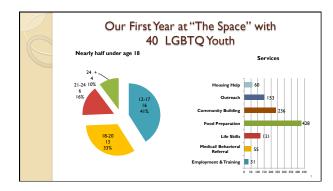




Health Care & Counseling Tutoring Housing Help Arts & Crafts Peer Support Family Re-Unification Trauma Informed Care









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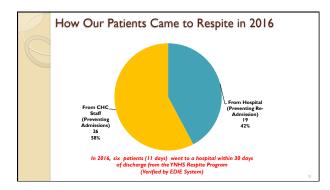
AVERAGE RESPITE STAY IN 2016 = 22 DAYS

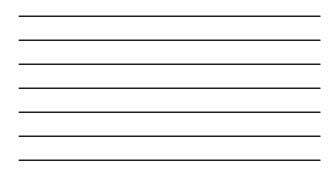
- Daily checks by Nurse / Behavioral Health / Case Manager. Wound care. Behavioral Health counseling. Transport / accompany to PCP and specially and OT/PT appointments. Favluate and support ADLs. Assits with applications for SSUSDI, Basic Food and other federal/state benefits. Facilitate family interaction when possible. Initiate housing stabilization. Provide discharge summary to patient /PCP at time of respite exit.

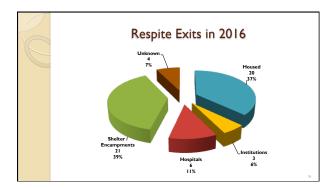
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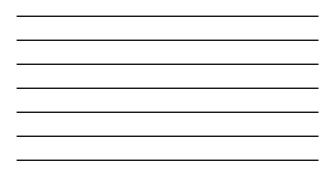


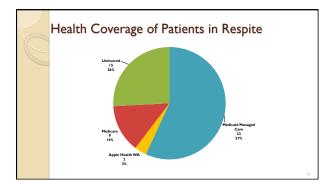
58 patients stay		People	Reason for Respite Needed
	,		
	One Week or Less	34%	Ulcers, wounds, abscesses, post-surgery recovery
	I to 2 weeks	22%	MRSA, abscesses, cellulitis, wound care
	2 – 4 weeks	33%	Fractures, cancer / chemotherapy
	4 weeks or longer	33%	Necrotizing fasciitis, amputation recovery, fractures





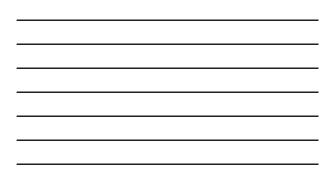




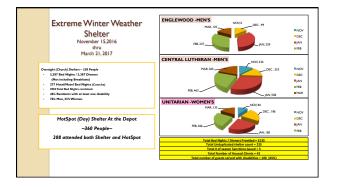


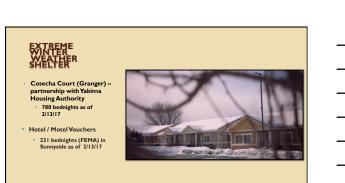


R		Medical R taff Report a S 269 for Depr	-	Inpatient Days	
reduces public o	 Respite care reduces 		Average Hospital Charge for Depression*	Average Hospital Charge for Rehab*	Average Respite Program
	public costs associated	Average Length of Stay	13 days	8.1 days	22 days
	frequent Average C	Average Charge Per Patient	\$16,133	\$29,16	\$3,710
		Average Charge / Cost per Day	\$1,241	\$3,600	\$167.19
		WSHA Hospital Pricing -www.v	vahospitalpricing.org		



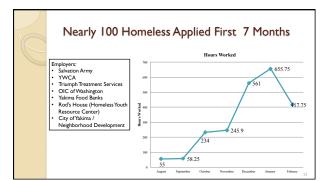


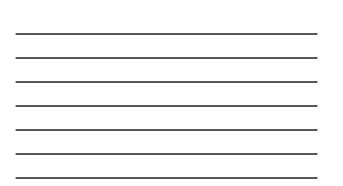




Supportive Employment "Depot JobMatch"

- Employment coaching and supervision
- At YNHS, a non-profit, willing business
- 15-25 hours per week
- "Occasional status" employee of YNHS wherever placed
- ADDITIONAL SUPPORT FROM THE COMMUNITY
- YPD Helping Hands Housing
- Support Clothing, food, housewares
- Funded by local contributions



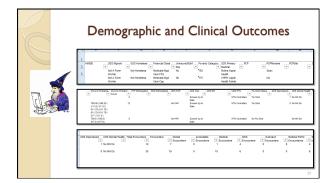


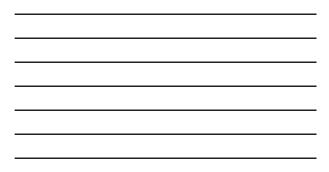




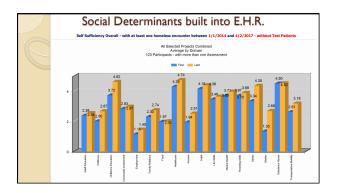


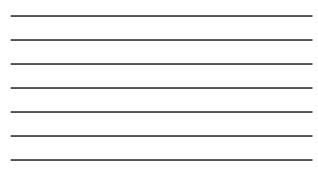


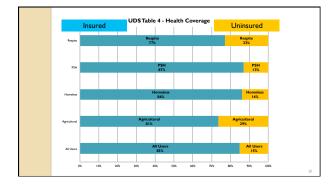


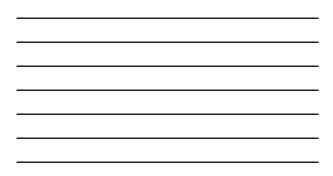


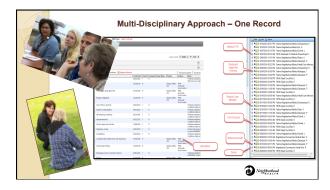
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	Rating	SUMULANTING	sur-mon-man	and nucleate combes	o this section		
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	Employment		D Temperary part dise or beaming, backepure pay no beamin	C Employed Ault time, Indequate pay, few or no hanafits	C Englisyed full-time with adequate pay and humation	C Materian personal employment with adequate isocar and security	
	Sheltor	C Resultant with downless with whittes	In tracification automatication baseling and/or automatication perpendition united date	O is rable tending that is sufe test only surgicully adequate	C Respirate adoption subcolliged bencing	C Received to sele adequate, sambodized becomp	
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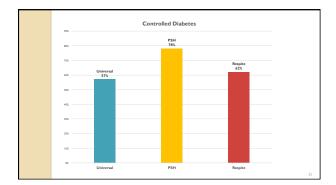




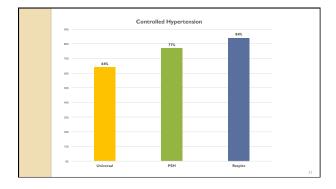


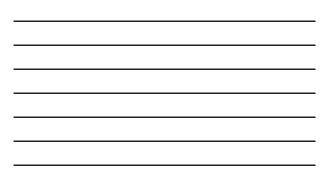


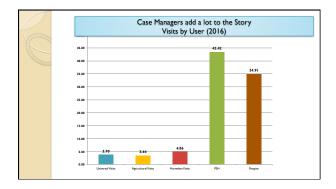


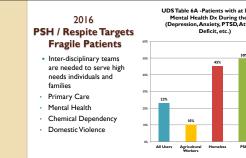


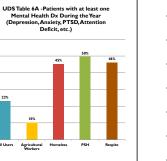


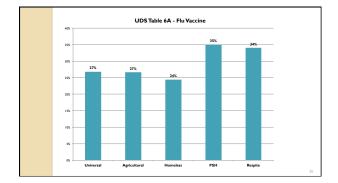


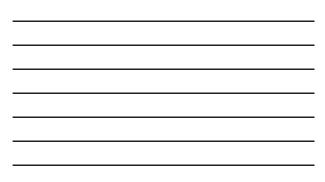




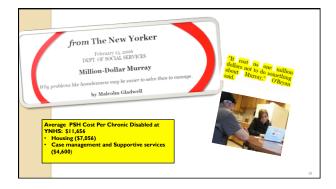








2016 Profile Some Patients Need a Little Some Need EVERYTHING				
Care Patients 22,310 Homeless Patients		2,232		
22,510	Primary Care Visits	10,855		
82,623	Permanent Supportive Housing- Fed/State/Local	77 households 134 people		
3,544	Extreme Weather Shelter	238people 3,387 nights		
106,118				
8,058	Medical Respite	58 People 1,287 nights		
6,114	Housing & Essential Needs (HEN)	248 households		
	ed a Little 22,310 82,623 3,544 106,118 8,058	ed a Little Some Need EVERYT 22,310 Homeless Patients Primary Care Visits 82,623 3,544 Permanen Supportive Housing- Fed/State/Local Extreme Weather Shelter 106,118 8,058 Medical Respite Housing & Essential Needs		



The Bottom line Once Housed.....

- Mental Health Improves
- Less disruptive
- Infectious disease rate improves
- Pain is better controlled
- Medications better managed
- Treatment plans compliance improves
- More likely to obtain and maintain employment or education

Neighborhood



https://youtu.be/LI3THohG7hw? list=FLIL5zSLLQh8mD5Xmvn8gfbw