No Wrong Door System of Access to LTSS for All Populations and All Payers

An Optional Set of Tools to Help Grantees Advance NWD Planning Efforts

November 2014

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Introduction

In 2014, The U.S. Administration for Community Living (ACL), the Centers for Medicare & Medicaid Services (CMS) and the Veterans Health Administration (VHA) released a Funding Opportunity Announcement to assist states in the planning of a No Wrong Door (NWD) System to help individuals access long term services and supports (LTSS). The NWD System will make it easy for people of all ages, disabilities and income levels to learn about and access the services and supports they need.

The NWD System will also provide states with a vehicle for better coordinating and integrating the multiple access functions associated with their various state administered programs that pay for LTSS. Specifically, the funds being made available under the FOA are to support a state-led 12-month planning process to identify the key actions the state will need to take to move forward with the development and implementation of a NWD System that has the functional and operational capacity described in the FOA. The FOA specifies the state agencies that must be involved as full partners in co-leading the planning process:

- the State Medicaid Agency
- the State Unit on Aging
- the state agencies that serve or represent the interests of individuals with physical disabilities and individuals with intellectual and developmental disabilities
- the state authorities administering mental health services.

The planning process must also involve meaningful input from key stakeholders including individuals with disabilities, their advocates, Area Agencies on Aging, Centers for Independent Living, local Medicaid agencies, local organizations that serve or represent the interests of individuals with physical disabilities, individuals with intellectual and developmental disabilities, and individuals with mental/behavioral health needs, Veteran Service Organizations, as well as service providers, and other relevant public and private entities.

Most states have already developed programs that help individuals understand and access their LTSS options using various federal grants and authorities, such as Aging and Disability Resource Center grants, Money Follows the Person grant funding, and the Balancing Incentive Program, but few states have developed a statewide system to access LTSS that reflects the functionality and operational capacity of the NWD System described in the FOA.

This planning toolbox includes numerous tools and processes that may help states to successfully develop the required 3-Year Plan that includes a detailed strategy, work plan, and budget the state will use, pending the availability of additional federal support, to begin transforming the multiple access functions that are administered by its various LTSS programs into a single statewide NWD System to access LTSS for all populations and all payers.

States are not required to use any of the enclosed resources. This toolbox is simply a resource for new NWD System Planning grantees which includes the following tools and resources that you can use as you determine appropriate to develop your 3-Year Plan;

Appendix A. Planning Grant Checklist

This checklist is a tool to track the key steps in developing the required 3-Year plan.

Appendix B. Retreat Planning

This section includes tips for a successful retreat and a checklist to guide development.

Appendix C. Effective Stakeholder Engagement

This section highlights effective strategies for identifying and actively engaging stakeholders as you develop the 3-Year Plan and as you move toward implementation.

Appendix D. Translating a Motivating Vision

This section contains tools to help you translate a motivating vision.

Appendix E. Stakeholder Identification

This section includes a tool to map stakeholders.

Appendix F. Stakeholder Management

This section includes tools to manage stakeholder processes such as a meeting agenda template, an action item tracking sheet, charters and other formal stakeholder engagement tools, a PDSA worksheet, and NWD recognition ideas.

Appendix G. Process Mapping

This section includes an overview of process mapping tools including cause and effect diagrams, fault tree analysis, value-stream mapping and the 5-whys.

Tools and Resources

Appendix A. Planning Grant Checklist¹

Planning has many pitfalls to include;

- ✓ Lack of ownership: If people don't have a stake and responsibility in the plan, the vision will not be realized.
- ✓ Lack of communication: If the vision is not communicated, people will not move toward desired goals.
- ✓ Overwhelming: If the plan includes too many action steps that lack meaning, people will get overwhelmed and lack focus on items that are achievable and necessary to meet the vision.
- ✓ Getting mired in the day to day: If goals are not articulated and communicated frequently, people revert back to the normal day to day and fail to move toward the vision.
- ✓ A meaningless plan: The mission and vision must be supported by action or people will not buy-in.
- ✓ No progress report: Inability to measure progress will result in a lack of momentum.
- ✓ No accountability: Accountability and high visibility are needed to help drive change. Each action item must be measureable and assigned.

This checklist is a tool to help you develop a plan that avoids common pitfalls. Your planning framework should include consideration of; where the NWD system is now (the as-is state), where the NWD system is going (the vision and to-be state), and how you will get there (the plan). As you develop your plan, use this checklist to guide activity.

Planning Components	✓ Done
A planning grant team is convened. This planning grant team is made up of the coleads of the NWD system planning grant. Consider conducting a retreat with the	
team to build the initial vision and formulate goals and objectives.	
The planning grant team develops the stakeholder process.	
Stakeholders are convened. Use the stakeholder team during the planning phase to react to the vision, goals, objectives and action items. This same stakeholder team	
may become your active and energetic implementation team following development	
of the 3-Year-Plan. Build relationships early to advance the NWD vision.	
A mission and vision is constructed and approved by the planning and stakeholder	
teams. The vision explains where you are headed.	
Assessment of the current NWD system is completed.	
Comparison of the current NWD system compared to the future state is completed.	
Strengths, weaknesses, opportunities, and threats are identified.	
Establish goals and objectives for each function of the NWD system. Goals and	
objectives are long-term continuous areas that get you moving forward toward your	
vision. Effective goals should clearly state what, when, how and are specifically	
measurable. What are the 1 to 3 year goals you are trying to achieve?	
Develop action items for each objective. Clearly outline who is responsible for	
completing the action item, establish a target date for completion, determine financial	
and other resources needed to implement action item, identify potential barriers to	
completion, and outline how you plan to measure progress toward the objective and	
overall goal.	
A plan to monitor performance is developed.	
Communication plan is developed.	

¹ Lewin developed this checklist consistent with the FOA and basic steps in any planning process.

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Appendix B. Retreat Planning²

Why hold a retreat to kick-off your planning? A retreat provides you an opportunity to step back from day-to-day demands and activities to engage in concentrated discussion, dialogue, and strategic thinking about the current and future of your state's NWD system. Retreats are a beneficial way to initiate planning, discuss specific issues or challenges, build a team, solve problems, and develop goals and objectives.

Tips for a successful retreat include;

- ✓ Careful planning in great detail.
- ✓ The use of an experienced, skilled, facilitator.
- ✓ Attendance from the "right" people who are willing and able to participate.
- ✓ A clearly articulated purpose and set of goals. The more specific, the better chance you meet the goals of the group.
- ✓ A room layout and setup that is conducive to group discussion.
- ✓ Make sure everyone knows the ground rules.
- ✓ Clear ground rules that are simple and easy to follow (e.g. everyone should participate and express their ideas, questions, and concerns. Participants must practice their active listening skills. Listen for understanding. Only one person speaks at a time. Be open to new ideas.)
- ✓ Group techniques, processes, and decision making tools to engage all participants in dialogue.
- √ Variety vary the time, amount of risk, presentation, presenters, settings, and the type of interaction during the retreat.
- Creativity this will create interest and facilitate further involvement and interaction of participants.
- ✓ Incorporating socializing into overall event.

Retreat Checklist	✓ Done
Identify goals for the retreat.	
Determine who should participate and why.	
Identify a date/time.	
Construct an agenda that includes;	
☐ Orientation and Agenda Overview	
☐ Team-building Activities	
☐ Information Sharing	
☐ Idea generation	
□ Decision making – processing and deciding	
□ Breaks	
□ Next Steps	
□ Evaluation	
Develop pre-retreat packet including any preparation work participants may need to	
do before the retreat.	
Identify a location.	
Determine if a facilitator is needed.	
Arrange logistics (food, equipment)	
Assign roles for moderator, facilitator, record-keeper, participant)	
Develop an evaluation of the retreat to guide future activity.	

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² Lewin developed this checklist using experiences directly developing, managing, and facilitating retreats and other events (e.g. focus groups, in-person meetings).

Appendix C. Effective Stakeholder Engagement

What is a stakeholder? The formal definition is;

"A person with an interest or concern in something"

The governance and administration of a NWD System must involve a collaborative effort among multiple state agencies, since no one state agency has the authority or expertise to carry out all of the functions involved in a NWD System. The NWD System is a critical component of any well-developed, person-centered state LTSS System, and therefore, its governance and oversight should be lodged in a Cabinet level body - either a new or existing one - and should be part of the state's oversight of its LTSS System. The NWD System governing body should be responsible for coordinating the on-going development, implementation, financing, evaluation and continual improvement of the state's NWD System. It must include representatives from the State Medicaid Agency, the State Unit on Aging, and the state agencies that serve or represent the interests of individuals with physical disabilities, individuals with intellectual and developmental disabilities, and the state authorities administering mental health services. Senior staff from these agencies should be designated as full partners in managing the on-going development and implementation of the NWD System. States may involve other state agencies, such as the budget office or the agency administering programs for Veterans as members of its NWD System governing body.

It is critically important to planning success for the planning team to establish a process that will ensure key stakeholders have meaningful input into the ongoing development and implementation of the states' NWD System. Stakeholders should include individuals, their advocates, Area Agencies on Aging, Centers for Independent Living, local Medicaid agencies, local organizations that serve or represent the interests of individuals with physical disabilities, individuals with intellectual and developmental disabilities, and individuals with mental/behavioral health needs, Veteran Service Organizations, as well as service providers, and other relevant public and private entities.

For the purposes of this Toolbox, stakeholder engagement involves three stakeholder groups with overlapping interests.

Partners are individuals or groups united or associated with each other in an activity or a sphere of common interest "characterized by mutual cooperation and responsibility, as for the achievement of a specified goal."

Stockholders are those who stand to gain financially from decisions made by the group, theorize how systems should work, and are paid to be at "The Table"

Actual Stakeholders are persons who are directly affected by decisions made, experiences how systems actually work, and should be supported to be at "The Table".

Often stakeholder groups fit into two categories;

- 1. Advisory (ongoing)
- 2. Problem solving (time and task limited)

Whether operating in an advisory capacity or to solve a problem, this toolkit assumes that the need for stakeholder engagement is active and meaningful, not passive and "report-out" oriented.

Preparing for Stakeholder Engagement

When engaging stakeholders, some useful steps to keep in mind are:

1. Properly staff stakeholder engagement. It is important to properly support stakeholder engagement through leadership and administration. Having a lead person (and administration support) assigned to manage the stakeholder process helps to keep stakeholders engaged, goodwill in place, and information flowing.

"The secret of getting ahead is getting started. The secret of getting started is breaking your complex, overwhelming tasks into small manageable tasks, and then starting on the first one."

-Mark Twain

2. **Define/Identify key stakeholder groups.** There are multiple stakeholders that have an interest in various long term services and supports (LTSS) initiatives. It is important to determine the stakeholders necessary for a group to meet the purpose of group. Individuals with disabilities and older adults, their families and/or guardians are the MOST IMPORTANT stakeholders, but consider engaging others, including, but not limited to, advocates, aging and disability service providers (e.g., AAAs, Independent Living Centers), locally active consumer, health, and LTSS non-profit organizations, and providers. Also note that not all stakeholders are external; there are many state agencies that also must come together to effectively implement LTSS system reform. For example, inclusion of state agencies responsible for older adults, persons with developmental disabilities or other LTSS populations; state licensure and insurance; purchasing; and even Medicaid managed care may be essential to any LTSS system change initiative. There can be multiple groups comprised of different stakeholders, but it is important to ensure that once a group has been identified, the message and level of discussion is targeted to meet the groups' purpose and goals. Use the tools contained in *Appendix D* to translate a motivating vision for the NWD system. Additionally, these tools can help you to develop an action plan to move the NWD system forward.

Use the tools contained in *Appendix G* to map the stakeholders needed to help you to meet your program's vision and goals and guide active participation.

3. Engage early and often. Early and ongoing stakeholder input is necessary to identify the concerns and needs of people with disabilities and design programs that are responsive and adequate. Substantial stakeholder input, especially from individuals with disabilities and older adults, through all stages of program development and assessment is necessary. States should ensure that key disability stakeholders, including individuals with disabilities, family members, support agency representatives, and advocates, are fully engaged in designing, implementing and monitoring the outcomes and effectiveness of service delivery (National Council on Disability – Guiding principles, Section II, A). The involvement of disability stakeholders should not end with the approval of a program and/or policy change. Instead, stakeholders should participate in monitoring and provide feedback on system performance and needed modifications on an ongoing basis.

- 4. Determining level of stakeholder involvement. Before involving stakeholders, consider how much involvement you want from them and at what specific points in your development process you will need stakeholder input. For broader purposes of education about public programs such as what Medicaid does and the services it provides, the state may wish to engage the general public or legislative officials.
- 5. Setting expectations for meaningful stakeholder involvement. Establish your expectations for stakeholder involvement early in the process. Outline roles and responsibilities, establish rules for stakeholder meetings, inform stakeholders how input will be used and use project management tools contained in this toolkit to engage stakeholders actively and manage change toward group goals. Ask yourself;

How will you manage the group?

- a) What is the role of the committee as a whole?
- b) What are the roles of each member?
- c) What is the length of membership? The lifespan of the committee, etc.?
- d) Do you have operating ground rules for stakeholder committees?
- e) Are there boundaries to the group's work?
- f) How will you measure progress?

Use the tools and resources under *Appendix C* as a guide.

- 6. Establishing forums for input. Determine the most appropriate forum(s) for meeting with key stakeholders. It may be helpful to have more than one forum to make the meetings and opportunities for input as accessible as possible to a wide range of stakeholders. For example, use town hall style meetings, focus groups, and committees, meet regionally versus centrally. States may also include stakeholders in planning, advisory and oversight committees. A multi-pronged strategy of using multiple forums with multiple stakeholder groups may garner a wealth of information for consideration and will provide multiple opportunities for stakeholder input. States should consider accessibility needs and may want to consider opportunities/alternatives for participation such as arranging accessible travel for individuals, virtual meetings, conference calls etc.
- 7. Educating stakeholders. Ensure that the meeting locations can accommodate the unique needs of your stakeholders, e.g., consider if the meeting location is accessible for someone in a wheelchair. To improve overall input and to make sure all stakeholders have a similar starting point for discussions, provide materials and have discussions about the basics of topic and goals of the group. What data and facts are available to guide stakeholder effort? Gather national and state specific data to guide program development, encourage stakeholder participation, and energize group cohesion, participation and progress. Qualitative and Quantitative data are necessary elements of success. Information sharing and data, in particular, can be used to open doors and engage potential helpers and funders, stimulate movement on an issue and develop solutions in an efficient and effective way.

8. Preparing, distributing, and formatting materials. Prepare and distribute documents well in advance of a meeting so stakeholders have an opportunity to review them before attending any of the forums/events/meetings. Also, ensure documents are available in appropriate formats for stakeholders, e.g., prepare documents in braille or large print or provide materials in an audio format for individuals with visual impairments. Visit www.medicaid.gov/mltss/docs/consumer_involvement_toolkit.pdf for a toolkit developed by Massachusetts as a result of a Systems Transformation Grant. The toolkit includes 1.) Suggestions for how to engage and include individuals in projects, 2.) Tips for finding and inviting individuals to participate, 3.) Resources for providing reasonable accommodations, and 4.) Ready-to-use tools and checklists.

Remember that several modes of communication may be necessary to inform and engage certain stakeholders. Seek input from stakeholders to determine the most effective ways to convey important information.

 Value and Acknowledge Stakeholder Input. Stakeholders want to know that participation in meetings is meaningful and that their voices are heard. Highlight stakeholder engagement within materials related to the State's program.

To summarize, the following are some key planning questions to answer when considering engaging stakeholders:

- 1) Who are the key stakeholders in the community? How are we going to "recruit" these stakeholders to participate in our planning?
- 2) What are we hoping to learn from the key stakeholders? What is our expected outcome from involving stakeholders?
- 3) How much involvement do we want/expect from the stakeholders? What level of detail about our planning and implementation do we want to share for stakeholder input?
- 4) What are we going to do with the input we receive?
- 5) What are the most effective ways to communicate with the stakeholders? Should the communication method be different for recruiting, meeting planning, and ongoing communications?
- 6) What are the best forums for gathering the stakeholders? Town hall meetings, focus groups, committees, conference calls?
- 7) What kinds of meeting accommodations are appropriate for our stakeholders?
- 8) How often should we involve the stakeholders? Quarterly, annually?

Effective Engagement

Pointers for effective engagement¹

- ► Think globally and act locally. Build on those local issues.
- ► Think ahead: Always consider your timeframes and end goals.
- Testing your ideas in small ways may help to get things started (once good ideas are proven to work, your commitment to implementation and expansion may be easier).
- Capture quality stories. Build on your successes!
- ► Keep the door open laggards may be eager to join later.

"No problem can stand the attack of sustained thinking."

-Voltaire

- If there is one party with an overwhelming degree of influence, the meetings might go better with an outside facilitator who can keep things more equal.
- Meet in various stakeholder settings and share viewpoints to reflect respect and encourage dialogue.
- Consider using tools contained in the "Organized for Health" to engage others in helping to reach the motivating vision. In particular, the "One on One meeting" process works well to engage potential partners that may otherwise appear difficult to engage. Go to: http://www.cfmc.org/integratingcare/learning_sessions.htm.
- ▶ Process mapping is a tool (see Appendix G) that often serves to share a work process efficiently and thereby often illuminates inefficiencies and opportunities. Try using these tools to provide foundation to a workgroup task.
- ► It takes time to build trust between stakeholders— allow the relationships to grow slowly, while encouraging the exchange of information.

Keeping Stakeholders Engaged

Whether developing or advancing the NWD system or implementing any of the system transformation options (e.g. BIP, MFP) available through multiple federal agencies, the goal is the same. The long term services and supports system is in a cycle of continuous quality improvement. By working with stakeholders, resources are maximized and the system moves at a faster pace toward the state's shared vision and goals. The figure below reflects a p o s s i b I e community living system change cycle using the "Plan – Do – Study – Act" (PDSA) Cycle often used with home and community based quality improvement. Adding a PDSA cycle to NWD stakeholder processes will connect data, learning, and action together into a singular process that can be managed by NWD team leads. Stakeholders can, and should, help map processes, establish goals, develop measures for successful outcomes, collect data, and modify action plans.

¹Integrating Care for Populations and Communities Initiative. Colorado Foundation for Medical Care. (http://www.cfmc.org/integratingcare/default.htm).

Helpful Tools to Engage Stakeholders

An Action Item Tracking Worksheet (*Appendix F*) is a helpful tool when tracking unique system change initiatives and can be adapted to meet the particular vision or goals of any workgroup.

Often, the best way to develop the "P" in the PDSA cycle is to conduct an analysis of the current state, the "as is" state of the need area. The planning grant team could use a "Root Cause Analysis (RCA)" and/or "Process Map" to better understand the "as-is" NWD state.

"We can't solve problems by using the same kind of thinking we used to create them."

—Albert Einstein

An RCA is a process to identify the causal factors that lead to the outcomes experienced. An RCA typically allows for the identification of the "root" of a problem by responding to how, where, and why a problem, adverse event, or trend exists. This type of analysis helps in the identification of causes and subsequent recommendations for changes to improve the "as-is" state through the review of data and facts. Often, an RCA begins through the analysis of data and the development of possible solutions, best brainstormed through a group process. Stakeholders are excellent partners in an RCA and can help to identify action steps and monitor progress toward common goals.

A Process Map is a view of the current "as-is" state of the system. Mapping out the current state of a process can help clarify responsibilities and contributions as well as identify opportunities for improvements in operations or policy.

" When it is obvious that the goals cannot be reached, don't adjust the goals, adjust the action steps."

-Confucius

Following analysis, a plan can be developed. Action plans have many positive attributes. Often, the outcomes sought are ambitious and somewhat overwhelming. Action plans break large initiatives into meaningful and possible steps and enable stakeholders as well as project leads to stay "on the same page" and focused.

When developing an action plan, be specific and measureable always. Doing so will lead to a plan that is understood by all and ensures accountability across the team. The Colorado Foundation for Medical Care^{iv} recommends the following steps:

- Identify concrete and specific strategies
- Address responsibility for implementation, oversight
- ▶ Address ongoing measurement to determine effectiveness of the actions
- Create a timeline for multiple actions
- Set reasonable/attainable goals
- Link goals to measurement
- Select changes that have the highest potential impact community-wide, but test one change in one area first

Appendix D. Translating a Motivating Vision

The following excerpt is from the workshop guide 'Organizing for Health" shared through learning sessions posted at http://www.cfmc.org/integratingcare/learning_sessions.htm.

"Our motivating vision will articulate both a "nightmare" – a concrete, urgent need for change in moral (injustice) and specific (lack of access to community based care) terms – and will contrast the challenge with a "dream" – a source of hope, also articulated in moral (justice) and specific (access to community based care) terms." Translating a motivating vision requires thought and discussion. Through years of experimentation and research among various states, the NWD vision has been developed. But it's up to your team to translate it into a vision that makes sense for your state.

- ▶ What is the intolerable condition in our state that we want to end or avoid?
- ▶ Why is it urgent now?
- ▶ What is at stake in our state?
- What will happen if we don't act?
- What could happen if we do?

Use the worksheet below as a guide to dialogue and a way to track planning grant team member and stakeholder thoughts.

Worksheet for Translating a Motivating Vision - Part 1

Translating a Motivating Vision
What is the intolerable condition in our state that we want to end or avoid?
Why is it urgent now?
What is at stake in our state?

Translating a Motivating Vision
What will happen if we don't act?
What could happen if we do?
Developing a call to action is NOT the same as developing a strategic plan. A strategic plan is a noun; something we have somewhere on a shelf. It is a document that is developed through a cycle of actions. A call to action is a verb; something we do. We develop strategy as we implement and always move toward the motivating vision. The worksheet below is a tool to guide continued dialogue and results in a way of thinking and a direction.
Worksheet for Developing a Call to Action - Part 2
Translating a Vision for:
What is the urgent challenge?
Who is most affected by the challenge?
How is the motivating vision translated in your state?

Developing a	Vision for:		
What needs to happen?			
What resources are needed to	affect change?		
What would achieving success	s look like?		
Measureable Goals and Outcor	mes for:		-
Action Item	Person(s) Responsible	Timeline	Outcomes Expected

In Summary....

am organizing(WHO: constituency and le			
To do	(WHAT: measureable goal)		
Ву	(HOW: strategies)		
Ву	(WHEN: Timeline)		
In order to	(WHY: motivating vision)."		

Appendix E. Stakeholder Identification

The below was created using promising practices outlined in the workshop guide 'Organizing for Health" shared through learning sessions posted at http://www.cfmc.org/integratingcare/learning_sessions.htm.

We look for partners (our stakeholders) because we want to....

- 1. Build new relationships Recruitment, exploration
- 2. Deepen existing relationships Shared learning and growth
- 3. Renew relationships
 Repairing or redefining existing relationships

When thinking strategically about whom we want to build relationships with, select for:

- Capacity
- Those who bring others along
- Passion and Commitment
- Learning Bias
- Diverse Resources
- Understands the System
- Dependable/Reliable
- Good Strategic Thinker
- Consensus Builder

Use the tool below as a guide when mapping the stakeholders needed to meet your goals.

Opposition = People who have potential conflict with shared values and interests.

Supporters = People whose interests are not directly affected by your shared values and interests.

Competition = People we share some interests with, but not others. People who may be seeking the same support (whether in *natural* resources such as interests, ideas, and energy as well as *acquired* resources such as money and skills) as your initiative.

Stakeholder Name	What resources can the person bring to the project? (e.g. interests, ideas, support, skills, finances)

Appendix F. Stakeholder Management

- 1. Meeting Agenda Template
- 2. Action Item Tracking Sheet
- 3. Charters and other Formal Stakeholder Engagement Tools
- 4. PDSA Worksheet
- 5. Recognition Tips

Meeting Agenda Template

Agenda						<insert state<br="">specific logo></insert>
Meeting Name:						
Date:	Start Time:	End	Time:	Loca	tion:	
Mission <insert nwd<br="" specific="" state="">Ground Rules <insert specific<="" state="" td=""><td></td><td></td><td></td><td></td><td></td><td></td></insert></insert>						
Discussion 7	⁻ opic		Person Responsibl		Time Allotted	☐ Task Completed

Action Item	Person Responsible	Due Date

Action Item Tracking Sheet

	Action Item Tracking Sheet								
Action Item Title	Implementing Action Step	Date Action Started	Expected Outcome	Date Outcome Measured for Completion	Adopted or Modified	Date Adopted or Modified			
Housing	Develop web-based search tool to locate available services and supports in the community	May 1, 2012	Persons will have improved access to available services and supports in local communities as measured by: 1.) Number of persons who are linked with available services and supports 2.) Decrease in time for individuals who need help to connect to services and supports from initial call.	October 1, 2012	Adopted – Web- based tool available on Sept. 1, 2012.	October 15, 2012 – will monitor expected outcomes quarterly			
Outreach	Implement new marketing tools targeted specifically to NF residents to increase enrollment in community based programs.	October 1, 2012	Nursing facility residents will know about the state's MFP program and will enroll as measured by: 1.) Increased enrollment in the MFP program. 2.) Increase in the number of MFP transition measured through quarterly survey.	March 2013	Modified – Enrollment did not increase as a result of new marketing tools	Modified Approach in April 2013			

Action Item Tracking Sheet						

Charters and other Formal Stakeholder Engagement Tools

Once you have determined who to invite for participation, it is important to identify a structure that will help move the group toward established goals. Outlining distinct and specific goals for the work will lead to greater participation and outcomes that are effective and efficient. Consider developing a vision or mission statement, objectives, core values, policy and procedure manuals, or by-laws. All members of your various groups should be involved in this process. Ongoing meetings and phone calls may be necessary for continued engagement.

Charter Templates

CHARTER FOR:	
Purpose/Mission:	Guidance Team(s):
Sponsor(s):	
Background:	

CHARTER FOR:
Boundaries:
Key Tasks:
Guiding Principles and Ground Rules:
Setimente d Detection of Completions
Estimated Date of Completion:
Meeting Frequency and Duration:
Work Group Composition:

Below is a link to another example charter template that is used by Integrating Care for Populations and Communities Initiative.

Coalition Charter Template (please adjust based on your community's needs)

Typical Sections of By-Laws and Procedures

- I. Group Mission
- II. Group Boundaries and Responsibilities
- III. Group Membership
- IV. Member composition
- V. Member Responsibilities

- VI. Length of Service
- VII. Vacancies
- VIII. Special Advisors
- IX. Officers
- X. Meetings
- XI. Parliamentary Procedures (i.e. Conduct, Voting)
- XII. Ethics, Professionalism and Conflict of Interest
- XIII. Amendments

PDSA Worksheet

See the link below for an example PDSA worksheet.

http://www.google.com/url?sa=t&rct=j&q=pdsa%20worksheet&source=web&cd=3&ved=0CEQQFjAC&url=https%3A%2F%2Fopqc.net%2Fwebfm_send%2F231&ei=K3_TUOezDcqC0QHf8oDYAQ&usq=AFQjCNHiSBBz17i3eoT4DfPLOJYhKQis0w&bvm=bv.1355534169,d.dmQ

Recognition Tips

It is important to recognize stakeholders for the role they play in developing the NWD system, moving the system toward community-based care and improving operations. This section provides some potential tools that can be used to recognize stakeholder engagement.

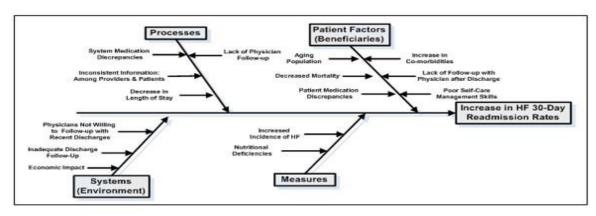
- Engage local media. Develop press releases, quotes, stories, interviews, videos etc. to communicate program progress and successes and recognize stakeholders and local efforts. Consider asking leadership to recognize and award stakeholders or have a proclamation NWD day.
- Award certificates of participation to highlight commitment. This could be a framed certificate, a poster, a banner or some other type of award.
- Develop documents with talking points, key messages, goals, and objectives so that all
 publicity or media have consistent content. Develop standardized slide decks,
 infographs, or monthly PowerPoints or reports to present on the status or progress of
 the NWD system in a public setting.
- Develop Community or statewide newsletters to share NWD success stories and recognize stakeholder work. Use list serves and electronic dissemination to spread the NWD message. Share the newsletter with leadership including your state legislature and the administration.
- Develop a community brand to unify the effort and bring stakeholders together; a recognizable logo, website, tagline, and mission statement.

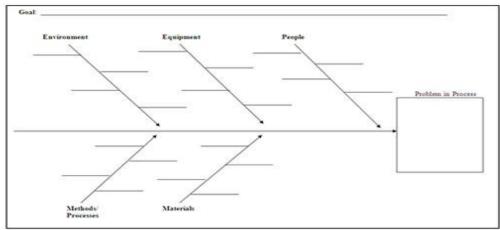
Appendix G. Process Mapping Tools

The following section is taken directly from http://www.cfmc.org/integratingcare/toolkit_rca.htm. When possible, the tools are adapted to reflect NWD system examples.

Cause-and-Effect Diagram

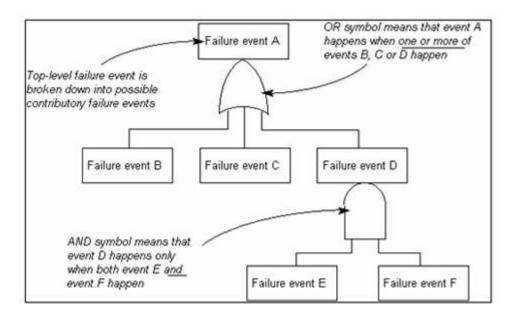
"A Cause-and-Effect Diagram is a tool that can help to identify, sort, and display potential causes of a specific problem or quality characteristic. It visually illustrates the relationship between a given outcome and all the factors that may influence that outcome. This type of diagram is sometimes called an "Ishikawa diagram" or a "fishbone diagram". This tool is useful for identifying and organizing the known or possible causes of quality, or the lack thereof. The structure provided by the diagram helps team members to think and brainstorm in a very systematic way. Some of the benefits of constructing a Cause-and-Effect Diagram are that it encourages group participation, utilizes group knowledge of the process, uses an orderly format to diagram cause-and-effect relationships, indicates possible causes of variation in a process, increases knowledge of the process, and identifies areas where data or more information should be collected for further review." The below diagrams can be adapted. For example, consider developing a diagram to potentially identify problem areas (and solutions) to engage guardians in supporting transition. Factors may be; Guardians, NF residents, NF social workers, Prior burnout, lack of information about community services, resources such as equipment and methods such as outreach, etcetera.





Fault Tree Analysis

"A Fault Tree Analysis graphically represents the interaction of failures and other events within a system or process. Basic events at the bottom of the fault tree are linked to one or more TOP events. These TOP events represent identified hazards or system failure modes for which predicted reliability or availability data are required. Fault trees are often used when the effect of a failure is known to find out how this might be caused by a combination of other failures within a large or complex system. When a solution has been previously identified, this analysis can be helpful to understand potential failures and determine more sustainable and effective solutions. It also helps to identify risks in a system and proactively develop risk reduction strategies and measures."

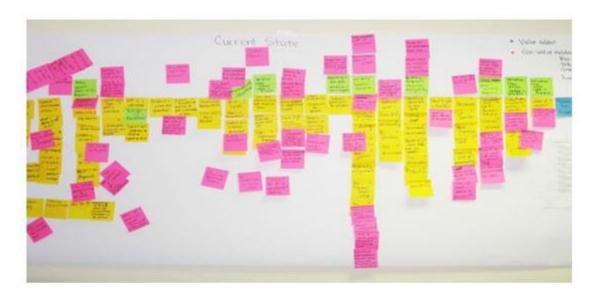


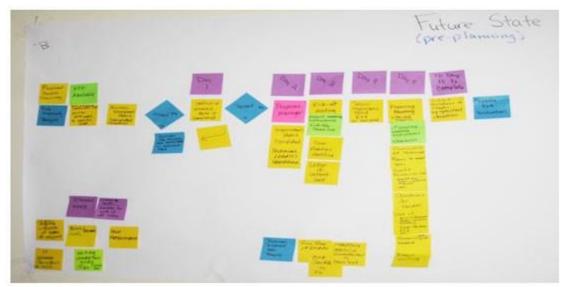
Value Stream Mapping

"Value stream mapping is a lean manufacturing technique used to analyze the flow of materials and information currently required to bring a product or service to a consumer. Lean principles are built on a five-step thought process for guiding the implementation of effective techniques.

- 1. Specify value from the standpoint of the end customer by product family.
- 2. Identify all the steps in the value stream for each product family, eliminating whenever possible those steps that do not create value.
- 3. Make the value-creating steps occur in tight sequence so the product will flow smoothly toward the customer.
- 4. As flow is introduced, let customers pull value from the next upstream activity.
- As value is specified, value streams are identified, wasted steps are removed, and flow and pull are introduced, begin the process again and continue it until a state of perfection is reached in which perfect value is created with no waste.

The goal is to depict flow of information throughout all value-adding processes required to provide a service to the individual. Value stream maps document each step of the process to understand both value-adding and non-value-adding (waste) processes and steps. A current state map is initially produced, which becomes the baseline for improvement. Then, a future state map is produced, documenting a more streamlined and valuable approach to the process with a focus on eliminating waste and increasing efficiencies."





5-Whys

"The '5 Whys' is a technique used in the Analyze phase of the Six Sigma methodology. This Six Sigma method does not involve a statistical hypothesis and in many cases can be completed without a data collection plan. This technique can help to identify the root cause of a problem, determine the relationship between different root causes of a problem, and is simple and easy to complete without statistical analysis.

To complete the '5 Whys', start with writing down the specific problem. Then, ask why the problem happens and record the answer. If the answer provided does not directly identify the root cause of your initial problem, ask 'Why' again, and record the answer. Continue this process until the team agrees the problem's root cause has been identified. This process is often complete within five cycles, but can take more or less, depending on the problem.

Example:

Q: Why are individuals in need of support not diverted to community based settings?

A: Because they do not understand or know about the NWD system.

Q: Why don't they know or understand the NWD system?

A: Because they have never received information about where to go for information.

Q: Why have they not received information?

A: Because information about NWD system is not widespread.

Q: Why do hospitals not see alternatives to institutional placement?

A: Because they do not trust the community system.

Q: Why do they not fully trust the community system?

A: Because they are not aware of what is available. A lack of knowledge leads to a lack of trust.

By asking a sequence of 'Whys', one can deduce the root cause of why some individuals are not provided community options. This exercise leads to potential solutions such as increased training of hospital staff on available community services and/or connection to person centered counselors.