



PROFILES IN SUSTAINABILITY

Sustainability Case Studies In Six Aging and Disability Resource Centers

The Lewin Group

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Profiles in ADRC Sustainability

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Introduction

The Aging and Disability Resource Center (ADRC) initiative seeks to empower individuals to make informed choices about long-term support options and to streamline access for consumers to long-term support services. The Administration on Aging (AoA) and the Centers for Medicare & Medicaid Services (CMS) envision establishing ADRCs in every community serving as highly visible and trusted places where people of all ages can turn for information on the full range of long-term support options and for a single point of entry to publicly-funded long-term support programs and benefits. While ADRC grants assist states in designing and implementing ADRCs, the initiative also strives to sustain the key activities of the ADRCs in the long term. According to Mary Anne Scheirer, program sustainability comprises several elements including: 1) continuing to deliver project outcomes beyond the termination of the project; 2) maintaining the program or its components in an identifiable form; and 3) maintaining the capacity to deliver program activities following project implementation.¹

In order to better understand how ADRC staff think about and approach sustainability, The Lewin Group conducted site visits in 2006 to six states that had been awarded ADRC grants in 2003. The study team visited Maryland, Massachusetts, Minnesota, New Hampshire, New Jersey and South Carolina and conducted structured interviews with project leaders, staff, advisory board members, evaluators, volunteers, stakeholders representing seniors and people with disabilities and other project partners at the state and local levels. The structured interviews obtained information in the following areas of inquiry based on Scheirer's framework for sustainability:

1. Elements of the ADRC programs that are most likely to be sustained or replicated;
2. Strategies they used to achieve sustainability; and
3. Conditions, features or characteristics of different ADRC models in different states that facilitate sustainability.

The six states in the study were chosen because they exhibited different model types and represented a range of service delivery strategies and initiatives, as well as organizational and programmatic settings. However, the study team found many areas of common focus. *Exhibit 1* presents brief summaries of the elements, strategies and conditions reported in the six states.

¹ Scheirer, M.A. (2005). "End Games: The Challenge of Sustainability: The Annie E. Casey Foundation, MD.

Following this summary are six sustainability profiles, each of which describes information gathered on the program sustainability site visits. Each profile features five informational components:

- **Project Overview** -- narrative that summarizes key features of the ADRC project in each state.
- **Essential Elements that Will be Sustained** – a text box highlights the grantees’ accomplishments toward improving access to long-term supports, information and services as a result of the ADRC that were seen as the essential elements of the ADRC, and the elements most likely to endure at the end of the grant period.
- **Strategies for Ensuring Sustainability** – the different strategies and approaches that each grantee purposefully used or plans to use to help sustain the essential elements of their projects. The strategies cover all stages of the project, from initial planning through project implementation and evaluation.
- **Facilitators of Sustainability** -- features, conditions, or characteristics of project staff, organizations or the broader community that the grantees’ expect will help ADRC activities and programs to endure when grant funding ends.
- **Challenges and Barriers to Sustainability** -- the primary challenges to sustainability encountered by grantees.
- **Next Steps** – the grantees’ planned and upcoming activities.



Exhibit 1: Sustainability Site Visits Summary of Findings

State & ADRC Name	Elements Most Likely to be Sustained	Strategies Used to Ensure Sustainability	Facilitators of Sustainability
Maryland <i>Maryland Access Point</i>	<ul style="list-style-type: none"> - Streamlined access to services through co-location and/or coordination - Commitment to consumer-centered policies and programs - IT and MIS improvements - Interagency partnerships 	<ul style="list-style-type: none"> - Earn support of diverse stakeholders - Enter into formal partnership agreements with collaborating agencies and organizations - Develop a cohesive marketing strategy to raise awareness of ADRC activities - Track and document programmatic outcomes 	<ul style="list-style-type: none"> - Recognize opportunity for ADRC project to shape state’s broader long-term care reform agenda - View the ADRC as a catalyst for positive systems change - Cultivate participation of “natural” as well as unexpected partners in project activities - Integrate ongoing staff training into project activities as a component of quality services
Massachusetts <i>Aging and Disability Resource Consortium</i>	<ul style="list-style-type: none"> - Decentralized approach to LTC service delivery - Joint/Collaborative management - Alignment of service philosophies among different service systems - Collaborative development of tools and resources 	<ul style="list-style-type: none"> - Build on existing infrastructure - Heed lessons learned from other systems change initiatives - Establish trust between aging and disability partners - Identify shared values 	<ul style="list-style-type: none"> - Engage partners in strategic planning at outset of project - Promote “give and take” among project collaborators - View partnership-building as a project goal
Minnesota <i>MinnesotaHelp Information Network</i>	<ul style="list-style-type: none"> - Multiple approaches for consumers to access streamlined services - ADRC Access Points established in diverse community locations for easy access to services and information - Consumer Decision Tools which are easy to use and readily accessible - Close working relationships that have increased coordination between state and local service delivery systems 	<ul style="list-style-type: none"> - Engage in strategic planning as a critical “first step” in project implementation - Use flexible “give and take” management strategies to foster collaboration - Develop products and resources that have multiple applications and can be used in different settings - Prepare to adapt to policy and political changes ongoing in the state. 	<ul style="list-style-type: none"> - Staying “on message” and focused on the ADRC initiative - Leverage commitment and expertise of “project champions” at the state and local levels - Utilize staff expertise in overcoming bureaucratic barriers to project implementation

State & ADRC Name	Elements Most Likely to be Sustained	Strategies Used to Ensure Sustainability	Facilitators of Sustainability
New Hampshire <i>Service Link Resource Centers</i>	<ul style="list-style-type: none"> - Uniform statewide standards - IT/MIS improvements - Streamlined access through staff co-location - Statewide network of <i>ServiceLinks</i> 	<ul style="list-style-type: none"> - Integrate project with broader systems reform - Involve diverse stakeholders in project activities - Educate policymakers and demonstrate beneficial outcomes 	<ul style="list-style-type: none"> - Develop ADRC as integral component of ongoing systems change - Maximize ADRC relationships within state government structure - Strike balance between state oversight and local flexibility
New Jersey <i>Aging and Disability Resource Connection</i>	<ul style="list-style-type: none"> - Standardized screening and eligibility determination processes - Commitment to consumer-centered policies and programs - Commitment to quality monitoring and improvement 	<ul style="list-style-type: none"> - Engage large and diverse workgroups in planning project activities - Leverage expertise of external consultants - Strive for consensus among stakeholders - Expand responsibility for project success across stakeholder groups and agencies 	<ul style="list-style-type: none"> - View ADRC as an ongoing activity within the state - Develop a “can do” attitude in working around challenges and managing change - Implement policy directives from the “top down” while recognizing local needs
South Carolina <i>Aging and Disability Information Center</i>	<ul style="list-style-type: none"> - Improved consumer access to streamlined services - Close coordination between ADIC and CLTC Medicaid waiver program - Visibility and focus on consumer and provider education - Strengthened state and local-level partnerships 	<ul style="list-style-type: none"> - Build upon prior initiatives - Find a niche for the ADRC - Improve utilization of scarce resources through collaboration - Leverage the potential of partnerships and clout of “project champion” 	<ul style="list-style-type: none"> - Demonstrate and practice visionary leadership - Remain open to developing creative partnerships - Establish clear expectations of staff roles; maintain staff capacity and morale

Sustainability Profile--Maryland

Project Overview

The *Maryland Access Point* (MAP) was designed to enhance and coordinate the existing infrastructure of long term care services, and to deliver services more efficiently and effectively through streamlined Medicaid financial and programmatic eligibility determination processes. With the ADRC grant, the Department of Aging opened two MAP pilot sites that serve seniors and people with physical disabilities, one in an urban/suburban locality and one in a rural locality. The pilot sites have engaged in extensive marketing and outreach activities, markedly increasing the number of contacts made to their centers over the grant period. Maryland is implementing a statewide MIS infrastructure to link aging and disability information systems and integrate consumer tracking tools.

The state also has plans to develop a statewide web-based resource database to enable consumers and professionals to find information and assistance, and to make applications for public programs available on-line. As of Fall 2006, Maryland is now planning a process for expanding the ADRC to other regions in the state.

Essential Elements That Will be Sustained

- ✚ **Streamlined access through co-location and/or coordination.** Two fully-functioning MAP locations provide comprehensive ADRC services in Howard and Worcester Counties. MAP staff and Medicaid eligibility workers are co-located or coordinate closely to move consumers efficiently through the eligibility determination process.
- ✚ **Inter-agency partnerships.** Formal partnership agreements among aging, disability, and Medicaid agencies at the state and local levels have facilitated grant activities and collaboration on other systems change initiatives.
- ✚ **IT and MIS improvements.** New telephone systems and a web-based searchable database will improve consumer access to information and assistance.
- ✚ **Commitment to consumer-centered policies and programs.** Consumer focus and commitment to service coordination has improved customer service and cut down on duplication.

Strategies for Ensuring Sustainability

- ◆ Work at the state level to develop a common vision for the ADRC, manage partnerships and earn support of diverse stakeholders.
- ◆ Enter into formal partnership agreements between the aging, disability, and Medicaid programs that are in separate departments at the state and local levels.
- ◆ Coordinate ADRC activities closely with other systems change initiatives and partner closely with Medicaid.
- ◆ Develop a cohesive statewide marketing strategy to raise awareness of ADRC services among consumers, as well as community and state leaders.

- ◆ Select as pilot sites organizations with strong commitment to the ADRC vision, long track records of service in their communities, and a propensity for innovation.
- ◆ Use pilot site staff expertise to leverage and combine resources at the local level in creative ways, build partnerships with diverse stakeholders, and capitalize on unexpected opportunities.
- ◆ Develop community partnerships along critical pathways.
- ◆ Track and document programmatic outcomes carefully and measure accountability in terms of consumer satisfaction with services.
- ◆ Cultivate partnerships with private foundations; seek out public and private grant opportunities that will support ADRC activities, and think creatively to design fundraising strategies. For example, Worcester County MAP's "Gold Access Fund" facilitates private donations.
- ◆ Educate policymakers and others in the public and private sectors to obtain fiscal and programmatic support for the ADRC.

Sustainability Facilitators

- ✓ Project leaders recognizing the opportunity of the ADRC to shape the state's broader long-term care reform initiatives.
- ✓ Viewing the ADRC grant as a catalyst for positive change.
- ✓ Keeping in mind the political climate in which the ADRC operates both at the state and local levels.
- ✓ Staff who are skilled at cultivating participation of natural and unexpected partners in project activities.
- ✓ Strong commitment to continuous staff training and cross training, which is viewed as crucial to staff effectiveness and an integral component of the provision of quality services and ongoing quality improvement.
- ✓ Project leaders and staff at all levels viewing MIS/IT resources as important long-term investments that enable them to work "smarter, not harder".
- ✓ Commitment to developing services that are responsive to consumers' needs, and incorporating the findings of ongoing evaluation.

Challenges to Sustainability

- ❖ Securing adequate funding for the long-term maintenance and support of MAP IT/MIS infrastructure and programs.
- ❖ Improving partnerships and collaboration among aging and disability service systems at the state and local level.
- ❖ Implementing "fast track" eligibility determination policies and practices.
- ❖ Serving increasing numbers of consumers without sacrificing quality.

Next Steps

- Select software vendor, develop and launch statewide web-based resource database.
- Pursue streamlined eligibility determination processes for HCBS services and embed those in MAP's service systems.
- Finalize creation of on-line application for Medicaid and other service programs to be used statewide and across multiple agencies.
- Develop strategic plan to guide MAP's future expansion and evolution.



[Sustainability Profile--Massachusetts](#)

Project Overview

The *Massachusetts Aging and Disability Resource Consortium* was conceived as a decentralized service system based on partnerships between Massachusetts' Aging Services Access Points (ASAPs) and Centers for Independent Living. Managed by the Executive Office of Elder Affairs, the Consortium has been piloted in the Merrimack Valley by the Elder Services of the Merrimack Valley (ESMV) and the Northeast Independent Living Program, Inc. (NILP). These organizations maintain their own identities but through membership in the consortium, they partner to increase and streamline access to services for older adults and people with disabilities in the community. Staff in both organizations have been cross-trained about the different service philosophies of the aging network and disability network, the needs and values of the different populations, and the different resources available to them. Together, they have standardized intake, referral and case management procedures, increasing access to the service system for individuals in both populations. The Consortium model is now expanding to the North Shore region and the state plans to replicate the model, with some regional variation, statewide.

Although developed independently, the Massachusetts ADRC takes advantage of the state's major effort to streamline consumer and provider access statewide is being implemented through Virtual Gateway, an internet portal which supports common, on-line screening and assessment tools for diverse HHS consumers in diverse programs including Medicaid, WIC, community services and long-term supports for people with disabilities, elders and veterans. A planned, 2nd Phase enhancement of Virtual Gateway will include a web-based Resource Locator to improve information and referral services and to strengthen the capacity of consumers and family members to make informed choices about available services.

Essential Elements That Will Be Sustained

- ✦ **Decentralized approach to delivery of LTC services.** Massachusetts has shown that multiple independent entities can successfully collaborate to improve access and set a higher standard for services by creating virtual as well as physical networks to deliver information, assistance and referral services.
- ✦ **Management through partnership.** Both organizations now take a collaborative approach to many of their core activities.
- ✦ **Alignment of service philosophies.** Both partner organizations achieved a new understanding and appreciation for the different populations, as well the two service systems and their philosophies. The partnership created a safe learning environment in which staff from both organizations can exchange ideas, make mistakes, be forgiven, and keep working toward common goals.
- ✦ **Collaboratively developed tools, processes and resources.** The Community Transition Team, new intake and referral processes, and "The Green Book" that combines aging and disability community resources will be used as examples to help other regions in the state develop ADRCs.

Strategies for Ensuring Sustainability

- ◆ Use the ADRC grant as an opportunity to build on existing infrastructure, such as the Aging Services Access Points, which was established as the single point of entry system in Massachusetts for the aging population.
- ◆ Integrate project goals with broader system-level reforms, and closely coordinate ADRC activities with other systems change initiatives such as the Systems Transformation Grant, and partner closely with Medicaid.
- ◆ Take heed of lessons learned from other systems change initiatives, being careful to be open, inclusive and responsive to stakeholder and consumer priorities.
- ◆ Choose organizations to build the consortium that are well-known, well-trusted, and well-established and that have common goals and complementary strengths.
- ◆ Do not create a new and separately branded entity that has to be sustained and that might draw strength away from existing organizations.
- ◆ Establish trust between aging and disability service system through equal partnership, and work to dismantle turf issues between the aging and disability service systems. For example, ESMV and NILP have gone on to pursue other grant opportunities in partnership – something they had never done prior to the ADRC.
- ◆ Project leaders helped aging and disability stakeholders identify shared values and common approaches for improving services by making them more efficient and effective.
- ◆ Involve partners in meaningful, productive, and mutually-beneficial ways, such as the Community Transition team, where different agencies work together to facilitate transitions from nursing facilities and to increase nursing facility diversions through group problem-solving.

Facilitators of Sustainability

- ✓ Structure of state government where the Executive Office of Elder Affairs is under the same umbrella department with disability programs and Medicaid and has responsibility for some Medicaid waiver functions. This has created opportunities for improved alliances between the aging and disability communities and strengthens coordination among these programs.
- ✓ Emphasis at state and local levels on careful planning prior to implementation of project activities.
- ✓ Agreement among partnering agencies to retain their own individual autonomy while collaborating on key functions in order to streamline access to information, services and supports for elders and persons of disabilities of all ages.
- ✓ Commitment from leaders of both disability and aging programs to the ADRC vision and their ability to manage the collaboration of diverse partners and stakeholders.

- ✓ State and local project leaders seeing themselves as working together in a collaborative partnership, with “give and take” on both sides.
- ✓ Viewing strong partnerships as an outcome all to itself and a key to sustainability.
- ✓ Individuals on planning and advisory groups viewing themselves as ambassadors for the ADRC project and articulating the project’s vision and goals to service providers, consumers and community partners.
- ✓ Project staff and partners with a strong commitment to designing consumer-centered policies and procedures.
- ✓ Staff who remain focused on achieving project goals even during times of uncertainty.
- ✓ Project champions emerging at all levels who keep partnership and grant activities going through all phases of the project.

Challenges to Sustainability

- ❖ Replicating the ASAP-ILC partnering model throughout the state, where there are fewer and less well staffed ILCs than ASAPS.
- ❖ Marketing the collaboration in a way that informs, and does not confuse, the public.
- ❖ Keeping up with the almost continuous training, cross-training and education necessary to maintain service standards.
- ❖ Understanding the diverse groups involved in LTC issues and then “putting the pieces together” such as Part D, SHINE, Ombudsman program, mental health services, transportation, housing, and so forth; ensuring that linkages stay in place when staff leave.
- ❖ Fully implementing Virtual Gateway and integrating IT and communications systems.

Next Steps

- ➔ Host Leadership Meeting with all ILC and ASAP Executive Directors, including Executive Leadership from the Executive Office of Health and Human Services, to share the vision of the ADRC model going forward, and identify naturally-occurring partnerships and champions to expand the model into new regions.
- ➔ Develop an ADRC-specific web site.
- ➔ Continue to work with collaborating partners on rollout of Phase 2 of Virtual Gateway including implementation of Resource Information Locator to assist hospital and nursing home discharge planners, as well as individuals and their families in locating community services to support individuals to remain in or transition into the community. This function will also improve access to information and eligibility determinations so that individuals can receive benefits and services sooner.

- Engage in activities that will ensure sustainability of the project.
- Continue to develop the ADRC Toolkit for expansion sites.








[Sustainability Profile--Minnesota](#)

Project Overview

The Minnesota Board on Aging, in partnership with the Hennepin County Department of Human Services and Public Health, is piloting the *MinnesotaHelp Network* in Hennepin County - a virtual and physical network of information and assistance access points. The network builds on MinnesotaHelp.Info, the statewide interactive online resource database for consumers and providers, toll free telephone assistance through the statewide Senior and Disability Linkage Lines, and referral systems that connect consumers with long term care consultation and assistance.

Hennepin County established several "Network Portal" sites in libraries, health clinics, senior centers, residential facilities, faith-based community centers. Hennepin County is training staff and volunteers in these sites about the MinnesotaHelp Network so they can assist consumers in accessing online tools, information and resources. The state developed a web-based consumer decision tool for seniors that helps seniors, families, caregivers and professions link to appropriate resources, and start the process of assessment and eligibility determination if needed. Minnesota conducted outreach and educational programs throughout the state about long-term care services, planning and options.

Essential Elements That Will be Sustained

-  **Multiple approaches to streamlining access.** Consumers can access information and assistance in several ways: through web-based systems, by telephone and in-person from community organizations. Similarly, Hennepin County uses multiple approaches to obtain consumer information, match consumer needs with services, and track and monitor client services. Work is proceeding on integrated application and referral processes and financial and functional eligibility determinations and coordinating these across multiple agencies.
-  **Network Portals.** Hennepin County has established a network of ADRC portals in diverse community locations to facilitate consumer access to information and resources.
-  **Consumer decision tools.** ADRC developed accessible and easy-to-use Consumer Decision Tools that have multiple applications for a range of systems change initiatives ongoing in the state.
-  **State, county and community partnerships.** Through the ADRC, state and county staff built close working relationships and increased coordination between state and local service delivery systems - to the benefit of both systems.
-  **Commitment to stakeholder involvement.** Consumers and advocates in the aging and disability communities have been involved in planning, testing, and monitoring satisfaction with ADRC tools, information, and services.

Strategies for Ensuring Sustainability

- ◆ Engage in extensive long-term strategic planning for improving information, assistance and access in the state through systems that are highly usable, responsive and accessible – and incorporate the ADRC into the plan.
- ◆ Use the ADRC grant as an opportunity to expand, refine and improve information and assistance networks such as the Senior and Disability Linkage Lines and MinnesotaHelp.info, and to develop integrated web-based service systems.
- ◆ Integrate project goals with broader system-level reforms.
- ◆ Use flexible, “give and take” management strategies to develop truly collaborative partnerships between state and local agencies in a state-supervised, county-administered system.
- ◆ Build strong partnerships and relationships among stakeholders that had not been in place prior to the grant, engaging them in collaborative planning and building consensus through shared values.
- ◆ Value and act on the insights and diverse perspectives of partners who represent various constituent groups.
- ◆ Identify, cultivate and value partners not typically part of health and human service systems, such as libraries, maximizing the contributions of partners such as these to assist in promoting awareness about the ADRC.
- ◆ Design ADRC as a large network of community organizations that your target populations already interact with, so they become informed about and have a stake in the success of the initiative.
- ◆ Develop products or resources that have multiple applications for multiple initiatives, such as the Consumer Decision Tools.
- ◆ Make MIS enhancements in partnership between local and state entities, to develop compatible and sustainable systems.
- ◆ Pursue grant funding strategically, keeping the state’s broader vision for systems change in mind.
- ◆ Educate and collaborate with policymakers and other partners in the public and private sector to develop and maximize fiscal and programmatic support for the ADRC.
- ◆ Keep abreast of policy and political changes so that the ADRC can appropriately respond and adapt to those changes.

Sustainability Facilitators

- ✓ Structure of Hennepin County’s government system where aging, disability, and Medicaid programs are in same department.

- ✓ Integrating ADRC activities into ongoing systems change initiatives. Staff and project leaders closely aligned ADRC project goals with Minnesota’s broader systems reform objectives.
- ✓ Viewing ADRC as a catalyst for long term systems change efforts rather than as a one-time three-year grant.
- ✓ Leadership who are able to provide the technical and management expertise, as well as the collaborative opportunities, necessary to realize their long-term vision for MIS and IT systems.
- ✓ Staff who are experienced working on ongoing systems change initiatives, and skilled in overcoming bureaucratic barriers.
- ✓ Staying on message and focused on the mission of the ADRC initiative - not getting distracted by competing demands.
- ✓ Several project champions emerging at both the state and pilot site levels.

Challenges to Sustainability

- ❖ Ensuring that ADRC program activities remain relevant to all populations as the state continues to restructure its service systems to meet the needs of all people who require human services regardless of age, disability or economic status.
- ❖ Securing and maintaining continued support at all levels – federal, state, local and community.

Next Steps

- ➔ Expand Network Portal sites with adequate staff, facilities, training and technology.
- ➔ Develop and maintain strong relationships with critical pathways as project activities expand.
- ➔ Managing change at all project levels in a rapidly-changing environment.
- ➔ Implement comprehensive “Direct Connect” IT/MIS and service integration project.



Sustainability Profile--New Hampshire

Project Overview

New Hampshire's *ServiceLink Resource Centers* build upon the ServiceLink network of county-based organizations that provide "one stop" access to information and long-term services for older adults, people with disabilities and chronic illnesses, family caregivers and individuals planning for future long-term support needs. With the ADRC grant, the Bureau of Elderly and Adult Services and the University of New Hampshire have overseen the transition of ServiceLink providers into ServiceLink Resource Centers in five counties. Six more ServiceLink sites will become Resource Centers in 2006, expanding coverage statewide. The pilot sites offer information and referral, counseling and care planning, as well as co-located staff who conduct level of care assessments and make financial eligibility determinations. They have also engaged in extensive outreach and marketing activities, raising visibility among consumers and increasing the number of calls to their centers. The state purchased an integrated software system for I&R and case management, which has been implemented across the ServiceLink network.

Essential Elements That Will be Sustained

- ✦ **Uniform statewide standards.** The state's oversight and management of the ADRC project, in collaboration with the ServiceLink providers, has established uniformity in procedures and training, especially regarding consumer service and use of technology.
- ✦ **IT and MIS improvements.** The new I&R/client tracking system has facilitated uniform data collection, information sharing, and improved referral and service coordination.
- ✦ **Streamlined access through co-location.** New Hampshire now has a "one stop" service system in which all the key functions of the ADRC are carried out in one location, including I&R, options counseling, face-to-face clinical assessments, and financial eligibility determinations.
- ✦ **Strong network of ServiceLinks across the state.** While operating as independent non-profit organizations, the ServiceLink directors and staff from across the state share resources, information, expertise, and advice.

Strategies for Ensuring Sustainability

- ◆ Use the ADRC grant as an opportunity to improve existing infrastructure and build on accomplishments of prior initiatives, such as the ServiceLink system.
- ◆ Integrate project goals with broader system-level reforms, and closely coordinate ADRC activities with other systems change initiatives, such as the Systems Transformation Grant.



- ◆ Involve diverse stakeholders in grant activities, goals and development of new processes at the outset of the grant.
- ◆ Structure the ADRCs as independent non-profit contractors to the state, with the flexibility to raise money, partner, and operate in ways that meet the local community's needs.
- ◆ Strategically identify community organizations to involve, experts in other service systems, and opportunities to support and to receive support from organizations with common values and objectives.
- ◆ Educate policymakers and others in the public and private sectors to obtain fiscal and programmatic support for the ADRC.
- ◆ Demonstrate to policy makers and legislators the cost-effectiveness of streamlining services and the benefits of the ADRC approach to comprehensive information and services.

Facilitators of Sustainability

- ✓ Viewing the ADRC as expanding and building ongoing systems change efforts rather than as a separate activity.
- ✓ Structure of state government where Bureau of Elderly and Adult Services is in the same umbrella department with Medicaid program.
- ✓ Staying updated on policy changes at the state and local level so ADRC can appropriately respond and adapt to those changes, for example, shifts in budget concerns or changes in leadership.
- ✓ Being able to recognize and take advantage of support from state leaders when it comes.
- ✓ Striking a balance between state oversight and local flexibility.
- ✓ Advisory boards, committees and workgroups with have diverse consumer / stakeholder representation and input.
- ✓ Strong commitment by project staff and advisory board members to building a consumer centered system.
- ✓ Valuing the insights and diverse perspectives of partners who represent various constituent groups - learning that consumer choice means different things to different people and how to accommodate those differences in decision-making.
- ✓ Capacity for and commitment to continuous quality improvement and staff training.
- ✓ Valuing the contributions of unexpected partners that emerged to assist in promoting awareness about the ADRC.

Challenges to Sustainability

- ❖ Overcoming barriers of having some Medicaid functions separated into different bureaus within umbrella department.
- ❖ Developing a common set of operations and procedures among staff in different counties without sacrificing regional uniqueness.
- ❖ Strengthening relationships between aging and disability advocates so both groups can better represent their interests by speaking with one voice.
- ❖ Overcoming legislators' fears of the "woodwork effect" in obtaining fiscal resources.
- ❖ Continuing momentum as stakeholders and advocates start to see the program as safe and well-established.
- ❖ Obtaining service provider support for ADRC goals, especially along critical pathways.
- ❖ Securing the physical office space necessary to house the full ADRC team of staff and volunteers.
- ❖ Reaching and serving private-pay clients effectively.

Next Steps

- ➔ Fully integrate ADRC and ServiceLink information and assistance programs, as well as eligibility and assessment processes for seniors and persons of all ages with all types of disabilities.
- ➔ Continue to improve the capacity of the IT/MIS infrastructure by merging databases to provide seamless services and single point of entry
- ➔ ServiceLinks to take on responsibility for administering SHIP program.
- ➔ Continue to open new pilot sites.



Sustainability Profile--New Jersey

Project Overview

The New Jersey *Aging and Disability Resource Connection* is a central component of the state's broader system reform efforts which seek to improve access and streamline long-term care services for seniors and people with disabilities. Through the ADRC project, the Department of Health and Senior Services is coordinating processes and staff in order to integrate I&R functions with assistance, counseling, assessment and eligibility determination procedures. The ADRC is developing a web-based information and resource database, building on the New Jersey EASE system. New Jersey has established two pilot sites in different geographic and demographic regions of the state, which are testing new automated intake, pre-screening and assessment processes. The state is committed to statewide expansion of the ADRC model. The grantee continues to collaborate with the state Medicaid agency to streamline eligibility determination for home and community-based services through a "fast track" process. Significant contributions have been made to the ADRC by the State Management Team, the ADRC Advisory Board, the pilot counties and a large and diverse group of partners and stakeholders who serve on 12 work groups.

Essential Elements That Will be Sustained

- ✚ **ADRC central to state systems reform.** The ADRC was described as the "fabric" that holds other systems change efforts together. The state plans to expand the ADRC statewide.
- ✚ **Management through partnership, collaboration and stakeholder involvement.** The ADRC relies heavily on work groups of partners and stakeholders for planning and implementation of the project.
- ✚ **ADRC Algorithm and Client Pathway.** Developed to identify, define and outline the client pathway and decision-making process for determining clinical and financial eligibility and accessing information.
- ✚ **Standardized screening and eligibility processes.** The ADRC has developed a uniform intake/pre-screening/clinical assessment tool and will continue efforts to "fast track" eligibility determination for home and community based programs.
- ✚ **IT and MIS enhancements.** MIS tools have automated intake, pre-screening and clinical assessment processes, reduced duplication of consumer data gathering, and helped facilitate data sharing and reporting.
- ✚ **Commitment to consumer centered policies and programs.** State leaders and staff will continue to pursue programs and policies based on consumer choice and community integration through the ADRC.
- ✚ **Commitment to quality monitoring and improvement.** The ADRC-based Training Academy offers programs to inform, update and cross-train state and county staff on an ongoing basis.

Strategies for Ensuring Sustainability

- ◆ Engage the leadership of the state Medicaid and disability offices in management of the initiative through a State Management Team.
- ◆ Invite a large and diverse set of stakeholders to serve on work groups to plan and develop ADRC activities, spreading responsibility for the success of the ADRC across large number of stakeholders and staff in many agencies.
- ◆ Use the ADRC grant as an opportunity to build on and improve existing infrastructure, such as NJ EASE and, internally, to realign State functions to support the systems change initiative.
- ◆ Integrate project goals with broader system-level reforms, closely coordinate ADRC activities with other systems change initiatives.
- ◆ Devote significant time and effort to research and planning prior to and during all phases of implementation.
- ◆ Leverage the expertise of external consultants to provide objective perspective in assessing grant activities.
- ◆ Incorporate a quality initiative plan into the ADRC model that broadens the effort to measure, monitor and improve the quality of service system.
- ◆ Be flexible about meeting different needs in different localities, work in collaboration with counties, and strive for consensus among stakeholders.
- ◆ Identify project champions who will articulate the goals and objectives of the grant to wider audiences.
- ◆ Draw down federal matching funds for Medicaid services offered through ADRC.
- ◆ Pursue state funding to support ADRC activities and expansion.

Facilitators of Sustainability

- ✓ Viewing the ADRC grant as an opportunity to expand and promote ongoing systems change efforts rather than as a separate one-time three-year grant.
- ✓ Visionary leadership with a “can do” attitude toward working around challenges, and managing change both within and outside of the state structure.
- ✓ Strong partnerships among different state agencies.
- ✓ Implementing policy directives from the top down with an understanding for and openness to local needs.
- ✓ Understanding the political climate in which ADRCs operate.
- ✓ Viewing partnership-building as a critical component necessary streamlining and integrating services and not as a separate project activity.
- ✓ Strong commitment to staff training and quality.

Challenges to Sustainability

- ❖ Maintaining standards and cohesiveness among local service providers in a home-rule state as the ADRC expands.
- ❖ Implementing new technologies statewide across counties with different MIS capacity and systems.
- ❖ Demonstrating the effectiveness and cost-benefit of the ADRC model.
- ❖ Restructuring systems to serve people according to their needs, rather than their age or disability type. Integrating the aging and disability networks so that the system covers the entire adult lifespan, fosters continuity of services and is consumer-driven.
- ❖ Inculcating the guiding principles of consumer direction, customer excellence and cultural competency so that these become the primary focus of the ADRC model.
- ❖ Restructuring eligibility determination processes for State and federal programs so that this is an outcome of LTC supportive counseling that spans both public and private HCBS.
- ❖ Rebalancing LTC funds from institutional bias to HCBS that is flexible, consumer driven and cost effective.
- ❖ Integrating ADRC into the state's 2-1-1 system.
- ❖ Maintaining adequate funding levels to provide and monitor quality services for the elderly and people with disabilities.
- ❖ Addressing the needs of caregivers in the environment of a shrinking caregiver workforce.

Next Steps

- ➔ Assess impact of new intake/screening tool/clinical assessment.
- ➔ Integrate global budgeting initiative and processes with ADRC activities.
- ➔ Continue to work with state Medicaid agency to streamline eligibility and roll out "fast track" eligibility determination processes.
- ➔ Amend State Cost Allocation Plan to support ADRC functions.
- ➔ Roll out the new ADRC website and continue building on-line resources.
- ➔ Link MIChoice, SAMS and IRIS to create an integrated system that can be used throughout the state for client intake, assessment, eligibility determinations, case management and tracking.



[Sustainability Profile--South Carolina](#)

Project Overview

South Carolina's *Aging and Disability Information Center* (ADIC) combines the statewide web-based resource database and client tracking tool, SC Access, with a physical center that offers enhanced I&R, counseling, assessment, service referral and coordination of the eligibility determination. SC Access, which was originally developed through a Real Choice Systems Change Grant, is the primary tool used by the ADIC to maintain and share information about resources, make electronic referrals to providers, collect client information, and track services. The Lt. Governor's Office on Aging established one ADIC pilot site operated by the Lower Savannah Council of Governments and serving Aiken and Barnwell counties. The Aiken site has piloted new processes such as electronic referral, coordination with the Community Long Term Care (CLTC) Medicaid waiver program, and on-line Medicaid applications.

In addition to increasing consumer access to information, referral and assistance, ADIC initiatives have helped strengthen connections between the disability and aging networks. The ADRC initiative is expanding to two new pilot sites in 2007.

Essential Elements That Will be Sustained

- ✚ **IT and MIS improvements.** SC Access has increased consumer access to and streamlined services through an easy-to-use we-based searchable database, Medicaid e-forms, and electronic referrals.
- ✚ **Streamlined access through coordination.** Close coordination between ADIC and the Medicaid waiver program staff has streamlined the eligibility process and improved service to individuals on the waiting list for waiver services.
- ✚ **Visibility and focus on consumer and provider education.** South Carolina seeks to encourage a "smarter" end-user population that knows how to access web-based information, use on-line tools, and locate resources in their community.
- ✚ **Strong partnerships at state and local levels.** Partnerships have facilitated exchange of information and expertise between departments and organizations, and improved the ability of the ADRC to serve individuals in the community.

Strategies for Ensuring Sustainability

- ◆ Use the ADRC grant as an opportunity to make improvements to existing infrastructure and build upon prior initiatives, such as the SC Access website.
- ◆ Integrate project goals with broader system-level reforms, closely coordinate ADRC activities with other systems change initiatives such as the Systems Transformation Grant, and partner closely with Medicaid.

- ◆ Find a niche for the ADRC that fills an unmet need: such as facilitating collaboration between community organizations to better utilize scarce resources, and providing assistance and training about Medicare Part D.
- ◆ Build upon interest and support of State Legislature for “one-stop” models and great efficiency in service systems.
- ◆ Use the ADRC initiative as an opportunity to gather data that are essential to planning for future long term care policy, identifying demand and gaps in services.
- ◆ Leverage partnerships that were already in place in the broader community and develop relationships that can have strategic importance in achieving project goals.
- ◆ Combine resources in creative ways and capitalize on unexpected opportunities, such as the partnership with the prescription drug assistance program that has brought volunteers into the ADRC, increased community recognition of the ADRC, and improved connections with physicians.
- ◆ Actively seek public and private grant opportunities related to ADRC goals.
- ◆ Secure separate 501(c)3 (non-profit) status for the ADRC to open up possibility of charitable donations.

Facilitators of Sustainability

- ✓ Viewing the ADRC initiative as an integral component in achieving the state’s long-term systems change reform.
- ✓ Staff cultivating and building upon policy directives happening from the top down.
- ✓ Project staff and leaders working together in collaborative partnerships and recognizing the need for “give and take” on all sides.
- ✓ Project leaders demonstrating vision and being willing to work around bureaucratic barriers in achieving project objectives.
- ✓ Viewing partnership-building as a critical component necessary streamlining and integrating services and not as a separate project activity.
- ✓ Staff open to developing creative partnerships with natural and unexpected partners.
- ✓ Staff and advisory board members who see themselves as members of the ADIC team, who can articulate the vision and mission of the project , and who have clear expectations regarding their roles and responsibilities.
- ✓ Demonstrating strong commitment to and taking pride in designing consumer-centered policies and procedures.
- ✓ Maintaining staff capacity and morale is viewed as a top priority in achieving project goals.
- ✓ Making a strong commitment at state and local levels to ongoing staff training.

- ✓ Several project champions emerging at both the state and pilot site levels as leaders in educating policymakers about the ADRC and in developing cohesive relationships among aging and disability agencies.

Challenges to Sustainability

- ❖ Overcoming the perception by lawmakers and advocates that it must be an either/or choice of funding information and access services or direct services.
- ❖ Retaining, with adequate compensation and training, adequate staff to meet increasing demand for services as awareness of ADIC expands and additional pilot sites are added. These initiatives will require dedicated state and federal funding.
- ❖ Mobilizing aging and disability stakeholders, service providers and organizations in the broader community to raise awareness and visibility for the ADIC.
- ❖ Documenting and educating policymakers about the fiscal benefits of ADRC services in diverting consumers away from institutional care.
- ❖ Obtaining funding for and providing improved awareness and outreach for younger individuals who need to plan earlier for their long-term care needs, consistent with state goals.
- ❖ Embedding a strong consumer choice element in ADRC services.
- ❖ Responding to multiple state and federal reporting requirements, and navigating multiple management information systems, while maintaining attention to primary goal of customer service.

Next Steps

- ➔ Expand model to additional sites in coordination with Systems Transformation Grant.
- ➔ Assist in strengthening the state's capacity to provide additional, needed services related to long-term care in community-based settings, for example, transportation.
- ➔ Recruiting additional staff at replication sites.
- ➔ Pursue creating mobile I&R center as an extension of the ADIC to improve outreach in rural areas.
- ➔ Pursue opportunities afforded by their newly-acquired 501(c)3 status.

