

Case Studies

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Financial disclosures

- No presenters have any financial disclosures

A Common Occurrence, brief description

- A 38 year old man is found down in a park, surrounded by empty pill bottles.
- Pinned to his shirt is a DNAR and an Advance Directive stating he does not want intubation or other forms of life support.
- In the ED a determination is made that he has overdosed on several substances and will require ICU level support for several days.
- Because the sedative effects of some of the medications have not yet reached their peak effective time, he will likely require intubation.

A Common Occurrence, longer description

- A 44 year old woman is found down at her home and has a respiratory arrest while in transport to the ED.
- She is intubated and admitted to the ICU.
- She has a POLST stating she does not want any form of life support in the event of a life-threatening illness or event.
- The POLST is 8 years old.
- It was completed while she was in a nursing home following a CVA related to drug abuse.
- For the last several years she has lived independently with her boyfriend.

NW Palliative Care Conference

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Mobile Homeless Palliative Care Outreach Team

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A Program of

Seattle / King County Healthcare for the Homeless

Harborview Medical Center Palliative &

Supportive Care Services

Harborview Medical Center Pioneer Square Clinic

Positionality

MICHAEL

- White
- Cis Male
- Queer
- Born in US
- Family Language is English
- Temporarily Able-Bodied
- Chronic Serious Childhood Illness; No Serious Adult Illness
- Middle Income Family
- Above Avg Household Income
- Met HHS Definition of Homeless; Did not Identify as Homeless

JOE

- White
- Cis Male
- Heterosexual
- Born in US
- Family Language is English
- Temporarily Able-Bodied
- Serious Family Illness
- Middle Income Family
- Above Avg Household Income
- No Period of Homelessness

Defining Homelessness: HHS

An individual **without permanent housing** who may live on the streets, shelter, mission, single room occupancy facilities, abandoned building, vehicle, or another **unstable or non-permanent situation**

Defining Homelessness

Language	Things to Consider
“Homeless Crisis”	<ul style="list-style-type: none">● Crisis affecting people who are vulnerable● People are not the crisis
“Homeless Population”	<ul style="list-style-type: none">● Individuals vs population● The importance of person-first language
“Homeless”	<ul style="list-style-type: none">● How people identify "home" and "community"● Homeless vs “Houseless” or “roofless”

One Night Count, 2016

4505 outside
+ 3200 shelter
+ 2983 transitional housing
= 10688 people without housing

19% year-over-year increase from 2015

People in Systems

- People of Color: ~37% of population in King County; ~**60%** of **people** who are **homeless**
- 2009 Wilder Survey in Minnesota: 34% of homeless parents experienced homelessness as a child
- 22% - 50% of women who are homeless left residence to escape domestic violence; 92% experienced physical and/or sexual assault at some point in life

Health Risks

- Conditions in service and living environments promote spread of communicable disease
- Conditions of homelessness can **prolong** and **exacerbate** illnesses to a **life threatening** point
- **Poor access to quality health care** reduces the possibility of recovery
- >50% reported experiencing significant trauma including assault, sexual abuse, and witnessing trauma

Health Outcomes

- US Life Expectancy: **78yo**
Avg. age of death of persons who are homeless: **50yo**
(Same age at which Americans commonly died in **1900**)
- Same illnesses at a **3 - 6 times higher rate** and more likely to lead to an early death often from treatable / preventable illness
- Higher rate of communicable diseases (**HIV, TB, Flu**)

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ICU Case Study

- 82 yo F with devastating R hemisphere stroke
- Vented, aggressive treatment for approximately 10 days with no improvement, no signs of neurologic function
- Family brings in Advance Directive
- Advance directive requests no ventilator or tube feeds in the case of terminal illness or permanent unconsciousness

Continued

- MDs tell family we have already done more than she would have wanted and we should withdraw the vent and let her die
- Family says she didn't know what she was signing and requests continued aggressive treatment