## Integrated Service Delivery Framework Project

<table>
<thead>
<tr>
<th>Name of Project</th>
<th>Integrated Service Delivery Framework</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>January 2017</td>
</tr>
<tr>
<td>Sponsor(s)</td>
<td>Rex Holzemer (MACSSA/Minnesota Association of County Social Services Administrators) and Chuck Johnson (DHS/Minnesota Department of Human Services)</td>
</tr>
<tr>
<td>Project Manager</td>
<td></td>
</tr>
</tbody>
</table>

### Business Context/Background:
Can be used to describe the problem or current state in a paragraph. In this space provide a description of the history or background leading to the need for this effort.

- The human services system is evolving toward a vision of integrated service delivery. Currently, the siloed nature of programs, services, funding, technology and data systems, etc. results in residents having to navigate and maneuver through various systems, agencies, and workers in order to obtain and maintain services. Integration is critical to achieving better outcomes and more cost effective services. This was defined in the 7/24/14 Minnesota Model for Integrated Delivery of Human Services.
- As systems modernization moves forward, the Minnesota model for delivering services in an integrated manner needs to be more clearly described to guide the state computer systems development. As a statewide association of human services leaders in Minnesota, MACSSA has a role in partnering with the Department of Human Services to advance the development of an integrated system framework (through advocacy and participation in business process design), and providing resources to its member counties to adapt to systems change.
- At this time, multiple counties jurisdictions have put considerable work into integrated services design and their experience will provide major input into a statewide framework. These are at a minimum Ramsey, Hennepin, Dakota, Stearns, Olmstead, and SW Health and Human Services.

### Intentions:
The purposes or reasons that the effort is undertaken; the results that are expected from the effort. "Defined as the expected end results of the project, intentions are ideally expressed in business terms and the reasons the enterprise is expending resources. For example, a company may want to define intentions as increase sales, improve customer service, or reduce operating costs."

### Expected End Result of the Effort-How Will The World Be Different?
“The anticipated final impacts or benefits the effort is expected to have.” In this space you will create a bulleted list of ways in which the world will be a better place as a result of you doing this work - deliverables. This is a bulleted list of the outcomes you intend to achieve.

- The state and counties will have a shared understanding of the goals, values and need for service integration in the State of MN.
- The state and counties will agree to a shared framework/functional model/blueprint to use when integrating (blending) specialized services provided at the local level.
- MN.IT will be presented with and have a clear understanding the approved functional model/framework for integrated service delivery. This functional model/framework will be used to guide the technical architecture for human services systems modernization.
- Policy makers and stakeholders will have an understanding of the goals, values and need for service integration in the State of Minnesota.

### Effort Contribution-What Will the Project Do to Achieve the End Results?
The portion of the Expected End Result that falls within the province and responsibility of the project. The remaining effort would, by implication, be the responsibility of someone other than the project team. The two efforts together would be expected to yield the expected end results. This is a bulleted list of activities you will embark on to achieve the outcomes – verb/noun sentences.

- Document, through interviews, site visits, etc., the current integration processes of service delivery in MN county jurisdictions. Include client flow and service access for people looking for different services and identify commonalities.
- Communicate periodically with ad hoc and existing groups of stakeholders for input and feedback.
- Research other integrated services, such as Minnesota’s accountable care organizations, integrated health partnerships, and pursue contacts in other states, such as Idaho, North Carolina and APHSA/American Public Human Services Association, for design models and lessons learned.
- Document best practices for integrated service delivery models.
- Create options for a Minnesota counties’ functional integration model, including touchpoints for services departments outside DHS, such as DOC/Minnesota Department of Corrections, DEED/Department of Employment and Economic Development, MDE/Minnesota Department of Education, and MDH/Minnesota Department of Health.
- Vet and promote the new framework/functional models with MACSSA, utilizing new MACSSA forums, and DHS to review and provide input to develop the final framework.
- Recommend an integrated service delivery framework for final approval from project sponsors.
- Provide outreach and education to state agency staff, policy makers and stakeholders.

**Values**

Values are the set of beliefs, trade-offs and judgment-guidelines that govern the project results and how they are obtained. For example, speed of delivery may be more important than slick design. Or, it might be worth it to extend a project if team members receive valuable training along the way. System quality may be so important that a company will spend more time and other resources on a project to get it right the first time and avoid costly repair or retrofit later. Whatever values exist, all interested parties must understand and agree to abide by the same set in order for the project to succeed. At the root of most conflicts are the differences in values or unarticulated values.

- When the people we serve have a good experience receiving services, this leads to better outcomes.
- The framework provides a balanced approach between the need for standardized processes and the flexibility needed to implement integrated services to meet local needs.
- The framework needs to have applicability across 87 counties.
- Collaboration
- Person-centered approach and language
- Value this unique time in the development of systems modernization and the urgency and importance of this opportunity.
- Decisions on state law, policy, and resources made by policy makers should not be considered constraints for the purposes of this project. Counties and DHS value agreement on this project’s deliverables regardless of decisions made by policy makers.
- This project should not be constrained by current or future technology.

**Stakeholders**

Anyone who might be impacted by or who can impact the success of the project.

<table>
<thead>
<tr>
<th>Direct Stakeholders: Someone directly impacting or impacted by this effort</th>
<th>Service recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>87 counties</td>
<td></td>
</tr>
<tr>
<td>DHS</td>
<td></td>
</tr>
<tr>
<td>MN.IT/ Minnesota Information Technology Services</td>
<td></td>
</tr>
<tr>
<td>ISDS/Integrated Services Delivery System Executive Steering Committee and Program Management Team</td>
<td></td>
</tr>
<tr>
<td>MACSSA</td>
<td></td>
</tr>
<tr>
<td>Tribes</td>
<td></td>
</tr>
<tr>
<td>People we serve</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Indirect Stakeholders: Someone impacting or impacted by the effort by virtue of his/her connection to a direct stakeholder</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Service recipients</td>
<td></td>
</tr>
<tr>
<td>Providers and community partners</td>
<td></td>
</tr>
</tbody>
</table>
| Other state agencies, such as DOC, DEED, MDE, MDH
Advocacy groups
Managed care organizations
ISDS Program Uniformity and Simplification |

**Focus:** Focus is the domain of the effort/solution: what is in scope and out of scope; what people, systems and initiatives the solution must integrate with. Basically, what portion of the business can be examined and ultimately included in the development of the solution. Focus is the primary tool for controlling “runaway” expansions of the effort.

**Breadth (In Scope):** The portion of the business processes, activities, functions and/or organizational units covered by the effort.
- All DHS services, identifying touchpoints for services from other departments, such as DOC, MDH, MDE, or DEED.
- Business processes and organizing principles that create integrated human services for the people we serve.

**Breadth (Out of Scope):** The portion of business processes, activities, functions, and/or organization units **NOT** covered by the effort.
- Technology architecture and IT development
- Implementation of an integrated health and human services system; this will require significant resources and policy change and is beyond the scope of this project definition.
- Change management
- Business processes that include other Minnesota State departments

**Context:** …other parameters that should be commonly established, agreed upon and monitored during the project. Elements of context include issues, uncertainties, understandings (e.g., mutually agreed-upon assumptions) and latitudes (e.g., leeway granted to, or limitations placed upon a project). All involved parties need to be aware of these so as to avoid unpleasant surprises. This is all pretty important stuff – anything that shows up as a constraint, barrier, risk, must have an activity associated with it in your plan. In other words, you have to have an action to address each of them.

**General Context Statements:**

**Constraints:** Limitations on the solution and the conducting of the effort.
- Timing is a constraint; 2017 is the time to complete this work.

**Risks:** Unfavorable potential occurrences or circumstances, i.e., things that could go wrong, for which the project must have a mitigating strategy.
- Magnitude of the issue. It is critical to manage the scope setting goals that are achievable and appropriate for counties in 2017. If scope and phasing is not managed, stalling will likely result and we will miss this opportunity to ensure our future technology works for integrated, person-centered services.
- Risk that some counties will not “buy in”. MACSSA is critical for getting consensus.

**Understandings:** A collection of informal, mutually agreed-upon, and accepted statements that further clarify the effort or what is meant by the solution. Normally, only those items which are significant in their impact are included.

**Systemic Facts:** The agreed on meaning of terms so important that a difference of opinion on what they mean could change the interpretation of the effort or a meaningful solution.
- Integration: “Recognize the interdependencies between health, economics, social situation and individual circumstance and end the practice of program-based isolation of services” From the Minnesota Model of Integrated Service Delivery of Human Services. Also see APHSA BUSINESS MODEL for horizontal integration of health and human services
- Person-centered: “Person-centered planning is a process, directed by the family or the individual..., intended to identify the strengths, capacities, preferences, needs and desired outcomes of the individual or family. Centers for Medicare and Medicaid Services (CMS)

**Assumptions:** Items which cannot be proven or demonstrated to be true at this time (or maybe ever) but are accepted as true, for the purpose of the project, until confirmed or disproved.