

California full-service partnership program is cost effective

June 7 2010

Full-Service Partnerships (FSPs) are designed to do 'whatever it takes' to improve residential stability and mental health outcomes for homeless persons with serious mental illness. They are the cornerstone of California's Mental Health Services Act (MHSA) - one of the largest mental health policy experiments in recent history.

Researchers, led by Todd Gilmer, PhD, associate professor in the Department of Family and [Preventive Medicine](#) at the University of California, San Diego School of Medicine, have found that FSPs, which are based on the Housing First model, are not only cost-effective, but improve the quality-of-life for many homeless clients with serious mental illness. Findings from this study will appear in the June issue of [Archives of General Psychiatry](#).

"Traditionally, these homeless individuals had to be stabilized and compliant with their treatment before they could transition from being homeless, to group settings, and then to an apartment or home of their own," said Gilmer. "Many clients struggled for years to meet these requirements, so the Housing First program turned this notion on its head by putting permanent housing and consumer-driven treatment first. This approach has been well documented and proven effective at improving treatment outcomes and community integration."

However, little information is available on [mental health](#) service use and costs pertaining to Housing First. California's FSPs are expensive relative to standard outpatient treatment, which has led to controversy

regarding their costs and the possibility of distributing MHSA funding more broadly.

Gilmer and his colleagues found that participation in San Diego County's Housing First FSPs reduced the time spent homeless by 129 days per year, down from 191 to 62 days, as well as reduced use of inpatient, emergency and justice system services. The annual costs of these services declined by \$10,244 per person.

Although outpatient costs increased by \$9,180 per person per year, due to the increased number of outpatient mental health visits, and costs for housing increased by \$3,180, 82% of these costs were offset by reductions in costs for inpatient and emergency services.

Not only did the researchers show that FSPs were almost completely or very nearly cost neutral, they also found that participants consistently reported a higher quality-of-life in areas such as activities of daily living, family relationships, and legal and safety issues, in part due to a comprehensive team approach involving psychiatrists, social workers, therapists and housing, vocational and educational specialists.

"Homeless individuals often have schizophrenia or bipolar disorder - illnesses which may negatively impact their quality-of-life," said Gilmer. "Typically, these individuals prefer to live independent lives in their communities. FSPs provide them with subsidized, permanent housing and engage them in team-based services so that they can positively integrate with their community and reach their personal goals."

Provided by University of California - San Diego

Citation: California full-service partnership program is cost effective (2010, June 7) retrieved 17 April 2024 from

<https://medicalxpress.com/news/2010-06-california-full-service-partnership-effective.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.