



TO: Hyun Kim, Interim City Manager
FROM: Vicky McLaurin, Acting Interim Director
Neighborhood & Community Services Department (NCS)
COPY: **Community Vitality & Safety Committee**
PRESENTERS: Caleb Carbone, NCS, Community Resources Analyst, Principal
Chantell Harmon-Reed, Tacoma Pierce County Health Department Director of Public Health
SUBJECT: Street Medicine Program Update
DATE: July 10, 2025

PRESENTATION TYPE:
Informational Briefing

SUMMARY:

The Tacoma Pierce County Health Department (TPCHD) Street Medicine Team (SMT) is a program that was created to expand healthcare access to individuals experiencing homelessness through mobile medical outreach. The program is progressing toward full launch, with foundational staffing, outreach, and infrastructure in place.

BACKGROUND:

In October 2024, the City accepted a grant for \$1M through June 30, 2025, from **Washington State Health Care Authority (HCA)** to pilot a program to provide street medicine services in encampments. The main objectives of the SMT program are to reduce health disparities and to improve health outcomes among the unhoused population. Through a contracted service provider, **Tacoma Pierce County Health Department (TPCHD)**, the City has implemented the Street Medicine Team to provide direct medical and behavioral health care to the unhoused population in the City of Tacoma, which includes but is not limited to unhoused people living in encampments, vehicles and other places not meant for human habitation. The team is composed of community health workers, behavioral health specialist or registered Nurse and a medical doctor or Nurse practitioner.

As this is a new initiative for City of Tacoma, TPCHD began from the ground up, developing staffing structures, operational protocols, outreach tools, and partnerships necessary to deliver mobile medical services to unhoused individuals across Tacoma.

ISSUE:

Challenges in provider recruitment, medical records requirements, and rapidly changing encampment patterns have required adaptive strategies. Despite the complexity of launching a new care model, TPCHD has made measurable progress on core components of staffing, outreach, infrastructure, and systems design, with the goal of building a sustainable program capable of billing for services in the future. Service delivery began in the second quarter of 2025. The team is using data to identify high-need areas and adjust outreach strategies accordingly.

ALTERNATIVES:

This is an information briefing only. There are no alternatives presented.



FISCAL IMPACT:

This is an information briefing only. There is no fiscal impact.

RECOMMENDATION:

This is an information briefing only. There is no recommendation.