



LINCOLN COMMUNITY HEALTH CENTER, INC.

1301 Fayetteville Street • P.O. Box 52119
Durham, North Carolina 27717 – 2119

SUBJECT: Healthcare for the Homeless (HCH) Adapted Clinical Guidelines

EFFECTIVE DATE: 4/2014

REVISION DATE: 5/2017, 9/2019

REVIEWED DATE: 2/2022

PURPOSE:

To promote better health outcomes for homeless patients by considering their unique needs when providing treatment for acute and chronic medical problems.

The Advisory Committee on Adapting Clinical Practice for Homeless Patients 2010 identifies common barriers to treatment which include, but are not limited to: unstable housing, limited access to nutritious food and water, behavioral health and substance abuse problems, physical/cognitive impairments, limited education/literacy, lack of social supports, and chronic stress.

The Healthcare for the Homeless Clinicians' Network/Advisory Committee on Adapting Clinical Practice Guidelines for Homeless Patients provides general recommendations in providing care to homeless patients in addition to adapted guidelines for: diabetes mellitus, asthma, HIV/AIDS, otitis media, reproductive health care, chlamydial and gonococcal infections, and cardiovascular diseases.

PROCEDURES:

1. Clinicians caring for homeless patients will consider potential barriers/limitations to effective management/treatment of acute and chronic problems. The unique needs of each patient may be identified by any member of the interdisciplinary team including: intake & registration, nursing staff, social worker, substance abuse counselor, outreach worker or medical provider.
2. Clinicians caring for homeless patients will practice medicine in a manner consistent with generally accepted standards of care and clinical practice guidelines but may also consider adapted guidelines, as appropriate, based on the social, psychiatric, and medical needs of the patient. Clinicians may reference the adapted guidelines through the National Healthcare for the Homeless Council webpage: <http://www.nhchc.org/resources/clinical/adapted-clinical-guidelines> as indicated.
3. The social worker will conduct an initial psychosocial evaluation and needs assessment on new patients establishing care at HCH and on an as-needed basis thereafter. Patients who have been successfully housed in stable housing for 1-2 years should be encouraged to transfer their care to LCHC main, with rare exceptions to be communicated to LCHC leadership.
4. All patients identified as having substance abuse issues should be referred to the Substance Abuse Counselor unless they are already in care/treatment elsewhere or decline to be seen.



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REFERENCE: Adapted Clinical Guidelines: Adapting Your Practice: Treatment and Recommendations for Homeless Patients. National Healthcare for the Homeless Council website.

<http://www.nhchc.org/resources/clinical/adapted-clinical-guidelines>. Accessed April 6, 2014.

PREPARED BY: *J. Feigal* **DATE:** 6/3/2022
Jacob Feigal, MD, Clinical Director, Healthcare for the Homeless

APPROVED BY: *K. Ito* **DATE:** 2/11/2022
Kristin Ito, MD, MPH, Chief Medical Officer

APPROVED BY: _____ **DATE:** 06/06/2022
Juliana Hodges, DNP, RN, CPNP-PC, Quality Improvement & Risk Management Director