

**LFUCG 2021 ESR Overnight Emergency Shelter – RFP #14-2-21**  
**Bluegrass Care Navigators Medical Respite Program Application**

**General Shelter Information – 15 points**

The following information is required in order to evaluate capacity and scope of programming and ensure a balance of shelter options for various sub-populations of people experiencing homelessness. While the overall narrative score is a major factor in funding recommendations, LFUCG will also consider factors such as ensuring availability of critical services and an adequate number of emergency shelter beds for vulnerable populations.

**RESPONSE:**

Bluegrass Transitional Care (BTC) is a case management program developed in 2011 that contracts with payers and entities to transition at-risk frail patients to prevent avoidable hospital readmissions and emergency department utilization after discharging home or to a nursing facility. Our program is built around compassionate care, ensuring that every patient is treated with dignity and respect.

Some patients in our community do not have a home to return to when they are discharged from a hospital. BTC provides medical respite for patients experiencing homelessness by utilizing motel/hotel rooms in the community, a model that we have used for several years in Lexington and has also been successfully implemented in many cities in the nation. This model is relatively low cost, easy to implement, requires no licensure or other regulatory conditions, allows families to stay together and is effective in protecting the patient from infections from other patients. It also helps divert patients under treatment for serious medical conditions from shelters that may not have the necessary training, expertise, and resources to provide the full complement of services needed.

Based on the number of patients we are currently serving through Bluegrass Transitional Care Medical Respite, we project that this program will provide care for a total of 96 patients experiencing homelessness in FY2022. These patients will be served in partnership with University of Kentucky HealthCare, Baptist Health Lexington, Saint Joseph Hospital, Lexington-Fayette County Health Department, HealthFirst Bluegrass, and other healthcare entities.

**Rapid Resolution, Housing Oriented – 25 points**

Up to 25 points will be awarded to applicants demonstrating a shelter project that is rapid resolution and housing oriented. This means a plan is presented for how the organization works with guests to develop and implement a housing plan including diversion techniques and how quickly people move to permanent housing.

**RESPONSE:**

Bluegrass Care Navigators is a community healthcare provider that focuses on helping patients achieve the highest quality of health possible. We understand that housing is an extremely important social determinant of health. As noted above, Bluegrass Transitional Care (BTC) is a case management program. As such, we seek to address all barriers impacting a patient's self-sufficiency and to connect the patient with appropriate resources in the community to help them obtain and sustain long-term housing that is affordable and appropriate for their circumstance.

This program diverts homeless patients from traditional shelter facilities. During the entire medical respite and transitional care intervention, the nurse/coach and social worker collaborate with the patient on a plan for discharge. Working in collaboration with community agencies to prepare the patient to return to the community is vital to the success of the intervention. Bluegrass Transitional Care participates in the Lexington Continuum of Care. Agencies that we coordinate care and services with include, but are not limited to, Lexington Housing Authority, Community Action Council, AIDS Volunteers of Lexington, local landlords and apartment associations, LFUCG Adult and Tenant Services, Wheels, LFUCG Office of Homelessness Prevention and Intervention, Moveable Feast, Lexington Rescue Mission, Catholic Action Center, KY Prescription Assistance Program, Kentucky Department for Community Based Services, and home health agencies.

**Low-Barrier – 25 points**

Up to 15 points will be awarded to applicants based on an evaluation of the shelter's commitment to a housing first, low-barrier model. Low-barrier shelter is a critical piece in the homeless assistance approach that prioritizes providing people experiencing homelessness with shelter as quickly as possible – and then providing voluntary supportive services as needed. A low-barrier shelter is one which has only the least restrictive entry criteria necessary to ensure health and safety in the facility.

**RESPONSE:**

Under the Bluegrass Transitional Care innovative medical respite model, our transitional care model (TCM) and care transitions intervention (CTI) follow a client- and person-centered approach that has now been regionally and nationally recognized as extremely successful. All referrals are screened by Bluegrass Care Navigators nurses and are enrolled only for medical respite needs. Patients must be able to care for themselves (with assistance), including taking their medications appropriately with guidance. For patients struggling with alcohol or illegal substance use, a social worker is available for counseling and referral to community resources. Families are eligible to stay in the hotel with the patient during the medical respite for recuperation. Our medical respite initiative incorporates family caregivers into the program, as appropriate.

The primary focus of the Bluegrass Transitional Care medical respite program is on helping the patient receive adequate healthcare services to achieve treatment success, rather than imposing extraneous expectations and requirements on convalescing patients. We follow the patient-focused policies of Bluegrass Care Navigators and are a part of this organization's Compliance Plan.

**Capacity, Cost Effectiveness, & Budget – 10 points**

Every community, including Lexington, faces the challenge of ensuring that shelter capacity is scaled to meet local need and that it is financed accordingly. In making decisions regarding necessary capacity, LFUCG will consider how a broad range of changes and improvements within their crisis response systems will impact need and demand for emergency shelter.

<b>Complete this table</b>	<b>Total</b>
Number of individual beds available to the general population (exclude beds reserved for/supported by Department of Corrections or other funding sources)	N/A
Number of units available for families, if applicable:	N/A
Funds requested from LFUCG:	\$60,150
Total budget for shelter program (all funding sources):	\$88,500
LFUCG investment per bed (Request/Total Beds):	\$ 627
LFUCG investment per unit, if applicable (Request/Total Units):	N/A
Total cost per bed (Total Budget/Total Beds):	\$ 922
Total cost per unit, if applicable (Total Budget/Total Units):	N/A
% LFUCG investment (LFUCG Request/Total Budget * 100):	68%

Please see detailed budget attached.

**Staff Qualifications & Experience – 5 Points**

Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by title and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

**RESPONSE:**

Team members working in Bluegrass Transitional Care Medical Respite include:

Cassie Mitchell, MSN, MBA, RN; Project Lead, Resume attached

Jamie Cody, RN, Transitions Program Manager, Resume attached

Hospital-Based Nurse/Coach: Works closely with UK HealthCare to identify eligible homeless medical respite patients, enrolls the patients into transitions, in collaboration with UK case management, medical staff and social workers plans for patient discharge to the hotel. There are 3 hospital-based coaches at UK that will also enroll patients at Baptist Health Lexington and Saint Joseph Hospital.

Home Nurse/Coach: Sees the patient at the hotel within 24-hours of hospital discharge and begins the medical respite intervention in the hotel. The nurse/coach sees the patient once a week for 4 weeks, telephonic when needed and in the fifth week, in-person visit in week 6 to discharge the patient. There are 3 Lexington home nurse/coaches that will provide the intervention.

Home Social Worker: Provides hotel visits as needed for community resource and program referrals, counseling, and assessments.

Trained Volunteers: BTC will use the BCN organization's trained volunteers that work in all lines of service to provide transportation as needed, deliver food and offer companionship.

Please see attached resumes.

**Partnership & Resource Leverage – 5 Points**

How do your programs and services support our community's comprehensive response to the identified priority area of Community Wellness & Safety? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

**RESPONSE:**

The Bluegrass Transitional Care Medical Respite program has existing partnerships with University of Kentucky HealthCare, Baptist Health Lexington, Saint Joseph Hospital, physician practices, housing providers, and social services agencies that are leveraged regularly to ensure the medical respite program is successful and part of a continuum of care in the community. Working in collaboration with a wide range of community agencies to prepare the patient to return to the community is vital to the success of this intervention. Bluegrass Transitional Care participates in the Lexington Continuum of Care. Some of the agencies with which we coordinate care and services include, but are not limited to, Lexington Housing Authority, Community Action Council, AIDS Volunteers of Lexington, local landlords and apartment associations, LFUCG Adult and Tenant Services, Wheels, LFUCG Office of Homelessness Prevention and Intervention, Moveable Feast, Lexington Rescue Mission, Catholic Action Center, KY Prescription Assistance Program, Kentucky Department for Community Based Services, and home health agencies.

The Bluegrass Care Navigators Board of Directors oversees quality improvement, fiscal management, and fund-raising efforts. Our organization engages hundreds of volunteers whom we train to support our patient care programs in various capacities. We rely upon philanthropic support from the community to cover the gap not funded through traditional medical payers so that we can provide compassionate care to every eligible patient, regardless of ability to pay or level of insurance coverage.

**Outreach & Inclusion Strategy – 15 Points**

Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

**RESPONSE:**

Participants in the Bluegrass Transitional Care Medical Respite program come from a situation of homelessness. As such, this program targets some of the most marginalized members of our society.

These individuals are impacted by poverty and economic distress. In order to qualify for medical respite services, they must have been immediately discharged from the hospital for a physical or other disability. Program participants may also present with limited English proficiency.

One overarching goal is to help every qualifying patient in need by providing the highest quality physical and psychosocial support, without regard to race, color, religion, sex, sexual orientation, handicap or national origin. To this end, BCN has instituted a “Non-Discrimination in Patient Care” policy to ensure that every service and benefit we provide remains inclusive to all patients. Further, our policies provide that the organization will not exclude or deny a qualified individual with a disability from participating in or benefitting from our services, programs, or activities. We provide translation services to persons with limited English proficiency through a third-party language line provider. BCN honors patient translation preferences and, within certain safeguards, will collaborate with a patient’s preferred family member with better English proficiency or preferred community-based (volunteer or paid) translators.

We have already taken concrete steps toward implementing recommendations from the Mayor’s Commission for Racial Justice and Equality. In 2020, we established an organizational strategic initiative to increase diversity, equity, and inclusion. We are currently interviewing candidates to fill the new position of Director of Diversity, Equity, and Inclusion, who will help recruit a more diverse workforce and assist with achieving greater equity in access to healthcare services among minority populations. Furthermore, we are actively pursuing philanthropic grant funding to initiate a targeted outreach effort, endorsed by several African-American community leaders and organizations (Urban League, NAACP, Senator Reggie Thomas, and area churches) to make our end of life services more accessible to residents within the 40508 zip code.

Please see Non-Discrimination of Patient Needs and other policy statements attached.

## PROGRAM BUDGET SUMMARY

Agency Name **Hospice of the Bluegrass, Inc. dba Bluegrass Care Navigators**  
 Program Name **Bluegrass Transitional Care for Medical Respite**

**FY 2022 (July 1, 2021--June 30, 2022) Total Program Budget**

Column A Total Program Budget [= B+C]	Column B ESR Grant Funding Request	Column C Non-ESR Program Funding [A-B]
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**1. Staff Salaries for Program**

	# of Employees:	Column A Total Program Budget [= B+C]	Column B ESR Grant Funding Request	Column C Non-ESR Program Funding [A-B]
Full-Time (FTE)	1	36,667	13,500	23,167
Part-Time		0		
<b>Total Salaries</b>		<b>36,667</b>	<b>13,500</b>	<b>23,167</b>

**3. Consultant Services**

\$	0	0	0
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*list details* N/A

**4. Space/Facilities**

\$	42,233	38,010	4,223
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*list details* 8 clients/month at an average of 7 nights/cost of \$62.85/night = \$3,519.44\*12months = \$42,233

**5. Operating Expenses**

\$	9,600	8,640	960
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*list details* Transportation costs = \$55/client \* 8 clients/month = \$440\*12 months = \$5,280  
 Food costs = \$45/client \* 8 clients/month = \$360\* 12 months = \$4,320

**6. Scholarships / Stipends**

\$	0	0	0
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*list details - numbers & amounts* N/A

**7. Other**

\$	0	0	0
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*list details* N/A

**8. TOTAL FY22 PROGRAM BUDGET**

\$	88,500	60,150	28,350
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**Cost per Program Participant: \$ 922**

I understand that this document in its entirety is incorporated into my grant Agreement with the Lexington-Fayette Urban County Government.

**Authorized Representative (typed name):** Laura Klumb

**Title:** Vice President of Philanthropy

**Date:** 05-19-2021