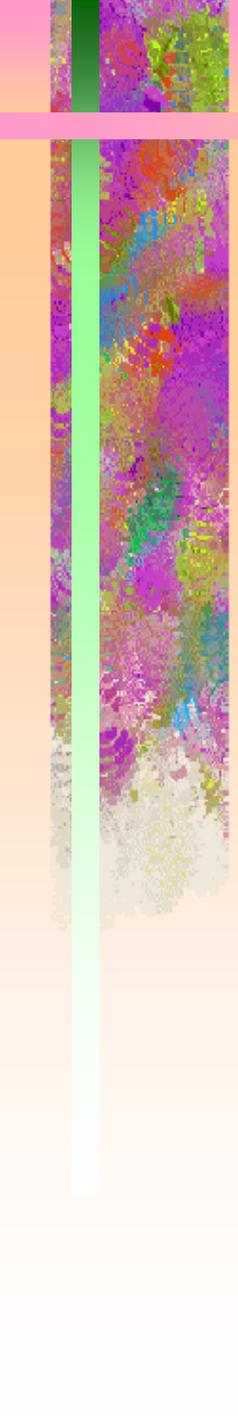




# **NEW WAYS OF DOING BUSINESS**

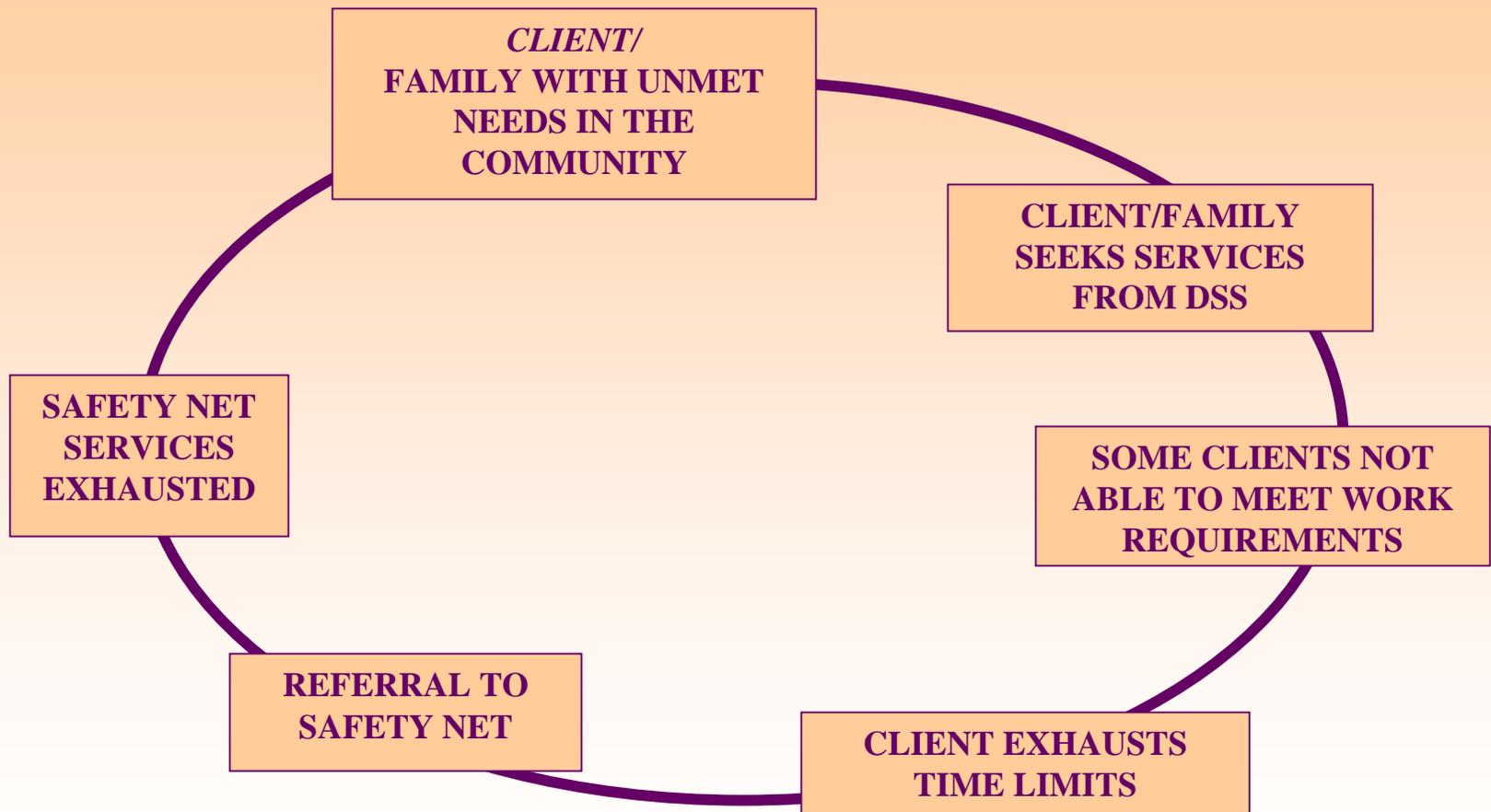
**HUMAN SERVICES INFRASTRUCTURE  
CAAs / 211 / DSS**



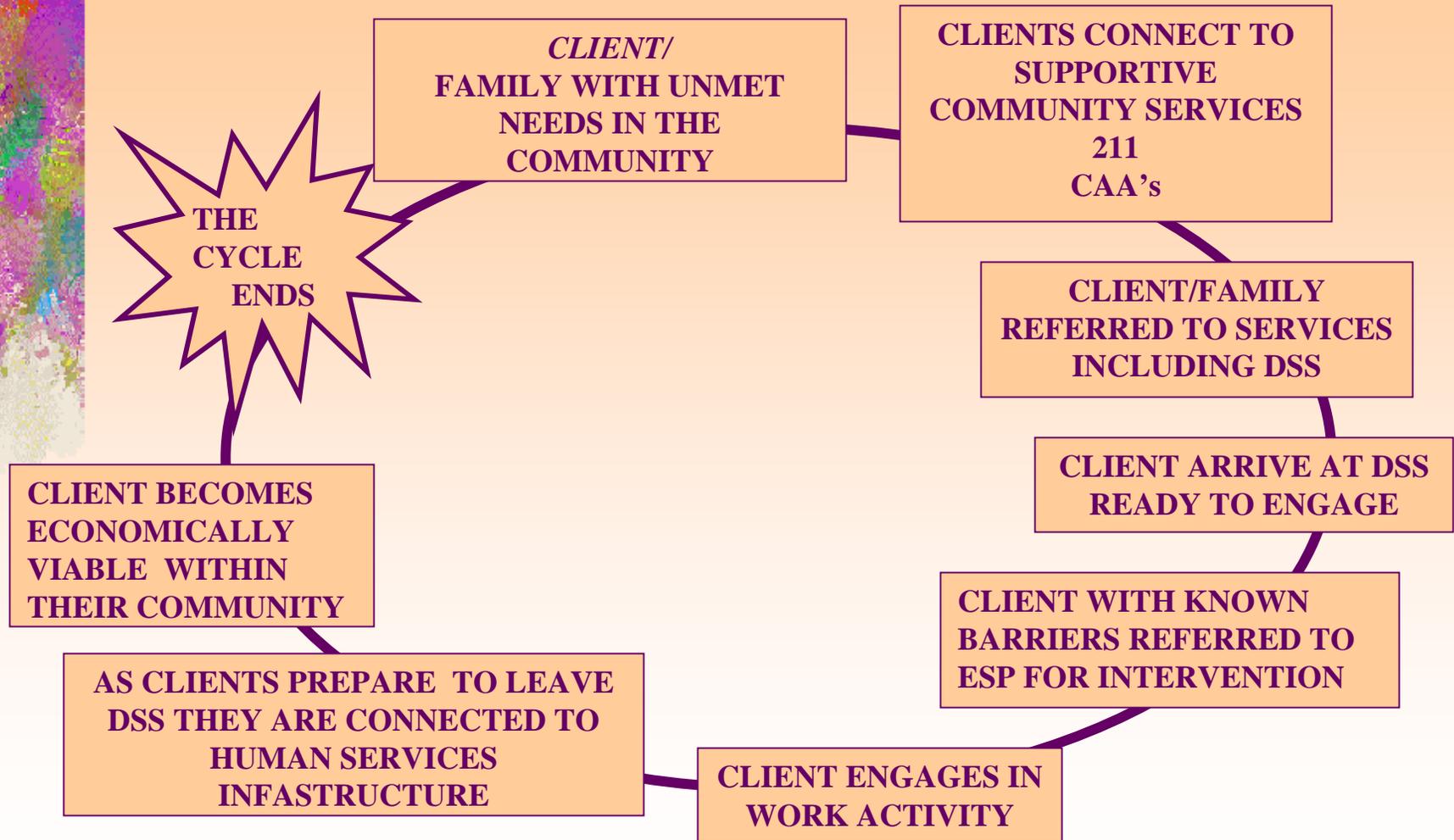
# ***HUMAN SERVICES INFRASTRUCTURE GOALS***

- **Better use of existing resources**
- **Connect clients to community resources before, during & after DSS intervention**
- **Get clients to DSS prepared to use services efficiently**
- **Co-ordinate “helping” services within the human service infrastructure**

*How is the cycle interrupted that returns clients to their communities no better off than when they initially sought benefits?*



***Clients with multiple barriers can become economically viable before the end of the time limit***



**THROUGH EVERY DOOR AN OPPORTUNITY TO SELF-SUFFICIENCY**



## THE VISION FOR CONNECTICUT'S HUMAN SERVICES INFRASTRUCTURE

In the system I envision, people would be able to get help that felt like help when they needed it and access concrete resources to support their efforts toward improved self-sufficiency.

The vision is for a coordinated system of services that people can access easily – whether or not they are DSS clients.

People who are not DSS clients would find services in the community to assist them to live better lives.

Those who need help that DSS can give, would arrive at the door better prepared to receive that help.

If those seeking services are in DSS's time-limited program and they have barriers to success, those barriers would be discovered and ameliorated so that twenty-one months would be enough time to build a foundation for success. Clients would leave the system employed and informed about services in the community to help them maintain independence, connect to helpful resources, build assets, and grow with their community.

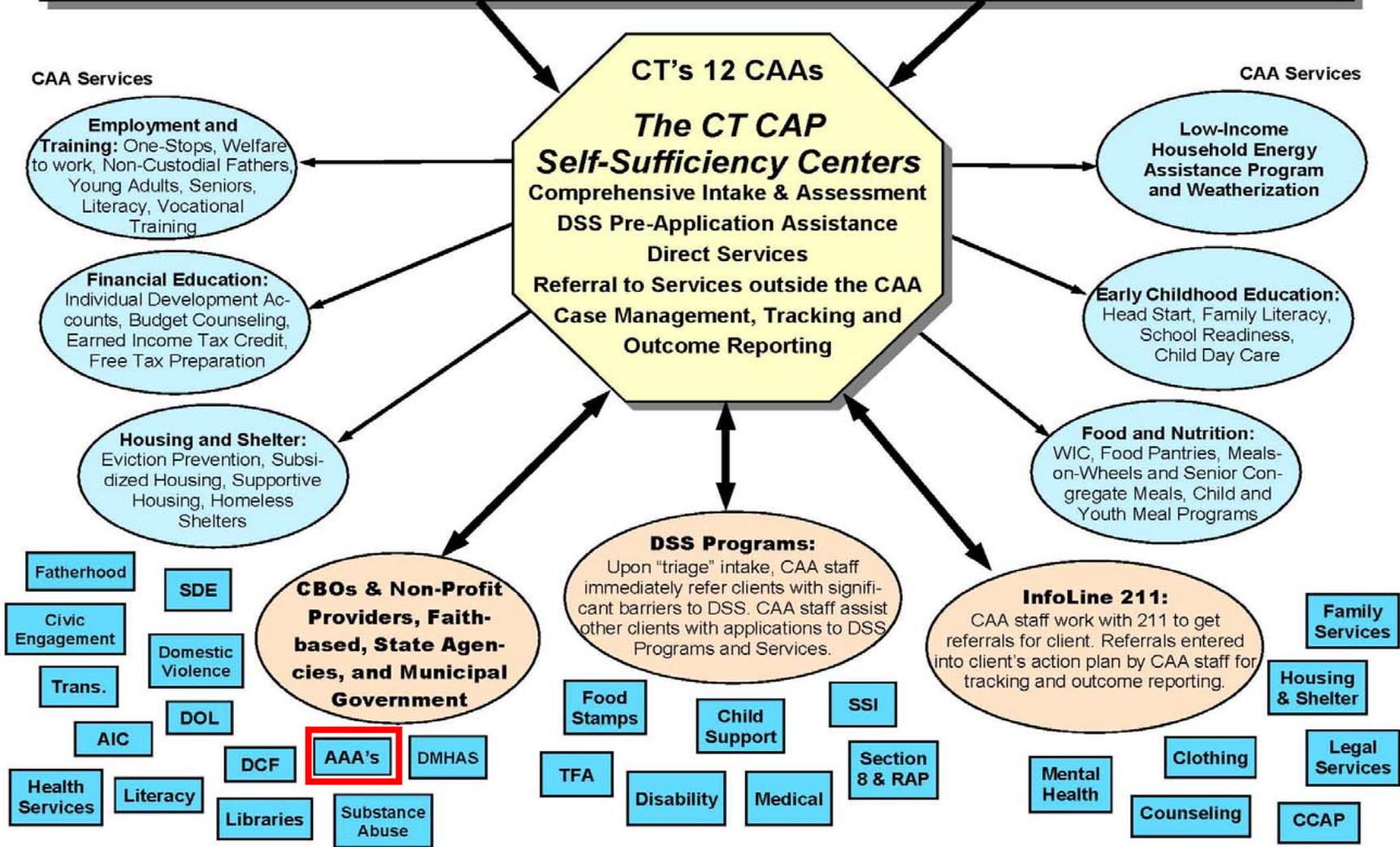
The information and referral system that supports people of all income levels during times of need, assists them to find help, and prepares them to efficiently use available resources.

The vision focuses on a social service system that is coordinated, outcome conscious and adequately funded. The system would consist of non-profit, municipal, state, federal, corporate, volunteer, faith-based, and university based resources. The system would be responsive to people within their cultural context, and sufficiently flexible to meet emergent needs.

Service providers and consumers will help inform the direction of state agency discretionary funding during periods of critical need, and help review the effectiveness of those services which are funded.

# Connecticut Human Services Infrastructure

## Low-Income Individuals and Families Walk-ins and Referrals from DSS, InfoLine 211, and others



# ADMINISTRATION ON AGING



## STATE UNIT ON AGING DEPARTMENT OF SOCIAL SERVICES ELDERLY SERVICES DIVISION



### AREA AGENCIES ON AGING

ONE STOP FOR:

- Benefits Eligibility Screening
- Information & Assistance for Elders and Caregivers
- Case Management, Tracking And Outcome Reporting
- Health Insurance Counseling & Assistance
- Medicare Fraud, Waste and Abuse Training
- Older Americans Act Funding of Community Based Services
- Advocacy for Elderly/Disabled Issues

Education and Training Programs for Seniors, Caregivers, Providers, and Professionals

Connecticut Home Care Program for Elders: Case Management for In-Home Services

Resident Service Coordinators For Elderly and Disabled Individuals living in Housing Complexes

National Family Caregivers Support Program for Elderly And Disabled Individuals

Statewide Alzheimer's Respite Program for Elderly and Disabled

Aging Resource Centers

Medication Management Programs

### AAAs Work Closely With The Following Providers

Disabilities Network	Connecticut Alzheimer's Association	RSVP	Mental Health Clinics and Professionals	Community Based In-Home Service Providers	American Association Of Retired Persons (AARP)	Elderly Nutrition Programs (ENP)	Adult Day Care Centers	Dial-a-Ride & Medical Transportation Providers	Grandparents As Parents Programs (GAPS)
----------------------	-------------------------------------	------	---	---	--	----------------------------------	------------------------	--	---

Local Media Providers	Senior Centers	Municipal Social Services	Long Term Care Ombudsman Program	211 INFOLINE	Protective Services For the Elderly (PSE)	Legal Services	Senior Housing	CAP Agencies	Center for Medicare Advocacy	Local Health Departments
-----------------------	----------------	---------------------------	----------------------------------	--------------	---	----------------	----------------	--------------	------------------------------	--------------------------

**HSI STEERING COMMITTEE**  
211  
CAA  
DSS

**MIS**

Darnell Goldson, Convener

**INTERNAL  
COMMUNICATION &  
CONFIDENTIALITY**

Ron Roberts, Convener

**TRAINING**

Sandy Worrell, Convener

**CONTRACTS**

Kathy Brennan, Convener

**CLIENT/CUSTOMER  
MAPPING**

Silvana Flattery/Pam Giannini  
Co-conveners

**PUBLIC RELATIONS/  
EXTERNAL  
COMMUNICATION**

Dave Dearborn, Convener

**EVALUATION**

D. McDonald/D. Homer-Bouthiette  
Co-conveners