Bringing It to the Streets: A Novel Approach to Improve Palliative Care for Homeless Adults (FR468)

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Objectives

- Identify specific challenges faced by homeless patients at the end of life in an urban setting.
- Recognize the scope of problems for providers who care for homeless patients at the end of life.
- Describe two different models for addressing the unique palliative care needs of homeless patients.

People who are homeless experience a disproportionate amount of serious illnesses early in adulthood and may more frequently experience violent deaths. Homeless adults often share end-of-life concerns reported by housed individuals, for example dying without suffering, being surrounded by loved ones, and dying in a location of their choosing. However, homeless individuals often face additional challenges, including identifying reliable caregivers, securing safe and stable housing, and establishing continuity and trust with medical and social services providers.

This population is notoriously difficult to engage in care for a variety of reasons, including limited access to phones and transportation, substance abuse, medical and psychological comorbidities, and limited income. In light of such significant challenges, hospice and palliative care providers often struggle to provide dignified and safe end-of-life care for their homeless patients. Providers may be unaware of available community services for homeless persons, or they may have difficulty coordinating care across fractured and often disconnected agencies and systems. In this session, we will outline the challenges faced by homeless people with serious illnesses, review existing literature related to caring for this population, and describe different models that enable high-quality palliative care for homeless individuals. We will specifically highlight a novel approach to providing patient-centered, coordinated palliative care services for homeless patients in Seattle. Using case examples from the pilot phase of the program, we will contrast standard outpatient palliative care clinic services with the new, patient-centered “care conference” model. Based on lessons learned from the pilot phase of this program, we will share best practices in palliative care for homeless persons, which can be applied in a variety of urban settings.