The Night Ministry Practicum

Executive Summary

Ellen Byrne, Poppy Coleman, Sara Beth Hoffman and Connor Hurley
Advised by Professor Paula R. Worthington
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We prepared a memo to assist the Night Ministry’s Outreach and Health Ministry in evaluating and improving their health outreach services. We analyzed two years of electronic medical records data to help the non-profit better understand their patient population, locate healthcare trends and value the health services provided on its Health Outreach Bus.

The services the Night Ministry offers are critical, as individuals who experience homelessness and housing insecurity have a higher rate of morbidity and mortality than the general population or similarly poor but housed individuals. Although the homeless report numerous barriers to receiving needed health care, they use ambulatory, emergency and hospital health care services more frequently than demographically similar people who are not homeless, which costs the medical system disproportionately.

From January 1, 2011, to August 31, 2013, the Night Ministry’s Health Outreach Bus served 599 different individuals and conducted 1,014 patient visits. Over 80 percent of patients visited the bus only one or two times over this period; however, 69 percent were established patients who had visited at least once in the past. Patients who visited the Night Ministry were predominantly between 45 and 54 years of age. Most patients were male (except in the age group of 25 and under, which was 60 percent female). Hispanics comprised about 30 percent of Night Ministry patients. They were younger, more likely to be new patients and most often visited the Pilsen and Humboldt Park bus stops. African-Americans comprised just over 30 percent of Night Ministry users and came predominantly to the South Shore and Roseland locations, while Caucasians comprised just under 30 percent and tended to be older, established patients.

The most common diagnoses in the Night Ministry’s patient population were respiratory ailments, non-definitive signs and symptoms, and digestive problems, dominated by disorders of the teeth and gums. Circulatory issues, especially high blood pressure, were common among African-American patients. Among patients whose housing status was recorded, 33 percent were homeless.

We estimate that the Night Ministry provides services that avoid costs from alternative emergency or ambulatory care valued in the range of $180,000-$450,000 annually. A conservative estimate of the value of the Night Ministry’s HIV testing is $49,462 per positive HIV diagnosis.

The Night Ministry should consider employing a simple checklist to ensure that staff consistently collect important information, such as housing status, so that the organization can support appeals to donors and community health partners with solid data. Additionally, the Night Ministry should collect and quantify data about its non-medical services. Finally, the Night Ministry should focus additional resources on connecting patients with common diagnoses such as hypertension and dental problems to appropriate follow-up care in order to help prevent serious health problems.