## **RESOLUTION 2023-C**

**SUBJECT:** Improving Discharge Outcomes for Patients Experiencing Homelessness

**SUBMITTED TO:** Michigan Osteopathic Association House of Delegates

**SUBMITTED BY:** Council of Interns and Residents

**REFERRED TO:** Public Affairs Reference Committee

**RECOMMENDATION:** Approve as Amended

## **ACTION TAKEN AT THE MOA HOD:**

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**WHEREAS,** people with chronic conditions experiencing homelessness have higher rates of hospitalizations than people who are housed, and healthcare costs are 3.4 times higher for unsheltered versus sheltered individuals with inpatient medical costs that are 4.1 times higher for unsheltered individuals when compared to sheltered; and

WHEREAS, barriers to accessing care such as lack of insurance and transportation, as well as poor continuity of care result in frequent visits by those experiencing homelessness to the emergency department as their primary or only source of health care, and following discharge, these patients have a greater risk of returning to the emergency department with readmission, typically for the same or a similar diagnosis as their initial visit; and

WHEREAS, patients experiencing homelessness are sometimes restricted in the healthcare they receive due to their lack of medical insurance coverage and their housing status which veers surgical procedures from happening at an appropriate time due to worries of post-op care and utilizing operating only when the condition becomes emergent; and

WHEREAS, each year, approximately 1,100 individuals living on the street, in tents, in cars, or in places not fit for human habitation are connected to shelter, housing, behavioral health supports, and other resources for their safety and well-being through Michigan's Projects for Assistance in Transition from Homelessness (PATH) program and other street outreach funding; and

WHEREAS, medical respite programs in Michigan, such as Homeowners Property Exemption (HOPE), are designated for those experiencing homelessness and those who are recovering from their inpatient stay, yet are not sick enough to remain in the hospital. The use of medical respite programs may be underutilized due to the lack of information to providers about such programs; now, therefore be it

WHEREAS, the Michigan Osteopathic Association currently has no policy recognizing the impacts of patients experiencing homelessness have on healthcare; and

WHEREAS, the American Osteopathic Association (AOA) encourages all physicians to partner with their communities to understand barriers to health, and advocate to improve access to healthcare for people experiencing homelessness; and the AOA supports, through education and advocacy, dissemination of social and health-related resources and programs that serve individuals and families experiencing a homeless situation and their care providers; and AOA advocate, promote, and support programs that ensure delivery of primary and preventive healthcare to all underserved populations, including those experiencing homelessness; and

WHEREAS, the AOA supports state and federal efforts, including efforts by private organizations, as well as those enumerated in the 2018 House of Delegates resolution number H-428 – A/2018, and those efforts include addressing social determinants affecting health, substance abuse programs, mental health resources, clinical care programs and provision of stable housing for all homeless individuals that are seeking temporary or permanent shelter; and now, therefore, be it

 **RESOLVED**, that the MOA collaborate with relevant stakeholders to ENCOURAGE EDUCATIONAL OPPORTUNITIES FOR physicians on executing holistic, cost-effective and evidence-based discharge planning while being cognisant of the unique healthcare and social needs of individuals experiencing homelessness; and, be it further

**RESOLVED**, that the MOA ADVOCATE FOR AND encourage the collaborative efforts and communication between health systems, street medicine outreach programs, primary care providers, recuperative care centers, and other stakeholders; and, be it further

**RESOLVED**, that the MOA DEVELOP A TASK FORCE THAT WILL EVALUATE THE CURRENT STATE OF TRANSITIONS INCARE FOR THE UNHOUSED POPULATION IN MICHIGAN AND REPORT BACK WITH ACTIONABLE ITEMS AND/OR EDUCATIONAL OPPORTUNITIES FOR PHYSICIANS AT THE MOA HOD IN 2024. comprehensive homelessness policies which facilitate the transition of care that address the medical and social needs of patients experiencing homelessness; and, be it further

RESOLVED, that the MOA adopts AOA resolutions H449 - A/20 and H428

REFER TO:

FISCAL NOTE:

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BACKGROUND INFORMATION: This resolution has been created through the MOA members who are a part of the Spartan Street Medicine (SSM) & Student Osteopathic Medical Association (SOMA) Class of 2025 Organizations at MSUCOM. This joint project, with the assistance of our AMA MSS colleagues who are a part of SSM, was created following a case discussion of one of our patients experiencing homelessness who had passed away primarily due to the barriers to health care that was driven, to a large extent, by the homelessness situation experienced by the patient.

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