

Strategic Homelessness Action Plan

for

The Pinellas County Area

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Strategic Framing Report - Phase IV of VII Phases

Presented to

City of St. Petersburg

by

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Phase I Scope

During Phase I (October through December 2010) an inventory study of homeless services was conducted using in person site visits to homeless service providers throughout Pinellas County.

For the most part, two to four site visits were performed per service agency for the purpose of inventorying services on a 168 hour (eg one week) cycle of service. “Formal” site visits were generally conducted 8a-5p, Monday to Friday, while “informal” visits occurred at night and weekends.

It is essential to have an accurate understanding of the types and capacities of service within Pinellas County to insure appropriate recommendations are submitted.

Phases II and III Scope

Because of the inherent interconnectivity of the underlying issues between needs assessment and gap analyses, Phases II and III were conducted simultaneously (January through February 2011).

Research and assessment was done on “types” of services (qualitative) and capacity of services (quantitative) needed in Pinellas County.

Data was used from TBIN (Tampa Bay Information Network), HMIS (Homeless Management Information System) and Point-in-Time Counts (PITCs) which was then synthesized with street level observations and agency interviews.

Additionally, because of the lack of a “families-with-children” waiting list, a month-long data survey was conducted of families with children who were being denied entry into the larger and medium sized family shelters in Pinellas County. The purpose of this survey was to determine empirically the gaps in service for families with children.

Phase IV Scope

During Phase IV (March - May), in person meetings were held with officials, staffers and volunteers from government, business, faith based, civic and educational agencies in order to strategically frame the Action Plan.

Additionally, continued conducting the inventory of homeless services (qualitative) and capacity of homeless services (quantitative) throughout Pinellas County.

After visiting 237 homeless service providers in 12 states and the District of Columbia, the following *Seven Guiding Principles* were commonly found to be the best practices in the USA. These *Seven Guiding Principles of Transformation* are used as the key measuring stick when reviewing homeless service providers in Pinellas County.

The Seven Guiding Principles of Transformation **Moving from Enablement to Engagement**

1. Move to a Culture of Transformation (versus the Old Culture of Warehousing):

Homeless individuals must be engaged and no longer enabled. Everybody within the services delivery system (eg general public, media, elected politicians, appointed officials, monitors, boards, staffs and volunteers of service agencies and most importantly the homeless themselves) must embrace a culture of transformation. A culture, that through the help of others, homeless individuals can transform and integrate themselves back into society. For moral and fiscal reasons, homelessness must become an unacceptable condition that is not tolerated in the USA.

2. Co-location and Virtual E-integration of as Many Services as Possible:

In order to increase success, all services within a service area must be e-integrated. Virtual e-integration improves coordination of services, enhances performance, reduces “gaming” of the system, engages individuals on the margin of society and increases cost efficiencies within and between agencies. Furthermore, whenever financially possible, services should be co-located. Co-location goes beyond virtual e-integration by increasing the number of “service hits” into a shorter period of time through the reduction of wasted time in transit and minimization of mishandled referrals. Co-location also increases the supportive “human touch.”

3. Must Have a Master Case Management System That is Customized:

Because there are so many different service agencies helping homeless individuals (eg government at multi-levels, non-profits and faith-based), it is critical that ONE person coordinates the services an individual receives and to do so in a customized fashion. The types of service provided is critical, but what is more important is the sequencing and frequency of customized services.

4. Reward Positive Behavior:

Positive behavior of individuals should be rewarded with increased responsibilities and additional privileges. Privileges such as higher quality sleeping arrangements, more privacy and elective learning opportunities should be used as rewards. It is important that these rewards be used as “tools” to approximate the “real world” in order to increase sustainable reintegration into society.

5. Consequences for Negative Behavior:

Too often there are no consequences for negative behavior of individuals. Unfortunately, this sends a message that bad behavior is acceptable. Within the transformational process, it is critical to have swift and proportionate consequences.

6. External Activities Must be Redirected or Stopped:

External activities such as “street feeding” must be redirected to support the transformation process. In most cases, these activities are well-intended efforts by good folks; however, these activities are very enabling and often do little to engage homeless individuals.

7. Panhandling Enables the Homeless and Must Be Stopped:

Unearned cash is very enabling and does not engage homeless individuals in job and skills training which is needed to end homelessness. Additionally, more often than not, cash is not used for food and housing but is instead used to buy drugs and alcohol which further perpetuates the homeless cycle. Homeless individuals who are panhandling should be engaged into the transformational process. Furthermore, most panhandlers are not truly homeless but are preying on the good nature of citizens to get tax free dollars.

Service Inventory Visits and Tours

Administrative Forum
Health and Human Services Coordinating Council for Pinellas County
Pinellas County

ALPHA House of Pinellas County
St. Petersburg
Transitional Housing and Supportive Services for Homeless Pregnant Women, Mothers with
Infants and Families Experiencing Crisis Pregnancies

ASAP Homeless Services
St. Petersburg
Transitional Housing for Men, Women and Families with Supportive Services

Bayview Park Bridge Encampment
24/7 Outdoor Sleeping Area

Beacon House
St. Petersburg Free Clinic
St. Petersburg
Temporary and Transitional Housing for Men, and Evening Meals for the Community

Boley Apartments
Boley Centers
Pinellas County
Permanent Supportive Housing and Safe Haven

Brookwood Florida
St. Petersburg
Group Home for Adolescent Girls

CASA (Community Action Stops Abuse)
St. Petersburg
Emergency and Transitional Housing for Victims of Domestic Abuse

Central Florida Behavioral Health Network, Inc.
Pinellas County
Regional Mental Health Services

“Chicken Man”
Mirror Lake
Street Feeding

CHIP (Clearwater Homeless Intervention Project)
Clearwater
Transitional Housing for Men and Women with Supportive Services

Christ United Methodist Church
St. Petersburg
Nighttime Encampment and Services

Clearwater City Council
City of Clearwater

Daystar Life Center
St. Petersburg
Variety of Services Including ID Recovery, Mail, Food Pantry, Toiletries and Utility Assistance

Directions for Mental Health, Inc.
Pinellas County
Mental Health and Outreach Services

ECHO - Eckerd College
St. Petersburg
Street Feeding Program

Family Emergency Treatment Center (PEMHS)
St. Petersburg
Mental Health Stabilization Services

Food Bank - RCS
Religious Community Services, Inc. (RCS)
Clearwater
Food Bank

Grace House - RCS
Religious Community Services, Inc. (RCS)
Clearwater
Emergency Housing for Families with Children

HEP Campus (Homeless Emergency Project)
Clearwater
A Full Service Transformational Homeless Campus for Men, Women and Families

Homeless Leadership Network: General Membership and Executive Committee
Pinellas County
Coordination of Services

Johnnie Ruth Clarke Health Center
Community Health Centers of Pinellas, Inc.
St. Petersburg
A Wide Variety of Medical Services for the Uninsured

Juvenile Welfare Board (JWB) Staff
Pinellas County
Funder and Coordinator of a Variety of Services for Children and Families

Metropolitan Ministries
Pinellas and Tampa Bay Counties
Family Campus and a Wide Variety of Services for Homeless and Poor Families

Mid-Pinellas County Cold Night Shelter
Boys and Girls Club of the Suncoast
Pinellas Park
Cold Night Shelter

Mobile Medical Unit 1 and Mobile Medical Unit 3
Pinellas County Health Department for Pinellas County Health and Human Services
Pinellas County
Homeless Medical Services

Mustard Seed Inn
WestCare
St. Petersburg
Transitional Housing with Supportive Services for Men

PAR Village
Operation PAR Inc.
Largo
A Full Continuum of Substance Abuse, Mental Health and Residential Services

Pasco County Homeless Coalition
Pasco County
Continuum of Care for Homeless Services

People that Love
St. Petersburg
Nightly meals, food pantry and residential

PEMHS (Personal Enrichment through Mental Health Services)
A Wide Variety of Emergency Screening, Crisis Intervention and Adult/Child Inpatient Services

Pinellas County Board of County Commissioners (three commissioners)
Pinellas County
Elected Officials

Pinellas County Coalition for the Homeless, Inc.
Pinellas County
Coordination of Services

Pinellas County Health Department
Pinellas County
Medical Services and Coordination

Pinellas County Health and Human Services
Pinellas County
Medical Services and Coordination

Pinellas County Public Defender
Pinellas County
Public Defense and Several Social Service Programs

Pinellas County Sheriff's Office
Pinellas County
Variety of Law Enforcement Services

Pinellas Domiciliary Co-occurring Residential Treatment
ACTS (Agency for Community Treatment Services, Inc.)
Pinellas County
Residential Services Men and Women with Mental Health and Substance Abuse Disorders

Pinellas Hope
Catholic Charities - Diocese of St. Petersburg, Inc
Clearwater
Temporary Emergency Shelter and Supportive Services for Men and Women

Pinellas Park City Council
City of Pinellas Park

Pinellas Safe Harbor
Clearwater
Pinellas County Sheriff's Office
Indoor and Outdoor Safe Sleeping "Courtyard"

Resurrection House
St. Petersburg
Transitional Family Housing and Programing

Safe Place to Be
St. Petersburg
Family Resources
Emergency and Transitional Housing for Teens

“Sandwich Man”
St. Petersburg City Hall
Street Feeding

Solid Rock Christian Church
Pinellas County
Sunday meals, pantry and substance abuse treatment

St. Cecelia Catholic Church Cold Night Shelter
Clearwater
Cold Night Shelter

St Peter's Episcopal Cathedral
St. Petersburg
Nighttime Encampment and Services

St. Petersburg Center
Pinellas County Health Department for Pinellas County Health and Human Services
St. Petersburg
Primary Medical Care Services for Uninsured

St. Petersburg City Council
City of St. Petersburg

St. Petersburg City Hall Encampment
St. Petersburg
Nighttime Outdoor Sleeping Area

St. Petersburg Free Clinic
St. Petersburg
Medical and Food Services

St. Petersburg Outreach Team
City of St. Petersburg
St. Petersburg
Intervention Services by a Police Officer and Social Worker Outreach Team

St. Vincent de Paul Conference - Soup Kitchen Clearwater
Clearwater
Meals

St. Vincent de Paul - South Pinellas District
St. Petersburg
Emergency and Transitional Housing for Veterans, Women and Men with Supportive Services
and Meals

Suncoast Center, Inc.
Pinellas County
Mental Health and Outreach Services

Suncoast Haven of Rest Rescue Mission
Pinellas Park
Meal at Safe Harbor and Pinellas Hope, dinner meals at the Mission, pantry and day center

TBIN and HMIS
2-1-1 Tampa Bay Cares, Inc.
Clearwater
Tampa Bay Information Network and Homeless Management Information System

TBIN Oversight Group Members
Pinellas County

The Haven of RCS
Religious Community Services, Inc. (RCS)
Clearwater
Domestic Violence Safe Haven

The Princess Martha
St. Petersburg
Active Adult Living

The Salvation Army, Clearwater Citadel Corps
Clearwater
Transitional Housing for Men, Women and Families, Utility Assistance and Food Pantry

The Salvation Army, St. Petersburg Area Command
St. Petersburg
Emergency Residential Services for Men, Women and Families and “One-Stop” Service Center

The Shepherd Center of Tarpon Springs
Tarpon Springs
Thrift Store and a Variety of Emergency Services Including a Food Pantry and Vision Clinic

Thrift Store - RCS
Religious Community Services, Inc. (RCS)
Clearwater
Community Thrift Store

Turning Point
WestCare Inc.
St. Petersburg
Alcohol and Drug Detox Services

Unity Park Encampment
St. Petersburg
Daytime Encampment

Variety of Civic Leaders
Pinellas County

Vincent House (Clubhouse)
Pinellas Park
Mental Illness Recovery Services

Williams Park Daytime Encampment
St. Petersburg
Daytime Encampment

YWCA/USF Family Village and Child Development Center
YWCA of Tampa Bay
St. Petersburg
Short-term and Transitional Housing for Families and Child Care

Initial Observations and Critical Success Issues

Pinellas County is Service Rich but There is Very Little Formal Strategic and Systematic Integration of Homeless Services:

- Pinellas County has more service providers than most communities, and these services are provided by very dedicated and thoughtful staff members and volunteers, but for the most part these services are not coordinated. There is a wide variety of homeless service providers scattered throughout the County; however, these service providers are not formally and strategically integrated, especially at the tactical level. This results in mis-prioritized funding and lacks of strategic engagement.
- There are a significant number of “informal” and “one-off” relationships that help homeless individuals, but the level of help is inconsistent, unsystematic and is often delivered inefficiently. Real solutions will only be found at a County-wide “systems” level.
- Homeless services in Pinellas County are not organized into a “system” but are instead a disjointed network of “siloed” services that lack an unified action plan.
- Currently, funding and service delivery is “agency-centric” and not “outcome-centric” driven by County-wide strategies.
- The overall community needs to develop a “common end vision” with an internal bias for action.

The Homeless System in Pinellas County Lacks “Connective Tissue”:

- There are very few forms of formal agency-to-agency connectivity and, with the exception of TBIN, there is no functional accountability between individual service providers and an overall “system” of care.
- TBIN is serving a very positive role that provides at least one level of formal connectivity.
- Service providers need formal, direct and strategic connectivity to an overall service system of care and formal inter-agency connectivity to functionally related agencies.
- It is critical that all agencies “buy into” a common culture of transformation.

- All agencies who receive United Way and public funding (eg federal, state, county, municipal and special district) need to be accountable to one integrated unified system which has a unity of command leadership structure similar to that of emergency management leadership command systems.
- A common base level of operations must be developed (eg common nomenclature, policies, protocols, procedures, measurements, etc.).
- Inter-agency relationships need to be strategically created then formalized.
- In order to be successful, a central intake system must be created.
- Need to create a Master Case Management system that develops and customizes a service action plan for each homeless individual receiving services. Master Case Managers will need to hold both homeless individuals and service agencies accountable.
- Need to create transportation loops between major homeless service providers.

Lack of “Unity of Command” and Clear Leadership within the System:

- After meeting with staff members and volunteers from over 70 service providers, no two agencies have articulated a common view of the homeless service structure and its leadership within Pinellas County.
- A system will never be fully functional if everyone within the structure has a different view of the system and its leadership. There are many ships trying to do good things in Pinellas County, but there is no one harbor master to provide a point of central command leadership and accountability.
- The most accurate diagram of the structure within Pinellas County was presented by the Staff Director of Pinellas County Leadership Network [See Attached Diagram]. When reviewing this diagram, there are arguably 11+ entities that have a part of the homeless leadership pie.
- Basic good management and governance practices call for the streamlining of this system into one coherent and integrated chain of command. There needs to be a realignment of thinking.

- The lack of clear and unified leadership within the homeless service community leads to:
 - a poor decision making process
 - delays in decision making
 - critical solutions die a death by committees
 - bold initiatives become “water-downed”
 - critical decisions often do not get made because they are not politically correct

Every Service Provider Needs to Adopt a Culture of Transformation:

- With a few notable exceptions, most of the service providers operate with outdated culture.
- The leadership within the civic, local government, funder, advocate, service provider and homeless communities all need to embrace transformational best practices that have worked throughout the USA.

Look, Feel and Smell:

- Environmental quality varies widely across service providers. There are some outstanding service providers in the community that are providing top notch services in high quality environments; however, over half of the places visited fall significantly below the national best practice standards of “*look, feel and smell.*”
- All service providers need to have a high quality of look, feel and smell:
 - All areas need to be organized neatly and uncluttered (look)
 - All areas need to be warm and nurturing (feel)
 - All areas need to smell like a nice home - not smell dirty and soiled nor smell like cleaning solutions (smell).
- Safety, hygiene and communicable diseases are all negatively impacted by dirty, soiled and cluttered environments.
- Having high standards in this area dignifies the folks being helped while fostering higher standards for everyone involved. Individuals respond to their surroundings. Neat, clean and warm feeling environments will lead to more positive responses than dirty, soiled and cluttered environments.

- High quality environments increase resources in four ways:
 - Increases volunteers
 - Increases funding
 - Increases staff member and volunteer productivity
 - Extends the useful life of the physical plant and infrastructure
- Tight funding may explain some of the poor conditions, but most of this can be explained by a culture of low standards.
- Organizing, thorough cleaning, using bleach and painting the facilities would go a long way to improve conditions.
- Every agency, regardless of where their funding comes from, should strive to meet national best practice standards.
- It is recommended that a community wide effort be done as soon as possible to clean up, unclutter and then paint each service provider.
- None of these comments should take away from the good hearted efforts of so many organizations, staff members and volunteers. In many cases service providers work tirelessly but feel like there is no help for their organization.

Peer Support and Coaching:

- Service providers need to move from being competitors to system partners (eg “we are all members of the same team”).
- Homelessness is too big of a challenge for one agency to address. Like great sport teams, individual organizations need to adopt a team winning attitude that the team is first while individual agencies are second. Agencies have specific roles to play, and collectively agencies can help more individuals and families if they work as an integrated-system rather than continue to compete against each other.
- There are some outstanding service providers and leaders in Pinellas County who can provide peer support and coaching to other agencies.

Create Master Case Managers:

- Pinellas County lacks a true master case management system. Even though master case management and agency level case management are often wrongly presented as the same functionality, there is a major difference between master case management and agency level case management.
- Each homeless individual and family needs their own Master Case Manager (MCM) who creates a customized action plan to recovery. Master Case Managers then need to proactively monitor and manage each recovery action plan.
- These Master Case Managers need to have the full authority to place and move individuals and families throughout the integrated-system, and to adjust recovery action plans as needed.
- Because of the significant importance of Master Case Managers, MCMs case loads need to be low (about 20-25 for families and 25-35 for individuals).
- Master Case Managers need to be able to follow all individuals throughout the transformation process and between all agencies.
- Duties of Master Case Managers should include:
 - Initial intakes into the TBIN system
 - Initial and ongoing assessments
 - Developer of individual recovery action plans
 - Proactive “navigator” of recovery action plans throughout the integrated-system

The Lack of Housing and Services for Families with Children is at Crisis Level:

- There is a critical lack of units and services for families with children. This is at crisis level.
- Every family service provider visited are turning away 10-20 families per day. Because there is no central case management tracking system and there is no master wait list, it is impossible at this time to accurately ascertain how many families are not getting help.
- Dealing with families with children is so important since the children are innocent victims, and if not helped now, will create more expensive problems later. The downward cycle needs to be stopped.

- Many, if not most, of the families who need services have a single parent whom has a job or recently lost a job, but due to domestic violence and/or finances have lost their housing.
- The homeless sub-group of families with children has been the sub-group most hurt by the recession.
- Entry and service requirements need to be standardized, streamlined and coordinated between agencies. Entry criterion has inconsistently been enforced while some of the entry protocols are still antiquated.
- It is strongly recommended that we create a detailed master list of families who are being denied services so as determine the unduplicated number of families in need and in order to develop a targeted plan of attack to help these families. NOTE: A survey was conducted during Phase IV to estimate the number of families needing emergency housing and services on any given night, see results below.

Lack of Services for Chronic Homeless Individuals:

- Chronic homelessness as a percentage of the overall homeless population is running around 29% in Pinellas County which is significantly above the national average which is around 21%. Chronic homelessness is defined as someone who has been living on the street for the last 365 days or has been in 4 different shelters in the last 365 days.
- Existing data is inconclusive as to why this percentage is so high in Pinellas County, but an educated guess based on the research to date is this number is high because there has been very little customized services for the chronic homelessness.
- Pinellas Safe Harbor, which opened in January 2011, is successfully addressing this group.

Pinellas County Lacks Affordable Housing Especially for the Working Poor:

- Over the last 20 years or so, about 12,000 units of affordable housing have been lost within the County. Some of this has occurred because of urban conversion to higher-end housing and retail establishments; while some has been caused because of new hurricane and flood plain building codes.
- This has hurt families with children the most.

Street Feeding and Street Services Are Not Aligned with Other Services:

- Street feeding and other street service efforts (eg clothing and blanket distribution), although well intentioned and good hearted, are very enabling and do not engage homeless individuals. Providing services and feeding in the parks, at street corners and under bridges only acts to exacerbate homelessness and actually increases the number of street homelessness.
- Groups and individuals feeding homeless individuals need to move from enabling behaviors to engaging efforts by holistically aligning feeding efforts with other engaging services at formal programs sites. This is a critical issue for the faith based community to address.

Medical Care Needs:

- The Mobile Medical Unit system was set up in 1986 and is no longer adequate to serve the needs of the homeless. Since 1986, the number of homeless seeking medical care has grown exponentially, yet the Mobile Medical Unit has been functioning basically as it did in 1986.
- The Mobile Medical Unit is a very ineffective delivery system for the current needs. For example, in January 2011, the Mobile Medical Unit was “open and operating” only 56.9% of a work week (based on a 40 hour work week). Furthermore, almost ½ the service sites are “closed” sites not open to homeless residents from other agencies. Therefore, the Mobile Medical Unit is only available to an average homeless person 13 to 15 hours a week. This in turn means many homeless individuals inappropriately go to Emergency Rooms for minor and primary care needs.
- More patients can be seen if the Mobile Medical Unit was open 8 hours a day and patients were brought to the Medical Unit.
- There is a significant and urgent need for dental, vision and podiatry services throughout Pinellas County.

Pinellas Hope:

- Pinellas Hope is a critical service provider within the overall County-wide system.
- Pinellas Hope provides critical services to a significant number of individuals (in terms of number of individuals, Pinellas Hope is the 2nd highest residential homeless service provider in the County).
- The physical plant at Pinellas Hope needs to be upgraded to meet national best practice standards (eg more permanent structures, better drainage, air conditioning, etc.).
- The feasibility of increasing the capacity of Pinellas Hope should be studied.

Pinellas Safe Harbor:

- The opening of Pinellas Safe Harbor (PSH) on January 6, 2011 was a critical first step toward helping the chronic homelessness. PSH has already helped thousands of homeless individuals while providing major system savings through jail and emergency room diversions.
- This has aligned many of the “service magnets” (eg food, bathrooms, showers, shelter and safety) at one site for chronic homeless individuals.
- Pinellas Safe Harbor is holistically helping individuals while providing major financial savings to the overall community.
- Because of the overlap between populations, the feasibility of moving Turning Point to Pinellas Safe Harbor should be studied. If not feasible to move, a Turning Point type of operation needs to be created at or very near PSH.
- Medical, dental, vision and podiatry services are critically needed at PSH.
- Faith-based and civic partners like Metropolitan Ministries have started to provide meals to PSH residents.
- It is important to understand that the chronic homeless segment is about 1/4 of the overall homeless count within the County. Furthermore, it is important to remember that Pinellas Safe Harbor is not appropriate for families with children.

Closure of CHIP (Clearwater Homeless Intervention Project):

- CHIP was the second largest residential operation in Clearwater.
- The non-strategic closure of CHIP has presented major challenges to the overall service delivery network..

TBIN (Tampa Bay Information Network):

- TBIN is one of the best HMIS (Homeless Management Information System) systems in the USA and has proven to be a helpful “score-keeper” and compliance tool.
- TBIN is providing critical connectivity between service providers and the overall system, and could become the cornerstone building block to build a truly integrated system.
- The implementation of the new scanner card system needs to be expedited. Biometric and real-time occupancy capabilities then need to be added as soon as possible to TBIN.
- It is critical that TBIN moves from a passive recording/score-keeping system to a proactive case management tracking system tool that is used by all service providers as the primary master case management technology tool.
- To deal with future needs, TBIN will have to become more robust (eg more sophisticated with increased capacity).
- The issue of service providers paying for licensing and the underlying business model for licensing needs to be reviewed as soon as possible.

Ordinances:

- Ordinances vary widely throughout the County. These ordinances need to become standardized and uniform throughout the County.

Branding:

- As part of the governance restructuring process (eg streamlining, unity of command, leadership, etc.), the overall system needs to be “re-branded.”
- Re-branding the overall system will act to provide connective tissue to the overall system by internally integrating service partners under one umbrella.
- Also, re-branding will help increase resources (eg value-in-kind donations, funding and volunteers) for many service providers and to the overall system.
- By establishing, measuring and monitoring quality standards across the system, the newly branded system will act like a *UL seal-of-approval* for service providers who meet the standards of the new system.

Palm Trees and Golf Courses:

- Where there are palm trees and golf courses, there will always be homeless individuals because of the nice climate.
- Homelessness does not increase with improved and expanded services. Homelessness actually decreases when holistic and comprehensive services are put in place. Homeless individuals come for the weather not for the services.

Other Issues:

- There is a need for animal care services for homeless individuals who have pets. Not having animal care services acts as a barrier of entry to needed services.
- The overall system needs to embrace a bias-for-action, rather than forming committees to study issues.
- Some family shelters do not allow teen boys and fathers (due to security concerns of mixing genders) to stay with their families which is very bad for the families and the boys/fathers. Every effort possible must be made to keep the family intact.
- There is a lack of a centralized community kitchen. For a multitude of reasons, a “centralized community kitchen” should be created.

Critical Success Issue Areas

1- Need to Create Connective Tissue:

- Improve and streamline “governance” into one coordinating organization
- Develop common culture, nomenclature, systems, policies, procedures, etc.
- Adopt a culture of Transformation system-wide
- Formalize and re-brand a new system
- Increase the sophistication and capacity of TBIN in order for it to be proactive
- Create a centralized intake process
- Create a master case management system
- Create transportation loops between synergistic agencies

2- Need to Increase Housing and Supportive Services for Families with Children:

- There is a critical lack of services for families with children (at a crisis level now)
- Expand housing and supportive services for families with children
- Need to ascertain projected future needs of families with children

3- Need to Enhance the Operations of Pinellas Safe Harbor and Pinellas Hope:

- Provide master case management, mental health and medical services at PSH
- Set-up a sobering and medical detox unit adjacent to Pinellas Safe Harbor
- Improve physical plant and enhance case management at Pinellas Hope
- Increase capacity of both operations
- Move street feeders and street services to Pinellas Safe Harbor and Pinellas Hope

4- Need to Improve the Performance of Individual Agencies (before other expansion occurs):

- Adopt a culture of true Transformation
- *Look, Feel and Smell* need to be at best practice levels
- Improve internal efficiencies
- Better integrate each agency within the overall system
- Develop/improve “warm hand-offs” between upstream/downstream agencies
- Use peer support and coaching
- After improvements are put in place, determine the “new” level of need
- Increase funding for underutilized successful agencies
- Align street feeding and service groups at major service nodes (like Pinellas Safe Harbor)

Needs Assessment and Gap Analysis by Issue Area

Critical Success Issue Area 1- Need to Create Connective Tissue:

- The major gap in this issue area is not having a unified system managed by a single organization (eg one mission/vision, one agency, one Board, one Chair and one CEO). Once there is one organization running the overall system, the system should be re-branded. The leadership can then focus on the gaps in culture and systems throughout the service providers (eg mission of transformation, standards, nomenclature, systems, outcome measurements, policies, procedures, integrated referral system, strategic and integrated budgeting, etc.).
- Upstream funders need to help lead the charge in streamlining services into an integrated-system. It should be noted that agency-centric systems seldom realize real change from within. It is an interesting fact that the two largest and most recent improvements (eg Pinellas Hope and Pinellas Safe Harbor) did not come from within HLN-Coalition. In fact major elements within the HLN-Coalition fought against the creation of Pinellas Hope and Pinellas Safe Harbor.
- TBIN is a very good system, but TBIN needs the resources to enhance its sophistication in order to be a useful proactive tool for master case management. TBIN also needs the proper resources for training, data quality assurance and licenses.
- Pinellas County lacks a true master case management system. Even though master case management and agency level case management are often wrongly presented as the same functionality, there is a major difference between master case management and agency level case management. Somewhere between 35-45 new master case managers are needed County-wide. All case managers need to be fully integrated into one management structure that reports to the overall coordinating agency CEO (not to individual service agencies).
- Pinellas County lacks a centralized intake system. This can be solved by aligning the intake system with the master case management structure.
- Transportation between critical service providers is very poor or non-existent. Two transportation loops are needed to connect targeted service providers. The first transportation loop should be for chronic men and women. The second transposition loop should be for non-chronic families and individuals. These should run at least Monday-Friday 7:30am to 6:00pm and Saturday mornings. The key is frequency not capacity.

Critical Success Issue Area 2- Need to Increase Housing and Supportive Services for Families with Children:

- There is a critical lack of services for families with children across the continuum of care within Pinellas County. THIS IS AT A CRISIS LEVEL, especially on the emergency side of the continuum. Based on a study of families with children being denied entry into shelters, if we project a 10% system-wide improvement in graduation rates with a 80% entry rate, then 110 emergency family units are needed as soon as possible County-wide. The good news is, based on the family sizes in the survey, 79% of these family units can be one bedroom units with 2 twin beds (or cribs). Based on the survey, 24% of these units will need to allow for a male parent.
- Additionally, beyond the issue of pure capacity, there are two major policy issues that need to be worked on:
 - 1- How do we help children who have parents with criminal backgrounds?
 - 2- How do we help families with teen boys and dads?
- Beyond the need for emergency placement units, there is a need for longer term housing with supportive services for families with children. A “housing first” voucher program with true supportive services would be an ideal solution. Because of the poor data integrity relating to families not being served, it is very hard to ascertain a true level of need at this point. As the TBIN system becomes more robust and proactive, this information may become known.

Critical Success Issue Area 3- Need to Enhance the Operations of Pinellas Safe Harbor and Pinellas Hope:

Pinellas Safe Harbor:

- True master case management needs to be put into place at the Pinellas Safe Harbor. Pinellas Safe Harbor has been awarded a Federal Department of Justice (DOJ) grant to do case management which should go a long way in addressing this issue. NOTE: A master case management system is being designed for PSH, but it has not been implemented yet.
- Enhance medical services to Pinellas Safe Harbor residents. NOTE: There are ongoing discussions occurring that may lead to addressing this issue.

- A true sobering and detox operation needs to be adjacent to and integrated with Pinellas Safe Harbor. This would improve the service level to Pinellas Safe Harbor residents while improving the overall operation of Pinellas Safe Harbor. Based on the reviewing data from the first 8 weeks of operation at Pinellas Safe Harbor, 40-70 sobering and detox mats/beds are needed. Placing a sobering and detox unit next to Pinellas Safe Harbor would act to increase “functional” mat use by 20-35 mats.
- Street feeders need to relocate their program activities to Pinellas Safe Harbor (or other service nodes) in order to stop the enabling behaviors on the street and to help Pinellas Safe Harbor operations.
- The capacity at Pinellas Safe Harbor needs to be increased to create an overall capacity of around 550. As transfer and graduation rates improve, the capacity of Pinellas Safe Harbor should again be analyzed to determine if further expansion is needed.
- Civic, business, faith based, government and medical hospital organizations all need to be engaged in supporting Pinellas Safe Harbor in order to assure Pinellas Safe Harbor’s long term sustainability.

Pinellas Hope:

- Pinellas Hope must be an attractive “next-step” referral partner from Pinellas Safe Harbor (eg for the system to be successful, Pinellas Hope must receive a steady flow of referrals from Pinellas Safe Harbor). To do this, Pinellas Hope needs to be a clear “step above” Pinellas Safe Harbor. However, many potential residents currently consider Pinellas Hope to be a step below Pinellas Safe Harbor. To fix this, the level of service and infrastructure at Pinellas Hope must be upgraded at least as follows:
 - Install a drainage system that draws the water away from sleeping areas
 - Place all tents on platforms
 - Build at least one more “permanent” multi-purpose building
 - Add 40 SRO housing units
 - Look at adding more tents and casitas
 - Add 2-5 master case managers

Critical Success Issue Area 4- Need to Improve the Performance of Individual Agencies (before other expansion occurs):

- Pinellas County can not build its way out of the challenges facing the community. There is a need of increased capacities in targeted areas, and there is a need for across the board aggregated agency level improvements in the areas of outcomes, graduation rates and rates of successful referrals.
- Most homeless service agencies in Pinellas County need to improve their cultures within their agencies. Cultures that reflect territorial silos, warehousing and the status quo need to move to a cultures of transformation and system integration.
- Most service agencies would benefit from an improvement in their “look, feel and smell” standards (see “Look, Feel and Smell” section above). Improved look, feel and smell would better serve agency residents and customers.
- The Mobile Medical van needs to significantly increase their ratio of open-for-service to closed-to-service hours. Ideally, this should be a 40:0 ratio each week in terms of hours of operation.
- All street feeding programs need to move to Pinellas Pinellas Safe Harbor, Pinellas Hope or another integrated multi-service provider.

Important Milestones to Date

Pinellas Safe Harbor:

Have actively served as a Subject Matter Expert (SME) with the Pinellas County Sheriff's Office staff and other organizations in developing the concept design, layout, systems flow, operating procedures, protocols and start-up of Pinellas Safe Harbor. Have facilitated site tours and training at Haven for Hope in San Antonio. Pinellas Safe Harbor is a major first step in helping chronic homeless individuals in Pinellas County.

Law Enforcement Access to TBIN:

Worked with the TBIN Oversight Group to facilitate a change in TBIN policy to allow law enforcement officers access to TBIN client information on an as needed basis. It is critical that all service providers (including law enforcement offices) have open and complete access to as much information as possible. We need to all be on the same team.

"Street Feeding":

With the help of the media and after dozens of one-on-one meetings, many street feeding organizations have started to align their services with other service providers.

