

What's left to do:

- Decide whether ICAPS warrants further investment of resources
- If so, develop formal organization for continuance of ICAPS development
- Define what is to be developed, by whom, by when and for how much
- Refine existing product in LIHEAP and Family Development programs, addressing remaining issues of access, portability, interfacing with companion systems, reporting options, etc.
- Identify potential sources of funding for further ICAPS development
- Prospect potential customers for current ICAPS version

Evaluation of Final Management Survey Responses

For each topic area, a summary of the general perception of the evaluator based on the survey participant's responses is given. It must be noted here that, although return dates for the surveys were pushed back several times, the final survey response from both management and staff was extremely sparse. Less than one third of those surveyed responded, including only one of the three CAP Executive Directors. One agency returned no surveys. The Interim Project Report responses, as detailed in that report, should be reviewed before reading this final report. The information will not be repeated verbatim here. However, though it is now one and one half years later, the general ideas represented in survey responses at that time, were repeated by respondents for this final report.

Project Partner Relations:

- Not only has the cooperation among the three CAP agencies and Maine DoL been exemplary for this project, it has demonstrated the feasibility of further collaboration in the continuation of this project beyond the grant period
- Regular communication around ICAPS has fostered improved inter-agency communication across the board relating to other programs as well
- Consistent Executive Director involvement in the project has enabled decisions to be made in a timely and efficient manner
- Involving the programming vendor as a partner with a seat at Policy Board meetings has positively impacted project development and progress

Validity of Original Concept:

- While the vision of how a central intake system could impact agency operations has been validated by progress so far on ICAPS, the reality of how much time and resource is needed to bring that vision to fruition has underscored how difficult fundamental change can be to implement
- It turns out that the walls of the "silos" encasing each agency program are much thicker than anyone anticipated and the political difficulty of passing information between programs has overshadowed the project's technical ability to do so
- In this age of rapid information systems advancement, to have the idea of ICAPS, spawned so many years ago, continue to be relevant is a tribute to the foresight of its originating agency
- As one response put it, the concept has been "fully validated, if not yet fully realized"

Rate of Development Progress:

- From the viewpoint of the LIHEAP program (the largest program at each agency), for whom ICAPS has been a reality, the system is a resounding success, offering comprehensive features which have been developed with constant LIHEAP input
- For the other "early-adopter" program, Family Development, there is less enthusiasm for the system's ability to actually meet program objectives due to major features still unavailable
- Other programs originally intended to be included (Head Start, WIC, Career Centers, Health Services) have yet to begin to receive attention
- For senior management, there is a large distance between what is now functional compared to what was originally planned to be operational at the end of the grant period although the rate of progress has improved over the last year and one half

Staff Reaction:

- For LIHEAP staff members directly involved in daily use and development, ICAPS is now fully functional and indispensable – "extremely pleased"
- For Family Development staff, limited use due to limited functionality has muted enthusiasm
- Other staff members, initially anticipating ICAPS would serve their programs, has not been exposed enough to form opinions

Management Reaction:

- The majority of management responses indicate a wait and see attitude toward ICAPS with the exception of LIHEAP management who are very satisfied
- The lead agency reports overall management satisfaction

Consumer Reaction:

- Consumer exposure to ICAPS remains very limited, making any assessment outside of LIHEAP premature
- While LIHEAP customers do not interact directly with ICAPS, they have experienced decreased wait times and application errors

Most Prominent Impact:

- Increased communication within agencies and between programs/agencies and between private non-profits and state
- Making change an acceptable factor in departmental planning/operation
- Complete revision of LIHEAP application processing

Most Prominent Shortcoming:

- Length of time between introduction of concept and realization of application within agency departments
- Amount of money and time expended to mount just one successful program's adoption of ICAPS (LIHEAP)
- Premature introduction of ICAPS into Family Development prior to functional completion
- Lack of linkage to other major programs (OSOS, WIC, Ahlers, etc.) where interface would eliminate double data entry
- Inability to load ICAPS on portable PC's for field use or to connect to agency servers from remote locations

Product Expansion/Reduction

- Primary focus of comments for this topic revolved around finding new sources of funding to complete development of ICAPS to handle remaining already existing internal programs
- Some mention of interest of outside parties for other applications

Evaluation of Final Staff Survey Responses

The subject areas survey respondents addressed for this final report are the same as those that were answered in the ICAPS Preliminary Project Evaluation Report three years ago at the project's inception. Each area measures ICAPS impact. Small survey return has resulted in abbreviated entries for each item.

Change in Process Used to Track Clients

1. Tracking Clients

- Clear visuals with easy to follow sequence
- Takes guesswork out of update intervals

2. Reports

- Monthly data reports produced
- Client benefits easily tracked
- Information is more standardized

3. Client Information

- Info must be written in the field then entered in the office
- Easy to update client specifics
- Info available from other programs

4. Time Spent on Tracking

- Easy to scan client info
- Time has been cut in half for this activity

Change in Overall Staff Efficiency

1. Incoming Referral Process

- N/A

2. Outgoing Referral Process

- N/A

3. Paperwork Filing

- Easier, less bulk
- Being able to view client data online reduces need to use paper

4. Information Sharing

- At CED, client info available through ICAPS for most departments

5. Forms / Software

- Forms have been updated and are clearer, more concise
- Access is available to general information gathered by various programs

6. Client Consent Process

- N/A

Change in Staff Ability to Affect System Changes

1. Ability to suggest system change

- Formal process instituted with good communication both ways
- Harder to accomplish now that several agencies are involved in process
- Intake staff's input now more readily accepted

2. Changes implemented

- As promptly as using a committee will allow
- Quickly if only inhouse affected, longer if other agencies affected

3. Procedure for Making Changes

- Requests go before board regularly so process works
- Due to other agencies being involved, sometimes makes it harder but that's understandable

Change in Level of Perceived Confidentiality and Security

1. Client Confidentiality

- Issue at beginning, but with problems in system being resolved, concern has subsided
- Only staff that need to know have access to client information
- Client casenotes have a high security setting which is good protection

2. Information Security

- The ability to set security levels improves security

3. Data Storage

- Data stored easily but only available from within the office
- So secure sometimes even staff with authorization can't access data

Increased Accessibility to Client / Program Information

1. Need for Agency Information

- N/A

2. Need for Program Information

- N/A

3. Methods to Gather Information

- Forms have improved by being updated and coordinated
- Agency wide release of information form now in use
- General information and program specific information gathering screens are separate helping to keep types of information separate

4. Report Requirements

- ICAPS not used for Family Development reporting
- Monthly LIHEAP report only available through Administration

Change in Staff and Client Satisfaction with Intake / Tracking System

1. Satisfaction with Intake / Tracking – Staff

- Very satisfied with sharing of information between Family Development and LIHEAP in the office, needs to be available in the field as well
- Much less time needed to serve LIHEAP clients
- Not yet as user friendly and reliable as needed

2. Satisfaction with Intake / Tracking - Client

- No effect yet on Family Development but LIHEAP processing much quicker
- Clients like not having to answer questions over and over
- Having previous years' info available makes application completion less stress for both client and staff member

Conclusions

At the onset of the grant, at a planning retreat, all partners identified the proposed scope of the project. That scope included providing a central intake function for most of the major programs in operation at each agency through the creation of ICAPS. The design and functionality of the software required ease of use, comprehensive features and extensive reporting capacity.

At the end of the project, the most affected program for each agency is LIHEAP, where ICAPS has accomplished much of its intended purpose. It is also in use to a lesser degree in the Family Development program at CED and WMCA. Other programs have yet to be adequately addressed to allow much ICAPS involvement. Cost and time overruns in the development of the system have not allowed the original scope to be achieved. What has been achieved, however, is highly praised by the LIHEAP staff who have replaced manual and computerized systems with ICAPS. Exemplary cooperation with the Maine State Housing Authority has enabled ICAPS to become the comprehensive tool this program needed.

This grant can demonstrate verifiable success in the vertical program to which ICAPS has been deployed. Should further funding be identified, the core development to-date will serve as a model for other programs.

Appendix

ICAPS Management Survey for Final Report

Explain how ICAPS has affected your agency/program in each area:

Project Partner Relations: An extremely well integrated program. In my experience with the other CAP agencies involved in ICAPS, all appear quite satisfied and comfortable with the program.

Validity of Original Concept: I was not really involved in the original meetings and plans for the program, except in the housing department's "FIX-ME" program area.

Rate of Development Progress: In my experience thru the FIX ME programming, and now with the LIHEAP intake process, I would consider the development and continued maintenance & updating of ICAPS to be excellent!

Staff Reaction: Extremely pleased. The program allows staff to serve our clients more efficiently and much quicker!

Management Reaction: The benefits in serving our clients and being able to compare information and link them with other programs is a great asset to CED.

Consumer Reaction: Unknown

Most Prominent Impact: TIME MANAGEMENT! Saves a great deal of time by not having to manually do all applications (LIHEAP) and other documents.

Most Prominent Shortcoming: None really...Any problems that have arisen are always resolved in as timely a manner as they can be.

Future Development/Change/Spin-Offs: Am hoping that our other Housing programs can be integrated into the ICAPS system as FIX-ME was. Saves a great deal of time and less errors than having to manually complete all of the worksheets and closing documents involved in our loan programs.

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ICAPS Management Survey for Final Report

Explain how ICAPS has affected your agency/program in each area:

Project Partner Relations:

Relationships with partners have been cordial and constructive. The monthly meetings of the Policy Board have kept each agency focused on the project, and they have provided a forum for the exchange of ideas about and experience with the ICAPS system that has been invaluable. It has been important that DOL and CAP agency directors have attended these meetings regularly. This meant that substantive decisions about the program could be made immediately; the participation of senior staff responsible for the coordination of ICAPS implementation and program delivery meant that questions and problems from the field were heard by the directors and addressed at these meetings. User and Design Group meetings, involving DOL programmers and CAP managers and line staff, were held on a regular basis, and these were extremely important in addressing nuts-and-bolts issues of ICAPS performance and program design, and in helping to establish priorities for ICAPS development and maintenance. Because participants in these meetings came to know each other well, they were able to consult and work together over the phone whenever the need arose, allowing CAP staff and DOL programmers to fix a bug or make a necessary adjustment quickly. The design of the ICAPS program benefited from the commitment of agency directors and staff to share perspectives and experiences, and to develop and work towards common goals. No single agency could have done this by itself. The spirit—and mechanisms—of cooperation are well-established for future ICAPS development.

Validity of Original Concept:

I think the original conception of ICAPS is fully validated, if not yet fully realized. As more programs are added to ICAPS (e.g., WIC, Home Repair, Head Start) it will make more sense to move to a central intake service and staffing model.

Rate of Development Progress:

We underestimated how long programming development would take and how much it would cost. The development of the LIHEAP module is the major programming achievement. It is a complex program; it does everything: intake, eligibility certification, vendor identification, check and voucher writing, ledger maintenance, and reporting to the funding source. After two years of development and modification it works very well. Since this is by far the largest of any of the CAPs' programs, this is an important success. The Family

Development program was declared finished by OIP prematurely, and because there were many bugs this module was not initially used as much as we had anticipated. These problems have been or are being addressed, and case managers are using ICAPS more consistently. The reporting capabilities of ICAPS in general and Family Development in particular have not been well-developed, and this is another reason why FD has not been used as much as we had anticipated. This is now being addressed by CAP and OIP staff. But this all takes programming time and money.

Staff Reaction:

LIHEAP staff (both intake workers and finance office) have been generally very pleased with ICAPS; luckily, since they use the program for everything that they do. Case managers using the Family Development module were very frustrated at first with a number of program bugs, and they were reluctant to persevere in using ICAPS, but they have worked hard with programmers to correct these problems, and they now seem to find the program useful.

Management Reaction:

Managers of the programs which use ICAPS have been pleased with the program. They have played a vital role in working with staff to design the modules, address problems, and improve the operation of ICAPS. Managers, in particular, are eager to have ICAPS reporting capabilities developed. The strong support for ICAPS of the executive directors in all three CAP agencies has been tremendously important.

Consumer Reaction:

Agency clients have not really been aware of ICAPS, as such. However, LIHEAP clients will have experienced shorter application appointments, because much information from the previous year will have been brought forward into the new application form, with only changes needed to be made.

Most Prominent Impact:

The largest impact of ICAPS has been on the LIHEAP program (and the numerous programs that depend on LIHEAP eligibility), which is also each agency's biggest program. ICAPS replaced an outdated program where applications were handwritten and later entered into a computer. The funding source, MSHA, tells us that ICAPS provides the best reports in the state. The greatly increased interaction and cooperation among the three CAPs in developing policies and discussing problems related to ICAPS—but also concerning the CAPs more generally—has been important.

Most Prominent Shortcoming:

Most prominent shortcomings include the lack of developed program reporting (apart from LIHEAP), the inability to really link ICAPS with the CareerCenter OSOS system, and delays in developing modules for additional programs. Two

causes account for these shortcomings: the difficulty of getting bureaucracies to agree whether and how to share information (e.g., CareerCenter, WIC); the length of time and consequent expense involved in developing customized programming for each new component. I think we also underestimated how much programming time was involved in simply maintaining and adjusting programs once development was "completed".

Future Development/Change/Spin-Offs:

New modules (for WIC, Home Repair Network, and perhaps Head Start) need to be developed, and increased inter-connectivity between ICAPS and CareerCenter OSOS needs to be achieved. ICAPS reporting capabilities need to be improved. For all this, new money has to be found. There is a good likelihood that with the development of a Home Repair Network program, all the other CAPs in the state would use that ICAPS module. Other agencies (e.g., ABCD, the Boston CAP; the Massachusetts WIC Program) have expressed interest in ICAPS, so there is a possibility of selling or licensing it on a wider scale, if this is not technically and economically feasible.

ICAPS Management Survey for Final Report

Explain how ICAPS has affected your agency/program in each area:

Project Partner Relations:

This has been the most positive aspect of the project in that we have developed strong collaborative relationships with key staff at ACAP and Western Maine Community Action. These relationships were really forged when we sat together as three agencies to develop common language, tools, understandings and processes to support ICAPS at each of our agencies. Consequently, no agency feels as though it is operating in a vacuum, and each can rely on the other for feedback and assistance.

Validity of Original Concept:

My opinion about the original concept has not changed from before. The original concept, as I understand it, was based upon the belief that an agency of our size and program complexity would benefit from a system that enabled us to develop a centralized intake. Centralized intake would have advantages for both the agency and for individuals and families served by our programs. The agency would be able to track and identify who was utilizing services more easily, refer people across departments more easily, and retrieve information about services and programs more easily. This would enable the agency to petition for additional funds to support its programs. Clients would benefit from streamlined access to services, not having to go through several application processes and having easy access to information about all the services available.

Rate of Development Progress:

The rate of development progress has improved during the course of the project. Initially, we were slowed down by a new system that had lots of bugs and problems, and these problems made it difficult for line staff to utilize the system on a regular basis. In the past 1-2 years, that has improved as we organized small user groups for the different aspects of ICAPS. These groups were able to identify problems more specifically and communicate the problems to OIP for revision. OIP in turn was able to make significant corrections to the

system, making it more user friendly for line staff. This was especially true for the LIHEAP Program.

Staff Reaction:

I believe staff would echo my response to the previous question, with some qualification. LIHEAP staff is very pleased with the way the program is set up in ICAPS. It has made their work so much easier and more manageable. Family Development staff would say that there is vast improvement in the system, but that there are still glitches which deter them from using ICAPS as much as they would like. They would also say that not being able to use the system out in the field is a huge barrier to effective implementation.

Management Reaction:

Overall management is pleased with the way ICAPS has developed at CED, though we would still like to see a Central Intake approach to services accompany the ICAPS system.

Consumer Reaction:

Consumers, especially those in LIHEAP, seem very pleased with the system, though it does not impact their basic receipt of services. It has made the process of receiving those services easier and less time consuming.

Most Prominent Impact:

The established collaborative relationships between agencies.

Most Prominent Shortcoming:

The system problems that took a long time to resolve. One of those is the development of reports that can be generated from ICAPS. Creating these reports is proving to be a large challenge.

Future Development/Change/Spin-Offs:

This is really the venue of Executive Directors.

ICAPS Management Survey for Final Report

Explain how ICAPS has affected your agency/program in each area:

Project Partner Relations: The policy Board experience-4 reps from each agency –meeting once a month- was a great model to learn from. The four partners have learned a great deal from each other and are still learning. The project has not turned out the way we planned – yet the trust level and communication linkages have helped each other understand the variety of perspectives –and helped us move from blame to next steps very quickly.

Validity of Original Concept:

The concept is Very Valid-yet harder to accomplish than anticipated. Our system of silos is still very entrenched from the funding sources all the way down to the direct line staff. Change takes time-lots of it. (SAY-did the medical community give up on their vision that you worked on four years ago?)

Rate of Development Progress:

Seems slow-yet we have come a long way-LIHEAP is up and running-and Family development is at operational without report writing capacity yet. We never anticipated it would take so long. Involving staff in subcommittee work has been helpful in helping us to understand the magnitude of the problem and resolve to everyone's best interest.

Staff Reaction:

The LIHEAP staff love ICAPS. The other staff has not been exposed to it enough to know and they do not need to use it so-They don't

Management Reaction:

"Great theory-but it doesn't apply to me" Yet they have heard about the concept enough so when they are called to support it I believe they will

Consumer Reaction:

I do not know-I would doubt with LIHEAP consumers would know the difference between what we used in the past and today

Most Prominent Impact:

The continual pressure to make this happen because we all believe it is in the best interest of the customer. Working as a larger group we have been able to sustain the movement internally and externally. When one agency is over whelmed with other work another agency picks up the torch. When one leader in one agency gets tired of carrying the torch of why we are going in this direction another leader picks up the torch. Gosh this would be a hard row to hoe alone. This will take years –yet it is worth the investment

Most Prominent Shortcoming: The inability to accurately project the time and money it costs to develop a specific product that is accurate and reflective of the need. The partnership approach has its benefits...but this is not one of them.

The reality is DOL works on time and materials concept. They are great to work with but are not as vested as the CAPS in a having a finished product that works-without continued income investment down the road. A strong benefit is that DOL brings a sense of vision to the project that would never come from a consultant or some one not wired into State Government. Yet-The tension of not knowing the full cost and sustaining the communication level that you need to have to maintain the trust- is tiring.

Future Development/Change/Spin-Offs: The partnership needs new partners and new income streams to be sustainable. The best partnership is the other CAP agencies in Maine. We are working on such an investment but it will take time and trust building to make it happen. Where can we find investors now that will take a chance and help to make it happen? Will we have a governor that says-“This should happen-I want to see models of how it can happen” .Will he hire Commissioners that say this should happen and have the tenacity to overcome the entrenchment and turfism that is inherent in every institution to protect their own systems and data as if they were State secrets . Wouldn't it be great if we enlisted 12 more passionate team members with money and a sense of vision?
Thanks for doing the evaluation –Sorry that I was not prompter in my response.

ICAPS Management Survey for Final Report

Explain how ICAPS has affected your agency/program in each area:

Project Partner Relations:

The relationship has continued to strengthen through the development of ICAPS. It is the one thing that has kept the project going and progress made with development.

Validity of Original Concept:

The concept is valid. The reality of change it seems is always underestimated. Getting data from program specific software applications to ICAPS may not be possible in all cases. If that's so double entry of data would need to take place and that doesn't work very well.

Rate of Development Progress:

It has been much slower than I thought. The development of the central database wasn't really as far along as I thought. We are now refining that piece while still making final modifications to the LIHEAP application now in the second year of use. There was a personnel change at DOL that may have complicated the issue. It seems to me that the LIHEAP program was not fully understood in the beginning and development time greater than anticipated.

Staff Reaction:

Staff that are using the LIHEAP portion are extremely pleased with ICAPS. They were not interested in changing from the database they had used for a number of years to ICAPS but now would not want to return to the other product. They also see the possibilities for using ICAPS in other ways. Other staff sees ICAPS, as more work because they already have software applications that must be used for their work. At the Career Centers they use OSOS and to keep the same data in that as well as ICAPS would cause double entry. Health Services uses Ahlers and double entry would again need to occur. Ahlers is specific to health care with procedures and terms that are

essential to reporting requirements. WICA also has a database that they must maintain to meet program requirements and double entry (at this time) would need to occur.

Management Reaction:

The struggle will be to get staff to use ICAPS and see the benefits. At the present time the central piece of the program (Family Development) is not being utilized because the program is experiencing a design change.

Consumer Reaction:

Not fully implemented so customers don't see the differences we hope to accomplish.

Most Prominent Impact:

ICAPS is getting some attention from other organizations. It is an application that fulfills the needs of CAPs and other similar organizations. It has generated a great deal of cooperation between a state department and non-profit organizations. It has opened the door for other state programs to work more closely and have conversations regarding the sharing of data. If data with other state agencies is shared it could streamline the delivery of services and generate direct benefits to customers much faster. An example would be to get income verification directly from the state instead of a third party.

Most Prominent Shortcoming:

Taking too long to get incorporated into agencies. ICAPS was the end all program 5 or so years ago and we are using it for LIHEAP and a little with the Samoli population for conducting Security Assessments.

Future Development/Change/Spin-Offs:

Some of the change is internal and not so much about ICAPS. We are moving to get our information and referral department using

ICAPS on a regular basis in order to collect data on the kinds of issues customers are having. Family Development integration needs to have clear direction and expectations in terms of the pieces of information being collected and recorded for each family.

ICAPS Evaluation Questions for Final Report

Measurable outcome 1:

Change in process used to track clients

How has ICAPS impacted the following areas:

1. Tracking client progress through your program.
This would be easier if information was updated on a regular basis.
2. Reports generated to track clients' progress.
N/A to me.
3. Specific staff members who update client information.
We should hire someone to do this, but we haven't. It is therefore tedious and "double duty" to those of us who work in the field. As our laptops do not work in the field, we have to do paperwork and then later input it into ICAPS.
4. Percentage of case time spent on tracking.
N/A. I do not use ICAPS for tracking. Although, if not so time consuming to input data, it would work well to track clients.

Measurable Outcome 2:

Change in overall staff efficiency

How has ICAPS impacted the following areas:

1. The process by which referrals come into your program.
N/A. We do not use ICAPS for referrals.
2. How you give referrals to other programs.
N/A. Not all programs use ICAPS.
3. The filing system you use for program paperwork.
Basically we use a paper copy of the ICAPS program to take information down, then later input it into ICAPS. Some forms have changed due to this, but not much overall.
4. How often you send or fax client information to other programs.
N/A. Doesn't have an affect on this for me.
5. The forms or other software used to gather client information.
Forms have been adjusted for easier gathering of info
6. How consent is gained from clients to receive program services.
No change.

Measurable Outcome 3:

Change in staff ability to affect system changes

How has ICAPS impacted the following areas:

1. If a change needs to be made to ICAPS, your ability to suggest that change.
I have been able to suggest changes as needed
2. Once the suggestion is made, the change is considered and done promptly.
For the most part this happens, unless others feel the suggestion is not a good one.
3. The procedure for making changes to the system.

The procedure works as a board of members is responsible for deciding what changes will be made and when.

Measurable Outcome 4:

Change in level of perceived confidentiality and security

How has ICAPS impacted the following areas:

1. Issues regarding client information confidentiality.
This was a definite issue in the beginning, but as the system is improved, this is less of an issue with staff.
2. Issues with client information security.
This is not an issue with my clients and my direct supervisor is the only one who can access my client's information
3. The way client information is stored.
ICAPS works well to store information, but it is not easily accessible to me as I have to be in the office to use it.

Measurable Outcome 5:

Increased accessibility to client/program information

How has ICAPS impacted the following areas:

1. Your need for agency-wide client or program information.
It has greatly improved the LIHEAP program as far as efficiency for both staff and clients.
2. Your need for program specific client or program information
Improved ability to track clients for LIHEAP, also keeps record of Family Development files.
4. The methods used to gather that information
Improved forms, Agency wide release of information policy was generated.
5. The types of reports you are required to generate and how often
Quarterly reports due every 3 months, I just haven't used ICAPS in my reporting yet. We need to work on keeping client files up to date in the family development area.

Measurable Outcome 6:

Change in staff and client satisfaction with intake/tracking system.

Please write a brief paragraph about how using ICAPS has affected your and your clients satisfaction with the agency/program intake/tracking system. List the most prominent reasons why you feel as you do.

1. Are you more or less satisfied with client intake and tracking?
**I am very satisfied with the way ICAPS works with the LIHEAP program. I have been able to efficiently serve my Family Development Clients in conjunction with other staff members, due to the fact that information is already in computer and paperwork is easily generated.
However, I am less satisfied with ICAPS ability to go into the field and work with the case managers in client's homes.**
2. Are your clients more or less satisfied with these procedures?

From my experience, clients are more satisfied with these procedures. Although they still have to bring in their proof to be seen, ICAPS has significantly lowered the amount of time spent on LIHEAP appts. ICAPS has not otherwise had an effect on Family Development case mangement.

Name: Sherry A. Maher Agency: Coastal Economic Development Program: Family Development

ICAPS Evaluation Questions for Final Report

Measurable Outcome 1:

Change in process used to track clients

How has ICAPS impacted the following areas:

1. Tracking client progress through your program

N/A FOR LIHEAP

2. Reports generated to track clients' progress

N/A FOR LIHEAP

3. Specific staff members who update client information
BEING ABLE TO GET THE MOST CURRENT INFORMATION FROM OTHER PROGRAMS WHO HAVE SEEN THE CLIENTS SINCE THEIR LAST LIHEAP APPLICATION IS VERY HELPFUL.

4. Percentage of case time spent on tracking.
MY TIME SPENT TRACKING CLIENTS APPLICATIONS THROUGH INTAKE TO CERTIFICATION HAS BEEN CUT AT LEAST IN HALF.

Measurable Outcome 2:

Change in overall staff efficiency

How has ICAPS impacted the following areas:

1. The process by which referrals come into your program
N/A TO LIHEAP AT THIS TIME.

2. How you give referrals to other programs
THE NEW REFERRAL FORM WE ARE CURRENTLY USING IS HELPFUL BUT IT HAS NOT BEEN PUT ON THE ICAPS SYSTEM TO DATE.

3. The filing system you use for program paperwork
WE STILL KEEP PAPER FILES BUT USING ICAPS TO VIEW APPLICATIONS IS VERY HELPFUL. WE CAN USUALLY GET THE INFORMATION NEEDED FROM THE SYSTEM AND DO NOT HAVE TO GO TO THE PAPER FILE.

4. How often you send or fax client information to other programs
N/A FOR LIHEAP AT THIS TIME.

5. The forms or other software used to gather client information
WE HAVE DEVELOPED MANY NEW FORMS SINCE THE DEVELOPMENT OF ICAPS WHICH HAS GREATLY IMPROVED THE WAY WE GATHER AND STORE IMPORTANT CLIENT INFORMATION. WE NOW HAVE ACCESS TO AT LEAST THE GENERAL INFORMATION EACH VERTICAL PROGRAM GATHERS.

6. How consent is gained from clients to receive program services
THE NEW CED AGENCY RELEASE HAS BEEN VERY HELPFUL IN HELPING CLIENTS UNDERSTAND CED AS A WHOLE AGENCY INSTEAD OF SEVERAL DIFFERENT PROGRAMS.

Measurable Outcome 3:

Change in staff ability to affect system changes

How has ICAPS impacted the following areas:

1. If a change needs to be made to ICAPS or your present intake system, your ability to suggest that change
I FEEL THE INPUT OF THE INTAKE STAFF IS ACCEPTING MORE READILY SINCE THE ICAPS PROGRAM HAS BEEN IMPLEMENTED.

2. Once the suggestion is made, is the change considered and done promptly
IF THE CHANGE DOES NOT EFFECT THE OTHER PARTNERING CAP AGENCIES IT IS IMPLEMENTED VERY QUICKLY. IF IT MAY EFFECT THEM IT MUST BE BROUGHT TO THE PROGRAMER AND USER GROUP FIRST.

3. The procedure for making changes to the system
DUE TO THE PARTNERING CAPS IT IS SOMETIMES HARDER TO MAKE CHANGES BUT UNDERSTANDABLE.

Measurable Outcome 4:

Change in level of perceived confidentiality and security

How has ICAPS impacted the following areas:

1. Issues regarding client information confidentiality
CLIENTS CASENOTES ARE HELD AT A HIGHER SECURITY LEVEL THAN
GENERAL INFORMATION WHICH IS A GOOD SECURITY MEASURE DUE TO
THE LEVEL OF PERSONAL INFORMATION OBTAINED BY CASEMANAGERS.

2. Issues with client information security
AGAIN THE ABILITY TO SET SECURITY LEVELS WAS A GREAT IDEA.

3. The way client information is stored
HAVING ACCESS TO OUR CLIENTS INFORMATION AT OUR FINGERTIPS
HAS BEEN A GREAT IMPROVEMENT FROM THE PAPER FILES OF THE
PAST.

Measurable Outcome 5:

Increased accessibility to client/program information

How has ICAPS impacted the following areas:

1. Your need for agency-wide client or program information
THE ABILITY TO VIEW WHICH PROGRAMS A CLIENT IS ALREADY
RECEIVING AND WHICH LIFE AREAS MAY STILL NEED WORK WILL GIVE
THE INTAKE STAFF BETTER ABILITY TO PROPERLY REFER CLIENTS AT
THEIR FIRST VISIT TO CED INSTEAD OF REPEAT VISITS.

2. Your need for program specific client or program information
THE ABILITY TO HAVE GENERAL INFORMATION ON EACH CLIENT READ
BACK TO THE VERTICAL PROGRAMS BUT HAVE PROGRAM SPECIFIC
INFORMATION STAY WITH THAT PROGRAM HELPS THE STAFF TO NOT
HAVE TO WEED THROUGH ALL THE INFORMATION.

3. The methods used to gather that information
VERTICAL PROGRAMS AND A GENERAL INTAKE SCREEN ARE HELPFUL
TO KEEP THE GENERAL INFORMATION AND PROGRAM SPECIF
INFORMATION SEPARATE FROM EACH OTHER.

4. The types of reports are you responsible to generate and how often
I AM RESPONSIBLE FOR THE MONTHLY COMMUNITY SERVICES LIHEAP
REPORT. I DO NOT HAVE ACCESS TO THE INFORMATION NEEDED TO DO
THAT REPORT WITHOUT GOING TO ADMIN STAFF THOUGH WHICH IS
TIME CONSUMING.

Measurable Outcome 6:

Change in staff and client satisfaction with intake/tracking system

Please write a brief paragraph about how using ICAPS has affected your and your clients satisfaction with the agency/program intake/tracking system. List the most prominent reasons why you feel as you do.

1. Are you more or less satisfied with client intake and tracking?

I AM MUCH MORE SATISFIED WITH THE WHOLE PROCESS OF TAKING AND TRACKING THE CLIENT FILES WE DEAL WITH ON A DAY TO DAY BASIS. THE ABILITY TO HAVE ANY NEEDED INFORMATION AT OUR FINGERTIPS HAS DECREASED TIME SPENT TRACKING DOWN CERTIFIED APPLICATIONS IN HALF. HAVING VENDOR PHONE NUMBERS, CMP ACCT #'S, THE OUTCOME OF LIAP APPLICATIONS AND WHO WAS THE INTAKE STAFF RESPONSIBLE FOR THE FILE ON THE SCREEN HAS REMOVED A LOT OF THE FRUSTRATIONS OF THE LIHEAP PROGRAM. WE KNOW HAVE THE ABILITY TO SEE WHO WAS IN THE HOUSE, WHO HAD AND WHAT KIND OF INCOME WAS REPORTED LAST YEAR WHICH HELPS KEEP THE APPLICATIONS CONSISTANT FROM YEAR TO YEAR. WE DEAL WITH MANY ELDERLY AND MENTALLY CHALLANGED PEOPLE IN OUR PROGRAMS WHICH CAN KEEP CONSISTANCY A CHALLENGE.

2. Are your clients more or less satisfied with these processes?

OUR CLIENTS FEEL THE APPLICATIONS GO MUCH SMOOTHER WITH THE ICAPS SYSTEM. WE HAVE ALL OF THE PREVIOUS YEARS INFORMATION AVAILABLE WITHOUT HAVING TO RESEARCH THE PAPER FILES. THEY FEEL THE APPOINTMENTS ARE QUICKER AND LESS STRESSFUL THAN IN THE PAST.

Name: LYNN CREAMER Agency: CED Program: LIHEAP

ICAPS Evaluation Questions for Final Report

Measurable Outcome 1:

Change in process used to track clients

How has ICAPS impacted the following areas:

1. Tracking client progress through your program – **Very beneficial**
2. Reports generated to track clients' progress – **With LIHEAP the reports from fFiscal are instrumental in completely monthly data reports for LIHEAP. Also in checking information on client benefits.**
3. Specific staff members who update client information – **In my department, it would be the intake workers, case managers, certifier and Housing & Energy program Coordinator (myself)**
4. Percentage of case time spent on tracking **UNKNOWN**

Measurable Outcome 2:

Change in overall staff efficiency

How has ICAPS impacted the following areas:

1. The process by which referrals come into your program **On a daily basis, intake staff can check on a client's status, benefits, other needs, etc as required**
2. How you give referrals to other programs **Unknown**
3. The filing system you use for program paperwork **Although some paper copies are still necessary, it saves both time and space to be able to check a client's past record thru ICAPS**

4. How often you send or fax client information to other programs –
Within CED, client information is accessible thru ICAPS for most departments

5. The forms or other software used to gather client information **CED has an inhouse client referral form**

6. How consent is gained from clients to receive program services –
Thru the above along with several other CED inhouse releases

Measurable Outcome 3:

Change in staff ability to affect system changes

How has ICAPS impacted the following areas:

1. If a change needs to be made to ICAPS or your present intake system, your ability to suggest that change **EXCELLENT – Our two main folks Elaine Trufant(fiscal) and Charles Kent (System administrator) work very closely with the programmer. Keeps all staff informed of problems, changes, etc . In those instances when a “suggested” change cannot occur, they always take the time to explain why they cannot be done.**

2. Once the suggestion is made, is the change considered and done promptly **YES!!!**

3. The procedure for making changes to the system **Same as Number 1**

Measurable Outcome 4:

Change in level of perceived confidentiality and security

How has ICAPS impacted the following areas:

1. Issues regarding client information confidentiality – **The set-up of the system protects clients confidentiality by only making certain information accessible to only that staff that “need to know”.**
2. Issues with client information security – **None that I am aware of**
3. The way client information is stored – **Being able to track client history is very beneficial to the staff and client alike**

Measurable Outcome 5:

Increased accessibility to client/program information

How has ICAPS impacted the following areas:

1. Your need for agency-wide client or program information – **Always available**
2. Your need for program specific client or program information **SAME**
3. The methods used to gather that information – **More accurate and quicker**
4. The types of reports are you responsible to generate and how often

Not really applicable at this time

Measurable Outcome 6:

Change in staff and client satisfaction with intake/tracking system

Please write a brief paragraph about how using ICAPS has affected your and your clients satisfaction with the agency/program intake/tracking system. List the most prominent reasons why you feel as you do.

1. Are you more or less satisfied with client intake and tracking?
Very satisfied....With the LIHEAP process, our clients are served much quicker than the old days when everything was done manually.

2. Are your clients more or less satisfied with these processes? **For the most part, I believe our clients are more comfortable not having to constantly answer the same questions over and over and over!**

Name: Carole D. Thomas CED

ICAPS Evaluation Questions for Final Report

Measurable Outcome 1:

Change in process used to track clients

How has ICAPS impacted the following areas:

1. Tracking client progress through your program
Allows for clear visuals in an easy to follow sequence
Takes the guesswork out of update intervals
2. Reports generated to track clients' progress
Reports are cleaner with information more standardized
3. Specific staff members who update client information
Easy to update specifics
4. Percentage of case time spent on tracking
Minimizes as easy to scan

Measurable Outcome 2:

Change in overall staff efficiency

How has ICAPS impacted the following areas:

1. The process by which referrals come into your program
Has not affected to this date.
2. How you give referrals to other programs
Has not affected to this date
3. The filing system you use for program paperwork
Makes it much easier and cleaner, reduces bulk
4. How often you send or fax client information to other programs
Not affected to this date
5. The forms or other software used to gather client information
Forms are cleaner, more concise and easier to use
6. How consent is gained from clients to receive program services

Has not affected how consent is gained but has made it easier to scan consents obtained

Measurable Outcome 3:

Change in staff ability to affect system changes

How has ICAPS impacted the following areas:

1. If a change needs to be made to ICAPS or your present intake system, your ability to suggest that change
We have always had the opportunity to suggest changes within our individual programs. ICAPS actually makes it harder to accomplish the changes because it now involves several agencies rather than our individual group
2. Once the suggestion is made, is the change considered and done promptly
As promptly as working by committee ever allows
3. The procedure for making changes to the system
We suggest the changes to our supervisor and she puts them forward as quickly as possible

Measurable Outcome 4:

Change in level of perceived confidentiality and security

How has ICAPS impacted the following areas:

1. Issues regarding client information confidentiality
Information is shared on an as-needed basis
2. Issues with client information security
Security has not been an issue
3. The way client information is stored
It's so secure even we can't access at times!

Measurable Outcome 5:

Increased accessibility to client/program information

How has ICAPS impacted the following areas:

1. Your need for agency-wide client or program information
At this point, I have no need for agency-wide information
2. Your need for program specific client or program information
Easy to access and tabulate
3. The methods used to gather that information
Everything is clear and standard
4. The types of reports are you responsible to generate and how often
Everything is clear and in the standard form and location

Measurable Outcome 6:

Change in staff and client satisfaction with intake/tracking system

Please write a brief paragraph about how using ICAPS has affected your and your clients satisfaction with the agency/program intake/tracking system. List the most prominent reasons why you feel as you do.

1. Are you more or less satisfied with client intake and tracking?
I like the consistency of the methods used and the ease of use of the reports printed. Personally, I still see the program as a future asset as there are currently still enough bugs in the system to make me want to pull my hair out after working on the program for (sometimes) only a short time. It is not yet as user-friendly as needed to be a truly workable, productive, time saving and enjoyable tool.
2. Are your clients more or less satisfied with these processes?
I have had no occasion to speak with my clients about this issue. My guess is that once the system is working well and consistently among the agency programs, clients will appreciate not having to fill out redundant forms. As a staff member, I appreciate that very thing.

Name: Robin R. Brookes Agency: CED Program: Family Development

TOP ICAPS Budget

Non-TOP ICAPS Programming

		Revised Budget	Billed To TOP As Of 9/30/2002	TOP Balance	% Spent	Budget	CED Billed As Of 8/31/2002	Balance
Salaries/Fringe:						25,000	25,000	0
	DOL	259,194	252,373	6,821	97%			
	CEC	12,883	12,883	0	100%			
Travel:							WMCA Billed As Of 12/11/2002	Balance
	DOL	0	0	0		Budget		
	CEC	775	774	1	100%	25,000	25,000	0
Servers:							ACAP Billed As Of 2/18/2003	Balance
	CEC	18,000	18,138	-138	101%			
	WMCA	18,000	17,994	6	100%			
	ACAP	18,000	17,693	307	98%			
Computer Systems:								
	ACAP (14@2,500ea)	0	0	0		15,000	15,000	0
Laptops:							LIHEAP Programming Billed As Of 2/18/2003	Balance
	WMCA (4@2,600ea)	0	0	0		Budget 4,970	566	4,404
Contractual:						Total Non-TOP Funds		69,970
	Vaiko Allen	25,198	25,198	0	100%	Expended as of 2/18/03 *		65,566
Indirect:						Balance as of 2/18/03		4,404
	CEC	27,950	34,947	-6,997	125%			
Other:								
	Dues CEC	0	0	0				
Total		380,000	380,000	0	100%			

% of Grant Period Completed, September 30, 2002: 100%

* For DOL services through December 2002