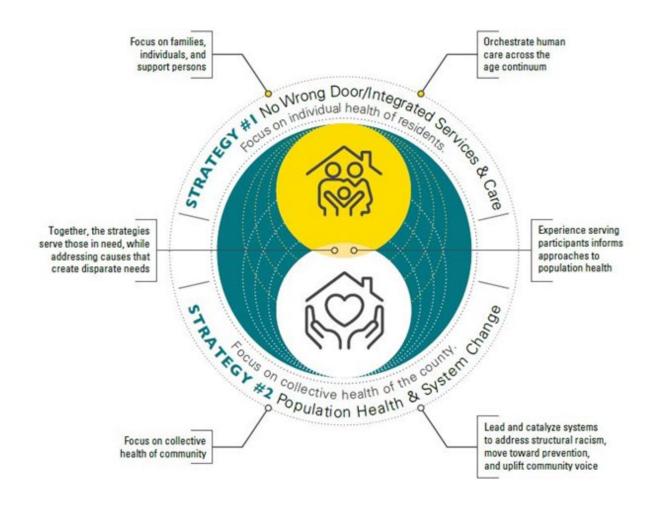
DHHS Strategic Planning Input Sessions

10/30/2024-11/09/2024



Current (2020-2025) Strategic Plan





The Progress We've Made

- All staff at DHHS recognize the concept of No Wrong Door and the majority are implementing it earnestly on an individual level, by working to get clients the services they needed, even if outside of their program's scope of service.
 - We moved from Divisions to Service Areas.
- We integrated the Department of Aging, Office of Veterans' Services, and Department of Child Support into the Department of Health and Human Services to give better, more streamlined access to services.
- We have implemented a single Children's Resource and Referral Line for any need; callers then receive a comprehensive assessment for any of the children's program resources.
- We invested unprecedented dollars through the American Rescue Plan Act (ARPA) in prevention resources across the community, including investing in grassroots agencies.
- We invested Opioid Settlement dollars strategically to reduce harm and prevent drug-related harmful outcomes, expanding our geographical reach and partnership with community nonprofits.
- We have focused our grant process on funding in key areas, and have recently won:
 - Lead abatement grant
 - 2 grants related to housing those formerly incarcerated
 - Senior Center rehab grant
 - Advanced Peace grant
- We reviewed our contracting process to be more inclusive of all agency sizes.
- We partnered closely with systemic and nonprofit partners to reduce violence, increase housing options, prevent and reduce harm related to drug use, and provide quality mental health supports.
- Added an enterprise-wide Measurement and Evaluation Team to focus on quality across the Department.
- Added four No Wrong Door Navigators.

Where We're Going

- We think we got our two strategic directions right.
 - No Wrong Door
 - Collective Impact/Population Health
- Will focus on refining and further operationalizing within these strategies.



Strategic Direction 1

No Wrong Door- defined as: Prompt, equitable access to quality health and human services.

- Goal 1: Access
 - Focus on streamlined, multi-disciplinary access
 - Focus on maximizing the new Coggs building
- Goal 2: Quality Care
 - Understand needs & gaps in the community
 - Focus our services on closing gaps
- Goal 3: Capacity Building to support Goals 1 & 2
 - Ensure our contracting process invites diversity of agencies and is equitable
 - Understand and meet capacity needs of internal and partner staff, programs, and process

Strategic Direction 2

Collective Impact/Population Health- defined as: Fostering an environment that addresses root causes of disparities in community health and wellness, thus advancing equity and reducing the need for crisis intervention.

- Focusing our influence, advocacy, and collective impact efforts on 4 main areas:
 - Housing
 - Livable/Age Friendly Communities
 - Youth Violence Prevention
 - Mental Wellness
- Implementing a policy advocacy plan that address these 4 main areas in policy, practice, and funding

A Deeper Look Into the 4 Areas

- Housing
 - Convene the coalitions to streamline services.
 - Invest where there are gaps—we're reviewing the Homelessness Prevention framework from USICH
- Livable Communities
 - Work with County Departments and others, convened at the County level
 - Follow the AARP Livable Communities framework
- Youth Violence Prevention
 - Capitalize on our Credible Messenger and Advanced Peace models
 - Better understand and then elevate what is working
- Mental Wellness
 - Work with partners in this space, convened by Milwaukee Healthcare Partnership, to identify gaps in service
 - Align resources to meet needs, specifically in crisis prevention and intervention
 - Continue our efforts in Zero Suicide
 - Expand our scope to include infant & maternal mental health

Questions/Comments?



Next Steps

- We will bring this feedback back to the Administrators and Executive Team at DHHS.
- We anticipate having a final draft of the plan, plus our action plans for each goal, by the end of December.
- There will be an opportunity for comments on the final draft before the end of the year.
- We plan to publish our plan by January 2025.

