



Ecosystem case study

Allegheny, Pennsylvania

Ecosystems of care are composed of interconnected programs and services designed to holistically address community members' complex health and social needs. They result from organizations in a community working collectively and intentionally across sectors to better address the root causes of poor health, poor quality of life, and health inequity among populations with complex health and social needs.

In April 2021, the Camden Coalition's National Center for Complex Health and Social Needs initiative convened representatives from five ecosystems of care from around the country to participate in an 18-month Ecosystems Learning Collaborative. The Ecosystems Learning Collaborative was an action-oriented opportunity for teams to learn from peers and technical experts about how to rapidly expand and sustain cross-sector partnerships to address the needs of individuals with complex health and social needs in their communities.

This is the story of how one ecosystem of care — in Allegheny County, Pennsylvania — was developed.

About this ecosystem of care

Ecosystem participants:

- ▶ [Allegheny County Department of Human Services](#)
- ▶ [Allegheny Health Network, Center for Inclusion Health](#)
- ▶ [Squirrel Hill Health Center](#)
- ▶ [Salvation Army](#)
- ▶ [Bethlehem Haven](#)
- ▶ [Primary Care Health Services, Inc – Health Care for the Homeless](#)

Community of focus: People experiencing homelessness and behavioral health challenges who were frequently using county crisis services.

Ecosystem aim: To expand homeless shelter capacity to address behavioral health, with the aim of reducing criminal legal activity and use of crisis services by people experiencing homelessness and other ongoing crises in Allegheny County, Pennsylvania.

How it started: With the onset of the COVID-19 pandemic, the Allegheny County Department of Human Services (DHS) began working with the Allegheny County Health Department to strengthen partnerships between federally qualified health centers (FQHCs) and homeless shelters.

The ecosystem participants held a series of virtual meetings to connect all shelters to nearby FQHCs. DHS secured state and federal funding to enable FQHCs to expand their onsite services at shelters. At the same time, DHS obtained funding to purchase telehealth workstations for all shelters in the Continuum of Care (CoC, or the geographic area that aligns for a coordinated homeless service response). The newly-developed partnerships were initially leveraged to ensure that all shelter residents had access to flu shots and eventually COVID vaccinations. After building relationships with these partners, DHS used their vast data warehouse resources to identify another community need: behavioral health support in homeless shelters.

This group joined the Ecosystems Learning Collaborative to clarify partner responsibilities and roles, support the navigation of diverse organizational cultures, explore data sharing opportunities, and work towards sustainability.

Successes:

- ▶ **Bringing together homeless services and behavioral health services.** Historically, these two services are addressed by different government agencies in partnership with separate community-based organizations, using different data and different approaches. However, through the partnerships in this ecosystem, homeless services and behavioral health providers sat at the same table to discuss their shared population and shared challenges. Bringing those partners together is a difficult first step.
- ▶ **An ecosystem approach meant thinking about the same problems in new ways.** The collaboration inspired the participants to think about new ways to leverage Medicaid. The collaboration worked with the local managed care organization (MCO), which administers behavioral health services in the region, to explore using and/or expanding Medicaid-reimbursable services to fund the expansion of county-based service coordinators who support people experiencing homelessness.
- ▶ **Strong relationships moved the work forward.** Allegheny County has a long history of working with the state and managed care organizations (MCOs). Because they already had contacts in those roles, they knew who they could work with and ask assistance from. These weren't brand new relationships; instead, it was just in a new context. They also benefited from a shared recognition across stakeholders for the need for a service designed for this population. Framing this collaboration as an ecosystem approach helped the stakeholders focus on a population and barriers that they had known existed but weren't addressing.

Challenges:

- ▶ **This work happened during a global pandemic and subsequent staffing crisis.** Allegheny County, like many communities around the country, suffered from a staffing crisis in the wake of the COVID-19 pandemic. Behavioral health providers were stressed because of the difficulty of finding and keeping employees and were hesitant to take on new challenges and efforts despite the recognized need.
- ▶ **This work requires creative funding structures.** Early ecosystem-building work includes bringing stakeholders to the table, making sure they're aligned, and planning for services. This is time-intensive work that's often not funded. Once the focus was on the services, ecosystem participants focused on questions around how to fund services sustainably by making them Medicaid-eligible and leveraging other county funds to support the work.

One piece of advice for others looking to build an ecosystem:

- ▶ **Focus on an issue that is driven by the needs of the community and bring provider stakeholders into the conversation early.** It's important to engage stakeholders on key issues early to make sure that the identified need is actually reflective of community need. It will also help shape the understanding of the challenges and available options to address those challenges. To do this, think outside your usual partners to gather information from diverse sources. You can also build on existing relationships where you've already invested the time and effort to build trust.

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Next steps for this ecosystem of care:

- ▶ **Keep the conversations going.** The partnership will continue to be the bridge between sectors and stakeholders. They plan to continue encouraging the MCOs and behavioral service providers to communicate and figure out sustainable funding.
- ▶ **Continually reframing the issues on the ground.** Participants built an ecosystem of care by connecting the barriers they were seeing on the ground to systems issues that can be addressed. They are continuing to shift mindsets as they demonstrate the need for flexibility, creativity, and cross-sector collaboration to potential partners, leadership, and payers.

[Learn more about this ecosystem of care](#) →



About the Camden Coalition

We are a multidisciplinary nonprofit working to improve care for people with complex health and social needs in Camden, NJ, and across the country. The Camden Coalition works to advance the field of **complex care** by implementing person-centered programs and piloting new models that address chronic illness and social barriers to health and well-being. Supported by a robust data infrastructure, cross-sector convening, and shared learning, our community-based programs deliver better care to the most vulnerable individuals in **Camden** and **regionally**.

The **National Center for Complex Health and Social Needs** (National Center), an initiative of the Camden Coalition, connects complex care practitioners with each other and supports the field with tools and resources that move complex care forward.



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