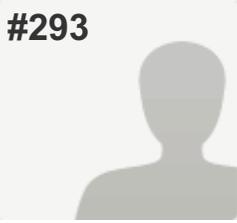


Ending the Epidemic Task Force Recommendation Form

#293



COMPLETE

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name	Julie
Last Name	Miller
Affiliation	University of Rochester Medical Center
Email Address	julie_miller@urmc.rochester.edu

Q2: Title of your recommendation Hospital discharge issues

Q3: Please provide a description of your proposed recommendation

As a social worker who works both inpatient and outpatient with PLWHIV it can be difficult to find good housing options. Sometimes patients are homeless, often as a result of mental illness, substance use and they come to us quite ill. They get better in the hospital and when it is time for discharge housing options are few, shelters are often not appropriate, but they do not have the money to get an apt right away. Would love to see Monroe County as a mandated locality for the State Enhanced Rental Assistance Program. Monroe County is not an expensive as downstate, but it is not easy to find safe housing that someone on SSI or is low income can afford. Stable housing is key in keeping people out of the hospital as they are easy to locate to provide services

We would welcome more options for "respite care" for after discharge when pt's are too healthy for an SNF, but need some low level care before they can be independent in their own housing. We see patients who have shaky discharges come back again to the hospital because of poor housing options.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Linking and retaining persons diagnosed with HIV to health care and getting them on anti-HIV therapy to maximize HIV virus suppression so they remain healthy and prevent further transmission

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Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Housing and Supportive Services Committee:
Develop recommendations that strengthen proven interventions enabling optimal engagement and linkage and retention in care for those most in need. This Committee will recommend interventions that effectively address complex and intersecting health and social conditions and reduce health disparities, particularly among New York's low-income and most vulnerable and marginalized residents. These interventions will diminish barriers to care and enhance access to care and treatment leaving no subpopulation behind.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

New policy

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Unknown

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Unknown

Q9: What are the perceived benefits of implementing this recommendation?

Better LTC and fewer hospitalizations which would be cheaper and PLWHIV would have a higher quality of life.

Q10: Are there any concerns with implementing this recommendation that should be considered?

Respondent skipped this question

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Respondent skipped this question

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Respondent skipped this question

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

Respondent skipped this question

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Respondent skipped this question

Q15: This recommendation was submitted by one of the following

Advocate

