

State Agency Systems Collaboration at the Local Level: Gluing the Puzzle Together**The Staff Perspective***Gabriella Santoro Rado, Doris Hamner, & Susan Foley***Introduction**

This brief examines the efforts of a local area systems collaboration. Despite the acknowledgement of the benefits of collaboration, some states face challenges in actualizing this goal due to limited resources and bureaucratic complexities (Cohen, Timmons, Fesko, *in press*). In order to better understand partnership and collaboration at a local level, the Rehabilitation Research and Training Center on State Systems and Employment at the Institute for Community Inclusion facilitated a collaboration to assist state systems in a local area to address employment services for people with disabilities. The effort evolved out of early discussions and planning meetings with state representatives from multiple agencies to develop regional and local management training. A northeast city was chosen based on the political climate and staff interest in modifying the One-Stop Career Center system to better serve people with disabilities.

The Northeast Interagency Collaboration met periodically from 1999 to 2002. Initial meetings were held in 1999-2000. Prior to the collaboration training, the state Vocational Rehabilitation (VR) and Mental Health (MH) agencies had entered into an interagency agreement to jointly fund a statewide coordinator position. The statewide coordinator championed the collaboration by communicating with ICI staff, making suggestions for the progression of the collaboration, and sharing insights into the various agencies involved. It was through her recommendations that ICI staff developed exercises for future meetings and made sure that the opinions of the collaborators were shared with the group.

During the planning meetings, state agency representatives described several management-level training needs. They elected as their priority improving collaboration across agencies. The intention of the training intervention was to educate local management staff. This goal could be accomplished by developing cross-agency case management and service delivery.

The Collaboration: The Overall Plan of Action

The NIC was composed of a team of regional and local managers of several state agencies including VR, MH, the state mental retardation and developmental disabilities (MR/DD) agency, the state welfare agency, the local One-Stop Career Center, community mental health providers, the state Department of Labor (DOL), and the Social Security Administration (SSA) local office. Collaborators participated in a series of activities to identify common goals across agencies with an emphasis on missions and needs. This process allowed the participants to discuss the NIC's goals and establish concrete steps. The exercises that were developed for the collaboration focused on how the agencies could begin collaborating and the types of tasks that should be accomplished. One exercise that the trainers presented was an example of a successful collaboration. The participants read about this example and then suggested the different parts of it that created the success. Participants could then bring the components of the example to their own situations and try to initiate those conditions into their practices.

Another exercise, *Getting to Know Each Other*, brought the agencies together to learn about each other's services at the same time. This involved completing an assignment that asked key questions about the services each agency offered, such as which population it served and exactly which types of training or rehabilitation were offered. This information was then combined and shared in the form of a matrix so that each agency could learn what services each offered to people with disabilities. It became apparent that other agencies were providing types of services that were missing in their own. For instance, vocational training and career exploration were not traditionally offered by MH agencies or service providers. Said one MH representative, "My goal now is to get people with psychiatric disabilities to work. It is hard because the system was not developed to do that." These exercises motivated the collaborators to discuss why exactly they were committed to coming to the meetings and what it was they needed to do.

Learning Through Training: A Model of Collaboration and Goal-Setting

The priorities discussed in the meeting were also deliberated by the ICI team and the statewide coordinator to determine the focus of the collaboration. The group discussed different populations and wanted to concentrate on a population that affected all of the service systems. The collaboration decided to focus on people with psychiatric disabilities. Within the MR/DD system, there were people with MR who received services but “fell through the cracks” because they were not receiving adequate psychiatric treatment. Within welfare, people with psychiatric disabilities were often termed the “hard-to-serve.” The concern for those who were not receiving sufficient or effective employment services and who might be shared customers guided the collaborators' actions.

Participants felt the need to learn about the range of services available from the partnering agencies and to identify gaps and redundancies. A primary goal was to learn more about eligibility, referral processes, and service delivery options. The participants wanted to develop methods that would work across the service system and weave together disjointed and redundant employment services. Each state agency was designed independently, and bringing the groups together was like trying to glue together different pieces of a puzzle that did not fit. The collaborators themselves began to feel like they had to actually become the glue holding the puzzle pieces (services) together.

Establishing Collaboration Tools

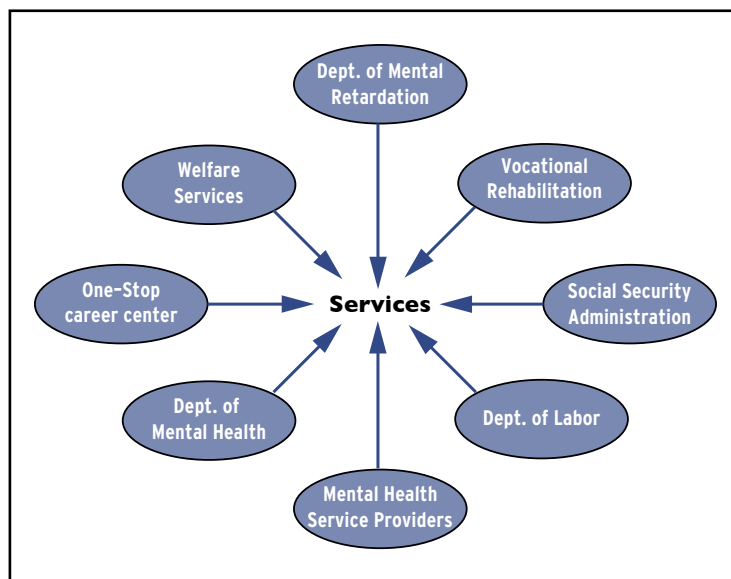
The strategies that the NIC used were formulated as the collaboration progressed. There were three main tools used to achieve team goals:

1. **Case conferencing**
2. **Information sharing** (*local activity updates and manager presentations*)
3. **Cross-agency training** (*workshops for consumers, guidance on establishing referral processes, and education on a vocational rehabilitation model*)

These mechanisms were implemented as needed at the monthly meetings. The intent was to begin with case conferencing, but cases would diminish as cross-agency trainings and better referral processes developed. Monthly meetings held to do case conferencing also involved local information sharing. Through the monthly meetings agencies created a structure to identify needs, differences, and solutions that would hopefully lead to buy-in from agency directors and eventually system change. The statewide coordinator facilitated this process through monthly meeting notes and pre-planned agendas, discussion topics, and presentations.

Tool 1 Case Conferencing

What's been neat is that we've come up with some solutions for the individuals presented, but for each case that's been presented, we have all learned something about another agency through that process, because it wasn't generalities: It was specifics.



The NIC met monthly to open lines of communication between agencies and provide opportunities for resource sharing. Members of the NIC would bring cases of actual service users to the meetings. In this way, NIC case conference meetings served as a learning exercise to identify needs and as a

forum for the exchange of specific recommendations. A manager for a mental health agency explained, “Information that has been brought back I think has been useful for counselors to use with a number of people.”

By bringing their cases to the monthly meetings, collaborators could learn more about how to best serve people with disabilities from the perspectives of different agencies. Through discourse, representatives from labor and welfare agencies were exposed to the decision-making process that state disability

service systems employed. Case conferencing made apparent the different philosophies and definitions of employment between the agencies. It also clarified that the agencies had some opposing viewpoints in terms of the appropriateness of facility-based work settings. Despite those differences of opinion, the participants reported exposure to different notions of employability of people with disabilities as an accomplishment. Hearing different ideas of employment was one of the major benefits of case conferencing. Said one DOL manager, "When we do the case conferencing, we really are trying to figure out how we can get around those barriers... pooling our efforts... brainstorming."

Case Conferencing: Concrete Tasks

Case conferencing was a mechanism by which agencies learned about one another's services, but it also provided a way for the team to work together on immediate tasks. Some important issues state agency personnel encountered when serving people with disabilities evolved from this process. How does one facilitate job retention and provide long-term support, career advancement, education, and non-traditional placement opportunities? How does one access and use benefits counseling?

Some of these issues were illustrated in a case presented by the regional mental health center. This case demonstrates the strengths and resources of different agencies. *(please see Case Summary on page 6)*

Out of these meetings a referral process between the MH agency and the welfare agency was established. Said a welfare representative,

We're working out a referral process with MH for people who are on state-administered general assistance. That's a specific problem and I think that that will translate into a new referral process that will benefit our clients.

This working knowledge of contacts and agency criteria benefited the collaborators by allowing them to link consumers to services at the One-Stop Career Center that consumers might have not accessed previously. A One-Stop representative said,

One of the benefits of this entire project has been a new level of cooperation and collaboration interagency-wise. [We] talked yesterday about working out a formal referral procedure, which is wonderful.

Tool 2 Information Sharing

In these presentations a manager from one agency educated the others. These monthly meetings were helpful in establishing a rapport among managers, helping them see beyond what their own agency provided as well as giving them a working knowledge of other agency criteria and services. Said one staff member,

Respect has grown from working [with] people in the collaborative, and knowledge or familiarity always brings forth a greater respect when you're working with someone.

Information sharing was a critical part of the monthly meeting process. Agency managers participating in the collaboration attended trainings. Two presentations occurred at the monthly meetings (in lieu of the case conferencing) in which one member of the group presented a detailed explanation of benefits available within his or her agency to the rest of the team. One VR representative described how this knowledge assisted her in her profession:

What it did for me was move along at a much faster rate than I would have been able to do myself, making the connections I need in the city.... When I need someone at DSS, I know a manager to call.

The welfare agency presented on services available and an explanation of the state-administered general assistance program. A representative from SSA conducted an in-depth information session on SSI (Supplemental Security Income) and SSDI (Social Security Disability Insurance) work incentives. The sharing of information that took place at the monthly meetings educated agency managers, giving them a clearer understanding of services available. Said one DOL representative,

It has been very informative. She did an overview of how to access SSI benefits for clients and I think for most of us there, it was very, very informative.... She talked about the process. She's a contact person for us. If staff come across clients that need to apply, we have a much better pathway for them getting services.

Tool 3

Cross-agency Training

Cross-agency training was provided to service users of another agency. One-Stop staff conducted workshops on job readiness, interviewing, and work skills.

One participant said, “People have just formed as more of a group. I have two of my staff that are going over and actually giving workshops at Capital Region Mental Health Center. It is a result of this interagency employment group.”

MH physically brought its staff to the One-Stop Career Center to learn about employment services. “It’s going to have a long-range benefit on the delivery of services to clients, anyone coming into the One-Stop” a DOL representative commented.

Meeting Goals Through a Psychiatric Rehabilitation Service Model

The final type of training occurred towards the end of the second year of the collaboration. The agencies obtained consensus to uniformly train managers, frontline staff, and consumer advocates on a particular model for employment. The leader of collaboration brought this possibility to the collaboration group in order to establish consensus among agencies as to what philosophical approach to take when working with consumers. As a part of this process, agencies categorized the services they had to offer into three steps in the career development process: choosing, getting, or keeping a job. In this way the service system was sectioned according to the employment services available.

Goals Set for the Future

After two years of collaborating and participating in ICI-facilitated trainings and monthly meetings consisting of case conferencing, information sessions, and trainings on a rehabilitation model, participants met to set future goals for their local service area.

Online case conferencing

My staff went and presented the case and that has happened with other programs too. They have brought direct staff in to present cases. I think the direct care staff have found it useful to sit around the table too.

One possibility was to conduct case conferencing on an electronic bulletin board or an online chat room. This would serve to continue communication on a long-term basis as needed. While case conferencing

was useful in identifying ways to streamline the service system and establish concrete steps, it seemed important that the collaborative participated in other activities to further the collaboration.

Handling turnover

People left the collaboration and others replaced them. The question became what was the best way to handle the turnover in a collaboration that had networking as one of its primary goals. The collaborators struggled with how to organize the process so that it was not solely based on individuals but also on structure and roles within the organizations.

One strategy was to hold cross-agency training every six months for new staff. As of 2003, a resource packet with agency contact information and resource mapping based on the rehabilitation model was in development.

Sustaining the collaboration

The strength of personal relationships was expressed quite clearly in one manager's reflections:

When I first started going to meetings, I was hoping that we weren't just going to meet four times and then all shake hands and say "Oh yes, it's been very nice talking to you," and all go our separate ways. That hasn't happened, which was my fear—that we would talk about how to collaborate, give it a nice nod, and then forget about it. But we've kept it alive and we're doing it. What I would like to see is that it happen on a higher level.

Systems change: Sharing documentation with administration in order to engage the administration in the process

“Getting the right players in the room is hard,” one participant said. Buy-in or support from higher-level management within or outside of each agency was a significant topic for collaborators. Lack of buy-in or change in buy-in was discussed as a serious obstacle that jeopardized the collaborators' participation in the process. The managers needed their higher-management supervisors to approve systems change activities. A collaborator reiterated this idea: “Most of us are not the primary decision-makers. There still has to be someone to sign off on these great ideas.”

It was essential that the collaborators' supervisors approve of the process because it translated into costs in terms of staff resources and time allocation. The collaborators also needed the support of their supervisors so they could make decisions that required

action on the part of the team. Further, participants needed to make definite changes as a result of the collaboration. These actions could involve staff changes, and might alter the structure of the agencies.

Another key element of the collaboration project was to close the gaps in the service system. Developing agency referral systems was one way the gaps were filled. Due to staff turnover, referral procedures were unstable. If a staff member left, the collaboration that had developed might leave with them. With buy-in it might be possible to develop referral procedures that were based on agency agreements instead of manager relations. Members of the collaboration team felt this was a necessary next step. Commented a One-Stop representative,

Some kind of formal referral process between one another, to accommodate larger numbers than just the two or three people we talk about once a month. At some point, it's got to broaden.

Applying for grant funding in order to ensure support long-term for collaboration activities such as training, referral procedures, and information sharing was one route the collaboration team discussed. However, applying for a grant as a multi-agency team required planning around certain issues such as who should be the administrating body, who would be the applicant, and what to choose as the target population.

Collaboration is one effort to maximize resources of a system that offers limited services. Each of the state agencies was having difficulty funding the eligible population and offering the complete array of services on demand. One of the obstacles was deciding whether to serve a large number of people with some services or a smaller number of people with adequate services. What was considered adequate differed according to collaborators and agencies and in trainings. A long-term goal of the collaboration was to ensure continued use of the collaboration mechanisms through the relationships established. If coordination is preempted due to inadequate resources then the participants will have to find much to gain from the short-term experiences.

Conclusions and Cautions

The collaborators were able to combine in a sustained effort to make a difference in their local area, but their changes were made with teamwork and a combination of factors that came together. The partners developed a puzzle that was pieced together with a variety of

"collaboration tools" the participants had at their disposal. In some cases, the networking connection between them served to glue together services. The ICI team was fortunate enough to study the collaboration in a longitudinal fashion as it developed over a period of two years. However, it should be noted that two years is not extensive enough to fully grasp the impact the collaboration had on the local service area.

The NIC began with links between VR and ICI, then moved into selecting an area and a collection of tasks. Common goals were transferred to the participants in exercises with the team. It became increasingly clear how important it was for all the players to know one another, share information, and form connections. These links happened in a variety of ways, and the collaborators used many tactics, some of which may be unknown to the researchers observing the process. As the "pieces" were glued together, a network of communication developed and the end result was reportedly improved services in the midst of different definitions and philosophies and scarce resources that participants said dwindled as the collaboration continued.

A limitation of the study is that researchers interviewed managers, not frontline staff or consumers. The information presented is from the viewpoint of One-Stop Career Center and state agency managers, who are less likely to report difficulties in collaborating with each other. The need to establish buy-in with agency directors and serve as a representative of their agency may have been an added pressure to collaborate. The viewpoint of the consumer would add a different perspective on managers learning more about triage, referral, and enrollment in SSI and SSDI. For instance, the question remains whether the emphasis was placed on employment supports (and in particular the individual person's road to employment) or the movement of people between agencies. This could be of significant interest for this and future studies of collaboration.

The future goals indicated a multifaceted interest in online case conferencing, biannual training, and the need to sustain the collaboration with supervisory buy-in and shared documentation. The collaboration has sustained itself as a flexible group, pulling in resources and adapting as necessary to pursue the goal of providing improved employment services for people with disabilities.



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Case Conferencing: Case Summary

A 35-year-old woman with schizophrenia was receiving clinical services from the mental health center, vocational services from VR, and work services from Easter Seals. She was finding it difficult to work.

In order to better enable this consumer to work, representatives suggested the following:

- A job coach could visit her home in the mornings to get her started
- VR could try to engage her through in-depth career exploration and try employment placements to identify her “passion”
- MH could provide long-term work support, which would enable VR to offer job placement and short-term job coaching
- VR could contract for a psychological evaluation with a MH service provider
- Temporary agency placements or seasonal employment may be appropriate

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