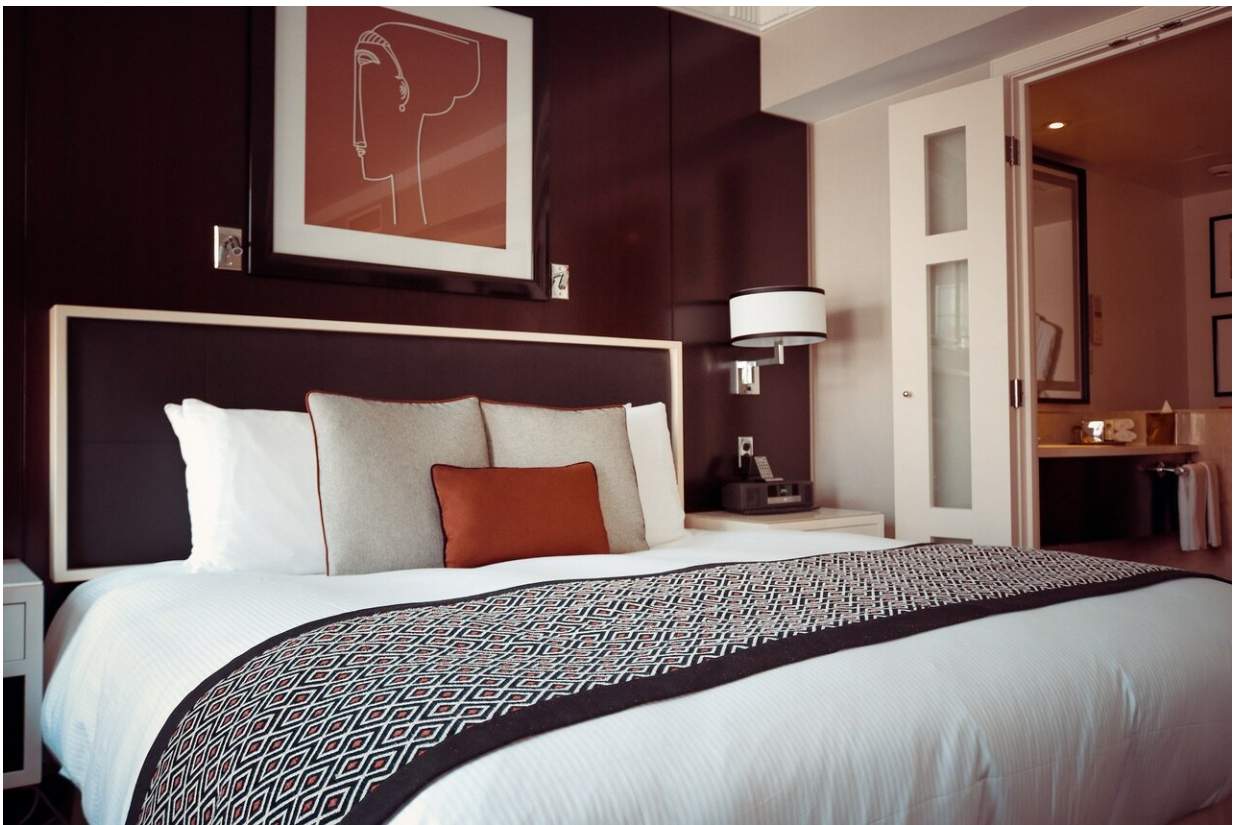


People in shelter-in-place hotels reduced their use of acute health services during first year of pandemic

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In the first year of the pandemic, San Francisco and other communities in California offered private hotel rooms, three meals a day and on-site

medical services to homeless people who were at risk of getting severe COVID-19.

The aim was to stop the spread of the virus among a highly vulnerable group, but the policy had another important effect, according to new research by UC San Francisco, UC Berkeley and the San Francisco Department of Public Health. It dramatically lowered the use of acute medical care by the [hotel](#) occupants who had used this type of care the most in the past.

The hotels provided different levels of medical care, anywhere from half a day of on-site nursing to full-time medical staff who went on daily rounds. Researchers said this solved two of the problems that unsheltered people often face when they are seriously ill: trouble accessing regular medical care and not having a place to go once they are ready to leave the hospital.

"Our research highlights how a program for people experiencing homelessness, which was implemented quickly and out of necessity, had an impact beyond its primary goal of COVID mitigation," said Maria Raven, MD, MPH, UCSF Chief of Emergency Medicine, Vice Chair in the UCSF Department of Emergency Medicine, and co-lead of the Benioff Homelessness and Housing Initiative program on adults with complex needs. "It's important to study interventions like this that were put in place during a [public health emergency](#), so in a future crisis we can implement programs that are evidenced-based."

The study was published Wednesday, July 27, 2022, in *JAMA Network Open*.

The use of medical care fell dramatically across the population in the early days of the [pandemic](#), as people shied away from going to the emergency department, hospitals restricted visitors, and providers

shifted care online.

To see how the hotels further reduced acute care use for the people they were sheltering, researchers compared hotel occupants who had used the most acute care services in the nine months before the pandemic to a similar group of unsheltered people who did not get hotel rooms during the pandemic.

Acute care use dropped in both groups, but it fell much more among those in the hotels. Among hotel occupants, emergency visits fell 40 percent, hospitalizations fell 59 percent, and both hospital days and psychiatric emergency visits fell 75 percent, relative to the comparison group.

"We see these reductions in acute care use as evidence of the benefit of these programs beyond just reducing COVID-19," said Mark Fleming, Ph.D., an assistant professor at the Berkeley School of Public Health, and the first author of the study. "These are some of the most high-risk, high-need people who are not served well by the current system."

More information: Mark. D. Fleming et al, Association of Shelter-in-Place Hotels With Health Services Use Among People Experiencing Homelessness During the COVID-19 Pandemic, *JAMA Network Open* (2022). [DOI: 10.1001/jamanetworkopen.2022.23891](https://doi.org/10.1001/jamanetworkopen.2022.23891)

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