



Planning Palliative Care for Homeless Veterans at the End of Life

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Vignettes

- Terminally ill veteran assigned to the top bunk in a respite shelter
- Shelter unwilling to take terminally ill veteran on high dose opioids
- Veteran living in the Ft Collins sewer system unable to get his newly required oxygen down the metal ladder to his 'home'



Goals

- Characterize existing approaches to the care of homeless veterans at EOL
- Understand barriers and facilitators to providing excellent EOL care for homeless veterans
- Develop a program framework for meeting their needs that can be tested and replicated across the nation

Objectives

- Survey existing VA programs
- Visit 4 geographically diverse VAMCs to conduct interviews and focus groups
- Conduct a National Program and Policy Development Forum with focus group representatives, stakeholders and policy makers



Survey Results

- 50 of 152 (33%) VAMCs completed the survey
- VAMCs treated an average of 9.4 homeless veterans at EOL annually.
- Lack of appropriate housing was the most critical challenge.
- EOL programs expressed somewhat more concern about lack of appropriate care site and care coordination than did homelessness programs.

Study Overview





Number of Interview Sessions by Type

	Seattle	Boston	Houston	Orlando	Denver (Pilot Study)
Key Informant Interview with stakeholder	5	5	3	4	4
Homeless Veteran Interview	6	7	10	3	7
Focus Group	3	2	2	2	1



Findings

- Symptom management in the context of addiction, unstable housing and behavioral health problems is challenging.
- Current housing options are too often limited to places that insist on functional independence and a “clean and sober” lifestyle.
- Discontinuity of care between and within VA systems restricts EOL care delivery.
- VA regulations challenge collaboration with community providers, to the detriment of frail, vulnerable homeless Veterans.
- Dedicated homeless and EOL program staff collaborate informally



National Policy and Program Development Forum

During the study's final year, a National Policy and Program Development Forum is bringing together focus group participants from each site with national VA palliative and homelessness care leadership to develop policies, collaborations and programs to facilitate high quality EOL care for homeless Veterans.



Potential Ways to Improve Care

- Educate EOL providers about needs of those with unstable housing and homeless care providers about palliative care.
- Educate EOL and homeless care providers about VA structure, eligibility, housing and EOL resources.
- Facilitate ongoing informal communication among VA and non-VA homeless and palliative care providers.
- Promulgate more flexible housing criteria for those needing palliative care.
- Establish policy that gives HV at EOL priority housing access.
- Pilot test intense collaboration between HPACT and VA EOL providers (perhaps via HBPC).