

## Housing Support Team Talking Points

### Housing First

- A Housing First approach to homelessness differs from the traditional shelter-based response of homelessness by focusing on the root causes of homelessness rather than a reactionary response.
- A Housing First approach attempts to prevent homelessness when possible and to provide permanent supportive housing to those who are homeless. This approach is housing-based with an immediate and primary focus on helping individuals quickly access and sustain permanent housing.

### Partnering to End Chronic Homelessness in Guilford County

- The ten year plan identifies Housing First as a key strategy to eliminate Chronic Homelessness
- The Housing support team project is an integral component of Guilford County's Ten Year Plan to End Chronic Homelessness
- The plan outlines the need to house 20 individuals experiencing chronic homelessness per year

### Housing Support Team

- In May 2007, the Guilford Center received a 26 month grant for \$644,000 from the North Carolina Department of Health and Human Service directed from the Mental Health trust Fund for a pilot project to create Housing Support Teams.
- Family Service of the Piedmont, Open Door Ministries, and the Greensboro Housing Coalition formed a countywide partnership to implement the Housing Support Teams.
- The Housing Support Team aims to move eligible participants into permanent housing and help them to maintain it, reduce hospital, emergency room, and jail admissions, build the capacity of enhanced service providers, public systems, and community groups to provide housing support to homeless disabled persons and document the cost/benefit of utilizing housing first.

### Target Population

- In order to qualify for the Housing Support Team program you must be an individual experiencing chronic homelessness and identified as a "high use" repeater (at least 4 episodes in the past three years or one year continuous in various public institutions such as the psychiatric units, emergency rooms and/or jails.
- *Priority is given to individuals who have:*
  - Schizophrenia
  - Schizoaffective disorder
  - Bi-polar Disorder
  - Other psychotic disorders
  - Organic brain syndrome
  - Post Traumatic Stress Disorder (PTSD)
  - Co-existing mental health and substance abuse disorders

### Progress to Date

- As of December 31, 2008, 79 individuals were enrolled in the program and 69 individuals have remained stably housed.
- The program has 87.3% success rate.
- Preliminary Report Completion  
The Cost Effectiveness of Housing Support Teams: The Experiences of Persons Enrolled In the First Three Months by Jennifer Vaughn, Adam Walsh, and D. F. Duncan Jordan Institute for Families UNC-CH School of Social Work Chapel Hill, NC December 2008  
Significant Cost Reductions for services in the year after participants enrolled in HST found in the report include:
  - Emergency room and inpatient hospitalizations costs declined by 71 % (\$86,054) from \$121,869 to \$35,815
  - Costs for incarceration in jails and prisons declined from \$10,890 to \$0
  - Stays in homeless shelters dropped by 94%