People’s First Aid Kit:
Improving Practices for Public Health in Venice

Amanda Cowan, MSc – Clare Matrix
Lonnie Resser, MPH – LA County Department of Public Health
Karen Lauterbach – Venice Family Clinic
David Busch – Lived Experience
People’s First Aid Kit Coalition

Karen Lauterbach
Director of Community Programs and Advocacy
Venice Family Clinic
Homelessness in Venice

• 1,685 homeless in Venice

• 63% of unsheltered living on street, in tents, or in makeshift shelters
  • Remainder in cars, vans, RVs
  • 16 in Emergency Shelters

• Venice is within LA City

• Approximately 40,000 residents

2. 2008 LA Department of City Planning Estimates
Background and Context
The Issues

• Lack of toilets and showers
• Street cleaning processes
  • Harassment
  • Destruction of belongings
  • Scatter people, making it hard for outreach teams to reach them
  • Unannounced
• Contentious relations between housed and unhoused
Assets

• Strong network of community based organizations
• Street medicine team through Venice Family Clinic
  • FQHC in community for 50 years
• Participation from people experiencing homelessness
• Local substance use treatment providers
• LA County Measure H/LAHSA
Coalition Partners

- Persons Experiencing Homelessness
- Housed Venice Residents
- Catholic Charities
- Clare Matrix
- Department of Health Services – Housing for Health
- Department of Mental Health
- Didi Hirsch Mental Health Center
- Department of Public Health
  - LA City Council District 11 – Mike Bonin
- Los Angeles Homeless Services Authority
- Safe Place for Youth (SPY)
- St. Joseph Center
- Venice Community Housing
- Venice Family Clinic
Timeline of Coalition’s Activities

• **January 2019:** Group process to identify issues and potential solutions.
  - Main themes identified, created workgroups
    1. Vaccinations (Street Medicine)
    2. Addiction Services
    4. Expanding Toilet, Shower, and Storage Services
    5. Housed & Unhoused Neighbors Relationships

• **March 2019:** Workgroups prioritized focus areas

• **April 2019:** Identified main recommendations for each topic
Timeline of Coalition’s Activities

• June 2019: Reviewed Preliminary Community Recommendations

The People’s First Aid Kit – Improving Practices for Public Health in Venice
Preliminary Community Recommendations

Background: A coalition of community partners in Venice, California, have been strategizing how to improve public health for both housed and unhoused Venice residents. Partners include: Clare Matrix, Common Ground, LA County Department of Health Services - Housing for Health Street-Based Engagement, LA County Department of Mental Health, LA County Department of Public Health, LAHSA, Safe Place for Youth, St. Joseph Center, The Power of a Shower, Venice Community Housing, and Venice Family Clinic, as well as housed and unhoused Venice residents. Through a collaborative process the following issues and possible solutions have been put forward. This coalition is a coordinated effort with the city-wide Services Not Sweeps campaign, focusing specifically on the Venice neighborhood.

Overall, the group recommends that the way to improve public health for both housed and unhoused Venice residents is to provide enhanced health and hygiene services (e.g. toilet, showers, vaccinations, and addiction services), change sanitation practices which currently result in harassment and loss of personal belongings, and improve relationships between housed and unhoused Venice residents. This list of preliminary recommendations is not intended to be comprehensive but rather represents what the group has identified as most urgent as of June 2019.

Our recommendations have four main categories:

A. Increasing access to toilets and showers in Venice

B. Making changes to the practices of street sanitation to better meet the needs of unhoused and housed Venice residents

C. Increasing medical services to encampments including vaccine outreach and addiction services

D. Improving relationships between the housed and unhoused communities in Venice.
Timeline of Coalition’s Activities

• **August 2019:** Group brainstorming for Vaccination Pilot evaluation, how to approach community meetings

• **November 2019:** Vaccination Pilot, new CARE and CARE+ protocols for LA Sanitation
Lessons Learned

• Community group should be face of coalition, not DPH
• Include people who are experiencing homelessness
• Having multiple community partners involved is key to success
  • Many staff from one agency
  • For example, Venice Family Clinic: Needle Exchange, Addiction Services, Street Medicine, Health Insurance and Policy, etc.
Accomplishments

- Additional toilets and showers
- Vaccination pilot
- Group met regularly (about every 6-8 weeks)
- Improved low-barrier Narcan access
- Input from those with lived experience has been crucial
- Collaboration between agencies has been great
- Networking
- Nice to see something positive happening in Venice
Field Vaccination Outreach

Lonnie Resser, MPH
Health Program Analyst
Los Angeles County Department of Public Health
Community and Field Services Division
Collaborating Agencies

- LA County Department of Public Health
- Venice Family Clinic
- Clare Matrix
- St. Joseph Center Outreach Team
- LAHSA Outreach Team
Goals

• Offer vaccines in close proximity to homeless encampments
  • Reduce barriers to preventive care
• Build comfort level of DPH nurses in the field

Structure

• Once a month
• Two Street Outreach Teams
• 1-3 DPH Public Health Nurses
• DPH Community Health Workers
• Street Medicine Team
• Additional services over time
Evaluation

1. Quality Improvement Project
   • Assess each outreach and make adjustments as needed
2. Rapid Assessment Survey
   • Understand characteristics of those who got vaccinations and those who declined
First Outreach – Wednesday September 25, 2019
Location: Third and Rose
Vaccine Outreach by the Numbers – September 25

<table>
<thead>
<tr>
<th>Received Vaccination</th>
<th>Declined Vaccination</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 individuals vaccinated</td>
<td>14 declined vaccination</td>
</tr>
<tr>
<td>10 doses administered</td>
<td></td>
</tr>
<tr>
<td>5 Pneumonia</td>
<td>11 responded to survey (79% response rate)</td>
</tr>
<tr>
<td>5 Hepatitis A</td>
<td></td>
</tr>
</tbody>
</table>

5 responded to survey (71% response rate)
## Plus/Delta Chart for Vaccine Outreach – September 25

<table>
<thead>
<tr>
<th>+</th>
<th>Δ</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 doses administered (7 individuals)</td>
<td>White lab coats could be intimidating</td>
</tr>
<tr>
<td>Nurses could look up immunization history in CAIR</td>
<td>Add health insurance screening</td>
</tr>
<tr>
<td>Shelter placement</td>
<td>Commuting traffic was difficult, start later</td>
</tr>
<tr>
<td>Referral/transit to Emergency Room</td>
<td>Offer food</td>
</tr>
<tr>
<td>Next day appt at VFC</td>
<td>Make sure we’re using simple health terms “pneumonia” instead of “pneumococcal;” “flu” instead of “influenza”</td>
</tr>
<tr>
<td>Third and Rose – easy to set up, no approval needed</td>
<td>Not much foot traffic at Third and Rose, try Boardwalk</td>
</tr>
<tr>
<td>Many staff present allowed us to meet various needs (ER transport, shelter transport)</td>
<td>Large number of staff may have been intimidating</td>
</tr>
<tr>
<td></td>
<td>Create sign for canopy with which vaccinations we’re offering</td>
</tr>
</tbody>
</table>
Second Outreach – Wednesday October 30, 2019
Location: 1 Rose Ave Parking Lot/Boardwalk
Vaccine Outreach by the Numbers – October 30

**Received Vaccination**
- 14 individuals vaccinated
- 24 doses administered
  - 10 Pneumonia and Flu
  - 3 Pneumonia Only
  - 1 Flu Only
- 9 responded to survey (4 refused)

**Declined Vaccination**
- Many declined vaccination
- 5 responded to survey
  - “I don’t like flu shot”
  - Bad experience in the past
  - Concerned about possible side effects
  - “I don’t trust the flu shot but I trust other vaccinations.”
  - Doesn’t trust vaccinations, doesn’t want to get sick
# Changes made for October 30 Outreach

<table>
<thead>
<tr>
<th>Δ from September 25</th>
<th>Implemented for October 30</th>
</tr>
</thead>
<tbody>
<tr>
<td>White lab coats could be intimidating</td>
<td>No lab coats</td>
</tr>
<tr>
<td>Add health insurance screening</td>
<td>Added health insurance screening</td>
</tr>
<tr>
<td>Traffic was difficult, start later</td>
<td>Started at 9 instead of 8:30</td>
</tr>
<tr>
<td>Offer food</td>
<td>Offered granola bars and water bottles for anyone who wanted</td>
</tr>
<tr>
<td>Make sure we’re using simple health terms “pneumonia” instead of “pneumococcal;” “flu” instead of “influenza”</td>
<td>Did this for outreach teams and signage</td>
</tr>
<tr>
<td>Not much foot traffic at Third and Rose, try Boardwalk</td>
<td>Moved to Boardwalk</td>
</tr>
<tr>
<td>Large number of staff may have been intimidating</td>
<td>Had about the same number of staff, more spread out</td>
</tr>
<tr>
<td>Create sign for canopy with which vaccinations we’re offering</td>
<td>Sign was at front of canopy (used “flu” and “pneumonia”)</td>
</tr>
</tbody>
</table>
Summary of Adjustments

• Total 5 outreaches (September, October, November, January, February)
• Incentives:
  - Outreach staff: Providing food builds trust and good will
  - Person experiencing homelessness: “Do you have anything softer?”

• Services Offered:
  - Outreach 1: Vaccinations and Street Medicine
  - Outreach 2 & 3: Added Health Insurance Enrollment
  - Outreach 4: Added Narcan Distribution
  - Outreach 5: Added Needle Exchange
Two Surveys – Received vs. Declined Vaccination

VACCINATION SURVEY

We are from the Los Angeles County Department of Public Health. Today, we are offering vaccinations that can help prevent the spread of communicable diseases. We are asking for just five minutes of your time to answer a short 11-question confidential survey about vaccinations. Your participation is voluntary and appreciated.

1) Which vaccination(s) are you receiving today?

<table>
<thead>
<tr>
<th>Vaccination</th>
<th>Yes</th>
<th>No</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Hepatitis A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) Pneumococcal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Influenza (Flu)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Tdap (tetanus/diphtheria/pertussis)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2) Which vaccination(s) have you received in the past?

<table>
<thead>
<tr>
<th>Vaccination</th>
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<td></td>
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</tbody>
</table>

3) Have you received any vaccines in the past 4 weeks, not including today?

☐ Yes ☐ No ☐ I don’t know

4) Do you have any long-term or chronic health problems including: heart disease, lung disease, asthma, kidney disease, diabetes, HIV/AIDS, cancer or some other metabolic disease, blood disorder or weakened immune system?

☐ Yes ☐ No ☐ I don’t know

5) When was the last time you saw a doctor or medical provider?

☐ Less than 30 days ago ☐ 1 to 3 months ago ☐ 4 to 6 months ago

☐ 7 to 12 months ago ☐ Over 1 year ago ☐ I don’t know

6) Which gender do you most identify with (Check one)?

☐ Male ☐ Female ☐ Transgender Male ☐ Transgender Female

☐ Gender Non-Conforming/Non-Binary ☐ Other ☐ Prefer not to say

7) What is your age in years?

☐ 18-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60-64 ☐ 65 or older

8) Which races or ethnicities do you identify with? (Check all that apply)

☐ Asian ☐ Hispanic/Latino ☐ White ☐ Black/African American

☐ Native Hawaiian/Pacific Islander ☐ American Indian/Alaskan Native

☐ Other (please specify): _______________

9) What type of health insurance coverage do you have? (Check all that apply)

☐ No insurance ☐ Medicare ☐ Medi-Cal/Medicaid

☐ Private Insurance (ex. Anthem Blue Cross, Kaiser Permanente)

☐ I don’t know ☐ Other insurance: _______________

10) Where do you sleep most frequently? (Check one)

☐ Shelters ☐ Transitional Housing ☐ Car/Van/RV ☐ Outdoors

☐ Other (please specify): _______________

11) How long has it been since you lived in permanent, stable housing?

☐ In the past month ☐ 1 to 3 months ago ☐ 3 to 6 months ago ☐ 6 to 12 months ago

☐ Over 1 year ago ☐ I don’t know

Comments? Please use the space below to share any feedback about this topic or survey.

______________________________________________________________________________

Thank you again for your participation. Have a great day!
Two Surveys – Received vs. Declined Vaccination

DECLINED VACCINE SURVEY

We are from the Los Angeles County Department of Public Health. Today, we are offering vaccinations that can help prevent the spread of communicable diseases. We are asking for just a few minutes of your time to answer a short 11-question confidential survey about vaccinations. Your participation is voluntary and appreciated.

1) Why are you choosing to not get vaccinated today? (Check all that apply)
☐ I don’t need it since I don’t get sick
☐ I have already received the vaccination(s) offered today
☐ I have had a bad experience with a vaccination in the past (e.g., swollen arm, got sick afterwards)
☐ I don’t like getting shots
☐ I don’t think that vaccines are safe
☐ I don’t trust nurses, doctors, or other health professionals about vaccinations
☐ I have a health condition that prevents me from getting vaccinations (i.e., immunsuppressed, allergies)
☐ I am concerned about the possible side effects (i.e., getting sick from a vaccination)
☐ Other:

2) Which vaccination(s) have you received in the past?

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3) Have you received any vaccines in the past 4 weeks, not including today?
☐ Yes
☐ No
☐ I don’t know

4) Do you have any long-term or chronic health problems including: heart disease, lung disease, asthma, kidney disease, diabetes, HIV/AIDS, cancer or some other metabolic disease, blood disorder or weakened immune system?
☐ Yes
☐ No
☐ I don’t know

5) When was the last time you saw a doctor or medical provider?
☐ Less than 30 days ago
☐ 1 to 3 months ago
☐ 4 to 6 months ago
☐ 7 to 12 months ago
☐ Over 1 year ago
☐ I don’t know

6) Which gender do you most identify with [Check one]?
☐ Male
☐ Female
☐ Transgender Male
☐ Transgender Female
☐ Gender Non-Conforming/Non-Binary
☐ Other
☐ Prefer not to say

7) What is your age in years?
☐ 18-29
☐ 30-39
☐ 40-49
☐ 50-59
☐ 60-64
☐ 65 or older

8) Which races or ethnicities do you identify with? (Check all that apply)
☐ Asian
☐ Hispanic/Latino
☐ White
☐ Black/African American
☐ Native Hawaiian/Pacific Islander
☐ American Indian/Alaskan Native
☐ Other (please specify):

9) What type of health insurance coverage do you have? (Check all that apply)
☐ No insurance
☐ Medicare
☐ Medi-Cal/Medicaid
☐ Private Insurance (ex. Anthem Blue Cross, Kaiser Permanente)
☐ I don’t know
☐ Other Insurance:

10) Where do you sleep most frequently? (Check one)
☐ Shelters
☐ Transitional Housing
☐ Car/Van/RV
☐ Outdoors
☐ Other (please specify):

11) How long has it been since you lived in permanent, stable housing?
☐ In the past month
☐ 1 to 3 months ago
☐ 3 to 6 months ago
☐ 6 to 12 months ago
☐ Over 1 year ago
☐ I don’t know

Comments? Please use the space below to share any feedback about this topic or survey.

Thank you again for your participation. Have a great day!
Survey Results

• Over 5 months, 55 people were vaccinated
• 36/55 responded to vaccination survey (75% response rate)
• 36/40 of those who declined vaccination responded to the survey (90% response rate)
Survey Results – Race/Ethnicity

Received Vaccination

- White: 58%
- Black/African American: 17%
- Hispanic/Latino: 14%
- Multi-racial (2+): 6%
- Native Hawaiian/Pacific Islander: 3%
- Refused: 3%

Declined Vaccination

- White: 33%
- Black/African American: 22%
- Hispanic/Latino: 17%
- Multi-racial (2+): 14%
- American Indian/Alaska Native: 8%
- Native Hawaiian/Pacific Islander: 3%
- Refused: 3%
- No Response: 33%
Survey Results - How long has it been since you’ve lived in permanent, stable housing?

**Received Vaccination**
- Past month: 3%
- 1-3 months: 10%
- 3-6 months: 3%
- 7-12 months: 3%
- More than a year: 68%
- Don’t know: 11%

**Declined Vaccination**
- Past month: 11%
- 1-3 months: 11%
- 3-6 months: 6%
- 7-12 months: 8%
- More than a year: 44%
- Don’t know: 0%
Survey Results – Where do you sleep?

**Received Vaccination**
- 81% Outdoors
- 10% Shelters
- 6% Car/Van/RV
- 3% Other

**Declined Vaccination**
- 75% Outdoors
- 14% Transitional Housing
- 3% Car/Van/RV
- 3% Other
Main Take-Aways

• We reached people who had been homeless for over a year and live outdoors
• Those who want vaccinations are grateful
• Many are opposed; not trying to convince them
• Lack of toilets and shower services continues to be an issue
• Collaboration and partnership between DPH, VFC, LAHSA, St. Joseph Center is crucial to the success of this effort
• Evaluation support from DPH Epidemiology team
Next Steps

• Six month pilot was cut short by COVID-19
• Built infrastructure to deliver public health services in the field
• Current COVID-19 response includes testing at homeless encampments
• Eventually, when there is a COVID vaccine, we have systems and relationships in place to deliver it to this vulnerable group
Addiction Services

Amanda Cowan, MSc
Outreach Director
Hub and Spoke
Clare Matrix
Addiction Services for People Experiencing Homelessness

• Those who are experiencing homelessness within Los Angeles county are 26x more likely than general population to die from an overdose.

• Connection and collaboration are key

• Addiction is often left out of the conversation
  • SUD as a driver of homelessness
  • Lack of training within agencies
  • Wide ranging ideologies

• Through People’s First Aid Kit, local addiction services providers were able to provide input around vital service provisions that are needed.
Addiction Services Workgroup

**Goal:** Address sharps collection, medication-assisted treatment for outreach teams (E6/C3), Summit/Recovery outreach, Narcan training and distribution

**Plans and Recommendations:**
1. Work with encampment residents to determine best and most useful locations for sharps disposal kiosk.
2. Train designated Narcan liaisons in encampments.
3. Addiction services to link into bridge housing in Venice
4. Identify existing safe spaces and bring interventionist/services there
5. Support art and culture, community cohesion
6. Provide range of health supporting options
7. Have sharps disposal at popular gathering places
9. Work with SAPC to support mobile MAT implementation (meeting client directly where they are)
10. Longer term advocacy: supporting safe consumption/overdose prevention site; engage local champions on the issue
Preliminary Data

• Narcan was distributed at the same time as vaccinations were offered.
• Many participants had initially appeared concerned that their information would need to be kept or tracked to receive naloxone.
• When Narcan was placed on a table for participants to be able to take without information gathering, there was a noticeable uptake.
• 40 kits were given directly to participants, with 72 doses being given to providers to use during planned outreach.
• 2 reversals reported
Next Steps

- As COVID-19 changed the immediate focus of services, many of the goals had been put on pause.
- Narcan distribution is continuing, as we are experiencing a record high with overdose during quarantine.
- Continuing no barrier/low barrier Naloxone access to PEH and harm reduction supplies. Currently we are in a syndemic between COVID-19, overdose and rise in BBV infections.
- Local level policy shifts (ie, treatment road mapping, sobering centers, sharps collection, overdose prevention site, etc)
- Advising homeless service authority on best practices for those with substance use disorder diagnosis; in addition to technical assistance for harm reduction services within outreach teams
- Community conversations around Substance Use Disorder and substance use to be provided by providers of these services.
- Continuing training and technical assistance to groups working with people experiencing homelessness as it relates to SUD.
Acknowledgements – Partners

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