ACCELERATED RESPONSE BRIEF

MARCH 2021



Many organizations are doing important work to address Social Determinants of Health in their communities. The Root Cause Coalition seeks to document how members' initiatives, programs and policies have pivoted to meet growing inequities during Covid-19. The following insights and perspectives come from CommonSpirit Health Community and Homeless Health team.

1. PLEASE TELL US ABOUT YOUR ORGANIZATION AND ITS PRIMARY FOCUS.

CommonSpirit Health was formed in 2019 through the alignment of Catholic Health Initiatives (CHI) and Dignity Health. It has become one of the largest nonprofit health systems in the United States. Today, CommonSpirit operates 140 hospitals and more than 1,000 care centers across 21 states, all dedicated to serving the common good. As part of this alignment, CommonSpirit leadership and Dignity Health facilities in California launched the Homeless Health Initiative (HHI), a statewide strategy to co-locate, coordinate and integrate health care, behavioral health, safety and wellness services with housing and other social services.

Through the HHI, CommonSpirit is working with community-based organizations across California to strengthen the continuum of care for those experiencing housing insecurities. These programs are initiated with the support of local hospital leadership, community partners and government agencies to address housing insecurities and homeless prevention for at-risk families and individuals in addition to serving those experiencing homelessness.

2. WHAT IMPACT DID COVID HAVE ON THE POPULATION THAT YOU SERVE?

For vulnerable populations in California, such as those experiencing homelessness, the effects of COVID-19 have been even more challenging. Before the pandemic, United Way reported that 37% of households in California struggle to meet the cost of a basic standard of living. That was in 2019 before the devastation of a global health crisis that limited access to healthcare, disrupted income, closed schools and childcare centers and created new barriers to access necessities like food and hygiene supplies. While preventive measures like social distancing and stay-at-home orders have been effective in reducing the spread of COVID-19, not all Californians have equal access to the type of secure housing needed to follow these

To help mitigate the effects of the pandemic on marginalized communities, HHI has allocated \$3.5 million dollars to support California-based non-profit organizations. This includes needs such as food, shelter, flexible crisis response funds and hygiene supplies. And in several California communities, HHI grants have helped local agencies make the most of state programs.



In March 2020, Governor Newsom launched Project Roomkey, a state initiative dedicated to providing non-congregate sheltering options for people experiencing homelessness. The goals of Project Roomkey are preventing the spread of COVID-19, protecting human life and minimizing strain on the local health care system. Many communities quickly stood up quarantine and isolation hotels to support the vulnerable population. However, some communities were unable to sustain these programs due to a lack of funding and capacity. CommonSpirit Health partnered with Calaveras County to extend existing Project Roomkey operations, enabling 15 quarantine and isolation units to remain active in the community.

Project Homekey, the state's initiative aimed at developing permanent housing units across California utilizing CARES Act funding, followed after Project Roomkey to create long-term infrastructure that will support this population once the pandemic is over. In San Joaquin County, \$250,000 has been committed to the Central Valley Low Income Housing Cooperation as part of this effort. The project will provide 40 units of permanent housing in San Joaquin County by funding the purchasing, renovation, and services of a motel.

Even with the expanded services, there were still not enough beds to shelter everyone experiencing homelessness. Many community organizations continued their outreach efforts to reach unsheltered populations and engage with individuals living in encampments. As part of our collaborative effort to respond, CommonSpirit Health provided funding for hygiene supplies in both Santa Cruz and Merced. The distribution of these types of supplies also allowed outreach workers to connect with the individuals and listen to additional needs.

3. HOW HAS COVID CHANGED HOW YOUR ORGANIZATION OPERATES?

COVID-19 has increased the urgency for permanent and affordable housing, medical respite and recuperative care, improving the homeless continuum of care and expanding capacity for available services. CommonSpirit Health has supported this work for years through collaborative efforts in the local communities, but the public health crisis has changed the speed at which we operate, especially as it relates to the disbursement of our HHI grants. To meet this moment, HHI has set aside funds that are solely dedicated to the COVID-19 response. Through our existing relationships with community-based organizations, we can respond quickly and effectively to address urgent needs. These challenges include providing relief to the undocumented community and transition-aged youth, connecting isolated seniors to services in the community and health care providers and facilitating food delivery and meals.

We've found that different communities face different challenges. By working directly with community-based organizations, HHI is able to quickly address those needs with targeted, agile support to provide care as quickly as possible. We teamed with Everytable, United Way of Greater Los Angeles, and local government to provide the meal services needed to open temporary shelters in Los Angeles County which created additional access. In Bakersfield, our support to Operation BBQ Relief and a local restaurant—that would otherwise have been closed—helped them provide 2,500 hot meals per day for up to 2 weeks. In Shasta County, 24 households affected by COVID-19 and on the brink of homelessness received rental assistance through HHI's partnership with local non-profit Faithworks Community Coalition. In partnership with Santa Cruz Community Ventures, up to \$500 in emergency assistance was provided to undocumented families and individuals who would otherwise be ineligible for benefits through the state. By joining with community partners, HHI has amplified the impact of 26 projects, totaling nearly \$2.2 million in response to COVID-19 in 2020.

Along with support for local projects, CommonSpirit Health has led nationwide advocacy measures to protect at-risk communities from housing insecurity during the pandemic. For example, the end of rent moratoriums may compound the financial strain for people struggling to get by. Originally put in place by California's AB 3088 to prevent homelessness during the pandemic, rent moratoriums provided temporary relief. But renters must still pay back their rent as stipulated, prolonging an already precarious situation for many. CommonSpirit has prioritized equitably distributing resources to the most vulnerable populations, including the individuals experiencing economic hardship.

4. OVER THE LAST YEAR, WHAT DO YOU CONSIDER TO BE SOME OF THE MOST IMPORTANT LESSONS LEARNED THAT CHANGED THE WAY YOU APPROACH YOUR WORK?

The coronavirus crisis exposed the faults in the care continuum across every sector and highlighted the need for high-level change in partnership with community-level initiatives. As a major national healthcare system with an extensive network of local community partners, CommonSpirit is uniquely positioned to act on both of these fronts—from supporting the advocacy efforts to the extension of rental moratoriums at the national level, to funding emergency relief for undocumented immigrants.

In response to the pandemic, HHI has found that flexibility and collaboration with community partners is key to delivering care to the people who need it most. By taking the time to learn about local needs, support is delivered as effectively and equitably as possible. This type of approach requires innovation, an openness to new ideas, ongoing re-evaluation of focus and regular communication with partners. While this approach also requires an immense amount of effort, the result means community members and partners are being seen, heard and supported.

One of the most important lessons learned has been the need for flexibility with our resources and allowing our partners to identify needs as they arise rather than creating strict parameters. As part of the HHI COVID-19 response, we provided grants to United Way of California, Catholic Charities, The Salvation Army, California Association for Food Banks and California Coalition for Rural Housing. The partners distributed the funds to their local chapters/members and which allowed the resources to move quickly to the local communities and reach the populations most in need. This type of support would normally require a detailed strategy and evaluation, but we realized early on that if our response was too rigid, we would be adding additional barriers to potentially available resources.

5. WHAT OTHER INFORMATION WOULD YOU SHARE THAT IS RELEVANT TO YOUR ORGANIZATION ADAPTING DURING THE PANDEMIC?

CommonSpirit recognized early on that local conditions change daily. Therefore, to better understand the ongoing challenges, we've scheduled regular calls with partners such as The Salvation Army, United Way of California and Catholic Charities who also work to address social determinants of health and also serve as community anchors. Through regular engagement, we can stay informed of the current situation and can be proactive with our engagement and outreach.

Given that CommonSpirit is a health system, we are limited with what we can do and who we can reach. Therefore, when we seek to travel beyond our scope of expertise, our strategy is to partner with organizations that have a history of doing this work and who do it well. In partnership with AARP, HHI funding helped to support 5,000 boxes of food (130 meals/box) to vulnerable adults, with a focus on African American, LatinX, and American Indians, ages 50 and over in rural communities. A community member who was a recipient of the AARP Foundation Emergency Food Box Program remarked, "Now this is a box that makes me feel dignified. This looks like someone cared about the contents that went into this box and not just thrown in leftovers from a pantry."

Across California, CommonSpirit funded housing and shelter for vulnerable populations affected by COVID-19 through Project Roomkey and Project Homekey. In Sacramento and Calaveras Counties, HHI worked with community-based organizations and government to help localities build capacity to support the unhoused population from contracting COVID-19 and decreasing the burden on local hospitals. Seeing the value these programs bring towards addressing homelessness, HHI engaged the Governor's office to learn more about the long-term strategy to support this population and where might HHI plug-in. It is important for HHI to not only be responsive to the needs that arise, but also be proactive in seeking opportunities to address current and future needs.

One pillar of the HHI's work is to address racial and ethnic disparities through our investments. As COVID-19 spread through our communities, public data revealed that many communities—such as Black, Indigenous, and People of Color (BIPOC)—were heavily impacted by COVID-19. As a result,

HHI intentionally invested in community-based organizations that do work to support and uplift these specific populations. In San Francisco County, HHI partnered with Mission Neighborhood Centers to provide support to Latinx seniors in particular food and rental assistance, as well as technology that helped with access to healthcare.

By taking innovative approaches to address social determinants of health, HHI is able to advance the transformation of healthcare systems and communities. These strategies look outside conventional partnerships to measure impact without overburdening staff dealing with already limited resources. Creating relationships with partner organizations built on trust and transparency allows HHI to quickly identify and respond to the local needs of organizations and address upstream activities including health coverage, food insecurity and housing. Flexibly adapting to community-driven initiatives allows HHI the ability to partner with grassroots organizations all the way to state governments in creating collaborative, scalable and sustainable impact.

Over the course of the next year, HHI will continue its work strengthening communities, investing in permanent housing, targeting upstream social determinants of health, building a network of dedicated community-based organizations and advocating for state and national policies that will bring stability and sustainability to the communities served. CommonSpirit will continue the work to advocate for our community members, innovate programs and technologies to address root causes of long-term chronic diseases and poor health, and build a healthier future committed to health equity for all.