Context
Health Share’s 2018 Community Health Needs Assessment (CHNA) determined that access to inclusive and accessible physical, behavioral, and oral health continues to be a priority among our members and our community. Access to medical care integrates many factors that are difficult to measure at the system level, including location of services and transportation to those services.

The fact that services can be located by community members does not imply that they will be accessed. Our data shows that communities of color, people living with disabilities, and immigrant and refugee communities often experience additional barriers to accessing health services. Lack of interpretation services, accessibility from a universal design of space, as well as lack of transportation in rural areas of our region, further amplify variations in access to care.

Access to Care Strategy

**Health Share Goal:** To improve connections for Health Share and community members seeking services through the delivery system, and the workforce that supports them.

<table>
<thead>
<tr>
<th><strong>Outcome 1:</strong> Decrease the racial, disability, cultural and linguistic disparities in the utilization of health care services by Health Share members.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic Service Strategy 1: Support diversification, inclusive environments and training of the workforce on culturally and linguistically appropriate health care services.</td>
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<tr>
<td>Clinic Service Strategy 2: Make clinical spaces more accessible (location + transportation) and inclusive for people living with disabilities and in rural communities.</td>
</tr>
<tr>
<td>Health Delivery System Strategy 1: Ensure certified and effective language services and culturally specific services are readily available to our members. This includes having a clinical environment and policies that allow for patient interactions.</td>
</tr>
<tr>
<td>Health Delivery System Strategy 2: Reduce unintended health system traumas and oppression by creating and investing in systems that will advance trauma-informed care and strengthen the health system’s capacity to identify and address structural racism.</td>
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<tr>
<th><strong>Outcome 2:</strong> Increase sustainability and integration of Traditional Health Workers (THW) workforce in clinical and community-based settings.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Strategy 1: Continue to support/invest in infrastructure development (system + community) to improve THW workforce integration and utilization, including ensuring a living wage.</td>
</tr>
<tr>
<td>Community Strategy 2: Increase awareness among members and clinical systems of THW’s and how best to access and work with them.</td>
</tr>
</tbody>
</table>

“Revolution is based on land. Land is the basis of all independence. Land is the basis of freedom, justice, and equality.”

MALCOLM X
When people have access to care:

They can easily access services and supports to get their health needs met. Services include primary care, behavioral health, oral health, transportation and services that support the holistic health of an individual. Meaningful access to care occurs when the system’s delivery of care reflects the specific needs of the community.
Supportive Housing

Key Definitions

**Homeless**: Individuals with no fixed residential address, including those who are unsheltered or living in shelters, or who are staying temporarily with friends or family. For more information on this definition, please refer to www.nhchc.org/fax/official-definition-homelessness/.¹

**Supportive Housing**: A proven solution for highly vulnerable people who have complex health needs, including those with untreated or undertreated mental illness and addictions, and with long-term homelessness in their background. It combines deeply affordable housing with support services to help people live with stability, autonomy and dignity. Supportive housing embraces realignment of regional housing, justice, healthcare, and service delivery systems so that they can work together. Done well, it brings together partners and programs across a variety of boundaries, sectors and systems to create accessible pathways that end chronic homelessness, reduce racial disparities, and improve health outcomes.²

**Housing Related Services and Supports**: The services and supports that help people find and maintain stable and safe housing. Services and supports may include services at the individual level (e.g. individual assistance with a housing application process), or at the community level (e.g. traditional health workers stationed in affordable housing communities).³

Context

Health Share’s 2018 Community Health Needs Assessment (CHNA) determined that access to safe, affordable and supportive housing was one of six primary social determinants of health prioritized by our community. Lack of safe, affordable, and supportive housing often underlies individual and community health disparities, while access to housing is correlated with improved access to health care and reduced exposure to injury.

According to the Corporation for Supportive Housing’s (CSH) Tri-County Equitable Housing Strategy to Expand Supportive Housing for People Experiencing Chronic Homelessness, “It is nearly twice as expensive for people to remain homeless as it is for them to be successfully housed,” while today, our region is in need of over 3,100 units of supportive housing. Access to supportive housing can lead to stronger connections with primary care and more appropriate healthcare utilization by providing a safe and stable environment to manage one’s health and by connecting individuals to services and supports to remain stably housed.⁴

Supportive Housing Strategy

**Health Share Goal**: to increase access to safe, affordable and supportive housing for Health Share members and the community.

**Outcome 1**: Increase the provision of integrated housing support services paired with deeply affordable housing in the tri-county area.

Strategy 1: Health Share will make strategic financial investments in initiatives that provide housing support services and that leverage other supportive housing investments in the community with a focus on addressing racial disparities.

**Outcome 2**: Supportive housing investments are aligned, coordinated, and engaged in cross-sector partnerships, and directed to address disparities in homelessness.

Strategy 2: Health Share will invest staff resources (at least one full-time position) to engage in cross-sector partnerships to shape a regional supportive housing strategy that aligns with Health Share’s CHP priorities.

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¹ CCO 2.0 RFA – Appendix A – Definitions
² Tri-County Equitable Housing Strategy to Expand Supportive Housing for People Experiencing Chronic Homelessness Report – CSH
³ CCO 2.0 RFA – Appendix A – Definitions
⁴ CSH’s Supportive Housing & Healthcare Utilization Outcomes State of the Literature report