

Community Snapshot

Quincy, MA



September 2009

National Alliance to
END HOMELESSNESS

The Quincy/Weymouth Continuum of Care (CoC) has a general population of roughly 145,000 and is located just outside of Boston, Massachusetts. In 2005, Quincy's rate of chronic homelessness was 29 percent, and exceeded both the national rate of 23 percent and Massachusetts' rate of 20 percent. This led the CoC to focus its efforts, and by January of 2009, of the 322 people experiencing homelessness in the CoC, only 15 percent were chronically homeless—a significant decrease from years prior.

Quincy has become a national leader in its use of evidence-based strategies to reduce chronic homelessness in the community. To begin, Quincy set out to understand the extent of homelessness in the community by data collected through the Homeless Management Information System (HMIS) and the annual point-in-time count. Once the extent of chronic homelessness was discovered, the community examined the trends in service utilization. Based on the finding that less than one-third of the homeless population was utilizing roughly half of total bed stays the CoC designed a plan to end chronic homelessness.

Key Initiatives

Housing First. The Housing First program began formally in 2005 when 10 chronically homeless women were moved from shelter into a 12-unit congregate Housing First building. Father Bill's Place and Main-Spring (formerly Father Bill's Place) has been the community leader in moving chronically homeless people from the streets and shelters into permanent housing with supportive services. Over the next four years, the program size increased dramatically. More than 60 chronically homeless individuals have been moved from emergency shelter to permanent housing in the Quincy area. The program has been so successful, that Quincy was able to close a 35-bed emergency shelter due to lack of need.

Discharge Planning. Quincy recognized a need for both an improved understanding of and response to people being discharged from public institutions into homelessness. To get a better understanding, local homeless service providers documented their clients' previous involvement with public institutions such as jails, hospitals, and substance use detoxification facilities for all

Chronic Homelessness in Quincy has decreased by 50 percent since 2005.

people experiencing homelessness in the CoC. In collecting this data, Quincy discovered that 14 percent of clients had been involved with youth services, 49 percent had some involvement with the Department of Mental Health, and 22 percent had been involved with Social Services. The CoC took this data to state institutions, and through discussions and collaboration was able to change the discharge policies of statewide systems of care. Additionally, these findings resulted in funding for a Housing First pilot project for youth aging out of the foster care system.

Data-Driven Approach. The collection and analysis of data captured primarily by the local HMIS and point-in-time counts has been the chief tool in measuring progress and in designing and re-designing local homelessness policies. This data-driven approach has been a pillar in Quincy's success in reducing chronic homelessness in the community, and it is woven throughout the ten year plan and local homelessness policies. Improving the data collected on chronic homelessness in the community has resulted in improved programs and policies – most notably the Housing First program.

Outcomes

Reductions in the Cost of Emergency Services. An evaluation of the first 12 women housed through the Housing First program found that in the first year after housing, emergency room visits dropped from 22 to 11, and inpatient stays dropped from 44 to 4. These, along with other reductions in service utilization, have saved the community roughly \$41,000 annually for those 12 women alone.

Reductions in Chronic Homelessness. There have been marked decreases in chronic homelessness since 2005, when over 96 chronically homeless people were counted in the community. The provision of new per-



Exhibit 1. Chronically Homeless Population and Number of Housing Units for Chronically Homeless People from 2004–2009



manent housing units and services worked to reduce that number to only 48 people in January of 2009, a 50 percent reduction in chronic homelessness (see Exhibit 1). Further, the percent of homeless individuals who were chronically homeless fell from 50 percent in 2005 to 32 percent in 2009. These decreases are due in large part to the implementation of a successful Housing First program.

Across the country, communities are making progress in ending homelessness. The National Alliance to End Homelessness' *Community Snapshot Series* highlights strategies, programs, and innovations in these communities. To learn how to end homelessness in ten years, visit www.endhomelessness.org.

The National Alliance to End Homelessness is a nonprofit organization dedicated to solving the problem of homelessness and preventing its continued growth. Our mission is to mobilize all sectors of society in an alliance to end homelessness.