

PRIORITY ONE: Improve Access to Mainstream Services						
Strategy(-ies)	Action(s)	Manager¹	Implementer²	Expected Outcomes	Benchmarks	Completion Date (Estimated)
<p>Strategy 1.1 Strengthen access to, and use of data for program planning, performance monitoring, and outcome assessment</p> <ul style="list-style-type: none"> Learn what relevant data are available from a range of sources Acquire New Hampshire’s baseline assessment of use of mainstream resources Determine cross system cost of all services for homeless population, including corrections, hospitals, outpatient health care, substance abuse, mental health services, etc. (can help convince other sectors to support programs) Help with needs assessment for the chronic homeless population 	<p>Action 1.1.1 Establish a data subcommittee by bringing data people from a variety of sources [after identifying information requirements]</p> <ul style="list-style-type: none"> Continuums of Care Substance abuse Mental Health Homeless programs Health care for the homeless Cities and towns (new data system) Other key stakeholders in DHHS 	<ul style="list-style-type: none"> Linda Saunders Jennifer Wierwille Norton 	<ul style="list-style-type: none"> Steve Norton Dartmouth Psychiatric Research Center (data analysis experts) 	<ul style="list-style-type: none"> Standardization of data collection methods for mainstream resource utilization Establish a baseline for NH utilization of mainstream resources Develop a consensus for data analysis and dissemination 	<ul style="list-style-type: none"> Identify requirements Identify data people Schedule meeting Meet and develop action plan Assemble measures based on data sources Successful utilization of Federal expertise resulting from the Policy Academy efforts 	<p>October 2002</p>

<p>Action 1.1.2 Support continued development of HMIS (in response to HUD mandate)</p>	<p>Lance dePlante</p>	<p>David Dustin</p>	<ul style="list-style-type: none"> • Sharper and more focused analysis of homelessness count • Accurate profile of resource utilization by homeless individuals • Increased flexibility and utilization of ESG funds • Better focusing of federal and state dollars towards chronic homelessness 	<ul style="list-style-type: none"> • Submission of statewide HMIS proposal to the HUD SuperNOFA in June 2002 • If Funded, commence implementation of HMIS activities in January 2003 	<p>February 2004</p>
--	-----------------------	---------------------	--	--	----------------------

	<p>Action 1.1.3 Form a focus group consisting of homeless or formerly homeless individuals to explore barriers to accessing mainstream resources, capacity and utilization, and potential improvements for streamlining the process of acquiring and maintaining those resources. Seek and encourage facilitation and participation from the technical resources available through the Policy Academy for this process</p>	<ul style="list-style-type: none"> • Peter Kelleher • John Disko 	<p>Continuum of Care collaborators</p>	<ul style="list-style-type: none"> • Increase understanding of the accessing and maintaining mainstream resources from a user perspective • Streamlining of the process of acquiring mainstream resources 	<ul style="list-style-type: none"> • Presentation to and willingness to participate from the three NH Continuum of Cares • Conduct focus group meetings • Focus group reporting summarization of findings to the joint Continuum of Cares • Joint Continuum of Care report of the summarization of findings to the Policy Academy 	<p>October 2002</p>
--	--	--	--	---	---	---------------------

<p>Strategy 1.2 Build new partnerships, targeting potential entities such as:</p> <ul style="list-style-type: none"> • Universities (including Dartmouth) • NH Charitable Foundation and associated groups • Microsoft and other private companies • Banks (community investment) • Minority Health • AHEC • SAMHSA Best Practices Initiative (Bob Drake) • Corrections (Federal, state, local) • Continuums of Care • Local Governments • Governor's Commission on Drug Abuse • Habitat for Humanity • Community Health Centers • Vocational Rehabilitation • Council of Churches • Office of Child Support • Consumers • Roy Morrison (Coalition to End Homelessness) • Employment Security (One stop centers) • Housing Finance Authority • Community Economic Development Group (SHU) • Olmstead Planning Group 	<p>Action 1.2.1 Assessment and evaluation of current resource availability and resource providers, as well as identification of resource gaps, and potential providers to fill those gaps.</p>	<ul style="list-style-type: none"> • Peter Kelleher • John Disko 	<ul style="list-style-type: none"> • Policy Academy Focus Team members • Continuum of Care Collaborators 	<ul style="list-style-type: none"> • Increase sensitivity and understanding of the resource needs of chronically homeless persons by key resource providers in the public and private sectors • Increased participation of existing and potential resource providers in collaborative efforts such as the Continuum of Care • Greater availability of mainstream resources focused on specific need areas, matched with providers best suited to administer those resources 	<ul style="list-style-type: none"> • Completion of Service Inventory and Gaps Analysis as part of the SuperNOFA funding application process by June 2002 • Increase in Continuum of Care participation from current baseline participation 	<p>June 2003</p>
---	--	--	--	--	--	------------------

Strategy 1.3 Develop replicable pilot programs in New Hampshire to demonstrate alternate service delivery models for the chronic homeless population	Action 1.3.1 Using client-level data collected, identify potential sub-population for pilot program	<ul style="list-style-type: none"> Linda Saunders Jennifer Wierwille Norton 	Relevant commissioners and other officials	<ul style="list-style-type: none"> Identification of sub-population and target resources needed Accurate count of sub-populations and inventory of relevant resources 	<ul style="list-style-type: none"> Identification and selection of target sub-population Matching potential funding sources for model programs to the identified sub-population Application for funding to implement model program 	January 2003
	Action 1.3.2 Identify and select model program and practices suitable for population <ul style="list-style-type: none"> Include employment 	Keith Bates	<ul style="list-style-type: none"> Department officials and associations Continuum of Care organizations 	<ul style="list-style-type: none"> Implementation of a replicable model program to provide services to a currently under-served target sub population Closing the gap of service provision within the Continuum of Care 	<ul style="list-style-type: none"> Literature review of best practices for model service provision to selected sub-population Selection of model program Matching of sub-population, model program, and potential funding sources to implement program 	August 2003

<p>Action 1.3.3 Develop approach for application streamlining for chronically homeless persons</p>	<p>John Disko</p>	<ul style="list-style-type: none"> • Lance dePlante • David Dustin 	<ul style="list-style-type: none"> • Implementation of statewide HMIS system with a single point-of-entry application process • Streamline access to mainstream resources • Improved coordination of service provision, including reduction of duplication, closing of gaps, and broader availability of resources 	<ul style="list-style-type: none"> • SuperNOFA application for statewide HMIS system implementation • Successful funding of statewide HMIS initiative • Successful implementation of HMIS, including signing on, training, and use of system by target mainstream resource providers 	<p>February 2004</p>
--	-------------------	--	---	---	----------------------

<p>Action 1.3.4 Implement program in one or more localities (Consider Keene experience)</p>	<ul style="list-style-type: none"> • John Disko • Peter Kelleher 	<ul style="list-style-type: none"> • Policy Academy team members • Selected Applicants 	<ul style="list-style-type: none"> • Increased availability of residential and support services to target population on a statewide basis • Expanded utilization of these resources by targeted sub-population • Decreased dependence on short term ‘Band-Aid’ solutions, emphasis on impacting the ‘long term’ solutions • More efficient service provision and resource access, reduction in duplication of services, streamlined application and utilization means less expense and therefore capability to serve a greater number 	<ul style="list-style-type: none"> • Identification of potential locations for successful implementation • Identification of key agencies and develop MOU’s that cover all relevant issues, including data sharing • Sponsor or assist local key agencies in identifying and applying for funding sources for implementation • Application for funding to implement model program in other localities 	<p>2004</p>
---	--	--	---	---	-------------

Strategy 1.4 Improve our practices by identifying barriers in State law and policy <ul style="list-style-type: none"> • Use Local Welfare Study Commission as a resource • Adult Coverage Subcommittee (183) uninsured 	Action 1.4.1 Use a survey process to develop an inventory of laws, policies, regulations, etc. that constitute barriers to improved service models.	<ul style="list-style-type: none"> ▪ Martha Yager ▪ Lance dePlante 	<ul style="list-style-type: none"> ▪ Linda Saunders ▪ Elliot Barry 	<ul style="list-style-type: none"> ▪ Greater awareness of institutional barriers ▪ Creation of a foundation for potential systemic improvements 	<ul style="list-style-type: none"> ▪ Preparation of a report summarizing results of the survey ▪ Legislative or policy recommendations resulting from report findings 	December 2003
	Action 1.4.2 Work with Executive and Legislative leaders to identify feasible changes and implement them	<ul style="list-style-type: none"> ▪ Jennifer Wierwille Norton ▪ Sen. Sylvia Larsen ▪ Martha Yager 	<ul style="list-style-type: none"> ▪ Commissioner of DHHS and designees ▪ Other top-level policy makers 	<ul style="list-style-type: none"> ▪ Policy Analysis ▪ Implementation of recommendations for changes 	<ul style="list-style-type: none"> ▪ Proposed legislation or rule changes 	June 2004
Progress to Date		Barriers and/or Situational Changes			Immediate Next Steps (including potential technical assistance needs)	

¹ The Manager is the individual responsible for coordinating each action.

² The Implementer is the individual (or entity) responsible for carrying-out each action.

PRIORITY TWO: Increase Supply of Permanent Supportive Housing						
Strategy(-ies)	Action(s)	Manager	Implementer	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 2.1 Strengthen support for Continuum of Care process to develop permanent supportive housing throughout the State	Action 2.1.1 Leverage more mainstream resources in order to provide State and local match for housing services	Linda Saunders	Lance dePlante	Decreased reliance on HUD for supportive service dollars	More HUD dollars available for housing	July 2004
Strategy 2.2 Fully utilize other State, Federal, and private resources to expand the supply of permanent supportive housing <ul style="list-style-type: none"> • New Hampshire Housing Finance authority • Public housing programs • Habitat for Humanity • Veteran’s Administration • Other Resources 	Action 2.2.1 Seek technical assistance as a result of Policy Academy expertise; collaborating with other States	Linda Saunders	Lance dePlante	Increased supply of permanent supportive housing	More HUD dollars available for housing	July 2004
Strategy 2.3 Build new partnerships (relevant to both priorities)	See Strategy 1.2	See Strategy 1.2	See Strategy 1.2	See Strategy 1.2	See Strategy 1.2	June 2003
Progress to Date		Barriers and/or Situational Changes			Immediate Next Steps (including potential technical assistance needs)	

PRIORITY THREE: Build and maintain public and leadership buy-in						
Strategy(-ies)	Action(s)	Manager	Implementer	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 3.1 Build on current executive and leadership efforts	Action 3.1.1 Encourage ongoing meetings for the existing Policy Academy members	<ul style="list-style-type: none"> ▪ Peter Kelleher ▪ John Disko 	Government and legislative leaders (to be determined)	To Be Determined	To Be Determined	January 2004
Strategy 3.2 Communicate clearly using acceptable terminology	Action 3.2.1 Seek available Federal technical assistance	<ul style="list-style-type: none"> ▪ Peter Kelleher ▪ John Disko 	Government and legislative leaders (to be determined)	To Be Determined	To Be Determined	January 2004
Strategy 3.3 Track progress and report on a regular basis	Action 3.3.1 Develop a structure for regular and ongoing meeting and assessment	<ul style="list-style-type: none"> ▪ Peter Kelleher ▪ John Disko 	Government and legislative leaders (to be determined)	To Be Determined	To Be Determined	January 2004
Progress to Date		Barriers and/or Situational Changes			Immediate Next Steps (including potential technical assistance needs)	