



Community Social Supports Strand

Issue Analysis

Existing Efforts

The Human Service Collaborating Alliance has existed in our community for over 20 years and encompasses multiple government agencies, nonprofits and individuals who are interested in Collaborating human service related information for our community. It has traditionally had the backbone support of a part time coordinator to help keep the work of the collaborative organized and efficient.

Another existing effort was the United Way Community Solution's Team. They also addressed, over a number of years, some of the aspects of community and social supports with many of the same participants. While both the United Way Community Solution's Team and the Human Services Coordinating Alliance worked together to solve problems, neither were operating under a long term plan and both were open to the idea of working collaboratively to create one.

When the Jackson 2020 group invited the public to participate in this stand, a nice mixture of participants signed up to help create a plan. We had government leaders, service providers, and concerned citizens. A number of participants served on the Human Service Coordinating Alliance and/or the Community Solution's Team. The initial team of participants met together and began the process of identifying stakeholders and assessing the current reality.

Stakeholder Analysis

The initial Jackson 2020 team broke down stakeholders into the following groups:

Service Providers – Service providers are the backbone of the community and social supports structure. Community and social support service providers covers an expansive list of agencies and organizations from state government to local agencies. A popular service in Jackson is the 211 call center that connects people with services.

Businesses – Businesses play a key role in community and social supports structure such as the willingness of small businesses to except EBT cards. Businesses also financially support in some instances and serve on boards in other instances.

Non-Profits – Many of the service providers are also non-profit organizations such as disability connections, the United Way, and the Jackson Community Foundation. These



organizations fill necessary gaps that may not be addressed adequately through public organizations.

Clients – Community and social supports exist to help the population to be self-sufficient and/or to take care of one another. Listening to the clients is essential to provide the correct services.

Faith Based Community - The faith based community is a necessary part of supporting the community's needs. The faith based communities sponsor food banks, services for the homeless, counseling, cash assistance, and other aid.

Tax Payer – Tax payers support many of the services needed to address community and social needs.

Residents – Not only do residents pay taxes, but they also donate to foundations and non-profits. Residents live amongst those who need valuable support systems such as mental health assistance.

Law Enforcement – Law enforcement is involved in prevention and enforcement efforts for keeping our communities peaceful.

Education – There is a very strong relationship between those in need of community and social supports and the user's level of education. Education is critical to keeping the public self-supporting.

Government – The other resource for supporting the community are services provided by local, state, and federal governments. Governments provide many necessary services and interventions on behalf of our community.

All of the above stakeholders play an individual and collective impact in community and social supports. Providers have done a yeoman's job working together, but have done so without a vision for the future and a plan to get there.

The HSCA realized through the Jackson 2020 process that one of their main goals will be to have a broader representation on the HSCA to be sure that all community social supports are coordinated and to consistently pursue the perspective of the community that utilized community social support services.

Current Reality

The Jackson 2020 Community and Social Support's Team broke down the community and social supports into the following categories.



Housing
Disability
Transportation
Substance Abuse
Banking
Substance Abuse
Medical

Utilities
Education
Mental Health
Food
Child Care
Employment
Financial/Asset Planning

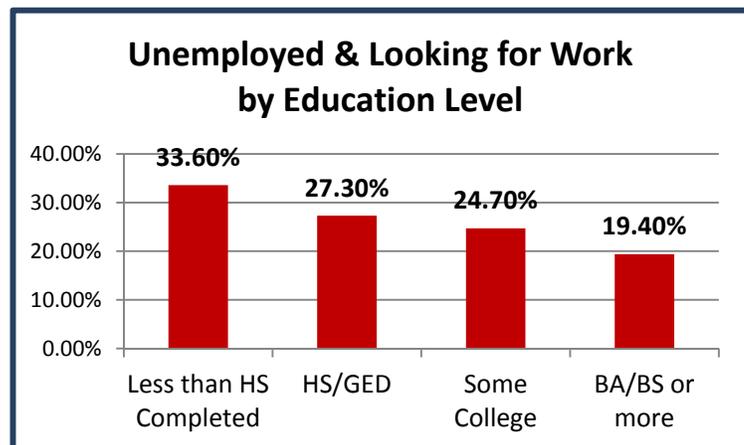
Housing – A common measurement of whether housing is affordable is that it should not be more than 30% of the household income. In Jackson County, 30.2% of homeowners pay more than 30% of their income towards home purchase costs. As for renters, 44.9% of that group pays more than 30% of their income toward housing. Rental payment assistance accounts for the second highest unmet needs and the fourth most requested assistance according to the 211 call center data. Homes are extremely affordable in Jackson, so the problem is more about income than housing costs.

Utilities – Electric and gas payment assistance account for two of the top five unmet needs in the Jackson Community as measured by the 211 call center. Electric service is the number one item for which assistance is requested. In March 2012 the State Emergency Relief (SER) fund for utilities, shown in the adjacent table, paid 1,476 payments for a cost of \$284,971.

State Emergency Relief (SER) Utilities – March 2012	Number of Payments	Payment Total Amounts
Totals	1,476	\$284,971
Electricity	729	\$126,796
Heating	722	\$133,420
Furnace repair	2	\$2,912

Disability – Many children and adults are challenged with various disabilities. Disability is manifest in the physical, cognitive, mental, sensory, emotional, or developmental capacity of an individual. Community and social support networks play a significant role to individuals and families suffering from one or more forms of disability.

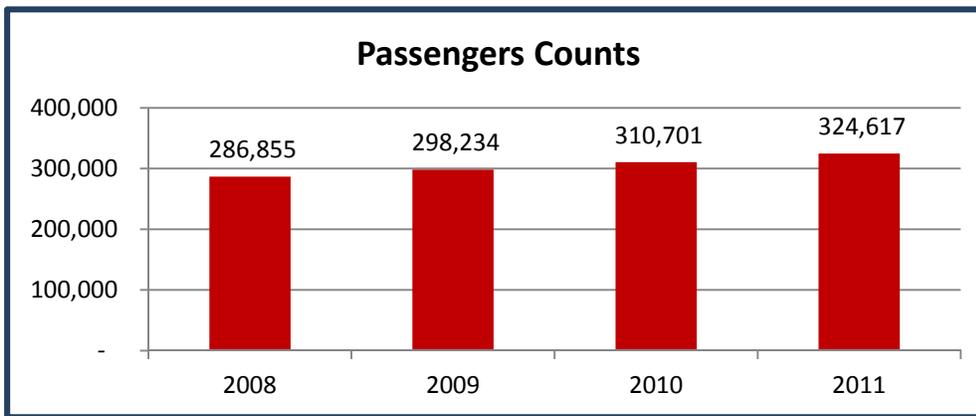
Education – As reported in the education strategic plan, educational





attainment is very low in Jackson and is strongly related to mental health issues. Only 25.2% of adults have a bachelor’s degree or higher, which poses problems for employment and job growth. The chart below shows actual data from Jackson, Hillsdale, and Lenawee County linking unemployment to educational attainment. Of those looking for work, 79.6% of them lacked a bachelor’s or higher degree. The National Citizens Survey showed a low perception of educational opportunities in Jackson despite having three degree granting institutes of higher education in Jackson and more than 20 schools within a 60 mile radius.

Transportation – Transportation is a major barrier to receiving services and maintaining employment. Out of a workforce of 61,645 working people approximately 600 (approximately



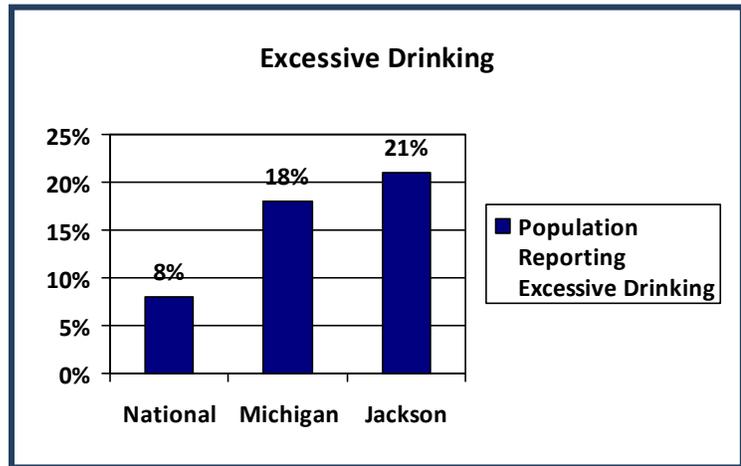
1%) use public transportation to attend work. Ridership on the city’s Jackson Transit Authority (JTA) has increased steadily since 2008 through 2011.

Mental Health – The Jackson Community has challenges, like many communities, with mental health. The Community Health Assessment reported that 13% of Jackson residents have been diagnosed with depression by a mental health professional. Ten percent (10%) of residents reported that they had so many problems that they could not deal with them. The chart below shows the number of services provide by Lifeways, a community mental health provider.

	Jackson	Jackson MI-A Served	State Served
Adult/mental illness served	4,310		140,904
Assertive Community Treatment	255	5.92%	3.87%
Supported Employment	8	.19%	1.35%
Peer Services	193	4.48%	9.03%
Family Psycho-Education	6	.14%	.63%
Dual Diagnosis	65	1.51%	1.06%



Substance Abuse – Substance Abuse is a danger not only amongst adults but young adults also. The chart to the right shows how Jackson compares to the State and the National average. More than one out of five adults or 21% of the population self-reported excessive drinking within the past month.



Of Jackson High School students, 37% self-reported drinking alcohol in the past 30 days. The Michigan Profile for Healthy Youth reported that 23.7% of Jackson High School students reported having 5 or more drinks in a row, within a couple of hours, during the past 30 days.

Food – Proper nutrition impacts our lives in so many different ways. Food assistance is a critical need in the Jackson Community.

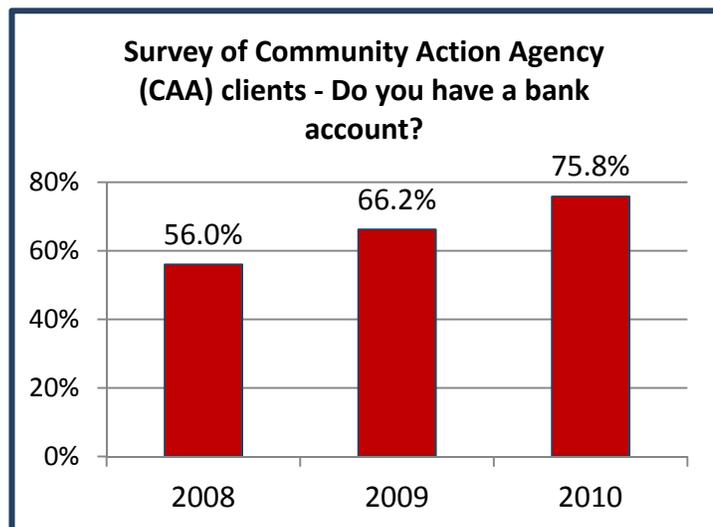
According to the State of Michigan Department of Human Services, there are 30,377 recipients per month receiving food stamps in

Food Assistance Program Subsidies per Month	
# of recipients	30,377
Payments	\$4,000,238
Average per recipient	\$131

Jackson County. The average cost per month of those payments is \$4,000,238. The American Community Survey estimates that 47.6% of those households receiving food stamps have children under 18 and 15.9% have one or more adults age 60 and over.

Banking and Financial/Asset Planning –

Financial literacy is another challenge in the Jackson Community. A survey conducted by the Jackson Lenawee Community Action Agency showed progress in clients using a bank from 2008 to 2010.

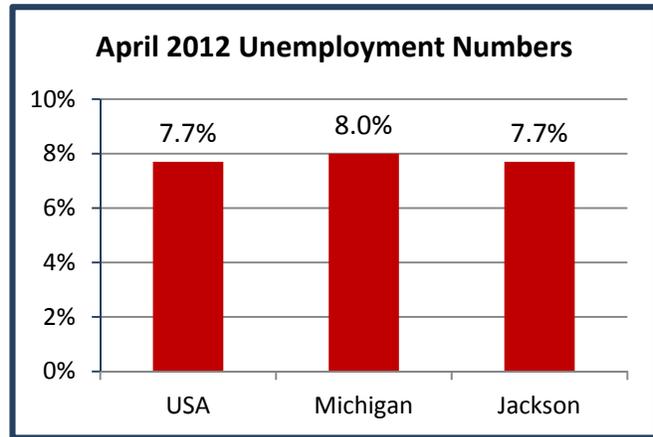




Child Care – The State provides a significant amount of subsidies for child care. Total child care subsidies per month are \$202,209. Those expenses serve 886 children for an average cost per child of \$228.

	Jackson
# Children Served	886
Total Payments	\$202,209
Avg. per child	\$228

Employment – Progress has been made in employment from the high teens in 2009 to below 8% currently. Over 2,500 jobs were added from April 2011 to April 2012. The numbers to the left show unemployment in Jackson from April 2012 compared to the nation and the state. Jackson County has traditionally been very close to the State of Michigan in unemployment percentage.



Solving unemployment is complex and requires collective effort in business expansion and attraction and workforce development. The Community and Social Supports strand expects that the Economic and Workforce Development team will be at the lead of addressing employment issues. The Community and Social Supports strand should work collaboratively with the Economic Development strand where these areas overlap.

Medical –

Jackson County ranks 48th out of 83 in the state in terms of wellness indicators. Jackson ranks poorly in adult obesity, smoking, and physical activity.

	Jackson	National Benchmark	Michigan
Adult Obesity	37%	25%	32%
Physical inactivity	28%	21%	25%
Sexual infections	415	84	457
Teen birth rate	50	22	34
Diabetic Screening	87%	89%	84%
Limited access to healthy foods	13%	0	6%

The National Citizen Survey showed positive movement in the percent of citizens rating the availability of affordable health care in Jackson County as excellent or good. In 2009 only 30% of respondents said that the availability of affordable health care was excellent or good. In 2011, 40% of respondents said it was good or excellent.



Surveying Clients and Providers

As part of the assessment of the current reality, we developed a survey for both providers of community social supports and clients. One of the Jackson 2020 team members went to different service providers and assisted clients in completing the survey. The survey offers a great perspective from clients. The provider survey was done by word of mouth through the Human Services Coordinating Alliance (HSCA). Both surveys were administered using survey monkey, however the client surveys were almost exclusively filled out by paper copy and entered in afterwards. We had 57 responses to the client survey and 56 responses to the provider survey. The answers may be somewhat skewed toward the location in which the survey was completed.

Client Survey

A variety of roadblocks contribute towards not being able to receive service. When asked what makes it difficult to get places, 75% of clients said transportation followed by 26.9% saying cost, 23.1% saying hours of operation, and 21.2% saying location. When asked if the client finds it difficult to get from one agency provider to another, 62% responded in the affirmative.

The following table shows responses to the question “Were one or more services able to meet your needs in the areas listed?” The highest response was with Food, which may be because

several of the survey locations were at food banks. The next highest response to the question was medical (47.5%), transportation (42.5%), and utilities (28.9%) in that order.

Also of interesting note were the services that were not used by those clients. The services with over 50% of the clients reporting not having used were financial/asset management (66.7%), substance abuse (65.7%), child care (63.9%), education (62.9%), banking (59.5%), disability (51.4%), dental care (51.3%), and mental health (50.0%).

	Yes	No	Have Not Used
Housing	21.4%	33.3%	45.2%
Utilities	28.9%	23.7%	47.4%
Disability	24.3%	24.3%	51.4%
Food	87.0%	6.5%	6.5%
Education	22.9%	14.3%	62.9%
Transportation	42.5%	25.0%	32.5%
Banking	18.9%	21.6%	59.5%
Financial/Asset Management	5.6%	27.8%	66.7%
Medical	47.5%	22.5%	30.0%
Employment	18.4%	42.1%	39.5%
Substance Abuse	11.4%	22.9%	65.7%
Child Care	13.9%	22.2%	63.9%
Mental Health	18.4%	31.6%	50.0%
Dental Care	20.5%	28.2%	51.3%
Vision Care	22.0%	29.3%	48.8%

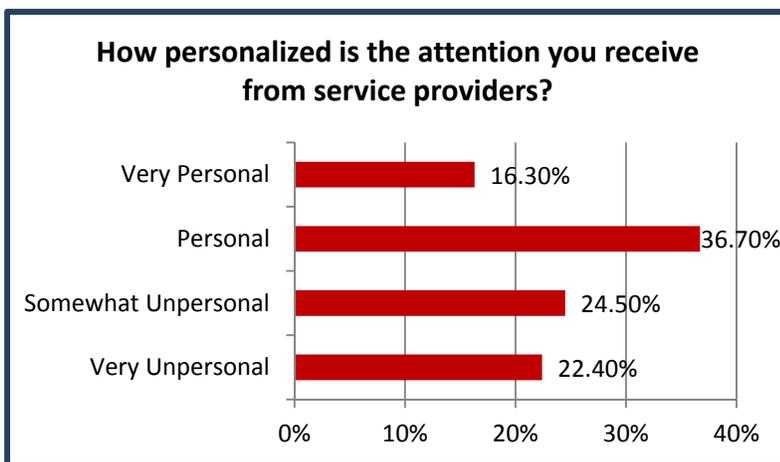


Nearly all areas received a high response to the question “Do you know where to get help for the following services?” Most responses were greater than 60% having an awareness of where to get help for that particular service. The only areas where less than 60% of respondents said they did not know where to go for service were financial/asset management (41.9%), child care (54.8%), education (56%), vision care (56.5%), and banking (58.1%).

	Yes	No
Housing	76.0%	24.0%
Utilities	72.3%	27.7%
Disability	73.3%	26.7%
Food	93.8%	6.3%
Education	56.5%	43.5%
Transportation	66.0%	34.0%
Banking	58.1%	41.9%
Financial/Asset Management	41.9%	58.1%
Medical	71.1%	28.9%
Employment	76.1%	23.9%
Substance Abuse	60.5%	39.5%
Child Care	54.8%	45.2%
Mental Health	66.7%	33.3%
Dental Care	60.0%	40.0%
Vision Care	56.5%	43.5%

The survey addressed multiple questions about service delivery. When asked “Are service providers able to coordinate care for you with other service providers for more services, 65.3% said yes. When asked what level of service providers gave to help them navigate the system, 43.2% agreed that “I’m left to myself to move around and find services I need”, while 47.7% agreed “I receive help in pointing me to

the right people and places to go. Very few (9.1%) agreed with the statement “A worker contacts other service providers for me so that they expect me when I come. No one agreed with the statement “A worker acts on my behalf to coordinate other services for me without me having to move around to other service providers.” In general, 56.9% of clients said they were satisfied or extremely satisfied with the level of care they receive from community support services.



The adjacent chart shows client’s perception of how personal the service was from providers. The response was split relatively evenly of personal versus impersonal service. When asked if they felt service workers advocated for them, 64.6% said yes.

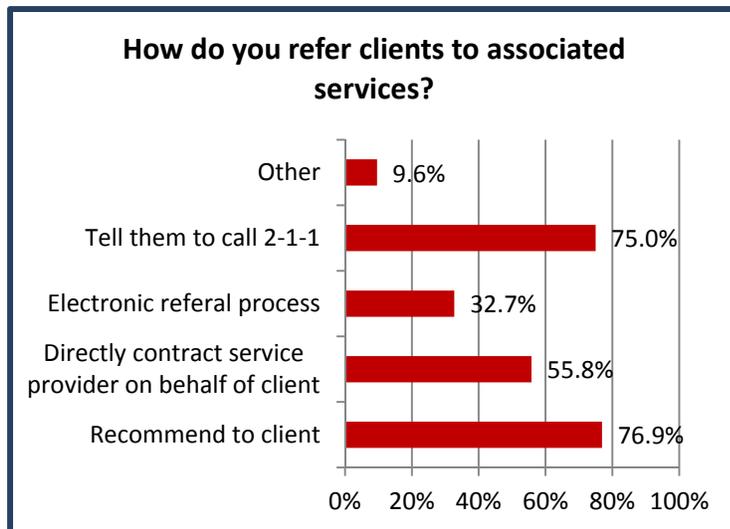


Provider Survey

It would seem obvious that there are never enough resources to serve all those needing services. The providers responding to our survey confirmed that notion with 49.1% saying they do not have sufficient resources (human and financial) to meet their needs. The providers said that paid staff, volunteers, and revenue were the top resources needed. Respondents believed (72.7%) that they were providing services in the most efficient way possible.

When asked about the need to work with partners to be successful, 69.1% agreed that it is very essential, and 70.9% said that a method was in place to work with partners. Providers believe (90.6%) that they have expertise on staff to deal with the situations with which they come into contact.

Providers identified many of the same barriers to service as the clients did. Transportation was the number one barrier (67.3%) identified by the providers followed by client eligibility (40.8%), affordability (24.5%), referrals to the correct agency (24.5%), and hours of operation (22.4%).



Most providers (90.6%) said they know where to refer clients and 71.7% of them said they had access to a registry of service providers. From the provider’s point of view, there is much direct contract with service providers on behalf of the client. The adjacent chart shows how providers refer clients to associated services.

Asset Based Community Development

The Jackson 2020 team for Community and Social Supports brainstormed on Jackson’s assets and came up with the following assets.

Collaboration between Service Providers – We are fortunate that our community has a great history of working together. The Human Services Coordinating Alliance has had a funding mechanism to utilize a coordinator. This is the one place and time that all the decision-makers of our local governmental and nonprofit organizations convene to talk about our community’s



issues and solutions that make sense. We leverage this asset by recruiting a broader constituency to actively participate in the effort of coordination.

Strong Foundation Support – Jackson has a number of local foundations whose staffs are extremely engaged in community building.

Strong Non-Profits – Jackson has a number of non-profits whose staff are passionate and engaged in the various collaborations in the community.

Diverse Community – Jackson’s community has many diverse populations that contribute to a rich culture.

Faith Based Support – A strong faith-based community exists in Jackson as evidenced by the National Citizen Survey. Jackson had above average participation in religious services. Several ministerial associations exist in Jackson, where faith based leaders work together to solve community issues.

Neighborhood Associations – Several neighborhood associations exist in the Jackson Community. These associations demonstrate the spirit of self-sufficiency and collaboration within their neighborhood.

Central Location – Jackson is fortunate that the City of Jackson is centrally located within the County. All services for residents can be found within the City.

Low Cost Recreation – Jackson has a plethora of recreational opportunities and recreation all throughout the City and in the outer parts of the County. These provide low cost alternatives for the population to stay health and fit.

Vision

The vision of the Human Services Collaborating Alliance is:

To ensure a system of support for members of our community. The value and intent of Human Services Collaborating Alliance (HSCA) is to serve as a leader to the human services community and as the “one roof”, in an effort to coordinate/ facilitate sufficient delivery and improve access to services within a person centered framework.

Action

Our goal is to increase the amount of collaboration amongst community supports for the purpose of making it efficient, cohesive, sufficient, and effective.



We will measure our success by the following metrics:

1. HSCA membership will increase by 30% and active participation will increase by 50%.
2. Local collaboratives/ coalitions will be represented by a liaison providing quarterly updates on activities, achievements and progress in meeting community need for their area of service. – by September 2013
3. Improve ability to meet top 3 unmet needs as identified through community needs assessments and 2-1-1 baseline annual data by 10% in each area

Team Members

Wendy Gonzalez (Council Prevention of Child Abuse & Neglect)	(Jackson Community College)
Susan Beebe (Family Court)	Bethany Timmons (United Way of Jackson County)
Julie Alexander (Jackson County Commissioner)	Brian Philson (Highfields)
Ted Westmeier (Jackson County Health Department)	Catherine Brechtelsbauer (Jackson County Intermediate School District)
Lesia Pikaart (disAbility Connections, Inc.)	Dana Emerson (Jackson Community Foundation)
Sarah Hartzler (South Central Michigan Works!)	Maribeth Caldwell, (LifeWays)
Judy Jove (Family Service & Children’s Aid)	Ed Woods (South Central Michigan Works!)
Matt Murphy (Allegiance Health)	Hattie Oliver
Ginny Woods-Broderick (Area Agency on Aging)	Ken Toll (United Way of Jackson County)
Becky Filip (Aware, Inc)	Kevin Oxley (Jackson County Intermediate School District)
Lieutenant Christopher Simpson, (Jackson Police Department)	Kim Graham (Jackson County – Assistant Prosecuting Attorney)
Toby Berry (Community Action Agency)	Major Jason Pollum (Salvation Army)



Kylee Miller (Marriage Matters Jackson)	Marce Wandell (Jackson County Department on Aging)
Sue Lewis (Catholic Charities)	Kelly Sheppard (Great Start Collaborative)
Jerome Colwell (Department of Human Services) Vice Chair	Mary Cunningham-Deluca (Community Action Agency)
Cameron McCullum (Jackson Area Transportation Authority)	Molly Kaser (Center for Family Health)
Monica Moser (Jackson Community Foundation) Chair	Regina Funkhouser (Nonprofit Network) Coordinator
Shelly Hendrick (Habitat for Humanity)	Willye Pigott (Jackson Public Schools)
Phil Tocco (MSU Extension)	

Attachments

Community & Social Supports Action Plan



Strand: Community Supports
 The value and intent of Human Services Collaborating Alliance (HSCA) is to serve as a leader to the human services community and as the “one roof”, in an effort to coordinate/ facilitate sufficient delivery and improve access to services within a person centered framework.

HSCA’s mission is to ensure a system of support for members of our community.

Goal: Improve collaboration and coordination amongst community support organizations

Measurements of Success for the Goal:

1. HSCA membership will increase by 30% and active participation will increase by 50%.
2. Local collaboratives/ coalitions will be represented by a liaison providing quarterly updates on activities, achievements and progress in meeting community need for their area of service. – by September 2013
3. Improve ability to meet top 3 unmet needs as identified through community needs assessments and 2-1-1 baseline annual data by 10% in each area

Goal (Long Version): Increase the amount of collaboration amongst community supports for the purpose of making it efficient, cohesive, sufficient, and effective

Strategy	Increase non-profit knowledge of possible resources
----------	-----------------------------------------------------

Activities	Resources Needed (e.g. Cost, Equipment)	Timeline		Person/Entity Responsible & Involved	Measurable Outcome/ Evidence of Success		
		Start Date	End Date		Description	Present	Target
Improve use and review of community needs assessments, service use and data collection activities through HSCA including and starting with 211 data	Create Action Team structure to allow for meaningful processing and evaluation of community data, including 211 data and recommend improved responses	Jan 2013	Ongoing	HSCA Executive Committee	Action Team structure developed and organizational chart developed	0	Ongoing reporting



Jackson County Strategic Plan | 2020

	(Livingston Co. HSB Model)						
Increase use of 2-1-1 E mail Blasts among agencies and organizations	Host annual training	March 2013	Ongoing	211	Completion of training 211 is better utilized	0 Baseline for 211 use	Completed
Develop map and contacts info for collaborative efforts in Jackson County and house on 2-1-1 website	Mapping tool (Mapping Coalitions and Networks – Ready by 211 Example)	April 2013	June 2013 with annual revisions	HSCA	Map is approved	0	Map is a valuable tool that is utilized
Develop a plan for live monthly community educational forums to increase knowledge of resources available through 2-1-1	211 develop a planning curriculum and develop relationships with key stakeholders to host and promote forums.	June 2013	Ongoing	211	Forums scheduled and well attended	0	6 completed Average attendance is 10 people
Strategy	Determine a method for matching capacities with needs						
Activities	Resources Needed (e.g. Cost, Equipment)	Timeline		Person/Entity Responsible & Involved	Measurable Outcome/ Evidence of Success		
		Start Date	End Date		Description	Present	Target
Mapping community resources in relationship to their: <ul style="list-style-type: none"> • Service • Eligibility criteria • Age and Gender To identify gaps	Mapping tool (Mapping Coalitions and Networks – Ready by 21 Example)	April 2013	June 2013 with annual revisions	HSCA	Map is approved	0	Map is a valuable tool that is utilized



Jackson County Strategic Plan | 2020

Utilize community survey process to identify priority needs and resources from customer perspective.	Create an action team devoted to initiate, compile and process survey results to report to HSCA	Jan 2013	Ongoing	HSCA	100 surveys are completed	0	100
Develop process for community needs assessment and identification of gaps from human service point of view.	Utilize survey data	March 2013	Ongoing	Action Team	Gaps and services are identified	211 list of top 10	211 list matches survey data
Strategy	Improving alignment, involvement and support for Jackson collaboration groups in HSCA						
Activities	Resources Needed (e.g. Cost, Equipment)	Timeline		Person/Entity Responsible & Involved	Measurable Outcome/ Evidence of Success		
					Description	Present	Target
Develop system for collaboration groups to update HSCA on activities and goals	Develop an information flow chart and schedule	Sept 2013	Ongoing	HSCA	Effective planning process	0	Monthly reports from key external groups
Recruit key stakeholders from collaborative groups for participation in HSCA	Assessment of current members and identification of membership gaps	June 2013	Ongoing	HSCA	Effective recruitment strategies	0	10 new members
Identify funding mechanisms or resources for coordinator hours to support HSCA and collaborative activities. (Backbone Support organization for Community Supports)	Research options and survey current members ability to contribute toward membership	Sept 2013	Funding received by Nov 2013	HSCA	Part time coordinator fully funded	0	Hired by Jan 2014