Innovate and Spark Action

Our work is driven by

- Quality Sciences
- Health Equity
- Joy in Work



# Introductions: IHI



**Aleya Martin**  
Sr. Project  
Manager



**Catherine Mather**  
Project Director



**Ninon Lewis**  
Head of Content  
Portfolios



**Catherine Craig**  
Faculty



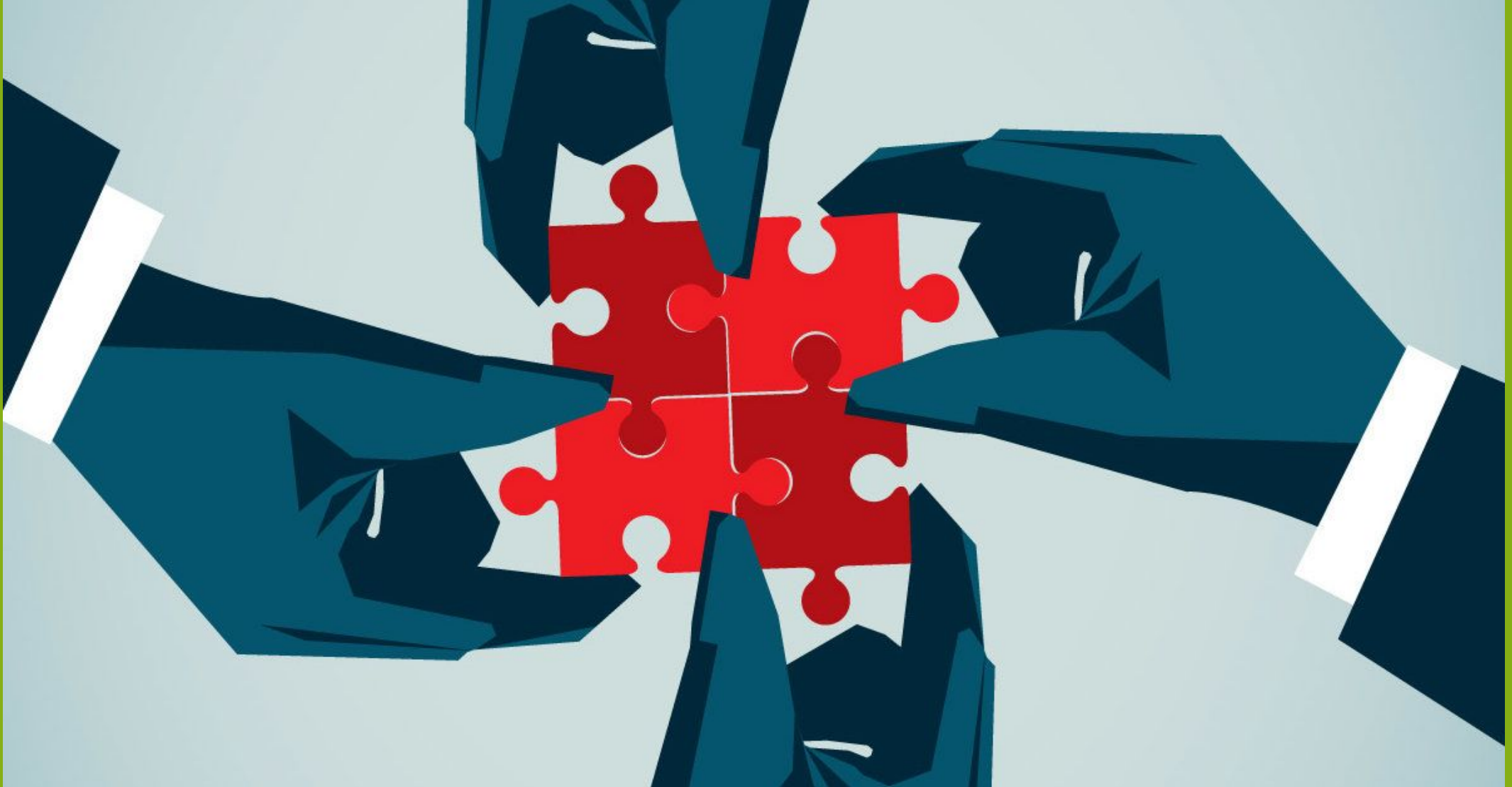
**Lauran Hardin**  
Faculty

# HEALTHCARE & HOMELESSNESS PILOT INITIATIVE KICKOFF CALL

2

Overview of Healthcare &  
Homelessness Pilot Design

**Why now? Why you?**



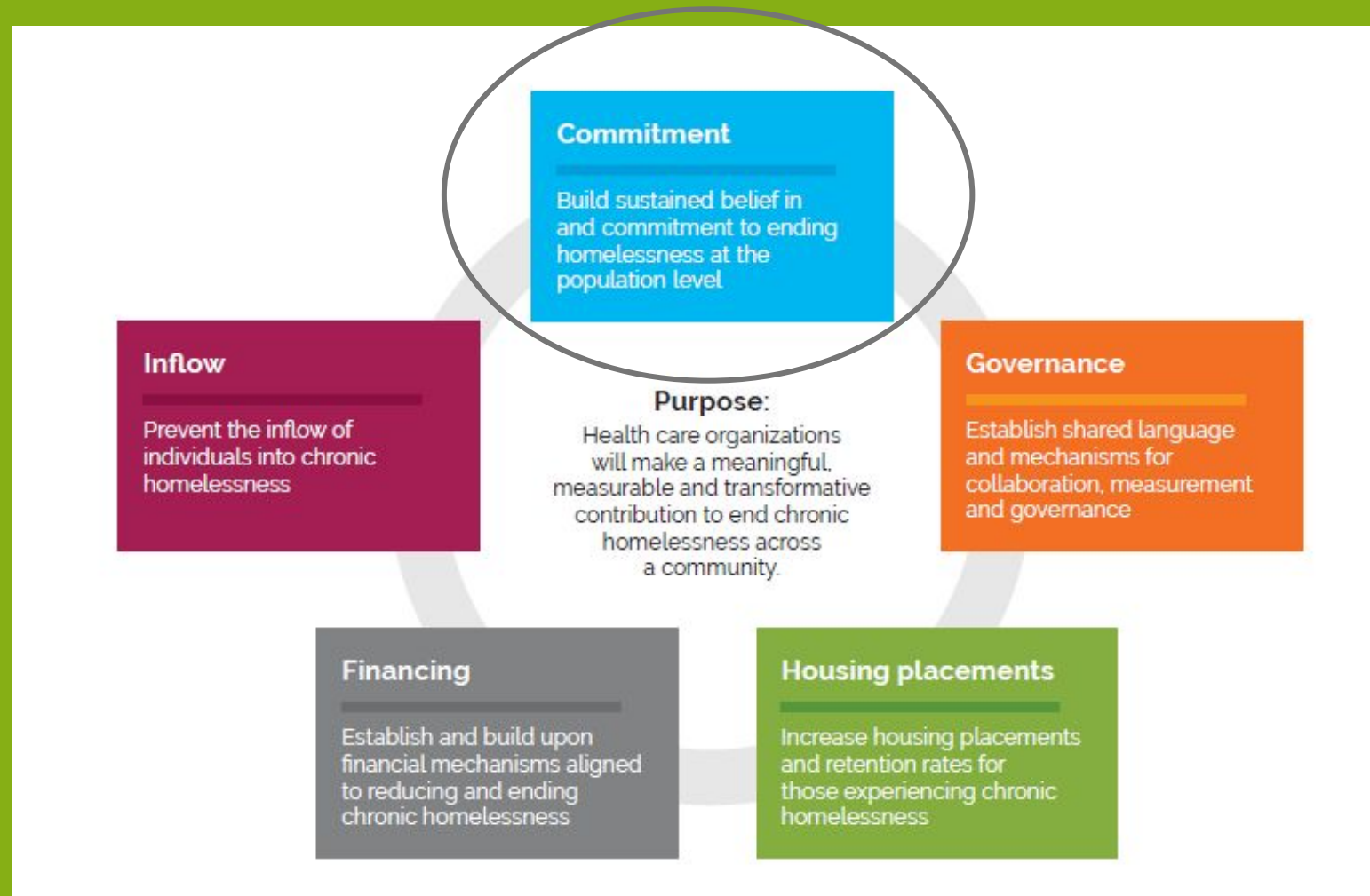
# Pilot Initiative Aim

Over the course of 2 year initiative, Pilot Teams will have made measurable progress toward ending chronic homelessness, with a focus on building racially equitable systems.

# Objectives

- ✓ Prevent, reduce and end chronic homelessness through collaboration with health systems
- ✓ Identify interventions/ways of working that have the greatest impact;
- ✓ Make the business case for both the health system and the overall community;
- ✓ Understand the effects of housing for the health of the chronically homeless population and the impact on healthcare institutions operationally, including the morale of staff as a result of actively participating in problem solving; and
- ✓ Achieve cost reductions or greater value for funds spent.

# A Roadmap for Collaboration





# **COMMITMENT: Build sustained belief in and commitment to ending chronic homelessness at the population level**

## *STRATEGIES*

### *WITHIN THE HEALTH SYSTEM*

- Establish this work as a strategic priority that aligns to a broader journey towards population health and well-being and an "anchor mission" for the health system in the community
- Identify and engage key internal leaders to champion the effort and sustain their belief in the goal and the path to achieving it
- Identify and articulate the levers and roles for the health system to address homelessness, like physical and mental health services and relations, in order to believe in the opportunity and obligation
- Build a case using relevant data that resonates with health system leaders and links ending chronic homelessness to health, cost, and quality outcomes

## *STRATEGIES*

### *TOGETHER WITH THE COMMUNITY*

- Create and sustain buy in for shared population level aim, timeline and measurement framework
- Build trust and partnership with housing/homeless system partners, relevant government actors as well as key mainstream agencies
- Develop, tap into and/or refine existing ongoing community-wide communications strategy and infrastructure
- Build a case using relevant data that resonates with health system leaders and links ending chronic homelessness to health, cost, and quality outcomes

# COMMITMENT: Build Sustained Belief in and Commitment to Ending Chronic Homelessness at the Population Level

## STRATEGIES

### WITHIN THE HEALTH SYSTEM

- Establish this work as a strategic priority that aligns to a broader journey towards population health and well-being and an "anchor mission" for the health system in the community
- Identify and engage key internal leaders to champion the effort and sustain their belief in the goal and the path to achieving it
- Identify and articulate the levers and roles for the health system to address homelessness, from physical and mental health services to community benefit and relations in order to believe in the opportunity and obligation
- Build a case using relevant data that resonates with health system leaders and links ending chronic homelessness to health, cost, and quality outcomes

- Review the current or draft Strategic Plan and identify where this work might advance key priorities
- Build a compact/agreement with the board of directors around community accountability via homelessness efforts
- Include homelessness outcomes as a measure on the health system dashboard that is reported on and reviewed at the Board level
- Explore "what matters" and how this work impacts health system employees (e.g., staff experience, the housing status of health system employees) to shape messaging

- Identify who in the health system works with/touches/services those experiencing homelessness
- Do a power mapping exercise of leaders and other individuals within the health system to identify their potential losses and gains.
- Celebrate work and successes at all stages
- Create succession planning to ensure consistency in mission is carried over despite turnover

- [Use the Pathways to Population Health \(P2PH\) Compass](#) to assess what work the health system is doing to work on overall population health and well-being more broadly
- Brainstorm the ways the health system has influence in the community
- Review the current or draft Strategic Plan and identify where this work might advance key priorities

- Understand the types of business cases that have already been made and build upon them in a way that speaks to your context/values/mission
- Collect data and stories- interview ED patients, clinical staff and case managers using video and other media- to show the link between chronic homelessness and the effect on the health system (e.g. how many people experiencing homelessness you touch through patient care over the course of a week)
- Use change management and organizing approaches to tap into the psychology of behavior change
- Create list of datasets that would be good for in the system and with the community (including CHNA)

### TOGETHER WITH THE COMMUNITY

- Create and sustain buy in for shared population level aim, timeline and measurement framework
- Build trust and partnership with housing/homeless system partners, relevant government actors as well as key mainstream agencies
- Develop, tap into and/or refine existing ongoing community-wide communications strategy and infrastructure
- Build a case using relevant data that resonates with health system leaders and links ending chronic homelessness to health, cost, and quality outcomes

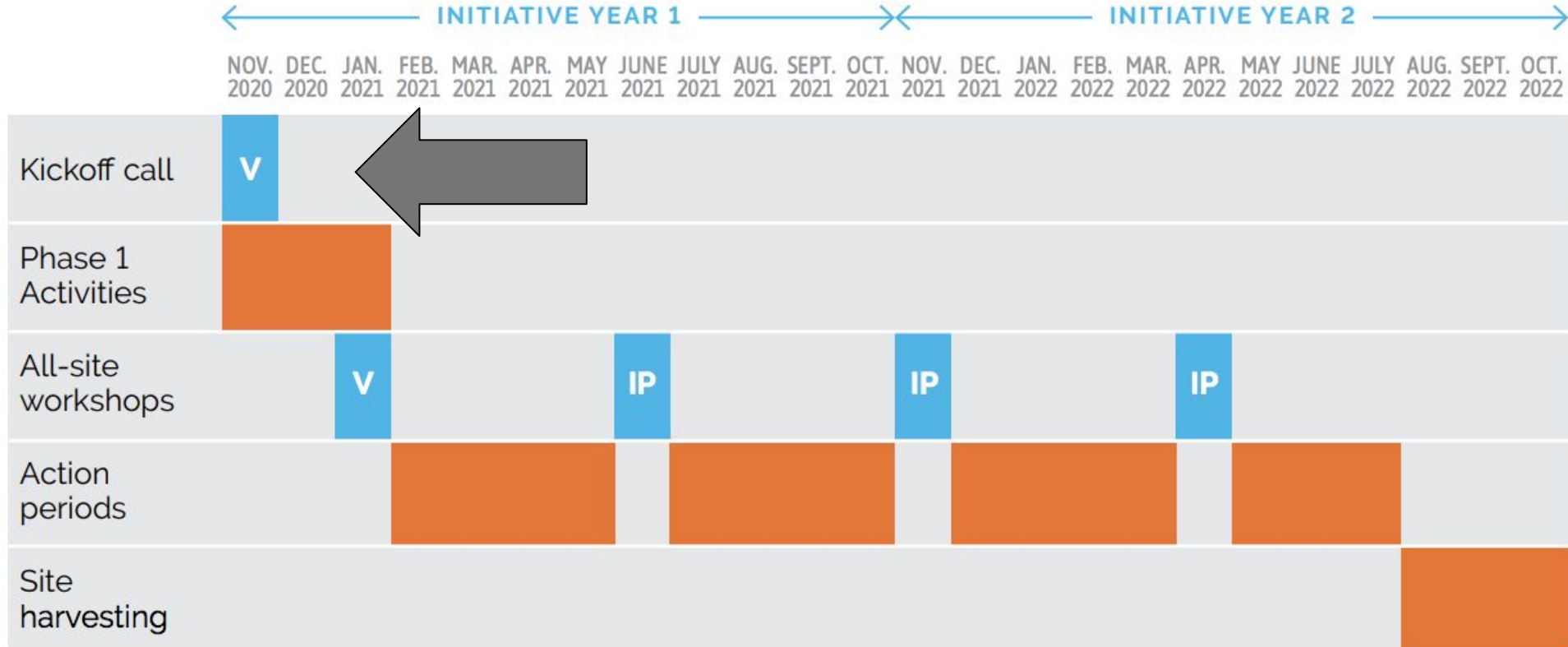
- Create data-sharing agreements
- Match chronic BNL with health system clients to show percentage overlap
- Share CoC case conferencing/case management infrastructure to illustrate supports available in community that provide more than physical healthcare
- Celebrate work and successes at all stages
- Be able to articulate the timeline and measurement framework

- Work directly with community boards that include individuals with lived experience to build understanding
- Do an asset mapping exercise to understand what work is already going on around homelessness
- Meet regularly with local Continuum of Care (CoC) leaders to understand work to date and opportunities for collective impact
- Work closely with local partners and racial equity experts to speak out historical and current inequities created by structure racism and own up to their role in perpetuating those inequities & commit to prevent them moving forward

- Meet with local Continuum of Care (CoC) leaders to understand ways stakeholders have framed the issue in the past, including news coverage

- Create a list of datasets that would be good for in the system and with the community (including CHNA)
- Look at homelessness/housing insecurity among health system employees

# The How



**V** Virtual session    **IP** In-person session

# Specific Programmatic Activities

- Foundations Phase: [Now-Jan 28, 2021]
- Four workshops over two years (in person when possible)
- Intensive action periods
  - Monthly all-team calls
  - 90-minutes of private coaching per month
  - Ongoing reporting of data and activities
  - Site visits (when possible)
  - Emergent activities as needed (e.g. workgroups)

# The Work

- Deep dive into data
- Build portfolio of interventions to test and refine
- Develop leadership capability
- Collaborate and build a bridge between healthcare and homelessness response systems
- Build a business case

# HEALTHCARE & HOMELESSNESS PILOT INITIATIVE KICKOFF CALL

3

Meet & Greet Part 1

# Meet and Greet Instructions

- Get ready to share your answers to the question **'We're drawn to join this Pilot because....'**
- When we come to your community, we'll ask one person from the Health System side and one person from the Homelessness Response System side to come off mute and share your answer
- Others can share your answers with the chat feature

# Bakersfield, California





# Anchorage, Alaska



# Chattanooga, Tennessee

An aerial photograph of Chattanooga, Tennessee, taken during the "golden hour" of sunset. The Tennessee River flows through the center of the city, with the iconic white concrete and steel bridge crossing it. To the left, a blue-painted steel truss bridge is visible. The foreground shows a large green park area with a prominent blue-roofed circular building. The city skyline is visible in the background, with various buildings and a large stadium. The sky is filled with dramatic, colorful clouds in shades of blue, orange, and purple.

# HEALTHCARE & HOMELESSNESS PILOT INITIATIVE KICKOFF CALL



Foundations Phase Packet

# Foundations Phase Packet Overview

Healthcare System Team	Homelessness System Team	Full Pilot Team
1. Preparing Your Governance Structures and Statement of Purpose	5. Preparing Your Governance Structures and Statement of Purpose	8. General Overview and Background Information
2. Identifying Health System Leaders to Participate in the Pilot Site Team	6. Identify Built for Zero Leaders to Participate in Pilot Site Team	9. Understanding Your Current Improvement Capability
3. Map Internal Assets your Health System Brings to The Pilot	7. Prepare to Share Data on Current State	10. Host a Pilot Team Community Meeting
4. Meet with your Communication, Public Relations, and/or Government Relations Team		11. Prepare for first Pilot Workshop

# Activities for Healthcare System

- ✓ Preparing your governance structures and statement of purpose
  - Identify executive sponsor
  - Develop your purpose statement including your “why”
- ✓ Identify Health Systems Leaders to participate on Pilot Team
  - Day to day leader (project manager)
  - Data and measurement lead
  - Other project team members (community benefit/engagement, clinical leadership, Quality Improvement, Equity & Social determinants of health)
- ✓ Map internal assets your health system brings to the pilot
- ✓ Meet with Communications, Public Relations, Government Relations Team

# Activities for Homeless Response System

- ✓ Preparing your governance structures and statement of purpose
  - Identify executive sponsor
  - Statement on why working with local health system is important + strategic
- ✓ Identify Pilot Team
  - Built for Zero Team Lead / Day to day leader (project manager)
  - Data and measurement lead
  - Community members with lived experience
- ✓ Prepare to share data on current state
  - Chronic and all singles data (Actively homeless, inflow, and outflow)

# Joint Activities for Pilot Team

- ✓ Review overview and background information in foundations packet
- ✓ Understand your current improvement capability
  - Resources in foundation packet
- ✓ Host a Pilot Team Meeting
  - Attendees: CoC Built for Zero Team and Health System Pilot Team
  - Getting know each other
  - Purpose Statement from Health System
  - Current state data from Built for Zero Team
  - Asset Mapping
  - Establishing Team Norms
- ✓ Prepare for Pilot Workshop: January 28 & 29, 2021

# HEALTHCARE & HOMELESSNESS PILOT INITIATIVE KICKOFF CALL

5

Meet & Greet Part 2



# Meet and Greet Instructions

- Get ready to share your answers to the question **‘We’re drawn to join this Pilot because....’**
- When we come to your community, we’ll ask one person from the Health System side and one person from the Homelessness Response System side to come off mute and share your answer
- Others can share your answers with the chat feature

# Sacramento, California





# Washington County, Oregon

# HEALTHCARE & HOMELESSNESS PILOT INITIATIVE KICKOFF CALL

6

Wrap Up & Next Steps

# Prepare for Pilot Workshop

## When:

Thursday January 28, 2021; 12-5pm EST / 9am-2pm PST

Friday January 29, 2021; 12-5pm EST / 9am-2pm PST

## Who:

- Day-to-day leads
- Data leads
- QI Leads
- Clinical lead
- Community benefit lead

## What:

The first learning workshop held virtually focused on building relationships across the learning network and advancing the learning and application of improvement methods for each community.

# Immediate Next Steps

- ✓ Provide availability for call with Improvement Coach (via Doodle link in email)
- ✓ Review and start working on Foundations Phase Starter Pack
- ✓ Homeless System Coaching call
- ✓ Health Care System Coaching call
- ✓ Pilot Team Coaching call

**Q & A**

# Any Additional Questions?



**Aleya Martin**  
Sr. Project Manager

Please contact  
Aleya Martin at  
[AMartin@ihi.org](mailto:AMartin@ihi.org)



# Wrap Up

## Bakersfield, CA

- *Improve lives in the community we serve, and contribute to solving homelessness in our community*
- *Better understanding of what's taking place in the homelessness response and the health care system - and how to address the resource gaps that COVID has exposed*

## Anchorage, AK

- *A strategic investment to understand homelessness and the role of the healthcare system and share what has been learned and how to improve*
- *Continuing the grassroots effort around healthcare and homelessness and build on the partnerships that exist - understanding that healthcare is often on the front line of defense*

## Chattanooga, TN

- *Homelessness is bad health - how does a community and health care system operationalize the population health tools that have been developed? How can we pair that with the data we use to help the homeless population in our community?*

## Sacramento, CA

- *A lot of cooperation between health care systems and looking forward to more coordination in search of new solutions to help the populations experiencing homelessness*
- *Can't solve this problem without real coordination and real leadership*

## Washington County, OR

- *Opportunity to align with and boost good work that has been happening around supportive housing, with exciting alignment already happening between health care, housing, and homelessness response*

## Marin, CA

- *Looking forward to building on the success of working with Built for Zero and the whole-person care efforts, which has provided support for coordinating care across all aspects of health care and community resources*