Key Takeaways: Supporting Patients Experiencing Housing Insecurity at the End of Life

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Key points:

- Many low-income and unhoused/housing insecure individuals’ mistrust govt/social services- and also have mistrust of healthcare.
- Thinking outside the box to build trust with community partners like end-of-life doulas or Community Health Workers can improve quality of life and continuity of care.
- Housing is healthcare - this is a great place to start to improve a person's quality of life.

Actionable Steps:

- Consider political advocacy around Medicaid Waiver and expediting supports for dying persons.
- Consider incorporation of end-of-life doulas into your programs to potentially bridge some caregiver gaps, provide respite, ease burden of care for hospice teams, and improve comfort and quality at end of life.
- Ensure that your team is utilizing all disciplines to provide interdisciplinary care to unhoused patients – ensure robust social work support.
- Perform early advanced care planning, including safety planning and funeral plans.
- Offer as many options as possible to allow patient to retain control.
- Explore opportunities to perform home repairs that may allow patient to stay at home safely.

Conversation Starters:

1. What networks and respite facilities exist in your community for individuals who need shelter at the end of life?
2. To build trust in your organization, what community connectors/service providers can be partners?
3. How might you incorporate an end-of-life doula program in your organization?

Participant Perspectives:

- Consider patient’s right to self-determination versus risk of harm. Consult ethical codes and councils for guidance in circumstances where it is unclear whether a patient is safe.
- It’s important to give patients as much control as we can give.
- Be careful to avoid assuming what the patient’s wishes are – complete careful assessments.
References:

- Brazil, K., Bedard, M., & Wilson, K. (2002). Factors associated with home death for individuals who receive home support services: A retrospective cohort study. BMC Palliative Care, 1, 2–6.
- NHPCO Access and Inclusion - [https://www.nhpco.org/resources/access-and-inclusion/](https://www.nhpco.org/resources/access-and-inclusion/)
- Hospice Through the DEI Lens: A Research Study Identifying Barriers to Hospice Care in Underserved Communities, National Hospice and Palliative Care Organization.
- NHPCO Diversity Tools and Resources [https://www.nhpco.org/education/tools-and-resources/diversity](https://www.nhpco.org/education/tools-and-resources/diversity)
- Culturally and Linguistically Appropriate Services (CLAS) [https://thinkculturalhealth.hhs.gov/clas](https://thinkculturalhealth.hhs.gov/clas)