## Systems for Action National Coordinating Center

Systems and Services Research to Build a Culture of Health



Strategies to Achieve Alignment, Collaboration, and Synergy across Delivery and Financing Systems

## Housing for Health: Assessing Cross-Sector Impacts of Permanent Supportive Housing for Homeless High Users of Health Care

Research In Progress WebinarWednesday, September 14, 201612:00-1:00pm ET/ 9:00-10:00am PT



Funded by the Robert Wood Johnson Foundation

## Agenda

Welcome: Glen Mays, PhD, MPH, Director, RWJF Systems for Action National Coordinating Center, U. Kentucky College of Public Health

#### Housing for Health: Assessing the Cross-Sector Impacts of Permanent Supportive Housing for Homeless High Users of Health Care

Presenter: Ricardo Basurto Davila, PhD, MS, Chief, Policy Analysis Unit, Los Angeles County Dep't. of Public Health <u>RBasurto@ph.lacounty.gov</u>

Commentary: Amy Ellen Schwartz, PhD, Chair, Systems for Action National Advisory Committee, and Professor, Maxwell School of Syracuse University <u>amyschwartz@syr.edu</u>.

**Corrin Buchanan, MPP,** Director, Diversion and Reentry Housing, Los Angeles County Dep't. of Health Services <u>CBuchanan@dhs.lacounty.gov</u>

**Questions and Discussion** 

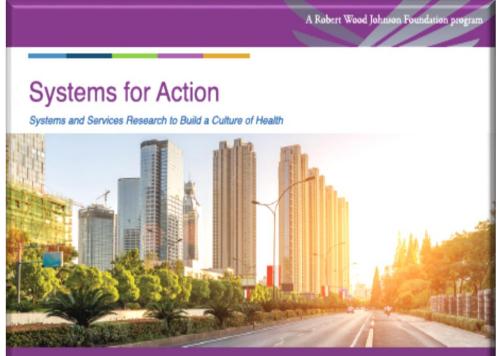
## RWJF Systems for Action Program to build a national Culture of Health <u>http://www.systemsforaction.org/</u>

Overview

#### Mission: Widen the lens beyond health care & public health systems

Rigorous research to identify novel mechanisms for aligning delivery and financing systems in *medical care*, public health, and social & *community services* in ways that improve *health* and wellbeing, achieve efficiencies in resource use, and reduce *inequities*.

www.systemsforaction.org



Research Agenda Delivery and Financing System Innovations for a Culture of Health

# Wide lens: implicated sectors

- Public health
- Medical care: ACOs, PCMCs, AHCs
- Income support
- Nutrition and food security
- Education and workforce development
- Housing
- Transportation
- Criminal justice
- Child and family services
- Community development and finance





USDA

Program

Putting Healthy Food

Within Reach

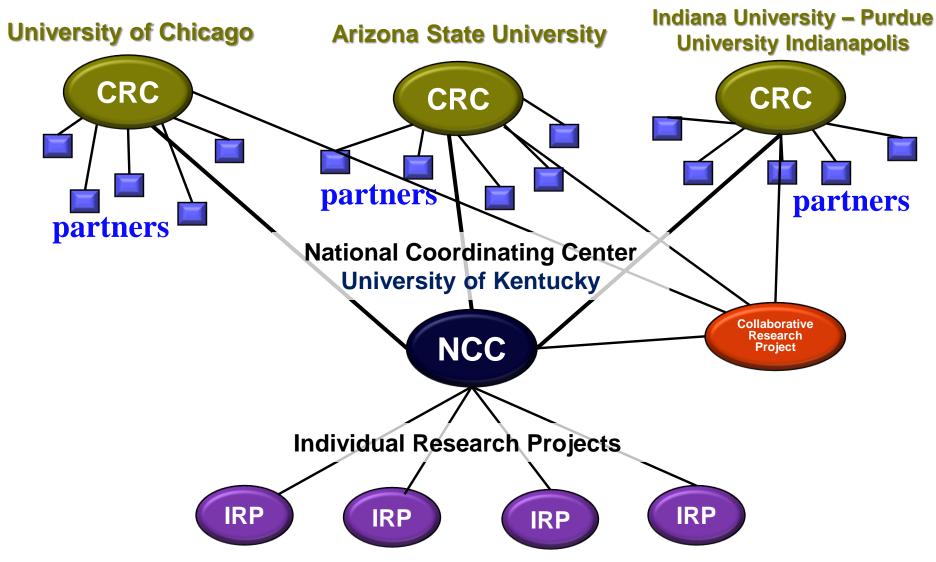
Supplemental Nutrition Assistance

# Study novel mechanisms for aligning systems and services across sectors

- Innovative alliances and partnerships
- Inter-governmental and public-private ventures
- New financing and payment arrangements
- Incentives for individuals, organizations & communities
- Governance and decision-making structures
- Information exchange and decision support
- New technology: m-health, tele-health
- Community engagement, public values and preferences
- Innovative workforce and staffing models
- Cross-sector planning and priority-setting

## **S4A Program Structure**





## **Collaborating Research Centers**

- University of Chicago: Randomized trial of a Comprehensive Care, Community and Culture program
- Arizona State University: Analysis of medical, mental health, and criminal justice system interactions for persons with behavioral health disorders
- IUPUI: Evaluating integration and decision support strategies for a community-based safety net health care and public health system
- University of Kentucky: Measuring multi-sector contributions to public health services and population health outcomes.

## **Individual Research Projects**

- Michigan State University: Randomized trial of Community Complex Care Response Team
- Los Angeles Department of Health: Evaluation of Housing for Health initiative, which provides permanent housing and supportive services for vulnerable populations
- University of Delaware: Randomized trial to test the efficacy of using the team approach to leverage different financing systems and services
- Drexel University: Evaluation of Building Wealth and Health Network within anti-poverty programming

# Presenter



**Ricardo Basurto Davila, PhD, MS** Health Economist Chief, Policy Analysis Unit Office of Health Assessment and Epidemiology Department of Public Health Los Angeles County <u>RBasurto@ph.lacounty.gov</u>

## Systems for Action Individual Research Study

Housing for Health: Assessing the Cross-Sector Impacts of Permanent Supportive Housing for High-Utilizers of Health Care Services

Ricardo Basurto-Dávila, PhD



COUNTY OF LOS ANGELES Public Health



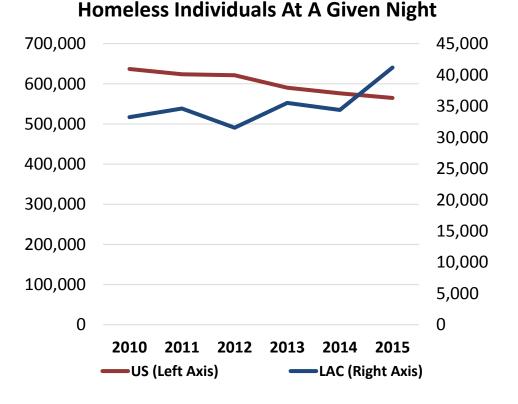






#### **Homelessness in Los Angeles County**

- In 2015, LAC had largest local population in the country of:
  - Homeless individuals(41,174; 7% of US)
  - Chronically homeless (14,173; 15% of US)
- Between 2014-15 LAC experienced largest increase in chronically homeless in the US



Sources: HUD, Annual Homeless Assessment Report, 2010-2015







#### Homelessness and Health

- Homeless populations are at higher risk of
  - Acute and chronic illness
  - Mental health disorders
  - Mortality
- Significant gaps in access to health services
- Heavily reliant on emergency department visits
- High rates of hospitalizations for preventable conditions







#### **Homelessness Also Costly to Other Public Sectors**

LAC Department	Unique Homeless Individuals Served	Expenditures on Homeless, FY 2014	Avg. Cost per Person
Social Services	114,037	\$ 293.7 million	\$ 2,600
Mental Health	39,073	291.7 million	7,500
Health Services	47,431	255.3 million	5,400
Sheriff	14,754	79.6 million	5,400
Public Health	6,939	32.2 million	4,600
Probation	2,795	12.1 million	4,300
TOTAL	148,815	\$ 964.5 million	\$ 6,500
Most Costly 10%	14,882	\$ 499.1 million	\$ 33,500

Source: Wu and Stevens, LAC CEO Report, 2016







#### Housing for Health Initiative (HFH)

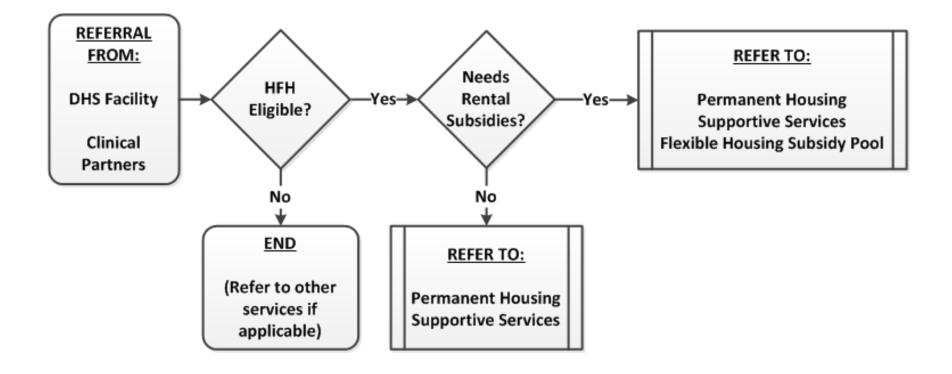
- Created in 2012 by Department of Health Services
- Provides permanent supportive housing (PSH) and rental subsidies to homeless individuals who are high-utilizers of DHS services
- Program Objectives:
  - To reduce homelessness
  - To improve health outcomes among homeless
  - To reduce inappropriate use of expensive health care resources
- HFH will grow from 1,200 to 3,000 clients in 2016







#### **Housing for Health Client Process**









#### **HFH's Unique Approach to PSH**

- By focusing on DHS high-utilizers, program aligns goals of—at least—health care and housing sectors
  - Probably other sectors as well
  - Clients likely high-utilizers of other agencies
- Reduces fragmentation in delivery of supportive services
  - Centralized contracting with providers
  - More intense oversight than typical PSH model
- Reduces fragmentation and uncertainty in financing mechanisms
  - Housing, supportive services, and rental subsidies financed through DHS general fund







#### **Previous Studies Have Found That PSH**

- Increases housing stability
- Reduces:
  - Use of shelters
  - Use of acute care services
  - Hospital admissions
  - Hospital length of stay
  - Incarcerations







#### Limitations of Existing Evidence

- Most studies focused on impacts on single sectors (e.g., healthcare only OR criminal justice only)
- A few recent studies have used administrative data <u>linked</u> <u>across sectors</u> but they:
  - Compared PSH to individuals who did not receive housing, did not compare different PSH approaches
  - Have not explored **dynamic** aspects of program impacts:
    - Spillover effects/synergies
    - Feedback effects (e.g., health -> employment -> health)







#### **Our Research Questions**

- Does HFH improve health outcomes?
- Does HFH improve the quality of healthcare received by its clients?
- How does the effectiveness of HFH compare to other PSH programs?
- How does HFH affect service utilization and costs across public sectors when compared to other PSH programs?
- Do client linkages to other sectors create synergies, thus improving <u>system-wide</u> outcomes and lowering costs?







#### Data

- Linked administrative data on service utilization from six LAC departments:
  - Health Services
  - Public Health
  - Mental Health
  - Social Services
  - Probation
  - Sheriff

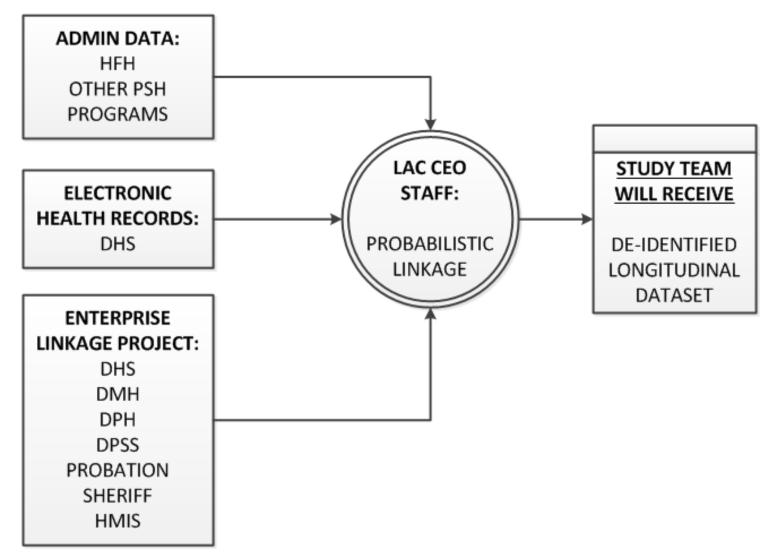
- Administrative data from HFH and other PSH programs
- Electronic health records from DHS
- Survey of benefit eligibility of HFH and non-HFH clients
- Qualitative data:
  - Focus groups
  - Interviews







#### Linkage Process Covering Period 2012-2016









### Mixed-Methods: Quantitative Analysis

- Propensity score methods to create sample of:
  - HFH clients
  - Non-HFH individuals with similar characteristics to HFH clients
- Difference-in-differences analysis
  - Before-After
  - Treatment-Control
- Participatory simulation modeling







#### Mixed-Methods: Qualitative Analysis

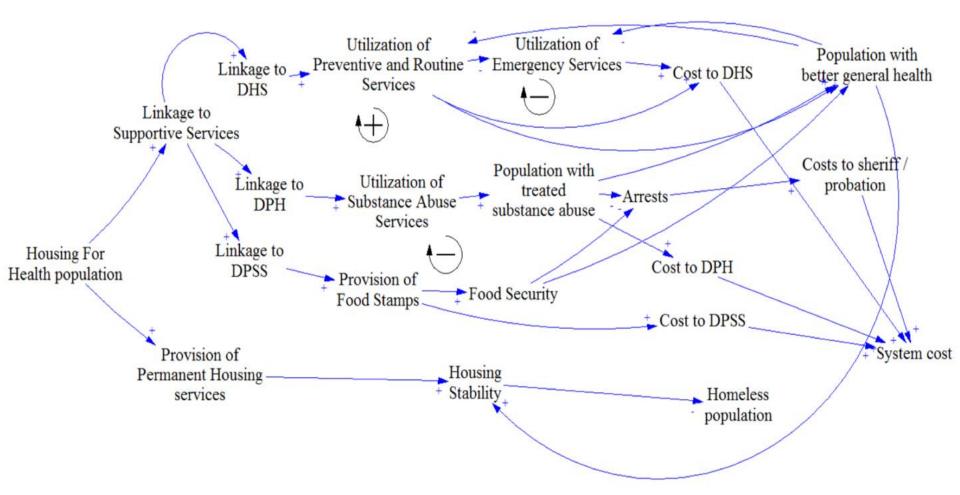
- Between four and eight focus groups with:
  - HFH clients
  - HFH service provider staff
  - Non-HFH PSH clients
  - Non-HFH PSH service provider staff
- Semi-structured interviews with key informants
  - Senior HFH and non-HFH staff
  - Senior staff at other LAC agencies (e.g., DHS, DPSS,...)
- Data will be analyzed by two independent reviewers and by using Atlas.ti software







#### Findings Will Help Us Understand This Process:









#### Significance: This Study Will Help Us...

- Assess whether HFH is achieving its goals
- Understand the spillover effects and synergies created by providing PSH to the homeless
- Learn whether there is a financial case for similar programs, which would make them <u>sustainable</u>
  - From the perspective of health agencies
  - From perspective of other agencies (e.g., DPSS)
  - Opportunity for cross-subsidizing negatively affected agencies







#### **Study Milestones**

Month/Year	Goal
January 2017	<ul> <li>Receive Jan 2012 – June 2016 linked data</li> <li>Begin qualitative data collection</li> </ul>
April 2017	<ul> <li>Begin stakeholder engagement for participatory modeling process</li> <li>Begin collecting survey on benefits eligibility</li> </ul>
July 2017	<ul><li>Conclude analysis of qualitative data</li><li>Begin development of simulation model</li></ul>
December 2017	<ul> <li>Receive June 2016 – June 2017 linked data</li> </ul>
March 2018	<ul> <li>Conclude analysis and development of simulation model</li> </ul>
June 2018	<ul> <li>Final report, policy brief, and manuscript</li> </ul>







# THANK YOU!

#### **FOR MORE INFORMATION, CONTACT:**

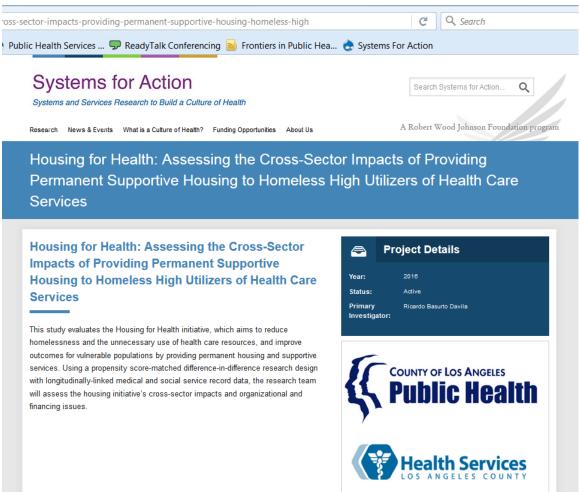
**Ricardo Basurto-Davila (PI)** RBasurto@ph.lacounty.gov

**Corrin Buchanan (Co-PI)** CBuchanan@dhs.lacounty.gov



# **Project Updates**

*go to:* <u>http://systemsforaction.org/projects/housing-health-assessing-cross-sector-impacts-</u> *providing-permanent-supportive-housing-homeless-high* 



# Commentary



#### Amy Ellen Schwartz, PhD

Chair, Systems for Action National Advisory Committee Daniel Patrick Moynihan Chair in Public Affairs and Professor of Economics, Maxwell School, Syracuse University

Professor of Public Policy, Education, and Economics and Director, New York University Institute for Education and Social Policy <u>amyschwartz@syr.edu</u>



#### **Corrin Buchanan, MPP**

Director, Diversion and Reentry Housing Los Angeles County Department of Health Services <u>CBuchanan@dhs.lacounty.gov</u>

# **Questions and Discussion**

## Webinar Archives & Upcoming Events

go to: <u>http://systemsforaction.org/research-progress-webinars</u>

#### **Upcoming Webinars**

Wednesday, September 21, 2016, 12 pm, ET

THE IMPACT OF INTEGRATING BEHAVIORAL HEALTH WITH TEMPORARY ASSISTANCE FOR

**NEEDY FAMILIES TO BUILD A CULTURE OF HEALTH** 

*Mariana Chilton, PhD, MPH*, Associate Professor, and *Sandra Bloom, MD*, Associate Professor Department of Health Management & Policy, Drexel University Dornsife School of Public Health

October 12, 2016, 12 pm, ET

INCOME AND HEALTH INEQUALITIES AND THEIR RELATIONSHIP TO POPULATION HEALTH DELIVERY SYSTEMS

**Glen Mays, PhD, MPH**, Director, Systems for Action National Coordinating Center, College of Public Health and **James P. Ziliak, PhD, MA**, Director, Center for Poverty Research, University of Kentucky

October 20, 2016, 1 pm, ET <u>ACCREDITATION AND MULTI-SECTOR CONTRIBUTIONS TO POPULATION HEALTH ACTIVITIES:</u> <u>A DIFFERENCE-IN-DIFFERENCE ANALYSIS</u>

**Richard C. Ingram, DrPH**, MPH, Assistant Professor, Department of Health Management and Policy; U. of Kentucky College of Public Health

#### Thank you for participating in today's webinar!



For more information about the webinars, contact: Ann Kelly, Project Manager <u>Ann.Kelly@uky.edu</u> 111 Washington Avenue #201, Lexington, KY 40536 859.218.2317 **www.systemsforaction.org** 

# **Speaker Bios**

- Ricardo Basurto Davila, PhD, MS, is a Health Economist at the Los Angeles County Department of Public Health, where he leads the Policy Analysis Unit. His work involves economic evaluation and quantitative analysis in general of programs and policies in public health and other sectors that affect health outcomes. He previously was a Prevention Effectiveness Fellow at the US Centers for Disease Control and Prevention and an Assistant Policy Analyst at the RAND Corporation. <u>RBasurto@ph.lacounty.gov</u>
- Amy Ellen Schwartz, PhD currently chairs the RWJF Systems for Action National Advisory Committee. She is a Professor of Economics and Public Administration and International Affairs, and the Daniel Patrick Moynihan Chair in Public Affairs, in the Center for Policy Research at the Maxwell School of Syracuse University. She is also Professor of Public Policy, Education, and Economics, and Director of the New York University Institute for Education and Social Policy. Her research is primarily in applied econometrics, focusing on issues in urban policy, education policy, and public finance. Her research on urban economic development has included work on Business Improvement Districts, housing investment, school choice, and investment in infrastructure, among other issues in public finance. <u>Amyschwartz@syr.edu</u>
- Corrin Buchanan, MPP leads the Los Angeles County's Diversion and Reentry effort to provide housing and services to end homelessness for individuals who are justice involved, manage the Flexible Housing Subsidy Pool, a locally funded rental subsidy program, and provide policy and planning for the rapid expansion of housing resources through a network of community based organizations. <u>CBuchanan@dhs.lacounty.gov</u>