Hidden homelessness & community outreach: Opportunities for social accountability in practice

Dr. Anne Andermann
Family Medicine Centre
St Mary’s Hospital

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I have no conflicts of interest to declare

Dr. Anne Andermann
- Family doctor
- Public health physician
- Public servant
- Global health researcher
- Associate professor at McGill
- Book author
- Mother of two young children
- Second generation Canadian
- DPhil from Oxford University

http://www.mcgill.ca/familymed/research-grad/research/faculty/anne-andermann
Learning objectives

• At the end of this session you will be able

  • To explain how McGill Family Medicine has gradually developed and institutionalized Community Oriented Primary Care (COPC) approaches to better meet the needs of the local population that we serve
  • To understand the impetus for creating a community outreach clinic in Cote des Neiges (at Multicaf) and what this entails
  • To appreciate the various challenges that have been overcome and that remain in implementing such an initiative and the many partnerships involved
Acknowledgments – it takes a village...

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Not possible without patient navigators!
Outline

• Background
• The Community Outreach Clinic
• Initial results & lessons learned
• Clinical and advocacy tools
Background

- COPC at McGill
- Homeless count Montreal
- Cote des Neiges response
- St Mary’s retreat
Over 10 years of COPC at McGill University

• Teaching
  • Annual community orientation
  • COPC grand rounds
  • Complex care teaching

• Research
  • Mapping community resources
  • Hidden homeless research
  • Homelessness clinical guidelines

• Clinical innovation NEW!
  • Community outreach clinic

https://www.mcgill.ca/familymed/education/postgrad/copc
Meeting the needs of the community that we serve

The Annual Community Orientation

Residents, nurses, physicians and community group members at the Annual Community Orientation 2013 in Cote des Neiges

On the first Wednesday of August each year, there is a community orientation for incoming family medicine residents at McGill University. The purpose is to introduce residents to the multicultural community that they serve as well as to the community organizations who are important partners in providing patients and the population with much needed social support and services to positively impact the broader determinants of health. The community orientation is organized by the Community Oriented Primary Care (COPC) Committee at the Family Medicine Centre of St Mary’s Hospital with the support of several local community organizations including:
Only 6 people homeless in Côte des Neiges??

- Local SPVM street patrol aware of 47
- How many are hidden homeless?
Response

• Launch of the « Table de réflexion sur l’itinérance à Côte-des-Neiges »

• Resident research projects on hidden homelessness
  • Literature review – models of care
  • Interviews with caregivers
  • Hearing the voice of people with lived experience in Cote des neiges
Main findings – Making their voices heard

• Wide range of health & social challenges
• Multiple barriers to accessing care
• Potential solutions:
  • Raising awareness among local health workers
  • Create pathways to help people get the care they need
  • Increasing community-based outreach

“If they would come in and see the needs of the people, they'd get a more general view and not just say, ‘well, we can't help people unless they come to us.’ Sometimes it's better to go out to them.”

- Canadian-born female in her 40s
St Mary’s retreat 2016

• Goal 5: A Patient’s Medical Home will provide each of its patients with a comprehensive scope of family practice services that also meets population and public health needs

• 5.5: Patients’ Medical Homes should address the health needs of both the individuals and populations they serve, incorporating the effects that social determinants such as poverty, job loss, culture, gender, and homelessness have on health

How can we do better?

A new clinical practice model to better serve the needs of our local community.
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The Community Outreach Clinic

- Goals
- Partners
- On-boarding process
Goals

• **Patient & community-oriented goals**: To improve health outcomes and increase access to care for local community members in need, who face various health and social challenges, but do not have a patient medical home, and want to access comprehensive primary health care services on an ongoing basis.

• **Educational goals**: To provide an opportunity for medical students and family medicine residents to acquire collaborator and health advocacy competencies through practical experience & patient care.

• **Institutional goals**: To provide an opportunity for the primary health care organization to engage in social accountability and outreach.
Partners

- Family Medicine Directors
- Clinic Administrators
- Community organizations
- Clinical supervisors
- Researchers (evaluation)
- Family medicine residents
- Second year medical students (patient navigators)
On-boarding process (2-3 months)

- **Recruitment**
  - Potential participants identified by local community groups
  - Information offered & sign-up form completed with patient navigators

- **Clinic visit 1**
  - At Multicaf on Thursday mornings
  - Each R1 is matched with one or two community outreach patients
  - Patient navigator support ongoing

- **Clinic visit 2**
  - Within 2-6 weeks at St Mary’s

- Ongoing follow-up
Family medicine clinic sign-up form
Fax to: Sophie at 514-734-2605

Some people need a family doctor but face challenges finding long-term access to health care services close to where they live. We are offering the opportunity for up to 25 people to join the St Mary’s Family Medicine Centre, a primary health care clinic in Côte-des-Neiges affiliated with McGill University. The centre provides care using multi-disciplinary teams including family medicine doctors-in-training, family doctor supervisors, nurses, a psychologist and a social worker. If you are interested, please complete the information below. You will then be contacted within a few weeks to schedule your first appointment which will be held at Multicaf to meet your doctor and learn about the clinic services. All following appointments will be at the St Mary’s Family Medicine Centre at 3777 rue Jean Brillant, Montreal, Quebec, H3T 1M5.

First name: ________________________________
Last name: ________________________________
Date of birth: Day ___________ Month ___________ Year ___________
Language preferences: ________________________________
Home address: ________________________________
City: __________________ Province: ___________
Postal code: __________________ Telephone: __________________
RAMQ number: __________________ expiry ___________
St Mary’s hospital card number: __________________
Mother’s first and last name at birth: __________________

Frequently asked questions

Where is the clinic located?
The St Mary’s Family Medicine Centre is located at 3777 rue Jean Brillant, Montreal, Quebec, H3T 1M5 between ch. Côte des Neiges and rue Légaré.

What if I live far from the clinic?
This opportunity may not be as useful for people who live far from the clinic since the idea is to use the clinic for all your health needs – large or small, urgent or not. Please ask the CLSC where you live for options closer to you.

What if I need help to fill out the form?
There are student volunteers, also called “patient navigators” who can help you fill out the form and obtain the information needed to sign-up with the St Mary’s Family Medicine Centre.

What if I don’t have a St Mary’s hospital card?
The student volunteer can also help you to get a hospital card made by bringing your valid RAMQ card and going in person to:
Room G-310 (located on ground floor in front of coffee shop)
St. Mary's Hospital, 3830 Lacombe Avenue, Montreal, Quebec, H3T 1M5
Telephone number: (514) 345-3511 ext. 2674

What if I don’t have a RAMQ card or a permanent address?
The social worker at Multicaf can help you to obtain a RAMQ card and fill out the form even if you do not have a permanent address.

What if my question is not listed here?
Please ask the student volunteer who will be pleased to help you find the information you are looking for, or you can also speak with Bernard Besancenot at Multicaf for more information.
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Initial results & lessons

- Almost 50 patients matched
- Health and social challenges
- Relationships of trust
- Maintaining contact
Over 50 patients connected to care last year

- Almost 50 community outreach patients have been matched to R1s and can now access comprehensive care and continuity of care in a patient medical home
- Many have since enrolled their family members (children, spouses)
- Patients come from a wide range of nationalities, ages and genders
- Dealing with a broad range of health & social concerns
Important health and social needs addressed

CASE EXAMPLES

Woman in her 60s homeless following an injury, has lived in over 10 apartments in 10 years, victim of violence due to precarious situation.

Man in his 40s suffering due to recent breakup, orphaned, came to Canada as a child, experienced physical and emotional abuse by foster family.

Woman in her 40s recently separated from her partner, returned to her home country to visit relatives and was notified by school to return due to incident of incest during her absence.

Man in his 40s concerned about erectile dysfunction has fasting blood glucose over 18.

- Undiagnosed diseases
  - Diabetes, cancer, heart disease, liver disease, etc.
- Social isolation
  - Grown children / marital breakup, living alone, etc.
- Poverty
  - On welfare / unemployment insurance, etc.
- Violence
  - Assault, restraining order, moved to shelter, incest, etc.
- Vulnerably housed
  - Rats, bed bugs, drugs in neighborhood, using shelters, etc.
- Mental health and addictions
  - Depression, schizophrenia, alcohol addiction, etc.
- History of trauma
  - Kidnapping prior to moving to Canada, child abuse, etc.
Clinical insights

• Understanding the motivations of patients in seeking care
• Recognizing the importance of building relationships of trust
• Assuming responsibility for maintaining contact and follow-up
• Necessity of “lowering the barriers” in facilitating attendance at clinic
• Continuum of marginalization and capacity to care for patients in need
• Considering the whole person in the care planning process
Requires +++ communication & coordination

- Logistically complex undertaking
- Ensuring good communication & coordination among all partners
- Connectivity outside the unit
- Protecting patient confidentiality & focus on patient experience
- Preparing revised briefing materials & streamlining processes for next year
  - Patient navigator guide
Formal evaluation in progress

- MSc research project
- Mixed methods study
- Feedback to improve process for future years
- Impact on student and resident competencies
- Patient experiences and suggestions for improvements
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Clinical and advocacy tools

- New homeless health care guidelines
- Social medicine clinical tools
- Advocacy for structural change
- Further reading
Plan d'action interministériel en itinérance 2015-2020 – Mobilisés et engagés pour prévenir et réduire l'itinérance

En l’absence d’un système de services qui tient compte de la nature multiproblématique, à long terme et répétitive de ses besoins, la personne itinérante a peu de chance de s’en sortir.

General Recommendations for the Care of Homeless Patients:
Summary of Recommended Practice Adaptations
Health Care for the Homeless Clinicians’ Network

http://publications.msss.gouv.qc.ca/msss/document-000813/
Homeless health care guidelines

• Main interventions
  • Facilitating access to housing
  • Facilitating access to income
  • Mental health and addiction care
  • Case coordination & management

• Special populations
  • Indigenous peoples
  • Women
  • Youth
  • People with disabilities

Clinical tools


https://www.mcgill.ca/clear/download
CHAPTER 26
Reforming Health Systems to Promote Equity and improve the Health of Under-Served Populations

Anne Andermarche

LEARNING OBJECTIVES

After reading this chapter, you should be able to:

1. Understand the role of structural factors and systems in creating marginalization.
2. Appreciate the complexity involved and jurisdictional ambiguities in addressing challenges relating to disadvantaged and under-served populations.
3. Identify pathways for creating structural changes to promote more inclusive, equitable, and healthier societies.

https://www.canadianscholars.ca/books/under-served
Further reading

Taking action on the social determinants of health in clinical practice: a framework for health professionals

Anne Andermann MD DPhil; for the CLEAR Collaboration

https://www.mcgill.ca/clear/products
Questions?

For more information please contact: anne.andermann@mcgill.ca

https://www.mcgill.ca/familymed/education/postgrad/copc

http://www.mcgill.ca/clear