

LEGISLATIVE #

100948A



Homeless Respite



Committee Members and Contributors

- Alachua County Health Dept.
- Shands
- St. Francis House
- Alachua County Poverty Reduction Program
- North Florida Regional
- Helping Hands Clinic
- Community Activists
- Gainesville/Alachua County Office on Homelessness



The Committee ...

- Considered the current situation
 - Resources
 - Expenditures
- Reviewed models in other communities
- Provided recommendations
 - Services
 - Cost



Background

- Number of homeless being discharged who would benefit from respite:
 - Shands: 5-7 per month
 - N. FL Regional Medical Ctr: 1-2 per month
- Patients are being discharged by a team of physician and case manager
 - Based on resources
- Homeless being discharged are able to attend to Activities of Daily Living
 - Some need home care, mechanical assistance, IV antibiotics



Current Resources

- Patients with medical needs are retained in hospital or discharged to appropriate facility including motels when needed
 - Hospital pays for home health, other medical services and shelter
- Sunshine Inn – one room (working on adding phone)
- Other shelter – \$2,500 from City (contract ends 6/30/11)
 - Limited to \$20 per night (=125 nights)
 - Shands covers deficit





Current Resources

- Alachua County Health Dept. Medical Home Program
 - Transitional medical care
 - Enrollment in ongoing primary care
 - Case Management
 - Medical care
 - Third party coverage
 - Barriers to participating in health care and self care



Unmet Needs

Convalescence after hospital service

- Shelter: out of the elements
- Hygiene facilities including sink, shower, clean linens and towels, soap, etc.
- Furniture including bed, recliner/chair with foot stool
- Electricity for food storage/prep, medical equipment
- Food
- Phone



How Homeless Respite is Typically Funded

- Hospital
- Local government
- Private donations
- Foundations
- Federally Qualified Health Center homeless





Models Considered

- Medical respite
- Stand alone facility (apartment)
- Motel rooms
- GRACE Marketplace
- Adding capacity to Marketplace
- St. Francis House





Model: Medical Respite

- Advantages
 - Medical care
 - Case management
 - Transportation
 - Meals
 - Substance abuse
 - Referrals to housing
 - Other services
- Disadvantages
 - Costly
 - No local economy of scale



Model: Apartment

- Advantages
 - 24 hour access
 - Facilitate delivery of medical care
- Disadvantages
 - Housekeeping
 - Food prep and shopping
 - Roommate issues
 - Cost



Model: Motel

- Advantages
 - 24 hour access
 - Facilitate delivery of needed medical care
- Disadvantages
 - No access to prepared meals or food prep area
 - Access to laundry
 - Access to case management
 - Isolation
 - Cost \geq \$45/night



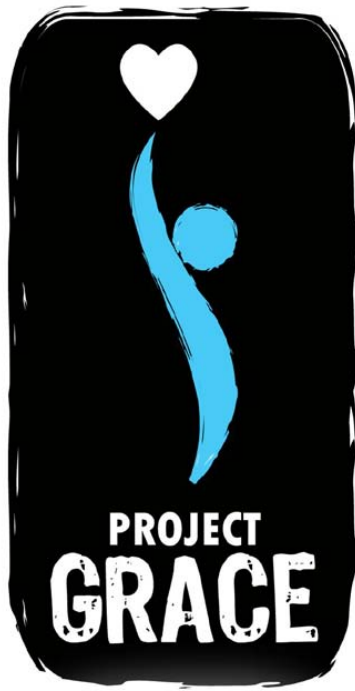
Model: GRACE Marketplace

- Advantages
 - Offers all needed services
 - No extra cost
- Disadvantages
 - Location
 - Complicates the planning of an already complicated project
 - Not constructed



Model: Additional Facility at GRACE Marketplace

- Advantages
 - Access to all services
 - Phase in service
- Disadvantages
 - Cost
 - Practicality



Model: St. Francis House

- Advantages
 - Has many services
 - Convenient location
 - Designated short stay/medical beds
- Disadvantages
 - Limited rooms for medical care
 - History not consistent with policy for medical access
- Will guarantee beds for \$5,200 per year per bed





Proposed 6 Month Pilot Program for Homeless Respite at SFH

- 2 beds @ \$100/week
 - Includes 3 meals daily, linens and sundries
 - Daytime use of facility
- 2 X \$100 per week X 26 weeks = \$5,200
- To be shared by County and City (\$2,600 each)
- Contract with St. Francis House managed by Alachua County Department of Community Support Services
- Room not scheduled for respite by 5pm will be released for general use by SFH



Elements to Ensure Success

- Shared responsibility
- Expansion of services
- Clear expectations
- Ongoing communication and monitoring

PROJECT
GRACE

Keys to Success



- Client Expectations
 - Client educated about terms and responsibilities
 - Limited stay
 - Follow rules of St. Francis House
 - Active participation in health care and case management
 - Written description





Responsibilities: Hospital

- Patient can accomplish all Activities of Daily Living
- If patients needs home health, IV meds, etc. the hospital will arrange and pay
- Discharge plan will include length of stay
- Transportation to St. Francis House arranged
- Communication
 - Arrange with St. Francis House
 - Coordinate with Health Department Medical Home Coordinator



Responsibilities: Health Dept.'s Medical Home Program

- Enroll/reinforce Medical Home Program
- Ensure transitional medical services
 - Health Department
 - Primary Care Physician
- Case Management
- Coordination with St. Francis House case manager





Program Oversight

- Committee
 - Hospitals, Health Department, St. Francis House
 - Department of Community Support Services
- Meet monthly for first six months
- Evaluate provider experience
- Include client experience

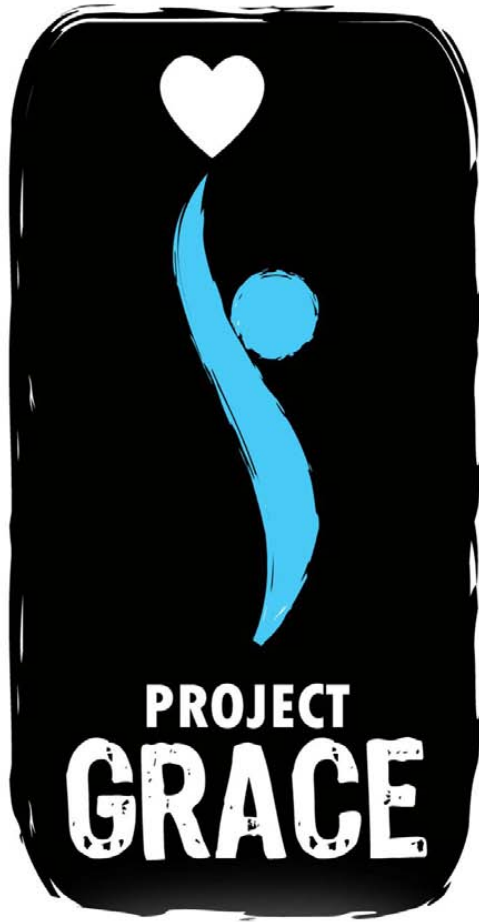




Our Request

- Approve \$2,600 funding for 6 month pilot
- Authorize entering into Interlocal Agreement
- Authorize extending program an additional 12 months if determined to be successful at a cost of \$5,200 annually.





Thank you for
considering our
proposal!

