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Wood County Project Connect: Final Report for Event Held October 19, 2016

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Wood County Project Connect

Final Report for Event Held October 19, 2016

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Wood County, Ohio: Project [Homeless] Connect

INTRODUCTION

Homelessness is a complex and dynamic issue, which is affected by social factors like addiction, mental illness, and familial causes as well as structural factors like poor economic conditions, absence of employment opportunities, inadequate low cost housing, and deficient mental health services (Mago, Morden, & Fritz, et. al., 2013). To combat this dynamic and complex issue of homelessness, the response also needs to be dynamic and complex. The services need to target both social and structural factors and services need to be tailored to individual needs.

Project Homeless Connect (PHC) is designed to provide immediate goods and services to homeless individuals and those nearing homelessness. PHC provides basic needs and critical services in one day at one location. Along with providing valuable and necessary services to help alleviate homelessness, an additional positive outcome for service providers is the opportunity to network with different agency members, and reinforce relationships, collaborations, and partnerships. It originated in San Francisco and was later adopted and revised by the U.S. Interagency Council on Homelessness (USICH) to decrease homelessness in major American cities (Knetch & Martinez, 2009). PHC was created following the premises of the former President George W. Bush Administration's policy of compassionate conservatism and the "armies of compassion" model, which "sought to rebuild public-private relationships to address social problems and avoid increasing government spending" (Knetch & Martinez, 2009, p. 522). More than 170 cities in the United States, Canada, and Australia have adopted the PHC project.

On October 19, 2016, Wood County, Ohio held its third Project Connect (PC) event at St. Mark's Lutheran Church in Bowling Green, Ohio. Co-Chairs for PC 2016 were: Jamie Brubaker of United Way of Wood County, Jane Rosser of Bowling Green State University, and Don Neifer of St. Mark's Lutheran Church. Planning for PC began in April of 2016. County Commissioner Doris Herringshaw served as Honorary Chair. Twelve sub-committees, two were added after PC 2014 and these are marked by *, comprised the Steering Committee covering the following areas:

1. Logistics, chaired by Don Neifer and co-chair Erin Hachtel
2. Publicity, chaired by Tricia Peters and co-chair Esther Nagel
3. Volunteers, chaired by Katie Stygles
4. Intake/Social Workers, chaired by Shannon Fisher and co-chair Willa Thomas
5. Transportation, chaired by Sandy Milligan
6. Administration, chaired by Dr. Melissa W. Burek and co-chair Dr. Mamta Ojha
7. Health and Wellness, chaired by Judy Kellermeier and co-chair Rhonda Stoner
8. Housing/Education/Social Service Providers, chaired by Kathy Mull
9. Hot Meal, co-chaired by Cindy Tyrrell
10. Personal Care and Tangible Goods, chaired by Deanna Lamb and co-chairs Robert Grogan and Jo Tutolo
11. Hair Care*, chaired by Lori Fox
12. Child Care*, chaired by Erika Sleek

GOALS

There were six primary goals for the second annual event:

1. Serve 200-300 individuals and families who are in need of supportive services
2. Gain additional quantifiable data for people at risk or experiencing homelessness by following the steps below:
 - a. Identify needs and gaps in services
 - b. Develop new ways to meet these needs
 - c. Track success of 2016 guests
3. Host 50 services providers offering the following services: Hot meal, clothing, haircuts, food, medical care, dental care, substance abuse and mental health services, IDs, housing, legal information, employment assistance, and information to increase access to basic services
4. Recruit 250-300 volunteers with a focus on hosts concentrating on morning
5. Increase provider membership and program coordination for the Continuum of Care Wood County
6. Increase community awareness of challenges in our community regarding the risk of homelessness and the services available to those in need


Each of the above-noted goals was fulfilled or exceeded expectations, respectively with the exception of goal number 4. To illustrate:

1. 292 adults and children attended the event with 37% having attended last year's PC
2. Data were gathered through intake forms at the event on 282 households. In addition, 251 guests completed all data collection forms designed for the event (i.e., intake, welcome sheet, and exit surveys). Guests were asked to provide their contact information if they consented to be contacted for focus groups and follow up activities.
3. 58 providers were present with 8 being first time at event providers
4. 193 individuals served as volunteers during the planning stages and on the day of the event. The recruitment fell short by 157 volunteers.
5. The successful execution of the fourth PC event in Wood County on October 19, 2016, like the three previous events, was contingent upon having numerous providers in one location. This was accomplished, thereby further expanding the reach and awareness of the mission of the Continuum of Care of Woody County Additional evidence in support of this goal involved all parties to the event:
 - a. 90% of guests reported they were very satisfied with the services or programs available at PC 2015.
 - b. 89% of volunteers gained knowledge of where to turn to for help should they or something they know become at risk for homelessness and 100% would volunteer again for PC.
 - c. Approximately 90% of providers strongly agreed/agreed that the event increased provider membership and program coordination for Continuum of Care Wood County
6. Met by 5 a-c above and the following evidence:
 - a. 89% of guests reported getting more than expected or as they expected at PC.

- b. 92% of volunteers reported a change in perspective on essential services that may be lacking for the disadvantaged or at risk of experiencing homelessness
- c. 98% of the providers report they would participate in an event like PC in the future.


EVENT PROMOTION

The event was promoted via posters and flyers displayed across Wood County and distributed to schools. Information about the event was also announced in various press releases and on Facebook and the Continuum of Care of Wood County's website. Below was the main design:



PROJECT CONNECT
Working Together to Prevent Homelessness

Outside, In the Car, Staying With Friends, Couch Surfing, Homeless, Worried?



Let's Work Together To Make A Change

October 14, 2015 9 am – 3 pm

St. Mark's Lutheran Church 315 S. College Dr., Bowling Green



PROJECT CONNECT is a One-Day, One-Stop event with FREE goods and services for Wood County families, elders, veterans, and singles.
Child care is available during the event.

- Housing resources
- Hot meal
- Hair cut
- Job help
- Personal care items
- Dental care

- Mental Health
- Substance Abuse
- Financial advice
- Vision screening
- Birth certificates
- Legal aid

- Spanish interpreters
- Clothing
- Health screening
- Groceries
- Pet care vouchers
- ...and more!


Pre-register from Sept. 1 – Oct. 9 by calling 211 or 1-800-650-HELP

Project Connect is a collaboration of agencies, individuals, churches, organizations and businesses who care about the people of Wood County.

Find us online at
<http://tinyurl.com/PCWCvolunteer2015>
and on facebook at
www.facebook.com/ProjectConnectWoodCounty

Need Help Today?
Call 211 or
1-800-650-HELP
a FREE call for
information



SUMMARY HIGHLIGHTS

The observations that follow details summary information on participants, volunteers, and providers served at the first Wood County Project Connect event held on October 19, 2016 at St. Mark's Church in Bowling Green, Ohio. A preliminary version of what is presented below was distributed to the Steering Committee members in late October 2016. The information presented below is based on data collected via Guest Welcome Forms, Intake Forms, and Exit Survey of guests, volunteers, and providers.

GUESTS (N = 125 completed exit survey)

- ~292 Adults and children attended
 - 37% reported attending last year's event
- 282 Households (248 in 2014) completed Intake Forms either onsite or pre-registered
 - ~773 adults and children reside in these households (~782 in 2014)
- 281 Welcome Forms completed
- 251 Exit surveys completed
- Main Reason Reported by Guests for Attending PC
 - 45% Clothes/Coat
 - 27% Haircut
 - 15% Dental Care
 - 18% Hot Meal
 - 15% Need Housing
 - 12% Job Help
 - 9% Food/Groceries
 - 7% Medical Related
 - 4% Other (e.g., assistance with home and car repair, holiday help, education, bed, drapes, and pets, utilities and bills)
 - 4% Birth Certificate
- 89% of guests reported getting more than expected or as they expected at PC
- 90% were very satisfied with the services or programs available at PC event; 8% were somewhat satisfied
- 88% found the information available at PC very helpful; 12% reported somewhat helpful
- 92% were very satisfied with the event overall; 8% were somewhat satisfied with the event
- 37% attended 2015 Project Connect and 52.6% were new to the event

GOODS & SERVICES PROVIDED 2016

- 485+ Hot Meals
- ~256 Bags of Food
- 350 Personal Hygiene Kits
- 150 Store Vouchers
- \$100 Grocery Cards
- 19 Laundry Bags
- 150 Coats
- 300 Care Packs
- 110 Birth Certificates
- 111 Haircuts
- 47 Flu Shots
- 43 Vision Screenings
- 39 Dental

VOLUNTEERS (N = 193)

- 193 Volunteers
 - Well over 80% served as hosts with the rest divided between food service and greeters
- Volunteers served an average of 4 hours

- 85.5% reported being adequately trained to perform their duties
 - 39% felt fully prepared and 37% felt adequately prepared to carry out the responsibilities of their position
- 95.2% reported their experience as a volunteer very much so or mostly met their expectations
- Volunteer experience prior to PC
 - 41% A lot
 - 36% Some
 - 19% A little
 - 4% PC was their first volunteer experience
- Percentages reporting a change in perspective on essential services that may be lacking for the disadvantaged or at risk of experiencing homelessness
 - 49% Very much
 - 36% Somewhat
 - 7% A little
 - 8% Not at all
- 89% of volunteers responded affirmatively that they have gained knowledge of where to turn for help, should they or someone they know be in needs of essential services or at risk of experiencing homelessness
- 100% would volunteer at PC again
- 93% thought the event was well-organized
- 92% reported receiving an appropriate level of assistance to carry out their duties
- 95% stated the volunteer experience gave them a sense of accomplishment
- 97% felt welcomed and appreciated for the work they did
- 93% agreed they had plenty to do

PROVIDERS (N = 53 completed exit survey)

- 58 Providers
 - 8 first time providers
 - 122 individuals represented their respective agencies
- 94% of the providers reported that the event met their expectations with 32% reporting that the experience exceeded their expectations and 35% reported that it was better than expected
- 98% of the providers reported they would participate in an event like PC in the future
- Percent of providers rated the following aspects of PC 2016 as good or excellent
 - Location and Duration = 91%
 - Attendance by guests/clients = 85%
 - Participation by community providers = 96%
 - Level of support provided by PC organizers = 100%
 - Availability of event organizers and volunteers = 100%
 - Opportunities to interact with other providers at the event = 83%
 - Opportunities to interact with community members at the event = 90%

- Over 92% of providers strongly agreed or agreed that
 - They felt welcome and appreciated for the goods/services provided.
 - The event was well-organized.
 - Providing goods/services at Project Connect was a good use of their agency's time.
 - The event increased provider membership and program coordination for Continuum of Care Wood County.
 - As a result of this event. Guest/clients were connected to supportive services they may not have accessed otherwise.

PC PROCESS: DAY OF EVENT

As occurred in 2015, guests entered the main door of St. Mark's Lutheran Church where the PC event was held. They were paired with a PC Host Volunteer who handed the guests a "Welcome Packet" that included information on what to expect at the event and a form where guests could indicate which services they would like to connect while at PC. This latter form is what the guests were instructed to complete while waiting for intake. At intake, guests met with a PC Intake Volunteer for about 10-15 minutes to complete a needs assessment and screening form. The purpose of the intake form was to help PC representatives understand guests' immediate needs so they could focus on these as they went through PC. Intake Volunteers were instructed to identify priority services, but guests could visit any provider they wished. Similar to 2015, Intake Volunteers highlighted these priority areas on a "Services At-A-Glance" sheet that listed the providers available under specific headings that best described the providers' services offered that day.

At any time over the course of the event, guests could eat a hot meal. After the guests connected to the providers and services, guests could visit the tangible good areas of the church and pick up clothes vouchers, personal care items, and a tote bag of groceries.

REPORT METHODOLOGY

In 2013, Bowling Green State University researchers, Melissa W. Burek, Adam Watkins, and Mamta Ojha, hereinafter BGSU Research Team, developed two data collection instruments (see Appendix) to gather information on guest demographics, living situations, income sources, guest needs, and requests for services to connect with while in attendance at PHC. These forms were utilized again this year in order to capture reliable comparisons between the two years. These two forms were (1) Request for Services and Appointment form, also called the "Welcome form," which was slightly modified based on results from 2013 and 2014 reports. This form was completed by guests while they were waiting to enter the intake area with the assistance of their Host Volunteers and (2) Needs Assessment and Screening Intake form, which was completed by an Intake Volunteer with individual guests. Responses collected from three other survey instruments that had been used at other PHCs to gather feedback on the event from guests, volunteers, and providers were also analyzed (see Appendix). The Services At-A-Glance form was new in 2014 and was developed based on recommendations that came out of last year's written report and verbal communication with the 2013 Project Homeless Connect Steering Committee. The purpose of this form was to help the Host Volunteers better match guests with the three priority services and locating other services that were of interest to their guests.

As was done in previous years, in order to ensure the data collected from guests could be matched from entry to exit, each PC guest was given a set of unique identification labels with a PC guest number that were placed on the above-noted guest instruments. To confidentially track the characteristics of guests connecting with specific agencies and services, guests were

directed to place a label on designated sheets as they visited providers. After the event, all completed data collection instruments were given to the BGSU Research Team for data entry and analyses. Results for 2016 are reported on PC as a collective whole and then for each provider that had at least one guest connection. It is important to note that not all respondents attending PC completed all three forms and if guests did not go through intake, they likely did not have the identification labels in hand to give to providers.

At the end of the event, we collected responses from 251 guest intake forms (including pre-registered guests who came through PC). Last year, 267 intake forms were completed. Complete packets (i.e., Intake, Welcome Forms, Services At-A-Glance, and Exit Survey) were available for analysis on 267 guests whereas in 2014, there were 163. There were 175, up 51 over PC 2014, Volunteer Exit and 55 Provider Exit forms completed in 2015. This report presents findings based on the most complete data we were able to collate across the various instruments disseminated at the PC event. Results are reported according to group membership of guests, volunteers, and providers.

RESULTS: GUESTS

Findings from Request for Services and Appointment Form

As stated in the previous section, three primary data collection instruments were administered to guests over the course of the event. The first survey was a Request for Services and Appointment Form (RSAF), also known as the Welcome Form (see Appendix). Guests were asked to indicate with an "X" if they wanted to connect to eight general services and their subcategories that were present at the event. In addition, there were three questions on the form that asked guests about other services that were not available that day but were still of interest to them, how they found out about PHC, and how they traveled to the event. Table 1 indicates the raw number of guests who indicated they wished to connect to a particular service in 2013, 2014, 2015, and 2016.

Since the event also strives to meet the needs of guests in the future, the RSAF also asked respondents to indicate what other services of interest to them, but were not available at the date of the event. Stress management and smoking cessation/quit smoking programs or services were the top two requests. Table 2 below displays the results for services not available but sought. The responses from one question on the RSAF and one question on the Exit Survey were combined to capture the total picture as to how guests found out about PC. The majority of respondents indicated that the top three ways by which guests found about PC were (1) Word of Mouth; (2) Saw Poster/Event Signage; and (3) Referrals from other agencies or service providers. Table 3 presents the distribution of these and other promotion types for the event.

Table 1. Number of Guests Wishing to Connect To Services

Service	2013 (n = 121)	2014 (n=142)	2015 (n = 294)	2016 (n =282)
Benefits & Services				
Email/Internet	18	14	n/a	21
Health Coverage	39	10	35	38
Legal Aid/Legal Issues	22	27	30	55
Offender Reentry	6	2	4	n/a
Veterans Services	3	7	6	5
Taxes	n/a	n/a	n/a	17

WIC	9	3	10	n/a
Transportation	n/a	n/a	53	n/a
Social Security	n/a	n/a	29	n/a
Budgeting	n/a	n/a	20	23

Table 1. continued... Service	2013 (n = 121)	2014 (n=142)	2015 (n = 294)	2016 (n = 282)
Children & Family				
Budgeting	21	20	11	23
Domestic Violence Services	6	2	2	5
Holiday Help	72	76	133	130
Parenting Class	8	5	7	10
Resources for School-Aged Children	19	9	30	29
Pet/Animal Care	n/a	n/a	81	n/a
Employment & Education				
Developmental Disabilities	14	5	7	n/a
Employment	51	28	49	39
Go Back to School	24	16	42	22
Pre-School	n/a	n/a	6	n/a
Forms & Documents				
Birth Certificate	25	21	78	87
ID Information	15	6	18	23
Social Security Card	17	9	42	n/a
Housing				
Emergency Shelter	16	13	6	12
Housing/Afford. Rental	68	49	71	75
Utilities	50	47	72	69
Home Repair/Maintenance	n/a	n/a	34	75
Medical Care				
Blood Glucose	14	22	16	38
Blood Pressure	21	30	19	40
Dental Care	77	64	88	89
Eye Screening	64	53	79	64
Flu & Immunizations	36	37	54	63
Hearing	28	22	n/a	n/a
Health Screening	n/a	n/a	n/a	17
HIV/AIDS Screening	9	7	n/a	n/a
Medical/Healthcare Services	32	13	20	n/a
Medical Transportation	n/a	n/a	n/a	21
Prescription Drug Services	19	9	24	28
Breast Health	n/a	n/a	9	19
Podiatry/Foot Care	n/a	n/a	23	32
Mental Health & Addiction Services				
Alcohol Addiction	3	1	1	2
Drug Addiction	3	3	2	2
Mental Health	19	10	23	20
Personal Care				
Clothing	95	110	207	213
Food Assistance	127	130	213	203
Haircut	55	76	110	117

Massage	46	41	83	91
Spiritual Care	14	17	19	10
Nutrition/Healthy Eating	n/a	n/a	n/a	44
Stress Management	n/a	n/a	49	28
Other – Please Specify Below				
Car Repair/Transportation	12	4	See Above	3
Gas Assistance	n/a	n/a	10	5
Baby Care	4	2	6	67
Senior Service	0	1	0	n/a
Personal Hygiene	n/a	n/a	4	177
Other	n/a	n/a	8	12

Table 1 presents the services the guests were wishing to connect with while at PC. Most services increased in popularity in 2016 as compared to 2013, 2014 and 2015. To illustrate, only 4 guests wished to connect with resources for personal hygiene in 2015, but in 2016 that number increased to 177. In that same regard, more guests wished to connect with employment, various forms and documents, health coverage, and legal aid in 2016 compared to 2015. The number of guest wanting assistance with home repair and maintenance also increased in 2016. Similar to 2015, tangible services such as clothing, food assistance, and haircuts, remained in high demand in 2016. There were very few services that were more popular in 2015, but were not as popular among guest requests in 2016. Compared to 2015 the number of guests wishing to connect with stress management services in 2015 declined from 49 to 28 respectively. Guests wishing to connect with back to school services decreased from roughly 42 in 2015 to 22 in 2016.

Table 2. Question 2 Results from RSAF Survey (i.e., Welcome form)

Other Services Not Available at PHC Day of Event	Number of Guests Indicating Interest 2013 (n = 121)	Number of Guests Indicating Interest 2014 (n = 142)	Number of Guests Indicating Interest 2015 (N = 294)	Number of Guests Indicating Interest 2016 (n = 282)
Shower	3	1	1	4
Nutrition	8	7	n/a	n/a
Home Repair or Maintenance	9	10	n/a	n/a
Tax Help	14	10	6	17
Social Security	11	11	n/a	25
Pet Care	n/a	n/a	n/a	n/a
Stress Management	22	24	n/a	n/a
Smoking Cessation/Quit Smoking	18	17	24	26
Child Support	6	4	11	n/a
Disability	11	10	n/a	24
Hearing Screening	n/a	n/a	23	n/a

HIV/AIDS Testing	n/a	n/a	3	n/a
Other	n/a	n/a	11	9

Table 3. How Guests Heard about Project (Homeless) Connect

Types	# 2013 (n = 164)	# 2014 (n = 142)	# 2015 (n=286)	# 2016 (n = 250)
Word of Mouth	54	55	112	115
Referred by Another Agency or Service Provider	31	47	67	40
Case Worker	n/a	n/a	n/a	18
Saw Poster, Event Signage	51	26	33	54
News (newspaper, TV, radio)	16	9	6	3
Social Media/Facebook	12	5	9	8
Other	n/a	n/a	59	44

The results for Table 3 are important to the future of Project Connect, because the findings demonstrate effective and non-effective ways of advertising this event to the community. The two most noteworthy changes were observed in the areas of word of mouth and event signage. In 2016, 21 more guests saw a poster or event signage than in 2015. In 2015, 112 guests were informed of this event by talking with family, friends, and members of the community, but in 2016 that number grew to 115 guests hearing about the event from others. This information will be crucial for the continuation of Project Connect.

The majority of the guests used their own personal vehicle to travel to the Project Connect events in 2013, 2014, 2015, and 2016. The next most common mode of transportation was a family or friend providing a ride followed by walking. There was a PC sponsored shuttle with scheduled pickups and drop offs from a number of locations around Bowling Green, Ohio to the event. However, few guests indicated they used the service. Table 4 includes the totals for the modes of transportation taken by guests.

Table 4. Modes of Guest Transportation to Event

Modes of Transportation	Number Guests 2013 (n = 133)	Number Guests 2014 (n = 137)	Number Guests 2015 (n = 267)	Number of Guests 2016
Shuttle Stop	7	6	n/a	n/a
Walk	23	24	35	20
Personal Vehicle	63	58	129	137
Family/Friend	35	41	79	64
Bike/Scooter	5	5	4	5
Taxi	n/a	3	6	4
Other	n/a	n/a	14	6

Findings from the Intake Form

The second instrument was the Intake Form, which is a needs assessment and screening form that was designed to help the PC volunteers best understand guests' needs and assist them at the event. A similar version of this form was used in 2014 and 2015. The form was completed by the Intake Volunteers in an interview format with the guests. The trained Intake Volunteers identified each guest's priority services on the "Services At-A-Glance" form (see Appendix). This at-a-glance form was used by the Volunteer Host as he/she escorted the guest around the event after the intake process. We were able to collect and report findings on 281 guests from the Intake Form in 2016, which is a decrease of 9 compared to the number of completed intake forms in 2015 and an increase of 85 compared to 2014. Table 5 presents descriptives of guests in 2013, 2014, 2015, and 2016.

Table 5. Guest Descriptives

Attribute	2013 Percentage or Mean Value (sd) (n = 145)	2014 Percentage or Mean Value (sd) (n = 196)	2015 Percentage or Mean Value (sd) (n = 290)	2016 Percentage or Mean Value (sd) (n = 281)
Average Age	40.44 (sd = 14.37)	44.16 (sd = 14.35)	42.39 (sd = 15.08)	46.41 (sd = 15.035)
Average Number of Services Guests Wished to Connect With	4.44	4.27	5.64	
Gender				
Females	69.6	69.9	72.4	71.5
Males	28.3	29.6	27.6	28.1
Transgender	2.1	0.5	0	0
Veterans	6.4	6.6	4.5	6.4
Marital Status				
Single	41.7	38.2	45.4	38.4
Married	18.7	24.5	22.4	27.0
Divorced or Separated	32.4	33.1	26.8	28.5
Widowed or Other	7.2	4.1	5.4	5.7
Type of Household				
Adult Only	51.2	59.4	57.4	53.0
Adults and Minor Children	46.6	40.6	42.3	43.1
Average Number of Children	2.29 (sd = 1.29)	1.32 (sd = 1.29)	1.08 (sd = 1.33)	.95 (sd = 1.37)
Percentage of Guests with Custody of Children	32.4	32.1	n/a	n/a
Unaccompanied Minor	2.2	0	0.3	
Disabled Adults or Children In Home	31	34.2	19.4	40.2
Age Groups of Members in Guests' Household In Attendance				

Children 0-4 years of age	9.6	7.6	6.4	10.8
Children 5-12 years of age	11.7	10.2	6.5	7.2
Teens 13-17 years of age	4.8	6.1	2.2	4.3
Adults 18-34 years of age	23.4	14.8	16.2	19.6
Adults 35-51 years of age	16.5	16.8	8.1	18.6
Adults 52-64 years of age	8.9	11.2	8.1	14.3
Table 5. Continued...				
Attribute	2013 Percentage or Mean Value (sd) (n = 145)	2014 Percentage or Mean Value (sd) (n = 196)	2015 Percentage or Mean Value (sd) (n = 290)	2016 Percentage or Mean Value (sd) (n = 281)
Adults 65+ years of age	2.1	2.5	1.6	6.8
Race/Ethnicity				
White/Non-Hispanic	60.9	74.8	73.3	83.3
Other/Non-Hispanic	20.1	10.9	7	7.8
Hispanic/Latino Ethnicity	14.5	12.8	16.3	22.1
Unknown	4.5	1.5	2	.4
Guests Having Identification	79.3	90.2	98	93.2
Type of Identification				
State Identification (Category included driver's license in 2013)	93.9	23	30	28.1
Driver's License	Included in State ID	62.8	69.3	69.1
Social Security	5.2	35.7	40.6	51.2
Birth Certificate	.9	33.2	34.6	45.7
Have Criminal Record	24.6	14.0	20.5	13.5
Currently on Probation/Parole	11.9	8.5	7.0	4.3
Do Not Have Reliable Transportation	35.8	32.6	27.4	71.5
Barriers to Reliable Transportation				
Driver's License Suspension	17.8	14.8	14.9	5.0
No Income/Cannot afford	39.7	38.9	44.8	15.4
Disability	11	15.7	11.5	1.5
Car Needs Repairs	12.3	10.2	5.7	4.0
No Car	17.8	13	6.9	2.3
No License (not suspended) or Don't Know How to Drive	--	5.6	6.9	2.8
Share Car with Family	--	1.9	0	.4
Other	--	--	9.1	12.8

In 2016, there were a higher number of guests aged 18-34 compared to the other age categories. The percentages of guests across the age ranges were more evenly distributed in 2016 than 2015. The percentage of White/Non-Hispanic guests served increased by almost 22% from 2013 to 2016, while the percent of Other/Non-Hispanic guests served decreased from 2013 to 2016. More guests in 2016 reported holding Social Security cards and birth certificates compared to 2013, 2014, and 2016. There was a decrease in the percentage of guests possessing a state identification card/driver's license from 2015, however.

Table 6. Residence Status Characteristics

Category	2013 Percentage (n = 125)	2014 Percentage (n = 119)	2015 Percentage (n = 116)	2016 Percentage (n = 281)
Current Homelessness Status				
Not currently homeless	68	85.5	91	86.5
First time homeless and less than 1 year without home	23.1	9.3	5.5	4.6
Several times but for less than 1 year and not more than 4 times in 3 years	4.3	3.6	2.9	1.4
Long term for at least 1 year or at least 4 times in past 3 years	4.3	1.6	.6	1.4
Have Previous Eviction	25.5	18.8	16	12.8
Factors Affecting Ability to Keep Housing				
Alcohol/Drugs	3.9	4.4	5.1	2.6
HIV/AIDS	.6	0.0	0.0	0.0
Mental Illness	12.8	11.7	28.2	7.7
Physical Disability	14.5	7.7	26.2	10.8
Criminal Record	3.4	2.0	10.2	3.8
Financial Obligations	39.1	26	53.2	28.6
Violence in Home	5	3.6	76.9	1.9
Loss of Job	4	--	1.2	.8
Child Care Issues	2.07	--	0.0	0.0
Rodent and Insect Infestation	--	1.5	0.0	.4
Other	--	--	5.1	5.4
None	--	--	10.8	2.6
Primary Reasons Reported for Becoming Homeless or Facing Eviction				
Abusive Situation/Domestic Violence	5	13.0	8.1	1.1
Abusive Situation/Other Trauma	.6	0.0	3.5	0.0
Aged Out of Foster Care/Youth Services	.6	0.0	0.0	0.0
Dispute with Relatives/Roommate	1.4	5.5	5.8	3.2
Foreclosure	2.07	1.8	0.0	.4
Hours at Work Cut	10.34	5.5	4.7	0.0

Table 6. continued...	2013	2014	2015	2016
Category	Percentage (n = 125)	Percentage (n = 119)	Percentage (n = 116)	Percentage
Illness/Injury	11	12.8	12.8	1.1
Loss of Job	22.1	35.1	17.4	6.4
Loss of Partner/Roommate	6.9	0.0	5.8	1.8
Loss of Transportation	4.83	0.0	4.7	0.0
Moved Here From Another Community	6.9	1.8	4.7	1.4
National Disaster or House Fire	.6	0.0	2.3	0.0
Release from Jail or Prison	1.38	1.8	2.3	.4
Child Care Issues	2.07	0.0	0.0	.8
Financial Challenge	1.38	11.1	9.3	2.0
Violation of lease/house rules	--	--	1.2	--
Divorce	--	--	3.5	--
Other	--	--	12.8	7.8
Duration of Residency at Place Stayed Night Prior to PC				
3 Months or Less	41.7	28.7	23.8	14.9
More than 3 Months but Less than 1 year	14.2	19.4	16.9	11.0
1 year or Longer	44.1	51.9	59.2	59.8
Where Stayed Night Prior to PC				
Emergency Shelter	.9	4.5	1.1	.4
Hotel/Motel (No Voucher)	7.0	11.5	1.4	
House/Condo/Apartment Owned by Guest	13.9	18.2	22.4	16.7
Living with Family	12.2	9.1	10.4	7.5
Living with Friends	15.7	10.3	4.8	2.1
Place Not Meant for Habitation	3.5	1.1	0.7	.7
Psychiatric Hospital or Facility	--	--	0.7	--
Rental House/Apartment	40.9	42.5	55.4	43.1
Transitional housing for homeless	--	--	0.3	.7
Other	--	--	1.4	6.4

Table 6 presents the residency struggles some guests were having. The percentage of non-homeless guests decreased in 2016 to 86% from 91% in 2015. The percent of first time homeless guests decreased from 9.3% in 2014 to 5.5% in 2015 and 4.6% in 2016. The factors that affected the guests from keeping their houses in 2015 significantly increased in the areas of violence in home, financial obligations, physical disability, and mental illness. The two areas that

decreased in 2016 from 2015, in regards to the primary reasons reported for becoming homeless or facing eviction were loss of job and abusive situation/domestic. In 2015, 17.4% of guests reported that loss of job was the primary reason for homelessness or eviction, while in 2016, 6.4% of guests reported the same. Table 6 also shows that 2016 guests reported staying in their residency longer than those attending in 2013, 2014, and 2015. More guests had reported staying in a rental property or property owned by guest in 2015 compared to 2016.

Regarding income and benefit assistance of guests, a general trend observed across the data collected from the three guest surveys is that lack of employment or being underemployed is a common characteristic of the guests who visited the PC event in 2016, which was a similar finding in 2013, 2014, and 2016. Twenty-four percent of guests' income source was from a job in 2016, down from 35% in 2015 and up slightly from 22% in 2014. The primary source of income (see Table 7) for 45% of guests in 2016 came from Social Security Disability Benefits. Table 7 displays the income and benefit assistance the guests received. Other benefits that were reported as being a source of financial assistance by guests in 2016 were government medical assistance and supplemental assistance program/electronic benefit card (SNAP/EBT). The percentage of guests receiving government medical assistance increased by over 15% from 2013 to 2016.

Supplemental assistance program/electronic benefit card (SNAP/EBT) was also being utilized by 58.7% of guests in 2016 compared to 55.1% of guests in 2014 and 56.8% in 2015.

Table 7. Income Characteristics

Source	2013 Percentage (n = 145)	2014 Percentage (n = 196)	2015 Percentage (N = 294)	2016 Percentage
Employment/Job				
Yes	26.1	22.0	35.7	24.2
No	73.9	78.0	63.0	60.1
Child Support	10	9.3	12.4	6.4
Receive Support from Other People				
Yes	12.9	10.8	8.5	3.6
No	86.3	89.2	89.9	73.7
Ohio Works First (OWF)				
Yes	6.4	1.7	4.3	4.3
No	93.6	98.3	93.8	74.7
Unemployment Benefits				
Yes	2.8	1.8	1.4	2.1
No	97.2	98.2	96.6	76.9
Social Security Retirement Benefits				
Yes	7.4	13.8	11.0	11.7
No	91.2	86.2	87.0	70.5
Social Security Disability Benefits				
Yes	34.5	44.0	49.2	45.6
No	64	56.0	48.8	42.7

Table 7. Continued...	2013 Percentage (n = 145)	2014 Percentage (n = 196)	2015 Percentage (n = 294)	2016 Percentage
Source				
Supplemental Assistance Program/Electronic Benefit Card (SNAP/EBT)				
Yes	53.8	55.1	56.8	58.7
No	46.2	44.9	42.5	35.9
Government Medical Assistance				
Yes	47.5	62.6	67.0	63.0
No	52.5	37.4	31.5	30.6
Veteran Medical Assistance				
Yes	2.8	2.2	4.6	3.2
No	96.5	97.8	94.9	80.4
Section 8 Housing				
Yes	7.7	14.3	8.7	12.1
No	92.3	85.7	89.0	74.0
Rental Assistance				
Yes	2.9	1.7	6.0	2.8
No	97.1	98.3	93.0	80.1
Subsidized Housing				
Yes	--	--	20.3	16.0
No	--	--	78.0	69.8
Other	--	--	15.8	2.5

Findings from the Exit Interview

The final data collection instrument for guests was the Exit Interview. This document was a short questionnaire that could be completed either by the guest or in a brief interview format with the Host Volunteer asking the guest the questions. As indicated earlier, one of the questions asked guests to indicate how they heard about the PC event. Results from this question were combined with data collected on a similar question on the Request for Services and Appointment Form. The remaining questions on the Exit Interview asked guests to note their main reasons for attending PC and to provide feedback on the event. Of the 251 persons completing the exit forms, 37% of guests attended last year's Project Homeless Connect event in October 2015. The remaining were new in 2016. Table 8 presents the results of the Exit Interview.

Table 8. Reasons Reported by Guests for Attending Event

Question	2013 Percentage (n = 139)	2014 Percentage (n = 175)	2015 Percentage (n = 268)	2016 Percentage (n = 251)
Attended Project Homeless Connect Previous Year				
Yes	n/a	30	30	37
No	n/a	70	70	63
Reason for Attending PHC				
Need Housing	30.5	20	16	15

Table 8. Continued...	2013 Percentage (n = 139)	2014 Percentage (n = 175)	2015 Percentage (n = 268)	2016 Percentage (n = 251)
Question				
Clothes/Coat	14.5	50.3	46	45
Hot Meal	13	18.3	16	18
Dental Care	10.7	20	19	15
Misc. Personal Items and Resources	7.7	20	24	n/a
Hair Cut	3.1	26.3	31	27
Medical Care, Physical and Mental Health	3.9	10.3	6	7
Rental Assistance	3.1	0	4	n/a
Food (other than hot meal)	--	8	8	9
Other	n/a	n/a	n/a	48.6

The percentages in Table 8 provide further evidence that more guests were attending Project Connect in 2016 for tangible goods compared to 2013, 2014, and 2015. In 2016, 15% of guests attended PC for housing, compared to the 20% that attended in 2014 and 16% that attended in 2015. The purpose of receiving clothes/coat remained steady in 2016 at 45.4, compared to 2015 (46%, respectively). The need for a haircut decreased slightly from 31% in 2015 to 27% in 2016.

The same percentage of guests (89%) who completed an Exit Interview indicated receiving the services for which they came. Approximately 90% of the guests in 2016 were very satisfied with what the services and programs provided at PC and the event overall. Figures 2 and 3 present guest satisfaction and helpfulness ratings of PC 2016.

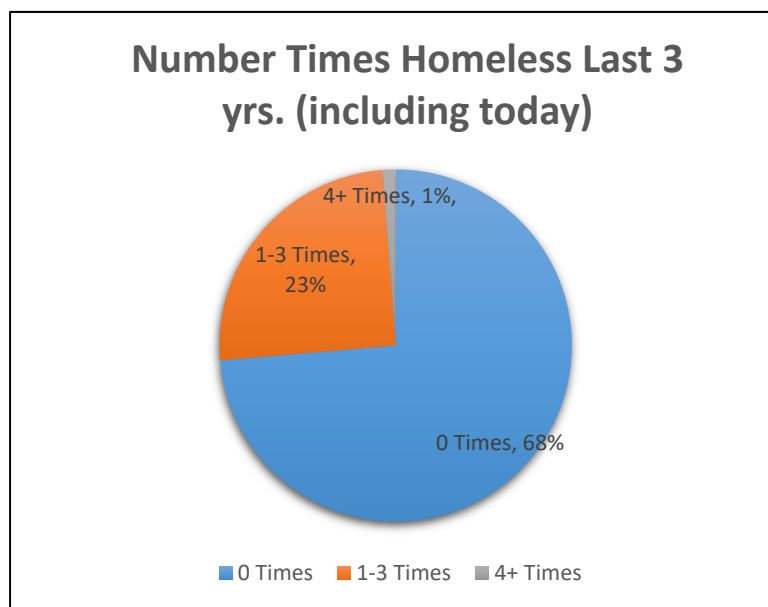


Figure 1. Number times homeless last three years

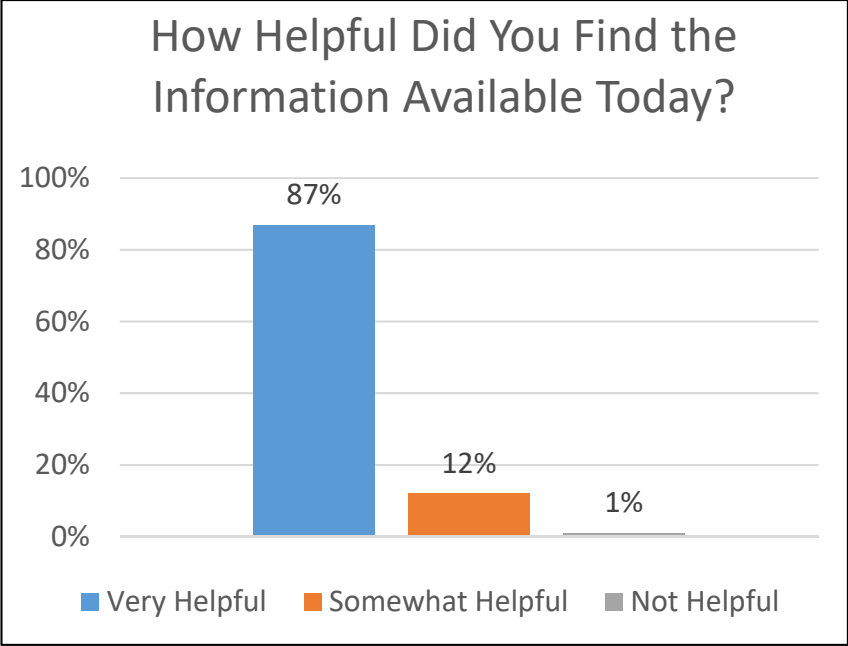


Figure 2. How helpful guests found information at PC 2016

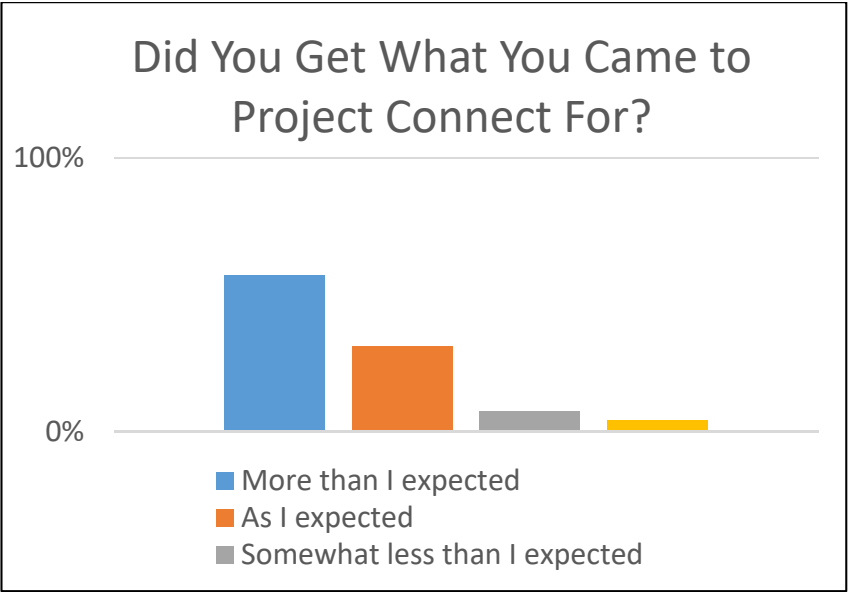


Figure 3. Guests' responses to getting what they came to PC 2016 for

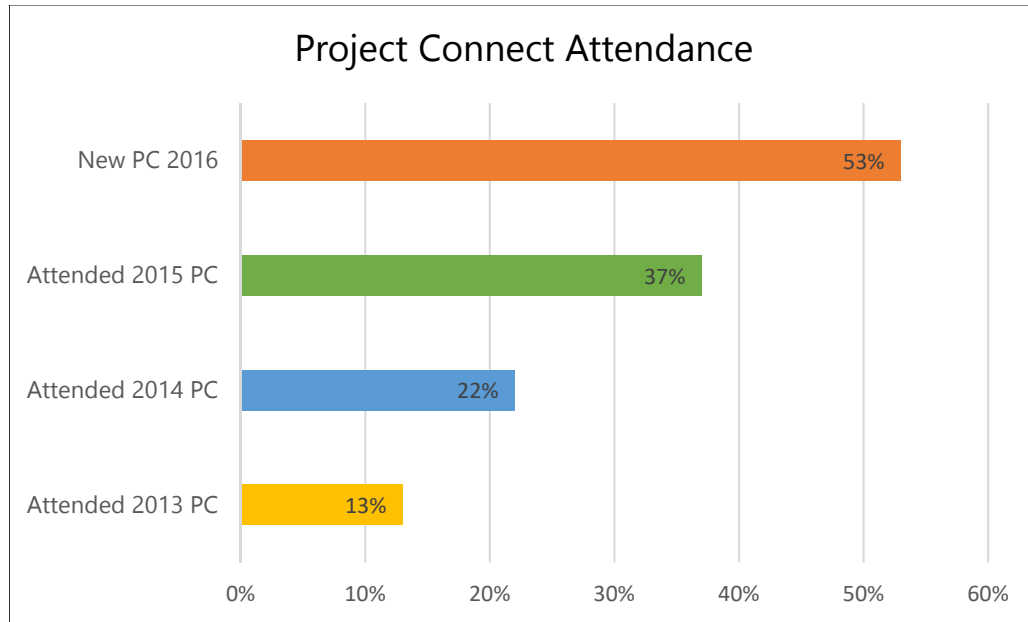


Figure 4. New attendance PC 2016 and Previous Attendance

In Figure 4, about half the guests had already visited PC in the previous three years it was held whereas a little over half visited PC for the first time in 2016. Guests were asked to mark all years they attended in this question. Two questions on the Guests' Exit Survey inquired as to how the organizers of PC could serve them better and what guests would like to see at the next event. Similar to responses in 2015, many guests at the 2016 event noted everything was great the way it was at the event, but a fair number of guests did offer specifics as to how the PC event could be improved. These were:

- More help with clothing, particularly children's clothing
- More food assistance*, food available for specific dietary needs (e.g., diabetic, heart healthy, low carb)
- Shorter wait times
- Specific help for adults and children with disabilities
- More per services (food, animal care)
- Car repair program and gas help*
- Extend time to later in the day

**Consistent comment from previous years*

Figure 5 details the tangibles and takeaways from 2013 through 2016. In addition to these items, a number of new items were accounted for in 2016 that were either not available in previous years or were new to 2016. There were 150-plus coats, 300 pairs of socks, \$100 in gas cards, and 19 laundry cards.



Items/Services	2013	2014	2015	2016
Hot Meals Served	368	426	516	485
Bags of Food	290	325	300	256
Haircuts	80	59	115	111
Dental Services	17	21	22	39
Vision Screenings	50	31	60	43
Flu Shots	38	57	61	47
Clothing Vouchers	\$100	\$300	\$300	150 vouchers
Birth Certificates	n/a	41	100+	110
Personal Hygiene Kits	n/a	150	350	300
Kroger & Meijer Gift Cards	n/a	n/a	\$540	20 cards

Figure 5. Tangibles and takeaways over past three years

RESULTS: VOLUNTEERS



Similar to the 2014 Project Homeless Connect event, there were many types of volunteers at PC 2015 and 2016. Over 150 individuals volunteered as Host Volunteers, Greeters, Intake Volunteers, Guest Coordinators, Floaters, Dining Area Hosts, Food Bussers, Food Service Runners, Food Servers, Food Prep Assistants, Exit Coordinator, and Clean-up Crew. Over 80% of the volunteers served as Hosts. At the end of a volunteer's shift, he/she was asked to provide feedback in a self-report survey that was designed and used by PCs across the country with some minor modifications from the BGSU Research Team. On average, PC 2016 volunteers worked 4 hours to support the event. The following paragraphs present the combined quantitative and qualitative findings from the 125 completed surveys.



Table 9. 2016 Volunteers' Demographics (N = 118)

Characteristics	Percent
Age	
16-24 years of age	58.5
25-44 years of age	16.9
45-59 years of age	11.9
60-69 years of age	6.8
70 and older years of age	5.9
Highest Education Level	
Completed High School/GED	11.4
Trade/Technical School	2.6
Graduate degree	14.9
Some college	48.2
Associate degree	8.7
Bachelor's degree	14.0
Employment	
Employed for wages	23.8
Self-employed	3.8
Out of work less than 1 year	.95
Homemaker	.95
Student	60.9
Retired	9.5
Unable to work	0.0
Gender	
Male	15.3
Female	83.9
Marital Status	
Married	28.3
Divorced	4.4
Widowed	2.7
Single	62.8
Member of an unmarried couple	1.8

The majority of the volunteers was between the ages of 16 and 24 (58.4%), female (83.9%), and noted white (84%) as their race/ethnicity. There was a higher percentage of single volunteers (62%) compared to married volunteers (28.3%), and most had some college experience or a college/higher level degree (85%). Twenty-three percent of the volunteers were employed for wages of self-employed, followed by 60% students. A fair number of volunteers (9.5%) were retired.

As displayed in Figure 6, the majority of volunteers (86%) reported that they were adequately trained to perform their duties, which is down one percent over last year's 87% of volunteers indicating as such. The training video created was appreciated by some volunteers. Of the 14% who reported not being adequately trained, the major theme of their comments focused on the need to know what providers and services were present and where they could be found. Similar to PC 2015 where 78% percent of the volunteers had at least some experience volunteering, 77% had a lot or some volunteer experience prior to PC 2016. One-hundred percent of the volunteers would volunteer for PC again. Figure 8 details other aspects reported as positive experiences for the volunteers on the date of the event.

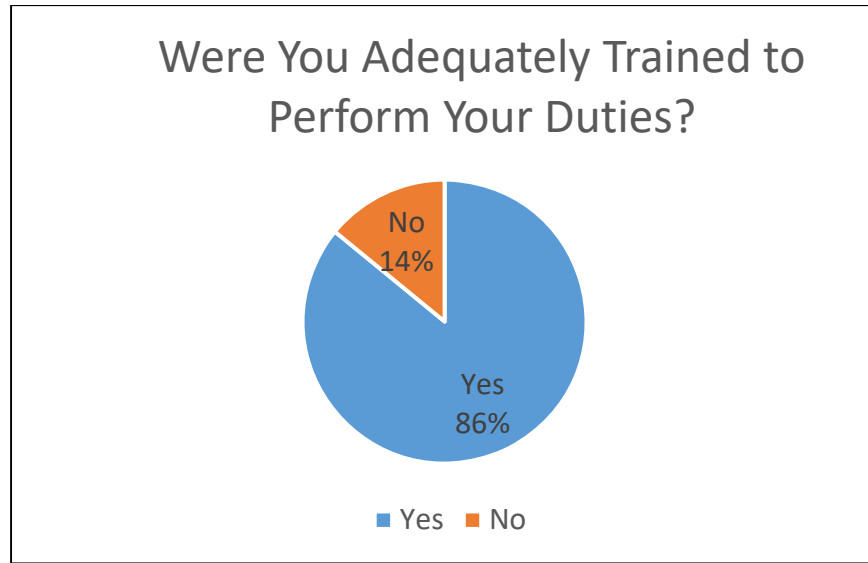


Figure 6. Volunteers' assessment of being adequately trained to perform

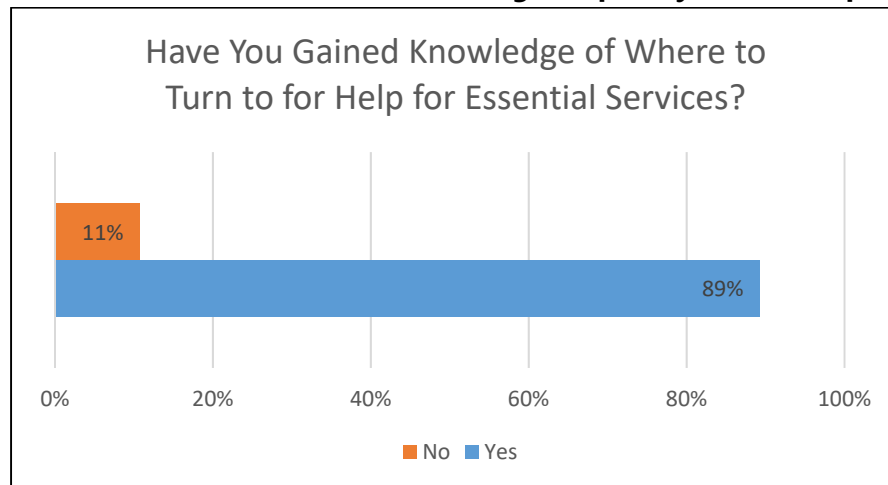


Figure 7. Volunteers' responses to where to turn to help



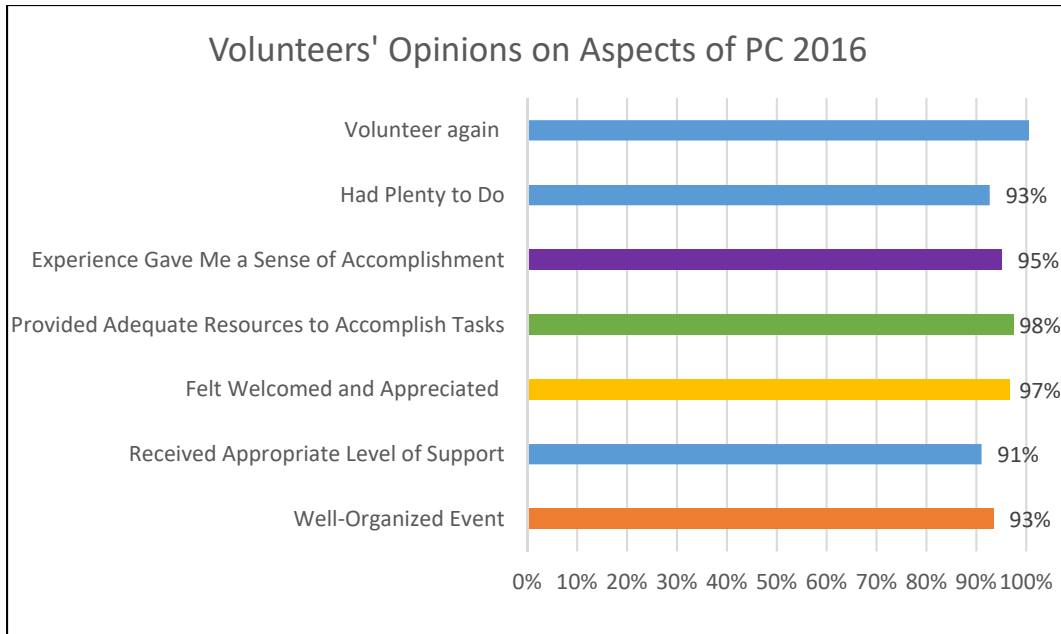


Figure 8. Volunteers' opinions on the event

One of the five goals for PC was to increase community awareness, provider membership, and program coordination for the Continuum of Care Wood County. Without a doubt, increasing community awareness was accomplished. Eighty-nine percent of PC 2016 (was 85% last year) volunteers responded that they gained knowledge of where to turn to help should they or someone they know be in need of essential services or be at risk of experiencing homelessness. This was a slight increase from 2013 (88% respectively) and a decrease in 2014 (91% respectively) reported similarly. Volunteers also noted several organizations and services that made a significant impact on them the day of the Project event:

- Health providers and services were mentioned the most
- Salvation Army
- Legal services
- Birth certificates
- Coats and clothing
- WC Job and Family Services
- NAMI
- On-site services such as haircuts, hot meals, food bags
- Housing services
- Education assistance
- Employment help
- Many volunteers noted "All of them" in their comments
- Family services
- WAM

I think that homelessness is an issue, however I have noticed that many of my guests have homes or a place to live but they do not have insurance or money to buy clothing, pay electric/heat bills, buy food etc. Struggling to make ends meet.

Similar to what was asked of guests, volunteers responded to an open-ended question as to what could be improved for a future PC event. Suggestions for improvements could be made in the following areas (an asterisk* by an item denotes similar comments were noted in 2015):

- **Training**

- More information about the services provided by the agencies*
- More extensive tour of the building and what services were where would be helpful, including second floor providers
- Do a role play of what to expect when walking a guest through from start to finish
- Caution volunteers that they will hear difficult stories from their guests and how to handle, conversation starters would also be helpful
- Explain how to read paperwork and the guest stickers
- What to say when guests ask for services that might not be available during PC
- Consider having a separate training for Food Service volunteers

- **Efficiency and Event Processes**

- Better explain how the kitchen works and the hot meal process (e.g., availability of seconds, returning trays before a new one is refilled)
- Have more people with the red shirts on
- Communicate to hosts if a provider does not show up or if a provider is relocated in the church
- Maybe consider using a text message service to notify of any changes on the day of the event or could be used for contacting Hosts to let them know space is available for their guests for a certain service rather than crowding a popular service and waiting while other services could be visited

- **Signage/Paperwork**

- Color code map to match the color-coded list of services and signage
- Better organization as far as maps and stations (e.g., note general area on the map such as location of the church – upstairs, main floor, family room, etc...)*
- Increase the font size of the table numbers
- Provide a step-by-step list of expectations, checklist, or FAQ to refer to



Very impressed with how well organized, friendly, and helpful everyone has been!

This year's list of improvements was much shorter than previous years. There were many comments where volunteers noted that PC 2016 was well organized and that it gets better each year. Many volunteers noted how much they enjoyed the experience and how it is a great community event.

RESULTS: PROVIDERS

Providers were also asked to complete an evaluation survey on WCPC. Similar to the volunteer survey, the instrument used to collect provider feedback was developed and has been used at many WCPC events across the country. In its third year of this organized effort 53 providers completed the self-report survey. Of the providers who completed the survey 92% of them reported that it was a well organized event and 100% of them reported that they received appropriate level of support. Over 90% of the providers also noted that the WCPC 2015 was a good use of their agency's time. Furthermore, 94% of the respondents felt that the WCPC event met their expectations as they were given opportunities to help potential clients access their services. Some providers reported that the event was a "great positive experience," "very organized," and had "positive energy from all involved". Most providers thought that it was a good way to "learn about the community" and "helping people who need it." Many providers thought that WCPC provided them with a "wonderful opportunity to interact with other service providers and coordinate better communication between our organizations." Additionally, providers reported that they were able to educate guests about available resources and helping them be connected. Some providers recognized that it was an opportunity for them to get their name out in the community about the services they provided. Other providers reported positive nature of the event with excellent volunteers, great food, good transportation, and appreciative clients with whom they were able to meet. Almost without exception, providers felt that many needs were met at the WCPC event, particularly in terms of connecting individuals and families to much-needed resources. Agency personnel reported, "It was great to see how much this event helped people, it was truly a one-stop-shop that offered everything you could possibly imagine." Furthermore, 98% of the providers reported that they would attend WCPC event next year, up from 96% in 2015. Those who were unsure if they would participate in the future indicated that many of the guests were not eligible for their services. Agency workers also reported that a total of \$19,105 worth of services was provided at WCPC event.

Some of the providers, who reported that WCPC event did not meet their expectations, stated that there should be better communication about the expectations of service providers is needed. For instance, one service provider suggested that WCPC should hold a "meeting for volunteers, vendors, etc. to explain the day and how things function before clients arrive." Few service providers indicated that their assigned station was

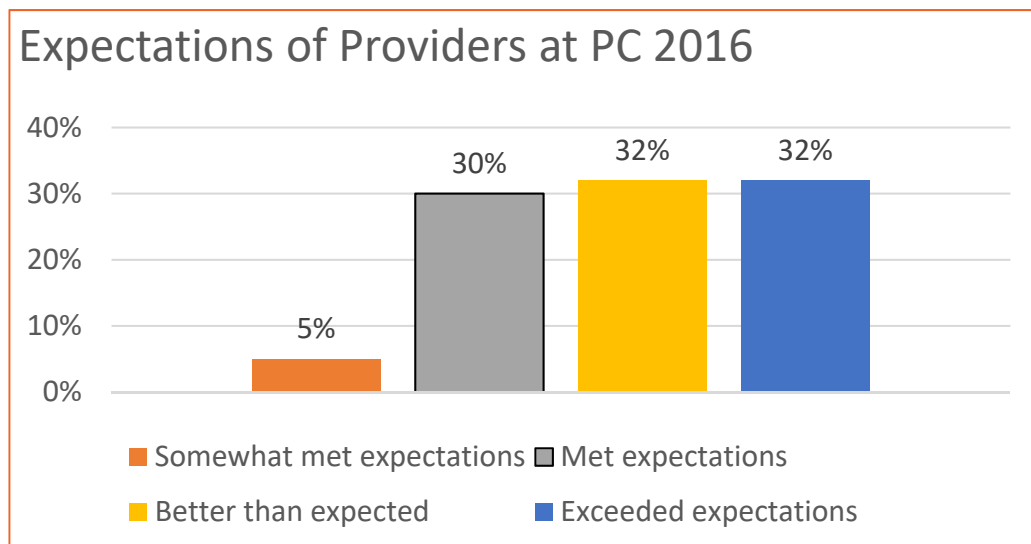


Figure 9. Expectations of Providers Met

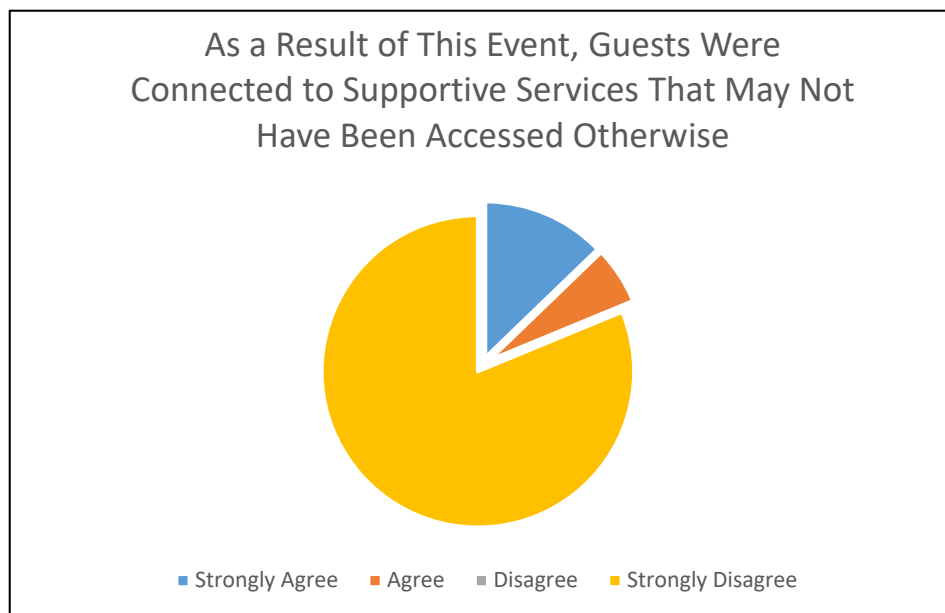


Figure 10. Respondents' Agreement with Access to Supportive Services

not conducive to client interaction and suggested that the room should be more open.

Most providers (62%) reported that WCPC had changed their ideas about what homelessness is and who is involved. Some reported that the event provided a "better understanding of the complexity of homelessness". Across the board, providers were elated to be able to do something to give back to their community and to see so many other available resources. A content analysis of comments by providers was done to determine common themes that emerged about positive aspects of WCPC, which are presented in table 10.

By the Numbers:

- **~\$19,105 In-kind gifts**
- **122 Agency representatives across 52 providers**
- **8 New providers**
- **98% would attend PC again**
- **92% felt welcome and appreciated for the goods/services provide**

Table 10. Positive Aspects of PC According to Collective Provider Comments

Theme	2013 Percent of Comments Reflecting Theme	2014 Percent of Comments Reflecting Theme	2015 Percent of Comments Reflecting Theme	2016 Percent of Comments Reflecting Theme
Talking about our services, providing referrals, and offering other relevant information/options	40	20.62	14.3	
Meeting people/meeting new people	37.2	2.06	8.2	
Networking and connecting with other providers	33	10.31	23.5	
Working with multiple people in a convenient one-stop format with all the resources Wood Co. offers	23.3	16.49	7.1	
Helping people who need help	21	--	8.2	
Ability to advocate/offer services to those who might otherwise not have connected with provider	14	2.06	7.1	
Well-organized event with personal guides and great volunteer support	14	20.62	11.2	
Greeting our patrons and letting them know we care	4.5	--	3.1	
Much more take away at event than what I gave	--	3.09	--	
Happy to be a part of this thank you	--	8.25	2.0	
Turnout was great helped more people this year	--	5.15	4.1	
Get our name out in community, good PR & community outreach	--	7.22	9.2	

It was great to see how much this event helped people, it was truly a one-stop-shop that offered everything you could possibly imagine.

--Provider

It was great to see how much this event helped people, it was truly a one-stop-shop that offered everything you could possibly imagine.

--Provider

More time than usual to get to know patrons and hearing our services are valued and appreciated.

--Provider



Table 11. Providers' Ratings* on Various Aspects of PC 2016 (N = 53)

Statement	Poor	Fair	Average	Good	Excellent
Location	0	2	3	21	27
Duration	0	1	3	22	26
Attendance by guests/clients	1	1	6	19	26
Participation by community providers	0	0	2	10	38
Level of support provided by Project Connect organizers	0	0	0	9	44
Availability of event organizers and volunteers	0	0	0	10	42
Opportunities to interact with other providers at the event	1	3	5	21	22
Opportunities to interact with community members at the event	1	2	2	21	25

*Raw numbers noted.

In addition to the positive aspects, providers also offered suggestions for areas where improvement is needed. There were six main headings that captured the content of providers' comments under improvements for Project Connect 2016. Below are the six areas with specific recommendations:

1. Efficiency/Processing

- Better sign-in process to ensure better assistance
- Put table numbers on maps and signs
- Orientation for providers
- Need more support to provide better services

2. Volunteer Hosts

- More information/training about behavioral issues and services needed
- Training should also include what to expect at the event and information about restrooms and availability of food

3. Marketing and Outreach

- More media coverage
- More PR in advance
- Social media marketing
- Update website for current year's program with "details of the day" information

4. Space

- Better flow of services
- Space felt crowded, more space needed

5. Scope of Services

- Some services were under-utilized and under-visited

6. Communication

- Better explanation to providers of services offered

- Give providers time to check out other providers for referral purposes
- All the services available not on the list
- Make sure people know about each provider
- More information about parking

BGSU RESEARCH TEAM FINAL RECOMMENDATIONS

Taking the input from the providers, guests, volunteers, and Steering Committee members together as a whole, there were four primary areas where improvement for Project Connect 2016 is recommended:

1. Continue to Enhance and Extend Volunteer Host and Intake Worker Training

Even given all of the revised processes and continuing the use of the “Services At-A-Glance” sheet, host volunteers noted numerous times the need for training. Mock walk-throughs, more on who the providers are and what they do, and having more detailed directions prior to event day should continue to be the focus for revising training efforts for PC 2017. One suggestion from last year was to create and make available a training guide where volunteers can learn about the providers and their services, the guest sticker process, and related prior to the event. One suggestion is to send volunteers a link to a guide of providers and their offerings from previous years. Hard copies can also be made available for pick up or mailing. While some providers may not return or be new to PC 2017, having a directory prior to the event might help ease some of the concerns expressed by hosts and intake volunteers about lacking information about what providers do.

A significant number of hosts also requested a better process for pairing them with guests. Guests liked being paired with their host when they entered the event, so lining up hosts and having a Steering Committee member pair the two in an orderly manner might prevent some, for lack of a more tactful way to state this, “cutting the line” by some hosts. Perhaps create a board with numbers on it such that when a number is called from the board, the host who has that number, gives a sheet with his/her name on it to cover his/her number after being matched with a guest. This process would also help determine the hosts who are taking guests around and denote those who are available to be paired with incoming guests.

As expressed last year, more directed training for intake volunteers on data collection forms are highly recommended. Data on the target population of those at-risk for homelessness were not fully captured again this year as only some intake volunteers completed those questions on the intake forms. Stressing the importance of how the information gathered is used and why has to be reinforced not only in training but also on the day of the event.

2. Add Orientation and More Interaction Time for Providers

New to PC 2015, providers requested the desire for an orientation to help with what to expect the day of the event, including information on parking, restrooms, and availability of food. They also noted that they would like to have a better explanation of the services other providers are offering at the event. Another suggestion was that they be given time to go around to visit other providers for referral purposes. The directory recommended for volunteers could also be made available to providers to facilitate this request and to better serve families and individuals in need in Wood County after they register for a spot at PC 2016.

3. Re-Examine and Revise Event Layout

Both providers, volunteers, and guests reported the need for more organization in the areas where providers will be located. For PC 2016, the Logistics Committee should make every attempt to put similar providers in the same area, such as medical providers in one area of St. Mark’s, behavioral health in another, and so forth. The signage and volunteer maps and Services At-A-Glance sheets could be color-matched so that volunteers can readily take their guests to say, the blue area for behavioral health providers, rather than traveling around the church to find a provider. This organization would also allow providers serving similar needs to have a relatively equal chance of being visited by guests. For the past few years, either there were providers whose services were underutilized because they could not be readily found or hosts took guests to whatever provider is the closest to where they currently were in the church. Physically grouping the providers by services delivered can also help shorten wait times and ease congestion throughout the facility.

4. Offer More Tangible Goods, Services, and Provisions

This recommendation was also made in 2014 and while there were considerably more offerings in 2014, guests and volunteers both noted the need to have more dental appointment slots, food, more coats, winter clothing, and car care services. As proposed last year, efforts should be made by the PC 2016 Steering Committee to contact local career centers and colleges such as Penta, Owens, and similar for assistance in some of these areas. Car repair has been a consistent request for the past three years. Given the limited on site space, one option would be to request vouchers from companies that service cars and/or schools with auto technician programs. Extending the provider reach beyond the immediate Bowling Green area to other qualified entities to provide additional tangible goods and services throughout more of Wood County would help extend future connections for more guests.

5. Utilize Electronic Data Collection Measures Wherever Possible

In order to compile the Services at-a Glance form and for logistical purposes, all providers should be required to register through the online system, regardless if they were present in previous years.

REFERENCES

Knecht, T., & Martinez, L. M. (2009). Humanizing the homeless: Does contact erode stereotypes?. *Social Science Research*, 38(3), 521-534.

Mago, V. K., Morden, H. K., Fritz, C., Wu, T., Namazi, S., Geranmayeh, P., & ... Dabbaghian, V. (2013). Analyzing the impact of social factors on homelessness: a Fuzzy Cognitive Map approach. *BMC Medical Informatics & Decision Making*, 13(1), 1-19. doi:10.1186/1472-6947-13-94