

“Go to the People”: Street Medicine in Hawai’i



Trauma-Informed Care TF
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Gov Ige state of emergency 2015 Front page article of New York Times: June 3, 2016

Learning Objectives

- Brief Points on Homelessness
- I.H.S. Homeless Outreach and Outreach Navigator Program (ONP)
- Assisted Community Treatment Law
- Other Street Medicine-type efforts
- Brief Update on Behavioral Health Crisis Center (BHCC)

Homeless on Oahu

- 4,028 on Oahu* (3,951 compared to year before)
- Majority of chronically homeless have a psychiatric condition

2023 Point in Time Count– Partners in Care

Historical Background: Pre-Omnibus Plan

- Outpatient care based on CMHC catchment areas (1963, Community Mental Health Center Act)
- Deinstitutionalization
- Development of ASSERTIVE COMMUNITY TREATMENT (1970's)
- HSH under DOJ oversight (CRIPA lawsuit 1991)
- 2009 DOJ settled case with State of Hawai'i

During (DOJ)Omnibus Plan

- Massive expansion of array of services including Assertive Community Treatment, Suicide/Crisis services, and (Group Home) Housing Array
- Frequent audits of community services by Special Monitor
- DOJ Consulting team stressed Presumptive Eligibility and “No Wrong Door” approach
- Privatization of the MH system

The Severely Mentally Ill Today





Obstacles to helping gravely ill

- Poor insight (anosognosia), refusal of help
- MH laws primarily focused on IMMEDIATE dangerous
- Lack of benefits, lack of ID
- Family has fallen out of their lives
- Most challenging to house.
- Some will require higher end housing (ARCH, Foster)

Obstacles to helping gravely ill

- Hospitals probably disinclined to commit/treat these individuals due to multiple obstacles: Financial, Medicare DRG's, tying up hospital bed for MONTHS, patient's refusal of medications combined with difficulty in getting OTT and/or legal guardianship

Chronically homeless, mentally ill

- High medical co-morbidity: diabetes, infections, addictive disorders, cognitive impairment
- High cost to the healthcare system
- METH!

Assisted Community Treatment

- Severely mentally ill individuals have high rates of incarceration and hospitalization
- Patterned after Kendra's Law
- Original version in 2015
- Revised several times
- **LOW UTILIZATION**

Assisted Community Treatment

- Documented psychiatric hospitalization or incarceration. History of being unsafe without treatment.
- Submit MH-10, proposed treatment plan
- Implementation of the Order for two years
- Responsible psychiatrist or APRN-Rx

I.H.S. Outreach Navigator Program

- Funding from City and Country of Honolulu
- Family law attorney on retainer
- Prioritized areas of downtown, urban Honolulu, but clients all over the island

My Team



More on ACT Law

- Current legislation HB2159 HD2
- I.H.S. has obtained about 30-40 ACT orders and about 10 legal guardianships
- Less than 5 total non-I.H.S. ACT orders on Oahu, 1 ACT order on Maui, 1 on Hawai'i Island, none on Kaua'i
- Movement to pursue ACT orders on Hawai'i Island

Street Medicine

- NOT medical care in a homeless clinic
- NOT medical care in a mobile van
- Principles highly aligned with Trauma-Informed Care values and Social Justice
- Often connected to academic centers, including providers who work in street medicine and “traditional” centers like hospitals and clinics

Ankle Sore



Street Med Instit. Core Values

- Go to the People
- Solidarity- We stand with our sisters and brothers sleeping outside, advocating for others to see them for the beloved human beings they are
- Authenticity
- Transformative Disruption- We drive change in our communities and health care systems to achieve justice and health equality for all of us, no matter where we sleep at night
- Streets as a Classroom
- Healing Community

SMI Annual Symposium

- Kansas City, MO September 15-18, 2024
- Hilo, Hawaii 2025?

Street Medical Care Oahu

- H₃RC– closest to being Street Medicine
- Institute for Human Services– primarily just BH
- Waimanalo Health Center

Homeless Care Neighbor Islands

- Malami I Ke 'Ola (Maui)
- Hui No Ke Olan Pono (Maui)
- Hope Services Hawai'i Island
- Project Vision?

Clinical Vignette-- Stephen

- 55 year old chronically homeless male with left BKA, partial right foot amputation, bipolar disorder
- Over 200 ER visits in 2014, mostly to the same ER facility
- Targeted plan to hospitalize him, stabilize him, and aggressively search for foster placement
- No ER visits in 2015



