Mission Statement

To ensure that men, women and children in the Greater Milwaukee area who are homeless, or at risk of homelessness, will receive the quality health care, housing, and supportive services they need in order to live at the highest possible level of self-sufficiency. Health Care for the Homeless will strive to achieve this mission through advocacy, outreach, prevention, public awareness, collaborative relationships with other service providers, and contracting for, or providing, a quality, cost-effective continuum of direct services.

Behavioral Health

Recovery Health Services — Behavioral Health Clinic
The Outpatient Mental Health Clinic provides psychiatric and psychotherapy services on a traditional outpatient basis. Services are provided through a variety of funding sources, Medicaid, Medicare, private insurance, HMO's, and a sliding fee scale.

Substance Abuse Services
Counseling services are provided on a traditional outpatient basis. Services are available through a variety of funding sources, Medicaid, Medicare, private insurance, HMO's, and a sliding fee scale. Services at both HCHM locations.

Primary Care

Primary Medical Care
Services provided through a collaborative effort with:

Recovery Health Services — Primary Care
Now Serving Children (414) 727-6320;
210 W. Capitol Drive Milwaukee ;

Columbia-St. Mary's Hospital — St. Ben's Clinic
1027 N. 9th Street, Milwaukee;

St. Luke's Hospital — Walker's Point Community Clinic
611 W. National Avenue, Milwaukee;

St. Francis Hospital — Angel of Hope Clinic
209 W. Orchard Street, Milwaukee;

Aurora Family Network — Salvation Army Clinic
1730 N. 7th Street, Milwaukee.

Primary Dental Care
Provided through a collaborative agreement with **Columbia-St. Mary's Hospital** at St. Elizabeth Ann Seaton Dental Clinic, 1730 South 13th Street, Milwaukee.

Health Care for the Homeless of Milwaukee

Administrative Office

Social Services, Case Management, Substance Abuse Treatment
711 West Capitol Drive
Milwaukee, WI 53206
Telephone (414) 374-2400
Fax (414) 374-7903

Recovery Health Services

Behavioral Health Clinic, Primary Care Clinic
210 West Capitol Drive
Milwaukee, WI 53212
Telephone (414) 727-6320
Fax (414) 727-6321

www.hchm.com

Health Care for the Homeless of Milwaukee, Inc. is a non-profit agency.

Health Care for the Homeless of Milwaukee

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Proud Member Charity of:
CHC Wisconsin
simply fighting disease

Case Management

Targeted Case Management (TCM) Program
TCM supports individuals with severe and persistent mental illness referred by Milwaukee County to live independently in the community to the extent that is possible. Case managers provide assessment, monitoring and service coordination. Consumers are assisted with housing; legal services; medical, mental health and substance abuse services; money management; employment and training; benefit advocacy; activities of daily living; social network development; and, crisis intervention.

Projects for Assistance in the Transition from Homelessness (PATH)
The PATH program is an outreach and case management program that offers assistance to those experiencing both homelessness and mental illness. PATH offers short term case management in order to help its consumers connect to different services and programs that will aid the consumer in making their transition from homelessness to the main stream. Referrals are made to the PATH program by Community Advocates, the community shelter system, or members of the community at large.

Community Support Program (CSP)
An assertive community treatment program model that assists adults with serious and persistent mental illness who are homeless, or at risk for homelessness, to live independently. Clients receive assistance with housing, obtaining psychiatric services, employment and/or training, individual or group counseling, budgeting, and access to medical and/or dental services. Referrals are made through the Service Access to Independent Living (SAIL) program of the Milwaukee County Behavioral Health Division.

Community Service Programs

SSI/SSDI Outreach, Access and Recovery (SOAR)
This Program is an initiative focused on assisting eligible homeless individuals in applying for SSI and SSDI benefits.

Outreach

Traditional Outreach
Traditional Outreach serves individuals in finding shelter or those who choose not to seek lodging in community shelters. Outreach workers aid clients in obtaining identification, retrieving birth certificates, claiming SSI benefits, and offer referrals to medical service. Clothing, sleeping bags, hygiene kits, housing and food are also provided as needed.

Pregnancy Outreach
The focus of this program is to reduce infant mortality by assuring that high-risk women, due to incarceration or homelessness, receive early pre-natal care. Services are provided on the street as well as through a case manager located at the Milwaukee County Jail. Pregnant women are provided with access to medical care, housing and nutrition.

Pre-Natal Care Coordination (PNCC)
Provides medical care, immunizations, nutrition planning and parenting education during pregnancy, from conception to birth as well as transportation and translation services to all women and families needing prenatal care.

HIV Services

HIV Rapid Test
HIV Rapid Response testing is available in all Health Care for the Homeless funded primary care clinics. The Rapid Response test provides test results in 20 minutes. The person conducting the test also provides counseling and education related to HIV. A reactive (positive) test result will require further testing of the individual to determine a definitive HIV status. Assistance in obtaining specialized medical care is provided following a confirmed positive HIV test result.

Ryan White – HIV Case Management
Funded through the Ryan White Title II program, case management services are provided to persons living with HIV/AIDS. The case manager is a resource for clients in obtaining Social Security benefits, housing, medical care, support groups, advocacy and other needed services.

Minority AIDS Initiative
Outreach services to minority individuals including informational sessions and one on one discussions, demonstrations, HIV testing, and materials distribution. HCHM works with participants to provide linkages to Drug Assistance Program and core medical services for those infected with HIV.

Housing

Families Assisted in Transitional Housing (FAITH)
The FAITH project is a transitional housing program for homeless women and their children. It consists of 26 scattered-site housing units. Referrals come from local shelters. Participants contribute 30% of their income toward their housing expense. The maximum allowable length of stay for FAITH program participants is 24 months.

Family Abodes Program
The Family Abodes program is a transitional housing program for families (adult heads of families & their children). It consists of 34 scattered-site housing units. Referrals come from local shelters. The Family Abodes program serves homeless women and their children, homeless males and their children (if the homeless male is the custodial parent) and homeless married couples with children. Participants contribute 30% of their income toward their housing expense. The maximum allowable length of stay is 24 months.

HCHM/City of Milwaukee Rapid Re-housing Program
HCHM's Rapid Re-Housing Program is funded by the City of Milwaukee through the American Recovery and Reinvestment Act. It serves single adults that are homeless and have a disability. HCHM's program works with people who are assessed to be eligible for social security, utilizing the SOAR model for applying on behalf of the client. During the Social Security application process, the program pays the rent for the client to live in an apartment, for up to twelve months. Referrals come from local shelters and/or outreach workers.

Mi-Wish Program/ HCHM Housing Case Management
HCHM provides the Housing Case Management for Milwaukee County's Mi-Wish program. HCHM receives all referrals from Milwaukee County Housing Division, who utilizes Rapid Re-Housing funding to pay rent for single, homeless, clients for up to six months. The case manager assists each client in finding an apartment and refers them to appropriate services. The program also provides a SOAR benefits specialist, AODA treatment, and work programs through Goodwill.