

Thanet Winter Shelter Conclusions and Outcomes.

Introduction

The winter shelter was in operation for 90 days from 1st December 2016 to 28th February 2017. The aim as previously stated in the proposal was for each individual to be offered mental health support with the recovery star being used as a measurement for success. This quickly became unworkable due to the chaotic and transient nature of the shelter.

Therefore mental health assessments were offered to all guests of the shelter. If required, 1:1 time would then be offered regularly. The primary aim being to ensure that all guests were referred in to the most appropriate primary care/charity sector services for their needs.

In total 42 guests used the shelter, of these 22 (52%) engaged in assessments and/or 1:1s.

Results

Across the 90 day period 23 sessions of Mental Health input were provided, equating to 80.5 hours. During this time there were 134 contacts across the 22 individuals. Of these 22, 11 (50%) were referred to IAPT services for talking therapy, 16 (73%) were advised and encouraged to engage with Turning Point and 3 (13%) were referred to LiveWell. 3 (13%) were already under secondary mental health care and given input from shelter, 1 individual was planned to be discharged from secondary services. 0 were referred into secondary services.

The costs saved to the health economy by these interventions alone are approximately £35,510 (134 contacts at £265 per contact). This of course does not account for any additional costs saved by holding individuals in Primary care.

Conclusions

There is an abundance of research which highlights the prevalence of mental illness amongst the homeless population. The interventions offered and engaged with, and indeed the use of numerous charities and primary care input, highlights that there is appropriate care in primary settings for what is often considered a “hard to reach” population.

No other shelter in Kent offered mental health input, and I believe it was the structured support (all guests and volunteers knew when sessions were scheduled to take place) and relationship building that led to positive outcomes.

Whilst this was a pilot project which evolved throughout the duration of the shelter, it must be argued that such interventions and input should be worth pursuing in future shelter projects, given the positive outcomes and costs saved.