PROJECT BRIEF: PARTNERSHIPS IN ST. LOUIS BEHAVIORAL HEALTH & HOUSING SERVICES

PROBLEM SUMMARY

Unhoused individuals, especially those who have spent long or recurring periods of time unsheltered, have varied needs and require consistent cross-sector supports to experience lasting impact. Unfortunately, the current service delivery system is rarely positioned to answer that call. This leaves many individuals without access to "right-fit" services–those that meet needs of clients and adjust to them over time.

Many providers engage in collaborative projects to fill these gaps. This cross-sector work is promising and has demonstrated positive impact regionally; however, funding constraints, organizational red tape, regulatory requirements, and other limitations stifle sustainability.

PROJECT SCOPE

To address these challenges, Gateway Housing First has convened key collaborators to identify barriers, successes, and opportunities for building stronger partnerships across behavioral health and housing service delivery. Over a three session workshop series led by the Regional Response Team, participants reflected on the current state of collaboration, considered where there were leverage points for systems change, and identified a set of areas for improving collaboration and, most importantly, community impact.

WORKSHOP SERIES & PROCESS

Session One: Dynamic Problem Definition

Session Two: Systems Insights

Session Three: Shared Strategy Development

OBJECTIVES

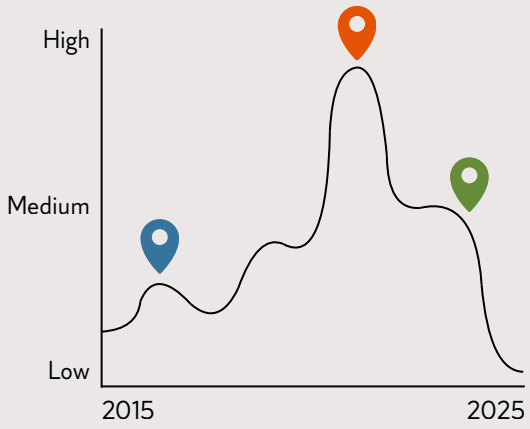
- Build understanding about what limits access to right-fit services.
- Strengthen coordinated cross-sector efforts that improve service access.
- Contextualize services and solutions in long-term health and wellness.
- Create shared strategies that optimize use of existing funding and resources.

GROUNDING STORY

While collaboration often builds networks, partners must invest in a shared approach to improve outcomes. Individual and organizational representatives face myriad barriers in sustaining these commitments–from funding to the political environment to historical context of relationships.

GRAPH: HISTORICAL PATTERN OF COMMITMENT

- As individuals are increasingly impacted by disconnected services, providers come together to solve long-standing issues.
- Crises like COVID, flooding, and disasters reinforce focus on urgent immediate needs. Commitment peaks.
- Large expenditures of resources and heavy burnout decrease engagement around long-term strategy.



BEST PRACTICES FOR SUCCESS IN BEHAVIORAL HEALTH & HOUSING COLLABORATIONS

SHARED, AGILE STRATEGY DRIVEN BY AN ALIGNED APPROACH AND VALUES

Shared values motivate collaboration, but as need increases despite coordinated efforts, sustained commitment is challenged. Strategies that anchor shared values and support a proactive approach to solutions can strengthen member engagement.

HEALTHY MEMBER ORGANIZATIONS WITH COMPLEMENTARY EXPERTISE

Collaborative success not only advances shared activities; it also supports individual and organizational skill development. When members have a menu of diverse tactics, the joint effort is less susceptible to negative impacts stemming from external shifts.

FLEXIBLE PARTNERSHIPS ROOTED IN MEANINGFUL RELATIONSHIP

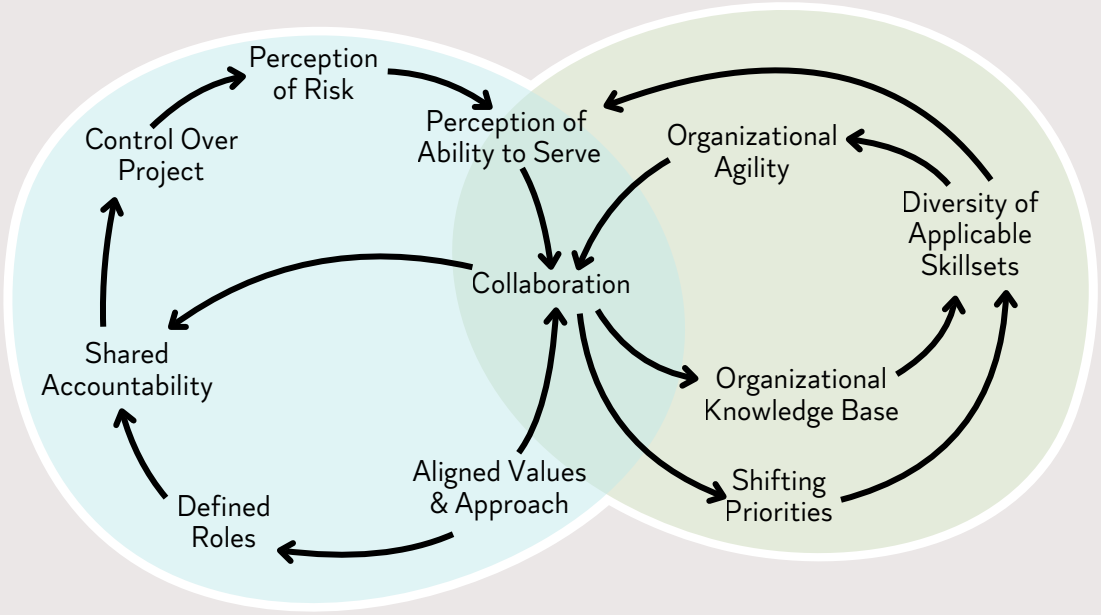
When projects are based on funding, political pressures, or regulatory requirements, sustainability measures can quickly fall apart and leave individual organizations to piecemeal fixes. Establishing shared purpose within relationship rather than a project scope can reinforce alignment with longer-term strategy.

TANGIBLE, COORDINATED PROJECTS GROUNDED IN ACCOUNTABILITY

As trust increases, individuals in collaboratives are more likely to share power and responsibility, but that doesn't always translate to the organizations themselves, which are often hyper-concerned with risk. Members sharing not just ownership but accountability can mitigate these tensions without creating new red tape that limits impact.

GHF WORKGROUP'S VISUALIZATION OF THE SYSTEM

About the Visual: To understand opportunities for action, this project used a tool called Community Based System Dynamics. The visual below is a diagram that explains what's happening in housing and behavioral health systems, giving participants space to explore innovative solutions and identify where they might make greatest impact.



The diagram, which was developed across two of the three workshops, depicts two key dynamics:

The first, organizational health, shows that trust and clear responsibilities grow collaboration; however, the resulting shared accountability can also limit long-term engagement. As member control decreases, agencies perceive greater levels of risk and may pull back to address it, even if formal agreements are in place.

The second, collaborative efficacy, demonstrates that collaboration can boost skills, agility, and service capacity of members but faces limitations due to urgent needs, staff limits, and shifting priorities that can reduce knowledge and disrupt progress.

RECOMMENDATIONS FOR THE CURRENT BEHAVIORAL HEALTH & HOUSING LANDSCAPE

WORKFORCE SUPPORTS

CHALLENGE:

Divides between investment and need lead to staff taking on more responsibility than they have capacity for, which leads to high burnout and turnover.

UNINTENDED CONSEQUENCE:

When service delivery faces extreme constraints, staff develop the perspective that serving high needs clients is next-to impossible, often believing that they or their organizations just don't have the skills needed to provide meaningful supports.

PROPOSED SOLUTIONS:

- Develop accountability measures that center and prioritize client well-being
- Co-create cross-sector trainings that leverage frontline skills and insights to better meet the needs of individuals with high acuity
- Increase opportunities for mentorship and shared supervision with cross-sector leaders in close proximity to the work
- Revise compensation structures, especially for direct service staff

COLLABORATIVE & PARTNER HEALTH

CHALLENGE:

Historically, collaboration has often been driven by external forces like funding and political will, meaning that efforts can stop short of equitable impact.

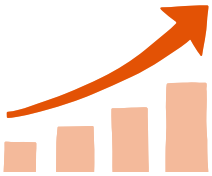
UNINTENDED CONSEQUENCE:

These external influences can put organizations at odds with each other and limit the effectiveness of collaborative projects. Consequently, partners often default to transactional relationships that advance external goals rather than approaches that build agile strategy.

PROPOSED SOLUTIONS:

- Establish grounding principles that build shared accountability across members
- Develop equitable processes for identifying formal and informal responsibilities of all members, including but not limited to collaborative-specific roles like co-chairs
- Clearly define and regularly revisit a common vision and values and externalize how each member's role is working towards associated goals
- Assess needed support for each project or initiative and strategically invest in dedicated capacity that doesn't overburden one organization or role

FUNDING, RISK & SUSTAINABILITY



CHALLENGE:

Community leaders have increasingly encouraged collaborative practice, but policy, regulations, and funding have not adjusted to meet the moment.

UNINTENDED CONSEQUENCE:

To address strict regulatory limitations and maintain partnerships, partnerships often have to promote resource sharing to accomplish goals. While this approach can offer a greater variety of services to clients, it also pushes organizations to increase efficiency by deprioritizing those with the highest need.

PROPOSED SOLUTIONS:

- Strategically distribute risk across the collaborative rather than assigning it to one or two partners
- Incorporate community need into risk assessments by emphasizing the role that regional impact plays in addressing risk factors long-term
- Educate funders about and encourage investment in right-fit services
- Adjust fee structures to more accurately reflect costs for providing right-fit services
- Explore add-ons and incentives that can sustain providers serving clients with varied needs

ACTION PLAN ON FUNDING, RISK & SUSTAINABILITY

SELECTED PRIORITY

INCREASE THE NUMBER OF PROVIDERS OFFERING RIGHT-FIT SERVICES TO CLIENTS WITH VARIED CARE NEEDS BY:

1. Adjusting fee structures to more accurately reflect costs of providing flexible, responsive services
2. Exploring add-ons and incentives that can sustain organizations providing right-fit services
3. Building a shared approach to risk mitigation that prioritizes individual and community well-being

Supportive Activity	Purpose & Description
Stakeholder Mapping	Identify individuals in behavioral health that currently receive service reimbursements and explore their level of interest in advocating for incentive changes. Identify potential areas of alignment or conflict across stakeholders.
Information Gathering	Conduct 1-1s with stakeholders to understand how adjustment of fee structures and other incentives would support sustained provision of right-fit services.
Strategy Development	Co-develop an advocacy strategy that encourages the Department of Mental Health to address calls for incentive changes. Select 1-2 individuals to lead implementation through at least one convening.
Advocacy Meeting with the Department of Mental Health	Present a proposal for incentive changes to decision makers within the Department of Mental Health.
Action Debrief & Plan Refinement	Convene leaders to reflect on successes, challenges, and opportunities from the Advocacy Meeting. Develop subsequent plans to address any unmet goals or emerging challenges as needed. Establish plans for communicating effort and impact of the work.

THANK YOU TO OUR CONTRIBUTORS!

Teresa Brandon
Teka Childress+
Nathaniel Dell
Cynthia Duffe+
Jaci Gallen+
David Haasis
Tony Hilkin
Caroline McDonald*
Amtoni Norris
Wendy Orson
Kaelin Richardson*
Leah Sanders
Zehra Uvalic
Nicole Warrington
Kotomi Yokokura*

LEGEND
+Organization lead
*Project facilitator

QUESTIONS ABOUT THIS PROJECT? CONTACT KRICHARDSON@STLGIVES.ORG