Introduction
The Housing at Risk Program:
• Identifies unstably housed patients and houses them as per their needs.
• Emphasizes housing as a social determinant of health.
• Addresses rising fair market rates for housing in New York City and issues of Medicaid recertification/redesign.

Objective of Internship
This internship allowed me to assist program social workers in navigating the housing search by providing access to hundreds of private and supportive housing contacts. My objective was to facilitate the housing search for patients with chronic and complex medical conditions.

Work profile
• Assessed patient housing.
• Updated MRT Toolkit with minutes from MRT Housing Provider Roundtables, 2019 Hospital Homeless Count survey data, and from the Health Home Supportive Housing Pilot Interim Policy Guidance.
• Observed Complex Case Meetings with physicians and social workers.

Reflection
• My greatest project was in facilitating the housing search for the primary goal of getting patients housed.
• This entailed filtering through several existing lists of housing provider contacts and conglomerating information onto one spreadsheet.
• Additionally, I was required to maintain consistent communication by calling, emailing, mailing, and faxing.
• The spreadsheet contains 500+ private housing contacts and 100+ supportive housing contacts.
• I also assisted the Medicaid Redesign Team (MRT) Workgroup by analyzing survey data from the 2019 Hospital Homeless Count to help assess improvements for next year’s count.
• In addition, I created and analyzed survey data from MRT Provider Questionnaire data to evaluate best practices.

Top Right: A Complex Case meeting with medical staff and social workers to form discharge plans for patients with complex medical and socioeconomic issues.
Bottom Left: Housing at Risk Team members, as well as other coordinators with the Department of Social Services.

Looking ahead
I hope to get involved in more volunteer projects involving under-served populations, and I hope to continue participating in such frameworks as a physician.

Questions
• Considering that Montefiore’s Housing at Risk Team is one of the only programs providing medical respite in NYC, how can more such programs be instituted?
• Is it possible to create a housing at risk program for community members too?

Conclusion
Montefiore Medical Center’s Housing at Risk Program is truly committed to overcoming each patient’s unique housing challenges, espousing the belief that housing is a social determinant of health.

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