

Logic Model to Create Permanent Supportive & Affordable Housing in Rhode Island - Prepared by the RI Coalition for the Homeless, the Corporation for Supportive Housing, The Housing Action Coalition of Rhode Island & the Housing Network of Rhode Island

Theory of Change: If effective public policy advocacy models are implemented in Rhode Island then permanent supportive housing models and affordable housing production programs that are adequately funded by capital and operating support will result and significantly reduce or eliminate homelessness.

TEXT KEY: Black = work/resources currently applied to build capacities to scale / Blue = work begun, but with limited or start-up capacities available to bring to scale / Red = capacity absent & opportunities exist for funding, resources and support / Green = work accomplished

INPUTS	ACTIVITIES	OUTPUTS	SHORT-TERM OUTCOMES - 1-3 YEARS	MID-TERM OUTCOMES 4-7 YEARS	LONG-TERM OUTCOMES 8 -12 YEARS	INDICATORS	DATA COLLECTION TOOL
<p>Adoption & Implementation of Effective Models</p> <p>Partnership between RICH/CSH/HACRI/ HNRI</p> <p>Effective/Working Relationships Between the Principal Partnership & Allies (HWRI, LISC, CAP Assoc., Fannie Mae, HRC, Poverty Advocates, Community Groups)</p> <p>Effective/Working Collaborative Relationships Among Providers</p> <p>Effective data collection and analyzing capacities</p> <p>Adequate Funding for PSH and Affordable Housing to scale & reflective of need</p> <p>Effective Trained and Experienced Staff across continuum</p> <p>Adequate Supplies & Materials</p> <p>Adequate Facilities & Equipment</p>	<p>NOTE: The “Inputs” on this page “apply globally to implementation of our Theory of Change to meet the stated outcomes.</p> <p>Because of the nature of our work, the following 4 pages break out specific areas of Input to clearly explicate their associated Activities, Outputs, Outcomes (short and long-term), Indicators, and Data Collection Tools.</p>						

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<p><u>DETAILED INPUT #1</u></p> <p>Affordable Housing & Permanent Supportive Housing Movement Building</p>	<ol style="list-style-type: none"> 1) Education of the general public, decision-makers in local, state, and federal government (see further education details in Detailed Input #3); 2) Creation of a plan for a statewide campaign of permanent supportive and affordable housing; 3) Convening of planning groups re: the State Housing Plan that expires in 2010. 	<ul style="list-style-type: none"> • Creation of a plan to foment closer and more effective internal coalition work; • Housing conference keynotes address movement building – the “how to” and connection of issues; • Campaign outputs are: <ul style="list-style-type: none"> ○ DETAIL HERE • Government relations work is integrated and collaborated within the movement building strategy (see Detailed Input #2). 	<ul style="list-style-type: none"> • Internal coalition building and weaving results in individual leaders the long-term inputs and values of working together 	<ul style="list-style-type: none"> • 80% of the internal leaders and their institutions will commit to working together for collective impact to create a viable movement; • 30% of identified and allied leaders and their institutions will equally commit. 	<ul style="list-style-type: none"> • Safe and affordable housing and permanent supportive housing is created to scale to meet the needs of Rhode Islanders; • A paradigm and culture shift will take place to reflect affordable housing & permanent supportive housing as integral and institutionalized concepts in all local and state planning and development activities in all communities (i.e. like schools, roads, fire and police). 	<ul style="list-style-type: none"> • Internal coalition partner’s commitment to movement; • Each associated coalition’s (those institutions related to each partner) commitment to movement; • Key allies commitment to movement; • Leaders of the core partnership can articulate the need for the movement; • Leaders of the partnership’s coalition institutions can articulate the need for the movement; • Regional and municipal plans automatically include attention and intention around affordable housing and permanent supportive housing needs. 	<ul style="list-style-type: none"> • Public systems change, paradigm shifting and movement building through analysis by Dr. Charlotte Ryan’s model; • Conference evaluations and feedback; • Quantitative & Qualitative data through skills & education research tools and communications time series tools (see Detailed Input # 3 & #4).

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<p><u>DETAILED INPUT #2</u></p> <p>Effective Government Relations & Public Policy Infrastructure</p> <p>Ongoing funding support for GR activities: Supportive funding for scale legislative work - internal systems change work supported to scale</p> <p>Director of Community Outreach & Engagement to work to bring capacities regarding community organizing to scale</p>	<ol style="list-style-type: none"> 1) Regular convening of Stakeholders & coordination of strategic actions; 2) Collaborate & coordinate with advocacy partners; 3) Develop & implement Legislative Liaison Capacity; 4) Develop legislative database & Web-based advocacy tools; 5) Develop & implement effective action alert system (electronic and verbal/relational); 6) Continue & improve effective lobbying capacity; 7) Develop & implement legislative tracking & monitoring capacity; 8) Develop & implement effective federal legislative strategy; 9) Develop & implement effective internal systems reform strategy; 10) Implement strategic communications strategy (see Detailed Input #4). 	<ul style="list-style-type: none"> • Legislative Hearings on Housing First; • Coordinated permanent supportive housing change strategy; • Coordinated annual legislative agenda and platform; • Development of State House legislative champions; • Increased number of legislative meetings; • Increased number of positive legislative activities; • Identification of key decision-makers within state government for relationship building; • Out-stationed collaborative/influencing work within state departments; • Maximization of state resources to link successful initiatives and promising practices across the U.S.; • Development of champions within state administrative departments on affordable housing and permanent supportive housing; • Dedicated annual funding stream established for affordable housing and permanent supportive housing goals. 	<ul style="list-style-type: none"> • Educated House & Senate Finance Committees on evidence-based practice, efficacy and cost effectiveness of affordable and PSH: Pass Housing First Bills H7687 and S2219 (2008 session); • Educated state administrative departments on evidence-based practice, efficacy and cost effectiveness of affordable and PSH; • Educate federal congressional delegation on evidence-based practice, efficacy and cost effectiveness of affordable and PSH; • Continue to influence & provide input into local, state and federal legislation through bill language, and recommended program provisions; • Legislation to establish permanent funding stream or bond passed. 	<ul style="list-style-type: none"> • Capacity for housing chronic & long-term homeless expanded to 250 units (38% of chronic & long-term homeless housed); • Participants experience increased residential stability, safety, mental health outcomes, health outcomes, income capacity, and healthy community integration; • Federal programming reflects the needs of Rhode Islanders more effectively; • Dedicated funding stream established for steady and regular productions of affordable and PSH. 	<ul style="list-style-type: none"> • Federal, state, and local funding results in programming to expand Permanent Supportive Housing units for chronic & long-term homeless Rhode Islanders to scale; • Federal, state, and local funding results in programming for the capacity of services in housing of chronic & long-term homeless to be brought to scale; • Federal, state, and local funding results in programming that brings affordable housing production in RI to scale to meet the need; • Low-income and homeless Rhode Islanders experience increased residential stability, safety, mental health outcomes, income capacity, and healthy community integration; • Neighborhoods in RI become more stabilized w/multiple entry points for housing for all Rhode Islanders, thereby meeting their needs through increasing safe affordable housing options. 	<ul style="list-style-type: none"> • Shift in priorities in federal, state and local funding (i.e. NOP funding secured/ in statute, dedicated funding stream); • Steady and regular reduction in percentage of chronic & long-term homeless; • Steady and routine implementation of affordable housing options, and decreases in foreclosures and vacant properties. 	<ul style="list-style-type: none"> • HMIS; • Legislative Tracking; • RI Housing Annual Report; • HRC State Housing Plan; • HNWRI Member Production Report.

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<p><u>DETAILED INPUT #3</u></p> <p>Effective Training & Education Infrastructure (effective models and evidenced-based practices that result in real changes in the lives of homeless and low-income Rhode Islanders)</p> <p>The Capacity to Coordinate the Homeless and Low-Income Housing Systems for the State of RI</p> <p>Federal Stimulus Funding for Rhode Island</p>	<p>1) Provide a comprehensive series of trainings to educate audiences and promote PSH:</p> <ul style="list-style-type: none"> • SSI/SSDI Outreach, Access & Recovery (SOAR); • Advocacy; • Leadership for change; • Strategic Communications; • Barriers to housing; • Effective case management; • Effective service models; • Addictions and substance abuse/recovery; • Housing retention; • Harm reduction; • Life skills • Promoting education & employment; • Property management; • Tax credit usage; • Financing development of PSH; • Affordable Housing production; <p>2) Annual statewide homelessness and affordable housing conference;</p> <p>3) Expand reach and</p>	<ul style="list-style-type: none"> • Following audiences attend 2-4 trainings annually: <ul style="list-style-type: none"> • Executive Directors and Program Directors; • Line staff / case managers; • Constituents and clients; • State department directors and line staff; • PSH developers and property managers; • CDCs; • PHAs; • City & Town CDBG Staffs; • Human Service Providers in cities & towns; • Aforementioned audiences attend full-day state-wide conference for educational and networking purposes; • Matrix of what exists in education & training and systems coordination; • Calendar of available training opportunities reflective of need; • RI Foundation's dedication to hosting the web-based training calendar; • Higher profile for certification programs with increased participation. 	<ul style="list-style-type: none"> • The workforce delivering housing and homeless services is more skilled and effective; • Homeless, poor, and low-income individuals and families receive more effective services to connect to income and permanent housing; • Increased awareness of career opportunities in community development and case management in CDCs, homeless and PSH provider organizations; • Best practices in CDCs and PSH service provider workforces start to become routine. 	<ul style="list-style-type: none"> • The workforce delivering housing and homeless services is more skilled and effective; • Homeless, poor, and low-income individuals and families receive more effective services to connect to income and permanent housing; • Capacity for housing chronic & long-term homeless expanded to 50% of chronic & long-term homeless housed; • Participants experience increased residential stability, safety, mental health outcomes, health outcomes, income capacity, and healthy community integration. 	<ul style="list-style-type: none"> • An effective and well-skilled workforce delivering housing and homeless services are employed and dedicated to the work; • There is a steady succession of well trained workers entering the organizations doing CDC and PSH work; • Expansion to scale of Permanent Supportive Housing for chronic & long-term homeless Rhode Islanders • Capacity for housing chronic & long-term homeless expanded to 100% of chronic & long-term homeless housed; • Participants experience increased residential stability, safety, mental health outcomes, health outcomes, income capacity, and healthy community 	<ul style="list-style-type: none"> • Targeted audiences are educated and motivated to implement and integrate the knowledge and skills learned through trainings; • <i>Mid-term:</i> 50% units of PSH produced have effective, individualized supportive services; • <i>Long-term:</i> 100% units of PSH have effective, individualized supportive services; • Coordinated non-duplicative, high quality trainings developed; • Number of participants that attend certificate trainings programs; • Number of graduates that choose careers in the fields. 	<ul style="list-style-type: none"> • HMIS; • Measuring Success Program (CSH tool to evaluate effectiveness of trainings); • Monitoring by Office of Homelessness Case Management sub-committee (based upon established standards using CSH quality assurance tool); • Evaluations of specific trainings, education modules, and conference; • Ethnographic /Qualitative research tool to prove quality of life change issues in target populations; • Developed tool to track

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<p><u>DETAILED INPUT #3</u> <u>CONTINUED</u></p>	<p>coordination activities to others, including service providers; housing authorities; city & town officials, for profit housing providers;</p> <p>4) Survey the community's education & training needs and provide for them;</p> <p>5) Increase coordination between providers and existing professional certification programs (i.e RIC Case management Program, Partnership for Community Development Program at Roger Williams University).</p>				<p>integration;</p> <ul style="list-style-type: none"> • A "ripple effect" education dynamic exists to affect those working in associated industries, state departments, and allied professional organizations. 		<p>graduates two years beyond exit from certification programs.</p>
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<p><u>DETAILED INPUT #4</u></p> <p>Effective Strategic Communications Infrastructure</p> <p>The capacity for a full-time Director of Strategic Communications</p>	<ol style="list-style-type: none"> 1) Identify all targeted audiences; 2) Develop and implement messages for all targeted audiences; 3) Devise outreach and engagement strategies for all targeted audiences; 4) Educate all targeted audiences; 5) Develop and maintain effective relationships with journalists; 6) Ongoing research on attitudes and beliefs about homelessness and affordable housing – both quantitative and qualitative; 7) Develop and implement public awareness efforts based upon researched base-line beliefs and social norms regarding homelessness, PSH, & affordable housing. 	<ul style="list-style-type: none"> • Public support for PSH; • Public support for Affordable Housing; • Targeted audiences will promote PSH models & Affordable Housing through: <ul style="list-style-type: none"> • Legislative efforts (see Detailed Input # 2); • Regulatory changes; • Funding priorities; • Implementation of evidence-based practices; • Service provision shift from shelter-based philosophy to housing-based philosophy; • Increase in media coverage of PSH solution and affordable housing brought to scale. 	<ul style="list-style-type: none"> • Educate identified targeted audiences, the general public, and journalists; • Increase in number of media stories and requests for input and comment from media outlets; • Passage of Housing First Bill; • Internal coalition building and weaving results in individual leaders the long-term inputs and values of working together. 	<ul style="list-style-type: none"> • Capacity for housing chronic & long-term homeless expanded to 50% of chronic & long-term homeless housed; • Participants experience increased residential stability, safety, mental health outcomes, health outcomes, income capacity, and healthy community integration; • 80% of the internal leaders and their institutions will commit to working together for collective impact to create a viable movement; • 30% of identified and allied leaders and their institutions will equally commit. 	<ul style="list-style-type: none"> • Expansion to scale of Permanent Supportive Housing for chronic & long-term homeless Rhode Islanders • Expansion to capacity of Affordable Housing in all RI Communities; • Participants experience increased residential stability, safety, mental health outcomes, health outcomes, income capacity, and healthy community integration; • The general public, legislators, state and local government officials, and powerful decision-makers in RI implement and maintain policies that allow low-income and homeless Rhode Islanders to experience residential stability, safety, good mental health outcomes, good health outcomes, living-wage income 	<ul style="list-style-type: none"> • Targeted audiences and general public are educated and motivated to support and promote PSH models; • <i>Mid-term:</i> 50% PSH are produced and have effective, individualized supportive services; • <i>Long-term:</i> 100% of PSH units are produced and have effective, individualized supportive services; • <i>Ongoing:</i> public policies that sustain long-term outcomes are institutionalized. 	<ul style="list-style-type: none"> • Surveys of Public Attitudes (time series); • Analysis of media coverage (time series); • Media database and Clipping service; • Ethnographic /Qualitative research tool to prove quality of life change issues in target populations.
<p><u>DETAILED INPUT #4</u></p> <p>CONTINUED</p>							

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					<p>capacity, and stable community housing integration;</p> <ul style="list-style-type: none">• The general public, legislators, state and local government officials, and powerful decision-makers in RI implement and maintain policies that allow neighborhoods in RI to be stabilized through multiple entry points for housing for all Rhode Islanders, thereby meeting their needs through increasing safe affordable housing options.		
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<p><u>DETAILED INPUT #5</u></p> <p>Permanent Supportive Housing Development & Capacity Building</p> <p>Neighborhood Opportunities Program (FY 2010 = \$2.5 million)</p>	<ol style="list-style-type: none"> 1) CSH to Provide \$100,000 annually in pre-development loans for PSH; 2) CSH Develop, publicize, and distribute RFP to potential applicants; 3) CSH Select projects; 4) Provide education, technical assistance & training to teams of developers/service providers on production strategies (see Detailed Input #3); 5) Provide technical assistance to projects on implementation strategies; 6) Link federal, state, and local programs and resources to affordable housing producers and PSH providers (see Detailed Input #2) 	<ul style="list-style-type: none"> • PSH pre-development loans for projects to be initiated; • Initiate the development of 70 - 100 PSH units (of 250 and 650 long-term outcomes goals); • Project teams will gain knowledge and skills on development, operating, service provisions and funding options for PSH; • Initial partnerships through this process will foment new collaborations and partnerships to produce additional PSH units. 	<ul style="list-style-type: none"> • Educated developers, property managers and homeless service providers on PSH development process; • Memoranda of Agreement established for PSH roles among providers, developers and property managers; 	<ul style="list-style-type: none"> • Repayment/recapture of pre-development loan to reinvest; • Capacity for housing chronic & long-term homeless expanded to 50% of chronic & long-term homeless population housed; • Participants experience increased residential stability, safety, mental health outcomes, health outcomes, income capacity, and healthy community integration. 	<ul style="list-style-type: none"> • Expansion to scale of Permanent Supportive Housing for chronic & long-term homeless Rhode Islanders • Capacity for housing chronic & long-term homeless expanded to 100% of chronic & long-term homeless population housed; • Participants experience increased residential stability, safety, mental health outcomes, health outcomes, income capacity, and healthy community integration. 	<ul style="list-style-type: none"> • Steady and regular reduction in percentage of chronic & long-term homeless. 	<ul style="list-style-type: none"> • HMIS • Measuring Success Program database (CSH tool); • Supportive Housing Development database (CSH tool).