Medical Respite Care: A National Perspective

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• Who are we?
• What do we do?
• How do we do it?
What is Medical Respite Care?
Medical Respite Care Nationwide

[Map showing locations across the United States]
Number of U.S. medical respite programs by beds available

- 1 to 9 beds: 25 programs
- 10 to 19 beds: 19 programs
- 20 to 29 beds: 16 programs
- 30+ beds: 16 programs
Facility Type

- Apartment/Motel Rooms
- Homeless Shelter
- Stand-alone Facility
- Assisted Living Facility/Nursing Home
Figure 3: Number of U.S. medical respite programs by clinical services provided

Note 1: Many programs have more than one clinician delivering care
Note 2: Clinicians’ may be stationed on-site or off-site at a partner agency
What is being treated?

• Injury/wound care
• Pneumonia/influenza
• Cellulitis
• Diabetes, blood sugar management
• Respiratory problems/asthma
• Pre-operative and/or post-operative care
• IV medications
• Chemotherapy
Medicaid/ Medicare, MCOs

Health Centers

Public Agencies

Hospitals

Private Donations/ Major Gifts/ Foundations
Number of Medical Respite Programs by Funding

- Hospital: 47
- HRSA: 22
- HUD: 13
- Medicaid/Medicare: 14
- Private Donations: 40
- Local/State Government: 34
- Religious: 18
- Foundations: 27
- United Way: 11
Our multi-payer, multi-model system

MCO 1
- FFS/PPS

MCO 2
- Capitated monthly rate

MCO 3
- Daily rate for a limited number of days
Patients experiencing homelessness stay in the hospital 4.1 days longer per admission than other low-income patients.

Making the Case for Funding

CHICAGO - Patients who had access to medical respite care required **fewer hospital days (3.4 vs. 8.1)** during 12-months of follow-up compared to those released to usual care†

BOSTON - Patients who had access to medical respite care had a **50% reduction in the odds of readmission** at 90 days post-discharge‡

IT'S THE RIGHT THING TO DO.
Standards for Medical Respite Care

1. Safe and quality accommodations
2. Environmental services
3. Safe care transitions into medical respite
4. High quality post-acute clinical care
5. Care coordination and wrap around services
6. Safe care transitions out of medical respite
7. Driven by quality improvement
NHCHC Website Resources

• Standards Companion
• Standards Self-Assessment Tool
• Medical Respite Program Directory
• Medical Respite Toolkit
  • Practical Planning Guide
  • Program Development Workbook
  • Policy Briefs
  • Sample Policies/Procedures/Job Descriptions
  • Webinars (Medical Respite 101 and Financing Medical Respite Care)
Technical Assistance & Training

• TA Site Visits
• TA Conference Calls
• National Health Care for the Homeless Conference & Policy Symposium
  • May 22-25, 2019 – Washington, DC
  • May 2020 – Phoenix, AZ
  • May 2021 – Baltimore, MD
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