



THE LOUIS DE LA PARTE FLORIDA MENTAL HEALTH INSTITUTE

2005 Pinellas County Human Services Priorities Conference Summary Report



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The University of South Florida

The University of South Florida (USF), established in 1956 as a public university, is a comprehensive multi-campus research university serving more than 47,000 students. With four campuses, USF is home to medical clinics and hospitals, a major mental health research institute, and two public broadcasting stations. The University employs more than 3,112 full-time instructional faculty and 2,977 full-time staff. USF generates over \$290 million annually in sponsored research. Its endowment exceeds \$244 million and includes 55 endowed chairs. USF is classified as a Doctoral/Research University-Extensive, which is the highest classification by the Carnegie Foundation.

Louis de la Parte Florida Mental Health Institute

The Louis de la Parte Florida Mental Health Institute at the University of South Florida has a mission to strengthen mental health services throughout the state. The Institute provides research, training, education, technical assistance, and support services to mental health professionals and agencies as well as consumers, consumer organizations, and behavioral health advocates statewide. At the state level, the Institute works closely with the Departments of Children and Families (DCF), Corrections (DOC), Elder Affairs (DOEA), Education (DOE), and the Agency for Health Care Administration (AHCA), as well as with members and staff of the State Legislature and providers of mental health services throughout Florida.

Comprised of three primary research departments, Mental Health Law & Policy, Child & Family Studies, and Aging & Mental Health and a number of specialized centers, the Institute conducts research and program evaluations, provides training and consultations, and offers a number of academic courses at the masters and doctoral levels.

2005 Pinellas County Human Services Priorities Conference Summary Report

Overview

On March 2, 2005, influential leaders in Pinellas County Human Services gathered to discuss the state of the county and set priorities for the future. The starting point for this conversation was findings from a comprehensive assessment of services conducted by researchers at the Louis de la Parte Florida Mental Health Institute at the University of South Florida. The purpose of this brief report is to summarize the main points made in the conference in the hope that they can provide significant direction for the development of future plans and initiatives in this arena.

Themes and Observations

- 1. Funder coordination.** Although this is not the first time it has been suggested, this group reiterated the need for funding agencies that support work in the county to coordinate their efforts. Suggested areas of coordination included agreement on highest priorities; development of a common grant application; and use of common evaluations and audits.
- 2. Avoid zero-sum thinking.** Participants expressed their concern that the setting of specific priorities would direct crucial funding away from established areas of need, merely shifting the problem from one area to another. The analogy of building a house was introduced, and the point made that you don't take materials from the foundation to build the upper floors. While there was some enthusiasm for re-evaluating historical funding patterns, the group felt it would only be effective if there were a commitment to funding the "basics" along with any new investment priorities.
- 3. Funding priorities.** After a long discussion, and based upon the assessment, there was consensus that certain basic needs could be identified as priorities for the next few years. Taking a cue from Maslow, participants pointed out that even when more specialized services are offered, the majority of citizens want help with the basics (a content analysis of 211 calls supports this notion). Specifically, the group agreed to focus on the following basic needs:
 - a. Transportation (both public and private);
 - b. Affordable Health Care (including behavioral health, in-home, and prescriptions); and
 - c. Affordable Housing (including emergency, transitional, and rental).
- 4. Consider "basic" needs in historical and socio-economic context.** Participants were quick to point out that what counts as "basic" in this part of Florida is different from other geographical locations. The uniqueness of the service economy and the kinds of jobs that it creates, along with the fact that the county is "built out" leads to a very specific needs profile. So long as the fundamental economics of the state stay the same, we can expect these basic needs to persist and require investment support.

5. **Develop a funding database.** Participants were quick to point out that the data on human services provided by the researchers captured only a small portion of the monies provided by public and private sources to support activities in the county. There was consensus on the need for some entity—possibly the county, or FMHI—to create and maintain a more accurate funding database that reflected the actual expenses in the de facto system of support.
6. **Create a funding matrix.** One importance observation from the conference was that human services needs often get expressed in two very different ways, leading to inappropriate and unhelpful comparisons. Specifically, some projects are couched in terms of services (e.g., daycare, food, transportation, safety) while others are described with regard to target populations (e.g., children, homeless, battered women). The group was enthusiastic about developing a funding matrix that displayed investments as the intersection of services and populations, and providing this matrix to funders as one tool for improving coordination.
7. **Framing priorities for the public.** There was agreement in the group that how the human services message was delivered to the public would be crucial to its persuasiveness. While it would be easy to find evidence for the underfunding of human services in the county, this argument would not carry much weight on its own, given the current political climate. An alternative framework would be strengths-based, emphasizing the unusual confluence of excellent services in the area (some of national distinction), arguing that Pinellas is “better than most, but not as good as it needs to be.” Along the same lines, it is not that service providers are under-funded, but rather that needy citizens are underserved—we can and should do better. Finally, participants maintained that calls to compassion are not likely to succeed today; a more effective approach would likely emphasize the impact of better services on public safety.
8. **Remove the complexity from navigating the system.** The overriding observation concerning human services from the provider’s and user’s perspectives is that the system is fragmented and therefore very hard to navigate. This is not a new observation, but the problem persists and may even be growing. Funding agencies must turn their attention to processes and technologies that allow for the seamless coordination of services and the sharing of important information through the county. In so doing, it is important to be forward-thinking and not use only old models such as case-management that have sometimes been proven to be inefficient and too expensive.
9. **Focus on the future.** Participants saw a need to build into the coordination process some reflexive mechanism to encourage funders and providers to identify future needs. While the current assessment does a good job of identifying the current landscape with regard to needs and services, a high-level, strategic conversation about the future of the county and likely emergent needs over the next two decades, while challenging, would be invaluable for planning purposes.

10. **A recognition of influence.** The conference closed with the comment that anything this group chose to make a clear priority would likely receive considerable focus in the county; that this group of individuals is most influential in their positions and informal networks. This observation was offered as an encouragement to participants to come together and recognize their collective power to make improvements in the county.

Conclusion

The conference concluded with a shared desire on the part of all participants to utilize these themes and observation in planning for human services in the county. Specifically, attendees were resolved to develop a more accurate funding database; use the funding matrix to coordinate funding activity; and refine the key priorities message (emphasizing transportation, health care, and housing) both for participants in the system and the general public.



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