MIT Team Eliot

Riley Rees Mark Franciosa Jaleel Durrani
John Fitzgibbon Pavana Gadde Tom Mueller
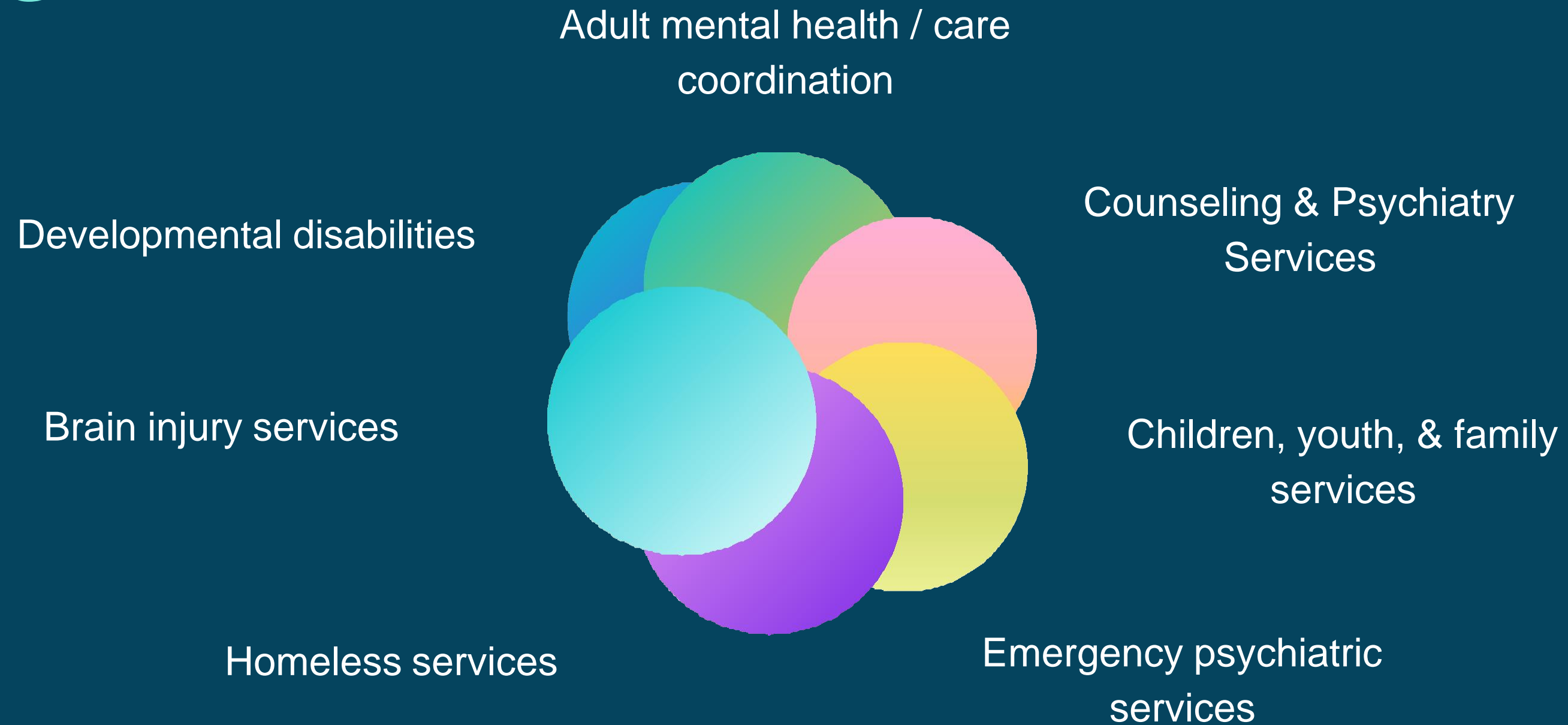
Eliot Community Human Services

MISSION

Eliot is committed to serving the most vulnerable of populations - those at risk, with limited or no resources for help.

Eliot Community Human Services

Adult mental health / care coordination

Counseling & Psychiatry Services

Developmental disabilities

Children, youth, & family services

Brain injury services

Homeless services

Emergency psychiatric services

Problem:

ELIOT SERVES ONLY 21.4% OF ITS CLIENTS UNDER PATH PROGRAM (300 OUT OF 1400 REGISTERED CLIENTS); THEY WOULD LIKE TO INCREASE CLIENTS SERVED BY 40%.

Current State
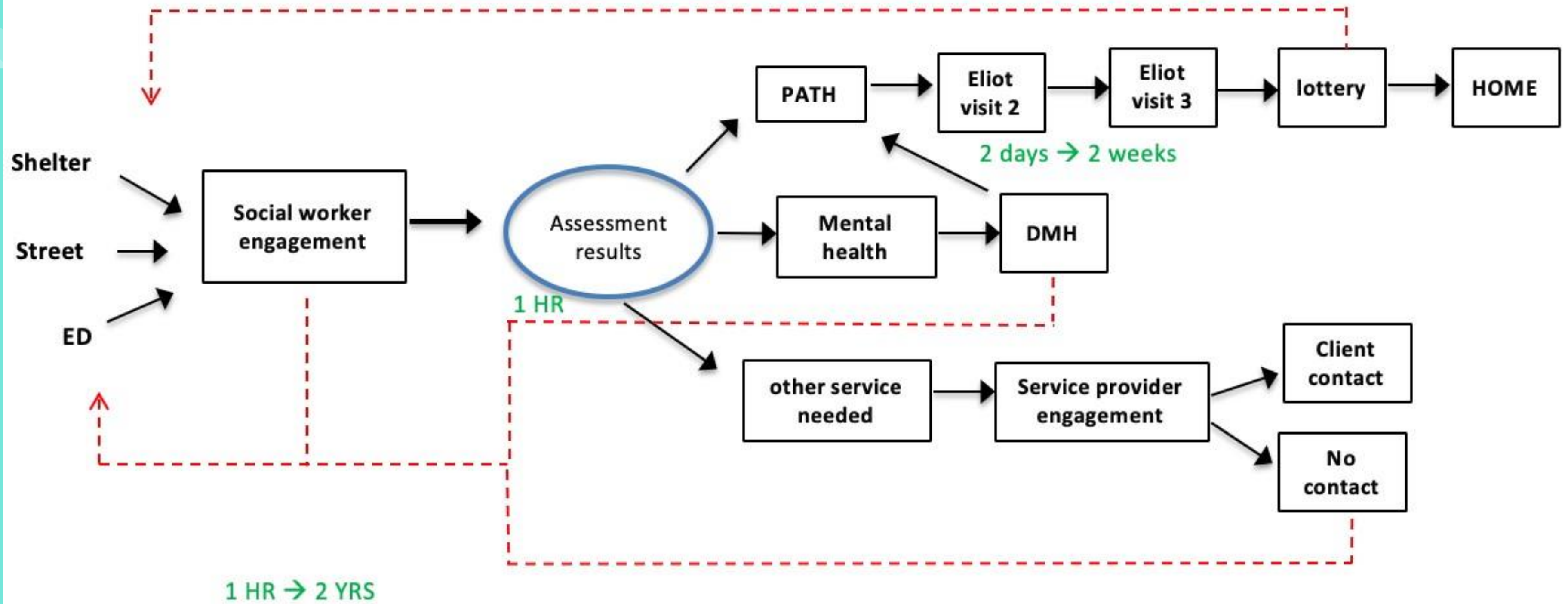
CHALLENGES

DRUGS & ALCOHOL

POVERTY

**PHYSICAL & MENTAL HEALTH**

LACK OF HOUSING

Cost to Society: Average cost of homelessness

$1,932
Shelter Bed

$4,333
Provincial Jail

$10,900
Hospital Bed

$701
Rental Supplement

$199.92
Social Housing

STAKEHOLDER ANALYSIS

| Stakeholder	Impact How much does project impact them?	Influence How much influence do they have?	What is important to the stakeholder?	How could stakeholder contribute to the project?	How could stakeholder block the project?	Strategy for engaging the stakeholder
Police	High	High	City/Town safety	Offer leadership and infrastructure to the stakeholders	Refuse to collaborate	City council contact chief of police
CAPIC	High	Low	Training clients to be successful members of the society	Participate and work with all stakeholders to ensure mission success	Refuse to collaborate	Police reach out to CAPIC
DMH	High	Low	Mental health stability for all clients	Participate and work with all stakeholders to ensure mission success	Refuse to collaborate	Eliot shows success model to DMH
Eliot	High	High	Stable mental health to create sustainable housing opportunities	Participate and work with all stakeholders to ensure mission success	Refuse to collaborate	Already working with Eliot
Navigators	High	Low	Maximize outreach, trust and engagement	Participate and work with all stakeholders to ensure mission success	Refuse to collaborate	Police reach out to Navigators
DCFS	High	Low	Stable families inside the home	Participate and work with all stakeholders to ensure mission success	Refuse to collaborate	Police reach out to DCFS
City Council	High	High	Economic outcomes, Safety, Mental stability,	Participate and work with all stakeholders to ensure mission success	Refuse to collaborate	Eliot BOD reach out to City Council
Clients	High	Med	Stable and sustainable mental health and housing	Co-operate with service professionals, Word of Mouth	Refuse services	All outreach professionals reaching out.

Solution: THE HUB
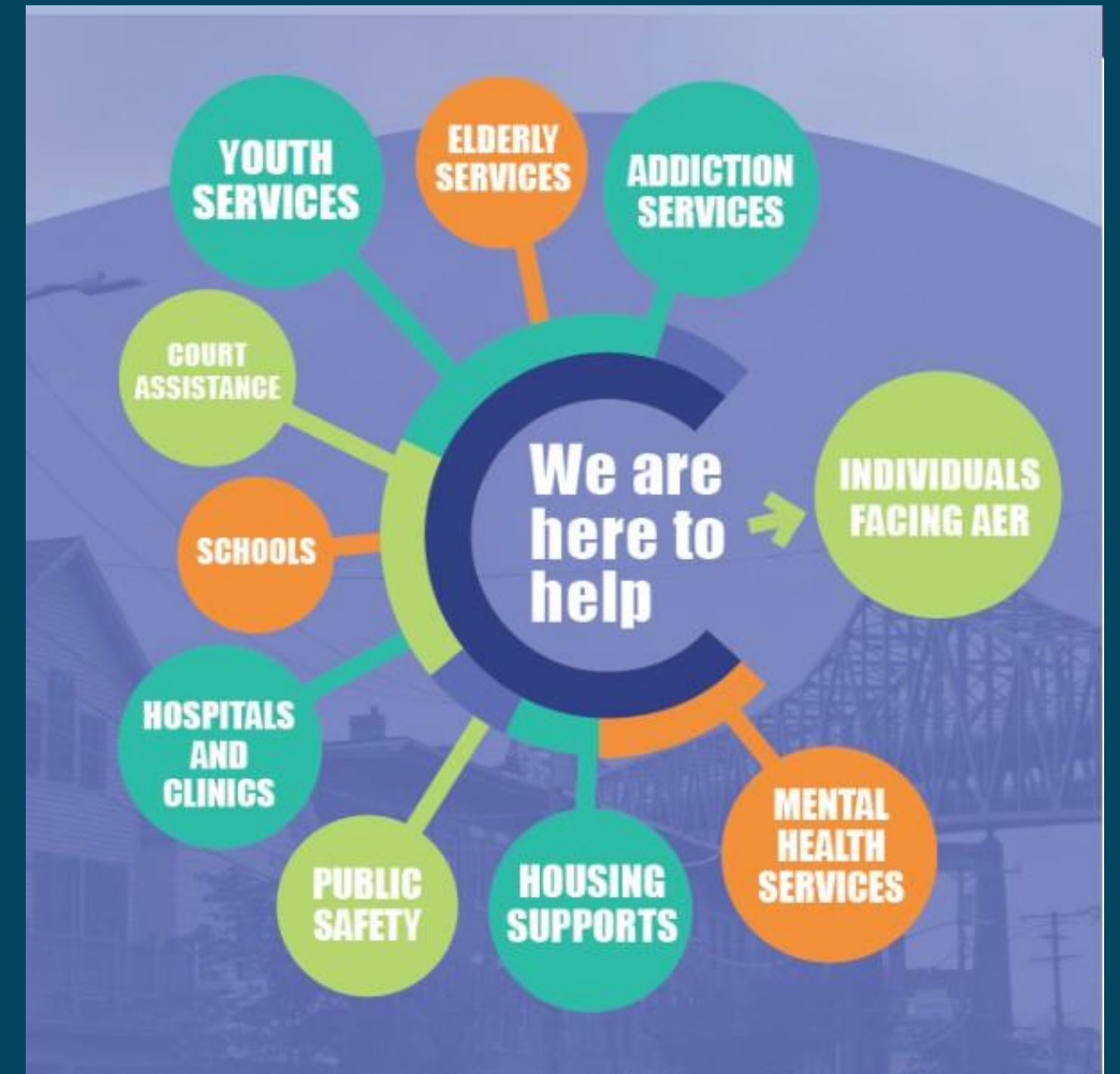
WHY DOES THE HUB WORK?

- ADDRESS RISK FACTORS
- COLLABORATION
- HOLISTIC APPROACH
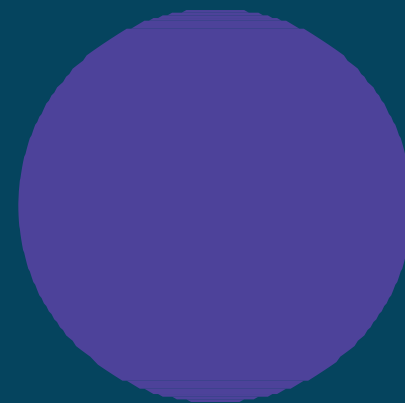- INTER-AGENCY COLLABORATION

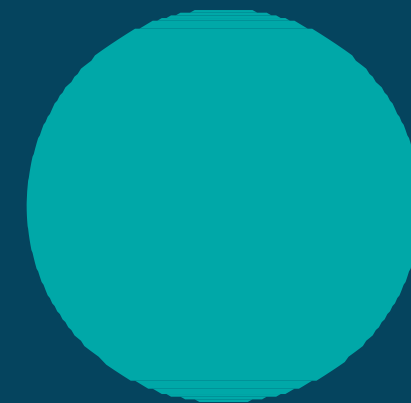Risk is identified by individual agency
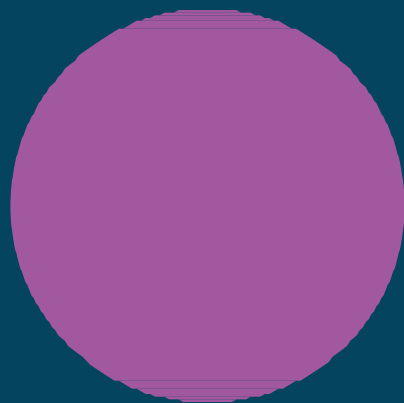
Highly disciplined introduction of AER 'situation'
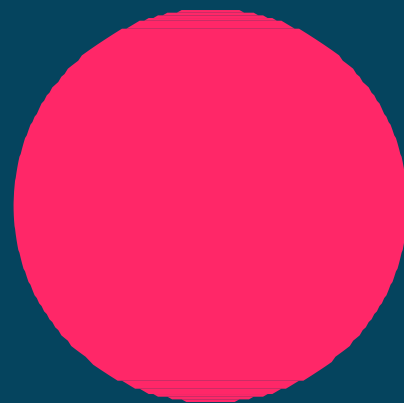
Multi sector intervention teams assembled

Intervention, or "door knock"

ORGANIZATION STRENGTHS & WEAKNESSES

Strengths:

- Assessment of mental health & substance abuse
- Navigation of complex resource network

Weaknesses:

- Financial services lacking
- Limited outreach capacity
- No in-field navigators

CUSTOMERS' NEEDS

- Shelter & Safety
- Mental Health
- Substance Abuse
- Trauma / PTSD
- Women's specific treatment
- Legal Aid
- Cleanliness / Dignity & quality of life (laundry, shower)
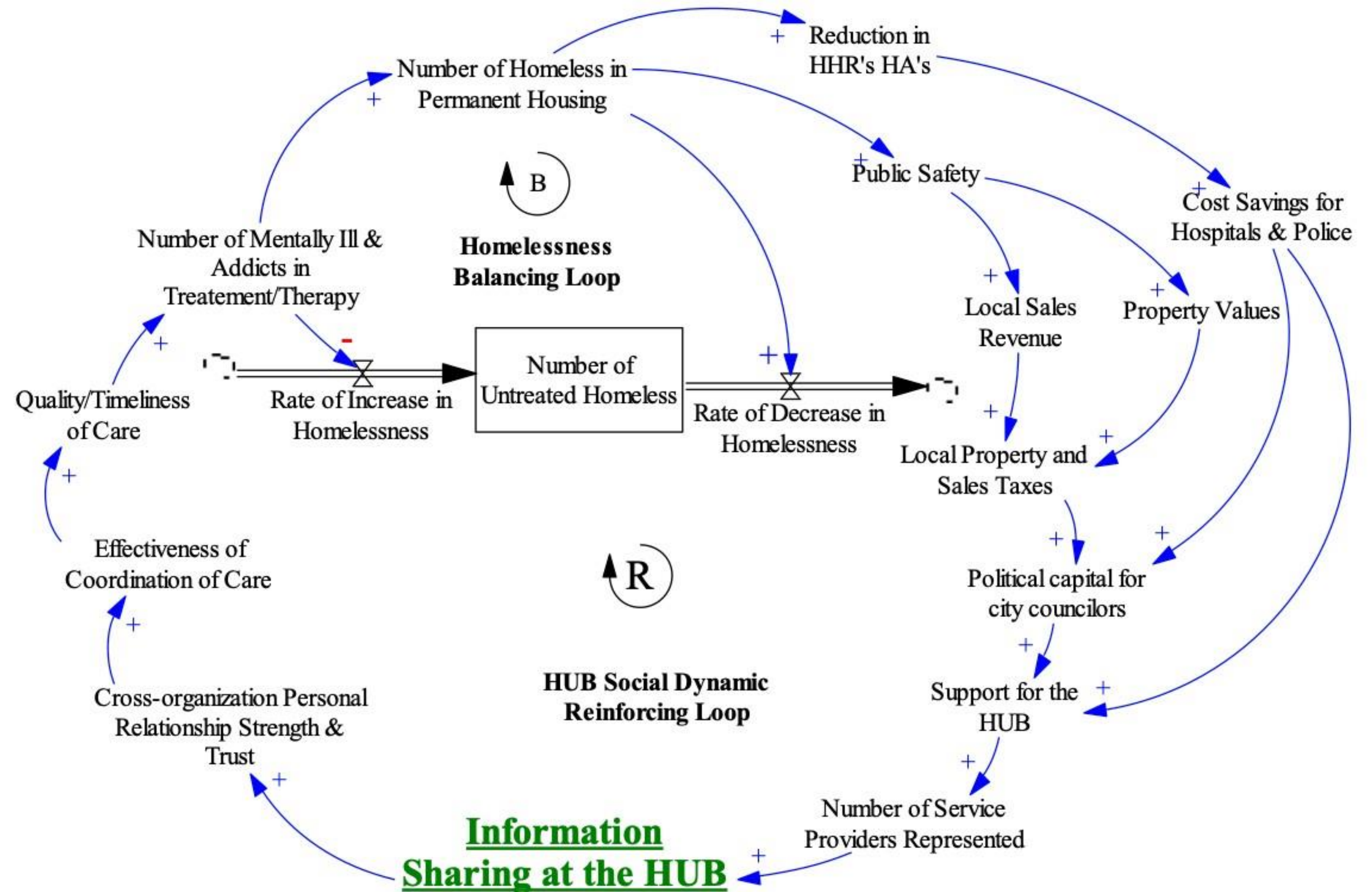- Social Connections

ORGANIZATION'S OBJECTIVE

- Serve the needs of the most complex clients
- Increase engagement & outreach
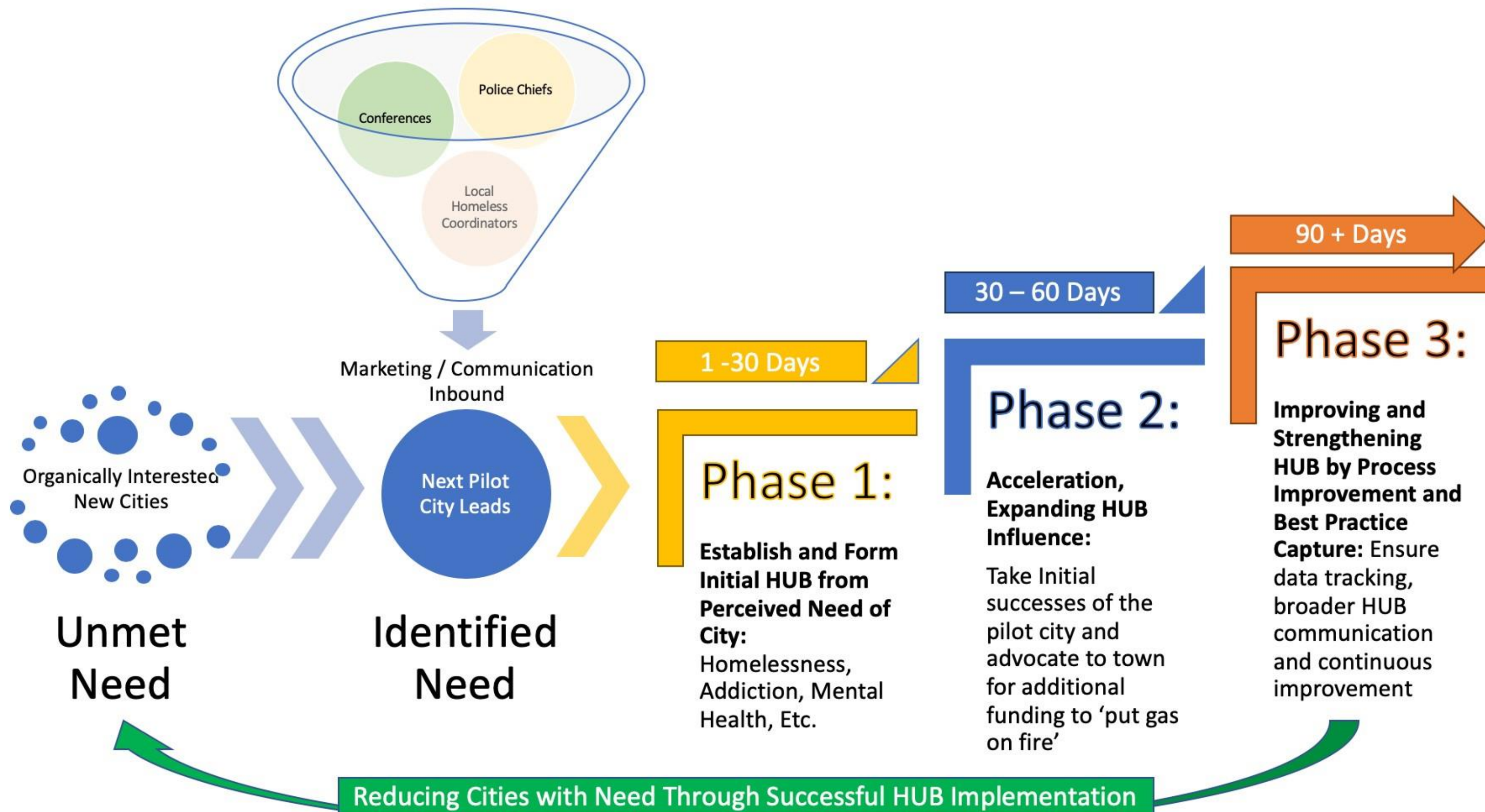- Establish relationships

MARKET CHARACTERISTICS

- Highly diversified client needs
- Complex web of service providers
- Thin funding
- Significant lags between engagement & service

Reinforcing Social Dynamic

Number of Homeless in Permanent Housing

+ Reduction in HHR's HA's

Public Safety

Cost Savings for Hospitals & Police

B — Homelessness Balancing Loop

Number of Mentally Ill & Addicts in Treatement/Therapy

Quality/Timeliness of Care

Rate of Increase in Homelessness

−

Number of Untreated Homeless

+ Rate of Decrease in Homelessness

+ Local Sales Revenue

+ Property Values

+ Local Property and Sales Taxes

Effectiveness of Coordination of Care

R — HUB Social Dynamic Reinforcing Loop

+ Political capital for city councilors

Cross-organization Personal Relationship Strength & Trust

Support for the HUB

Information Sharing at the HUB

Number of Service Providers Represented

Hub Implementation Strategy

Implementation Considerations

3 LENS APPROACH

Political

- Sell the benefits to police, hospitals, clients & communities
- Ensure any budget shifts are aligned with stakeholders' interest
- Neutral party coordinates service provider (police)

Strategic

- HUB is the key linking structure in this coordinated organization
- Optimization of service delivery improves quality and timing
- Platform model has network effects

Cultural

- Building HUB culture requires strong leadership
- Collaborative key relationship-building across service providers
- S.P. Internal cultures improved by reduced strain from difficult "situations"

ELIOT +DMH +MIT

MIT

Pavana, Mark, Jaleel, John, Tom, Riley

DEPT. OF MENTAL HEALTH

Joe, Deb

ELIOT

Mary, Christina, Keith

"I ALONE CANNOT CHANGE THE WORLD, BUT I CAN CAST A STONE ACROSS THE WATERS TO CREATE MANY RIPPLES."

- MOTHER THERESA

APPENDIX

implementation guide

Week 1: Call Hubs and join the team

EXISTING HUBS

Worcester HUB Contact
John Genkos 508-799-1175 ext 31309
GenkosJ@worcesterma.gov
Eric Batista 508-799-1175 ext 31312
BatistaE@worcesterma.gov

Springfield HUB Contact

Jamaica Plain HUB Contact

Lawrence HUB Contact

Vilma Martinez 978-620-3526
community development & HUB

East Boston HUB Contact

Medford HUB Contact

STEPS FOR LAUNCH IN EVERETT

TEAM

Get top down support.
Call **police chief.** Request meeting to discuss success of HUB and offer data on how it will benefit Everett.
Steven Mazzie. office: 617-389-2120   www.everettpolicema.com/chiefs_page.html
Call **city council** members or attend meeting (7 p.m. 2nd/4th monday's) Everett City Hall 484 Broadway
http://www.cityofeverett.com/150/City-Council

STAKEHOLDERS

Select critical stakeholders based on most complex & critical situations.

Optional participants to invite to the weekly meeting
Schools, child welfare services, mental health agencies, addiction services, law enforcement, hospitals, city government, probate (youth & adult), housing services, correctional facilities, youth serving agencies, emergency services