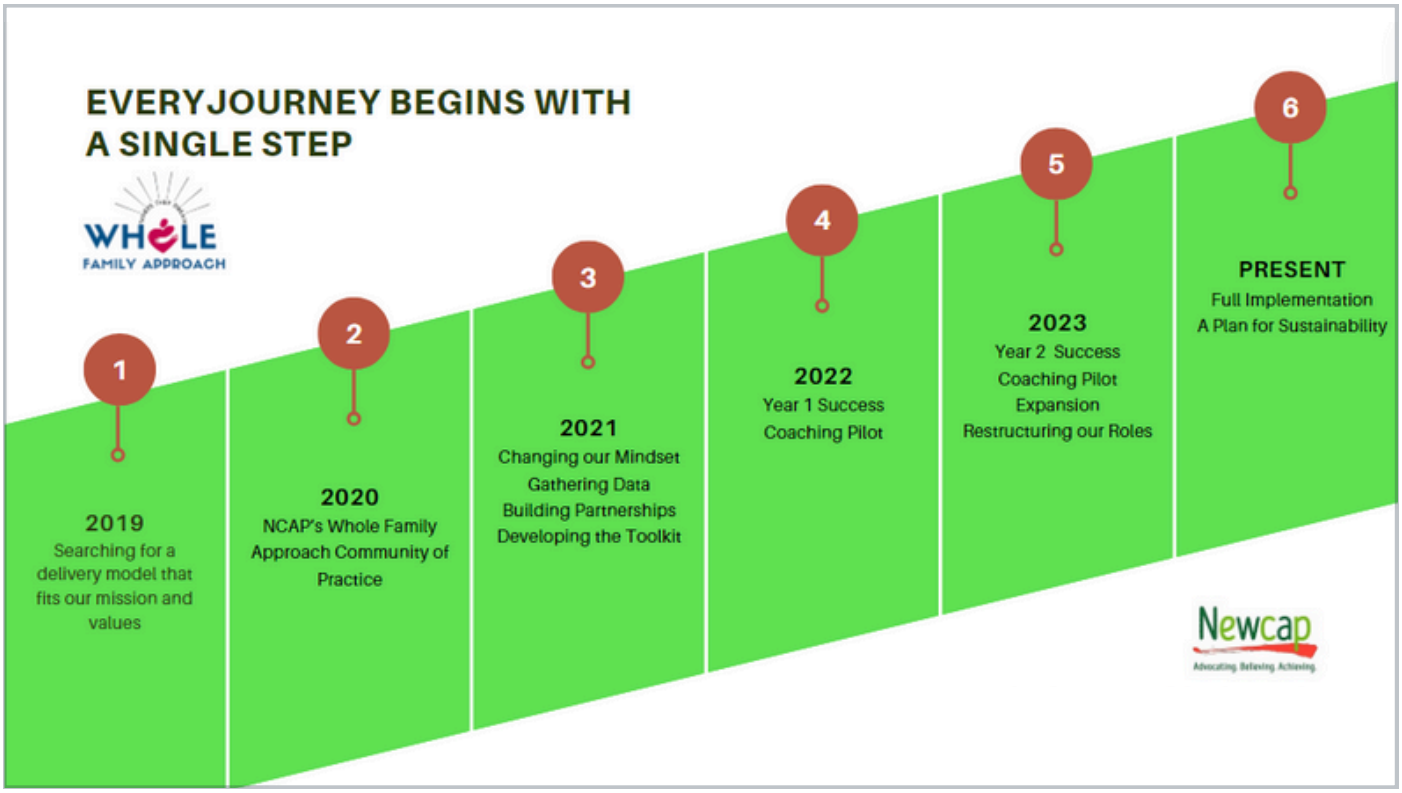
Introductions and Newcap background



1- Searching for a delivery model that fits our mission and values

2- The Whole Family Approach Team
Mission and Vision
Theory of Change
The Design Plan

3 - Family Centered Coaching Mindset
Gathering data using Outreach Events
Participant Journey Map
Identifying service gaps and building partnerships
Measurement tools = "The Matrix"
Goal Plans

3- EmpowOR
Universal Intake
No Wrong Door Referral Process
Presumptive Eligibility
Services and Outcomes Cheat Sheet (Logic Model)
Braiding Blending Funding

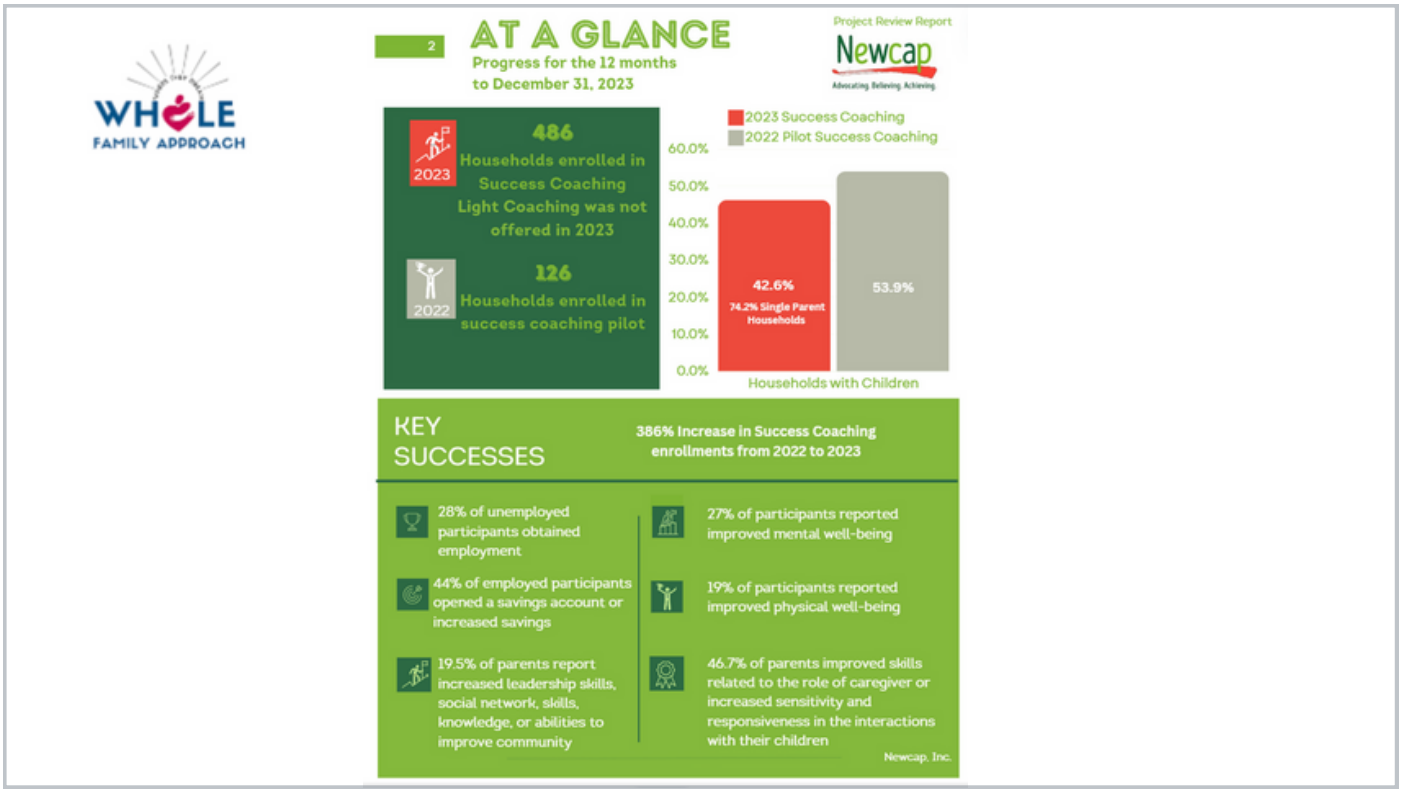
4- Powerful Outcomes
WERA

Light Coaching
Success Coaching

5-Using our Strengths
Job Descriptions
Onboarding
Training and Development
Career Progression Plans

6- Weatherization
Health Services
Expanding Services
CHWs & Pathways HUB Model

Newcap continues our 3+ year journey to transform service delivery to low-income people and families using The Whole Family Approach and the combined Community Health Worker (CHW) and Family Centered Coaching (FCC) models. In 2022, during the pandemic's aftermath, Newcap led a pilot pairing Wisconsin Emergency Rental Assistance (WERA) participant with a Success Coach where the families achieved powerful outcomes that WERA only participants did not. Newcap piloted Success Coaching by offering services to 4933 WI Emergency Rental Assistance (WERA) participants, from those participants: 760 chose to receive light coaching services (worked with a Success Coach every 3 months on Goal Plan and the WERA recertification process), and 126 chose to participate in success coaching (working with a Success Coach at least monthly on Goal Plan). Of the 126 households in the success coaching pilot: 41% increased their savings, 48% opened a savings account, and 40% were unemployed and obtained employment. Newcap had an 18% increase in employment and training services enrollments in 2022. A Whole Family Guiding Coalition was created in Brown County, as well as a youth group, and a Family Advisory Board (FAB) who all began to meet. Success Coaches provided educational workshops and events monthly to build social capital and provided leadership training opportunities to Youth Group and FAB members.



2023, year 2 of the Success Coaching Pilot, the focus was providing success coaching services to participants receiving housing, employment and training, and transportation services. Our Health Clinics, NBC Construction (our for-profit entity), and Weatherization services nominally included success coaching. Concurrently, Newcap restructured our entire organization, all of our roles, and our service delivery model agency wide to eliminate silos and implement fully integrated service delivery. This included purchasing a new database designed for Community Action to track services and outcomes in an integrated service delivery model, have universal access to case notes for embedding Trauma Informed concepts in that our clients only have to tell their story one time, and training staff at all levels on usage; training and developing participant facing roles on CHW and FCC service delivery; and doubled the number of Success Coaches by hiring, training, and developing people with lived experience.

Key successes achieved in 2023:

· 386% Increase in Success Coaching enrollments from 2022 to 2023, from 126 participants to 486 participants.

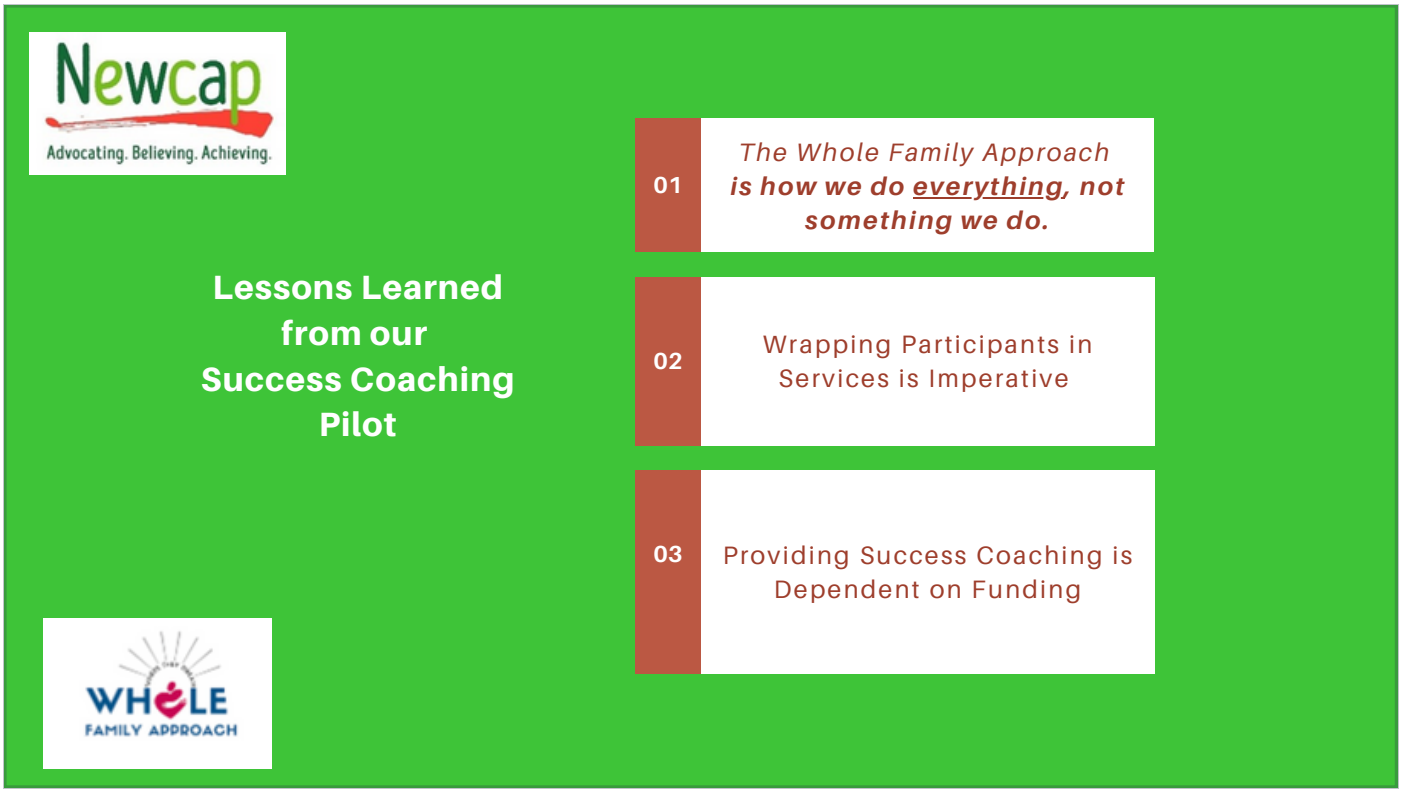
· 28% of unemployed participants obtained employment. It is important to note that 74.2% of participants were single parent households and the childcare crisis affecting our 10-county service area is causing difficulties with obtaining employment. We are working with our Whole Family Guiding Coalitions to strategize solutions.

· 44% of employed participants opened a savings account or increased savings.

· 19.5% of parents report increased leadership skills, social network, skills, knowledge, or abilities to improve their community.

· 46.7% of parents improved skills related to the role of caregiver or increased sensitivity and responsiveness in the interactions with their children.

- 27% of participants reported improved mental well-being.
- 19% of participants reported improved physical well-being.
- New Whole Family Guiding Coalitions were built in Shawano and Marinette, and our Youth Groups, FAB, workshop and outreach event attendance continued to grow.



Why is connecting to services important?

WFA:
Evidence based research shows that wrapping families in services and setting family and individual goals leads to a greater number of positive outcomes including economic mobility, which is necessary to move people from poverty to economic security.

Lessons Learned from SC Pilot:
The earlier we add a Success Coach/coaching services to a person's journey the more positive outcomes are achieved in a shorter amount of time. Housing is obtained faster and the there is an increased probability of maintaining housing and achieving economic security.

Providing Success Coaching is Dependent on Funding: Funding requirements must be met to continue receiving funding. Inputting accurate data into EmpowOR is imperative to maintain and solicit new funding in order to continue providing services. The Self Sufficiency Matrix, case notes, goal plans, income snapshots, benefit worksheets, services and outcomes, demographics, HQS inspections, internal and external monitorings, grant reporting must all be a priority

Braiding and Blending Funding

We've already established that providing coaching increases the probability of moving people from poverty to economic security through evidence based research on the WFA and data collected from our SC pilot. Let's use a different lens to look at Housing First using the Whole Family Approach service delivery model.

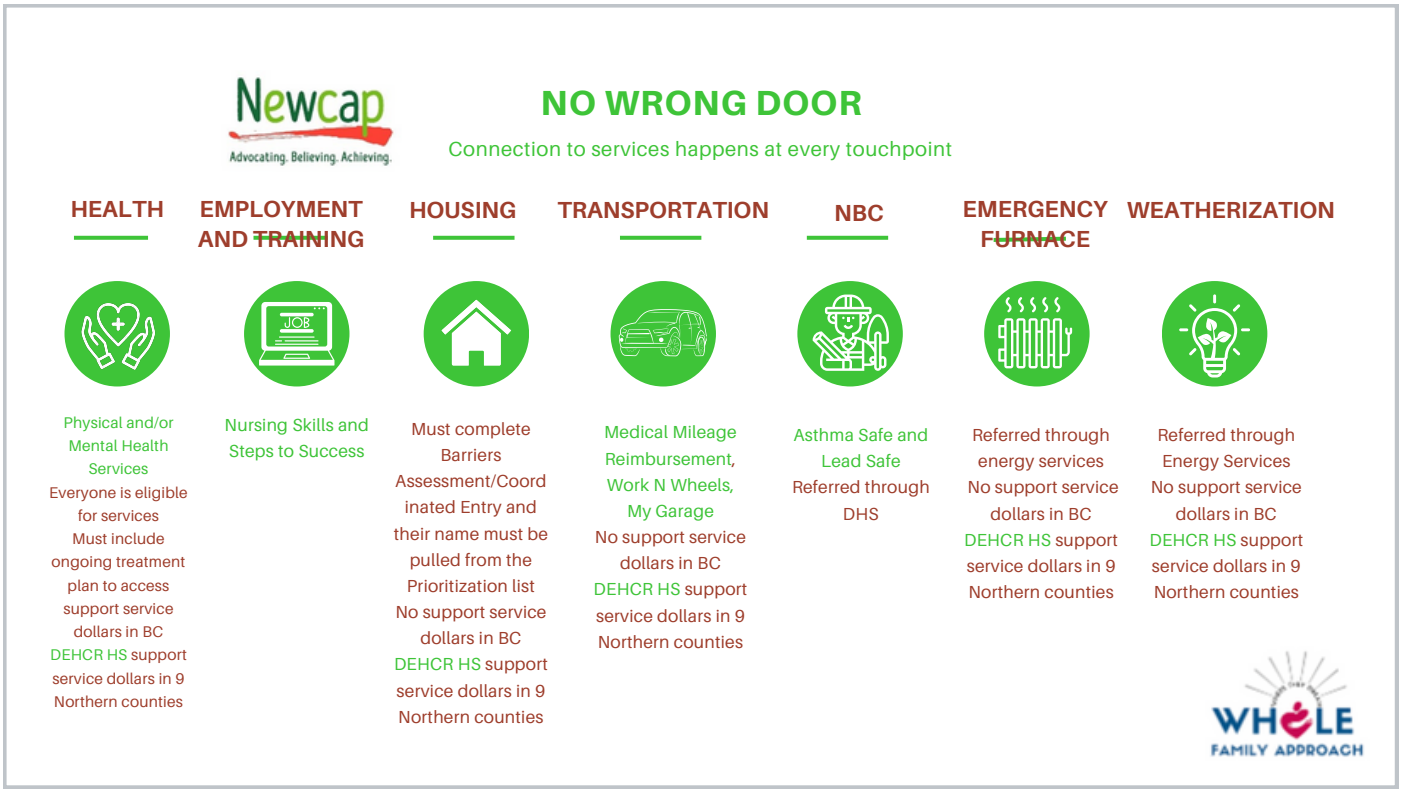
Where are the coaching service dollars? I've highlighted them in green. This is where we need to connect people so that they receive and continue to receive coaching during the entirety of their journey to economic security.

Which roles are providing the services at each touchpoint? Are they connected to coaching dollars?
(Repeat for Housing Domain 1-5)

DEHCR HS only available to people in our 9 Northern counties

Mental and Physical Health Services only include coaching dollars if the person has an ongoing treatment plan for a chronic medical diagnosis. Other challenges to consider: do they already have a provider? Will that provider write a success coach/CHW into their treatment plan?

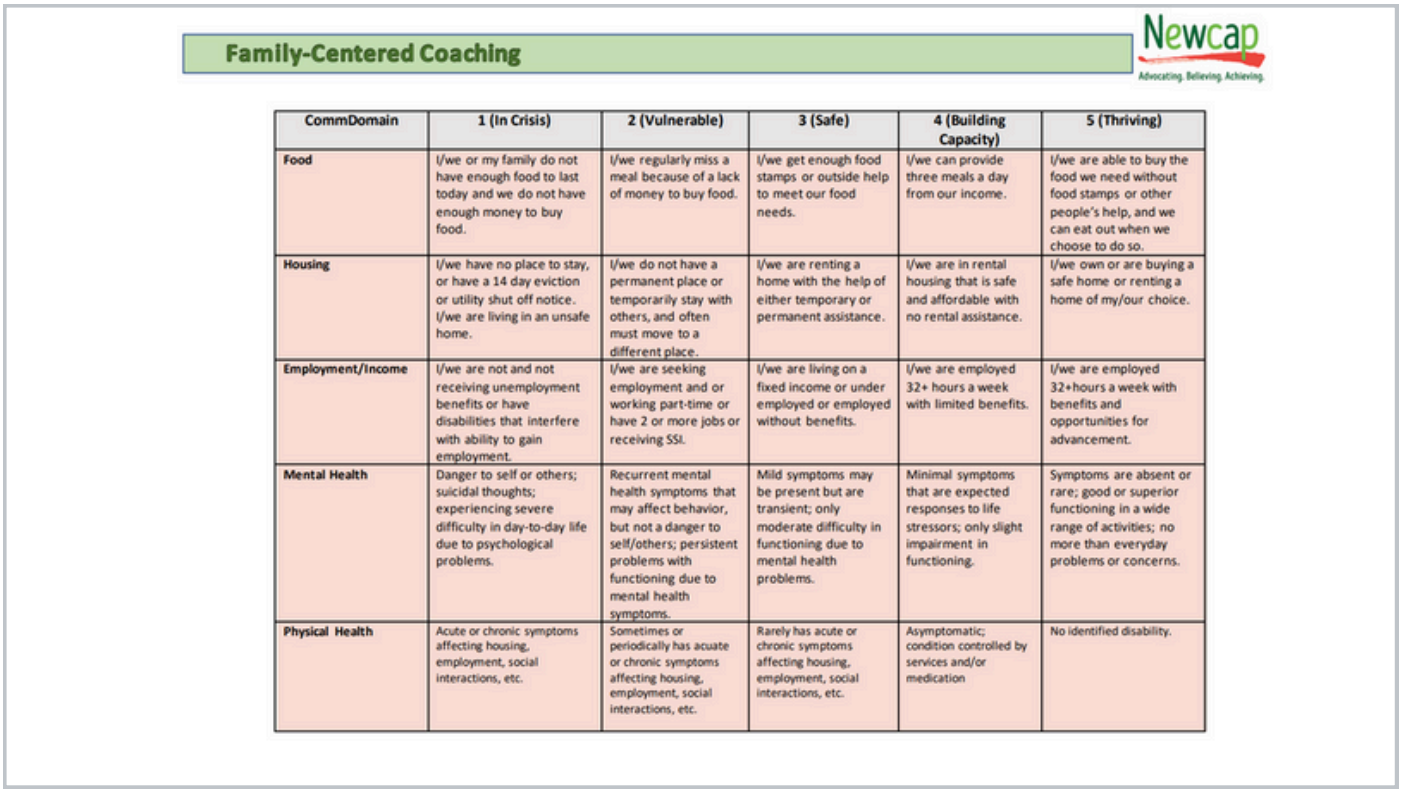
We must braid and blend our funds at every touchpoint to provide coaching the entirety of a person's journey out of poverty.



Newcap is a No Wrong Door agency which means connection to services happens at every touchpoint

It's important to make connections to services that have coaching dollars available
*coaching dollars in green

Example: Health must include ongoing treatment plan so if a person comes in for a vaccination and needs a success coach what service has coaching dollars and makes sense to connect them to?
(Repeat for each door)



Family-Centered Coaching

Newcap
Advocating. Believing. Achieving.

CommDomain	1 (In Crisis)	2 (Vulnerable)	3 (Safe)	4 (Building Capacity)	5 (Thriving)
Food	I/we or my family do not have enough food to last today and we do not have enough money to buy food.	I/we regularly miss a meal because of a lack of money to buy food.	I/we get enough food stamps or outside help to meet our food needs.	I/we can provide three meals a day from our income.	I/we are able to buy the food we need without food stamps or other people's help, and we can eat out when we choose to do so.
Housing	I/we have no place to stay, or have a 14 day eviction or utility shut off notice. I/we are living in an unsafe home.	I/we do not have a permanent place or temporarily stay with others, and often must move to a different place.	I/we are renting a home with the help of either temporary or permanent assistance.	I/we are in rental housing that is safe and affordable with no rental assistance.	I/we own or are buying a safe home or renting a home of my/our choice.
Employment/Income	I/we are not and not receiving unemployment benefits or have disabilities that interfere with ability to gain employment.	I/we are seeking employment and or working part-time or have 2 or more jobs or receiving SSI.	I/we are living on a fixed income or under employed or employed without benefits.	I/we are employed 32+ hours a week with limited benefits.	I/we are employed 32+hours a week with benefits and opportunities for advancement.
Mental Health	Danger to self or others; suicidal thoughts; experiencing severe difficulty in day-to-day life due to psychological problems.	Recurrent mental health symptoms that may affect behavior, but not a danger to self/others; persistent problems with functioning due to mental health symptoms.	Mild symptoms may be present but are transient; only moderate difficulty in functioning due to mental health problems.	Minimal symptoms that are expected responses to life stressors; only slight impairment in functioning.	Symptoms are absent or rare; good or superior functioning in a wide range of activities; no more than everyday problems or concerns.
Physical Health	Acute or chronic symptoms affecting housing, employment, social interactions, etc.	Sometimes or periodically has acuate or chronic symptoms affecting housing, employment, social interactions, etc.	Rarely has acute or chronic symptoms affecting housing, employment, social interactions, etc.	Asymptomatic; condition controlled by services and/or medication	No identified disability.

Developing the Toolkit

Necessary to have a database that supported wrapping participants in services

Our "toolkit" is in EmpowOR

The Bio and 5 Domain/
20 Domain Success Matrix -
essential to making internal and external referrals, connections and developing care teams. Measurement tool, what impact are our services having on participants? Which domains are our services having the most impact and why?

Family-Centered Coaching

Newcap
Advocating. Believing. Achieving.

Domain	1 (In Crisis)	2 (Vulnerable)	3 (Safe)	4 (Building Capacity)	5 (Thriving)
Energy/ Water/Utilities	My utilities are shut off or I/we have a shut off notice.	My utility bills are high and/or past due with notice of termination within the last six months.	My utilities are current and/or I am receiving energy assistance.	My utility bills are current with a history of late payments.	My utility bills are current and paid on time without a history of late payments.
Transportation	I/we have no means of transportation other than walking.	I/we rely on friends or public transportation is not always reliable, or I/we have no valid license.	I/we are able to get transportation that meets my needs.	I/we have at least one reliable vehicle available.	I/we have enough vehicles to meet household transportation needs.
Health Insurance	I/we have no health insurance coverage	All members of household do not have health insurance or have limited coverage	I/we are covered by health insurance at high cost or enrolled in (Medicaid).	I/we covered by health insurance at affordable cost.	My employer pays for health insurance with low to no cost, out of pocket and prescriptions are covered or enrolled on Medicare
Child Care (All children in family-if childcare is not available for one child or not affordable for even one of the children then answer accordingly)	I/we cannot obtain or afford childcare, and this is making it hard to keep employment or enroll in education or training classes.	I/we have childcare provided by friends or family.	I/we receive financial help to enroll my child in safe childcare.	I/we are able to pay for safe, affordable satisfactory childcare that meets my needs.	I/we have childcare provide in a licensed day care or early child education center that is affordable and easy to get to.
Child and Youth Development	My child has been identified with a behavior/developmental. Issue and is not receiving assistance.	Child has identified behavior or developmental issues and is receiving assistance and or child is failing more than one class or dropped out of school.	Child has no identified behavior diagnosis or children with identified behavior issue has a 504 plan	Child has passing scores and is meeting all development milestones	Child is exceeding development or academic milestones.

Family-Centered Coaching

Newcap
Advocating. Believing. Achieving.

Domain	1 (In Crisis)	2 (Vulnerable)	3 (Safe)	4 (Building Capacity)	5 (Thriving)
Home/Family Environment	I/we have multiple sources of stress creating unsafe situations, and/or chaos and /or instability for our family.	I/we have a particular source of stress that causes varying safety and/or stability issues for our family.	I/we provide a consistent, safe, and stable home environment with positive relationships for our family.	I/we have the capacity the weather stressful situations and provide a consistent, safe, and stable home environment with positive relationships for our family	I/we weather stressful situations and maintain family relationship that protect the children and boost all family members well-being, emotional support, and confidence.
Education/Job Skills	I/we do not have a High School Diploma or a GED and no marketable job skills.	I/we have a HS Diploma or GED but lack marketable job skills.	I/we have a HS Diploma or GED and enrolled in post-secondary education.	I/we have an associate degree or vocational training or certification program.	My/our current education, certifications, or job skill sets are sustaining.
Financial Management	I/we regularly miss paying one or more monthly bills or I am receiving calls from a collection agency.	I/we are paying current bills but have no savings and are not able to pay off past debt or credit card.	I/we are paying current bills and the minimum required payments on existing debt/credit.	I/we are paying current bills and making regular payments to reduce debt and regularly paying into savings.	I/we have access to credit and loans at competitive market rates and a clean credit history.
Credit Building	The only credit I can get is high interest loans or credit cards or I have a bankruptcy, foreclosure, loan default in the past 7 years.	I/we do not have and/or are unable to obtain a bank loan or quality for a credit card.	I/we are able to obtain a loan with a cosigner or secure credit card.	I/we are able to get a loan on my own and secure a credit card.	I/we have access to credit and loans at competitive market rates, and a clean credit history.
Asset Building	I/we have no saving, no equity in the home.	I/we have a savings account but make irregular payments when I can.	I/we make regular payments into a saving account, maintain a savings balance of at least $500 and or ate buying a house with existing mortgage.	I/we own a home with mortgage and maintain savings of $500.	I/we own a home and are current on mortgage payments and have a retirement fund (not SSA).

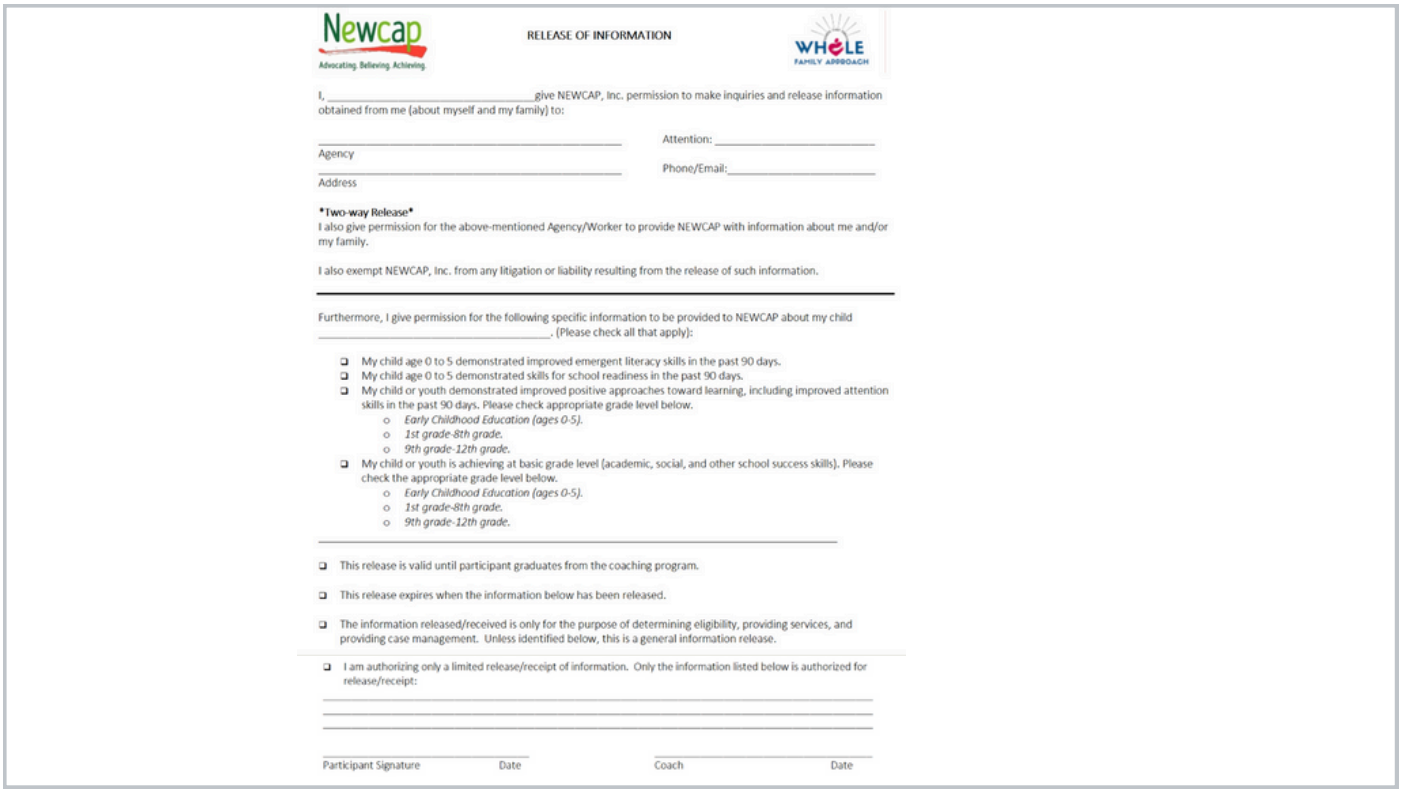
Family-Centered Coaching

Newcap
Advocating. Believing. Achieving.

Domain	1 (In Crisis)	2 (Vulnerable)	3 (Safe)	4 (Building Capacity)	5 (Thriving)
Legal	I/we have current outstating's tickets, warrants or pending legal action or non- compliance with probation or parole.	I/we have current charges, or a trial pending.	I/we are fully complaint with probation/parole terms and have applied for expungement.	I/we have successfully completed probation/parole within the past 12 months. No new charges filed and expungement of criminal charges	I/we have no criminal justice involvement.
Support/Social Networks	I/we have no family or friends to call on for support, help, or assistance.	My/our friends are accessible but are unreliable and show only occasional support.	I/we have at least 3 friends or family who are reliable during emergencies and we can develop new relationships.	I/we have at least 5 friends or family who are reliable and supportive in many ways.	I/we have over 5 friends or family who are reliable, supportive, and available whenever needed and we maintain relationships with each other.
Substance Abuse	Meets criteria for severe abuse/dependence; resulting problems so severe that institutional living or hospitalization may be necessary.	Meets criteria for dependence; preoccupation with use and/or obtaining drugs/alcohol; withdrawal or withdrawal avoidance behaviors evident; use results in avoidance of neglect of essential life activities.	Use within last 6 months; evidence of persistent or recurrent social, occupational, emotional, or physical problems related to use (such as disruptive behavior or housing problems); problems have persisted for at least one month.	Client has used during last 6 months, but no evidence of persistent or recurrent social, occupational, emotional, or physical problems related to use; no evidence of recurrent dangerous use.	No drug use/alcohol abuse in the last 6 months.

Family-Centered Coaching

Domain	1 (In Crisis)	2 (Vulnerable)	3 (Safe)	4 (Building Capacity)	5 (Thriving)
Safety	Home or residence is not safe; immediate level of lethality is extremely high; possible CPS involvement	Safety is threatened/temporary protection is available; level of lethality is high.		Environment is safe, however, future of such is uncertain; safety planning is important.	The environment is apparently safe and stable.
Community Involvement	I/we feel unsafe or unwelcome in my community.	I/we do not know what opportunities exist and/or I do not have the means for my family to participate in community events and activities.	I/we can participate a limited amount of community events and feel safe and welcome.	I/we are aware of opportunities for my family members to participate and feel welcome and encourage them to do the so whenever we can.	My family participates in community events and activities.



RELEASE OF INFORMATION

I, _____ give NEWCAP, Inc. permission to make inquiries and release information obtained from me (about myself and my family) to:

_____ Attention: _____
Agency

_____ Phone/Email: _____
Address

Two-way Release
I also give permission for the above-mentioned Agency/Worker to provide NEWCAP with information about me and/or my family.

I also exempt NEWCAP, Inc. from any litigation or liability resulting from the release of such information.

Furthermore, I give permission for the following specific information to be provided to NEWCAP about my child _____. (Please check all that apply):

- ❑ My child age 0 to 5 demonstrated improved emergent literacy skills in the past 90 days.
- ❑ My child age 0 to 5 demonstrated skills for school readiness in the past 90 days.
- ❑ My child or youth demonstrated improved positive approaches toward learning, including improved attention skills in the past 90 days. Please check appropriate grade level below.
  - o *Early Childhood Education (ages 0-5).*
  - o *1st grade-8th grade.*
  - o *9th grade-12th grade.*
- ❑ My child or youth is achieving at basic grade level (academic, social, and other school success skills). Please check the appropriate grade level below.
  - o *Early Childhood Education (ages 0-5).*
  - o *1st grade-8th grade.*
  - o *9th grade-12th grade.*

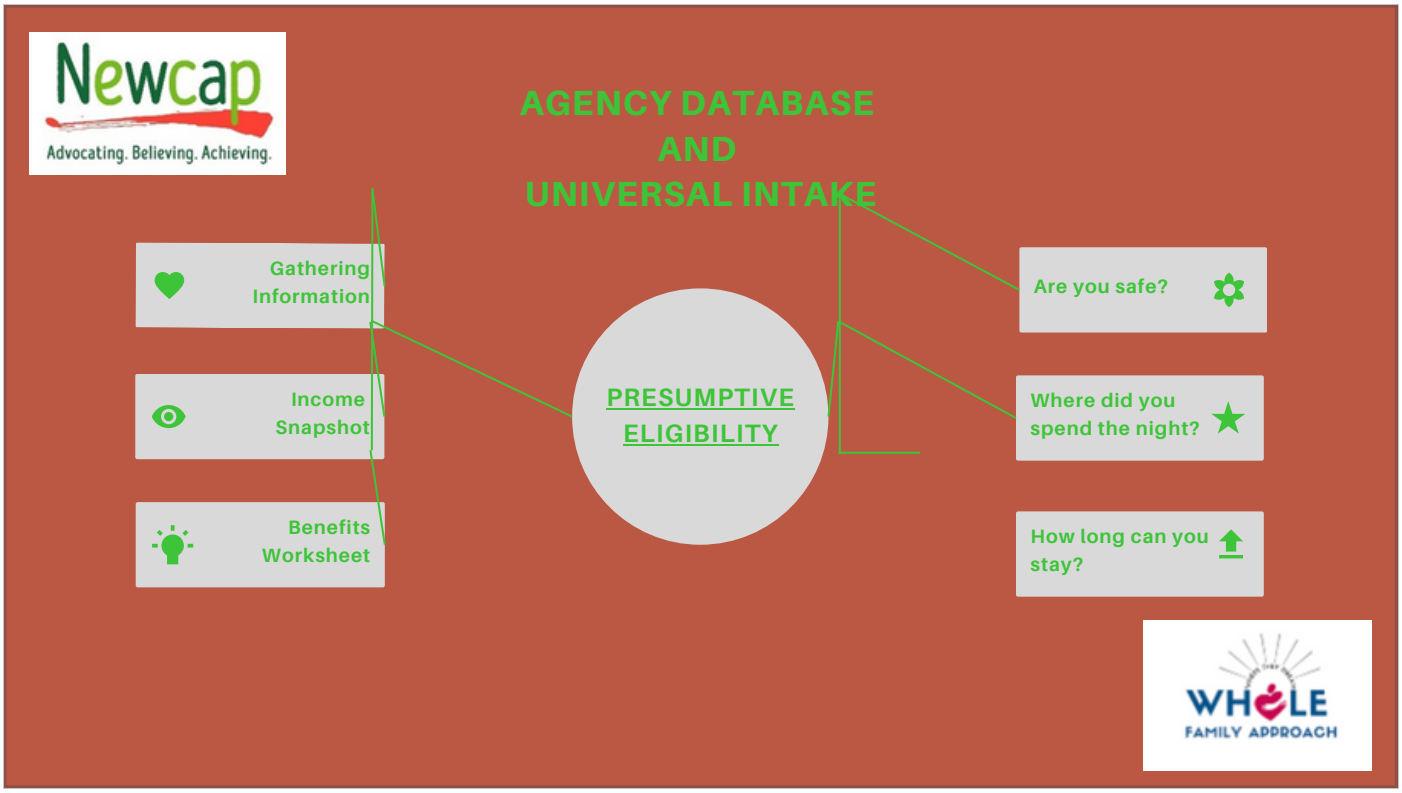
- ❑ This release is valid until participant graduates from the coaching program.
- ❑ This release expires when the information below has been released.
- ❑ The information released/received is only for the purpose of determining eligibility, providing services, and providing case management. Unless identified below, this is a general information release.
- ❑ I am authorizing only a limited release/receipt of information. Only the information listed below is authorized for release/receipt:

_____
_____
_____

_____ _____ _____ _____
Participant Signature Date Coach Date

How do we achieve Youth Outcomes when we do not provide direct services to children?

We work with our school and childcare partners and strengthening the parent/child connection by encouraging parent teacher conference attendance.



The WFA service delivery vision hinges on making connections, warm handoffs, leaning into empathy, compassion, and kindness. The focus is wrapping participants in internal and external services and building care teams.

We needed a database that supported these efforts and could close referral loops.

We do that by connecting to services with dollars for coaching and by delivering services in a meaningful, intentional, connected way using the WFA. Determining presumptive eligibility is the gateway to all of Newcap's services.

We ensure each participant hears about every service available to them by determining PE and allowing the participant to choose those services they wish to receive. Awareness of services should not depend on who answers the phone, which coach they are assigned, or if they are receiving success coaching services, all roles are equally responsible for connecting to services and determining PE

Gathering information related to housing

Income Snapshot

Benefits Worksheet

The Presumptive Eligibility tool allows us to quickly and easily determine what services we

currently provide, who is eligible, and how to make a referral.

Presumptive eligibility is performed at every touchpoint by whoever is serving the participant in that moment-- CSC, CS, SC, Auditor, Clinic Staff, Newcap Builds Staff, IH Staff, anyone answering the phone or assisting a walk in.

If the person's matrix score has changed in any of the 20 Domains presumptive eligibility will be determined again or minimum every 90 days

Whoever answers the phone or is a walk ins first contact performs presumptive eligibility

ODs will keep the Presumptive Eligibility Tool up to date and on the NewcapNet, new services will be added in live time

If a warm handoff is absolutely necessary stay with the participant until they are comfortable with the next team member

Why do we focus on the housing domain? Because where someone slept last night often determines what services they are eligible for.

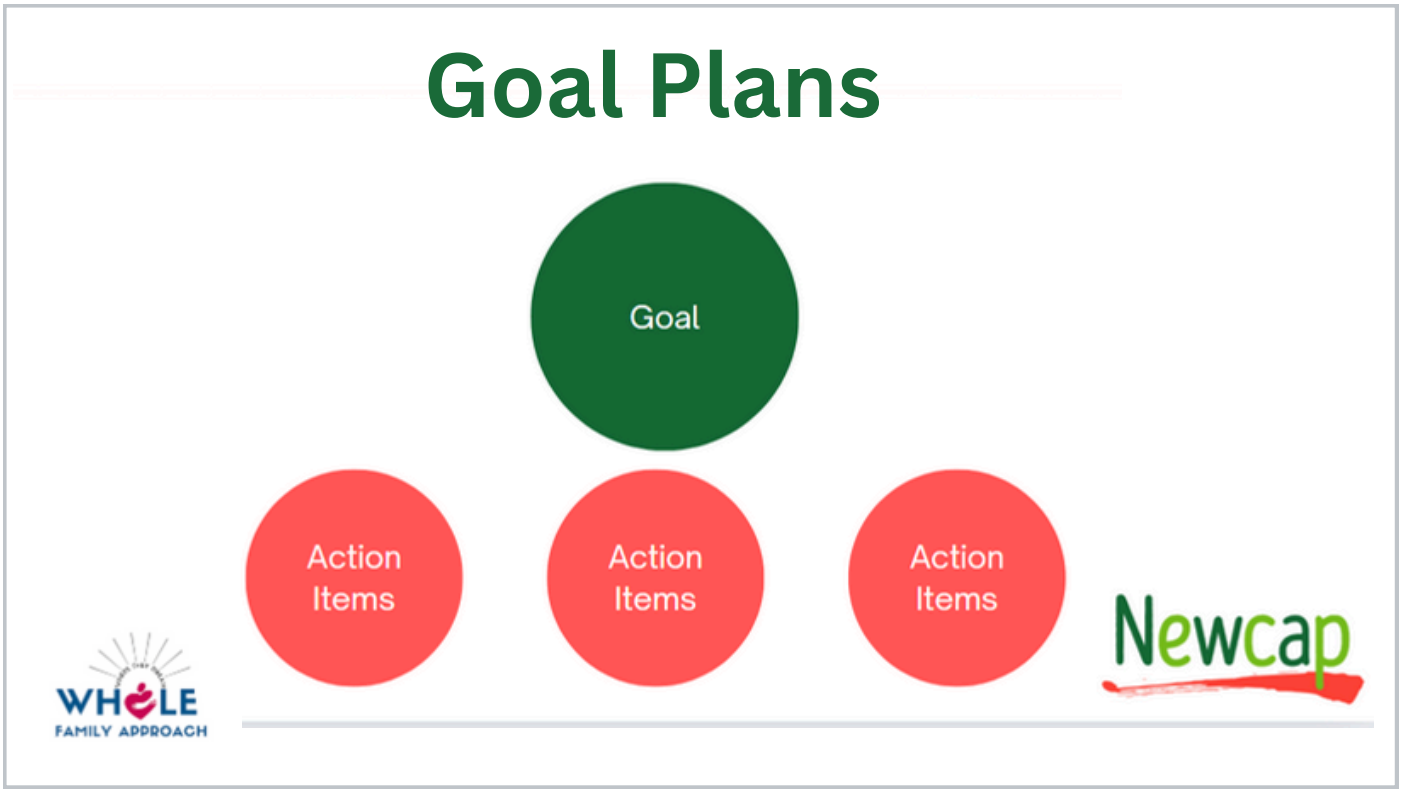
Plus, we are a Housing First agency and we believe housing is a basic human right, that people cannot set and achieve goals if they are worried about where they will sleep at night.

What is our collective goal at each touchpoint-- in this case the housing domain score?

Who and how many teammates might be providing services at each touchpoint?

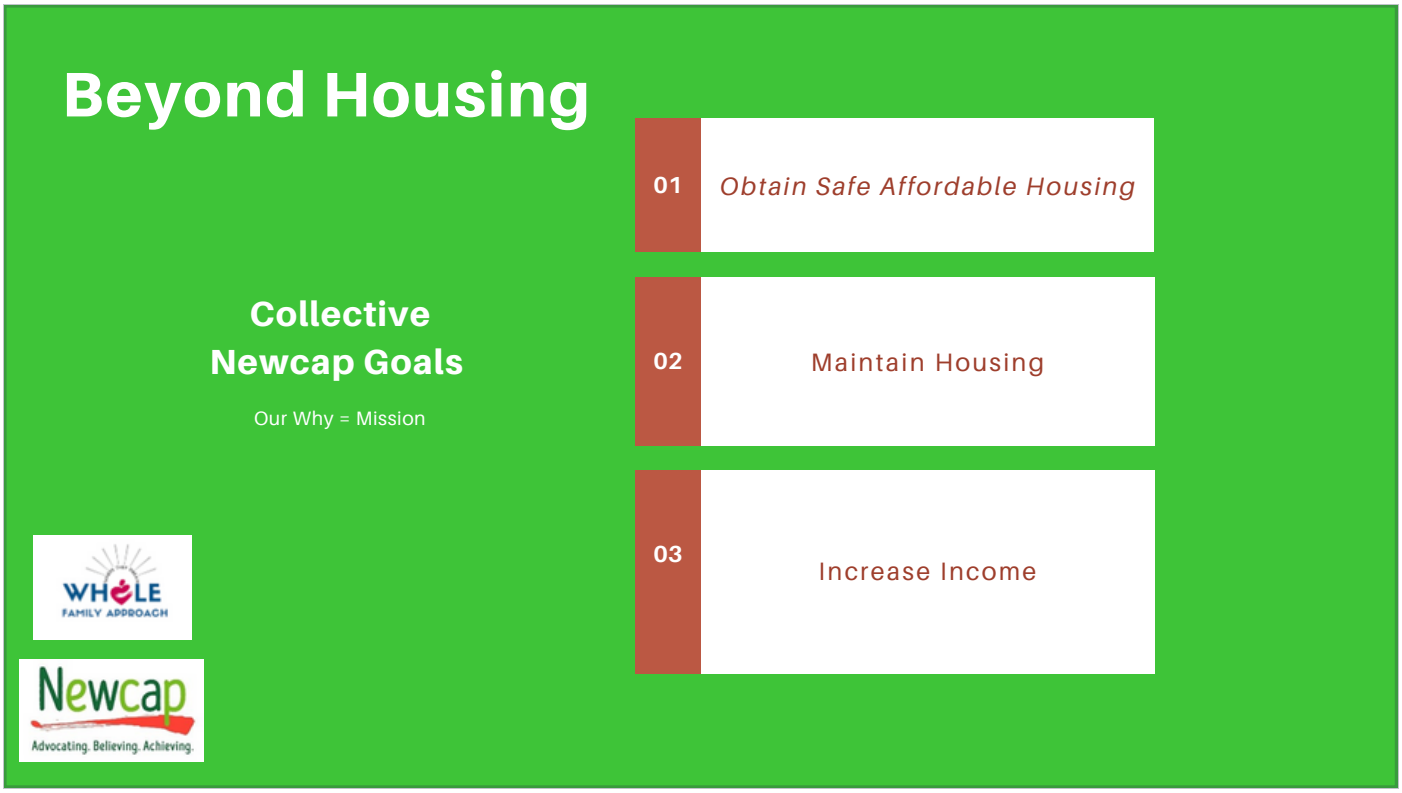
What are those services?

How and where do content experts fit it?



The Goal Plan with goals and action items is
essential to turning participants dreams into reality and for measuring movement from crisis to thriving and services that lead to outcomes.

The goal plan is created by the Newcap team during every stage of the participants journey. It is participant driven with collective goals to meet Newcap's mission of moving people from poverty to economic security.



What are our common collective Newcap goals, regardless of role or title, that we encourage and promote to meet our mission of moving people from poverty to economic security?

Obtain safe, affordable housing

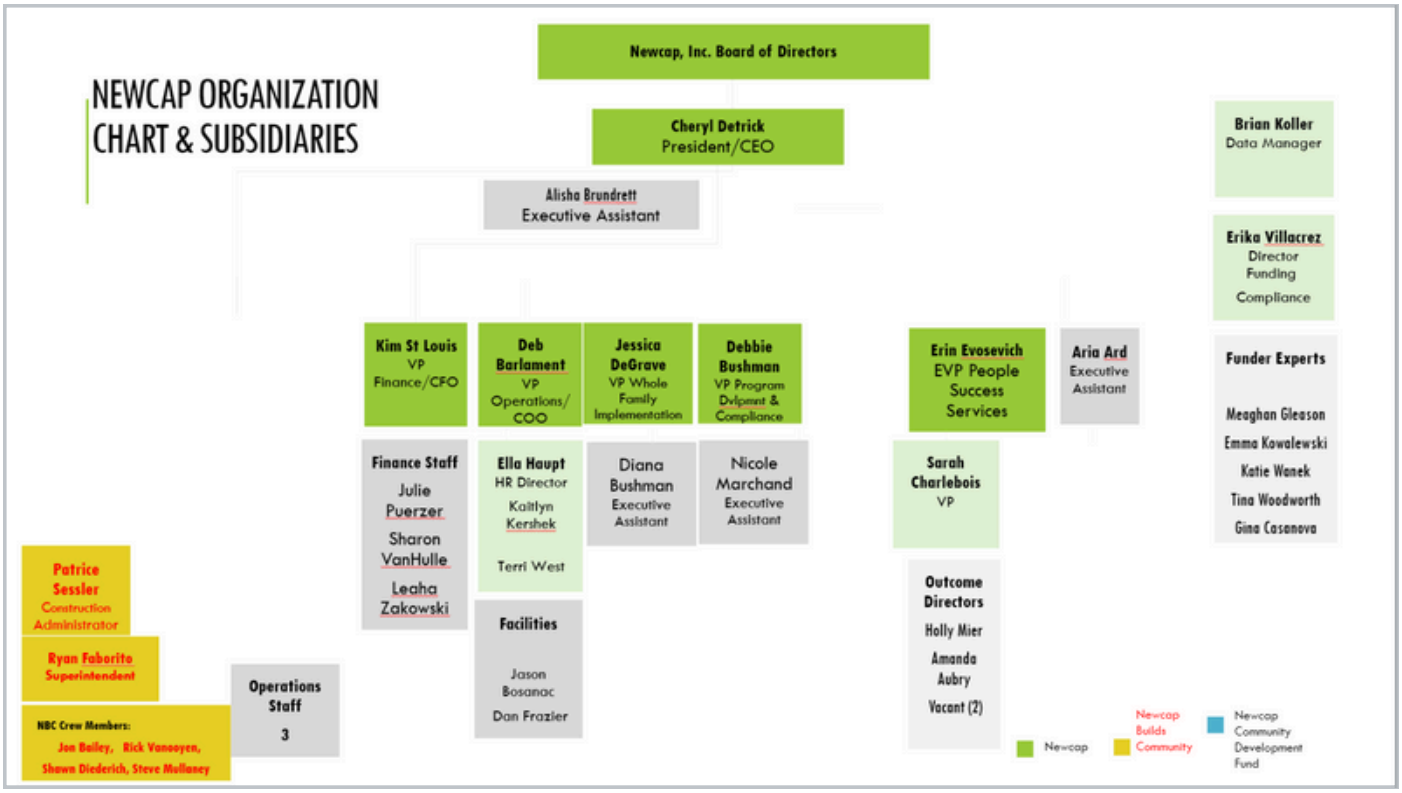
Maintain housing
Parents who improve physical home environment

Beyond housing- What comes next? What services do our participants need to thrive?

Increase income
Employment and Training
Education

Increase Income also means:
Increase financial well being
Increase mental well being
Increase physical well being
Increase sensitivity and responsiveness to children's needs

It was hard to work on collective goals as a Newcap team when we were siloed! This lead to the decision to restructure our roles.



It was hard to work on collective goals as a Newcap team when we were siloed! This lead to the decision to restructure our roles.

Restructuring the organization to deliver every service using the WFA

Metrics for each role ensure we're providing services using the WFA and giving each participant the best possible chance of success.

WFA Metrics for Success Coaches:

Bio and 20 Domain Matrix and Youth Outcomes ROI if applicable – Session 1

Presumptive Eligibility (includes income snapshot and benefits worksheet) - If it has not been completed previously OR it has been more than 90 days since it was completed OR participant moves toward thriving on the matrix scale

Goal Plan– created during Session 2

Goals – created during Session 2 AND added at participant's discretion

Action Items – reviewed at each session and new action items created at each session

Why action items are imperative to participant success

Budget – created during Session 2 or 3 and reviewed at each session

Crisis Plan outlining other supports– created within the first 60 days and reviewed annually or as changes occur

Exit Plan outlining plan to maintain housing after financial assistance/services end – 4 to 6 months before exit from funding source/services

Outcomes (goals) common across funding sources

Obtain housing

Maintain housing (i.e. Section 8)

Decreased reliance on public subsidies (exit plan)

Increase social capitol (crisis plan)

Met basic needs

Increase financial well being (increase income: i.e. creating and reviewing budget, open savings account, put money in savings, receiving financial assistance, gain employment, credential, promotion, apply for and receive SSI or SSDI, etc.)

Increase mental well being

Increase physical well being

Increased sensitivity and responsiveness of caregivers to children's needs

Improved home environment

WFA Metrics for Content Specialists and Content Experts and No Wrong Door Services:

Bio and first 5 Domains of the 20 Domain Matrix and Youth Outcomes ROI if applicable – If it has not been completed previously OR it has been more than 90 days since it was completed

Presumptive Eligibility (includes income snapshot and benefits worksheet) – If it has not been completed previously OR it has been more than 90 days since it was completed OR participant moves toward thriving on the matrix scale

Goal Plan with applicable collective Newcap goal

Outcomes (goals) common across funding sources

Obtain housing

Maintain housing (i.e. Section 8)

Decreased reliance on public subsidies

Increase social capitol

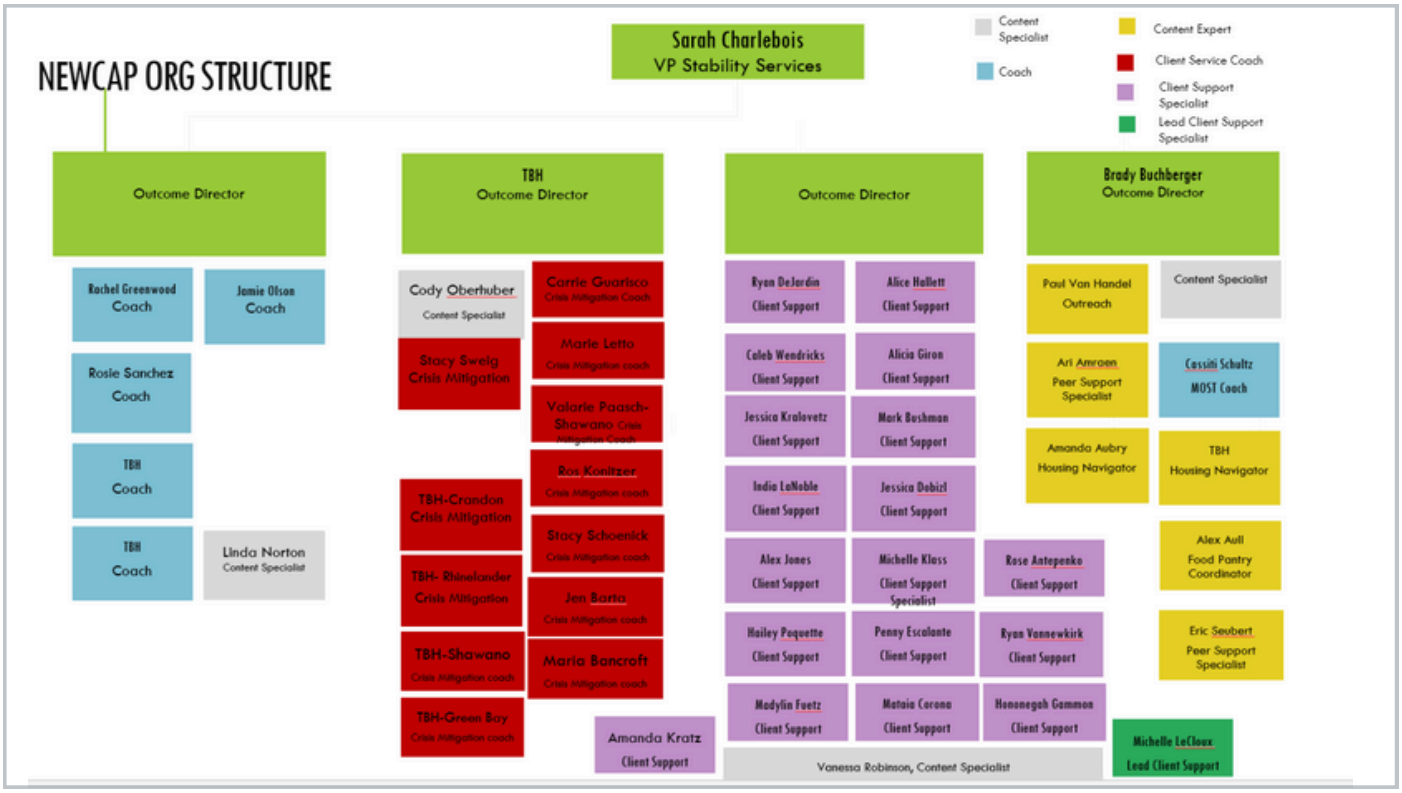
Met basic needs

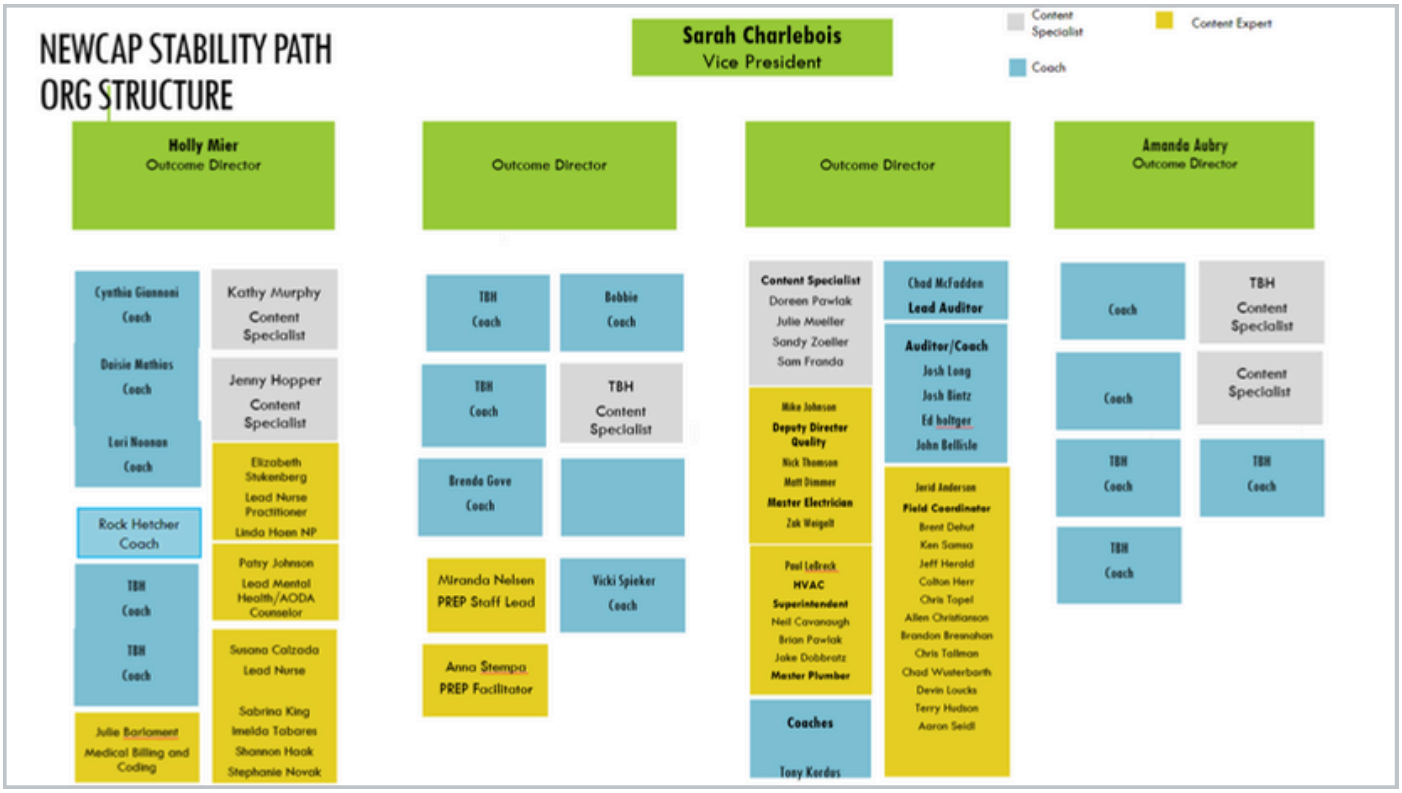
Increase financial well being (increase income: i.e. creating and reviewing budget, open savings account, put money in savings, receiving financial assistance, gain employment, credential, promotion, apply for and receive SSI or SSDI, etc.)

Increase mental well being

Increase physical well being

Improved home environment


NEWCAP ORG STRUCTURE
Sarah Charlebois
VP Stability Services
Content Specialist
Coach
Content Expert
Client Service Coach
Client Support Specialist
Lead Client Support Specialist
Outcome Director
Rachel Greenwood Coach
Jamie Olson Coach
Rosie Sanchez Coach
TBH Coach
TBH Coach
Linda Norton Content Specialist
TBH Outcome Director
Cody Oberhuber Content Specialist
Stacy Sweig Crisis Mitigation
Carrie Guarisco Crisis Mitigation Coach
Marie Letto Crisis Mitigation coach
Valarie Paasch-Shawano Crisis Mitigation Coach
Ros Konitzer Crisis Mitigation coach
TBH-Crandon Crisis Mitigation
Stacy Schoenick Crisis Mitigation coach
TBH- Rhinelander Crisis Mitigation
Jen Barta Crisis Mitigation coach
TBH-Shawano Crisis Mitigation coach
Maria Bancroft Crisis Mitigation coach
TBH-Green Bay Crisis Mitigation coach
Amanda Kratz Client Support
Outcome Director
Ryan DeJordin Client Support
Alice Hallett Client Support
Caleb Wendricks Client Support
Alicia Giron Client Support
Jessica Kralovetz Client Support
Mark Bushman Client Support
India LeNoble Client Support
Jessica Dobizl Client Support
Alex Jones Client Support
Michelle Klass Client Support Specialist
Rose Antepenko Client Support
Hailey Poquette Client Support
Penny Escalante Client Support
Ryan Vannewkirk Client Support
Madylin Fuetz Client Support
Mataio Corona Client Support
Hononegah Gammon Client Support
Vanessa Robinson, Content Specialist
Brady Buchberger Outcome Director
Paul Van Handel Outreach
Content Specialist
Ari Amraen Peer Support Specialist
Cassiti Schultz MOST Coach
Amanda Aubry Housing Navigator
TBH Housing Navigator
Alex Aull Food Pantry Coordinator
Eric Seubert Peer Support Specialist
Michelle LeCloux Lead Client Support


NEWCAP STABILITY PATH
ORG STRUCTURE
Sarah Charlebois
Vice President
Content Specialist
Content Expert
Coach
Holly Mier
Outcome Director
Outcome Director
Outcome Director
Amanda Aubry
Outcome Director
Cynthia Giannoni
Coach
Kathy Murphy
Content Specialist
Doisie Mathias
Coach
Jenny Hopper
Content Specialist
Lori Noonan
Coach
Elizabeth Stukenberg
Lead Nurse Practitioner
Linda Haen NP
Rock Hetcher
Coach
Patsy Johnson
Lead Mental Health/AODA Counselor
TBH
Coach
TBH
Coach
Susana Calzada
Lead Nurse
Sabrina King
Imelda Tabares
Shannon Hoak
Stephanie Novak
Julie Barlament
Medical Billing and Coding
TBH
Coach
Bobbie
Coach
TBH
Coach
TBH
Content Specialist
Brenda Gove
Coach
Miranda Nelson
PREP Staff Lead
Vicki Spieker
Coach
Anna Stempa
PREP Facilitator
Content Specialist
Doreen Pawlak
Julie Mueller
Sandy Zoeller
Sam Franda
Mike Johnson
Deputy Director Quality
Nick Thomson
Matt Dimmer
Master Electrician
Zak Weigelt
Paul LeBreck
HVAC Superintendent
Neil Cavanaugh
Brian Pawlak
Jake Dobbratz
Master Plumber
Coaches
Tony Kordas
Chad McFadden
Lead Auditor
Auditor/Coach
Josh Long
Josh Bintz
Ed holtger
John Bellisle
Jarid Anderson
Field Coordinator
Brent Dehut
Ken Samsa
Jeff Herald
Colton Herr
Chris Topel
Allen Christianson
Brandon Brennahan
Chris Tallman
Chad Wuterbarth
Devin Loucks
Terry Hudson
Aaron Seidl
Coach
Coach
TBH
Coach
TBH
Coach
TBH
Content Specialist
Content Specialist
TBH
Coach

In 2024, the focus is on full implementation, including creating our first Whole Family Approach community and to introduce the Pathways Community Health Institute model and becoming an accredited PCHI, allowing Newcap to train CHWs throughout our ten-county service area, highlighting the importance of embedding the Whole Family Approach into all services, and creating a sustainability plan for deploying Success Coaches/CHWs into our communities. We applied and were accepted into the Urban Institute's "Upward Mobility Community of Learning: Building Coalitions" with a community team comprised of We All Rise, Casa Alba Melonie, Wello, Aurora Bay Care, and the Brown County Health Department. Use the following link to access the Urban Institute's Upward Mobility Framework https://upward-mobility.urban.org/mobility-metrics-framework . The team's Upward Mobility Challenge is increasing access to healthcare for marginalized communities, treating the Social Determinant of Health (SDoH) using the PCHI model, which embeds The Whole Family Approach into services. To achieve full implementation of the Whole Family Approach, our 2024 focus is shifting to braiding and blending of funds to allow us to fully integrate success coaching services into Health, NBC Construction for asthma safe and lead safe homes, and Weatherization clients, as well as providing in-depth service delivery training and development to staff.