



CENTERSTONE

The Living Room

Louisville Metro Council Health & Education Committee 4.18.18

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A decorative header featuring a complex, low-poly geometric pattern in various shades of blue, transitioning from dark blue at the top to light blue and white at the bottom.

The Living Room Pilot Program is working!

Success Stories



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Over the past three months:

- **More than 330 Living Room Guests**
- Twice as many men than women
- Top 5 Divisions: One, Four, Five, LMDC and EPS (Emergency Psychiatric Services)
- Top 3 Reasons: Alcohol / Drugs, Loitering, Mental Health Crisis
- Guest Satisfaction – 81% responded they felt safe, welcome and cared for while at The Living Room
- **Less than 1% were returned to LMPD**
- 94% of guests had their Crisis Diverted and only 6% refused services.
- **Saved Louisville Metro approx. \$250,000 and will pass \$325,000 in savings next month.**



The Living Room is Saving Lives

Where would they be without us?

- Jail – super high utilizers
 - Emergency Rooms
 - Inpatient Hospitalizations (EPS)
- On the streets without knowledge of our resources



What we have learned

- Pilot Phase

- LMPD is very supportive – 2 minute turn around time is critical
- 10% of Living Room guests are repeat visitors
- Adapting the data throughout the pilot phase
- Stepdown from Metro Corrections is important
- Fewer Medicaid billable hours than expected
- Very high frequency of co-occurring complications including housing and medical needs
- Shelters are not staffed with mental health professionals capable of assisting mentally ill guests with behavioral and psychiatric symptoms.
- Guests experiencing complex physical health issues.
- Patience, trust and repetition are often required to assist guests on their journey to recovery.



Next Steps

Full Funding in FY 19 – \$1.35 million

- Expansion of Staffing and Medical Services – Wound Care, BP, Hepatitis A, B and C prevention/ treatment, diabetes education, and Drug Withdrawal symptom management.
- Mental Health Urgent Care - Expand The Living Room array of services to create a 24/7 urgent behavioral health environment in order to improve connecting citizens in mental health, substance use disorder, or co-occurring crisis with immediate peer support, clinical triage and referral/connection to appropriate community resources.
- Expanding Access- Walk-ins and community referrals
- Expanding Collateral Services- Employment connections, housing supports, etc.
- Additional Funding- Pursue additional funding opportunities, including state and federal dollars.



Summary

The Living Room makes sense financially

The Living Room improves public safety

The Living Room is compassionate city infrastructure

We should fully fund the Centerstone Kentucky Living Room





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Thank you!

Questions?

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