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## COMMUNITY & ECONOMIC DEVELOPMENT OFFICE

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To: Dr. Mark Levine, Chair Opiate Settlement Advisory Board  
From: Sarah Russell, Special Assistant to End Homelessness and Co-Chair Chittenden County Homeless Alliance  
Date: November 14, 2023  
Subject: Proposal to Increasing Access to Medical Service in Low-Barrier Shelters

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The number of people experiencing homelessness and housing insecurity in Burlington, VT, continues to be almost triple those pre-pandemic and access to emergency shelter is restricted from the levels available during the Spring of 2022. Recent data demonstrates a rise in unsheltered homelessness in Burlington from 80 individuals in summer of 2022 to 252 self-reports of people sleeping outside and/in places not meant for human habitation as of October 2023.

The majority of people experiencing unsheltered homelessness have substance use disorder and struggle to access basic needs including medical care. Our shelters prioritize people who are unsheltered, without the ability to treat wounds occurring from substance use disorder (SUD). Because of this, many guests present in the shelter environment with significant wound-care needs. We propose a pilot project to determine the effectiveness of providing access to wound care and preventative healthcare within three low-barrier shelters within the City of Burlington: Elmwood Community Shelter (35 guests), Champlain Place (20-30 guests), and the Burlington Temporary Overnight Winter Shelter (30-40 guests).

The addition of nursing services within our shelters will increase guests' ability to access medical services including wound care, frostbite/exposure care, management of hypertension, diabetes, and other preventative healthcare services. Guests will connect and build trust with our healthcare system in a setting that promotes harm-reduction and trust which we anticipate will enable referrals to substance use treatment and engagement in primary care.

During this pilot project, we anticipate to assess the effectiveness of embedded medical services within low-barrier shelter for people with SUD. We will collect the following data:

- Number of people served
- Trends in medical needs
- Patterns related to co-occurring use of opiates and stimulants
- Number of overdose reversals
- Referrals to SUD treatment

Additionally we hope to collect qualitative data in the following areas:

- Order of events (loss of housing and SUD)
- Intentionality of use (using substances for certain purposes/treatment of condition, etc.)
- Evaluation of current harm-reduction offerings/access within the community

If there are additional data points that would be helpful to the Opiate Settlement Advisory Committee, and does not impose data burden on shelter staff nor discourage use of the shelter, we would appreciate exploring a partnership.

The Community Health Centers of Burlington has agreed to provide the clinical and supervisory services to all three shelters. Proposed budget is below.

<b>DRAFT BUDGET</b>					
<b>Nursing coverage for Shelters - Dec 15 - February 15 (9 weeks - 63 days)</b>					
	S&F	Est days of coverage	Hrs/Day	Total	Total
RN1	\$ 50.74	37	5	185	\$ 9,386.90
RN2	\$ 48.00	26	5	130	\$ 6,240.00
MA/Care Coordinator 1	\$ 28.16	63	5	315	\$ 8,870.40
Clinical Supervision	\$ 70.00			24	\$ 1,680.00
Supplies					\$ 5,000.00
<b>Total</b>					<b>\$31,177.30</b>
Shelter will be open 63 days					
RN 1 estimated to cover 37 days/shifts					
RN 2 estimated to cover 26 days/shifts					
MA/Care Coordinator to cover all days					