Plan for a

Health and Human Services Coordinating Council and Planning System

to serve Pinellas County

September 2005
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Executive Summary: Key Recommendations

The following are the key recommendations regarding the formation of the Health and Human Services Coordinating Council.

1. The Board of County Commissioners of Pinellas County (BCC) and the Juvenile Welfare Board of Pinellas County (JWB) enter into an interlocal agreement to establish, fund and manage a Health and Human Services Coordinating Council whose mission and scope is detailed in this report.

2. Pinellas County Government and the Juvenile Welfare Board of Pinellas County share equally in the direct costs of this Council as well as provide in-kind services via negotiation.

3. A policy board be established to provide policy guidance to the Council. The role, scope, tasks and schedule of this policy board are detailed in this report. This board would consist of four appointees by the BCC and four appointees by the JWB. The Recommended appointees are:
   a. Three members of the BCC, excluding the member who serves on the JWB
   b. The Sheriff of Pinellas County to be appointed by the BCC.
   c. The County Commissioner who serves on the JWB.
   d. Three other JWB board members, at least one of whom should be a gubernatorial appointment.

4. An administrative forum be established comprised of chief administrators of all health and human service planning and funding entities operating within the County. Membership on this forum is secured by agreement to a memorandum of understanding, a draft of which is included in this report. The administrative forum will be chaired in alternate years by the chief administrator of JWB or by a chief administrator appointed by Pinellas County Government. The purpose and scope of the administrative forum is defined in this report.

5. Minimal, but adequate, staffing resources be assigned to the Council to ensure the viability of its operations.

6. The operations of the Council be conducted in a manner to ensure that four perspectives are brought to any issue as shown in figure 1: policy, systems, services, and technical.
7. The interlocal agreement establishing the Council shall be time limited. The Council will be established for a period of five years. During the fifth year the effectiveness of the Council shall be determined by a method acceptable to the signatories to the interlocal and future support for the Council will be determined at that time.

8. The initial priorities of the Council be established in a joint meeting of the Juvenile Welfare Board and the Pinellas County Board of County Commissioners.

9. The work and focus of the Council is summarized in table 1. As stated in that table, its primary purpose is to both improve and change the health and human services system to better and more efficiently meet the needs of the community.
Figure 1: Four Perspectives of HHSCC

- Policy & Funding Perspective: The Policy Board
- Institutional Systems Perspective: The Administrators Forum
- Services Perspective: Public Management Network
- Technical Perspective: Staff
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<th>Table 1: Strategy Map Summary</th>
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<tr>
<td><strong>Mission</strong></td>
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<tr>
<td>To develop new and more seamless health and human service delivery systems that are characterized by user-friendliness, quality and productive use of resources</td>
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<tr>
<td><strong>Vision</strong></td>
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<tr>
<td>The health and human service systems of Pinellas County will work together to provide seamless, high quality services based on productive use of available resources</td>
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<tr>
<td><strong>Values</strong></td>
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<tr>
<td>User friendliness; Quality; Productivity; Collaboration; Transparency</td>
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<td><strong>Strategic Focus Areas</strong></td>
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<td><strong>Technical Data</strong></td>
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<td>Comprehensive Planning; Systems Modeling &amp; Analysis</td>
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<td><strong>System Improvement</strong></td>
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<td>Improved processes within and across systems</td>
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<td>• Productivity</td>
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<td><strong>Community Outcome(s)</strong></td>
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<tr>
<td>• Demographic, asset and need data available to community</td>
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<td>• Clarity about how systems perform</td>
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<td>• Plan interfaces</td>
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<td>• Priorities set for system improvements</td>
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<td>• Improved processes within and across systems</td>
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<td><strong>Strategies</strong></td>
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<td>• Data Collaborative interface</td>
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<td>• Data system development</td>
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<td>• Easy user access</td>
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<td>• Web site</td>
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<td>• Plan coordination and integration of selected elements</td>
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<td>• System analysis</td>
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<td>• Community convening</td>
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<td>• Priority setting</td>
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<td>• Collaborative grants</td>
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<td>• Technical assistance</td>
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<td>• Policy development and advocacy</td>
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<td>• Facilitating Collaborative efforts</td>
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<td>• Pooled or coordinated funding</td>
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<td>• Community leadership engagement</td>
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<td>• Case for change advocacy</td>
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<td>• Consensus building</td>
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Introduction

This report represents the conclusions of the Human Services Structure and Planning Task Force as to how a Health and Human Services Coordinating Council (HHSCC) could be purposed and implemented in Pinellas County as accepted by the policy boards of the Juvenile Welfare Board and Pinellas County Government. This report presents the recommendations for the structure and functions of the HHSCC as initially developed by the Human Services Structure and Planning Task Force and as reviewed with members of the Board of County Commissioners and members of the board of the Juvenile Welfare Board and subsequently approved by those boards. As such, it represents a consensus document reflecting the thinking of these three bodies regarding a Human Service Coordinating Council. These recommendations fall into six sections:

- A strategy map which summarizes the purpose of the HHSCC and the outcomes that it would produce. This map also delineates the core competencies the HHSCC would need and the strategies it would deploy to fulfill its mission.
- A business plan for the first five years of the HHSCC, which details the activities of the HHSCC in a structured, business-like manner to ensure focus and productivity. This section includes a description of various oversight mechanisms, HHSCC staffing requirements, and a proposed budget along with the work plan itself.
- A proposed budget.
- An illustrative interlocal agreement for review by appropriate staff and attorneys.
- An illustrative memorandum of understanding for use where appropriate.
- A draft start-up schedule.
- A graphical model of the human service planning system

Section 1: Strategy Map
Table 2 provides a detailed summary of the organizational elements of the proposed HHSCC.
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<th>Table 2: Strategy Map Detailed</th>
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<td><strong>Values</strong></td>
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Section 2: Business Plan for Implementing a Health and Human Services Coordinating Council

Mission:

To develop new and more seamless health and human service delivery systems that is characterized by user–friendliness, quality and productive use of resources.

Vision:

The health and human service systems of Pinellas County will work together to provide seamless, high quality services based on productive use of available resources.

Guiding Principles (Values):

**User friendliness.** The products and services provided by the Council will be accessible, practical and of short or long term value to the recipient. The Council will encourage and support a similarly high level of user–friendliness in the health and human services provided in the county.

**Quality.** The work products of the Council itself will be of high quality. In addition the Council will seek to enhance the level of quality of services, planning and administration in the health and human services field in the county.

**Productivity.** The Council will manage its own work and time so as to be highly productive. In addition, the Council will seek to enhance the level of productivity of services, planning and administration in the health and human services field in the county.

**Collaboration.** The Council itself will operate in a highly collaborative manner with consumers, providers, community stakeholders, and other funders. In addition, it will promote and facilitate collaborative efforts
throughout the county. It will support a range of collaborative efforts from informal networks to partnership agreements.

**Transparency.** The Council will operate in ways so that its work is transparent to the community.

**Authority:**

The Council has no authority over the budgets of parties to the interlocal agreement or signatories of the memorandum of understanding.

The parties and signatories do agree to consider the analyses, priorities and recommendations of the Council in their own planning and funding priorities.

The parties to the interlocal agreement (the BCC and JWB) agree that any request for match funding for external resources made to either of them; submission of federal or state applications that require the endorsement (or serving as applicant) of either the BCC or JWB; and any planning projects which could require the support of either the BCC or JWB be submitted through the Council to ensure consistency of both approach and priority as established by the BCC, JWB and the Council. Both the BCC and JWB retain their rights to independent action regardless of Council recommendation or action. To ensure timely response, the Executive Director will have the authority to issue a letter of consistency with existing plan and the Executive Committee of the Administrative Forum will have the authority to issue letters of support or consistency with intended community direction.

The Council is authorized to convene interested parties on issues of community concern, conduct such analyses as directed by its board, develop technical data from participating parties, facilitate collaborative work and engage in other activities as directed by the board which would further its mission and vision. In particular the Council is authorized to engage in analyses that would foster modifications, changes and system redesigns that would be consistent with its mission, vision and values. As part of this analysis process the Council is both encouraged and expected to work in a collaborative manner with other community
stakeholders to derive consensual solutions. This encouragement and expectation does not however relieve the Council of its responsibility to the BCC and JWB to issue analyses and recommendations that would result in an improved service delivery approach consistent with the priorities and directions of the BCC and JWB.

The Council is authorized to facilitate independently but preferably in concert with the BCC, JWB and other community actors such service delivery networks and requisite infrastructure as are determined to meet the mission and vision of the Council.

The Council may engage in contracted work as approved by the Board or Executive Committee of the Administrative Forum in cases where time is critical.

Understandings

Funders may have regulatory or donor restrictions upon their funds. It is the intent or purpose of the Council to work within these parameters and to respect the priorities established via those parameters or where these parameters need to be changed for the benefit of Pinellas County to work to do so through proper channels. Ultimately, the Council seeks to find ways that these resources can be optimized for the benefit and distinctive concerns and needs of Pinellas County.
Goals

1. Establish the Council
   a. Objectives
      i. Develop concurrence on business plan
      ii. Develop and obtain interlocal agreements
      iii. Develop budgets and secure funding
      iv. Sign memorandums of understanding with all partners
      v. Establish administrative structure

2. Develop organizational readiness and capacity
   a. Objectives
      i. Develop technical capacity and expertise
      ii. Develop working relationships
      iii. Develop understanding of structural, policy and intervention trends and patterns

3. Conduct a comprehensive health and human services plans review process for targets of opportunity
   a. Objectives
      i. Develop planning data system
      ii. Conduct systems analyses
      iii. Review and seek increased harmony of existing plans
      iv. Identify gaps and overlaps in plans
      v. Identify points of increased coordination and opportunities for more formal articulation
      vi. Add additional elements as needed

4. Improve the service delivery system
   a. Objectives
      i. Identify priority areas of improvement
      ii. Develop and implement improvement strategies
      iii. Develop and implement system changes as needed
Annual Performance Targets

Pre-establishment: Goal: Develop charter, interlocal agreement and funding mechanisms.

Objectives and Work Activities:

- Develop agreement on business plan
- Develop and obtain signatures on interlocal agreement
- Develop memorandum of understanding and obtain signatures
- Budget funding for year one
- Develop agreement on administrative mechanisms

Year One: Goal: Organizational readiness: Preparing the organizational structure and analysis needed to pursue year two – five goals.

Objectives and Work Activities

- Formation of Policy Board
- Formation and initiation of Administrative Council
- Strategic plan review and adoption by Policy Board
- Hiring of staff, securing of office operations
- Identification/Securing of data bases
- Review and critical analysis/synthesis of existing plans and studies
- Development of web sites
- Development of systems to eliminate duplication of requests or demands upon providers. Example, the Council could become a single repository for various non-profit forms required by funders or other document libraries.
- Development of communications plan
- Develop multi-modal continuous process for system and need assessments
Year Two: Goal: Comprehensive Health and Human Services Plan review for targeted opportunities

Objectives and Work Activities

- Development of strategies based on comprehensive health and human services plan for targets of opportunity based on current plans
- Funding bodies (Governments, Commissions, Councils, Foundations, etc) orientation and briefings
- Systems modeling and analysis
- Formation of advisory councils
- Initiate multi-modal continuous process for system and need assessments
- Identification of cross system opportunities
- Selection and prioritization of system improvement projects 1...N

Year Three: Goal: System improvement projects a, b, ....N (To be determined)

Objectives and Work Activities

- Manage multi-modal continuous process for system and need assessments

Year Four: Goal: System improvements projects x, y, ...N (To be determined)

Objectives and Work Activities

- Manage multi-modal continuous process for system and need assessments

Year Five: Goal: System change project 1

Objectives and Work Activities

- Manage multi-modal continuous process for system and need assessments
- Evaluation of HHSCC
Structure and Information Flow

This section provides a minimum description of the structure of the HHSCC. Appendix A provides much more detailed illustrations of how the HHSCC could operate. However at this point in time adoption and agreement to detailed procedures such as those illustrated in appendix A is premature. As the HHSCC evolves, it will develop processes and procedures that fit the work it is doing. What are illustrated in appendix A are best practices in collaborative planning and facilitative leadership which are likely to increase the HHSCC’s likelihood of success.

What is presented in this section is a brief overview of structure and information flow in order to clarify the roles that respective entities will play in the HHSCC work. These of course only represent starting points which will evolve over time. This overview is presented first as a series of three figures. Some of this material is replicated in appendix A. The second part of this overview is a delineation of the key principles of collaborative planning and facilitative leadership.

Figure 1 illustrates the major internal relationships within the HHSCC itself. For the HHSCC to be effective four major perspectives are required, each of which is a blend or combination of other perspectives. As the figure shows, the four perspectives are:

Policy and funding. This is the perspective of elected or appointed officials whose role it is to set policy and determine local discretionary funding in the context of overall community priorities, needs and direction. This is by definition the broadest view and the persons assuming this role have been chosen to represent the community in its entirety. The structural element of the HHSCC that is charged with this perspective is the Policy Board. Membership on the board is restricted to those persons authorized to direct policy on significant local discretionary resources.

Systems. This is the perspective of administrators who are responsible for the administration of institutional systems which act as funders, public institutional systems which may both contract for or deliver services themselves and major public institutions that contain within themselves policy making, system
administration and service functions. The structural element of the HHSCC that is charged with this perspective is the Administrative Forum.

**Services.** This is the perspective of those engaged in the delivery and receipt of services as well as those who are impacted by an issue regardless of whether they are engaged in service delivery or receipt. This perspective includes that of consumers, providers, civic and faith organizations, business groups, neighborhoods and general citizens. The structural element of the HHSCC that provides this perspective is the public management network. Discussed in appendix B, public management networks represent systemic approaches to collaborative, structured efforts focused on particular outcomes.

**Technical.** Policy and funding perspectives, systems perspectives and service perspectives all require data, information. During any of these discussions, the discussions will be enriched if information on consumer satisfaction, community expectation and concern, existing or emerging gaps or system faults, demand trends, funding trends, policy trends, proven and emerging practices is available and presented in user-friendly modes that provide both strategic and systemic perspectives. The structural element of the HHSCC that is responsible for this perspective is the staff.

**Figure 1: Four Perspectives of HHSCC**
Appendix A provides a number of examples of how these particular perspectives are operationalized in terms of membership, planning processes, consideration of new ideas, and general information flow between the perspectives.

Figure 2 seeks to illustrate how these perspectives are integrated at the policy level by diagramming the dialogic processes of a Policy Board meeting. The Council is intentionally designed to be a consensus building process. The logic behind this design is that the Council in reality has no power other than that bestowed upon it by the parties to the interlocal. By intentionally fostering consensual decision-making the recommendations of the Policy Board are more likely to carry weight when presented to the respective boards represented on the Council.

How can consensus seeking be fostered? First, through an emphasis on fact based, comprehensive analysis that has been subjected to multi-perspective review. The processes through which these analyses occur are illustrated in appendix A. Second, the systematic review of any idea from multiple perspectives (technical, services, systems and policy/funding) itself will weed out ideas which are conceptually, empirically or practically weak. Again, appendix A illustrates these processes. Third, the structure of the Policy Board is intentionally designed to eliminate the majoritarian framework that is immediately implied in an odd-numbered board.

As figure 2 illustrates, the proposed meeting format for a Policy Board meeting differs from that of a traditional board meeting. The intent of a Policy Board meeting is that it is a working session with intensive and extensive dialogue on one or two topics rather than a multi-item agenda where items are given minimal attention. It is important in this meeting format that the structure and process allow for the multiple perspectives of the HHSCC to be considered. For that reason the Policy Board should have available to them three advisors – someone to represent the systems perspective from the Administrative Forum, someone to represent the services perspective from the networks and the technical perspective represented from staff. Depending on the topic at hand, the board may wish to have a guest perspective.
Figure 3 illustrates the reporting relationships of the HHSCC staff to the Policy Board and the Administrative Forum. The Executive Directors reports to and takes direction from the Policy Board. The Administrative Forum provides guidance and support in implementing Board directives.
Principles and Practices of Collaborative Planning, Consensual Problem-Solving and Facilitative Leadership.

This section provides a brief outline of the principles and practices of collaborative planning, consensual problem solving and facilitative leadership. A working paper is in development which will be available in the near future where these principles and practices are discussed in greater depth\(^1\).

The core premise of the approach is that a third form of governance and public administration is emerging which represents an alternative to centralized bureaucracy with its traditional top-down decision making approaches and privatization of public services. This third form goes by a variety of labels, with the label public management network currently gaining the most currency.

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\(^1\) Marlowe, H.A. Principles and practices of collaborative planning, consensual problem solving and facilitative leadership. Working paper.
Public management networks have a number of features, the most critical of which for this discussion is the engagement of multiple stakeholders using the practices of collaborative planning, consensual problem solving, and facilitative leadership. Appendix B provides an overview of the major types of public management networks so this concept will not be discussed in further depth here. Instead, the focus will be on selected principles and practices which underlie effective collaborative planning, consensual problem solving and facilitative leadership. These include:

- **All voices.** This principle has two dimensions. The first is the importance of all perspectives being present and being examined during the analyses, planning, problem solving and decision processes. In the HHSCC context this includes consumers, line staff, volunteers, agency managers or executives, affected citizens and neighborhoods, business and civic groups, public and private funders and policy makers. The second dimension is that policy and funding decisions must be made only by those who represent all voices. These are elected and appointed officials whose task it is to represent the entire community and have been selected for that role.

- **Hierarchy as role differentiation, not hierarchism.** For these processes to succeed it is critical that roles be clear. Any system fails when its various components fail to either understand their respective roles or perform them. As a simple biological analogy, imagine what would happen is our hearts and our livers somehow got their functions confused. While social systems are more complex and flexible, they still function best when each member understands the role they need to play and how their role fits with and contributes to the whole. Much of the continuous complaint about lack of communication is derived from role confusion, lack of role clarity and lack of understanding of how my role fits in the larger picture. A hierarchy is simply a way to organize structure and explain role. However, the term has developed negative connotations because it is confused with, and unfortunately all too often demonstrates, hierarchism. Hierarchism is the subtle, or not too subtle, implication that a person who has a broader, more authoritative and more responsible role is somehow superior to someone who has a narrower role with less authority and responsibility. The success of collaborative planning, consensual problem solving and facilitative
leadership lies in maintaining clear role distinctions while respecting the worth and contributions of everyone.

- **Systems perspectives.** Complex human systems, formal or informal, are simply relationships among various parts that result in a whole that is greater than the sum of the parts. For planning and decision making to be effective, it must be done in the context of understanding the system and how changing one part or introducing some new element will impact other parts and overall performance.

- **Asset perspectives.** This is simply the perspective that there are assets and that building upon those assets is the most effective strategy for improving the system as a whole.

- **Differences of perspective and disagreement are critical.** Poorly managed and facilitated consensus processes often result in poorer quality decisions than those that would be made by a single, informed individual. The quip, a camel is an elephant made by a committee is a succinct summary of that reality. On the other hand, social science research indicates that a wide variety of perspectives when wisely engaged leads to better decisions. There is such a thing as group wisdom. A key part of that group wisdom process is ensuring that differences of perspective are voiced and that disagreements are fully explored. If consensual decision making is simply a lowest level compromise, good decisions will not result. Instead, well facilitated consensual decision making surfaces tensions and disagreements and then substantially works with that disagreement to find higher level solutions.

- **Asking the right question is the key.** The key to getting good answers is asking the right question. This is why multiple perspectives are so critical. No one person or group understands it all. By bringing multiple parties to the process, the likelihood of formulating the right questions is enhanced.

- **Collaborative planning and consensual problem solving succeed when roles are understood and respected.** Very often in public policy collaborative planning and consensual problem-solving processes the image or belief is communicated that the conclusion of the multi-stakeholder group is the decision that will be enacted. If it is not enacted, enormous frustration, resentment and a deterioration of public

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trust can occur. Obviously everyone loses when this occurs. This problem particularly occurs when the solutions or recommendations must be considered in the larger public policy context. When everyone understands from the onset that the plans and programs of this effort must finally be considered by the people’s representatives in a broader context, then the flawed expectation described at the start of this paragraph is avoided from the onset.

These principles and practices, along with others not enumerated above, are built into the processes described in appendix A. The larger context of the overall system the HHSCC represents is an attempt to design and institute leadership systems that enhance the position that George Weigel affirms that democracy is not simply about institutions and processes but about the ongoing experiment in the capacity of a citizenry to self-govern. The approaches delineated in this HHSCC model are approaches which represent current experiments in building the capacity for self-governance.

Relationship to other Planning and Funding Entities

There are a number of other planning and funding entities operating in the county. It is not the intent or purpose of the HHSCC to supplant or duplicate their functions. It is rather the purpose of the HHSCC to ensure that overlaps and gaps are addressed from the perspective of the entire system rather than from a segment or component. In that spirit, the HHSCC operates with respect to other planning and funding entities using the following guidelines:

- Non-directive. The HHSCC does not direct the work of other entities.
- Facilitation. The HHSCC will work to facilitate the work of other entities to the degree its resources allow.
- Coordination. The HHSCC will seek to coordinate its efforts with those of others and to take particular responsibility for encouraging and facilitating coordination. Where feasible and appropriate, the HHSCC will encourage coordination through overlapping board memberships in which members of its board

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sit on more specific planning entities. For example, a member of the HHSCC Board would also serve on the Policy Group for Homeless Service Planning.

- Information. The HHSCC will seek to provide a county-wide data set that can be useful to other planning and funding entities.

Role, Scope of Authority and Operating Mechanisms of the Policy Board and Administrative Forum.

The work of the Council shall be overseen by the Policy Board and routinely managed by an Administrative Forum. The respective roles, memberships and authorities of these two bodies are defined in this section.

Policy Board.

Definition and responsibilities. The policy board is comprised of board members from the entities that fund the HHSCC and/or other selected, elected, or appointed officials whose presence and participation would provide policy direction, support and resources to guide and facilitate the work of the HHSCC. The Policy Board has the following responsibilities:

- Policy oversight of the Council;
- Developing and updating a strategic plan with priorities;
- Reviewing and approving a business plan with a corresponding budget;
- Conducting analyses of existing approaches and improved alternatives and generating recommendations for proposed improvements;
- Where appropriate and beneficial, facilitating the development of networks of stakeholders designed to address specific issues and produce specified outcomes;
- Providing guidance as to local strategies that would be most effective for the goals which it has set;
- Representing the discussion and priorities of the Council to their respective boards as appropriate;
• Appointing Committees, task forces, advisory councils or other bodies as needed;
• Engage or terminate the Executive Director.

Membership. The recommended appointees are:

a. Three members of the BCC, excluding the member who serves on the JWB
b. The Sheriff of Pinellas County to be appointed by the BCC.
c. The County Commissioner who serves on the JWB.
d. Three other JWB board members, at least one of whom should be a gubernatorial appointment.

Meeting Schedule. It is recommended that after the initial adoption of the strategic and business plan, along with establishment of the Administrative Forum that the Board meets on a quarterly basis. The agenda for the Board meeting will be developed by the Executive Director, reviewed and approved by the Administrative Council and then forwarded to the Board prior to the meeting.

Operating Procedures. The chair of the Policy Board shall alternate between a JWB representative and a BCC representative. The Vice-Chair shall be from the entity not serving as chair. The chair position shall rotate annually.

Administrative Forum.

Definition and responsibilities. The Administrative Forum is comprised of the administrative head (Administrators, Directors or their representatives) of funding entities signing the inter-local or partnership agreements to establish and participate in the HHSCC. Eligibility for Forum membership is determined by discretionary funding authority and/or risk bearing responsibility for contracted work. Entities that are designed primarily as funding conduits (pass troughs in the use of the funds are pre-determined and the entity is serving primarily as a mechanism for fund distribution without the authority to re-direct funding) are not defined as funding entities. Neither are associations that function essentially as trade associations or collaboratives whose purpose is to secure funding which may in turn be distributed to a pre-determined membership. An early task of the Administrative Forum is to further define the field of health and human services so that appropriate membership is clear.
The purpose of the Forum is to provide administrative oversight, input, and support and facilitate the work of HHSCC staff and to ensure coordination of HHSCC efforts with those of the entity they represent. Specific responsibilities include:

- Administrative oversight of Council;
- Oversight of, and provision of guidance to, the Executive Director of the Council by the Executive Committee of the Forum to support the Executive Director’s efforts to implement board policy;
- Review and approval of proposed agenda for Board meetings;
- Advice and counsel to the Executive Director;
- Review of proposed Council activities as to scope, direction and approach to increase the likelihood of success;
- Development of strategies and approaches which would implement the direction of the Council as long as such direction is consistent with the policies and plans of the body they represent
- Contribute in-kind or targeted funds for specific projects undertaken by the Council.

Membership. The membership of the Administrative Forum should be determined by the Forum itself based on its work and who needs to be present to address the topics of concern and focus. Entities that have committed to participation so far are the Juvenile Welfare Board, the County and the United Way. Table 1 provides an illustrative list of potential members but should not be read either as exhaustive or as commitments on the part of those entities.

Table 1: Illustrative list of potential members of the Administrative Forum

- Juvenile Welfare Board
- County Commission
- United Way
- Department of Children and Families, Regional Administrator
- Department of Juvenile Justice
- Pinellas County Health Department
- Sheriff’s Office
- Representative of Police Chiefs
- Unified Family Court
• Area Agency on Aging
• Foundation Representative
• Public defender’s office
• State attorney’s office
• Representatives of the three cities making the most significant financial investments in human service provision as traditionally defined, excluding recreation programs
• Health Coordinating Council
• Worknet
• Community Based Care Lead Agency
• Early Learning Coalition
• Agency for Persons with Disabilities
• Agency for Health Care Administration
• Metropolitan Planning Organization
• Representative of Housing Authorities
• Representative from each Networks
• Pinellas County Coalition for the Homeless
• Additional bodies may be added as needed

**Meeting Schedule.** The Forum will meet quarterly in the month prior to the Board meeting. The executive committee shall act on behalf of the Forum between meetings.

**Operating Procedures.**

**Structure.** The Forum shall operate with a chair, vice-chair and executive committee of not less than five and not more than six members. The chair and vice chair positions shall alternative annually between the JWB appointment and the BCC appointment. Other executive committee members shall be selected by the group.

**Membership.** Membership is open to any planning or funding entity whose board authorizes and signs the memorandum of understanding. Membership is limited to the agency head or in the case of the County a County Administrator or Assistant County Administrator. Designees may be assigned with the proviso that they have the same level or degree of decision making as the agency or organization head.

**Meeting attendance.** It is the intent that the Forum be comprised of agency heads or their delegates as defined above. Other substitutes may
be sent on an occasional basis and have the privilege of the floor but do not have a vote. Attendance standards for Forum participation shall be an element of the partnership agreement.

**Forum agenda.** The chair is responsible for working with the Executive Director of the Council to develop an agenda for the Forum meeting.

**Quorum.** A quorum shall exist when 50% of the voting members are present.

**Executive Committee.** The executive committee shall consist of the BCC representative, the JWB representative and three to four annual rotating members selected by the members.

**Powers of the Executive Committee.** The Executive Committee is authorized to direct the daily and routine activities of the Executive Director within and consistent with the policy directives established by the Board. This can include commitments to support various collaborative or community activities as long as they are consistent with the intent of the strategic and business plans and board intent.

**Definitions of other entities or functions**

**Advisory bodies.** The Council can establish advisory committees, task forces or other bodies as appropriate to the plans and projects it undertakes. These will be established on an ad-hoc basis with clear charges and time frames in order to ensure productive use of volunteer time and to heighten the probability of engagement by various stakeholders. It is the intent of the Council to use the processes of collaborative planning which are based on input from multiple stakeholders. To the extent feasible and appropriate, the Council will use existing networks for advisory purposes or ensure representation of appropriate networks on any groups it chooses to establish.

**Funding conduit.** A funding conduit is an entity that transfers funds without any authority to re-direct or modify funding plans.

**Significant local discretionary funding.** Local discretionary funding is defined as funding under the full or near-full control of a local governing body, primarily referring to the general fund, which can be directed to any legitimate public use within the entity’s charter. Funding received from other governmental body is not considered local funding, nor is funding over which there is a limited range of discretion considered discretionary.
System modeling and analysis. A mapping or modeling of the various health and human service funding and delivery systems conducted for the purpose of identifying systemic gaps, cross system issues and key improvement points.

System improvement projects. Work projects conducted independently or collaboratively by the HHSCC for the purpose of improving the current system process.

System change projects. These projects, conducted independently or collaboratively, focus on structural and system change and seek to replace current processes with new ones.

Other Planning Boards, Coalitions or Councils: Existing Coordinating Councils and coalitions, such as the Pinellas County Coalition for the Homeless, Suncoast Health Council, etc.

Interlocal agreement. A formal agreement adopted by policy boards of governmental bodies.

Partnership agreements. Partnership agreements are memorandums of understanding between various entities which have been officially approved by the board of the entity.

Multi-modal, continuous system and need assessment. A non-traditional alternative to need assessment which uses citizen surveys, data tracking, key informants, analyses of I/R needs and tracking of public and policy changes to guide resource allocation decisions. Assessment activities are ongoing with discrete activities conducted on a regular schedule.

Networks. Networks are intentionally developed collaborations and partnerships which are purposed to address a single outcome and which are comprised of the stakeholders needed to achieve that outcome. They can be structured and governed in a variety of ways and can serve as a mechanism through which funding can be blended if appropriate. Networks are based on a system’s model and seek to ensure a systematic and comprehensive approach to the outcome. Other terms in use include public management networks and outcome networks.
Section 3: Funding and staff resources

The following tables summarize the staffing and fiscal resources of the HHSCC. This model assumes that there will be maximum use of existing resources and that part of the interlocal and partnership agreements will be an agreement to make resources available to the HHSCC. It is not the expectation that HHSCC full time permanent staff will be able to conduct all the work of the HHSCC. Instead it is the vision that all collaborators will assign resources to projects as appropriate.

Table 3: Staffing Resources

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Function</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director</td>
<td>Project oversight and leadership; plan development and implementation; interface with Policy Board and Administrative Council; stakeholder engagement; communication</td>
<td></td>
</tr>
<tr>
<td>Planner</td>
<td>Technical planning; data management, plans review</td>
<td></td>
</tr>
<tr>
<td>Administrative Assistant</td>
<td>Provide administrative support - meeting management, documents management, etc</td>
<td></td>
</tr>
<tr>
<td>Temporarily Assigned staff</td>
<td>Staff who are assigned to complete a specific project.</td>
<td></td>
</tr>
</tbody>
</table>
Funding Plan (Budget and Revenue Model)

Table 3: Budget – Salaries & Benefits (first year partial)

<table>
<thead>
<tr>
<th>Pro forma budget</th>
<th>Staff 1</th>
<th>Staff 2</th>
<th>Staff 3</th>
<th>Expense</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Executive Director</td>
<td></td>
<td>Planner</td>
<td>Admin Asst</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2005/06</td>
<td>$91,125</td>
<td>$40,870</td>
<td>$23,450</td>
<td>$50,000</td>
<td>$205,445*</td>
</tr>
<tr>
<td>2006/07</td>
<td>$125,145</td>
<td>$62,830</td>
<td>$35,000</td>
<td>$35,000</td>
<td>$257,975</td>
</tr>
<tr>
<td>2007/08</td>
<td>$128,899</td>
<td>$64,715</td>
<td>$36,050</td>
<td>$36,050</td>
<td>$265,714</td>
</tr>
</tbody>
</table>

* Partial year funding for first year (10 months for Executive Director, 8 months for other staff)

Table 5: Funding Sources

This model assumes that the County and JWB provide the core funding. The United Way has committed $10,000 toward first year operations which will provide the Council with a limited amount of funding for special projects. Other partners would provide in-kind support or assign project staff on a TDY status.

<table>
<thead>
<tr>
<th>Funding Sources</th>
<th></th>
<th></th>
<th>United Way</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2005/06</td>
<td>$103,000</td>
<td>$103,000</td>
<td>$10,000</td>
<td></td>
</tr>
<tr>
<td>2006/07</td>
<td>$130,000</td>
<td>$130,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2007/08</td>
<td>$133,000</td>
<td>$133,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Section 4: Illustrative Interlocal Agreement

Whereas the Pinellas County Board of County Commissioners and the Juvenile Welfare Board of Pinellas County desire to improve the user-friendliness, quality, productivity and effectiveness of human services in the County; and,

Whereas the Pinellas County Board of County Commissioners has sponsored an examination of various strategies through which those improvements could occur, in which the Juvenile Welfare Board and other community partners have participated; and,

Whereas this study process has proposed the establishment of a Health and Human Services Coordinating Council to be guided by board members representing both the Pinellas County Board of County Commissioners and the Juvenile Welfare Board of Pinellas County; and

Whereas a working group of staff representing a broad range of community funders have examined a range of alternatives, including other national models and perspectives of various community stakeholders; and

Whereas an approach particular to Pinellas County has been developed which represents a broad consensus among community stakeholders, be it resolved:

That the Pinellas County Board of County Commissioners and the Juvenile Welfare Board enter into an interlocal agreement to establish and jointly fund a Health and Human Service Coordinating Council that will have the authorities, structure, funding support and term of existence as detailed in this final report which is adopted by inclusion in this interlocal agreement;

Specifically, the Pinellas County Board of County Commissioners and the Juvenile Welfare Board of Pinellas County agree to:

- Jointly and equally fund for a period of five years, revenue allowing, the Health and Human Service Coordination Council;

- Appoint board members to serve as the board according to the procedures laid out in the final report;
• Appoint a senior staff member to the Administrative Forum as detailed in the final report;

• Instruct their staff to act in accordance with the procedures established in the final report to ensure and promote consistency and coordination of planning and funding of health and human services within the county;

• Authorize the Executive Director of the JWB and the County Manager or his designee to initiate formation of the Administrative Forum;

• Authorize the Executive Director of the JWB and the County Manager or his designee to develop plans for office space and other support for the HHSCC that is mutually acceptable to them;

• Authorize the Executive Director of the JWB and the County Manager or his designee to initiate establishment of HHSCC staff positions and administrative assignment of staffing positions in a manner that is mutually acceptable to them;

• Authorize the Executive Director of the JWB and the County Manager or his designee to initiate selection of persons to fill the staff positions on a schedule that is mutually acceptable to them.

• Authorize their appointees to the Council to carry out the work of the Council as described in the final report and to exercise their best judgment as to achieving the mission, vision and values of the Council and business plan as described in the final report.

Adopted this day …
Section 5: Illustrative Memorandum of Understanding

This memorandum of understanding (MOU) is for use with other funding entities who will be invited to participate on the Administrative Forum and who choose to do so. Any entity choosing to participate will be asked to formally do so by entering into a memorandum of understanding enacted between the HHSCC and the entity. The following illustrative MOU is provided as the basis for a MOU to be developed and approved by the board of the HHSCC.

Memorandum of Understanding

This memorandum of understanding (MOU) is enacted by the HHSCC, acting on behalf of the Pinellas County Board of County Commissioners and the Juvenile Welfare Board, and XXX

By signing of this memorandum of understanding, the HHSCC and XXX .... agree to the following:

XXX ..... will appoint its senior executive officer to the Administrative Forum with the understanding that participation by the senior executive officer is critical to the success of the Administrative Forum and that by this appointment XXX.... agrees to abide by the operating principles of the Administrative Forum.

XXX..... Agrees to utilize the analyses, priorities and plans developed by the HHSCC in its own planning and funding decisions and to the extent possible utilize its powers and resources to promote the systems, networks and services advocated by the HHSCC. As the purpose of the HHSCC is to promote both higher quality and greater effectiveness in the health and human service field, XXX ... agrees that it will support this vision and purpose to every extent possible within the parameters within which it must operate.

XXX.... agrees to the extent feasible to support the work of the HHSCC through assignment of staff to HHSCC projects, collection and sharing of
data, and encouragement of its own stakeholders to participate in the various projects that the HHSCC may undertake.

The HHSCC specifically acknowledges that the powers and responsibilities of XXX to act in accordance with its mandates and purposes are in no way abrogated or diminished by entering into this MOU. This is a voluntary effort designed to promote greater coordination, efficiency and effectiveness and the HHSCC has no legal or regulatory power over XXX … as a result of this MOU.

Entered into this …. 
Section Seven: Human Service Planning System Summary

This section delineates how human services planning will occur via this process and how community master plans will be developed. The core principles of this system are:

- **Multi–stakeholder planning.** Effective plans require the engagement of the various stakeholders in the planning process.
- **Systems modeling.** All plans must be developed via a systems analysis so that process flows and interfaces can be readily determined.
- **Prioritization assessments via systems modeling.** Rather than use a traditional need assessment methodology, priorities are identified on the basis of a systems analysis in which gaps, flow restriction points, queuing issues, and diversion alternatives become the technical basis for priority identification. Priorities in the end are of course determined by the policy board providing funding but the professional recommendations to that board are based on data obtained from systems modeling. Appendix C describes this approach.
- **Outcome or Community Results based planning.** Plans are designed around key community results or outcomes which the general public, as expressed through their elected or appointed leadership, validate as important. The difference here is subtle but significant. The focus of a results based plan is how to best achieve the outcome, not necessarily how to improve the current system. While in most cases it will result in current system improvements, it may be the that current approach itself is flawed and needs to be replaced.
- **Real-time, continuous planning.** While there will be periods of time in which planning is formalized or highlighted, the goal is continuous planning in real time mode. This requires “live” data, through 211, 911 and other sources, as well as a organizational framework that provides a structure or system for data review and response. This framework is the outcome network.
- **Outcome focused networks.** This approach uses outcome focused networks as the core planning mechanism. These networks, consisting of key stakeholders in appropriate roles, for the on-going planning mechanism. Appendices B and D describe this network approach.
- **Community emergent rather than hierarchically driven master planning.** There is a master planning approach in which a single body creates a
master plan. The option pursued here creates a master plan via a
different process which begins with outcome based plans developed for
priority results areas. These plans are developed collaboratively with
other outcome plans to facilitate integration using process models to
identify points of overlap or interface. They are then reviewed by
representatives of ideally all funding entities. This review is not a
“request for funding” type review. Rather its purpose is:

- Identify any areas of overlap or interface that have been missed or
  overlooked;
- Identify how procedural or process changes by funders could
  facilitate or support the plan.
- Identify existing funding sources which would support the plan
- Any other suggestions for the improvement of specific plans or for
  plan integration.

This process is outlined in figure 4

- And ideally, a source for potential additional or new funding. Given the
  reality of current funding for health and human services, it is highly likely
  that even after the review by representatives of all existing funders, there
  will be resource shortfalls in the integrated plans. Ideally, there should
  be a body that could consider an integrated funding plan and would have
  the significant funding resources needed for such a plan. In this model
  that is the function of the policy board of the HHSCC. Figure 4 describes
  the function.

As illustrated in figure 4, planning begins with four proposed networks:
homeless; health, mental health and substance abuse; housing and economic
security. The links between these are obvious, but each requires its own focus
and concentrated effort. Integration occurs via overlapping membership and
HHSCC staff support. These networks each produce a plan and together these
form the integrated plan.

These integrated plans are then discussed with the Administrative Forum for the
purposes outlined above. The product of this discussion is an integrated
funding plan that will identify how existing resources will be used to support the
plan and what additional resources if any are needed.
The integrated funding plan is then sent to each funder, whose own board will independently decide if they will support their component of the plan, with the exception of JWB and the BCC. In these two cases the integrated funding plan will be forwarded to the Policy Board of the HHSCC for discussions as to (1) how existing funding resources could be used to support the plan and (2) whether additional resource investments will be recommended to the respective boards.
Figure 4: HHS planning system

- Housing Network
- Economic Security Network
- Homeless Network
- Health, Mental Health & Substance Abuse Network

Coordinated Plans

Administrative Forum

Integrated Funding Plans

- Existing Funding Sources, except BCC and JWB
- HHSCC: New Funding and/or Redirection of current JWB and BCC funding
Table 6 details the proposed implementation schedule for the HHSCC.

### Table 6: HHSCC implementation schedule

<table>
<thead>
<tr>
<th>Activity</th>
<th>Projected Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pinellas County BCC conceptual approval</td>
<td>August</td>
<td>Received in strategic planning workshop of 8/9/05</td>
</tr>
<tr>
<td>Juvenile Welfare Board conceptual approval</td>
<td>September 8(^{th}), 2005</td>
<td>Agenda item to be placed on the September agenda.</td>
</tr>
<tr>
<td>Budget set asides pending approvals</td>
<td>August</td>
<td></td>
</tr>
<tr>
<td>Development and signing of final interlocal agreements</td>
<td>October–November</td>
<td></td>
</tr>
<tr>
<td>Appointments to the Policy Board by BCC and JWB</td>
<td>December–January</td>
<td></td>
</tr>
<tr>
<td>Invitations to the Administrative Forum issued by the BCC and JWB executives (as authorized in the interlocal)</td>
<td>December</td>
<td></td>
</tr>
<tr>
<td>Agreement by the Executive Director of JWB and the County Manager designee as to office space and administrative functions</td>
<td>October–November</td>
<td></td>
</tr>
<tr>
<td>Event Description</td>
<td>Time Period</td>
<td></td>
</tr>
<tr>
<td>-------------------</td>
<td>-------------</td>
<td></td>
</tr>
<tr>
<td>Agreement by the Executive Director of JWB and the County Manager designee as to hiring and organizational placement of HHSCC staff</td>
<td>October–November</td>
<td></td>
</tr>
<tr>
<td>Hiring of staff</td>
<td>On a schedule to be developed by chief executives of the BCC and JWB.</td>
<td></td>
</tr>
<tr>
<td>Joint workshop of the BCC and JWB to establish overall priorities and direction for the HHSCC</td>
<td>January–February</td>
<td></td>
</tr>
<tr>
<td>Strategic and business planning session, HHSCC board and administrative forum</td>
<td>February–March</td>
<td></td>
</tr>
</tbody>
</table>
Appendix A: Structure of the HHSCC: How it could work in practice

The purpose of this appendix is to present an illustrative set of principles and processes which describe how the HHSCC could operate in practice. This appendix is not intended to be prescriptive and should not be read as requirements which have been agreed upon as part of the interlocal agreement. It does however reflect both best practice in collaborative planning and facilitative leadership as well as reflects the values and hopes of the Structure Task Force. The likelihood of success will be enhanced if principles and practices such as those described in this appendix are indeed adopted and put into practice.

The creation of any new entity raises a host of issues and perspectives about how it will work, what it will do, and how it will relate to existing entities. The following series of figures are designed to graphically illustrate how the HHSCC is intended to operate. Clearly, concepts such as those illustrated in these figures, are over time enriched, modified and recast. The purpose of these figures is to illustrate ways the HHSCC can be effective and operate within the framework of its vision, mission and values.

Figure 1 illustrates the major internal relationships within the HHSCC itself. For the HHSCC to be effective four major perspectives are required, each of which is a blend or combination of other perspectives. As the figure shows, the four perspectives are:

**Policy and funding.** This is the perspective of elected or appointed officials whose role it is to set policy and determine funding in the context of overall community priorities, needs and direction. This is by definition the broadest view and the persons assuming this role have been chosen to represent the community in its entirety. The structural element of the HHSCC that is charged with this perspective is the Policy Board.

**Systems.** This is the perspective of administrators who are responsible for the administration of institutional systems which act as funders, public institutional systems which may both contract for or deliver themselves services and major public institutions that contain within themselves policy making, system
administrator and service functions. The structural element of the HHSCC that is charged with this perspective is the Administrative Forum.

**Services.** This is the perspective of those engaged in the delivery and receipt of services as well as those who are impacted by an issue regardless of whether they are engaged in service delivery or receipt. This perspective includes that of consumers, providers, civic and faith organizations, business groups, neighborhoods and general citizens. The structural element of the HHSCC that provides this perspective is the public management network. Discussed in appendix A, public management networks represent systemic approaches to collaborative, structured efforts focused on particular outcomes.

**Technical.** Policy and funding perspectives, systems perspectives and service perspectives all require data, information. During any of these discussions, the discussions will be enriched if information on consumer satisfaction, community expectation and concern, existing or emerging gaps or system faults, demand trends, funding trends, policy trends, proven and emerging practices is available and presented in user-friendly modes that provide both strategic and systemic perspectives. The structural element of the HHSCC that is responsible for this perspective is the staff.

Figure 1: Four Perspectives of HHSCC
Figure 4 illustrates how an “idea” would be considered and examined in the HHSCC process. An idea can be many things. It could be a concept by a non-profit for a new service that is believed to be needed in the community. It could be a concept by one funder that it would like to interest other funders in. It could be a problem that a community group wants to raise for which it doesn’t have a solution but it believes needs to be addressed. It could be a proposal for an expansion of an existing service developed by a consortium of providers, consumers and civic groups. It could be some new technology that would enable the community to address issues more effectively. Or it simply could be a question that needs to be examined.

Whatever the idea, and assuming it will need the support of entities beyond the ones generating the idea, it will surface somewhere. Currently that can be anyplace in the community where someone will listen. And currently what happens to that idea depends upon who surfaces it to whom. Some very good ideas “die” because they couldn’t get a hearing before the “right” group. Some good ideas become realities because they did get a hearing. Some bad ideas get hearings and live.

While in theory an idea could be surfaced without any request for financial, administrative or policy support, in reality ideas will need at least one of these forms of support to become reality. A policy change may be needed to make the idea viable. Administrative support may be required so that the idea can be organized into a set of procedures and processes. And most often, financial support is needed to some degree.

What the HHSCC process does is systemize that support seeking process for any institution or funder who chooses to avail themselves of it. While the County and JWB are committing to utilize the process, it is available to anyone else who chooses to use it as part of their decision making process. How will this work?

There are two options. The first option is for the entity from which support is being sought to ask of HHSCC staff how the idea would fit within the various community plans already in existence. HHSCC staff can proffer an opinion on its consistency, potential duplication or overlap, relative priority and possibly its adherence to best practice standards. The entity from which support is being sought can then use this opinion to assist their decision making.
The second option is shown in figure 4. In this the idea can be referred by an entity from which support was initially sought, or be brought directly to by the proposer. There are two entry points. The entry points are either the appropriate network or the staff. Staff would in particular be used in those cases where the appropriate network is unclear. And a network, upon receiving an idea, may choose to refer it to staff for some initial analysis before they consider it. So as the figure shows there is an interaction between the network and staff at the start of the process.
Once the idea has entered the process, it can get before the HHSCC Policy Board via two paths. The primary path that every idea will have to go through is a
review by the appropriate network or networks, with loops for modifications and appeals. If the network endorses the idea, the next step would be review by the Administrative Forum, again with loops for modifications or appeals. Ideas that survive this process would then be brought before the Policy Board with a recommendation from the Administrative Forum as to action. The Policy Board could accept, modify, return for further review or reject that recommendation. If the Policy Board accepts, modifies, or rejects they would then notify the BCC, JWB and other interested funding entities, including the original requesting party, if there was one, of their action. The BCC, JWB and other funders then take whatever action they wish to take.

It is important to note that “ideas” can be generated not only by external entities but also by the HHSCC itself. At the first stage, networks and staff, both of these entities may put ideas on the table. The Administrative Forum itself may choose to put forth certain ideas for examination as could the Policy Board. Whatever the source however, the idea is examined from the four perspectives illustrated in figure 1. Staff of the HHSCC will normally and routinely work through and with the Administrative Forum. In exceptional circumstances, direct work with the Policy Board may be needed.

The prior two figures have illustrated a general framework for the HHSCC. One way to think of the work of the HHSCC is that it has two major dimensions. One dimension is to foster the integration and coordination of services and systems through planning processes that intentionally examine and foster greater integration and coordination. The other dimension is that of a system developer which is deliberately structured to leverage the resources of the County and JWB to foster system change and development. The planning process is illustrated in figures 6–8. The processes through which the HHSCC can support system development and change are illustrated in figures.

Planning process illustrations

Figure 6 illustrates how the planning processes and various jurisdictional plans could be integrated in the HHSCC process. This is a voluntary process and no independent entity has to use this process. The BCC and JWB are committing to this process as part of their interlocal agreement. All entities joining the Administrative Forum as part of the memorandum of understanding are committed to examining the various plans emanating from HHSCC or reviewed
by HHSCC in the development of their own plans and are committing to considering recommendations from the Policy Board. What actions they take after this consideration is their decision.

As with the “idea consideration” process there are two options. This first is that HHSCC staff can compare a particular plan with all relevant plans and conduct an independent analyses of overlap, gaps and points of complement that the requesting entity, or anyone else, could use if they so choose. The second option is to request a full review of the draft plan through the HHSCC process. It is this process shown in figure 7.

As figure 7 illustrates, the entity submitting a plan for review can request one of two actions on the part of the HHSCC. It can simply request comment, which is simply feedback on how the plan is viewed by the relevant network, staff, or the Administrative Forum. If the entity would like endorsement by the Policy Board, then the plan would have to be endorsed by the network, the staff, and the Administrative Forum before being presented to the Policy Board for their consideration.

Figures 7 and 8 illustrate the network planning process. This is the process which would be used for the various networks being supported in part or whole by JWB and the County. This process is intended to be highly collaborative and consensual in nature, drawing on the best thinking of all stakeholders. Some of the key principles in this planning process are:

All voices. It is important that all perspectives be examined during the network planning process. This includes consumers, line staff, volunteers, agency managers or executives, affected citizens and neighborhoods, business and civic groups, public and private funders and policy makers.
Figure 6: Full Plan Review process
• **Collaborative processes.** Consistent with an all voices principle, a complementary key principle is that of collaborative planning. In collaborative planning various stakeholders work jointly together to develop a plan and then present drafts to the full group for review.

• **Proven and emerging practices review.** These planning processes emphasize an examination of proven and emerging practices as the basis for the services proposed in the plan.

• **Systems modeling and analysis.** The analytical framework for these planning processes is systems modeling and analysis which involves not only identifying various components but also the relationships of these components.

• **Feedback indicators.** A key component of systems modeling, but worthy of separate mention because it becomes the basis for performance management system as the key feedback indicators which can be used to assess impact and trends.

Figure 7 illustrates the multiple partner aspect of the network planning process. Presented at the highest level of abstraction, the figure shows the types of partners who should participate in planning at the network level.
Figure 8 illustrates the process for having a network plan reviewed and endorsed by the other entities in the HHSCC process. If a network is not seeking the endorsement of the HHSCC Policy Board, nor seeking JWB or County funds or support, then it could choose not to participate in this process. Assuming that the Administrative Forum is comprised of the majority of funders, one would assume any network would seek the support and endorsement of the Administrative Forum at a minimum. However, those are the decisions of the Network.
Network Plan

Staff Review
Consistency &
Non-duplication

Revisions for
inconsistency
or duplication

Status report

Administrative Forum Review for
feasibility, collaborative opportunities,
broad priorities and requirements of funders
& institutions to implement

Recommendation

Policy Board:
Acceptance and
Endorsement

Endorsement
Other comments on the ideas review and planning processes.

Who can bring forth an idea? The short answer, anyone. Should the HHSCC find itself overwhelmed with ideas, it may choose to establish some filtering process that those ideas are sorted and sequenced for consideration.

- What is the purpose of a Network review of an idea or plan? The purpose of a Network review of an idea or plan is to determine its comparative impact on services. Would the idea make service delivery more customer–friendly, more consumer–directed, more efficient, and/or more comprehensive? How does it compare to other ideas, that is, what is it relative worth compared to other options? What would be the impact of this idea on existing services? Will it strengthen, weaken, or have no measurable impact? In essence, the purpose of a network review is to determine the relative impact of a proposed change on the service network compared to the cost of that change.

- What is the purpose of an Administrative Forum review? The Administrative Forum will review two types of ideas or plans. The first category is comprised of those ideas which the Network have found to be worthy of support and those plans which have been commented on or endorsed by the Network. In the case of new ideas the purpose of the Administrative Forum is to determine the feasibility of, and mechanisms for, supporting a new idea that has been recommended by the Network and/or commenting on flaws that need to be addressed. Therefore it is both a supportive review and a critique. In the case of plans being reviewed the purpose is to comment on consistency with the efforts of others, comments on how the plan could be improved to have greater impact and endorsement or not if so requested. The second category is those ideas which the Network has not endorsed but which have been appealed to the Forum or a review of those plans which the network did not endorse. In the case of ideas the role of the Forum is to serve as a check on the logic and analysis of the Network and to request or propose changes that would serve to improve the idea or plan. In the case of plans that requested endorsement but failed to receive the Network’s endorsement it is to review the logic of the Network and reach its own conclusion based on its own analysis.
What is the purpose of the Policy Board review? This review has several purposes. One is to assure the board that the plan under review is consistent with other plans, is non-duplicative, is built upon best practices and represents an efficient and effective use of resources. A second is to identify the policy issues that will need to be addressed if the plan is to be successfully implemented. A third is to identify structural changes in systems which may need to occur for the plan to be optimized. A fourth is to compare the priorities of the plan with the priorities of other plans to determine recommendations about overall priorities that it will make to the respective boards it represents.

Illustration of Collaborative Planning Process: Homeless Policy Group Ten Year Plan

Textbox 1 provides a brief description of the Homeless Policy Group planning process for the purposes of illustrating how a network could collaboratively develop a plan.

Textbox 1: Homeless Policy Group planning process

Policy Group Members: BCC, Cities, School Board, JWB, Private Funders, Housing entities, law enforcement representative, business group representatives, provider representatives, consumer representatives.

Staff: BCC, Clearwater and St. Petersburg staff supports the Policy Group

PCCH Strategic Planning Committee: Provide data and concepts

Process:

1. Education about issues – presentations and tours
2. Discussions of gaps and needs
3. Review of best practices
4. Development of goals
5. Development of goal plans
6. Review and discussion of goals
7. Plan adoption
System development processes.

In addition to ensuring that the various service plans meet a desired standard of coordination, integration and best practice, the HHSCC has a second major role; that of overall system development. Its task here is to address cross system issues which impact the performance of all or many networks and to identify and propose system changes that may be needed to create a more effective service system.

Figures 8 and 9 illustrate the process through which the process of system and cross system analysis and recommendations can be developed. As shown in figure 8, the initial ideas for consideration by the Policy Board may come from several sources: the staff’s analysis of various plans and issues; recommendations from the networks or the Administrator’s Forum, the Board’s own knowledge of the community and proposals from community members.

Whatever the source of ideas, the Policy Board must prioritize and select those issues it wishes to proactively address. As figure 9 illustrates, an annual goal setting process is proposed whereby the board selects the topics it wishes to address during that year. The priorities established in this session will guide the work of both the staff and the Administrative Forum during the course of the year.
Figure 9: System Development Process

Staff Analysis

Administrative Forum proposals

Board Proposals

Community Ideas

Ideas for System Development and Change
Figure 10: Project process of HHSCC

Annual Goal Setting Retreat

Annual Work Plan

Staff

Administrative Forum

Multi-stakeholder group, project 1

Multi-stakeholder group, project 1+N

Deliverables
The working processes of the HHSCC.

This section will illustrate how the HHSCC will work in practice to carry out its functions of planning and system development. The intent of the HHSCC is to both foster consensus on the direction health and human services should take in the county and to provide a leadership system to enact that direction. The role and processes which underlie the realization of this intent are described in this section.

Figure 2 seeks to illustrate the dialogic processes of a Policy Board meeting. The Council is intentionally designed to be a consensus building process. The logic behind this design is that the Council in reality has no power other than that bestowed upon it by the parties to the interlocal. By intentionally fostering consensual decision making the recommendations of the Policy Board are more likely to carry weight when presented to the respective boards represented on the Council.

How can consensus seeking be fostered? First, through an emphasis on fact based, comprehensive analysis that has been subjected to multi-perspective review. Section, the systematic review of any idea from multiple perspectives (technical, services, systems and policy/funding) itself will weed out ideas which are conceptually, empirically or practically weak. Third, the structure of the Policy Board is intentionally designed to eliminate the majoritarian framework that is immediately implied in an odd-numbered board.

As figure 2 illustrates, the proposed meeting format for a Policy Board meeting differs from that of a traditional board meeting. The intent of a Policy Board meeting is that it is a working session with intensive and extensive dialogue on one or two topics rather than a multi-item agenda where items are given minimal attention. It is important in this meeting format that the structure and process allow for the multiple perspectives of the HHSCC are considered. For that reason the Policy Board should have available to them three advisors – someone to represent the systems perspective from the Administrative Forum, someone to represent the services perspective from the networks and the technical perspective represented from staff. Depending on the topic at hand, the board may wish to have a guest perspective.
Figure 2: Policy Board dialogic model
Appendix B: Public Management Networks

This purpose of this appendix is to briefly describe public management networks. Detailed working papers are in development which describes the concept more fully.\textsuperscript{4}

A public management network is simply a diverse group of stakeholders focused on a particular public policy issue. In the context of Pinellas County, the Homeless Policy Group is an example of a public management network.

Public management networks may take several forms. A single network itself may consist of one or more of these forms.

- The policy network. This network so focused solely on policy issues. Its purpose is to develop a policy direction that members can support.

- The planning network. These can be of several types. One type is a network focused solely on developing plans which can then be adopted or used by the various stakeholders. Another planning network is focused on developing a plan which it will then oversee and make or recommend funding for the plan.

These two types of networks are also referred to as public leadership networks in that their task is to provide direction, not management oversight.

- The intermediary organization. This is a network established for the distinctive purpose of providing a mechanism for blended or coordinated funding. Various funders contract with it to manage and coordinate their funding with that of other funders for optimum impact.

- The management network. This network is established for the express purpose of managing a service delivery network. It focuses on coordination, integration and system operations.

Appendix C: Alternatives to traditional need assessment

Traditional Need Assessment Data: Why it fails to help policy-makers in priority setting and what alternates are there?

The argument in brief. Traditional need assessments, by themselves, fail to provide the type of data policy makers want for the purposes of establishing priorities. Public policy priority setting would benefit from the addition of seven other types of information.

The three types of policy decisions

Policy decisions fall into four types: Good–Bad 1; Good–Good; Bad–Bad; and Good–Bad 2. Each is described below.

- Good–Bad type 1 decisions represent a choice such as a proven science based program managed by an excellent agency and psychologically questionable program run by a agency with significant management and fiscal problems. While personal relationships and/or community dynamics make this choice difficult in practice, intellectually the choice is simple.

- Good–Good decisions. Good–Good decisions are choices between two goods. For example, if a funding agency wishes to establish a training institute and has a choice between two excellent universities, the choice is good–good. The community wins either way, and the losing university, while disappointed, moves on to other opportunities. When either path taken will result in only benefit to the community without significant harm to another part of the community, a good–good choice is being made.

- Bad–Bad decisions. In these decisions the policy maker is faced with two negative outcomes and has to select which is worse. For example, a social service agency, after extensive technical assistance, is still mis-
managing it funds and providing poor service, but there is some level of service. One choice is to terminate the contract. However, there is no other agency that can perform these services readily and so the children and families will have to do without services for a period of time if the contract is terminated. Either of these choices is bad, but which is worse? Bad–Bad decisions are extremely difficult and we often search for some third alternative, such as leaving the existing contract in place while we bring on a new provider as rapidly as possible.

- Good–Bad type 2 decisions. These are the most difficult decisions of all. Unfortunately, these are the decisions that a new funding board must confront extensively in its initial work. Good–Bad type 2 decisions are experientially and psychologically of the type that the main character in the novel Sophie’s Choice had to make, which child to save and which to give to the Nazis. While policy makers are not required to make this horrific choice, the choices are painful. Good–Bad type 2 decisions benefit one party greatly. They leave the other party in a difficult and painful situation. As one example, a board must choose between addressing the needs of abused children vs. addressing the needs of special needs children. Who wants to make such a choice? And it is no wonder we try to provide some funds to each type. Because Good–Bad type 2 decisions are so painful, we try to avoid them wherever possible by providing some level of funding to every need. This of course creates a number of other issues.

Seeking Guidance: Why we turn to need assessments

Social service policy makers are continually faced with good–bad type 2 decisions. Resources are always outstripped by needs. One solution therefore is to try to determine where need is the greatest and resources the least with the goal of trying to create some level of equity between various needs. Hence the calls for the traditional need assessment study. A well designed and “good” traditional need assessments cover the following areas:

- Local trend data. What is improving? What is not improving or what is declining?
- Key Leader opinions. What do community leaders see as the issues; as priorities?
• Public opinion. What do residents say their needs are?
• Professional opinions. What do the professionals in the field assess as priority needs?
• System data. Waiting lists; number served vs. number eligible; recidivism rates; usage rates and other empirical data;
• Census and other demographic data.

In most cases traditional need assessment studies are able to present demographic and geographic data that helps define problems, issues, and trends within a community. In these cases they provide a context that is helpful to policy makers. They are also informative of what the participants think about the issues, at least at the point in time of the study.

In some cases traditional need assessment studies are able to satisfy this demand for a clear picture of where needs are highest and resources least. In those cases they can be of assistance to policy makers.

In few cases however, are traditional need assessment studies truly able to assist policy makers with good–bad type 2 decisions. Why is this so, and what alternatives are there. First, the diagnosis of why need assessments so often fail to provide guidance for good–bad type 2 decisions.

The problems with traditional need assessment

Traditional need assessments studies fail to assist in good–bad type 2 decisions for a variety of technical and human reasons. First, the technical reasons for this failure.

The technical problems

Need estimation is human services is complicated by several technical factors which serve to make findings of questionable value. These include:

• First, need in some cases is subjective and dependent upon individual psychology and resiliency, cultural context, and social support system of the user or consumer. What one
person expresses as a need another may not recognize as such;

- Second, people may underreport need for a variety of reasons. These may include personal pride, immigration status or fears, a sense of hopelessness about ever receiving a service, cultural norms or other factors;

- Third, traditional counting mechanisms such as waiting lists are flawed both by duplication and the fact that once a waiting list reaches a certain length people no longer bother to place their names on the list;

- Fourth, there is a human tendency to over-inflate need if you are an advocate for a certain issue;

- Fifth, some needs are “invisible” while others are highly visible. There is a tendency to over-inflate high visibility needs while under-estimating low visibility needs;

- Data is often unreliable or inconsistent, meaning that the better data system wins – assuming the data made it in correctly. Also data is becoming harder to access, even as it becomes more available:

  - Waiting list data is often not systematically collected, suffers from differing definitions, which often do not necessarily equate need with desired response time or distinguish between the wait because the service is unavailable or because the service can't offer an appointment/access at a convenient time for the applicant;

- Needs Assessments tend only to measure a condition that has manifested itself visibly and not the incipient or underlying condition. Thus, prevention and early intervention get short shrift in favor of the more visible, deferred condition;

- Needs Assessments are clearly in a deficit mindset and do not measure strengths and assets. The two assessments, assuming both are even done, are usually conducted separately. Thus, the need predominates, the traditional approach is justified and assets are not considered as a mitigating factor;
• Needs Assessments don’t do as good a job of capturing emerging needs, particularly in the early stages;

• Needs Assessments often fail to capture and/or highlight system support issues (i.e., transportation or access to information) in a manner that equates it with the identified deficit need in a fashion that validates its overall importance and contribution to the function of the social service system;

• Needs Assessments seldom capture the interrelationship of subsystems with one another;

• Finally, needs differ on the degree to which they are dynamic. Fluctuations in the economy can rapidly increase or decrease the significance of basic needs for food and housing. Needs associated with senior citizens or children may change more slowly based on demographic patterns.

All of these factors combine to make needs assessment studies all too often a popularity contest. Whoever is the most persuasive speaker; whoever has received the most media attention recently; whoever is the most politically connected; whoever has the greatest capacity to organize a “turn-out”; suddenly has the “highest” need. This “popularity contest” is one of the reasons why the priorities of one year’s need assessment may differ radically from the priorities of another year’s need assessment.

Because of these technical problems, it is easy to question the conclusions if your favorite need did not receive a high rating. Such questioning leaves policy makers in a difficult position to make decisions on what they may feel to be partial data at best.

Also because of these problems, it is sometimes easy to make a need assessment prove whatever it is you want it to prove. There is usually a diversity of opinion, that when combined with a fact or two, can lead to a preferred conclusion.

The human problem
In addition to the technical problems with need assessment studies, there are human problems. These include:

- Our innate biases. As human beings we have a variety of experiences which shape our worldview, values and sense of priority. It is natural that a person who has "lived" the experience of raising a special needs child will be more sensitive and responsive to that issue than someone who has not. It is natural that a person with a health professions background to see the health dimensions of an issue more quickly than someone with a differing professional background. Therefore when presented with the results of a need assessment, what do we tend to see? We tend to see what we know professionally and experientially.

- The avoidance of painful choices. Very few people enjoy making painful choices where one group benefits but another does not. Need assessments put policy makers in the position of saying, in effect, this need is more important right now than another need. We will meet this need, but not yours, is not a statement that anyone likes to make.

- The innate subjectivity of need. As alluded to in the technical section, need is highly subjective. What one person sees as a need another may not. As humans then we tend to inflate the significance of those needs we know, and minimize the significance of those we know less about.

- The Wisdom quotient. The choices are so many, the needs so great, the resources so few, that most policy makers do not believe they have the wisdom to make such decisions. Yet they must.

- The overwhelm factor. There is such a huge set of needs, all of which seem equally important, that it is difficult to know where to start. This condition of "over-choice" in the end is immobilizing. It evokes a response of "where do we start." "It's hopeless – we can't make a difference!"

After Need Assessments, what? Less effective solutions.
The consequence of these factors is that need assessments often fail to provide policy makers with the roadmap they would like to have to make resource allocation decisions. This failure often leads policy makers to turn to other methods which unfortunately are no more effective. These include:

- More data. Since the data was unclear, the solution is to get more data. If the data of the social science field was a “hard” as the data of physicals or chemistry, this would be an appropriate solution. Or if we had substantial and extensive budgets for data collection. Because neither is true, the more data solution rarely works unless very precisely targeted;

- Squeaky wheel. Since the data does not provide a roadmap, policy makers are often then swayed by the person who can make the most articulate argument and who makes that argument regularly and with presence;

- Annual trade–offs. One solution is to rotate additional funds annually. If need A received additional funding last year, then need B gets it this year. Every need gets a “turn” in this approach. This approach also assumes there will be the money for a turn;

- Media exposure. In this approach public visibility becomes the deciding factor. If media exposure truly expressed public opinion, this approach would have validity. However, given the fleeting nature of media exposure, a new need may have greater exposure by the time a funding agency can be ready to address the prior need of the media day.

- Related to media exposure is the highly publicized incident. These incidents create a public mood that requires a response that on the surface seems logical but may or may not be effective in the long term.

- Priority setting through public opinion surveys. Since need assessment studies that attempt to determine gaps and trends don’t always provide a clear enough picture, policy makers will turn to the option of asking what the public’s priorities are. This usually leads to a public opinion survey. Public opinion surveys are highly effective tools for: understanding how people are reacting to an issue; identifying concerns; determining ways to phrase an idea in ways that resonate; finding what people see as their needs; and other topics
that you want to test as a point in time. Are they a good tool to understand a community’s priorities about its needs or to use to set priorities? Paradoxically, no. Why?

- First, public understanding of needs other than ones they have personally experienced is necessarily limited. If you don’t know what spina bifida is or know anyone with a spina bifida child, then that need doesn’t exist for you in any practical sense. You will make a priority what you know and need.

- Second, public priorities are fluid. Since the public’s understanding of the broad range of needs in a community is necessarily limited, that understanding is highly susceptible to those needs in the public forefront. With additional information, priorities could quickly shift.

- Third, many needs are manufactured. What does this mean? Do it mean needs aren’t real? No. But it does mean that we often don’t know what we need until we learn we need it. In 1980 few of us would have responded in a public opinion survey that we needed a personal computer. In 2003, it is highly likely that a personal computer is an important part of our life and the question is how bad we need the latest and greatest version. While we can make a theoretical distinction between needs and wants, in practice what we want we experience as a need.

- Fourth, public opinion surveys are no way to set public policy. They inform public policy as do a wealth of other information sources. There are many examples where public opinion shifted based on leadership by a policy maker. Public opinion surveys provide the policy maker with people’s perspectives. It is the role of the policy maker to balance multiple perspectives, most of which only have a partial understanding of an issue.

- Fifth, it takes time to effectively address a need. System building requires time and infrastructure. Addressing any need on a significant level of scale requires a system and a host of supporting parts such as MIS, procurement, HR. Only those working in a field need to have any understanding of these issues. But it means that addressing a need, any need, on a sustained basis requires extensive background work and time.
to develop capacity, skill and effective solutions. In the meantime public opinion may have moved on to some other issue. Policy makers must take the long term view, not the view of the daily polls.

- A little bit for everyone. Since the data doesn't give clear guidance, and since all the needs are unmet, the best practical solution is to distribute resources as widely as possible so that everyone has something, however inadequate. The downside of this solution is that rarely does any provider have the resources to truly impact an issue. Rather they stand as the proverbial Dutch boy with his finger in the dike. The unfortunate consequence is that a self-fulfilling prophecy is established. Social services can’t make a difference so there is no real need for significant investment.

After traditional need assessments what? Seven Alternatives

If traditional need assessments all too often fail to assist policy makers in priority setting, are there alternatives? Yes. None are perfect by themselves. Used together, and in conjunction with well designed need assessments, they provide the best currently available assistance to policy makers. These alternatives are:

- Community baselining or benchmarking. Community baselining or benchmarking uses standard governmental and private data to compare the levels of asset or risk behavior in one community to another. Given the caveat of apples to apples, this information allows policy makers to see how their community stands in relation to others. Priorities can then be set on the basis of various decision rules such as: (1) establishing a target percentile for the community as a whole and focusing resources first on those areas who fall farthest from the target percentile; (2) focusing resources first on those areas which are closest to the target percentile; or (3) not using a target percentile but simply targeting first that area where community scores are lowest.
How is this different from traditional need analysis? The goal is not to determine which need is most important. Instead, the goal is to move over time the community’s benchmark scores to a higher level. There is no attempt to determine which need is more important or significant. Instead, priorities are based on community position.

Examples of benchmarking sources include the Conference Board’s Consumer Confidence Index or the University of Michigan’s Youth Substance Abuse data or the housing affordable indices.

- **Formal system gap and capacity analysis.** This is a formal process where the various systems of care are mapped using process re-engineering approaches and gaps and capacity restrictions are identified. The data facilitates an analysis of how overall capacity could be increased in the most cost-effective manner. As such it represents a specific case of cost benefit analysis.

- **Institutional Role.** In this approach priorities are set first on the basis of the institutional owner. Those needs that some institution in the community “owns” are removed from the first round of prioritization by other institutions. Only if institution A can fully address the needs it has been charged to address does it allocate resources to the needs that institution B “owns”. This requires a high degree of discipline of course and must be applied with care because the issue of “ownership” is not as clear cut as one would like. Also the failure of institution B to fulfill its mission may be so significant that institution A is forced to respond if it is to achieve its mission.

- **Resource Impact.** This is another cost–benefit approach in which the key question is not “what is the highest need?” but “where can the resources we are allocating have the greatest impact?”
complements and works best when accompanied by the formal gap and capacity analysis discussed earlier.

- **Risk Analysis.** In this approach priorities are set not on the basis of need, but on the basis of risk. This is the actual prioritization model that is used in public policy priority setting. For example, a policy maker reviews the risk of putting felons on the street versus job training programs. If resources are scarce, jails are funded before job training even though we understand that job training could help lower crime. The immediate risk almost always outweighs long term benefits. Most policy makers possess an intuitive sense of risk, but more formal risk assessment procedures can be used.

- **Opportunity Costs.** This is an econometric approach in which opportunity costs are calculated. Priorities are then set on the basis of seeking to minimize opportunity losses.

- **Multi-dimensional analyses.** To assist policy makers to set priorities, we must engage in multi-dimensional analyses. Figure 1 illustrates one type of multi-dimensional analysis using the variable of gap criticality and gap size. Traditional needs analysis is uni-dimensional; what is the biggest need; the most important need, etc. In reality policy makers have to balance multiple concerns and values. Therefore they need analyses which are conducted from a multi-dimensional perspective and for which data is presented in multi-dimensional models.

**Conclusion – The impossibility of a purely rational or quantitative system: Why we need policy makers**

At the end of the day, policy makers have to make judgments using multiple criteria to which they assign different weights. Even if we could construct a perfectly rational and quantitative system that would leave no empirical doubt as to where public resources would be best invested, we would not want such a system. In the end we want human beings wrestling with various concerns and balancing multiple values to make these decisions. For these persons who assume the policy making role, this means they will have to learn to live with
uncertainty. We conclude with a brief discussion on making policy decisions in conditions of uncertainty..

The 53% Solution: Uncertainty in public policy

I once interviewed an elected official who was on his fourth, four year term. During the course of his tenure he had participated in literally billions of dollars worth of decisions, some of which were extremely contentious in the community, and all of which were complex at some level.

He remarked to me that on the really tough decisions put before him he has always understood both sides of the issue and could make a strong case for either position. And when it came time to vote, he was never more than 53% sure of the position he took. How does a policy maker live with 53% certainty? Three guidelines:

- Accept that no one knows for sure what the wisest and most correct policy is at the time when the policy decision is made. It will take a long time to know whether a particular decision was wise or not. Most public investments play out over the years. It is only from the perspective of history that we can judge wisdom.
- Accept that informed, democratic debate and decisions make for better decisions. There is a body of research that contends that group decisions are poorer than individual decisions. However a careful study of that research shows a poor or weak set of information and decision practices at work. When groups have good data and the opportunity for full dialogue, a better decision occurs.
- The sun will rise in the morning. As critical as these decisions are, there will be another day. Life is much more resilient than even a terrible policy decision. Opportunities for self-correction will occur.
Figure 11: Multi-dimensional Analysis Illustration

Criticality of the Gap

Large, Critical Gap

Minor, Small Gap

Size of the Gap
Appendix D: Organizational structures for complex problems.

What do we know about addressing and incrementally solving complex problems? Several things:

- One, complex problems require holistic problem solving approaches in addition to reductionistic analyses. Another way of saying this is that we have to conceptualize the complex problem as a system and understand how the system operates, not just how pieces operate.
- Second, we know that buy-in of multiple parties is required. No one person, organization, jurisdiction or even sector (in the sense of private, public and non-profit sectors) “owns” the problem in the sense it is their sole responsibility to solve or in the sense they have adequate capacity alone to solve it.
- Third, we can only solve the problem incrementally. It is highly unlikely there is “one big fix” in practice, even though perhaps there is one in theory. We can bring a group of partial solutions to the problem, each of which singly will have impact and all of which together may truly bring a solution.
- Fourth, we must act collectively. It is only through collective action, where multiple parties act in concert or in coherence, that progress is made on complex problems.\(^5\)

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\(^5\) Ostrum, E. Collective action. Sage
• Fifth, barring some dramatic advance in technology or social structure, we can only solve the problem over time. Complex problems do not lend themselves to one day solutions. We may be able to implement a partial solution in the short term, but the overall solution will require a significant period of time. Therefore we must have some structure which can sustain itself over time.

• Sixth, we will have to optimize resources and re-allocate resources over time. Complex problems cannot be solved on the cheap. At the same time there are many complex problems and they all compete for scarce resources. So we must have some means to optimize the resources we do have and re-allocate those resources as events dictate.

• Seventh, mutual accountability must permeate the process\(^6\). Mutual accountability means that everyone assumes some degree of responsibility for the problem. To use homelessness as the example, we cannot shift responsibility for homelessness solely to those who are homeless. We have to acknowledge the dynamics of our economic system which assumes some level of unemployment, of public investment gaps that render mental health or other services difficult to obtain, of public policies which rely on more and more expensive housing to fill public coffers, etc. That said individuals must also take responsibility for their behaviors. Persons who choose to buy cigarettes instead of housing have to face and take responsibility for the choice they have made. Persons who choose to take on financial responsibilities beyond their means are accountable for that choice. A complex problem is a result of

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both individual and social choices. All of us, whether we are housed or homeless, are accountable for the public and private choices that have created the complex problem we label homelessness. We are all mutually accountable.

- Eighth, role differentiation. Since a complex problem is by definition multi-dimensional and dynamic, a high degree of flexibility is required to effectively address it. While it may seem paradoxical, goal-oriented role clarity and role differentiation increase an organization or system’s capacity for both effective and flexible response. Why is that so? Think of a football team for a moment. The role of each player is highly defined both in terms of rules about what they can and cannot do and in terms of functions they perform on each play. Within each role, there are varying degrees of flexibility allowed to achieve the team’s goal. By clearly understanding the goal, the role one plays, and the flexibility built into that role, the capacity of the various components to work together for a desired result has been optimized. This is the desirable balance between a pole of rigid role definition in which the task is clear but there is no understanding of the goal and no capacity to respond flexibly and to the opposite pole of where roles are unclear and extensive energy is spent internally on role discussions. The former is bureaucracy at its worst, the latter is anarchism.

- Ninth, two statements which are paradoxical must be simultaneously held and integrated. One statement is that everyone must lead if the problem is to be effectively addressed. The second is that is everyone leads, no one leads. Both are accurate and valid statements. How are they
reconciled? Everyone leads in the role that is assigned or have assumed. If my role is data analysis, then I take the lead in ensuring a high quality process and product. If my role is managing an emergency shelter, then I attempt to institute best practices. If leadership is viewed narrowly as setting policy, establishing priorities and allocating resources, then everyone is not charged with that role. The persons assigned to that role must exercise their best judgment and provide direction for the overall system.

Given this knowledge of how complex problems are solved, what governance and management approach best fits the solving of complex problems? Governance again is defined as policy setting, direction setting, high level or strategic resource allocation and funding prioritization. Management again is defined as the coordination and management of tactics and resources to achieve the outcomes defined by policy-makers. While known by several terms, the approach that has emerged in recent years is most often generically labeled public management networks. In this case however we will use the terms public leadership and public operations network for reasons that will become obvious. In this next discussion the approach will be defined, illustrated and analyzed as to its appropriateness for the issue of homelessness.

Public Management Networks: Four Types

This section briefly describes various types of public management networks. Detailed working papers are in development which describes the concept more fully.7

Again, a public management network is simply a diverse group of stakeholders focused on a particular public policy issue. In the context of Pinellas County, the Homeless Policy Group is an example of a public management network.

Public management networks may take several forms. A single network itself may consist of one or more of these forms.

- **The policy network.** This network is focused solely on policy issues. Its purpose is to develop a policy direction that members can support.

- **The planning network.** These can be of several types. One type is a network focused solely on developing plans which can then be adopted or used by the various stakeholders. Another planning network is focused on developing a plan which it will then oversee and make or recommend funding for the plan.

These two types of networks are referred to in this report as public leadership networks in that their task is to provide direction, not management oversight. The other two types of networks are:

- **The intermediary organization.** This is a network established for the distinctive purpose of providing a mechanism for blended or coordinated funding. Various funders contract with it to manage and coordinate their funding with that of other funders for optimum impact.

- **The management network.** This network is established for the express purpose of managing a service delivery network. It focuses on coordination, integration and system operations.

These types of networks are referred to as public operations networks in that their task is the management of the system itself. Figure 3 graphically illustrates these network categories.
What is a public management network? Let us define each component word and then proffer a synthesizing definition.

First, what is the definition of the word “network”? Network implies a connectedness of parts or elements that are independent on their own but choose to work together for a shared purpose. Each of us have our “networks” which share information, assist each other and view ourselves as “connected” in some way. One of today’s “keys to success” is the ability to network. The term network is commonly used in information technology to describe a group of computers that are linked together in some productive way. Each of these computers is independent, but linked together they are more powerful and more
A network then is a group of entities, each of which is impacted by the problem in some way, none of which can solve it alone and all of whom are willing to engage in some collective effort. A network approach to problem solving is needed because “no single agency or organization at any level of government or the private sector has a monopoly on the mandate, resources, or information to deal with the most vexing of public problems”\(^8\). As defined by O'Toole\(^9\), “a network is a pattern of two or more units, in which not all major components are encompassed within a single hierarchical array”.

Second, why the word public? Complex problems, particularly complex social problems, inherently impact the public, common or shared good. Just as we are all accountable in some sense for the problem, we all would benefit in some way from its solution. Homelessness is an excellent example of a public good issue. The individuals who are homeless would benefit from a solution. But so would businesses that might be losing customers. So would neighborhoods who feel less safe. So would hospitals that are providing free care in response to the physical needs of the homeless as one example. So would the taxpayer who has to pay for the costs of law enforcement among many other costs. So would other public institutions that may have to shift scarce resources to meet the needs of the homeless. So would communities trying to revitalize certain areas of their city. There clearly is private benefit to be obtained by solving or reducing homelessness. This should not be ignored or minimized. But there is clear public benefit to society as a whole by alleviating this problem.

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term public is an appropriate label to distinguish it from an organizational form focused solely on private good.

Third, the word management denotes an active and intentional attempt to address an issue, resolve a problem, and achieve an opportunity. While there are nuances which are distinguished in the discussion about public management networks and public operations networks, the underlying idea is that a group of actors have come together to effectuate some desired end.

The theoretical assumptions underlying the network approach

The network approach is based upon a number of assumptions which are summarized by Klijn and Koopenjan\textsuperscript{10} and presented in table 7. These assumptions can be tested by observing the actual practice of networks.

Table 7: Theoretical assumptions of the policy network approach

<table>
<thead>
<tr>
<th>Networks</th>
<th>Theoretical assumptions</th>
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<tbody>
<tr>
<td></td>
<td>- Actors are mutually dependent for reaching objectives.</td>
</tr>
<tr>
<td></td>
<td>- Dependencies create sustainable relations between actors.</td>
</tr>
<tr>
<td></td>
<td>- Dependencies create some veto power for various actors.</td>
</tr>
<tr>
<td></td>
<td>- The sustainability of interactions creates and solidifies a distribution of resources between actors.</td>
</tr>
<tr>
<td></td>
<td>- In the course of interactions, rules are formed and solidified which regulate actor behaviour.</td>
</tr>
<tr>
<td></td>
<td>- Resource distribution and rule formation lead to a certain closeness of networks for outside actors.</td>
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</table>

<table>
<thead>
<tr>
<th>Policy processes</th>
<th>Theoretical assumptions</th>
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<tbody>
<tr>
<td></td>
<td>- Within networks, interactions between actors over policy and issues take place focused on solving the tension between dependencies on the one hand and diverging and conflicting interests on the other.</td>
</tr>
<tr>
<td></td>
<td>- In doing so actors depart from perceptions they hold about the policy area, the actors and the decisions at stake.</td>
</tr>
<tr>
<td></td>
<td>- Actors select specific strategies on the basis of perceptions.</td>
</tr>
<tr>
<td></td>
<td>- Policy processes are complex and not entirely predictable because of the variety of actors, perceptions and strategies.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Theoretical assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Policy is the result of complex interactions between actors who participate in concrete games in a network.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Network management</th>
<th>Theoretical assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Given the variety of goals and interests and – as a result – the actual and potential conflict over the distribution of costs and benefits, co-operation is not automatic and does not develop without problems.</td>
</tr>
<tr>
<td></td>
<td>- Concerted action can be improved through incentives for co-operation, through process and conflict management, and through the reduction of risks linked to co-operation.</td>
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Examples of Public Management Networks. The following examples should help to clarify the nature of a public management network. Table 8 provides a summary.

- Southwest Florida Water Alliance\(^{11}\). This is a group of persons seeking to ensure there is adequate water for all users (public, private and nature) in southwest Florida. The group consists of two working groups, a policy

\(^{11}\) Marlowe, H. and Arrington, L. Developing a public management network for water supply planning. Working paper.
body of elected officials representing the four counties and thirteen municipalities comprising the area and a technical group of experts representing public water supply, private interests and environmental needs. This body has been working for three years and has created a set of partial solutions which have been implemented by various responsible entities. Among their current or emerging accomplishments are: agreements for unified water rates, region wide conservation plans, development of regional inter-connects for drought relief, a mechanism for investment in region wide projects of mutual benefit and conceptual approaches to the integration of land use decisions. Table 7 shows how this effort meets the criteria of a public leadership network.

- Fraser River Basin Council. Quoting from Branley\textsuperscript{12}, “The Fraser Basin Council has employed a unique model of collaborative governance for cooperative management of a major river basin. The Basin covers one-quarter of British Columbia (BC)’s land mass and is home to 2.7 million people. And it produces 80 percent of BC’s economic output—and 10 percent of Canada’s output. The Council’s 36 directors include members from all four orders of government—local, first nations, provincial and federal—and from the private sector and civil society. These directors come from all regions of the Basin. The Council’s professional staff is likewise located throughout the Basin. Local knowledge and initiative is absolutely fundamental to Council’s work. The Council makes decisions by consensus, which requires members to learn not only the facts on any issue, but also how different experiences, feelings, and values interpret

helped resolve a 50-year dispute about reversing the flow of the Nechako River; and helped find the will and the means to stop North American’s largest point source of metal pollution at the Britannia mine. The Fraser River and its main tributaries have never been damned, a fact critical to their continued status as the world’s most productive salmon-producing river system.

Table 8: Case summary of a public management network

<table>
<thead>
<tr>
<th>Element of a public management network</th>
<th>Case example: Southwest Florida Water Alliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intentional</td>
<td>Clear mission of a regional approach to water supply</td>
</tr>
<tr>
<td>Public Good</td>
<td>Water for public, private and natural resource needs</td>
</tr>
<tr>
<td>Network</td>
<td>Topic of joint concern endorsed by all public entities via joint resolution</td>
</tr>
<tr>
<td>Network</td>
<td>Agreement that decisions are consensus based if at all possible</td>
</tr>
<tr>
<td>Leadership</td>
<td>Commitment to workable products as outlined in above paragraph</td>
</tr>
<tr>
<td>Leadership</td>
<td>Membership of elected officials, representatives of various stakeholders</td>
</tr>
</tbody>
</table>
Why is a public management network approach the best fit for issues such as homelessness, housing, economic security and health?

- First, it offers a problem solving approach consistent with that needed to address complex problems.

- Second, it addresses how to build sufficient cooperation for action. As Stone argues, “the issue is how to bring about enough cooperation among disparate community elements to get things done – and to do so in the absence of an over-arching command structure or a unifying system of thought.”

- Third, it brings the scope of knowledge, breadth of experience and range of influence needed to effect and influence a complex adaptive system. No one entity has all the knowledge, expertise or resources needed.

- Fourth, it enables a comprehensive response that addresses both the behavioral and structural issues which underlie a complex problem such as homelessness. It does so in many ways but one key one is enacting the principle or value of mutual accountability.

- Fifth, and most importantly of all, because it works. Networks offer a mechanism to address complex issues that no single agency can address effectively by itself. Networks have been found to be an effective

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conflict resolution tool\textsuperscript{16}. To quote Agranoff: “A study by Radin and associates reveals how federal–state–private councils in rural development have led to many program changes and demonstration approaches.\textsuperscript{17} In the same vein, economic development research at the state and local levels has demonstrated how networked officials enhance their economies by stimulating private sector action, engaging in partnerships with such organizations as chambers of commerce and industry groups, and jointly formulating developmental policies in human resource development, technology advancement, and global marketing.\textsuperscript{18} Finally, research in environmental policy also demonstrates that emergent solutions to such problems as nonpoint source pollution (e.g. agricultural chemicals), watershed and forest management can be approached by formally and informally convening government agencies, conservation advocacy groups, industry representatives, land developers, and the scientific community into joint bodies.\textsuperscript{19}

Effective public management networks: Key features and practices

Assuming there is a movement to create various public management networks for the health and human service issues in the county, what are the keys to the


success of such a network based on the experiences of other networks? As Keast and Brown have stated\textsuperscript{20}, “to be effective networks necessitate more than a ‘business as usual’ or bureaucratic, hierarchical approach and require different design principles, management strategies and skills and governance arrangements as well as alternative performance measures\textsuperscript{21, 22, 23, 24, 25}. Furthermore, networks are not a ‘one-size-fits-all’ proposition. They are highly differentiated in terms of their purpose, form, operational governance mode and structures and need to be built ‘fit-for-purpose’ to match these requirements\textsuperscript{26}.

As stated by Keast\textsuperscript{27}, referring to Klijn and Koppejan work\textsuperscript{28}, “networks or networked arrangements require distinctive structural and governance arrangements that are based on relationship principles and practices of negotiation and bargaining and, are highly iterative in their formation, ongoing operation and evolution and offer private, public and voluntary sectors a way of value adding and transforming existing policy, product and service delivery modes.”


The following practices are considered best and proven.

- Broad stakeholder participation. Complex problems by definition are multi-dimensional and multi-faceted. Many different partial problems comprise the complex problem. Therefore multiple parties have to participate in some form. This does not mean that all participate in the same way, but it does mean that all voices have the opportunity for input and are heard.

- Make the table larger and rounder\textsuperscript{29}. An off-shoot of broad stakeholder participation, this best practice focuses on ensuring that the processes of the network ensure that all voices receive a fair and full hearing. This principle does not obviate the realities of legislated and delegated authorities and decision making powers, but it does ensure that during the analysis and problem definition phases, as well as during solution generation processes, that all perspectives are aired.

- Define and operationalize values and working principles. Early in the process of network formation the members should state the values and working principles they will seek to practice. These may evolve over time of course, but they do serve to offer members guidelines for behavior. The Fraser Basin Council for example adopted the following principles:\textsuperscript{30}
  - Understanding and respecting the opinions of others.
  - Accepting all members as peers: at Council, we say, “Titles and egos are left at the door.”

\textsuperscript{29} Onandaga Civic League, op.cit.
\textsuperscript{30} Blaney, J. op.cit.
• Seeking balance over extreme positions.
• Taking action based on consensus.
• Using all these elements to build trust among members.

• Design processes to build social capital and working trust. A network must have a reasonable degree of working trust among its members if it is to be effective. Some people approach the issue of trust from the perspective of “I will trust until proven wrong” while others take the approach “my trust has to be earned”. Recognizing these differences in individual style, a wise network approaches the issue of trust intentionally. There are a number of techniques that can be used in an intentional trust building strategy\textsuperscript{31}. These should be instituted as appropriate during the start-up phase of the network as well as used periodically during its work. These processes will build the level of social capital within the network. Social capital refers to the degree of trust and willingness to work together for the common good\textsuperscript{32}.

• Develop agreement on how decisions will be made. While consensus is the goal, a network should not allow itself to be captured by a recalcitrant member. The question is what does consensus mean? There are several levels and definitions of consensus\textsuperscript{33}. A network should address this issue early and work through the various levels of consensus to reach some agreement on its specific approach. Different degrees of

consensus may be required for different problems, both between networks and sometimes within a single network.

- Specify processes for conflict management and conflict resolution from the outset of the network. Conflict is a natural and healthy part of a network. Indeed, the network without conflict is probably avoiding some key issues. That said, best practice is to address up-front the legitimacy of conflict and procedures through which conflict can be handled constructively.\(^\text{34}\)

- Systems analysis. Because complex problems are multi-faceted, interrelated and unstable, reductionistic models of analysis are ill-suited approaches for understanding the issue. Systems thinking approaches, which allow for more holistic as well as self-reinforcing and self-organizing perspectives, are better suited to provide a fuller understanding of the problem.

- Holistic problem solving. Related to systems approaches, the techniques of holistic problem solving provide tools that a network can use to analyze its issue and develop solutions.

- Plan for evolution. As the network does its work, its understanding of the issue and solutions will become richer and deeper. A best practice is to institute a process through which the problem is periodically reviewed and re-stated if needed.

- Define goals and products, along with time frames, early in the process. While these will evolve and shift, they assist the group to form, assist people to determine the worth of the network and provide some

confidence that their time investment will be worthwhile. In some cases, where the problem is particularly complex, this goal and product definition process will need to be iterative as the group better understands the challenge and the problem.

- Establish a reasonable deadline for products and establish interim products. For the network to retain the energy that led to its establishments, as well as develop a higher level of energy and commitment, it must produce products within a reasonable amount of time. While that time depends upon the issue, if members do not see progress, they can become discouraged and lose interest.

- Establish a sunset date. While a network could be “forever”, it should be time limited (“sunsetted”) from the onset so that the decision to continue it is deliberate. Groups often continue simply due to the fact that they are there and no one wants to raise the question of their discontinuance. Establishing the sunset at least forces the network to ask if there is continued work to be done.

- Promote neutrality of leadership, particularly at the start of the network. Networks dealing with complex issues rarely come together without history. Recognizing there is no such thing as the truly neutral network member; some members will be seen as more neutral than others. Also, some members will be viewed as “fair and open” to all views, even though they have their own. A person who fits these categories should be the chair at the onset of the network if indeed the network even chooses to have a chair. An alternative is to engage an outside facilitator.
• Recognize that decisions will be made in a non-hierarchical environment. Unlike an organizational structure with hierarchical decision levels, networks are groups of peers.

• Examine the appropriateness of outside facilitation. When issues are both complex and controversial, the services of an outside professional facilitator can sometimes be helpful. A person who is trained in group processes, complex problem analysis, conflict resolution and consensus building can perform key services for the group which all members can accept because the facilitator is not identified with a “side”. Even if the network chooses to have a chair, the use of a facilitator can ease the burden on the chair and allow them to participate more fully without having to manage the group process.

• Provide administrative support. Networks are not free. The administrative support required for network meetings, documentation management, communications with interested parties and other support functions can be extensive depending upon the scope and frequency of activities.

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Textbox 9: Solving complex problems: The holistic approach to problem solving

The holistic approach to problem solving involves the search for an acceptable solution as an emergent property of interdependent sub problems with competing or contradictory constraints. It is based on five assumptions:

1. *Problems and solutions are constructs of the mind.* Problems don't exist independently from those who define them. Some problems are so complex and so far-reaching that their complete solution is unrealistic and partial solutions must be employed.
2. *People have different views of the same situation.* A problematic situation is viewed and defined differently by the people affected.
3. *People disagree on what's the actual state and desired state.* Since there's no agreement on what the problem is, it follows that there won't be agreement on the solution.
4. *Improvements result from discussion and debate.* A solution is an ongoing work of the group. In effect, the impacted parties learn together.
5. *The analyst becomes part of the problem situation.* The analyst becomes part of the problem situation and uses a variety of tools to learn along with the impacted parties in formulating a solution.

The alternative approach, which is the optimal approach for well-defined problems, is termed reductionistic problem solving. It is based on the following five assumptions:

1. *Problems and objectives can be identified.* The model begins with a needs assessment that leads to a problem statement. Objectives are developed that drive processes expressly designed to solve the identified problem. Success or failure is measured against these objectives.
2. *The defined sub problems can be solved by people with appropriate expertise.*
3. *Problems and objectives are put into operational or quantitative terms and solutions are modeled to achieve optimal performance.* To be rational and measurable, problems and objectives are assigned numerical indicators so progress can be monitored. Individual components are adjusted to conform.
4. *Improvements come from the implementation of solutions.* Once the problem has been identified and solutions modeled, the best model is executed to solve the problem.
5. *The analyst is independent of the problem, a consultant who makes recommendations to a client.* To be fully objective and impartial, analysts remain apolitical and scientific in providing advice and counsel to clientele.
The three core tools of a public management network: Collaborative Planning, Consensual Problem-Solving and Facilitative Leadership.

This section provides a brief outline of the principles and practices of collaborative planning, consensual problem solving and facilitative leadership. A working paper is in development which will be available in the near future where these principles and practices are discussed in greater depth.  

The core premise of the approach is that a third form of governance and public administration is emerging which represents an alternative to centralized bureaucracy with its traditional top-down decision making approaches and privatization of public services. This third form goes by a variety of labels, with the label public management network currently gaining the most currency.

Public management networks have a number of features, the most critical of which for this discussion is the engagement of multiple stakeholders using the practices of collaborative planning, consensual problem solving, and facilitative leadership. Appendix B provides an overview of the major types of public management networks so this concept will not be discussed in further depth here. Instead, the focus will be on selected principles and practices which underlie effective collaborative planning, consensual problem solving and facilitative leadership. These include:

- **All voices.** This principle has two dimensions. The first is the importance of all perspectives being present and being examined during the analyses, planning, problem solving and decision processes. In the HHSCC context this includes consumers, line staff, volunteers, agency managers or executives, affected citizens and neighborhoods, business and civic groups, public and private funders and policy makers. The second dimension is that policy and funding decisions must be made only by those who represent all voices. These are elected and appointed officials whose task it is to represent the entire community and have been selected for that role.

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36 Marlowe, H.A. Principles and practices of collaborative planning, consensual problem solving and facilitative leadership. Working paper
• **Hierarchy as role differentiation, not hierarchism.** It is critical for these processes to succeed that roles be clear. Any system fails when it various components fail to either understand their respective roles or perform them. As a simple biological analogy, imagine what would happen is our hearts and our livers somehow got their functions confused. While social systems are more complex and flexible, they still function best when each member understands the role they need to play and how their role fits with and contributes to the whole. Much of the continuous complaint about lack of communication is derived from role confusion, lack of role clarity and lack of understanding of how my role fits in the larger picture. A hierarchy is simply a way to organize structure and explain role. However, the term has developed negative connotations because it is confused with, and unfortunately all too often demonstrates, hierarchism. Hierarchism is the subtle, or not too subtle, implication that a person who has a broader, more authoritative and more responsible role is somehow superior to someone who has a narrower role with less authority and responsibility. The success of collaborative planning, consensual problem solving and facilitative leadership lies in maintaining clear role distinctions while respecting the worth and contributions of everyone.

• **Systems perspectives.** Complex human systems, formal or informal, are simply relationships among various parts that result in a whole that is greater than the sum of the parts. For planning and decision making to be effective, it must be done in the context of understanding the system and how changing one part or introducing some new element will impact other parts and overall performance.

• **Asset perspectives.** This is simply the perspective that there are assets and that building upon those assets is the most effective strategy for improving the system as a whole.

• **Differences of perspective and disagreement are critical.** Poorly managed and facilitated consensus processes often result in poorer quality decisions than those that would be made by a single, informed individual. The quip, a camel is an elephant made by a committee is a succinct summary of that reality. On the other hand, social science research indicates that a wide variety of perspectives when wisely engaged leads to better decisions.\(^{37}\) There is such a thing as group

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wisdom. A key part of that group wisdom process is ensuring that differences of perspective are voiced and that disagreements are fully explored. If consensual decision making is simply a lowest level compromise, good decisions will not result. Instead, well facilitated consensual decision making surfaces tensions and disagreements and then substantially works with that disagreement to find higher level solutions.

- **Asking the right question is the key.** The key to getting good answers is asking the right question. This is why multiple perspectives are so critical. No one person or group understands it all. By bringing multiple parties to the process, the likelihood of formulating the right questions is enhanced.

- **Collaborative planning and consensual problem solving succeed when roles are understood and respected.** Very often in public policy collaborative planning and consensual problem-solving processes the image or belief is communicated that the conclusion of the multi-stakeholder group is the decision that will be enacted. If it is not enacted, enormous frustration, resentment and a deterioration of public trust can occur. Obviously everyone loses when this occurs. This problem particularly occurs when the solutions or recommendations must be considered in the larger public policy context. When everyone understands from the onset that the plans and programs of this effort must finally be considered by the people’s representatives in a broader context, then the flawed expectation described at the start of this paragraph is avoided from the onset.

These principles and practices, along with others not enumerated above, are built into the processes described in appendix C which illustrates how networks could operate in practice. The deeper philosophical context that the public management networks approach represents is an attempt to design and institute leadership systems that enhance the position that George Weigel affirms that democracy is not simply about institutions and processes but about the ongoing experiment in the capacity of a citizenry to self-govern. The approaches delineated in public management network models are approaches which represent current experiments in building the capacity for self-governance.

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Summary of discussion on the concept of a public management network.

The discussion above detailed the nature of a public management network and the rationale for it being the appropriate governance and management structure for a complex public problem such as those found in the health and human services arena. The next two sections seek to describe two sub-types of a public management network; a public leadership network and a public operations network.

Public Leadership Network: An approach to the governance of the response to the homeless problem

A public leadership network combines the functions of networks focused solely on policy issues with those focused on planning. One role of a public leadership network, as illustrated in figure 11 is to address policy issues related to both factors causing health and human services issues as well as policy issues related to health and human service services. A second role is to provide strategic direction for a community’s response to these issues. Setting strategic direction involves both selection of high level response strategies (for example: emphasis on prevention vs. deep-end treatments, selection of a housing first strategy vs. a traditional housing approach, etc) and the prioritization of those strategies. The third role is the development and securing of the funding plan to implement the strategic direction.

Given the policy focus of a public leadership network, its membership should be dominated by the policy-makers and funders whose role it is in a community to make policy and funding decisions. As discussed elsewhere, network approaches are most effective when roles are clear, respected and reinforced. This of course does not mean that a public leadership network does not avail itself of all perspectives and indeed it should structure itself so that all perspectives are ensured.
There is a second reason why the term leadership is used in this policy context. It is to make an important distinction about how complex public issues, such as those found in the health and human services arena, are addressed. While the goal is to minimize, reduce and ultimately eliminate negative indicators related to these issues, the issue cannot be managed in the same way that a production line can be managed. As broad as the network is likely to be, it still will not have all the factors at the table. No one network, much less one entity, can control these issues. In that sense it cannot be “managed”. Some other reasons for the term leadership include:

- The approach of public management networks originated in arena of natural resource management as an approach to addressing complex natural resource and environmental issues. The term management was
simply lifted from natural resource management. More importantly, there was at the time of its first use a belief that natural resources could be “managed”. This position has come more and more into question.

- As noted in the discussion of complex problems and just above, they cannot be “managed” in the same way that a straightforward problem can be managed. The term management connotes a high degree of control and direction which is often not achievable with a complex social problem at least. We of course could expand or modify the term management to encompass a broader sense of flexibility and limited direction appropriate to complex problems and then explain that specific direction. Agranoff has stated, “Network management is considered to be a different type of nonhierarchical management, where information and expertise is substituted for authority structure, through a self-organizing process, held together by mutual obligation that develops over time, by reaching consensus based decisions, and by innovative technologies that becomes the “DNA” of networks”\(^\text{39}\). Or we could use another term to simply get around the need for special definitions. The latter course is taken here.

- The leadership models labeled collaborative or facilitative leadership encompass a problem solving approach well fitted for complex problems. Building a shared, comprehensive and systemic understanding of an issue, such as homelessness, housing, etc is one skill of facilitative leadership. Developing joint commitment to action is another characteristic feature of facilitative leadership. Fostering actionable solutions, however partial they may be, is another skill of the facilitative

leader. Emergent response, scenario planning, consensus building, conflict resolution, a commitment to action are all components of facilitative leadership. And fortunately, these are the same skills and approaches needed to address complex problems. So the term leadership is an appropriate term to describe the type of entity needed for the governance of a complex problem such as homelessness.

- Finally, it is important to distinguish types of networks. Networks that are focused on policy and planning differ in mission, composition, and work tasks from those that focus on coordinated and integrated management of a set of services.

Definition of the term. A public leadership network is a purposed web of civic leaders who share a commitment to finding workable solutions to an issue of public good. It is intentional and purposeful in that it has a defined problem of public good it is addressing. It is a network first by recognition of joint concern and ownership and secondly by a commitment to collaborative effort in the full sense of that term. It is a leadership group first because there is a commitment to solution seeking and implementation and secondly because the participants have some degree of decision making authority which could impact some part of the problem. Finally, it is a leadership body because it can set, commit or impact public policy and public and private funding.

Public Operations Network: An approach to the management of health and human services

A public operations network is designed to design and manage a systematic and comprehensive approach to a complex public problem. While it may not
“manage” the problem as the discussion on public leadership networks indicated, it can manage an approach or set of services. Since its focus is on the operation of a network of services, the label public operations network was chosen.

The composition of a public operations network should be dominated by funders, providers and consumers since these are the persons most concerned with service delivery. Other advocates may be represented as well as any other interested parties who are impacted by service delivery, such as local businesses in the case of homelessness. However, the mission and purpose of the operations network is to ensure optimum use of the allocated resources to benefit the persons whom the network was established to serve.

In the course of seeking to fulfill its mission, an operations network will encounter a variety of barriers. Some of these emanate from public policy and it is the responsibility of the operations network to communicate these policy barriers to the leadership network. Others will result from inadequate resources. Again, these should be communicated to the leadership network. Others are barriers that the persons being served may generate themselves. Addressing and resolving these barriers are the responsibility of the operations network.

**How do leadership networks and operations networks interface and leverage their efforts?**

These networks are distinguished because they have different work to do and require different competencies and members to do their work. However, they share the same goal, the reduction of of some health and human services negative indicator(s) and strengthening of positive indicators.

Because they share the same goal, they are truly inter-dependent. Neither will succeed without the other. To increase the likelihood of joint success, a number of practices should be either “designed in” from the start or encouraged as events develop. Among these are:

- Clear statements of purpose, role and authority;
• A structural communications link and established communication protocols;
• Shared and delineated responsibility for selected products and elaborated processes for how those products will be produced and assessed;
• Joint agreements on key leading and performance indicators and expected standards of performance;
• Established and agreed upon processes for addressing how differences in perspective or conflicts are surfaced, addressed, and resolved

Role differentiation in a comprehensive public management network

What is presented in this section is a brief overview of structure and information flow in order to clarify the roles that respective entities will play in a network. These of course only represent starting points which will evolve over time.

Figure 1 illustrates the major perspectives that a comprehensive network approach to a public policy issue requires. There are four major perspectives required, each of which is a blend or combination of other perspectives. As the figure shows, the four perspectives are:

Policy and funding. This is the perspective of elected or appointed officials whose role it is to set policy and determine local discretionary funding in the context of overall community priorities, needs and direction. This is by definition the broadest view and the persons assuming this role have been chosen to represent the community in its entirety.

Systems. This is the perspective of administrators who are responsible for the administration of institutional systems which act as funders, public institutional systems which may both contract for or deliver themselves services and major public institutions that contain within themselves policy making, system administrator and service functions.
Services. This is the perspective of those engaged in the delivery and receipt of services as well as those who are impacted by an issue regardless of whether they are engaged in service delivery or receipt. This perspective includes that of consumers, providers, civic and faith organizations, business groups, neighborhoods and general citizens.

Technical. Policy and funding perspectives, systems perspectives and service perspectives all require data, information. During any of these discussions, the discussions will be enriched if information on consumer satisfaction, community expectation and concern, existing or emerging gaps or system faults, demand trends, funding trends, policy trends, proven and emerging practices is available and presented in user-friendly modes that provide both strategic and systemic perspectives.