

North Carolina Coalition

securing resources • encouraging public dialogue • advocating for public policy change

to End Homelessness

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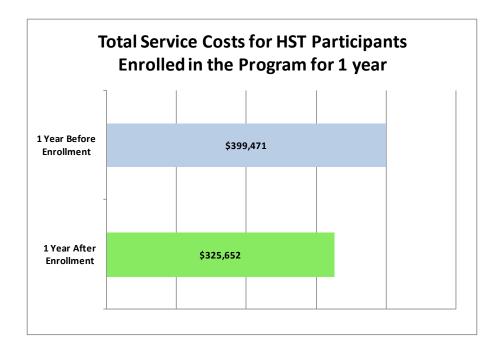
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Ending Homelessness is Cost Effective: Initial Results from North Carolina's Housing Support Teams

Housing Support Teams (HSTs) were implemented in 2007 as pilot programs in Buncombe, Durham and Guilford Counties. Initially funded by the N.C. Division of Mental Health, Developmental Disabilities and Substance Abuse Services, HSTs were designed to increase the coordination of services to homeless individuals and families.



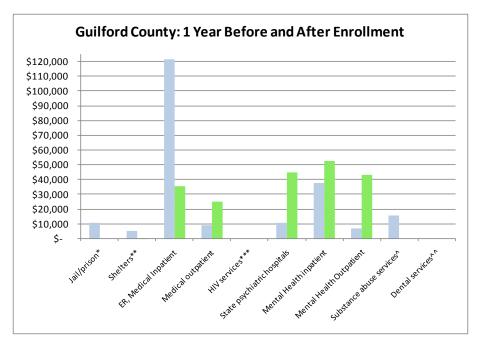
An initial evaluation¹ of the program's first year displays remarkable results—31 formerly homeless individuals remain housed, and the overall cost of services to this population declined 19%.

The provision of housing and necessary services to homeless individuals is proving less costly to the community than their former existence on the streets.

HSTs are comprised of up to three members, and were designed to provide non-clinical services to clients in need of basic transition assistance.

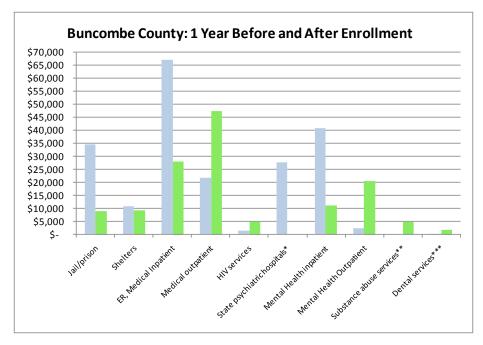
HST member responsibilities include coordination of discharge planning from hospitals, residential treatment facilities, jails and prisons. Team members are also tasked with outreach and the provision of assistance with housing searches, completing housing applications, budget counseling, assistance in obtaining birth certificates, and other related services. HST members can also be involved in landlord recruitment, establishing and maintaining positive landlord relations, and the submission of requests for reasonable accommodations.

¹ The initial evaluation completed by the Jordan Institute for Families does not include data from Durham, one of the three pilot HST communities. This is due to unavailability of data from a local medical services provider. Negotiations are ongoing to retrieve this data, and its inclusion in the final HST report (2010) is expected.



The 19% cost savings (a total of \$73,819) that the HSTs have realized in one year of operation is in spite of one individual enrolled in the program in Guilford County who was hospitalized in a state psychiatric facility for 53 days. This one individual accounts for about one-fourth of the total costs of all services received by HST participants in Guilford. Despite that individual's costs, Guilford County still experienced a 7.5% reduction in service costs.

- *State psychiatric hospitals, After = \$0
- **Substance abuse services, Before = \$0
- ***Dental services, Before = \$135



Buncombe County experienced even greater cost savings, recouping 32% of total costs to public systems over the course of the year. After entering the program, HST participants in both counties had lower costs for incarceration in jails and prisons, stays in homeless shelters, emergency room and inpatient hospitalizations, and substance abuse services. Higher costs for medical outpatient, mental health inpatient, and mental health outpatient services were incurred, as is to be expected for a population experiencing stabilization after a period of instability.

- *Jail/prison, After = \$0
- **Shelters, After = \$538
- ***HIV services, Before and After = \$0
- ^Substance abuse services, After = \$0
- ^^ Dental services, Before and After = \$0

HSTs have extended needed continuity of care and provided vital services, including housing, for an extremely vulnerable population in North Carolina. HSTs are providing extremely valuable services, and they are also providing crucial cost savings to our public systems. In these difficult economic times, homelessness is a looming reality for more and more North Carolinians. Preserving and expanding HSTs is critically important to our growing population of at-risk residents, and ultimately, to our State's bottom line.

To read the full report analyzing the cost effectiveness of HSTs by the Jordan Institute for Families at The University of North Carolina at Chapel Hill please visit http://www.ncceh.org/HSTreport.