

**A Baseline for a Shared Understanding
of Information and Referral
in the Greater Washington Region**

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EXECUTIVE SUMMARY

In an effort to bring to the region a shared understanding of the current elaborate Information and Referral (I & R) process and of the status of 211 plans in the District, Maryland and Virginia, several groups have partnered to survey the larger comprehensive nonprofit health and human services I & R agencies. The George Washington Institute of Public Policy has conducted a survey for the Greater Washington 2-1-1 Work Group being convened by the Nonprofit Roundtable of Greater Washington. The survey and report have been funded by the Washington Grantmakers' Community Capacity Fund.

This report sets out the findings of those survey processes, acquired through an extensive questionnaire administered in October-November 2002 to selected I & R agencies within a defined six-county area covering parts of Maryland and Virginia, and the entire District of Columbia. Nineteen agencies fitting a common definition were selected initially to receive the survey; three determined that their agencies did not fall within the parameters of the survey definition.

The questionnaire for the I & R agencies addressed questions on location and hours, populations served, access and call volume, hardware and software equipment, budget level and funding sources, database resources, record-keeping and usage of records, staff sizes, training and accreditation status with the Alliance of Information and Referral Systems, agency certification by the Alliance and others, and marketing. The questionnaire included some open-ended questions regarding regional capacity to meet regional needs, and desired resources for improving service.

Survey results reveal that the current systems show differences in training, marketing, methods of staffing, call routing, operating hours, funding, taxonomy usage, tracking of calls, telephone equipment, and other features. The District of Columbia, Maryland, and Virginia each have chosen separate routes to management of the I & R system within their jurisdictions. These differing paths affect the process of 2-1-1 implementation within the jurisdictions and the region.

I & R representatives within the District, Maryland, and Virginia all remark that cooperation with neighboring I & R agencies in surrounding areas is very much a part of their implementation planning for 2-1-1.

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INTRODUCTION

Everyday the Greater Washington Region responds to the informational needs of individuals and families for health and human services through an intricate process that reflects Information and Referral's decades-long gradual expansion throughout the region. These are agencies whose primary purposes are to maintain information about human service resources in the community and to refer people who need assistance to appropriate service providers.

In incremental steps, local Information and Referral (I & R) providers have bridged service gaps through inventive arrangements, grafted new roles onto existing agencies, and implemented new technologies to enhance the I & R process. Much as houses in a neighborhood contribute to a more complex and rich neighborhood street façade as they add new architecture through the years, I & R's development in the region over time has fostered a complicated and dynamic I & R arrangement among a significant array of agencies.

In an effort to bring to the region a shared understanding of the current elaborate I & R process and of the status of 211 plans in the District, Maryland and Virginia, several groups have partnered to survey the larger comprehensive nonprofit health and human services I & R agencies.¹ The George Washington Institute of Public Policy conducted a survey for the Greater Washington 2-1-1 Work Group being convened by the Nonprofit Roundtable of Greater Washington. The survey and report have been funded by the Washington Grantmakers' Community Capacity Fund.

This report sets out the findings of those survey processes, acquired through an extensive questionnaire administered in October-November 2002 to these agencies within a defined six-county area covering parts of Maryland and Virginia, and the entire District of Columbia.²

¹ The national abbreviated dialing code, 2-1-1, was designated in July 2000 by the Federal Communications Commission to provide easy access to health and human services information and referral. In reserving the number for this purpose, the FCC order announced it would "expect community service organizations to work cooperatively to ensure the greatest public use of this scarce resource."

² The Greater Washington Region encompasses these jurisdictions. 1. Northern Virginia: the Cities of Alexandria, Fairfax, Falls Church, Manassas, and Manassas Park; and the counties of Arlington, Fairfax, Loudoun, and Prince William; 2. the District of Columbia; 3. Suburban Maryland: the Cities and Towns of Barnesville, Bladensburg, Bowie, Brentwood, Brookeville, Capitol Heights, Cheverly, Town of Chevy Chase, Chevy Chase View, Chevy Chase Village, Village of Chevy Chase (Section 3); Village of Chevy Chase (Section 5), College Park, Colmar Manor, Cottage City, District Heights, Eagle Harbor, Edmonston, Fairmount Heights, Forest Heights, Gaithersburg, Garrett Park, Glen Echo, Glenarden, Greenbelt, Hyattsville, Kensington, Landover Hills, Laurel, Laytonsville, Martin's Additions, Morningside, Mount Rainier, New Carrollton, North Brentwood, North Chevy Chase,

Follow-up e-mails and/or telephone calls were conducted. One outcome of the report is to enhance the present deliberations in the region towards more seamless provision to the public of these agencies' responsibilities.

Eighteen I & R agencies and one I & R database agency received surveys, but not all proved to be covered by the I & R definition provided. The nineteen agencies were screened initially to receive the survey using an inclusive and broad definition. Interviews with I & R officials throughout the region resulted in a list based upon these characteristics. All maintain a resource database with an extensive range of assistance categories. All field calls from the general public. All contain resources in their database listings from multiple jurisdictions. All have information and referral as a major program responsibility of their agency, and were asked to evaluate whether I & R was a major commitment of the agency. Three of the nineteen replied that I & R was not a significant enough feature of their mission to qualify as a survey recipient.

Of the remaining sixteen, five were headquartered in Maryland, three in the District, and eight in Virginia. They include governmental agencies, charitable organizations, and faith-based agencies, reflecting the differences in I & R arrangements within the different jurisdictions. Ten of the sixteen qualifying agencies responded, a response rate of 63%. This response rate is above the rate obtained in surveying the nonprofit sector. Appendix A contains a list of the agencies and the contact individuals.

This focus on larger I & R agencies placed many I & R agencies outside the scope of this report's fact-finding, as for example smaller I & R agencies that provide information for target populations only or for small geographic areas. Though these agencies were not surveyed, they are an integral part of the system of I & R within the region.

Many of the questions in the survey were designed to illuminate possible differences that will have to be handled to introduce a more seamless information and referral experience for the public. The I & R process involves establishing contact with the individual, assessing the individual's long and short-term needs, identifying resources to meet those needs, providing a referral to identified resources, and, where appropriate, following up to ensure that the individual's needs have been met. In addition to maintaining information and referring individuals to appropriate service providers, these I & R programs offer descriptive information about the service provider agencies. Other questions were designed to reveal the additional resources these agencies will need in order to bring a more seamless and equitable I & R response to all callers within the region.

Poolesville, Riverdale Park, Rockville, Seat Pleasant, Somerset, Takoma Park, University Park, Upper Marlboro, and Washington Grove; and the Counties of Prince George's and Montgomery.

The questionnaire that the I & R agencies completed consisted primarily of close-ended questions on location and hours, populations served, access and call volume, hardware and software equipment, budget level and funding sources, database resources, record-keeping and usage of records, staff sizes, training and accreditation status with the Alliance of Information and Referral Systems, agency certification by the Alliance, and marketing. The questionnaire included some open-ended questions regarding regional capacity to meet regional needs, and desired resources for improving service.

The process of information and referral remains particularly intricate in this region encompassing the District of Columbia, Maryland, and Virginia. The interstate status of the region is an obvious complicating factor. Many other factors add additional complexity.

As the results of the survey show, incoming calls may be routed differently, the information stored in databases and its periodic updating varies, requirements for staff training and refresher courses vary, hours of operation fluctuate from agency to agency, the software to manage information and track activity varies, the classification taxonomy is different, the hardware to handle the calls differs, marketing of agency resources is markedly different, funding streams are different, and the hierarchy of information exchange is different.

A typical example of these variations comes in the different methods used to organize the information, called the taxonomy. Some agencies custom-design their taxonomy and others use standardized industry software. Agency policy differs regarding response to caller requests, where some I & R specialists take an advocacy responsibility for a caller and others play a more intermediate role. Moreover, some are modeled upon the principles of volunteer fire or paramedic units, and rely primarily upon trained volunteers.

The following analysis reviews the I & R administrative arrangement within the District of Columbia, Maryland, and Virginia and provides the status of 2-1-1 designation efforts within those three jurisdictions. The report places the progress of the District of Columbia, Maryland and Virginia within a national classification scheme developed for this purpose. It concludes with a presentation of the findings from the survey.

DISTRICT OF COLUMBIA

The most visible comprehensive information and referral service in D.C. is the District's Answers Please!. The District of Columbia's Department of Human Services, Office of Communication and Public Affairs, handles the service. The Department utilizes the District's Office of the Chief Technology Officer to service the computer equipment and the D.C. wide area network. Specialized I & R resources are maintained within other D.C. offices including,

for example, the Office on Aging, Income Maintenance Administration Customer Service, D.C. Citywide Call Center, and the D.C. Energy Office.

In February of 1999, the District of Columbia government committed itself to a professional, comprehensive I & R system. An intensive six months culminated in I & R service initiation in July 1999 on a 24 hour, year round basis. In the next year, June 2000, the I & R service became a member of the Alliance of Information and Referral Systems.

Now, two years later in mid-2002, the Department of Human Services has filed a petition for the 2-1-1 designation with the D.C. Public Service Commission. The Department recently responded to the Public Service Commission's additional informational questions. They are awaiting a final ruling, but have not indicated when they expect it to be received.

Upon receiving designation, the Department will begin all aspects necessary to meet the Public Service Commission's requirements, such as upgrade of phone lines. Funding for these responsibilities will be carried in the Department's annual budget, totally supported by D.C. appropriated local tax dollars. Monies are provided from the Department's budget by the Director's staff for the operation each year of the I & R program. The D.C. I & R presently is not a line item in the D.C. budget.

When 2-1-1 designation is received, the Department plans to involve staff in AIRS training and certification, though the scope of the effort will depend upon the seriousness of the anticipated budget cut for FY 03. Additionally, the Department of Human Services will likely utilize a Board or Partners to guide 2-1-1 implementation in the District. This Board would be recommended by the Director of the Department of Human Services or her designate.

As in the two neighboring states, the District has many other nongovernmental nonprofit I & Rs. Many provide information for target populations only, or for small geographic areas. Several I & R agencies based in the District within the faith-based nonprofit sector provide comprehensive I & R resources to the entire metropolitan area, as does a labor-affiliated agency.

MARYLAND

In Maryland, a nonprofit agency, the United Way of Central Maryland, delivers information and referral services statewide on a 24 hour, 7 day a week schedule with its First Call for Help. Its program serves the Maryland suburbs of D.C. (for this report, Montgomery County and Prince George's County) as part of its statewide mission. There is no comparable agency to Virginia's umbrella agency, the Northern Virginia Regional Commission, on the Maryland side of the Potomac. The closest umbrella agency is the United Way of Central Maryland which fulfills this role by virtue of its statewide coverage of Maryland.

Callers from Prince George's and Montgomery Counties have access to a toll-free statewide number to reach First Call for Help and the I & R resources compiled by the United Way of Central Maryland for their area. Additionally, there are some individual governmental agencies and nonprofit agencies in the two counties that provide comprehensive I & R services to the general public in their own counties. A nonprofit I & R based in Montgomery County, while marketing itself to a target population in the metropolitan area, also does serve the area's general public.

Upon the designation of the 2-1-1 number by the Federal Communications Commission in 2000, the United Way of Central Maryland offered to serve as the base for 2-1-1 planning in the state. A Maryland 2-1-1 Task Force was created that is a public-private collaboration and includes approximately 80 members from throughout the state.

The Task Force completed an extensive business plan released in November 2001, entitled "2-1-1 Maryland: Easy Access to Community Resource Information." It recommended a vastly expanded system of I & R provision, based upon a decentralized model with multiple regional hubs. It would be accessible from public places such as libraries or kiosks and in homes, and include an extranet system whereby providers could communicate confidentially to each other on issues relating to servicing callers. The plan proposed a mix of funding through a combination of non-governmental dollars and a state-imposed telephone surcharge. It specified the creation of between three and six call centers. The business plan passed the House chamber of the Maryland General Assembly but was not voted upon in the Senate.

Statehouse political leadership suggested that the Task Force provide new plans for a scaled-back pilot program to demonstrate the worthiness of a statewide 2-1-1 system. The group is favoring a pilot that includes two communities to enable them to demonstrate how 2-1-1 would work, for example, in a rural and in an urban region.

The Maryland 2-1-1 Task Force drafted an implementation plan for this scaled-back pilot effort which was released in May 2002. Subsequent to the November 2002 general elections, the Task Force plans to begin discussions of the pilot demonstration with the new political leadership, and to introduce legislation again in the 2003 General Assembly. Governmental funding for a portion of 2-1-1 implementation is a major issue, and, to a smaller extent, so is the acquisition of the non-governmental monies.

In the interim, the Maryland 2-1-1 Task Force has petitioned the Maryland Public Service Commission to become the 2-1-1 designate for the state. They expect to receive notification within 30-45 days, whereupon they would incorporate to protect the trademark and would move forward with steps detailed for the pilot program.

VIRGINIA

Virginia established the first statewide comprehensive information and referral system in 1984 legislation. That system is administered by the Virginia Department of Social Services through contracts and subcontracts. After nineteen years, the comprehensive information and referral function in Virginia has become greatly intertwined among a variety of agencies and departments whose relationships are spelled out in a mix of agreements, memorandums of understanding, and legal contracts. Work towards a Virginia statewide 2-1-1 system seeks to build on and rationalize these arrangements.

Virginia has decentralized the state's information and referral process. The Virginia Department of Social Services contracts with the Council of Community Services located in Roanoke to administer the state I & R system on behalf of the Department. The statewide system consists of six regional centers to handle information and referral. The Council of Community Services is one of the regional I & R centers, and also subcontracts to the five other regional centers the responsibility for I & R in their respective regions. Virginia's Statewide Human Services Information and Referral System uses a single telephone number (800-230-6977) that routes callers automatically to the appropriate regional I & R center. The System also maintains a database accessible to the public and to I & R providers through the Internet (<http://www.vaiandr.com>).

Five of the six regional I & R centers compile their region's information and referral database and house a call center to provide telephone response to inquiries. In northern Virginia, the sixth regional center, based on historical agreements, defers call center operation to local jurisdictions.

The Council of Community Services is responsible for coordinating the work of the six regional centers, consolidating the quarterly and annual reports filed by those centers and convening coordinating groups such as I & R Directors and the Database Users Group.

The Council of Community Services has also taken leadership in the work towards a statewide implementation of 2-1-1. Their executive director chairs the Virginia Alliance of Information and Referral Systems (VAIRS) 2-1-1 Task Force. Like Maryland's 2-1-1 Task Force, the Virginia Task Force has been leading the exploration of 2-1-1's statewide development. A petition to the State Corporation Commission (Virginia's public utility commission) for designation of VAIRS to manage 2-1-1 in Virginia has been drafted and is under review.

Also at the state level, the Governor's Office and the Office of Commonwealth Preparedness work on issues related to provision of I & R and initiation of 2-1-1.

The state's subcontractor for Information and Referral in northern Virginia is the Northern Virginia Regional Commission. Like the state, the Northern Virginia Regional Commission works through a network of providers to cover I&R responsibilities, in this case six local full-partner public I & R agencies, and a local limited-partner nonprofit agency. These are the Alexandria Department of Human Services, the Arlington County Department of Human Services, the Fairfax County Department of Systems Management, the Falls Church Division of Housing and Human Services, Loudoun County Department of Social Services, and Prince William County Department of Social Services; and a nonprofit hotline, CrisisLink. The inclusion of CrisisLink enabled northern Virginia to provide service around the clock year round.

The Northern Virginia Regional Commission collects resource information, manages and updates the database of resources, supplies the computerized database resources to their local partner I & Rs, publishes the *Quick Guide to Human Services*, tracks regional statistics, and convenes the regional I & R work group to periodically plan and reassess the operation of I & R in the region. The primary responsibility of the seven local agencies is to answer inquiries about human services from the public. They also assist in verifying information for the database, and may submit to NVRC suggested data updates. Northern Virginia Regional Commission does not handle public I & R inquiries. Through a long-standing regional agreement, this responsibility rests with the local call center partners. Collectively, these local I & R call centers and the state's designated regional center are known as the Northern Virginia I & R network. The arrangement has been formalized through the "Northern Virginia Regional Agreement on Information & Referral."

In receiving information requests, the agencies get calls through their local phone numbers and from the statewide toll-free number via an automatic call router system that sends a caller to the appropriate regional center, or, in northern Virginia's case, to one of the seven local agencies.

In responding to information requests, these seven local agencies can access Virginia's full I & R database online, the Northern Virginia Regional Commission's computerized I & R database which is downloaded into their copy of the standard information management software, and their own internal agency I & R databases should they have decided to additionally maintain one. Sometimes the work of these local I & R agencies is impeded because they cannot pull the state's I & R database into their I & R information management software as they can Northern Virginia Regional Commission's database. They can make referrals using the Statewide I&R website to access information on other parts of the state, but statistics on these referrals are not recorded automatically. This complicates record keeping and limits reporting.

There are many other complexities beyond these operating basics. Some include training, marketing, software and hardware, agency policies on call handling, and frequency of database

updates. Besides these seven comprehensive local I & R agencies in northern Virginia, hundreds of I & Rs targeting specific populations with specialized needs and agencies exist in Northern Virginia, serving smaller geographic areas or constituencies. With the aforementioned interstate character of a Metro Washington 2-1-1 system superimposed, the cast of institutions and responsibilities is enormous.

Northern Virginia has begun discussion of 2-1-1 designation for its area under the leadership of the Northern Virginia Regional Commission. Because of the interstate character of Greater Washington, the Commission has included representatives of Maryland and the District of Columbia when appropriate, as well as their local partners. The local partners in the Northern Virginia I & R Network are moving toward a consensus that CrisisLink is the organization best positioned to serve as a single regional call center meeting 2-1-1 National Standards when 2-1-1 is implemented. Under this scenario, the local public I & R services would function as specialized partners dealing mostly with financial, public benefits entitlement, and emergency shelter issues.

NATIONAL FRAMEWORK FOR 2-1-1 PROGRESS ASSESSMENT

The Telecommunications and Information Policy Institute, University of Texas at Austin has devised a four stage development process based upon certain common features they have observed across 2-1-1 efforts nation-wide.

They report in their publication, “2-1-1 State by State,” that they base the development stages upon features such as negotiations with local telephone companies, the internal organizational structure of the groups or collaborations backing a 2-1-1 plan, communications with and endorsement of plans by state utility commissions, and aspects of a business plan for services. They are careful to note that considerable variation can exist in an individual location regarding the degree of adherence to the described four stages. The abbreviated definitions follow.

FOUR STAGES OF 2-1-1 DEVELOPMENT PROCESS

Initial Stage: One or more organizations have expressed interest in developing 2-1-1 capacity in their state. Some motions toward collaboration among I & R and/or service agencies have been made to this end.

Collaboration Stage: Collaborative groups have been formed and a concerted effort is underway to develop operational models, relationships with Utilities/Service Commissions, and with LECs. Database issues and technology issues in terms of call center capabilities are under consideration.

Negotiation Stage: A viable business plan has been adopted, technical requirements have been

indicated to LECs who have made subsequent efforts to provide cost estimates, call center locations and technical specifications have been determined.

Operational: 2-1-1 services are operational. While 2-1-1 services may not yet be provided on a statewide basis, plans are underway to provide or approach statewide coverage.

Source: Telecommunications and Information Policy Institute, University of Texas at Austin, "2-1-1 State by State," August 2002.

The "2-1-1 State by State" report shows both Maryland and Virginia to be at the collaboration stage. While the report does not include the District of Columbia, it would appear they also are at the collaboration stage. However the District's stint at the negotiation stage will likely be brief because responsibility and funding resides within the single agency.

Both Maryland and Virginia have functioning 2-1-1 Task Forces with broad participation from the necessary agencies. The District of Columbia did not need external collaboration to initiate its 2-1-1 proposal. All three have developed operational models. All three have 2-1-1 proposals drawn up and two have submitted them to their Utilities/Service Commissions (Maryland and the District). Database issues and technology issues are part of the task forces work to date.

SURVEY FINDINGS

The George Washington Institute of Public Policy sent the selected 19 comprehensive governmental or nonprofit I & R agencies an extensive questionnaire designed to solicit information to buttress a shared understanding of the current elaborate I & R process and of the status of 2-1-1 plans in the District, Maryland and Virginia. The questionnaire was administered in October-November 2002 to these agencies within a defined six-county area covering parts of Maryland and Virginia, and the entire District of Columbia. Follow-up e-mails and/or telephone calls were conducted with the sixteen who stated they met eligibility requirements.

The picture presented in the opening section of this report shows that the systems vary greatly in the District of Columbia, Maryland, and Virginia. The returned questionnaires show that these differences trickle down into the individual operations of the local I & R agencies.

The survey replies illustrate differences in call routing of incoming calls, variation in database information and updating practices, differences in requirements for staff training and refresher courses, fluctuation on hours of operation, diversity in software that manages

information and tracks activity, diversity in hardware to handle the calls, variety in marketing of agency resources, differences in funding, different methods used to organize the information, and policy differences in responses to caller requests, variations in staff and volunteer responsibilities.

Location and Hours

One of the professional certification standards requires an I & R agency to operate continuously year-round. Half of the ten responding agencies provide 24-hour coverage, 7 days a week within the geographic area that they serve. Regarding geographic area covered, two count the entire six county/District interstate region plus additional jurisdictions as their I & R resource provision area. These two responding agencies, the Jewish Information and Referral Service and CrisisLink, provide precedent for I & R provision that encompasses the Greater Washington region. Two agencies, the Northern Virginia Regional Commission and the United Way of Central Maryland, mentioned that efforts to get their region and their state, respectively, to work together had provided knowledge useful to the current effort to coordinate the interstate region.

Access and Call Volume

Depending upon location, some callers within the Greater Washington region will face a long distance charge in dialing all but three of the responding I & R agencies' telephone numbers. Such long distance barriers inhibit regional usage. As an example, family members in one state might wish to connect to a neighboring state for care on behalf of an elderly relative. A succession of long distance phone charges can discourage that effort. Six of the nine do provide TTY/TDD service.

All ten responding agencies provide I & R assistance to the general public. One of the eight primarily serves a target population, but indicates that they will serve the larger population. This verifies their selections as survey-recipient agencies, because service to the general population was a requirement of survey participation.

The backbone of an I & R agency is the database of resources consulted in responding to callers' needs. If the database is accessible through numerous avenues, such as on the internet or on a CD, this extends the utility of the database to a larger audience. This is especially helpful for individuals who do not need the professional attention of an I & R Specialist or who need to access the database during other than regular business hours. Researchers wanted to gauge the current variety in access, and asked I & R agencies whether they offered walk-in face-to-face assistance, telephone inquiry, agency e-mail or website inquiry, printed directories, public access to an on-line I & R resource directory, a computer diskette of I & R resources, a CD-ROM of I & R resources, or other resources.

The most common citizen access for the agencies was telephone access, measured in call volume. Seven agencies in a northern Virginia consortium showed call volume for 1999-2001 collectively at 16,753; 39,184; and 42,116. The largest call volume registered by an individual agency in the region hovered near 50,000 throughout the three cited years. The smallest two averaged 12,000 and 10,000 annually across the three years.

For any given access, about half of the nine I & R call agencies surveyed provide alternate access beyond the traditional telephone call access provided by all. (Northern Virginia Regional Commission does not field public I & R requests.) Walk-in assistance, e-mail inquiry response, hits to an I & R website, and computer diskettes of resources, are the most common alternative access routes, provided by a mix of five of the nine agencies.

The Northern Virginia Regional Commission totaled the walk-in volume for its seven regional partners and provided a trend for 1999-2001 of about 3800, 6300, and 4900 over the three years. Hits to their I & R website showed 1900, 1000, and 2100 hits. Their diskette directory was requested 37 times, 61 times, and 47 times over the three years reported. The convenience of direct public on-line access to the directory of resources must reduce the demand for the diskette resource.

Other mechanisms to assist access to I & R resemble marketing techniques, such as distribution of wallet cards and key tags with the I & R phone number, or the mailing of a variety of products such as welcome packets or various agencies' brochures.

Agencies that dedicate lines solely to I & R calls may make easier the marketing of their service. Five agencies have phone lines dedicated to I & R calls, while the other four share I & R lines with crisis service. Respondents were asked to designate the number of phone lines for these services, but most did not do this. A different mix of five agencies are able to directly transfer a caller to a resource provider that they have recommended and handle a direct long distance transfer. Six can make a direct transfer to 911 or another emergency number.

Marketing is a valuable tool to increase service volume. Some individuals within the I & R network view marketing as the most critical issue confronting the agencies. Professional marketing can enable I & R to come to the attention of the entire regional audience, and reach individuals unaware of the service but in need of its resources.

Agency variation in marketing is widespread. Some agencies take a more aggressive approach to marketing than others. Some use TV and radio public service announcements; several conduct community outreach activities and distribute brochures. Several advertise in the yellow pages and in county-generated directories. One distributes 160,000 wallet and key tag chains. The agency also appears on local network and cable TV, on radio talk shows, and in

articles in the local newspapers. The agency works on placement in corporate listings such as realtors listings.

TABLE 1: What company provides your agency’s I & R telephone service?

Agency	A. Company providing telephone service
1.Alexandria Department of Human Services	Avaya
2.CrisisLink	Verizon Communications
3.Department of Human Services Answers Please!	Verizon Communications
4.Fairfax County Department of Systems Management for Human Services	Verizon Communications
5.Jewish Information and Referral Service	WorldCom
6.Montgomery County Mental Health Association Hotline	F-Squared Communications
7.Northern Virginia Regional Commission	N/A
8.Prince George's County Hotline	Verizon and MCI
9.Prince William County Department of Social Services	Verizon Communications
10.United Way of Central Maryland	Verizon Communications

TABLE 2: What kind of I & R telephone system do you use?

Agency	A. Telephone system in use
1.Alexandria Department of Human Services	Definity G53 6408D+
2.CrisisLink	Executone
3.Department of Human Services Answers Please!	Teloquent Computer based telephone systems
4.Fairfax County Department of Systems Management for Human Services	Siemens/Rolm 9005 computerized branch exchange (CBX) system
5.Jewish Information and Referral Service	Mitel SX-200
6.Montgomery County Mental Health Association Hotline	Altigen, Center 4.0 (call center software)
7.Northern Virginia Regional Commission	N/A
8.Prince George's County Hotline	Norsar
9.Prince William County Department of Social Services	NORTEL - Automatic Call Distribution
10.United Way of Central Maryland	NEAX 2400 IMS Automatic Call Distribution

For six of the nine agencies, the company providing telephone service is Verizon Communications, and the others are Avaya, F-squared Communications, and WorldCom. None of the nine agencies use the same I & R telephone system for call processing (Tables 1 and 2).

Resources and Databases

Among the seven responding agencies that conduct public I & R, five have their own agency-wide databases that they reference first when responding to callers. These are the District's Answers Please!, Community Crisis Services' Prince George's County Hotline, Fairfax County's Human Services Resource Guide, the Jewish Information and Referral Service, the Mental Health Association of Montgomery County's Information and Resource Guide and its Montgomery County Resource and Referral Book, and the United Way of Central Maryland's First Call for Help. The other three rely on the common shared database housed in the Northern Virginia Regional Commission. The local partners of the regional commission pull the NVRC database into their information management software, such as IRis, and receive frequent updates.

Because this common shared database is integrated into some individual agencies' databases, a total known number of unduplicated records is not easily tallied. Presently the Greater Washington region is partially served by two statewide databases. It is also served in Virginia by a common shared database. United Way of Central Maryland and the Fairfax County Department of Systems Management for Human Services each have total program and services listings in the 4000s range. Northern Virginia Regional Commission's common shared database has listings in this range as well. The highest numbers came from the United Way of Central Maryland with information on more than 2000 agencies, while the Northern Virginia Regional Commission covers 1200 agencies and three others track 500+ each.

Agencies that have their own databases – even if they also have a common shared database – turn to their own database as their first source of information when responding to caller needs. This suggests the importance of guaranteeing that common shared databases can be brought into agency databases, and that record-keeping be integrated among them. Some agency I & R Specialists also utilize individual personal files as needed, but they were never used as a first source of information.

Usage of staff resources to field calls that fall outside an agency's geographic area or that do not match an agency's resources, functions or mission did occur. Estimates of the frequency of such calls ranged from as high as 15% to as low as a trace amount. One-third of the agencies (3 agencies) estimated that 10-15% of their calls fell outside of their resources, functions, or mission. The other two-thirds made estimated from a trace of the calls to 5% of the calls. United Way of Central Maryland's coverage territory eclipsed the other agencies' geographic coverage; it would make sense that a "negligible" number of calls would fall outside its geographic or activity area. Jewish Information and Referral Service replied "very" few, a fact that reflects the agency policy of significant follow-up assistance.

Policies among the agencies differ on how to handle a call, when the caller's needs are not met by an agency. All nine will refer a caller to another I & R agency or to a case

management group, seven of the nine will advocate by actively seeking other resources on the caller’s behalf, and three of the seven will explain to a caller why needed resources do not exist – though Jewish Information and Referral Service noted this is rare because of their policy of extensive follow-up, even to handling international call requests. This very simple difference in agency policy can create uneven service from agency to agency for a caller. (Table 3)

Additional call handling procedures are in place for seven of the agencies. Alexandria Department of Human Services will access private or researched materials. CrisisLink reports that out-of-area crises are also handled by their agency, and the call taker will find resources by aggressively working the system. Fairfax County reports keeping staff up to date on special programs, and, if it has exhausted all possible avenues of assistance, it will put together the best combination that it can and work to get a caller eligible for needed services. Prince George’s County Hotline staff members will do a basic crisis assessment based on danger to self or others, or on child abuse. A discretionary fund that can be used only once by a caller provides a last resort safety-net at the United Way of Central Maryland.

TABLE 3: What are the sources and processes that your I & R specialists utilize to find appropriate resources in situations when resources are not available to resolve a caller’s need because the request falls outside the geographic area you serve or does not match your agency’s resources, function or mission?

Agency - Extra sources and processes when request outside of agency area, resources, function, mission	A. Refer to another I & R agency or to case management group	B. Advocate by actively seeking other resources on caller’s behalf	C. Explain why caller’s needed resources do not exist	D. Other
1.Alexandria Department of Human Services	yes	yes	no	yes
2.CrisisLink	yes	yes	no	yes
3.Department of Human Services Answers Please!	yes	no	no	yes
4.Fairfax County Department of Systems Management for Human Services	yes	yes	yes	yes
5.Jewish Information and Referral Service	yes	yes	yes (rare)	yes
6.Montgomery County Mental Health Association Hotline	yes	no	no	no
7.Northern Virginia Regional Commission	N/A	N/A	N/A	N/A
8.Prince George's County Hotline	yes	yes	yes	yes
9.Prince William County Department of Social Services	yes	yes	no	no
10.United Way of Central Maryland	yes	yes	no	yes

Nine of the ten agencies reported on their frequency of agency updates to the resource database. None rely on provider agencies to initiate updates. The majority complete annual updates, a sixth one is on a 16 month cycle, a seventh notes it is as often as every two weeks, and the last two indicate updates occur only as time permits.

The process each agency undertakes to complete its update cycle is widely different. These processes can include requests to collaborative agencies for updated hard copy directories, research into event-specific phone numbers such as holiday toy drives, e-mails or faxes to listed agencies, website feedback, personal phone calls to providers, and mailing of paper copies with requests for confirmation.

Five of seven agencies use a classification system for their database. Three of the agencies that classify their database use the AIRS/INFOLINE (all the 1998 version) taxonomy, and report that they are going to be upgrading to the 2002 version. The others that classify use their own custom keyword system – one of these is switching to AIRS/INFOLINE version 2002. Four of the five that use a classification system have classified 100% of their database; the one other has completed 30%.

To manage their resource database information, six agencies use Iris software, one uses custom software, two do not use software, and one does not indicate. One of the agencies that uses no software places program and service records in a word-processing file and prints it as a directory for use by I & R Specialists.

Of the eight of nine agencies that did respond to an information-tracking question, all indicated that they track some information. All eight track the date and/or time of call, and the problems/needs of caller, seven track demographic information on the caller, five include the zip code, five track unmet needs, and four track whether a caller's needs are met with the first call. Some agencies track an extensive amount of additional information, including Alexandria Department of Human Services, CrisisLink, the D.C. Department of Human Services, and the Prince George's County Hotline.

The tracked information is used in a variety of ways. The usage made by CrisisLink could be predictive of new reporting needs within cross-region coordinated 2-1-1 system. CrisisLink reports that their "multiple jurisdictional funding requires multiple jurisdictional outcome tracking. All information collected is required by some report to someone." All use the data to evaluate and assess local needs.

Three agencies of the nine that take calls report regular and consistent follow up with a percentage of callers, two indicate that they are going to initiate such a process in the coming year, one reports that the agency has the capacity, another two do not do such activity, and one

did not respond on this. Agencies that did not do follow-up have other means of performance monitoring. One has a tester group that checks all customer service operations on an on-going basis, and feedback is provided with detailed reports. Another gauges customer satisfaction.

Staffing

Four of the nine I & R agencies rely almost exclusively upon trained volunteers to deliver information and referral service, modeling their agencies upon the principles of volunteer fire or paramedic units. One uses 30 volunteers an average of 3 hours each a week, a second uses 50 volunteers an average of 4 hours each a week, and a third uses 100 volunteers an average of 3 hours each a week, and a fourth uses 40 volunteers an average of 4 hours each week. A fifth agency only has two volunteers serving 8 hours per week; by contrast their paid fulltime staff numbers ten as does their paid part-time staff. The four remaining agencies have only paid staff, in fulltime numbers ranging from 1 to 44; and only one of these supplemented with a single part-time paid staff. CrisisLink's complicated staffing pattern made response to this question difficult. As an example, some fulltime paid staff members staff phones, but as volunteers. Some agencies use volunteers as board members and advisory council members. For others, the volunteers are the backbone of the agency, handling information and referral, web development, legal services, database updating, and "many other needed services."

Quality Assurance Capacity

None of the responding agencies are accredited with the Alliance of Information and Referral Systems, but three are accredited with the American Association of Suicidology. Four have personnel who have completed the Alliance of Information and Referral Systems' personnel certification program, and personnel within three agencies have received certification elsewhere.

What it would take for the I & R agencies to implement accreditation of their agencies mostly comes down to increased funding for additional staff and for accreditation fees, according to their responses to this question. United Way of Central Maryland anticipates enrolling in the accreditation program of the Alliance of Information and Referral Systems in calendar year 2003.

Significant variation in staff training exists, with each of the nine responses reflecting a different approach. Some report only initial training, others add on-going training. Some organizations handle training internally; others contract staff training to outside organizations. Required numbers of training hours also vary.

Funding

All agencies were able to provide approximate percentages for their funding sources. Budgets ranged from a low of \$46,513 to a high of \$1,957,000. Two agencies are 100% funded by local government. A third receives 50% funding from local government, and 25% each from

the state and federal governments. Another has 28% local government funding, and acquires 5% in fees for service and 52% in contributed services and facilities. A fifth receives only 2% of its funding from local government, 97% from United Way, 1% from fees for service and 2% from other sources. A sixth derives 98% of funding from its metro area federation and from an affiliated endowment fund, and 2% from direct payment for services. A seventh has a 20% local, 80% federal split. CrisisLink taps numerous funding sources, not all of which readily fit the classification presented in the questionnaire. A ninth did not respond to this question. Lastly, another receives 100% funding from a combination of regional-government type and state government funding.

MEETING LOCAL AND REGIONAL NEEDS

Respondents believe that continuous marketing, well-organized and well-funded, is a critical component of successful I & R efforts in the Greater Washington region. “I & R is a product that needs constant selling.” With ongoing marketing the percentage of users would grow beyond the capacity of direct service providers, according to one respondent. One agency cited marketing as its biggest difficulty. Another remarked that they had “done a job with the limited resources available, but we are not well known.”

Others point to funding needs, “Our ability to serve more people would be increased by increased funding . . .” and “To better meet our callers’ I & R needs, we would need more money for technology updates, a database staff person, a computer I & R system, and certification/ accreditation with AIRS.” Another agency director has similar needs, stating, “We will need additional technology and staff, both requiring funds.”

Most concur with the statement of one respondent, “I do not believe that the I & R needs of the Metro area are adequately addressed.” The individual continues, “What is needed is a regional 211 network that has consistent funding and is well integrated into mainstream service delivery. This service must be respected by all sectors and be seen as a partner in service delivery.” Another is more blunt in replying to whether present I & R efforts are meeting the needs of the metropolitan area, tersely responding “not at all.” Another requests, “better collaboration between area providers” and “access to regional databases via use of websites.” Yet another voice for this view responds, “I think the region needs a shared database that is computer accessible . . . There is also a need for one telephone number to be used in the region . . . 211 would be great.” An additional individual states that the “system would be improved by collaboration among providers in the region and sharing resource information.” More on this from another respondent: “Our efforts could be greatly enhanced with the establishment of the regional 211 network.” Yet again, “There needs to be one central access mechanism such as 2-1-1 as metro area residents are transient.” A countervailing opinion is “we do not have the staff

and/or technical capacity to work region-wide, nor are we convinced doing so would be the best option.”

A SHARED UNDERSTANDING

A tangled web is an accurate depiction of comprehensive I & R in the Greater Washington region. It is a web not symmetrically spread across the entire area. The current systems show differences in training, marketing, methods of staffing, call routing, operating hours, funding, taxonomy usage, tracking of calls, telephone equipment, and other features. The District of Columbia, Maryland, and Virginia have each chosen separate routes to management of the I & R system within their jurisdictions. These differing paths affect the process of 2-1-1 implementation within the jurisdictions and the region.

The implementation process must account for the many agencies outside of the scope of this report’s fact-finding, such as the smaller I & R agencies that provide information for target populations only or for small geographic areas. Though these agencies were not surveyed, they are an integral part of the system of I & R within the region.

Most I & R representatives within the District, Maryland, and Virginia remark that cooperation with neighboring I & R agencies in surrounding areas is very much a part of their implementation planning for 2-1-1. Opinions solicited on how to better meet regional I & R needs substantially support increased collaboration. Furthermore, the FCC has announced it would “expect community service organizations to work cooperatively to ensure the greatest public use of this scarce resource.” Regional partnership in the D.C. area appears to be an accepted practice for moving forward on 2-1-1.

Appendix A

Eligible Recipients of Survey

Alexandria Department of Human Services - Linda Cotton

Arlington County Department of Human Services - Linda McAllister

Community Ministry of Prince George's County - Rev Marian Wood

Community Services Agency – Jackie Barnes

CrisisLink - Arlene Krohmal

District of Columbia Department of Human Services – Earnest Taylor

Fairfax County Coordinated Services - Martha McIntosh; and Fairfax County Department of Systems Management - Elizabeth Way

Falls Church Division of Housing and Human Services - Pam Doran

Jewish Information and Referral - Sharon Doner

Loudoun County Department of Social Services - Michele Ransom

Lutheran Social Services - Winston Knight

Montgomery County Hotline/Mental Health Association – Shayna Hadley

Northern Virginia Regional Commission - Tylee Smith

Prince George's County Hotline - Andrea Morris

Prince William County Department of Social Services - Tom Meagher

United Way of Central Maryland – Sandra Bond

Agencies Contacted and Falling Outside Survey Parameters

Catholic Charities – Joan FowlerBrown

Montgomery County I & R Office – Parker Hamilton

Samaritan Ministry of Greater Washington – Roberta Wood-Benjamin

Respondent Agencies

Agency: Alexandria Department of Human Services

Name: Linda Cotton

Title: Information and Referral Specialist

I & R Program Name:

Phone: 703-838-0900

E-mail: LIC510@Northern.DSS.state.va.us

Fax: 703-838-0886

I & R Website: www.vaiandr.com

Agency: Community Crisis Services

Name: Andrea Morris

Title: Executive Director

I & R Program Name: Prince George's County Hotline

Phone: 301-864-7095

E-mail: pghotline@aol.com

Fax: 301-864-7146

I & R Website: www.pghotline.org/

Agency: CrisisLink

Name: Arlene Krohmal

Title: Executive Director

I & R Program Name: CrisisLink Hotline

Phone: 703-516-6766

E-mail: akrohmal@crisislink.org

Fax: 703-516-6767

I & R Website: www.crisislink.org (organizational website)

Agency: Department of Human Services

Name: Earnest Taylor

Title: Program Manager

I & R Program Name: *Answers, Please!*

Phone: 202-671-1456

E-mail: earnest.taylor@dc.gov

Fax: 202-671-2506

I & R Website: answersplease.dc.gov

Agency: Fairfax County Department of Systems Management for Human Services

Name: Martha McIntosh/Elizabeth Way

Title: Team Leader, Region 2 CSP/Team Leader, RIMS

Agency: Fairfax County Department of Systems Management for Human Services

I & R Program Name: Coordinated Services Planning

Phone: 703-533-5770/703-533-5718

E-mail: Martha.McIntosh@fairfaxcounty.gov/Elizabeth.Way@fairfaxcounty.gov

Agency: The Jewish Federation of Greater Washington

Name: Sharon Doner

Title: Director

I & R Program Name: Jewish Information and Referral Service

Phone: 301-770-4848/703-978-3910 direct line: 301-230-7288

E-mail for service: jirs@jewishfedwash.org

E-mail personal: sdoner@jewishfedwash.org

Fax: 301-230-7260

I & R Website: www.jirs.org

Agency: Mental Health Association of Montgomery County

Name: Shayna Hadley

Title: Program Director, Montgomery County Hotline

I & R Program Name: Montgomery County Hotline

Phone: 301-424-0656 x117

E-mail: shadley@mhamc.org

Fax: 301-738-1030

I & R Website: www.mhamc.org

Agency: Northern Virginia Regional Commission

Name: Tylee S. Smith

Title: Manager, Human Services Information & Referral

I & R Program Name: Human Services Information & Referral Program

Phone: 703-642-4638

E-mail: tylee@novaregion.org

Fax: 703-642-5077

I & R Website: www.novaregion.org/qgonline.htm

Agency: Prince William County Department of Social Services

Name: Tom Meagher

Title: Senior Project Leader

I & R Program Name: DSS call center

Phone: 703-792-7526

E-mail: tmeagher@pwcgov.org

Fax: 703-792-7363

I & R Website: n/a

Agency: United Way of Central Maryland

Name: Sandra J. Bond

Title: Associate Vice President

I & R Program Name: First Call for Help™

Phone: 410-895-1441

E-mail: saundra.bond@uwcm.org

Fax: 410-895-1556

I & R Website: n/a