

City of Las Vegas Recuperative Care Center/Behavioral Health Unit

**Presentation to Joint Interim Standing Committee
on Health and Human Services
May 13, 2024**



Barriers in Shelter Medical Care

- Shelter system not equipped for medical care
 - Limited safe hospital discharge locations for recovery – insurance programs only
- Homeless shelters only provide a bed for the night
 - Guests are discharged to the streets at 0600; cannot stay on campus
 - Intake for the new night begins at 1600
- Shelter staff cannot provide medical care
 - Cannot change bandages or dress wounds
 - Oxygen not permitted
- Shelter staff cannot assist guests with basic needs
 - Feeding
 - Bathroom/Diapers
 - Moving around the facility or getting in/out of bed



Overview of Medical Respite Care

From the National Institute of Medical Respite Care (www.nimrc.org):

Medical respite care (MRC), also referred to as recuperative care, is acute and post-acute care for people experiencing homelessness (PEH) who are too ill or frail to recover from an illness or injury on the streets or in shelter, but who do not need to be in the hospital. MRC programs offer short-term residential care that allows individuals experiencing homelessness the opportunity to rest, recover, and heal in a safe environment while accessing medical care and other supportive services.

- 145 Medical Respite programs across 40 states
- Capacity ranges from 3 to 160 beds, with a median of 16 beds
- Majority of MRCs are operated by non-FQHC nonprofits (110), with FQHCs as the second largest group of operators (39)
- 72% of MRCs report receiving multiple funding sources
 - 79 funded by hospitals
 - 49 funded by private donations
 - 46 funded by foundations
 - 43 funded by state/local governments
 - 40 funded by managed care organizations
 - 16 funded by HRSA
 - 13 funded by religious organizations
 - 11 other



CLV Recuperative Care Center (RCC)

- Forty bed (38 floor and 2 isolation) facility
 - Operated by HOPE Christian Health Center (FQHC)
 - Medication storage room
 - On site laboratory
 - No pre-determined length of stay
- Safe place for homeless patients to finish healing
 - 24/7 Medical Care – Medical Director, APRN's, RN's, CNA's
 - Dedicated medical transport (eg. specialty appointments, imaging & dialysis)
 - Oxygen on site
- Intensive Case Management Services
 - Address barriers to housing and self-sufficiency
 - Supportive services: birth certificates, Identification
 - Access to state and federal benefits – SOAR Provider on site



Respite Admission

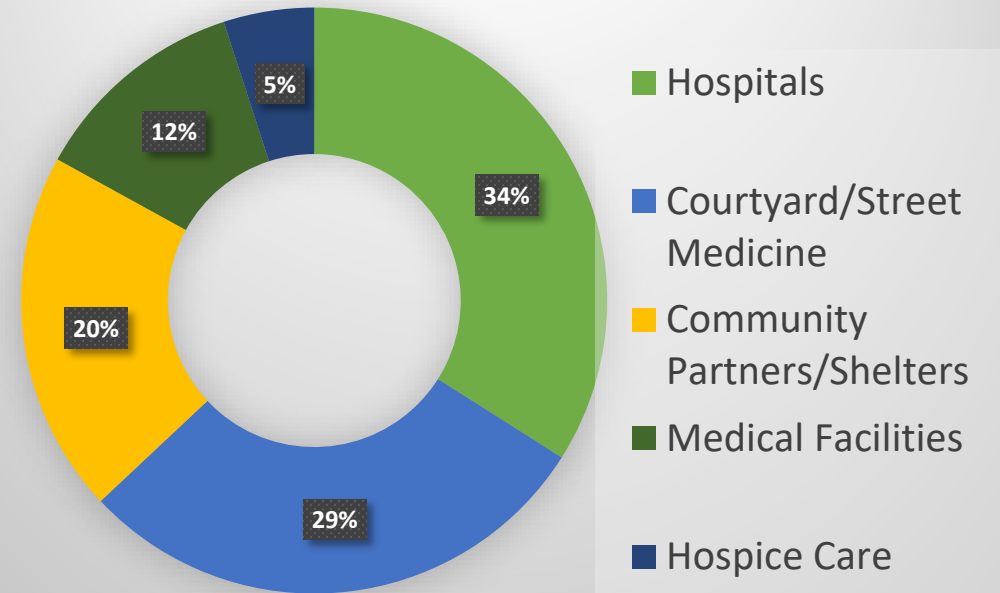
August 2020 to December 2023

- 855+ patients served
- 52% positive discharge rate to housing
- Average length of stay: 45 days

Patients most often referred for:

- Cardiology
 - Cardiac complications
- Endocrinology
 - Uncontrolled Diabetes
- Wound Care
 - Amputation recovery
 - Infections/Burns
- Neurology
- Respiratory
- Ortho
 - Broken bones
- Hospital Pre/Post Recovery
 - Hospice

Referral Sources

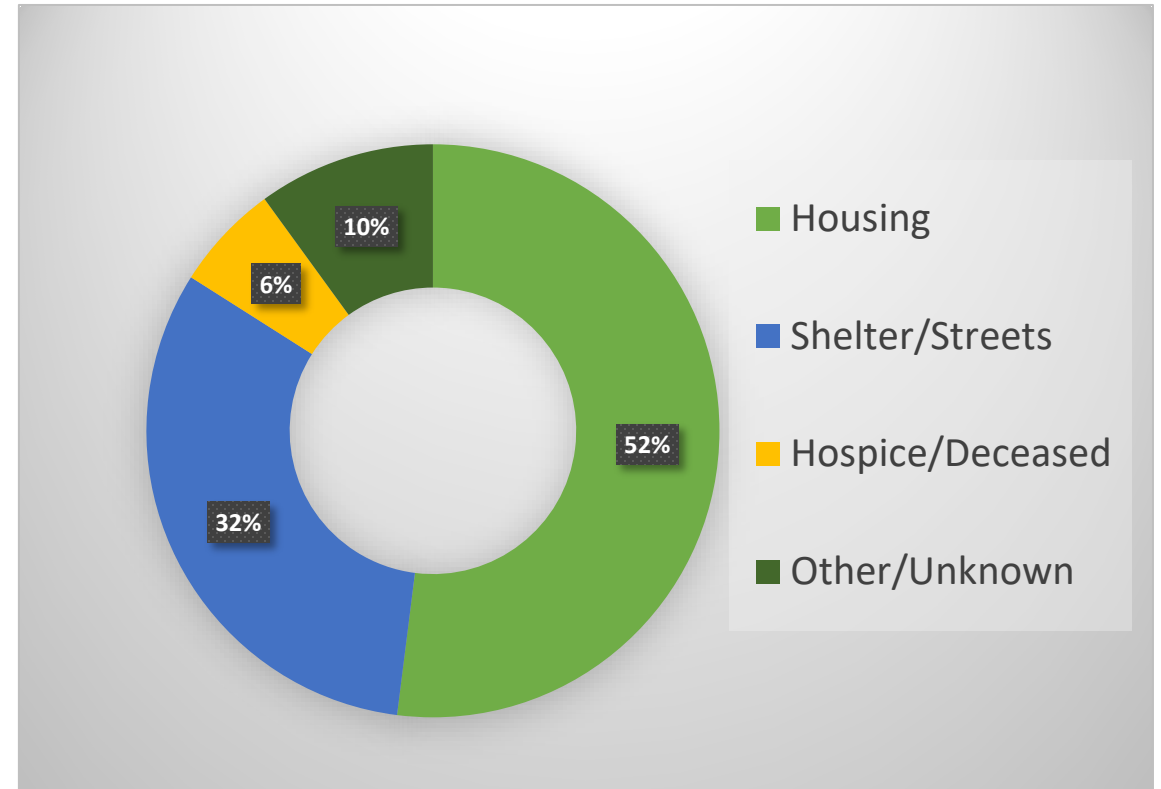




Respite Discharge Outcomes

Since it's opening in August 2020

- 800+ Patients Discharged
- Discharges from RCC:
 - Housing 52%
 - Permanent Housing
 - Family/Friends
 - Transitional Housing
 - Group Homes/PSH
 - Shelter/Streets: 32%
 - Shelters/Courtyard
 - Place not meant for habitation
 - Deceased: 6%
 - Hospice
 - Succumbed to Injury/Illness
 - Other/Unknown: 10%





RCC Expansion Plans

- Received \$10M ARPA award to add a Behavioral Health Unit, supplemented by \$7M of CLV ARPA
- Initial plans to expand to land next door were halted due to property restrictions/limitations
- Current path of expansion:
 - Relocate patients to leased space at Salvation Army
 - Demolish current structure (former Smart & Final)
 - Build new structure to suit RCC and CSU functions
 - Current project total estimated at \$22M (\$5M gap)



Successes, Challenges, & Gaps

- Successes
 - Filling a demonstrated need
 - Providing compassionate care to heal
 - Hospice care for the unhoused
- Challenges
 - Uncharted territory for CLV
 - Limitations of the physical space
 - Circuitous route to RCC for patients
- Gaps
 - Capital funding for new facility (\$5M)
 - Stable funding sources for ongoing operations