A Quicker Journey Home

Primary Health Care Advances Efforts to Streamline Housing Placements

“It’s exciting to see the community working together so well,” says Deirdre Henriquez, director of advocacy for Primary Health Care. “All of us having the same mission — to get people quickly housed and stable.”

Henriquez is referring to Centralized Intake, a new project aimed at connecting people experiencing homelessness to the resources they need in a timely and efficient manner. Led by Primary Health Care in Des Moines, Centralized Intake funnels individuals and families to one provider for screening, prioritization based on risk assessment, and referrals for housing, shelter and other services.

Using a nationally-recognized questionnaire, staff complete the intake form over the phone or outreach workers complete the form using a hand-held tablet at the client’s location. Providing multiple points of entry expedites service delivery, while using one intake tool allows Primary Health Care to objectively prioritize client needs. Making the process even more efficient and client centered is the sharing of information among agencies. When clients opt to allow this, multiple agencies can view the intake and avoid asking clients the same questions again. Currently, Centralized Intake has buy-in from about 80 percent of Polk County agencies working directly with the homeless community.

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**Fewer Steps Lead to Better Placements**

“Before [Centralized Intake] when a family experienced homelessness, they had to call three shelters five times a day to see if they could get in. Now they contact Primary Health Care over the phone or in person, complete the intake process and are prioritized for shelter, housing and other services,” says Henriquez, a 20-year veteran working with people experiencing homelessness.

By minimizing the number of steps required to secure housing and other services, Centralized Intake increases the likelihood of client follow through. Additionally, prioritizing placement based on an objective risk assessment ensures the most vulnerable families and individuals receive services first. Overall, this new process promises to reduce community costs associated with homelessness and by extension, improve the overall health of central Iowa’s communities.

**Stable Housing Promotes Healthy Behaviors**

“At Mid-Iowa Health Foundation, we are keenly aware that having a save, affordable place to live is fundamental to the ability to be healthy,” says Suzanne Mineck, president, Mid-Iowa Health Foundation.

Henriquez agrees. “The connection between housing and health is clear. Homelessness wrecks havoc on the body. Once people are placed in stable housing, they stabilize their health.”

Improved health associated with stable housing includes better hygiene and nutrition, decreased alcohol consumption, adherence to medication and re-establishing ties with family members. In turn, these healthy behaviors benefit society by lessening the stress on social, criminal and health care infrastructures, and by developing individuals and families who become contributing members of their local communities.

“Homelessness or lack of stable housing is a significant public health issue. We see the work of Primary Health and the Centralized Intake project as a promising approach to addressing this issue in our community,” says Mineck.

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