Measuring Performance in No Wrong Door (NWD) Systems

September 2017

Background

To promote the collection of quantifiable data documenting the performance of No Wrong Door (NWD) Systems, the Administration for Community Living (ACL) worked collaboratively with NWD grantees to identify performance outcomes that all NWD System states, territories, and designated organizations could reasonably be expected to target and report. This work has been part of the state-driven evolution of NWD Systems from the first *Aging and Disability Resource Center* grants in 2003, to the articulation of the *Key Elements*, and the introduction of the *NWD System Management Tool*.

Multiple steps were taken prior to making the recommendations contained in this white paper. The initial step was to review the goals of the initiative and create logic models representing the four core functions of a NWD System. A NWD Outcomes Workgroup was convened to clarify the logic models, identify outputs and outcomes of particular interest, and operationalize possible performance measures. The NWD Outcomes Workgroup (hereon referred to as the Workgroup) was comprised of ACL staff from the Center for Integrated Programs and the Center for Policy and Evaluation, and representatives from eight NWD System grantees.

The Workgroup used a consensus-driven approach and included the active engagement of all Workgroup members. From the start it was understood that the resulting recommendations were to be used for future NWD Systems work and that it was intended to address system- as well as consumer-level outcomes. The agreed upon aim of the Workgroup was to:

Identify a small number of core measures that can be used to demonstrate NWD impact on the LTSS delivery system.

The method for identifying these core measures included conference calls and interim work on the part of the Workgroup. The activities of the Workgroup were supported by the NWD Systems contractor.

NWD System Vision

The No Wrong Door (NWD) System initiative is a collaborative effort of the Administration for Community Living (ACL), the Centers for Medicare & Medicaid Services (CMS), and the Veterans Health Administration (VHA). The NWD System initiative builds upon the Aging and Disability Resource Center (ADRC) program and CMS' Balancing Incentive Program No Wrong Door requirements that support state efforts to streamline access to long-term services and support (LTSS) options for older adults and individuals with disabilities. NWD Systems simplify access to LTSS, and are a key component of LTSS systems reform.

Finding the right services can be daunting for individuals and their family members. The current LTSS system involves numerous funding streams, and is administered by multiple federal, state, and local agencies. These agencies use complex, fragmented, and often duplicative intake, assessment, and eligibility processes. There are growing options for services and supports in home, residential, and institutional settings. Individuals trying to access new LTSS frequently find themselves confronted with a maze of agencies, organizations, and bureaucratic requirements at a time when they may be vulnerable or in crisis. These issues frequently lead to the use of the most expensive forms of care, including institutional care such as nursing homes or extended hospitalization, and can cause a person to quickly exhaust their resources.

NWD systems provide information and assistance not only to individuals needing either public or private resources, but also to professionals seeking assistance on behalf of their clients and to individuals planning for their future long-term care needs. NWD systems also serve as the entry point to publicly administered long-term supports, including those funded under Medicaid, the Older Americans Act, Veterans Health Administration, and state revenue programs.¹

With the release of *Key Elements of a NWD System of Access to LTSS for All Populations and Payers*², a framework was available for understanding and developing "high performing" NWD Systems. As with much of the evolution of the NWD Systems, the *Key Elements* represent the collective knowledge and experience of prior NWD System activities and investments. The intention of the *Key Elements* is to assist States with transforming their LTSS functions into a more consumer-driven, efficient, and cost-effective NWD System.

The NWD System Management Tool was created to collect and analyze data elements that would demonstrate the operational structure and capacity of a NWD System. The Management Tool includes components of the *Key Elements* and was designed in close collaboration with grantees; it encourages a consistent, streamlined, and coordinated statewide approach that helps grantees report and track the progress of their NWD System vision, which helps grantees govern and manage their programs efficiently. The Management Tool assists ACL with monitoring NWD System activities, and can be used to identify gaps and best practices to inform the focus for future funding. The overall purpose of the NWD System Management Tool data is to understand and document the extent to which the NWD System is streamlining and coordinating access to LTSS through its four core functions of State Governance and Administration, Public Outreach and Coordination with Key Referral Sources, Person-Centered Counseling (PCC), and Streamlined Eligibility for Public Programs.

With the articulation of the *Key Elements* and the availability of the Management Tool, the next step in the evolution of this vision was to identify measures that would demonstrate the impact of the NWD System. States, territories, and designated organizations participating in NWD System vision, as well as Federal partners, identified the need for performance measures that show how the NWD System impacts multiple payers and populations. The next sections outline the steps taken to make recommendations for measuring performance of NWD Systems.

Process for Making Recommendations for Performance Outcomes

Grantees representing the *Part A Enhanced Options Counseling* and *NWD Implementation* grants, were invited to participate in an introductory call with ACL about the purpose and initial approach for the NWD Outcomes Workgroup. Eight grantees were active participants for the seven months of the Workgroup's duration (i.e., The District of Columbia, Hawaii, Maryland, Oregon, New Hampshire, Vermont, Virginia, and Washington).

As shown in Table 1, the Workgroup was convened from January 2017 through July 2017, with calls and activities to complete between calls. The Workgroup began with review and discussion of a proposed overarching logic model and proposed logic models representing each of the four NWD System functions: State Governance and Administration, Public Outreach and Coordination with Key Referral

¹ https://www.acl.gov/programs/connecting-people-services/aging-and-disability-resource-centers-programnowrong-door Retrieved May 19, 2017.

⁴ https://www.acl.gov/sites/default/files/programs/2016-10/NWD-National-Elements.pdf Retrieved July 24, 2017.

Sources, Person-Centered Counseling (PCC), and Streamlined Eligibility for Public Programs.³ The final version of the four logic models can be found on the following pages, and they can be combined to represent an overarching logic model of NWD Systems. While the inputs, activities, outputs, and outcomes in the logic models are all important, not all are feasible and applicable for recommendation as performance measures. Those outputs and outcomes outlined in the next section as *Recommended Performance Measures* are in **bold** font in the four logic models.

Once consensus was reached and revisions were made to the logic models, Workgroup members used the detail in the logic models to create their own specific logic models. In the "State"-specific logic models, Workgroup members noted 3-5 outputs and outcomes of specific interest. ACL aggregated the outputs and outcomes of interest into new logic models which highlighted the most prominent outputs and outcomes. In Calls 4 and 4.2, Workgroup members reviewed the newest logic models and aimed to reach consensus on a core list of performance indicators. Combining feedback from the Workgroup and other federal stakeholders, ACL submitted a list of core outputs and outcomes to the Workgroup members and asked them to share what methods and measures they use (or would use) to track outputs and outcomes on the list. The final call with the Workgroup included fine tuning definitions and methods of tracking the performance indicators.

| Table 1. NWD Outcomes Workgroup Progress | | | | |
|--|--|-------------------|--|--|
| <u>Event</u> | Action | <u>Date</u> | | |
| Call #1 | Approved the Aim and Concept of the Workgroup Reviewed draft logic model process | January 11, 2017 | | |
| Call #2 | Reviewed/discussed overarching draft logic model and logic models for two NWD key elements | February 1, 2017 | | |
| Call #3 | Reviewed/discussed draft logic models for remaining NWD key elements | February 15, 2017 | | |
| Interim Activities | ACL updated logic models and sent back to states for review. States provided comments on draft state specific logic models | | | |
| Call #4 | Reviewed/discussed interim activity of State specific logic models and identifying outcomes of interest | March 15, 2017 | | |
| Interim Activities | State specific logic models finalized States identified 3-5 outcomes of interest ACL aggregated list of outcomes from States | | | |
| Call #5 | Discussed list of outcomes and, based on state feedback, finalize core list that the NWD grantees will focus on in the workgroup | April 26, 2017 | | |
| Call #6 | Finished last logic model (Streamlined Eligibility) discussion of outcomes Began discussion of measure methodology. | May 9, 2017 | | |
| Interim | ACL and Federal Stakeholders reviewed final list of outcomes | | | |
| Activities | States identified measures currently used to track outcomes on the list | | | |
| | States submitted measure methodology to ACL | | | |
| Call #7 | Finalized discussion on measure methodology | July 25, 2017 | | |

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³ https://www.acl.gov/sites/default/files/programs/2016-10/NWD-National-Elements.pdf Retrieved July 24, 2017.

State Governance and Administration Model

Inputs

• State Leadership buyin

- Public/private partnerships
- Funding by source
- NWD System Staff by type
- MIS System
- Basic Standards: Functional Partnership
- Person Centered Standards*
- Standardized MOUs and procedural templates
- Governing body
- Statewide coverage
- Multi-years operation plan w/ regulations
- cross-disability stakeholder group to collect meaningful feedback
- Continuous Quality Improvement (CQI)**

Amount of data shared.

Activities

- Governance and administration of the NWD system:
- Staff training regarding NWD policies procedures
- Secure data/ information sharing
- Annual reporting
- Secure sustainable funding streams
- Oversee quality control
- Operationalize roles and responsibilities of formally designated entities in the NWD system (manage agreements, CQI, State leadership)
- Solicit feedback on system
- Monitoring alignment of the program

Outputs

- Governance reviews
- #/% of staff trained
- #/% of partners sharing data
- Improved communication
- Produced annual performance reports
- Amount of \$ spent on NWD
- Amount \$ received for NWD activities
- Sources of funding
- Number of public/private partnerships sharing resources
- # /% of NWD Advisory Committee organizations participating in Advisory Committee meetings
- Level of CQI activity (including feedback from staff, vendors, and consumers)

Short Term

NWD System Level:

- Increased PCP knowledge by staff
- Demonstrated commitment for collaborative work
- Shift in business processes
- Reduce burden on staff
- Increased #/% staff credentialed?
- #/% of staff that have information they need at the time they need it

Service gaps Identified

- Increased political support
- \$/% of funding for NWD by source (e.g., local, state, federal, other)

Medium Term

Outcomes

NWD System Level:

- Increased #/% of consumers that have confirmed service activation
- More effective use of resources
- Legislative/Gubernatori al changes
- Increased use of data for decision-making
- New policies and procedures implemented
- Expanded awareness of service gaps, waiting lists, and consumer preference
- Reduced threats to the system (e.g., unstable funding, lawsuits)

Consumer Level (more):

- Consumer trust
- Active decision-making
- Knowledge of LTSS/life options
- Needs/goals met
- Efficient use of personal resources
- Personal activation
- Consumer preferences met

Long Term

NWD System Level:

- Sustainability/ Organizational integration
- Maintained/ enhanced community presence
- Wide-spread LTSS reform/culture change (e.g., available and covered services)
- System efficiency
- Increased provision of preferred services

Consumer Level: Maintaining or improving consumer perceptions of quality of life:

- Community tenure
- Independence/ dignity
- · Well being
- Community participation
- Improved health/ healthcare utilization

*Existing infrastructure, applying BIP standards, level of service coverage, strategic plan elements;
**Continuous Quality Improvement (CQI) process established that actively seeks input and
feedback from the many different customers who use or interact with the NWD System by utilizing
evaluations, survey information and existing data systems. General administrative data collected
should include: organization type of the lead agency (e.g., AAA, CIL); Types of MOUs developed;

Person-Centered Counseling Model

Outcomes

Inputs

- Funding by source
 (List all payers)
 Provid
 Training
- Staff (type, certification, core competencies or standards, levels, # of FTEs
- Basic Standards:

 Functional
 Partnership (Org. type, agreement types, activities, purpose)
- Person Centered
 Standards: Existing
 infrastructure,
 applying BIP
 standards, NWD/SEP
 system, ADRC core
 criteria, level of
 service coverage,
 strategic plan
 elements,
 functionality of data
 system,
 performance
- Cultural/linguistic competence

management system

Activities

- Providing PCC
 Training Program according to PCP
 national standards
- Providing Person Centered Thinking training for admin. staff (e.g., Federal, State, Local)
- Provide guiding documents to coordinate transition services btw. Acute care, SNF, VAMC, etc.
- Implementing a PCC/P credentialing process
- Monitoring the quality of PCC/P training and implementation
- Cultural and linguistic adaptation
- Encourage relationships between PCC and benefits counselors (e.g., training, role modeling, removing structural barriers)

Outputs

- #/ % of all potential counselors trained in 'Person-Centered Counseling'
- #/% of administrators trained
- # and % of line staff in the credentialing pipeline
- # and % of private sector/ non-profit individuals trained
- # of trained staff who participate in follow-up/ booster training
- Level of adherence to quality standards in training for PCC/P
- # and % of culturally/ linguistically appropriate materials/servic

Short Term

- NWD System Level:
 Increase
 counselors /
 administrators
 comprehension
 in targeted areas
- Increase counsellors / administrators ability in targeted areas
- Increase # and % of counselors credentialed
- Increased #/% of designated partner organizations in NWD system that have a trained Person-Centered Counselor

Medium Term

NWD System Level:

- Increased use of PCP/C tools by counselors***
- More people receiving PCP/PCC from credentialed counselors
- Increased consistency of staffing (one counsellor follows a client through the process)
- Increased job satisfaction of staff
- Improved access to existing services
- Increased service activation
- Increased and more accurate referral to public resources
- Increased emphasis on community living
- Increased program wide fidelity to PCC/P standards
- Decrease duplication of services
- Decrease time required to develop a person-centered plan

Consumer Level (more):

- Consumer trust
- Active decision-making
- Knowledge of LTSS/life options
- Needs/goals and preferences met
- Efficient use of personal resources
- Personal activation
- Consumers have a more holistic approach to their services

Long Term

NWD System Level:

- Sustainability/ Organizational integration
- Maintained/enhance d community presence
- Wide-spread LTSS reform/culture change (e.g., available and covered services)
- System efficiency
- Increased provision of preferred services

Consumer Level: Maintaining or improving consumer perceptions of quality of life:

- Choice
- Community tenure
- Independence/ dignity
- Well being
- Community participation
- Improved health
- Decreased healthcare utilization

^{***}Personal interview, person centered plans, facilitation of private sector supports, facilitated access to public supports, follow up

Public Outreach and Coordination with Key Referral Sources Model

Outcomes

Inputs

Activities

Outputs Short Term

Medium Term

Long Term

- Funding by source (List all payers)
- Staff (type, certification, core competencies or standards, levels, # of FTEs)
- Framework for public/private agreements
- Basic Standards: # and % of public/private formal agreements
- # and % of sites approved to refer or accept referrals from public programs (e.g., have passed the VD-HCBS readiness review)
- Person-Centered Standards: Existing infrastructure, applying BIP standards, NWD/SEP system, ADRC core criteria, level of service coverage, strategic plan elements, functionality of data system, performance management system
- Cultural/linguistic competence assessment
- State leadership

- Conduct public outreach, education, awareness campaigns
- Coordinate with I&R entities
- Develop transition protocols with acute care and LTSS entities
- Build relationships with VAMC re: implementation of VD-HCBS
- Marketing/ branding
- Developing referral tools
- Strengthen interagency agreements
- Develop cultural and linguistic competency framework

- Number of campaigns
- # of materials distributed/ presentations made
- # of web hits
- # of people reached by demographics and device type
- # of direct and indirect outreach activities
- # and % of entities in partnerships
- # and % of entities with formal transition protocols in place
- #/ % of referrals from critical pathway providers
- NWD designated as LCA
- # and % of organizations in partnerships

NWD System Level:

- Increased visibility of the NWD
- Increased consumer volume
- Higher rates of engagement by target population
- Increased # and % of referrals
- Increased service provider engagement
- More efficient cross system information sharing
- More holistic approach to the work
- Expanded funding sources (VA)/ increased leveraging of community resources

NWD System Level:

- Improved access to existing services (by geography, and target group)
- Reduced consumer burden/LOE to access needed services/meet preferences
- Increased #/% of designated organizations in the NWD System that track consumer service gaps
- Increased accuracy of referrals/referral quality
- Increased emphasis on community living:
 - Increased #/% of people transitioned to the community (from NH, Acute care, Youth)
 - Increased numbers of low risk individuals transitions from nursing homes

Consumer Level (more):

- Knowledge of LTSS/life options
- Needs/goals met
- Personal activation
- Consumer preferences met

NWD System Level:

- Sustainability/ Organizational integration
- Maintained/enhanced community presence
- Wide-spread LTSS reform/culture change (e.g., available and covered services)
- System efficiency
- Increased provision of preferred services

Consumer Level: Maintaining or improving consumer perceptions of quality of life:

- Community tenure
- Independence/dignity
- Well being
- Community participation
- Improved health/ healthcare utilization/ readmissions

Streamlined Eligibility for Public Programs Model

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Inputs

• Funding by source (List all payers)

- Staff (type, certification, core competencies or standards, levels, # of FTEs)
- Basic Standards:

 Functional
 Partnership (Org. type, agreement types, activities, purpose)
- Person Centered Standards: Existing infrastructure, applying BIP standards, NWD/SEP system, ADRC core criteria, level of service coverage, strategic plan elements, functionality of data system, performance management system
- Ability to share data
- A statewide plan involving a process for accessing all public programs

Activities

• Streamlined access to public programs

- Integrate and manage a two-stage (Level 1 and Level II) financial eligibility and determination process
- Integrate and manage a two-stage (Level I and Level II) functional eligibility and determination process
- Person Centered Counselors (PCCs) support and contribute to the eligibility determination process
- Help consumers understand various eligibility rules/options
- Encourage relationships between PCC and benefits counselors (e.g., removing structural barriers)
- Train on streamlined access and systems navigation

Outputs

- Number of steps in the public program determination process that are integrated
- # of partnership agreements with the State offices to perform eligibility and determination tasks that are eligible for reimbursement
- # of MOAs for interagency collaboration
- Co-location (virtual and physical) of functional and financial eligibility determination staff
- Centralized information on all NWD agency operations
- Amount of education for consumers regarding eligibility for public programs
- PCCs ideally designated by public programs to participate in and facilitate the assessment process

NWD System Level:

 Increase #/% of statecoordinated public programs access points

Short Term

- Number of sites capable of conducting two-stage financial preliminary eligibility and/or determination
- Number of sites capable of conducting two-stage functional preliminary eligibility and/or determination
- Number of PCCs trained to assist with applications to ensure "camera readiness"
- Number of PCCs who are designated to perform financial preliminary eligibility and determination
- Number of PCCs who are designated to perform functional preliminary eligibility and determination

NWD System Level:

Outcomes

Medium Term

- Decrease in application errors
- Increase in public dollars funding NWD access
- Percent match between program 'referrals' and program acceptance (i.e., reduce number of consumers found ineligible)
- Increase uniformity of data needed for public program access

Consumer Level:

- Decrease in average length of time of the application process
- Decreased burden on the individual and on public program staff

NWD System Level:

Lona Term

- Sustainability/ Organizational integration
- Maintained/enhance d community presence
- Wide-spread LTSS reform/culture change (e.g., available and covered services)
- System efficiency
- Increased provision of preferred services

Consumer Level: Maintaining or improving consumer perceptions of quality of life:

- Choice
- Community tenure
- Independence/ dignity
- Well being
- Community participation
- Improved health/ healthcare utilization

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Recommended Performance Outcomes

Based on the input and guidance of grantees and partners provided throughout this process, the following performance measures are recommended. The Table below includes the performance measure, how to measure the information, and the direct link to the NWD Key Elements. Please review the Logic Models to understand how these performance measures align with the four NWD Key Elements.

| Measure # | NWD System Function | Output/Outcome | Performance Measure | Ways to measure this performance measure: |
|-----------|--|----------------|---|---|
| 1 | State Governance & Administration | Output | #/ % of NWD Advisory Committee organizations who have participated in at least 50% of Advisory Committee meetings in [insert calendar or fiscal year] | Formula: % = # of NWD Advisory Committee organizations who have attended at least 50% of Advisory Committee meetings / # of total NWD Advisory Committee organizations |
| 2 | Person-Centered Counseling (PCC) | Output | #/ % of all potential counselors trained in 'Person-Centered Counseling' in [insert calendar or fiscal year] | Formula: % = # of potential counselors who have completed PC training / # of total potential counselors |
| 3 | Public Outreach and Coordination with Key Referral Sources | Output | # of direct and indirect outreach activities in [insert calendar or fiscal year] | Count: # of direct or active outreach activities (e.g., meetings, health fairs, webinars) # of indirect or passive outreach activities (e.g., billboard, TV PSA, radio PSA, newspaper ad) |
| 4 | Public Outreach and Coordination with Key Referral Sources | Output | #/ % of referrals to a NWD system from critical pathway providers (i.e., VA medical centers, skilled nursing facilities, hospitals, schools, physician practices) in [insert calendar or fiscal year] | Formula: % = # of referrals received by agency from critical pathway providers / # of total referrals received by agency |
| 5 | Streamlined Eligibility for Public Programs | Output | # of partnership agreement(s) with the State offices to perform eligibility and determination tasks that are eligible for reimbursement in [insert calendar or fiscal year] | Year to year comparison: # of newly signed agreements # of agreements maintained # of agreements terminated |

| Measure # | NWD System Function | Output/Outcome | Performance Measure | Ways to measure this performance measure: |
|-----------|--|------------------------------|--|---|
| 6 | State Governance & Administration | Outcome: NWD System Level | \$/ % of funding for NWD by source (e.g., local, state, federal, other) in [insert calendar or fiscal year] | Formula (repeat for each source type): % = \$ for NWD by specified source/ \$ for NWD by all sources |
| 7 | State Governance & Administration | Outcome: NWD System Level | Increased #/% of consumers that have a confirmed "activation" of their plan after a follow-up PCC session with the NWD in [insert calendar or fiscal year] | Formula: % = # of consumers with a confirmed activation of their plan/ # of total consumers who had PCC |
| 8 | Person-Centered Counseling (PCC) | Outcome: NWD System Level | Increased # /% of designated partner organizations in a NWD system that contract or employ a trained personcentered counselor in [insert calendar or fiscal year] | Formula: % = # of designated partner organizations with trained PCC employees or contract staff/ # of designated partner organizations within NWD system |
| 9 | Public Outreach and Coordination with Key Referral Sources | Outcome: NWD System Level | Increased consumer volume in [insert calendar or fiscal year] | Year to year comparison: # of consumer contacts # of consumer referrals # of consumers receiving PCC # of consumers with confirmed activation of their plan |
| 10 | Public Outreach and Coordination with Key Referral Sources | Outcome: NWD System Level | Increased #/% of designated organizations in the NWD System that track consumer service gaps in [insert calendar or fiscal year] | Formula: % = # of designated partner organizations that track consumer service gaps/ # of designated partner organizations within NWD system |
| 11 | Public Outreach and Coordination with Key Referral Sources | Outcome: NWD System Level | Increased emphasis on community living: Increased #/ % of people transitioned to the community (from NH, Acute care, Youth) in [insert calendar or fiscal year] | Formula (repeat for each setting type): % = # of NWD consumers who transition to community from specified setting/ # of NWD consumers who are eligible/express interest in transitioning from specified setting |

| Measure # | NWD System Function | Output/Outcome | Performance Measure | Ways to measure this performance measure: |
|-----------|--|------------------------------|---|---|
| | | | | Alternative Formula (repeat for each setting type): % = # of NWD consumers who transition to community from specified setting/ # of total NWD consumers |
| 12 | Streamlined Eligibility for Public Programs | Outcome: NWD System Level | Increase #/ % of state-coordinated public programs access points in [insert calendar or fiscal year] | Formula: % = # of state-coordinated public programs that serve as NWD access points/ # of total state-coordinated public programs |
| 13 | State Governance & Administration Public Outreach and Coordination with Key Referral Sources Person-Centered Counseling (PCC) Streamlined Eligibility for Public Programs | Outcome: Consumer Level | Perceptions of consumers, in [insert calendar or fiscal year] showed: Increased consumer trust Increased active decision-making Increased knowledge of LTSS/ life options Increased needs/goals and preferences met Increased personal activation/ empowerment Increased choice More efficient use of personal resources Decreased burden on the individual Improved health ⁴ Decreased community tenure ³ | Year to year comparison: Average values on related constructs |

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⁴ These constructs are included because they can indicate the level to which consumers **perceive** improvement in these areas. It is recommended that the NWD System also consider an evaluability or pilot study, similar to those described in the section on *Measures of Interest*, to determine whether and how administrative/clinical (i.e., not consumer perception) data can inform these NWD outcomes.

Measures of Interest

Discussion among grantees and partners included measures which are not being recommended as performance measures, but still warrant monitoring. Below are measures of interest and recommendations of how they may still be monitored but not reported as performance measures. The Table below includes the measure of interest and recommendations for next steps.

| NWD System Function | Output or Outcome | Measure | How to measure: |
|------------------------------------|-------------------|----------------------------|---|
| State Governance & | Outcome: NWD | NWD sustainability/ | Consider adding this to the Management Tool and include a |
| Administration | System Level | organizational integration | standard progress tool/ marker of progress for each |
| | | | indicators, such as: |
| Public Outreach and Coordination | | | Occurred |
| with Key Referral Sources | | | Planned |
| | | | Not expected |
| Person-Centered Counseling (PCC) | | | |
| | | | Progress record of following indicators in [insert calendar or |
| Streamlined Eligibility for Public | | | fiscal year]: |
| Programs | | | State legislative or executive action which funds or |
| | | | authorizes the NWD |
| | | | Explicit mention of NWD in organization's strategic plans |
| | | | Ongoing training/support in PCC and NWD processes |
| | | | supported with funding apart from federal grants |
| | | | Co-location of NWD staff |
| | | | Joint NWD positions |
| | | | Requests for inclusion of NWD in grants and/or activities |
| | | | of non-affiliated organizations |
| State Governance & | Outcome: NWD | System efficiency | Consider an evaluability or pilot study to explore the |
| Administration | System Level | (previously worded as: | variation in possible types of efficiency (e.g., decreased costs, |
| | | Decreased system costs | decreased application time, decreased cost per person) and |
| Public Outreach and Coordination | | (cross programs) and/or | the varying levels of systems costs in different states. This |
| with Key Referral Sources | | decreased growth in costs) | could include in-depth case studies of selected NWD Systems |
| | | | to help a) operationalize the types of efficiency, b) identify |
| Person-Centered Counseling (PCC) | | | key sources of information and applicable data elements, |
| | | | and c) assess efficiency overtime, in advance of a concept |
| Streamlined Eligibility for Public | | | paper for a full NWD System evaluation. |
| Programs | | | |

| NWD System Function | Output or Outcome | Measure | How to measure: |
|------------------------------------|-------------------|------------------------------|--|
| Person-Centered Counseling (PCC) | Outcome: NWD | Increased use of PCP/C tools | Consider a pilot study/workgroup to explore the types of |
| | System Level | by counselors | tools used, when they are used, and the quantity of use. |
| | | | This could include a working group of PCCs in selected NWD |
| | | | Systems to help a) identify the PCP/C tools that are used, b) |
| | | | understand how the use of these tools is tracked, and c) |
| | | | know if there are specific criteria for selecting/using tools. |
| | | | This information is a needed first step before determining |
| | | | whether there are linkages between the use of the tools and |
| | | | outcomes for the system and consumers. |
| Streamlined Eligibility for Public | Outcome: NWD | Decrease in average length | Consider an evaluability or pilot study to determine systems |
| Programs | System Level | of time of the application | and data elements needed to explore the NWD |
| | | processes | trajectory/experience for consumers. This could include in- |
| | | | depth case studies of selected NWD Systems to help a) |
| | | | understand if Systems have the data elements necessary to |
| | | | track consumer flow through the System, b) know what type |
| | | | of tracking system is used to monitor consumer progress, |
| | | | and c) the practicality/system functionality of retrieving |
| | | | summary information. This information is a needed first step |
| | | | before determining linkages between the application process |
| | | | time and outcomes for the system and consumers. |