



Samaritan House Annual Report

Fiscal Year 2013-14

www.thesamaritanhouse.org

Report to Supporters

We passed a major milestone in 2013-14. We paid off our facility.

Thanks to a grant from The Carolinas Healthcare Foundation and the Leon Levine Foundation, our mortgage was paid in full. A small ceremony was held where we "burned the note." At the same time, we also dedicated our parlor to a man who has been instrumental in helping Samaritan House almost from the very beginning, Mr. Michael Rose. Now retired, Mr. Rose was the head of the Carolinas Healthcare Foundation and worked with Samaritan House to make sure we not only had funding over the years, but also helped garner support to pay for the new facility. Many thanks, Mr. Rose.

Our guests continue to suffer from chronic illnesses - much of it due to prolonged homelessness. Heart disease and lung disease continue to dominate the causes of many of our admissions, although we have seen an increase in assaults and other traumatic injuries. Orthopedic injuries and fractures were actually the leading cause of guest injuries with 33 new cases. Although the ability to care for people with orthopedic injuries was one of the major factors in moving to our facility three years ago, this is much higher than we anticipated. Fortunately, we are able to easily handle these injuries now.

Mental illness is becoming a much larger factor in the care of our guests. Last year we had 22 guests with some sort of mental health diagnosis in addition to their illness or injury. In some cases, this makes our job much more difficult - especially if the guest decided not to properly take their medications. However, with the proper monitoring of how our guests take their medications, much of this has been manageable. We are working more closely with local mental health providers to make sure our guests remain up-to-date and compliant with their doctor's health care plans.

We were able to serve 174 people last year and provided over 3,000 bed days of care for our guests. This equates to a savings of around \$36 million in hospital costs. That is important since it prevents those costs from being passed through to everyone else.

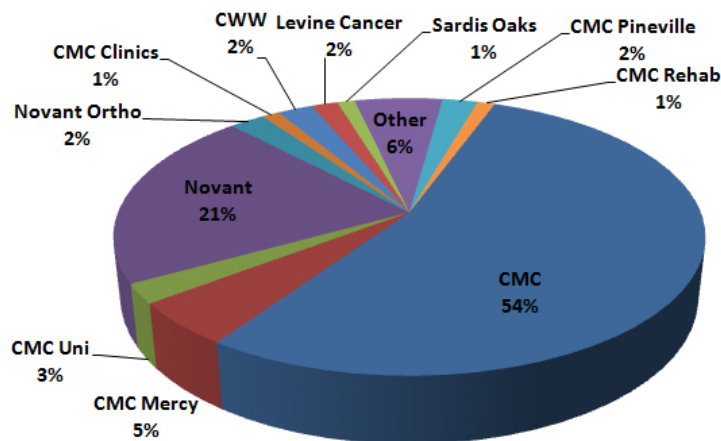
Meeting recently with Spencer Lilly, the CEO of Carolinas Medical Center, he outlined the rising costs to local hospitals. With reduced reimbursement from Medicare and Medicaid, along with penalties for readmissions within 30 days of release from a hospital, the profits are getting very slim. In addition, since North Carolina is not extending Medicaid to more people, the hospitals must make up for this care on their own. Since reductions in homeless readmissions is a major goal of Samaritan House, it makes what we do much more important and needed in our community.

Our outcomes continue to do well. Last year seventy seven percent of our guests were able to obtain either permanent or transitional housing when they left Samaritan House. Once again, if a person has some form of income, either through Social Security or by obtaining a job, housing can be obtained. We are working closely with reputable housing agencies who help low income people get into a place of their own. We are also making sure that anyone who needs housing is sent to the coordinated assessment - a resource dedicated to getting people into housing as quickly as possible.

We continue to see fewer people leaving Samaritan House and having to go back to the hospital for the same illness or injury. Last year it was reduced to only four percent. This is a huge change from the nearly seventy percent estimated by the hospitals when we originally opened.

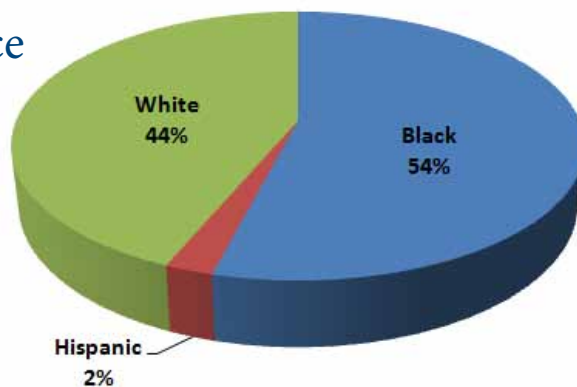
Samaritan House is proud of its achievements. We hope you can take pride in the help you have given us in making this happen. Below are some additional statistics which outline our success.

Where Referrals Come From...



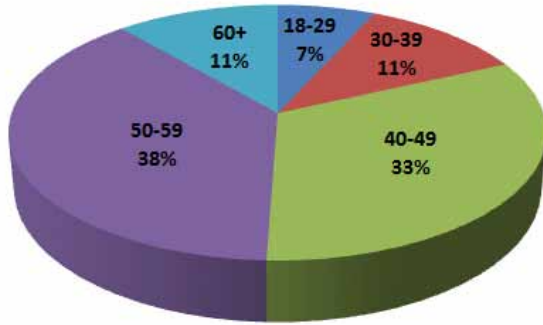
As you can see, we receive referrals from a wide variety of medical facilities. 23% are from Novant hospitals, 77% from CHS facilities.

Race



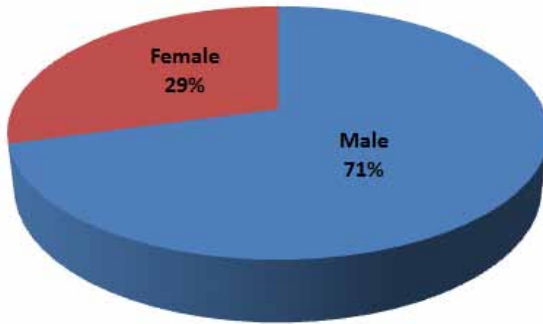
The racial mix referred to Samaritan House has remained relatively the same over the past several years.

Age

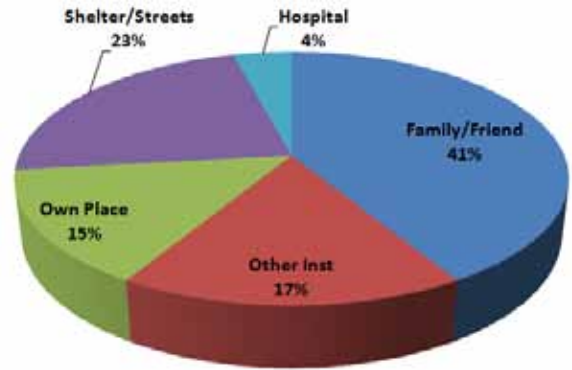


As you can see, the majority of men and women come to us between the ages of 40 and 60. The eldest this year was in over 80. The mix of males to females has seen an increase in women (below).

Gender

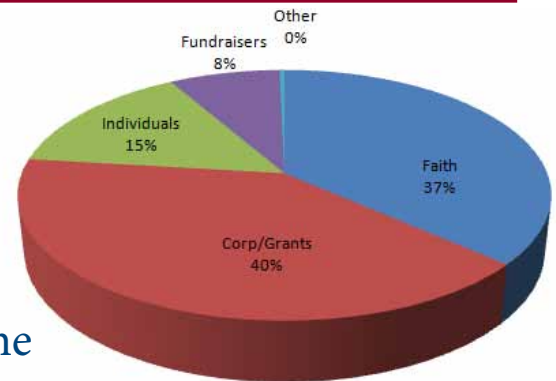


Where People Go When Leaving

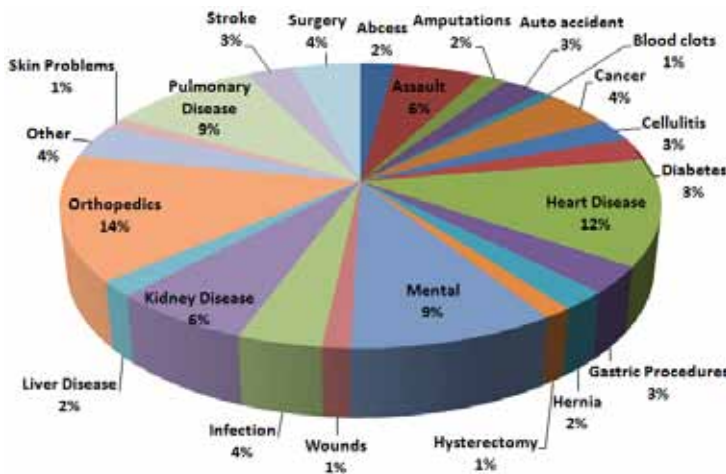


Only 22% of our guests leave us for the streets and shelters. The rest are able to find some sort of housing, either transitional or permanent.

Finances for 2012-13

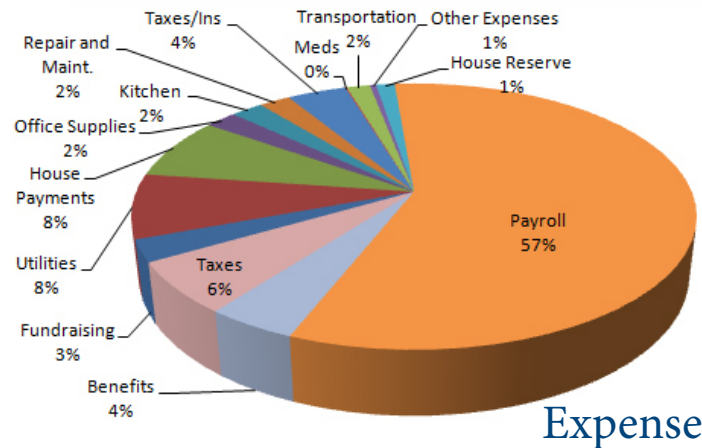


Income



Illness/Injury

As discussed, the breakdown of illnesses and injuries gives a good idea of how serious most of our illnesses are.



Expenses

We ended 2013-14 with a slight surplus. Our budget for 2014-15 is \$225,147. We are working hard to establish a six month buffer so that we may be ready for any situation.

The Samaritan House Board

President - Helen Krewson
Vice President - Gene White
Treasurer - Gene Schlaman
Secretary - Ivan Carson
John Barringer Valarie Cary
Christopher Hailey Jon Joffe Carol Lillard
Rod Wilkes John Wilkie

Staff

Brad Goforth, Executive Director
Gregg Chapman, Creola Sanders, David Shaw

Plus over 1,400 volunteers!

Our Mission:

To provide short term recuperative care for homeless men and women following a hospital or emergency room stay.