



Newsletter

Linking individuals and families to resources

April 2007

Our mission is working together in our community to create an abundance of accessible and integrated resources, so that every place a person in need goes to for help feels like the right place.

Our vision is to create a system of care where individuals and families find relief, hope, and means to permanently transcend challenges.

CONNEXIONS IN ACTION: A CLIENT'S STORY

Mr. Jones was referred to ConneXions for general guidance. He was recently separated from his wife and staying at a homeless shelter. In talking with him, the ConneXions staff learned his main goal was to get back together with his wife. In order to do that, he needed to have an alcohol assessment and enroll in anger management classes. The ConneXions staff provided him with information on resources for both services and financial resources to pay for the services. Mr. Jones is on limited income, so did not have the funds available to pay for the initial assessment. With the ConneXions staff's coaching, he was able to locate the least expensive option for care and secure resources to help pay. They also assisted him with developing a budget that would allow him to pay for his ongoing treatment. He is able to pay for his ongoing treatment himself. In addition, staff also assisted Mr. Jones with the Basic Food application. He is now participating in anger management classes on a regular basis and attending Alcoholics Anonymous. He and his wife are beginning to work through their issues.

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IMPLEMENTATION UPDATE

Believe it or not, it has been almost two years since we went live with ConneXions! Thanks to the commitment of our partner agencies to shared learning and ongoing development, we have made progress and learned a great deal.

We have enrolled nearly 5,000 clients since we went live on July 1, 2005 and 113 users at our partner agencies have been trained on the software system. The top needs addressed by ConneXions sites continue to be utility and rental assistance, food, shelter, employment, prescription assistance, and health insurance. We are continuing to improve the software.

Over the last year, the ConneXions board has re-evaluated the progress to date, examined lessons learned (see next page), looked at long-term sustainability, and created a plan for next steps. Ongoing sustainability continues to be a driving force in developing next steps.

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IMPLEMENTATION UPDATE (*continued from P 1*)

In 2004, CHOICE Regional Health Network was the only respondent to the RFP issued by the ConneXions steering committee. They took the risk to build the ConneXions infrastructure and find the funding. Unfortunately, CHOICE has not been able to raise the external funding necessary to underwrite the site fee subsidies, lead agency fee payments, and much of the infrastructure and implementation cost. CHOICE continues to seek funding but so far has received no large or long-term grant finding. As a result, CHOICE has subsidized the ConneXions infrastructure and implementation expense itself from other funds—approximately \$200,000 per year since July 2003.

CHOICE is not in a financial position to continue to subsidize ConneXions administration. As a result, the ConneXions Board felt the need to develop a new approach that would still result in achieving the original vision. They created two disappearing task groups to design and develop the new approach and to provide seed capital for its full implementation.

- **The Design and Development Task Group** was given the charge to assess, redesign, and develop a sustainable approach to implementing ConneXions. (See below for phased approach development)
- **The Investor Task Group** was given the charge to develop and implement a capital campaign to raise seed capital over two years to fund the full implementation of a sustainable approach. Its work is just beginning now that the Design and Development team has completed their work.

LESSONS LEARNED

- Mission and vision still resonates with the board, partners, and community.
- Training is resource intensive and time consuming.
- Information system is complex and difficult to navigate if you only dabble in the work
- Helping clients transcend their current environment takes an investment of time from both the client and ConneXions staff.
- It has been more difficult than anticipated for CHOICE to raise the external funding necessary to underwrite user fee subsidies and much of ConneXions' infrastructure and implementation cost.
- The current approach has focused on the development of many enrollment sites, all using ConneXions' web-based software, regardless of site size or capacity, with a low and generously discounted fee structure to encourage agency participation.
 - However, despite extensive training and support, few sites are actually using the system to enroll clients, indicating agency internal operations and external community development barriers.
 - Agency response to proposals to increase user fees and eliminate discounts to offset lack of external funding have indicated that reliance on user fees as a major source of funding cannot work at this time.
- At the inception of the current approach, Western Counties 2-1-1 was only in the initial planning stage with an uncertain development horizon. As 2-1-1 has become an operational reality, ConneXions' current approach must be modified to avoid duplication and to make best use of the 2-1-1 resources.
- Working with clients one-on-one and creating client driven action plan can achieve results.

CONSISTANT CLIENT OUTCOMES

We have recently re-defined this goal to "Successful Client Outcomes and are working with current partner agencies to further define this.

As we develop this, we will be looking at common data sets to collect and report data and create tools to support coordinated client support. During the next phase, we will continue to explore the question: "What are the tools needed for partner agencies to be confident in playing the role of a "transformation coach" as the client begins their journey to independence?"

CONNEXIONS: A PHASED APPROACH

Because the current approach lacks sustainability, we have evolved to a phased approach to implement ConneXions that starts smaller and simpler. Then, as the community is ready, our new approach expands over the course of four years to raise seed capital, convene and engage stakeholders in ConneXions program work, and ultimately achieve a strong, ongoing ConneXions program.

The new approach envisions the integration of three services:

1. Crisis services for urgent, immediate dysfunction—through Crisis Clinic
2. General information and referral without case management—through 2-1-1
3. Systematic, coordinated client support for motivated individuals and families with multiple, chronic needs—through ConneXions

The new approach envisions the work in three phases:

Phase I: CHOICE and partners define “coordinated client support,” CHOICE trains its staff to do this well and integrates client flow from Project Access, Emergency Department Care Coordination programs, and Tu Salud (language access initiative) into its ConneXions work. CHOICE and partners define consistent client outcomes and a common data set to collect and report and, working closely with United Churches, begins to test approaches.

Phase II: CHOICE develops with the faith community a “Store Front” site for its ConneXions work, staffed by a CHOICE Health Resource Coordinator and faith community volunteers. Other community partners may join as well. Agreement is reached on consistent client outcomes and common data sharing to implement.

Phase III: Close coordination or integration with 2-1-1, including use of the same information system and wide implementation of consistent client outcomes and common data sharing.

2-1-1/RESOURCE DATABASE

2-1-1 went live in January of 2007 giving residents in Thurston, Mason, Grays Harbor, Lewis, and Pacific counties a new way to connect to non-emergency health and human services.

The simplicity of the 2-1-1 number helps more people access services ranging from finding rent assistance to an after-school program to secure adequate care for a child or an aging parent.

The 2-1-1 Western Counties Call Center is operated locally by Behavioral Health Resource (BHR) and built on the strong foundation of their 24/7 Crisis Clinic Resource Network. 2-1-1 services are available Monday through Friday, 8 am to 5 pm. ConneXions continues to work closely with the 2-1-1/Crisis Clinic to update the database of over 750 program resources. Cell phone users may call 877-246-1915 to access 2-1-1.

To date, approx. 30% of all agencies in the database have submitted updated information for the 2-1-1 resource directory. If your agency has not submitted updated information, please contact Ken Huff (khuff@bhr.org). In addition, ConneXions is working closely with 2-1-1 to coordinate and eventually integrate our efforts to develop successful client outcomes, common data sharing, and reporting.

PARTNERSHIP UPDATE

During Phase 1, ConneXions will not continue to add new partners. Instead they will be working closely with existing partners to further develop the model. United Churches of Olympia will continue to serve as our one “Referral Site” and we will be working with them to train volunteers to screen and assess perspective clients using 2-1-1 as resource for immediate needs like utility assistance, emergency food, and housing. United Churches will identify clients who would benefit from coordinated care support and would be interested in participating in development of an action plan that is self-directed with support.

In addition, we will be launching an outreach and education initiative aimed at developing screening, assessment, and appropriate referrals for:

- Food Security
- Medical Coverage/Health Home
- Employment/Income stability
- Adequate Housing

We are excited by this initiative as we know that clients who have the above items in place are much more likely to transcend current circumstances. In addition, we will be working with current partners to: 1) identify what coordinated case management looks like, 2) create a simplified client release form that allows for sharing among agencies, and 3) develop common data gathering and reporting.