



AT-RISK RESIDENTS THINK TANK

Meeting 2 | October 5, 2015

Discussion of Collaborative Initiative Ideas from Meeting 1

#	New Collaborative Initiative Idea	Comments
1	Network of Service Providers for “At-Risk” Residents (similar to Homeless Services Network)	<ul style="list-style-type: none"> • There are many organizations out in the community, and it’s not always clear what they all do, and it can be difficult for other organizations to keep track • MEDIC is taking the lead in the disaster emergency response plan for at-risk populations • Possible role for United Way’s 211 service?
2	Homelessness Informational Portal that allows users to search on agency and need	<ul style="list-style-type: none"> • Parks and Libraries are important collaborative spaces for providing services; they are important places where work can be done with established assets
3	Disaster Emergency Response Plan that addresses how we will protect/support elderly and medically-needy	
4	Mechanism that allows organizations to easily come together and jointly apply for grants	<ul style="list-style-type: none"> • Because many organizations are applying for the same grants, the grant application may be able to be strengthened in organizations can come together and apply jointly
5	Centralized Informational Portal containing descriptions and contact information for service providers, volunteer opportunities, and funding sources	<ul style="list-style-type: none"> • There is an existing portal to seek volunteers
6	Establish a set of common and standard outcome measures for at-risk residents services (could be applied to social services throughout the community)	<ul style="list-style-type: none"> • Organizations do a good job at providing services, but there is not a lot of data on outcomes, so there is a need for single definition for positive outcomes related to at-risk residents
7	Focused Work Groups to Address Community Issues (i.e. refugee resettlement and human trafficking)	<ul style="list-style-type: none"> • Refugee and human trafficking are two major issues in our communities, so there should be an effort to drill down on what is happening around those issues • Transportation is a major issue for residents to get to services; can a stakeholder come to the At-Risk conversation (i.e. Easy Rider and CATS)





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Represented Organizations & Their Current Initiatives

Habitat for Humanity

In addition to building houses and home ownership programs, HFH provides critical home repair opportunities

Center City Partners

Housing First initiative is ongoing; State of the Plate Report that updates a study on access to healthy food in Charlotte

Arts & Science Council

Culture Blocks Program: looking at communities in Charlotte that are considered “cultural deserts” and working to bring more cultural services programs to those areas

Community Link

Works with the homeless population and those who are at risk of becoming homeless; provide with referrals

Apartment Association

Seeking feedback on how they can get more involved in helping to house at-risk populations

Mecklenburg County Park & Rec

Operates the Community Senior Center; will have a renewed interest in community gardens

Learning Help Centers of Charlotte

Provide low-income residents (one step above homeless—many immigrants and refugees) with services so they will stay with in a community to build happy and health communities; after-school programs, family stability program, etc.

Charlotte Works

Operates the NC Careers Services Centers; works with residents who are unemployed or underemployed to get them back to work or in a better-paying job; also working to address barriers to education in youth

Mecklenburg County Dept. of Social Services

The MEDIC frequent flyers group addresses the individuals who are using emergency services a lot

Coordinated Assessment for Homeless Services

Provides individuals with where they can go and what opportunities/services are available to them

Homeless Services Network

Approx. 40 organizations that gather once a month to discuss different issues and programs; entirely volunteer-based; homelesservicesnetwork.org

Developing New Collaborative Initiative Ideas

Networks for At-Risk Residents can establish the specific work needed for that population (emergency response plan, joint grant applications, volunteer opportunities, funding sources, set of common and standard outcome measures)



These networks need to exist on a continuum that allows individuals to move from one stage to the next (homeless to getting a job to get a healthcare, etc.)

Is a portal a lot less useful than convening? Is it more effective just to have certain times during the year at which organizations gather to discuss issues around a certain topic?

Is there an opportunity for a common application with at-risk services?

Conclusion:

Need a series of at-risk networks that focus on specific at-risk populations. Some example focus-populations could be

- Youth
- Foster Youth
- Post-Foster Care Youth, Between 19-21
- Mentally Ill/Disabled
- Substance Abuse
- Diabetes
- Handicap/Disabled
- Newcomers
- Senior Citizens (Park and Rec as potential lead)
- LGBT
- Domestic Violence Victims
- Job-Seekers
- Homeless
- Human Trafficking Victims
- Refugees
- Literacy
- Veterans

Next Steps

1. Invite groups focusing on serving these populations to the next meeting to discuss the need for developing networks to address them. The following are the two key considerations for this network approach:
 - a. (Idea 1b) Identify which of those groups may be the first to consider for development for their own Individual At-Risk Network
 - i. Potential Criteria: Passion, Focus, Viability, Impact
 - b. (Idea 1a) Have chairs of the Individual At-Risk Networks meet as a full group to:
 - i. Coordinate services if any deal with the same constituents
 - ii. Address the Information Portal (more centrally housed) – Possibly using 211 as a starting point for development
 1. We may want to invite a United Way contact to discuss 211
2. Invite the Homeless Services Network to the next meeting to discuss lessons learned; also discuss any lessons learned from the County's FALT groups that may apply to the new Individual At-Risk Networks
3. Have Kelly (HSN) provide an overview of the HSN structure to use with the new network groups
4. Look at Viability and Impact for the 4 other New Collaborative Initiatives: 2/5 Combined, 3, 4, and 6



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Important Follow Up Questions

Is there a survey that can determine if groups need a network? Encouraging sharing!

Are there specific communities/neighborhoods that need more focus?

Who are the specific at-risk populations?

What is the status of County FALTS (focus area leadership teams)? How can this idea be applied to the at-risk residents group? Lessons learned?

How can you ensure that all the providers are showing up?

How do we ensure that we aren't building silos?

List of services available in County?

