

Strategic Initiatives Evaluation



Choice and Opportunity



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Phase 1 – Formative Evaluation P.E.I. Choice and Opportunity

Final Report

**Evaluation and Data Development
Strategic Policy
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Acknowledgements

The Choice and Opportunity project is a jointly funded federal-provincial Strategic Initiative which involves four partners — the Governments of PEI and Canada and the PEI and Canadian Associations of Community Living. Canada is represented by Human Resources Development Canada and the Government of Prince Edward Island is represented by the Department of Health and Social Services, the Regional Health Authorities and the Health and Community Services Agency which manages the project.

This evaluation study was conducted by the WHM Group of Fredericton, New Brunswick under the direction of the Evaluation Committee comprised of representatives from the four partners.

The evaluation team would like to thank all those who contributed to the study.

Table of Contents

Executive Summary	i
1.0 Background	1
2.0 Process Methodology	3
3.0 Document and Literature Review Component	5
3.1 Synthesis of Internal Document Review	6
3.2 External Literature Review — Synthesis and Analysis	8
3.2.1 Resource Allocation and Funding Models	8
3.2.2 Community Development, Integration and Inclusion	10
3.2.3 Individual and Family Support	11
3.3 Concluding Commentary	12
3.3.1 Indicators Of Effective Models	12
3.3.2 Indicators Of Effective Organizations	16
4.0 Key Stakeholder Interview Component	17
4.1 Process	17
4.2 Key Issues and Recommendations	18
4.2.1 Communications	18
4.2.2 Examination Of Choice And Opportunity Organizational Design	19
5.0 Analysis and Evaluation of Administrative Databases	23
5.1 Evaluation of the Merged Database	24
5.2 Recommended Data Collection Criteria for the Project	26
6.0 Integration of Study Component Findings	29
7.0 Review of Project Objectives and Evaluation of Achievements/Progress	33
8.0 The Partnership	37
8.1 The Partnership Model	38
9.0 Recommendations for a Successful Phase II Evaluation	41

Executive Summary

Choice and Opportunity is a partnership initiative of the Federal Department of Human Resources Development Canada, the P.E.I. and Canadian Associations for Community Living and the P.E.I. Provincial Government. The provincial government is represented by the Department of Health and Social Services, the Regional Health Authorities and the Health and Community Services Agency. The project is directed at individuals with intellectual disabilities and is attempting to re-design existing programs and delivery mechanisms while at the same time providing more opportunity for individuals to make decisions about how they want to receive supports and services. The project is also assisting generic agencies and community organizations to be inclusive of persons with an intellectual disability. *Choice and Opportunity* is one of a number of joint federal-provincial projects to be undertaken under the Federal Government's Strategic Initiatives Program.

In the evaluation of *Choice and Opportunity* it is necessary to consider the environmental factors that impact on both the project and the partnership. These environmental factors include: P.E.I. Health Reform, Canada's Social Security Reform and on-going provincial and federal public sector re-organization. These factors have a tremendous impact on the functioning, roles and workplans of the *Choice and Opportunity* partners. The ground breaking community development nature of such a federal/provincial partnership and the changing paradigms of support for those with intellectual disabilities presents immense challenges for all stakeholders and government policy makers. The project has brought forward an extremely complex set of changing expectations and new approaches that require the utmost in attention and commitment from the partnership and all of those involved at the design, development and implementation levels. This evaluation and any reading of the results must keep in mind the evolutionary state within which the partnership was born and the project was designed.

This report is intended to tie together the three study components of the Phase I — Formative Evaluation (Document and Literature Review, Key Stakeholder Interview Component and Analysis of Administrative Databases). The evaluation took place over an eight month period, from October 1995 to June 1996. The report brings together issues arising from each study component and highlights where findings from one component are reinforced by another and where evidence is inconsistent or contradictory. The report examines the level of achievement of goals and objectives, the partnership model and makes recommendations for the Phase II summative evaluation.

The first component of this evaluation involved a document review of all internal relevant documents surrounding *Choice and Opportunity*. This thorough review provided the knowledge base for the rationale of the project and material relevant for evaluating it. Specifically, the internal document review aimed to give evidence whether:

- Project components are well defined and can be implemented in given project design and delivery mechanisms;
- Goals/effects are clearly specified; and
- Plausible linkages exist between government priorities and project goals and objectives.

It was determined that several Human Resource Development Strategic Initiatives were not addressed in *Choice and Opportunity* objectives, as follows:

- Removing barriers, disincentives and rigidity within social programs; and
- Using new technologies to provide opportunities for persons with disabilities to work.

Overall, the *Choice and Opportunity* project objectives are conceptualized and transformed with clarity in the documentation detailing project design and delivery mechanisms. However, there was one area identified where the planning mechanisms are not clearly in place to support the project objective: provide individuals with a mental handicap with planning supports. It is important to mention, however, that planning for this objective is in place in the most recent model development documentation.

The first component also included an external literature review. This involved a critical review of the literature describing the Canadian situation as it pertains to individuals with intellectual disabilities, as well as the situation in other parts of the world. This component is intended to bring together the most outstanding indicators and components of effectiveness and success of the models reviewed. These successful components are examined in the context of the *Choice and Opportunity* project to give insights gained from this review that may contribute to the overall development and implementation plans of *Choice and Opportunity*.

With regard to effective funding mechanisms for individuals and families so they may plan and purchase the generic and specialized services they require, the following approaches have been successful in the models reviewed:

- Individualized payment methods must be flexible to best meet the needs of the individual; and
- Accountability of funds and record keeping to monitor services used and costs associated must be adhered to.

With regard to effective support networks and individual service plans, the following components have realized success in the models reviewed:

- Support for participating individuals with intellectual disabilities, staff and support networks; and
- Individualized service planning (ISP) can take a variety of successful forms.

With regard to community development and inclusion of people with intellectual disabilities the following principles have been successful:

- Human services are becoming increasingly professional, bureaucratic and regulated. The most innovative and responsive models are threatened by this trend. Community members may get discouraged from developing relationships with people with intellectual disabilities if there is excessive bureaucratic process involved.
- The successful projects and literature surrounding them have determined that the best way to develop the community to support people with intellectual disabilities is to involve them in an aspect that they feel comfortable with.
- To ensure sustainability to prepare for funding cutbacks, communities must have active volunteer support groups that involve all aspects of community life in their advocacy. For people with intellectual disabilities to live a meaningful life in the community they need the support of employers, the churches, town councils, the school system, recreational facilities and programs, etc.-not just disability-related services.
- With autonomous planning, self-determination, freedom of choice and increased community participation, the individual must be given the "dignity of risk". This means that choice can mean a good choice or a bad choice in our view and the individual must be given space to learn what was good and bad for them.

The second component of the phase I evaluation called for interviews with a series of key stakeholders who have had involvement and/or contact with the project to date. The key stakeholder interviews were intended to gather information and opinions from persons who are familiar with, and somewhat knowledgeable about, the design and the implementation of the project from a number of perspectives including: management structure, the role and the effectiveness of the partners, staff, target group and community involvement, model development, project success criteria, etc. Over the course of this phase of the evaluation approximately forty individuals were interviewed. Individuals from a range of experiences and involvement were included; members of the Steering and Operations Committees, staff involved in various aspects of the project, service providers, parents and self-advocates. The following is a list of the main areas for improvement based on the interviews:

- Internal Communications from:
 - Operations and Steering Committee to Staff; and
 - Staff to the Operations Committee.
- External Communications from:
 - Choice & Opportunity to Individuals (target group), Families and the General Public; and
 - The Community to Regional Advisory Committees to the Operations Committee.
- Examination of the "matrix management model";
- Commitment to strategic planning, team building and skill development for project staff, the Regional Advisory Committees and the Operations and Steering Committees; and
- Examination of Operations Committee membership before the project begins demonstration/implementation phase.

The third component of the evaluation was the database analysis. This project phase was originally intended to include database analysis and evaluation (subsequent to preparation of all pertinent databases), merger and manipulation of the provincial services administrative databases. This original workplan was revised to include the entire spectrum, from database preparation to evaluation.

The merged database does not provide baseline data sufficient to construct the complete "picture" of individuals with an intellectual disability in Prince Edward Island. The merged database merely presents the basic demographics of the individuals being targeting in the *Choice and Opportunity* project. These basic demographics include the region, age and gender of the individuals.

The largest analysis was conducted on the Social Services database which represented roughly 53 percent of the merged database. Within this 53 percent, 68 percent of the individuals represent the head of the household or the spouse with an intellectual disability. This was the only database to contain any information associated with income, expenses, family structure, employment, etc. It is important to remember that the analysis for this group only represents 37 percent of individuals in the merged database. For some purposes this information does give a useful picture of individuals with an intellectual disability that have received some type of service for the period April 1, 1994 to March 31, 1995. However, it is important to use this data with caution, keeping in mind its statistical representation of the whole as identified in the merged database.

In preparing for the merge and creating the merged database the following factors have been identified which negatively contributed to the final result.

- Certain elements/variables were never tracked or stored in certain databases (i.e., the information was never collected at source). Thus, the Social Services database had to be used to analyze this information on some level. This skews the results towards the family, income, employment, etc. situation of that particular population.
- The Social Services database contains information based on the head of the household which is the person with the intellectual disability or their spouse in 431 out of 630 individuals, thus the remainder of individuals (family members with an intellectual disability) are lost to any analysis.
- There was a disappointing number of matches ("hits") between the databases. This did not affect the number of records included in the overall merge. However, a large number of matches would have contributed to the authenticity/validity of the data.

It is important to consider the impact that the above factors have on the final merged database. It is suggested that any conclusions arrived at from analysis of the merged database and the Social Services database should be taken quite broadly. The data is not without merit but is not necessarily definitive.

In the integration of common/supported issues from all study components, several issues arise. The first is lack of clarity in the project objectives surrounding Human Resources Development's Strategic Initiative *to remove barriers, disincentives and rigidity within social programs*. . .

Similar issues have also been raised in the External Literature Review. The literature agrees that the above mentioned barriers must be overcome, however, there needs to be a balance between individual service needs and accountability of public funds, for which these rigidities were designed. There is an important point made in that the people involved at the system level often approach communities as if they are another system and attempt to make them adhere to bureaucratic rules and expectations. This evaluation determines that this issue, regarding barriers, disincentives and rigidities of social programs, is being properly addressed and overcome in the planning and resource allocation model development.

The second common issue is that of a project's need to involve the entire system (all government departments) in planning and decision making. As brought forward by the stakeholders, there needs to be a willingness to explore and influence change in current legislation, regulation and policy that affect *Choice and Opportunity* and its participants on any level. The evaluation determines that the stage is set for proper attention to this issue. A Policy Advisor has been hired to the project to research policy implications of *Choice and Opportunity* components.

The third common issue is the lack of articulated mechanisms to provide people with intellectual disabilities with planning supports. As brought forward by key stakeholders — the ability for individuals to be involved in the determination and planning of their supports will be a key success indicator for the *Choice and Opportunity*. The evaluation determines that this concern is comfortably addressed and planned for in the model design. The Prototype document examines this issue in great length. However, as learned from the literature, it is important for this support planning function to be offered by an organization or individuals that are separate and distinct from the funder and service providers so that maximum objectivity will be maintained.

It is important to tie all project activities to the original project objectives, as follows:

- To develop more cost-effective alternatives to assist people with disabilities;

- To identify duplication and gaps in service delivery and to develop plans for their elimination;
- To develop community support systems which are more responsive to individual needs; and
- To design and test a model of resource allocation for income assistance and community support services which is adaptable to other disabled individuals.

It is possible to measure particular pieces of the workplan that were developed to meet these objectives. Generally, the objectives are being achieved in the workplan. There have, however, been some difficulties encountered along the way. First the costing of services received by all persons with an intellectual disability on Prince Edward Island is still being tackled after the database analysis did not prove to be an accurate method. It is recommended that the best method at this point may be to look forward and do current costing based on needs and available services instead of costing based on past activities. Second, identifying duplications and gaps in services does not seem to have been completed. The workplan included identifying all services but did not go far enough to tie these services together to determine cross-overs or deficiencies. To avoid this type of oversight in the future it is necessary to always tie workplans to project objectives.

In evaluating the achievement of project objectives it is evident from all project components that the planning and resource allocation model development and design process is very highly regarded. Based on the documentation received, the model is taking into account any concerns or recommendations that have been raised throughout the process. The model development process is of high quality and continues to maintain a high degree of stakeholder involvement.

The *Choice and Opportunity* Project management structure involves four distinct partners, as described previously. Given the nature of the project objectives, this partnership arrangement is extremely important and critical to its success. One of the strengths of this partnership model of governance is that it brings scope and diversity of thought to bear on the project. Despite the many changes that have taken place, and are still taking place, all partners continue to be committed to the project. All partners see the process and the potential outcomes as an opportunity to demonstrate a new model of service delivery which may ultimately be transferrable to other service sectors. The lack of pre-project planning plagued the initial work of the Steering Committee and the Operations Committee. Virtually none of the necessary role definition work was done before the committees were created. Hence, the committees had to define respective interests and roles, and this, along with relationship building,

preoccupied the early work agenda of both committees. This evaluation determines, however, that over the past four to five months, both the Steering and Operations Committees have become clearer on their respective roles and stronger in these roles.

Stakeholders and the literature consulted characterize the key elements that make up an effective partnership as follows:

- A shared vision ;
- Frequent and honest communications;
- A sense of equity;
- Development of trust;
- A willingness to share responsibility and power;
- The ability to acknowledge and accept differences (validate and respect each other's roles);
- A respect for confidentiality;
- The ability to share strengths and resources;
- The ability to be creative;
- The capacity to support each other in pursuit of the project's objective;
- On-going team building efforts; and
- Skills in conflict resolution.

Initially, the management committees appeared to lack the knowledge and skills to develop the partnership relationship effectively. While a number of the above characteristics emerged over the course of time, the process was often of one of "trial and error" rather than a conscious understanding of the skills and supports required. The management committees could have benefited from input and influence from someone with facilitation, team building and project development skills. This resource was not there, and so the management committees had to proceed along the developmental "learning curve" on their own.

At some future point other partners will need to be included to help the project reach its ultimate objectives. Since much of the actual service activity will happen at the regional and community level, some of these new partners will be Regional Health Boards, District School Boards, local organizations and local businesses. Future project planning should provide for the training and support necessary to allow effective partnerships to emerge. In short, effective partnerships need to be planned and supported.

It is recommended that the Steering Committee take some time to reflect on the experience of partnership building. It is also important that they identify and document what went well and what was lacking, and ensure that future partnership development efforts are provided with resources and supports necessary.

The outcome or summative evaluation of *Choice and Opportunity* should determine the extent to which desired change has occurred for the participant/target group and the extent to which this change is attributable to project activities. The questions to be asked are:

- Did the project have the desired effect?
- Are the costs of the effects obtained acceptable?

It has become evident in this evaluation process that the most appropriate methodology to use in conducting the summative evaluation is a two-phased approach. The *Choice and Opportunity* Resource Allocation Model is scheduled for a demonstration phase in one PEI Health and Community Services' region. This demonstration phase is intended to be used as a trial run to determine strengths, deficiencies and necessary model and project modifications. It is also important that the data collection/tracking/intake/analysis methods, tools and software be tested in this demonstration phase. Therefore, it is necessary to ensure a continuous feedback loop during this phase of model implementation. It is recommended that a small scale evaluation be conducted during this demonstration phase to ensure that feedback is received and plans of action are formulated to deal with problems and barriers to implementation before the project goes province-wide.

This small-scale/demonstration evaluation will come before the larger summative evaluation to be conducted once the model has been implemented province-wide. The demonstration evaluation will contribute to methodology development and the successful implementation of the summative evaluation.

1.0 Background

Choice and Opportunity is a partnership initiative of the Federal Department of Human Resources Development Canada, the PEI and Canadian Associations for Community Living and the PEI Provincial Government. The provincial government is represented by the Department of Health and Social Services, the Regional Health Authorities and the Health and Community Services Agency. The project is directed at individuals with intellectual disabilities and is attempting to re-design existing programs and delivery mechanisms while at the same time providing more opportunity for individuals to make decisions about how they want to receive supports and services. The project is also assisting generic agencies and community organizations to be inclusive of persons with an intellectual disability. *Choice and Opportunity* is one of a number of joint federal-provincial projects to be undertaken under the Federal Government's Strategic Initiatives Program.

In the evaluation of *Choice and Opportunity* it is necessary to consider the environmental factors that impact on both the project and the partnership. These environmental factors include: PEI Health Reform, Canada's Social Security Reform and on-going provincial and federal public sector re-organization. These factors have a tremendous impact on the functioning, roles and workplans of the *Choice and Opportunity* partners. The ground breaking community development nature of such a federal/provincial partnership and the changing paradigms of support for those with intellectual disabilities presents immense challenges for all stakeholders and government policy makers. The project has brought forward an extremely complex set of changing expectations and new approaches that require the utmost in attention and commitment from the partnership and all of those involved at the design, development and implementation levels. This evaluation and any reading of the results must keep in mind the evolutionary state within which the partnership was borne and the project was designed.

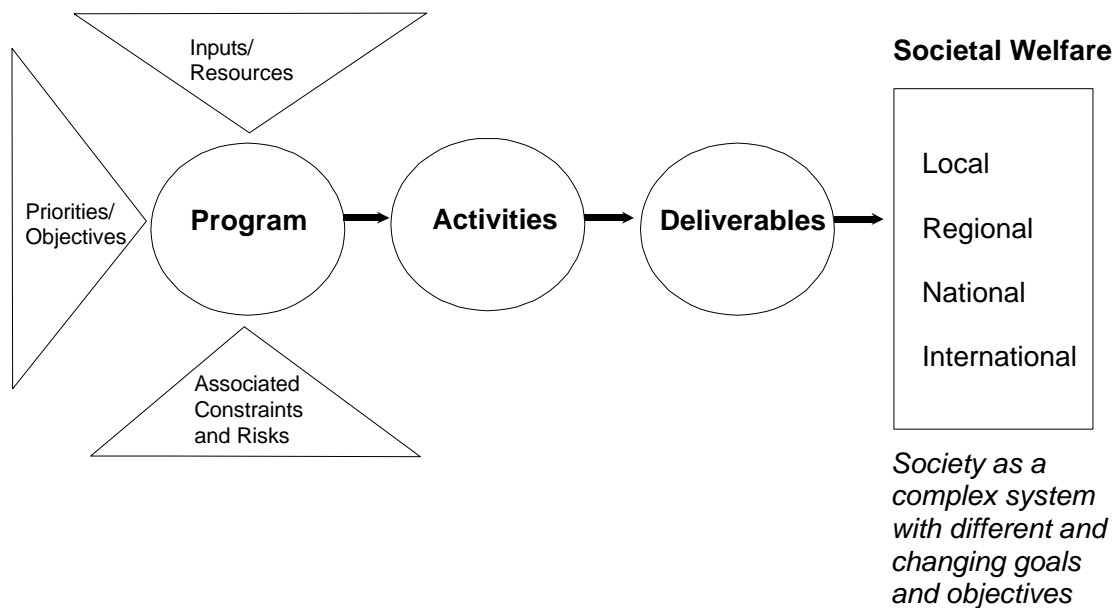
This Phase I Evaluation is the formative/implementation or process evaluation of the *Choice and Opportunity* project. The nature of this type of an evaluation is that it primarily provides objective feedback on project progress to date but also includes advice on desirable mid-course changes in any aspect of the project, other than its basic direction. In that respect, a formative evaluation is somewhat subjective, in that it involves the evaluators in some aspects of the project design and development process. To the extent that research findings clearly indicate that mid-course corrections are required, then the evaluators are expected to identify available options, including adjustments to staffing patterns and

approaches, organizational structure, policies and procedures, and the like. An effective formative evaluation process which operates at the grassroots level and involves project personnel, clients and families in assessment, ensures that information is obtained at the base which can be rolled up later for summative/outcome evaluation purposes.

Given the complex and diverse nature of public programs, like *Choice and Opportunity*, coupled with fiscal constraints and rising public concerns, it is becoming increasingly necessary to evaluate them in the context of their common thread — maximizing societal welfare. This “holistic” principle must form the base in the evaluation of public programs which should ultimately focus on enumerating effectiveness in terms of the program's contribution to societal well-being.

As shown in Figure 1, evaluation of public programs should respond to the link between various components of the entire system, which embodies a wide spectrum of activities and performance levels that require a specific type of feedback and performance indicators. This linkage is intended to allow decision-makers to make timely adjustments in order to maintain or enhance program performance. Feedback information is necessary to facilitate planning, monitoring, controlling, replanning and ultimately measuring the outcome of the program.

Figure 1



2.0 Process Methodology

The methodology used in this formative evaluation endeavored to maintain the utmost in stakeholder participation. The Evaluation Sub-committee was involved at all stages of the design, decision-making and approval process. Working closely with the Evaluation Sub-committee and the Project Manager was believed to be the best possible way to assist them in adjusting the project in relation to factors within the environment in which it is operating. As well, the evaluation aimed to operate in the collaborative environment already established by previous project activities. It is believed that the cross-fertilization principle embraced by *Choice and Opportunity* will greatly enhance the process of building community capacity to respond to the needs of individuals with intellectual disabilities and their families.

This Final Evaluation Report will: present an overview of the important results and recommendations resulting from the project components (Document and Literature Review, Key Stakeholder Interview Component, Database Analysis¹); attempt to integrate the project component findings; review project objectives and evaluate of achievements/progress; and finally, make recommendations for a successful Phase II Evaluation.

¹ These reports can be accessed through *Choice and Opportunity* project management referenced as follows: Final Report — Document and Literature Review (March 1996); Final Report — Key Stakeholder Interview Component (March 1996); and Final Report — Evaluation and Analysis of Administrative Databases (May 1996).

3.0 Document and Literature Review Component

The world of individuals with intellectual disabilities and their families has undergone profound changes during the past two decades. There has been a decline in institutionalized populations and a proliferation of community-based programs. New ideas and approaches — community integration, supported employment, individualized funding, self-advocacy, family supports and supportive living — dominate the literature today. The *Choice and Opportunity* project is working to bring many of these concepts into reality and to support those that have already been realized in Prince Edward Island.

In order to set the context for the Phase I *Choice and Opportunity* Evaluation, the literature review surveyed two areas: internal project documents and external literature. The internal document review examined all documents that are directly involved or have a direct impact on the *Choice and Opportunity* project design and delivery. This review was intended to examine the policy objectives, issues and initiatives of the partners involved in the project in order to compare them with the objectives, goals and principles of *Choice and Opportunity*. The purpose was to evaluate if the Principles of P.E.I. Health Reform and Human Resources Development Canada's Strategic Initiatives have been taken into account in project design and development. Subsequent to this, the *Choice and Opportunity* goals and objectives were analyzed to determine if the project design, delivery and current planning initiatives are sufficient to meet these objectives.

The external literature review involved a critical review of the literature describing the Canadian situation as it pertains to individuals with intellectual disabilities, as well as the situation in other parts of the world. The circumstances found in the literature were compared to the policy objectives and program design of the *Choice and Opportunity* project to determine if all the best components of models of resource allocation, service delivery, integration/inclusion, community development, family support, etc. have been examined appropriately in the design and development of the *Choice and Opportunity* project.

3.1 Synthesis of Internal Document Review

It is important to remember that, simply considered, government social policies and priorities are ideal prescriptions for action, and social programs, like *Choice and Opportunity*, are their concrete embodiment. History has determined that social programs exist for the purpose of carrying out ideals and solutions in the real world. In the case of *Choice and Opportunity*, the specifications for the project's shape are derived, in important part, from the concepts and meanings of terms in policy statements. Problems often arise in this derivation from broad policies to specific/practical project objectives. This synthesis, extracted from the main report (Final Report — Document and Literature Review — March 1996) presents an overview of divergences or inconsistencies between identified government priorities, project objectives and subsequent design and delivery mechanisms.

The internal document review was essentially used as a project evaluability assessment to examine this issue of government social policy being realized in *Choice and Opportunity*. Specifically, the internal document review aims to give evidence whether:

- Project components are well defined and can be implemented in given project design and delivery mechanisms;
- Goals/effects are clearly specified; and
- Plausible linkages exist between government priorities and project goals and objectives.

Project Relevance

The first question posed in the internal review was: "Is the project consistent with departmental and government-wide priorities and does it realistically address actual needs?" In answering this question the review focused on government priorities and the project objectives, design and delivery mechanisms to address these priorities. Generally, the project objectives tie very closely with government priorities, whether HRDC's Strategic Initiatives, P.E.I. Health Reform Principles or Main Stream 1992. These priorities, however, are very broad and transforming them into specific project objectives requires accurate and appropriate interpretation.

This review determines that the Principles of P.E.I. Health Reform and the Main Stream 1992 principles are addressed in *Choice and Opportunity* as closely as the overall project design will allow. Human Resources Development Canada's Strategic Initiatives are generally addressed by the project's objectives, however, there is a lack of clarity surrounding several initiatives, as follows.

1. *Removing barriers, disincentives and rigidity within social programs through approaches that tie income support to participation in community projects as an alternative to unemployment insurance or social assistance.*

This Strategic Initiative is a general project goal and is alluded to in the *Choice and Opportunity* Framework, " ... and the high degree of federal interest in reshaping social services so that they will be more supportive of the participation of marginalized persons in the labour favorable ...". However, there appears to be no strategic action plan to identify barriers of federal and provincial social programs and effective recommendations for change. These barriers and traditional solutions may work against the underlying vision of *Choice and Opportunity*. An example of some barriers, disincentives and rigidities include the following²:

- Medical certification and annual assessment of a disability which is a required step in the approval process for all current government programs is perceived as stigmatizing and as a personal infringement;
- Overly bureaucratic panels or boards to review claims and determine if funds are consistent with the individuals' service needs; and
- Conflicts of interest in having those involved in the system primarily determining individuals' funding amounts and acting as "gatekeepers". This creates strong incentives for these people to look after the system's interests before the individuals' interests.

Even though these are problems in the current system, they are in place to ensure accountability and expenditure control. These two characteristics still need to be adhered to in the new system but by more efficient and client-focused methods. There appear to be no specific project objectives or plans to examine these types of issues for transference to the new delivery system. Some

² Choice and Opportunity Discussion Paper Five, "Approving Costs for Disability-Related Supports".

solutions might be: service brokerage concepts, guidelines established for entry into the project, etc.

2. *Using new technologies to provide work opportunities for persons with disabilities.*

This Strategic Initiative is not specifically addressed in project documentation, however, it is alluded to by stressing the reduction of barriers to employment and supporting inclusive communities. A specific solution that could be incorporated into the project design and delivery mechanisms is a research effort in the area of new technologies and leading-edge work settings for people with intellectual disabilities to train and enter the workforce in creative and useful employment.

Project Design And Delivery

Overall, the *Choice and Opportunity* project objectives are conceptualized and transformed with clarity in the documentation detailing project design and delivery mechanisms. However, there is one area where the planning mechanisms are not clearly in place to support the project objective, as follows.

- Provide individuals with a mental handicap with planning supports

This objective is generally observed in the outline of duties for the Regional Advisory Committees (RAC's). However, a role that would be appropriate for the RAC's to play in this regard, but is not documented, is to identify sources (or lack of sources) where people with intellectual disabilities can go for assistance in planning their supports. These sources may be community organizations (ACL, People First, Citizen's Advocacy, etc.) or the development of a new concept, such as support networks, service brokers/coordinators, etc., that is seen as separate and distinct from the funder.

3.2 External Literature Review - Synthesis and Analysis

3.2.1 Resource Allocation and Funding Models

The literature suggests that the shift from supply-side to demand-side funding is key in achieving the goal of self-determination/planning for individuals with

intellectual disabilities. However, the transfer of dollars is not sufficient in and of itself to ensure that individuals have a complete spectrum of options available to them in deciding which services to receive and how to receive them. It is crucial that supports in the form of personal networks, brokerages or other arrangements to monitor services provided are in place as a measure of accountability and quality of service received.

Individualized funding seeks to promote self-determination by maximizing individual choice. It also seeks to redress inadequacies in the goods and services to which persons with disabilities have access. Most importantly, this method of funding represents a shift of control in that consumers play a key role in needs assessment. They are actively involved in identifying their needs and determining the most appropriate way of meeting these needs. Individualized funding allows them to become consumers of services rather than recipients of services.

Demand-side or individualized funding models rely on a well-developed system of service provision. It has been determined that these types of models do not function to their full capability unless the supports/services have already been put in place in the community and they are beyond the developmental stage of operation. As well, there are supporting services that are necessary to ensure that the individual can access their service/program of choice (e.g., transportation).

The range of literature surrounding individualized or demand-side funding determines the weaknesses and strengths related to this type of resource allocation model as follows.

Strengths

- Direct transfer of dollars to individuals may help to reduce the costly over-servicing of needs that often results from providing money to an entire organization to cover a variety of needs as opposed to the funding of individuals that may choose only what they really need (Alberta's Personal Support Services has determined this to be \$3000/person/month).
- Personal support services may be much more responsive to individual needs if individuals are determining and demanding that specific needs be met.
- Individuals would have the option to purchase services privately if a service provider does not exist to meet their particular need.

- Eliminates the monopoly on provision of supports by one provider which may increase the availability, accountability and diversity of supports, both generic and disability-specific, that an individual can access.

Weaknesses

- A complete shift from supply-side funding (direct support of service provider costs) to demand-side funding (support directly to individuals) could potentially destabilize the funding base of service providers which could directly affect the quality and level of services provided. It is important service providers buy into the concept, as several projects (BC Brokerage Society, Bristol Brokerage Society, Manitoba's "In the Company of Friends") have found that the system will not run smoothly if service providers still provide services to consumers with block funding and can opt out of providing services to those with individualized funding.
- There is concern about accountability of public funds. It is more difficult for governments monitor how these funds are spent when they are transferred directly to the individual (BC Brokerage Society and Bristol Brokerage Society downfalls).
- There is a fear that once individuals receive money for supports directly they will purchase "Cadillac" generic and specialized services as opposed to necessary services. This could mean that costs for support of persons with intellectual disabilities increase greatly.

3.2.2 Community Development, Integration and Inclusion

From the literature we see that as disability supports and services become more community — and person — centered, they move away from the traditional model/program approaches toward models/programs that facilitate changed relationships among people with intellectual disabilities, service provider agencies and communities. It is important to mention, however, that people involved at the "system" level often approach communities as if they are another system and attempt to make them adhere to bureaucratic rules and expectations (Britain's changes to the Independent Living Fund). One of the problems with this is that communities may come to see and define issues as the system does, instead of using their creativity to solve problems that may be unique to their particular situation.

Fundamental change, such as that which is the goal of *Choice and Opportunity*, does not appear to occur simply because legislation is passed, a new program is financed or policy is changed. Change is not only necessary in the formal support systems upon which people rely, but also in informal relationships, communities and the social mores that define how people should live together. Many of the organizations have found that encouraging informal community supports requires sensitivity. If the project staff or organization are too regulatory or demanding, the chances of individuals with intellectual disabilities forming real relationships with community members are diminished. However, if staff do not get involved at all, these relationships may never occur. Most agree that the more invisible the organization is in the person's life, the better that person's image is likely to be (i.e., Citizen Monitoring, Texas and friendly visitors in Wisconsin). Most successful organizations have one thing in common with respect to community inclusion and integration, that is, they believe that an individual's image, reputation and community role can be enhanced — they believe that a disability does not have to be a social handicap. They feel that the key to community inclusion is by assisting people with intellectual disabilities to fill valued social roles while quietly assisting community members to find positive ways of regarding and relating to these individuals.

3.2.3 Individual and Family Support

As suggested in the literature, supports refers to an array, not a continuum, of services, individuals, and settings that match the person's needs. This means that inherent in all models that have indicated successful outcomes is flexibility. A continuum of services suggests a linear path of movement, when really sporadic/flexible movement (array) is the key to meeting individuals varied needs at different points in their life. These should be matched in the context of the person's desires. Supports are resources and strategies that promote the interests and causes of individuals that enable them to secure access to resources, information and relationships as part of inclusive work and living environments and that result in enhanced interdependence, productivity, community inclusion and satisfaction.

The models deemed most effective and innovative are providing individual and family supports in a team effort or support network (Manitoba's "In the Company of Friends" and Self-Managed Care). The family is an integral and central part of that team. Additional team members are often selected based on the individual and family's needs and circumstances. They may include support coordinators, recreationists, community members, relatives, health professional, etc. — "whomever the individual or family identifies as being important". The strength of

the team approach, which is often organized by a support coordinator, is that it helps to provide a broad base of support and assistance to the family (Wisconsin's friendly visitors, The ARC's Citizen Monitoring, Manitoba's "In the Company of Friends").

The literature suggests that service/support coordination, in some form, is a crucial element of individual and family support. However, it is also reported that this type of coordination can also be very invasive if not designed properly. Without careful precautions, service coordination can revert to the traditional case management approach which was often felt to be taking control of families. The organizations that have realized the most success in the lives of individuals with intellectual disabilities and families have conceptualized their role as one of "service coordination" rather than traditional "case management", this approach often goes beyond a coordination effort to include social support for families. The successful individual and family support models place their emphasis on empowerment of individuals and families, providing them with full information about all support/service options in order that they can make knowledgeable, appropriate and informed decisions surrounding their needs and desires.

Another key component of successful individual and family support, is helping families and individuals to develop skills and competency as advocates. This will lead to long term sustainability of project goals if families and individuals can carry on articulating their needs to government and service providers when project staff are no longer there to carry out this function. This is conceptualized in the goal to "help individual and families to help themselves".

3.3 Concluding Commentary

3.3.1 Indicators Of Effective Models

The section is intended to bring together the most outstanding indicators and components of effectiveness and success of the models and information presented in the external literature review. These successful components are examined in the context of the *Choice and Opportunity* project to give insights gained from this review that may contribute to the overall development and implementation plans of *Choice and Opportunity*.

With regard to effective funding mechanisms for individuals and families so they may plan and purchase the generic and specialized services they require, the following approaches have been successful in the models reviewed:

- Individualized payment methods must be flexible to best meet the needs of the individual. Some successful methods used are as follows:
 - Money in cheque to be signed by the individual and a member of his/her support network or administrator of his/her account (e.g., BC Brokerage Society, Manitoba's "In the Company of Friends");
 - Money to be paid on the individual's account directly to the service providers/agencies that the individual and their support network have determined as part of their care plan (e.g., Alberta's Support for Independence-Disabled);
 - Money to be handled by a local trust company that is willing to partner with the project, to dispense payments, handle accounts, financial records, etc. Payments can go directly to the agencies identified by the individual and their administrator (a family friend) (e.g., BC Brokerage Society); and
 - The use of vouchers for "shopping and spending" at service provider agencies and community organizations (e.g., Personalized, Flexible Funding Strategies, United States).

- accountability of funds and record keeping to monitor services used and costs associated, has been accomplished in a variety of methods:
 - With each cheque sent to the consumer or trustee is a breakdown of costs associated with each expense incurred for that month and a list of monitoring/evaluation type questions to be answered by the consumer and the trustee and sent back to the funder;
 - Double signing authority of an administrator/trustee and the individual (e.g., BC Brokerage Society); and
 - For an acceptable fee a trust company could prepare financial records for each individual (BC Brokerage Society).

With regard to effective support networks and individual service plans, the following components have realized success in the models reviewed:

- Support for participating individuals with intellectual disabilities, staff and support networks:

- Along with individualized funding and/or new found freedom of choice it is crucial to incorporate a skill-building piece for individuals to help them with respect for those working for them, helping them with reasonable demands, etc. (Manitoba's "In the Company of Friends").
 - The individuals' paid workers need to be supported and monitored to prevent burnout and high turnover of staff ("In the Company of Friends").
 - There needs to be orientation sessions for support networks. It is crucial to educate on the great positive impact that getting involved will have on someone's life but there are negatives that need to be examined as well ("In the Company of Friends", Wisconsin's programs).
- Individualized service planning (ISP) has taken a variety of successful forms in the programs reviewed:
- The traditional case management approach cannot be used when self-determination/decision-making is the goal. However, a service coordinator/broker/ advocate is necessary to ensure the individual and family has complete information about all supports and services available and also to account for the quality and value for money that the consumer is receiving providers of supports and services (Nora Frye Research Institute, BC Brokerage Society).
 - Coordinators/service planners should be independent of providers of services and government so needs of individual are first priority. Good coordinators provide a "single point of entry" into services for the individual (BC Service Brokerage, Manitoba's Self-Managed Care project, Bristol Brokerage Society, Alberta's Personal Support Services).
 - Individuals and families must be at the centre of the decision-making process when determining needs and planning for supports and services with the support network, trustee, coordinator, etc.. However, it is important to build a responsive system that protects the individual when their families are not operating in their best interests with respect to support plans and purchasing services.
 - The service coordinator (if different from family) must provide individuals and families with complete information so they can

make informed decisions regarding services. The coordinator cannot make these choices themselves (BC Brokerage Society, The ARC of Texas).

- The innovative use of "lack of rules" — in which services and care plans are free to evolve with the individual. This is harder to achieve the larger the population of participants ("In the Company of Friends, Project RESCUE).

With regard to community development and inclusion of people with intellectual disabilities the following principles have been successful:

- Human services are becoming increasingly professional, bureaucratic and regulated. The most innovative and responsive models are threatened by this trend. Community members may get discouraged from developing relationships with people with intellectual disabilities if there is excessive bureaucratic process involved.
- The successful projects and literature surrounding them have determined that the best way to develop the community to support people with intellectual disabilities is to involve them in an aspect that they feel comfortable with (e.g., The Community Support Living Arrangements Program in Wisconsin, The trust company involved in the BC Brokerage Society).
- To ensure sustainability to prepare for funding cutbacks, communities must have active volunteer support groups that involve all aspects of community life in their advocacy. For people with intellectual disabilities to live a meaningful life in the community they need the support of employers, the churches, town councils, the school system, recreational facilities and programs, etc. — not just disability-related services.
- With autonomous planning, self-determination, freedom of choice and increased community participation, the individual must be given the "dignity of risk". This means that choice can mean a good choice or a bad choice in our view and the individual must be given space to learn what was good and bad for them ("In the Company of Friends", Self-Managed Care).

3.3.2 Indicators Of Effective Organizations

The most important lessons to be learned from the models, programs, personal accounts and literature presented in this document do not necessarily have to do with the service approaches, models or practices themselves. What is evident is that the so-called "state of the art" in resource allocation, community integration, service planning, etc. is constantly changing. The best approaches or practices remain so for only a short period of time and often if these approaches are not supported throughout the entire system, they are discontinued for the wrong reasons (budget processes, system restructuring, fears of accountability, etc.). Perhaps more important than specific approaches or practices is the nature of organizations that seek out responsive and respectful ways of supporting people with intellectual disabilities and their families.

While it is obvious from the literature that a fair amount has been documented about the needs of people with intellectual disabilities and the programs and approaches to meet these needs, relatively little attention has been devoted to the organizational context in which these programs are implemented. It is important to remember that "model programs" or "best practices" as outlined in this commentary cannot be considered independently of the organizations in which they are found. Organizations differ greatly. One organization following a particular approach may be successful in meeting the needs and preferences of the people it serves, yet another using the same approach may not. An organization's goals, ethos, history, leadership, culture, size and complexity all determine if it will be successful in realizing positive effects from model components that others have found beneficial. The most successful organizations surrounding programs or approaches are those which are responsive, creative, participatory and evolutionary in meeting the needs of those they are intending to support. Organizations that incorporate these qualities into their designing, planning, program implementation and redesigning are not only morally right, they are effective.

4.0 Key Stakeholder Interview Component

4.1 Process

The Terms of Reference for Phase I (Formative Evaluation) of the *Choice and Opportunity* Project called for interviews with a series of key stakeholders who have had involvement and/or contact with the project to date.

The key stakeholder interviews were intended to get information and opinions from persons who are familiar with, and somewhat knowledgeable about, the design and the implementation of the project from a number of perspectives including: management structure, the role and the effectiveness of the partners, staff, target group and community involvement, model development, project success criteria, etc. Over the course of this phase of the evaluation approximately forty individuals were interviewed. Individuals from a range of experiences and involvement were included; members of the Steering and Operations Committees, staff involved in various aspects of the project, service providers, parents and self-advocates, were among the list.

The evaluators used a prepared interview guide outlining a series of questions and topics related to the design and management of the project. The Project Evaluation Sub-Committee had an opportunity to review and comment on the questions during the development of the interview guide.

The following excerpt from the report for this component summarizes the findings and conclusions of the interviews with key stakeholders, and based on this feedback, makes a number of suggestions or recommendations for consideration by the Evaluation Sub-Committee.

4.2 Key Issues and Recommendations

4.2.1 Communications

Internal Communications

From Operations and Steering Committee to Staff

Staff need to have decisions made while the committees are together — it is much more difficult for them to get consensus on decisions when committee members have dispersed. This could be accomplished with some added structure and accountability at meetings, as follows:

- Concise and detailed minutes of Steering and Operations Committee meetings must be documented and actioned; and
- Discussions around all issues during meetings must arrive at tangible conclusions in the form of a vote for or against, an action plan to carry out the task, the person(s) responsible and the timeline for completion or reporting back. This must be recorded in the meeting minutes.

From Staff to the Operations Committee

There have been identified problems in the transfer of information, experiences and knowledge from project staff to the Operations Committee. The reporting mechanism (relay of information from the staff through the project manager) was not an effective means of either getting information of a specific nature across or of having the committee make appropriate and timely decisions in support of staff, their workplan and their timelines. This issue is expected to work itself out now that the project has completed its research components, however, staff must be carefully and frequently consulted to ensure that they feel their needs are being met with regard to information transfer and appropriate feedback.

Generally, the decision-making process at the committee level needs to be examined. It is important that there be a structured process of preparing for committee meetings from both the staff and the committee end. If decisions need to be arrived at during meetings it is important that proposals surrounding these decisions are presented with the background, the issues, the pros and cons, the time and the cost. This will ensure that the time allocated for the committee meeting is used most efficiently and staff can get decisions when they are needed.

External Communications

From Choice & Opportunity to Individuals (target group), Families and the General Public

Those that are not involved directly in the project need to have skepticism allayed as the project moves into demonstration/implementation. This could be accomplished through a well planned communications/public relations protocol such as a monthly newsletter, monthly articles in the editorial section of the provincial and local newspapers, short documentary segments on local radio or television networks, etc.

From the Community to RAC's to the Operations Committee

It is recommended that a clear communications protocol be established on which the RAC's could base their community feedback. Some stakeholders expressed the families' and service providers' concern that information is not being fully understood by the RAC members, and, therefore, not communicated correctly, even on an informal basis, to their community. Some RAC members are not sure what they are allowed to say to the public and what is considered pre-mature for discussion. The RAC members can begin to educate their communities and put to rest suspicion and cynicism surrounding the project if given the proper tools to do it.

4.2.2 Examination Of Choice And Opportunity Organizational Design

Examination Of The "Matrix Management Model"

Appropriate roles and locations need to be clarified and possibly changed to ensure that there is no overlap in authority or reporting between ACL, *Choice and Opportunity* Project Management and the Community Resource Workers. As the project moves into demonstration there cannot be inconsistent messages from the project to the community. The project staff must be viewed as a cohesive unit/partnership that has full support from PEI ACL but not dominated by them. Within the current staffing structure there is evidence that responsibilities, allegiances and authorities are unclear. This must be addressed before new staff are hired onto the project.

Commitment To Strategic Planning, Team Building And Skill Development For Project Staff, The RAC's And The Operations And Steering Committees

"Roles (of the four partners) need to be revisited before moving into the next stage of the project." (Operations Committee member)

"It is key that we have a clear workplan that has actions and responsibilities attached and most importantly that we follow our workplan and report on it to the Operations Committee. It is never too late to do some strategic planning." (Choice and Opportunity Staff)

It has been expressed that the roles of the staff, the RAC's and the Operations and Steering Committees need to be revisited as the project moves into the demonstration/ implementation phase. It is important that clear, concise and realistic work planning take place as the project moves into the next phase. Coupled with this workplanning needs to be an assignment of responsibilities matched with skill sets. This will determine if the existing complement of staff can handle the workplan and that the appropriate skill sets exist to achieve the best possible results.

It is also important to note that most stakeholders feel this is the stage where the Province and PEI ACL have to play more of a role since it is their money, resources and people that will be affected with the new service delivery model.

"The design and planning stages are one thing and it is a benefit for equality among the four partners, but the implementation/ delivery stage is different and the Province is the one who has to make this work so their end of the partnership needs to carry more weight." (Steering Committee member)

It is evident that the management structure at all levels of this project, whether staff or committees, need an investment of time to work on interactive team building, role clarification and re-assignment and realistic goal setting.

Examination Of Operations Committee Membership Before The Project Begins Demonstration/Implementation Phase

It is recommended that the input necessary to allow for continuous project re-development and re-design be incorporated into the Operations Committee membership. Once the project begins demonstration in select or all regions it is necessary that RAC members from these regions have direct input at the Operations Committee level. It is important to prevent misinterpretation of project

effects at the community level, as this will most definitely fuel skepticism and distrust in the community. It is not appropriate that this valuable and crucial information to aid mid-course corrections be translated from the regional level through one staff member to the Operations Committee, these views and opinions must be represented directly. Many feel that it is necessary to have RAC members from the demonstration regions included on the Operations Committee once the project moves into regional demonstration.

5.0 Analysis and Evaluation of Administrative Databases

The development of a qualitative and quantitative data collection and analysis system is crucial for measuring the project's effectiveness and, if necessary, redirecting project activities to better meet the needs of individuals with intellectual disabilities and their families. The analysis of information to be gathered, as well as information that has already been gathered, will ensure that the information systems and data collection plan is sufficient to meet the summative evaluation needs in order to measure project success factors and effectiveness indicators.

This project phase was originally intended to include database analysis and evaluation (subsequent to preparation of all pertinent databases), merger and manipulation of the provincial services administrative databases. This original workplan was revised to include the entire spectrum, from database preparation to evaluation. The following Provincial Government Databases were analyzed:

Home Care and Support Service (HCS)	Profile of people receiving services under Home and Support during 1992-95
Child Health Registry (CHR)/ Public Health Nursing	Birth weight; nutrition; counselling; immunization records of children in service. Started only Spring 1991 — oldest child 5.5 years
Early Childhood — Special Needs Grants	Profile on children in early education programs 1992-95, i.e., subsidized child care were assistant hired to work with children 12 years and under. Approximately 10 children identified
Health Information Systems (HIS)	Visits to physicians offices, hospitals, clinics between April 1/93 and March 31/95 by diagnosis, includes total physician billings
Social Assistance Database (FIS, MIS)	Detailed profile on families — organized by head of household receiving income support: includes dollars received through Social Assistance and through Family Support Program

As per the Terms of Reference, this phase was intended to develop a profile of the project, including current and background profiles of participants, non-participants and communities based on baseline data, needs determination, services available and service interventions. Further to the Terms of Reference, the database analysis component also aimed to retrieve the following information about persons with an intellectual disability on Prince Edward Island:

- Estimation of number of people in PEI with an intellectual disability that have received services of some type;
- Age of individual;
- Region of residence;
- Place of residence (institution, foster home, etc.);
- Family type;
- Number of individuals receiving services related to their intellectual disability and sources of those services;
- Percent of target group on social assistance;
- Employment status;
- Educational status; and
- Income of individual or family.

This excerpt from the database report presents an overview of the strengths and limitations of the merged databases, as well as recommended for data collection criteria for *Choice and Opportunity*.

5.1 Evaluation of the Merged Database

The merged database does not provide baseline data sufficient to construct the complete "picture" of individuals with an intellectual disability in Prince Edward Island. The merged database merely presents the basic demographics of the individuals being targeted in the *Choice and Opportunity* project (For details please refer to Analysis and Evaluation of Administrative Databases Report (April 1996) — Appendix A: Table 1). These basic demographics include the

region, age and gender of the individuals. Of the individuals identified, 20 percent are of unknown gender and 13 percent are of unknown age due to SEX & AGE fields being altered to reflect the fact that Head of Household may not be the individual who is disabled. The SEX and AGE associated with those individuals who are Head of Household but not coded as disabled have been marked and reported as unknown.

The largest analysis has been conducted on the Social Services database which represents roughly 53 percent of the merged database. Within this 53 percent, 68 percent of the individuals represent the head of the household or the spouse with an intellectual disability. This was the only database to contain any information associated with income, expenses, family structure, employment, etc. It is important to remember that the analysis for this group only represents 37 percent of individuals in the merged database. For some purposes this information does give a useful picture of individuals with an intellectual disability that have received some type of service for the period April 1, 1994 to March 31, 1995. However, it is important to use this data with caution, keeping in mind its statistical representation of the whole as identified in the merged database.

In preparing for the merge and creating the merged database the following factors have been identified which negatively contributed to the final result.

- Certain elements/variables were never tracked or stored in certain databases (i.e., the information was never collected at source). Thus, the Social Services database had to be used to analyze this information on some level. This skews the results towards the family, income, employment, etc. situation of that particular population.
- The Social Services database contains information based on the head of the household which is the person with the intellectual disability or their spouse in 431 out of 630 individuals, thus the remainder of individuals (family members with an intellectual disability) are lost to any analysis.
- There was a disappointing number of matches (“hits”) between the databases. This did not affect the number of records included in the overall merge. However, a large number of matches would have contributed to the authenticity/validity of the data.

It is important to consider the impact that the above factors have on the final merged database. It is suggested that any conclusions arrived at from analysis of the merged database and the Social Services database should be taken quite broadly. The data is not without merit but is not necessarily definitive.

5.2 Recommended Data Collection Criteria for the Project

Effective tracking of all *Choice and Opportunity* participants must occur to begin the formation of an accurate database necessary for outcome evaluation. The data that is analyzed, based on unique identifiers, in this report could potentially be helpful if individuals included in the database would release their information (through their unique ID) to *Choice and Opportunity* to continue tracking on more comprehensive level. It is important to collect the following information from consenting individuals and families:

- Name of individual (first and last);
- Address;
- Telephone number;
- Social Insurance Number;
- Date of birth;
- Region of residence;
- Place of residence (family home, institution, foster home, etc.);
- Family type/structure (single parent, living independently, siblings, etc.);
- Employment status;
- Educational status;
- Income of individual and family;
- Sources of income;
- Disability specific services (disability related supports) received by individual and their family;
- Generic services and supports received by individual and their family;
- Sources of services received;

- Costs of services received; and
- Record of satisfaction indicators (improved quality of life, health status, involvement in community, etc.).

6.0 Integration of Study Component Findings

This section will attempt to bring together the common/supported issues from all study components. The cases will be highlighted where findings from one study component are reinforced in another or where evidence is inconsistent or contradictory. The main components for comparison will be: the internal document review, the external literature review and the key stakeholder interview component.

Common Issue #1

As discussed in Section 4.1, Synthesis of Internal Document Review, there is lack of clarity in the project objectives surrounding Human Resources Development's Strategic Initiative to remove barriers, disincentives and rigidity within social programs... The barriers identified in this section include:

- Those involved at the system level (government) determining individuals' funding amounts and acting as gatekeepers, which creates incentives to put the system's interests before the individuals';
- A stigmatizing assessment/certification program as part of the approval process for government programs; and
- Bureaucratic panels or boards to review claims and determine service needs of individuals.

Similar issues have also been raised in the External Literature Review. The literature agrees that the above mentioned barriers must be overcome, however, there needs to be a balance between individual service needs and accountability of public funds, for which these rigidities were designed for (Section 4.2.1). In Section 4.2.2, as extracted from the literature review, there is an important point made that the people involved at the system level often approach communities as if they are another system and attempt to make them adhere to bureaucratic rules and expectations.

Resolution

This evaluation determines that this issue, regarding barriers, disincentives and rigidities of social programs, is being properly addressed and overcome in the planning and resource allocation model development. The details surrounding this issue are presented in the Model Development Working Group's "Design Features of the P.E.I. Planning and Resource Allocation Prototype" document. As presented in Section I — Planning and Resource Allocation Prototype, there are plans in place for: ensuring fair determination of disability-related costs; reviewing claims/applications; reviewing appeals; ensuring accountability of consumers and service providers. The question that remains, that is not determined in this document (see Section 4.2.2), is who will be involved in the review committee. As discussed in the literature and supported by stakeholders, the most important component is equal representation — system (government) representation equally weighted with representation from other sectors (e.g., professionals in the field, consumers, service providers, community members, etc.). There is good evidence, given the integrity and well-planned nature of the model development process to date, that the membership of the review committee will be an appropriate mix of representatives.

Common Issue #2

The external literature review³ and the key stakeholder interview component⁴ identify the issue of a project's need to involve the entire system (all government departments) in planning and decision making. As brought forward by the stakeholders, there needs to be a willingness to explore and influence change in current legislation, regulation and policy that affect *Choice and Opportunity* and its participants on any level. The inability to achieve this resulted in the downfall or the inability to flourish, of at least two projects of a similar nature — Britain's Independent Living Fund and British Columbia's Community Brokerage Service Society.

³ Final Report - Document and Literature Review, section 4.1 - Resource and Funding Allocation Models (BC's Community Brokerage Service Society and Britain's Independent Living Fund)

⁴ Final Report - Key Stakeholder Interview component, section 3.7 - Model Development

Resolution

The evaluation determines that the stage is set for proper attention to this issue. A Policy Advisor has been hired to the project to research policy implications of *Choice and Opportunity* components. As well, the Prototype document states in section 3.4: "The Health and Community Services Agency and the Regions, will establish working links with other agencies and departments to identify and participate in the development of necessary supports and removal of barriers (e.g., departments responsible for education, recreation, tourism, labour and employment, etc.)". This principle must be strictly adhered to not only on a provincial level but also on a federal level. This will ensure that barriers are anticipated and solutions determined before there is a threat to project progress and the effective delivery of the full spectrum of services to consumers.

Common Issue #3

The internal literature review and the key stakeholder interview series raise the concern of lack of articulated mechanisms to provide people with intellectual disabilities with planning supports. As brought forward by key stakeholders — the ability for individuals to be involved in the determination and planning of their supports will be a key success indicator for the *Choice and Opportunity*.

Resolution

The evaluation determines that this concern is comfortably addressed and planned for in the model design. The Prototype document examines this issue in great length in section 2. However, as learned from the literature, it is important for this support planning function to be offered by an organization or individuals that are separate and distinct from the funder and service providers so that maximum objectivity will be maintained. This principle is alluded to in section 2.2 of the Prototype document: "Individuals will have access to consumer-driven services to assist with identifying needed supports."

7.0 Review of Project Objectives and Evaluation of Achievements/Progress

This section includes the following components:

- Presentation of the basic objectives of the project in order to evaluate the achievement of goals;
- Identification of targets which are capable of being measured in relationship to the objectives; and
- Outline of progress in achieving these objectives and the intervening variables that were encountered and the recommendations to resolve these problems.

It is necessary to remember that there is a temporal variable to consider when analyzing whether or not the project has met its objectives. Some tasks or goals will be "immature" and no evaluation can be made until the final results are in. The time of the evaluation may in fact prejudice the evaluation as the goals and objectives of the project change and it evolves through this process and new issues are brought to the forefront. The evaluation has been sensitive to this issue.

Objective	Measurable targets to reach Objectives	Evaluation of Progress/ Results	Recommendations to continue meeting objectives or resolve problems
<p>1. To develop more cost-effective alternatives to assist persons with disabilities</p>	<p>a) Costing of services received by all persons with an intellectual disability on P.E.I..</p> <p>b) Resources expended on project to date from Draft Budget (as of May 13/96)</p>	<ul style="list-style-type: none"> - Analysis of databases was disproved as a potential method to determine costing. - Given stakeholder accounts, partnership principles and the 1995/96 budget — the amount of funds/resources budgeted to Citizen's Advocacy and People First was too small. This lack of partnership and support of these groups contributed to some of the negative feelings that surrounded the project in the beginning stages. 	<ul style="list-style-type: none"> - May be more efficient to look forward instead of back. The resources expended to date on getting the costing done has been extensive. At this point it is more appropriate to follow Roeher's model and continue on in facilitating and mapping current needs and existing resources. Their allocation mechanisms appear sound and should result in efficient and equitable distribution of funds. - The new budget accounts for this to some extent but may need to be revisited during implementation when community assistance and support is crucial.
<p>2. To identify duplication and gaps in service delivery and to develop plans for their elimination</p>	<p>a) Inventory of Programs, Services and Supports (Brenda Bradford)</p> <p>b) Planning and Resource Allocation Model</p>	<ul style="list-style-type: none"> - Thorough inventory - Meets goals and objectives as laid out in the Framework Document - Oversight in objectives for this piece of work was the tie together of this report with the identification of gaps and duplications in the services presented (as per project objective of <i>Choice and Opportunity</i>) 	<ul style="list-style-type: none"> - This evaluation determines that it would not be efficient use of resources to backtrack to meet this objective. - It is important for summative evaluation purposes, however, that workplans for each <i>Choice and Opportunity</i> component are tied back to project objectives. - A workplan should always be formatted to most efficiently and effectively achieve a project objective. If workplans consistently stray from this ideal then project objectives may need to be revisited.

Objective	Measurable targets to reach Objectives	Evaluation of Progress/ Results	Recommendations to continue meeting objectives or resolve problems
<p>3. Develop community support systems which are more responsive to individual needs</p>	<p>a) Individual Interview Series (Janet Bryanton) Family Interview Series (Janet Bryanton)</p> <p>b) Interviews with Service Providers in P.E.I. (Brenda Bradford)</p> <p>c) Incorporation of a,b,c into the resource allocation model</p>	<ul style="list-style-type: none"> - The processes that led to these reports have done their work with regard to determining individual and family needs as articulated by individuals and families themselves. - The service provider interview process fills in any gaps in needs that were not brought forward by individuals and families - Prototype is designed to achieve this objective. In section 1-6 — Measures to ensure the ready access of individuals to the supports they require and in section II-3 this is described — Plans and processes for building community supports and for removing community barriers 	<ul style="list-style-type: none"> - The model development process is believed to have included the community development work to date. - Plans are in place to achieve this objective if the model prototype is implemented as planned. This must be monitored and determined in the summative evaluation. - It will be necessary for the summative evaluation work, that "community development" is clearly defined. This term is interpreted differently depending on the individual, group, etc. Benchmarks are needed / objectives for community development.
<p>4. To design and test a model of resource allocation for income assistance and community support services which is adaptable to other disabled individuals</p>	<p>a) Design of the planning and resource allocation model.</p> <p>b) Test the planning and resource allocation model.</p>	<ul style="list-style-type: none"> - Stakeholders feel that the model development process has integrity - The working group members are trusted to make informed decisions — the comfort level of a successful outcome is high - Based on documentation and stakeholder accounts — the model design and organizational work is of high quality and incorporates issues arising from Brenda and Janet's work 	<ul style="list-style-type: none"> - Evaluation of model development process determines that it is well organized and of high quality. It is well regarded, maintained a high level of participation by stakeholders and the rationale is well documented and supported. - The evaluation of the implementation process and effectiveness of the model must be part of the Phase II — Summative Evaluation.

8.0 The Partnership

"To be meaningful and effective, partnerships must be committed and must operate on a basis of a shared and equal power in the decision-making process, both at the policy level and in the design and delivery of programs and services."⁵

"The goal must be compelling for the groups involved, but . . . unattainable by any one group, singly; . . . it must also supersede all other goals each group may have."⁶

The *Choice and Opportunity* Project management structure involves four distinct partners; the Canadian Association for Community Living, the Provincial Association for Community Living, the Provincial Government, and the Federal Government. Given the nature of the project objectives, this partnership arrangement is extremely important and critical to its success. One of the strengths of this partnership model of governance is that it brings scope and diversity of thought to bear on the project. Despite the many changes that have taken place, and are still taking place, all partners continue to be committed to the project. All partners see the process and the potential outcomes as an opportunity to demonstrate a new model of service delivery which may ultimately be transferrable to other service sectors.

There was some early concern about the Provincial ACL's role in the project. What sort of influence could it have on the planning and development with regard to the project? Could it continue to provide the necessary advocacy function (be critical, demanding, lobby, etc) if it was part of the management function? This seems to have worked itself out in recent months, and most people feel confident that the organization can play both roles in this context, but they also feel that other community advocate organizations can play an equally valid role if given the chance and the resources.

While the initial "learning curve" in terms of relationship building and role clarification was "ponderous and slow moving", most observers believe that this process was necessary, and may prove to be one of the ultimate strengths of the project.

⁵ Daryl Sturtevant, "Building Community Partnerships". AIDS Secretariat of Health and Welfare Canada, 1990.

⁶ M. Sherif, "Group Conflict and Cooperation", 1993.

Most stakeholders ultimately feel that the partnership model of governance for the project is appropriate and timely. The solutions to the issues that we are now facing, and those that we will face in the future will require us to develop collaborative and cooperative skills. The *Choice and Opportunity* Project is helping to develop a model of working together between four partners who have knowledge, power and resources to share.

The ACL, in particular, see *Choice and Opportunity* as a genuine chance to achieve some fundamental changes in the way services are designed and delivered. The national and provincial ACL's are playing a lead role in educating the other partners regarding the needs and current situation of those with intellectual disabilities, and their fervent desire to see change is one of the great strengths of the partnership.

Again, the lack of pre-project planning plagued the initial work of the Steering Committee and the Operations Committee. Virtually none of the necessary role definition work was done before the committees were struck. Hence, the committees had to define respective interests and roles, and this, along with relationship building, preoccupied the early work agenda of both committees. This evaluation determines, however, that over the past four to five months, both the Steering and Operations Committees have become clearer on their respective roles and stronger in these roles.

8.1 The Partnership Model

The partnership model, while viewed by many to be the future of program design, development and implementation, can be a very difficult process. The time, energy, and commitment to make a partnership work effectively is considerable. It is clear that when the four sponsoring organizations made the commitment to utilize a partnership model for program management, they did not fully understand how great the challenge was to become. In retrospect, many participants speak about the time and energy it took to develop an understanding and comfortability with roles, to develop a level of trust within the team, and to begin to define the project so that everyone could accept ownership and responsibility for its outcomes.

Stakeholders and the literature consulted characterize the key elements that make up an effective partnership as follows:

- A shared vision;
- Frequent and honest communications;

- A sense of equity;
- Development of trust;
- A willingness to share responsibility and power;
- The ability to acknowledge and accept differences (validate and respect each other's roles);
- A respect for confidentiality;
- The ability to share strengths and resources;
- The ability to be creative;
- The capacity to support each other in pursuit of the project's objective;
- On-going team building efforts; and
- Skills in conflict resolution.

Initially, the management committees appeared to lack the knowledge and skills to develop the partnership relationship effectively. While a number of the above characteristics emerged over the course of time, the process was often of one of "trial and error" rather than a conscious understanding of the skills and supports required. The management committees could have benefited from input and influence from someone with facilitation, team building and project development skills. This resource was not there, and so the management committees had to proceed along the developmental "learning curve" on their own.

The future learning for the management committees is that a true partnership is a process not an event. Just because different organizations make a commitment to a partnership model of working together, this does not mean that everyone has the values, knowledge and skills to make the partnership work. Many of the characteristics listed above must be must be planned into the process from the beginning.

At some future point other partners will need to be included to help the project reach its ultimate objectives. Since much of the actual service activity will happen at the regional and community level, some of these new partners will be Regional Health Boards, District School Boards, local organizations and local businesses. Future project planning should provide for the training and support necessary to allow effective partnerships to emerge. In short, effective partnerships need to be planned and supported.

Stephen J. Corber, Scientific Editor of Canadian Journal of Public Health, writes an article entitled Community Development and Partnerships (1993) which describes eight criteria for effective partnerships:

1. All partners must establish their own power and legitimacy.
2. All partners have well-defined mission statements; they have a clear sense of their purpose and organizational goals.
3. All partners respect each other's organizational autonomy by finding that visionary goal that is larger than any one of their independent goals.
4. Community group partners should be well rooted in the locality.
5. Institutional partners should have a commitment to partnership approaches in work with community groups.
6. Clear objectives and expectations of the partners are developed.
7. Written agreements are made clarifying objectives, responsibilities, means and norms.
8. All partners strive for and nurture the human qualities of open-mindedness, patience, respect and sensitivity to the experiences of persons in all partnering organizations.

It is recommended that the Steering Committee take some time to reflect on the experience of partnership building. It is also important that they identify and document what went well and what was lacking, and ensure that future partnership development efforts are provided with resources and supports necessary.

9.0 Recommendations for a Successful Phase II Evaluation

This section is intended to use the lessons learned in this evaluation to make several recommendations that may assist the Phase II evaluators in achieving the best possible outcome.

The outcome or summative evaluation of *Choice and Opportunity* should determine the extent to which desired change has occurred for the participant/target group and the extent to which this change is attributable to project activities. The questions to be asked are: (1) Did the project have the desired effect? and, (2) Are the costs of the effects obtained acceptable? The Phase II — Outcome/Summative Evaluation could potentially use a variety of methods depending on appropriateness and desired rigor:

- Traditional experimental (pre-test/post-test with control group);
- Quasi-experimental (interrupted time series); and
- Single-case studies.

For cost-effectiveness and in the best interests of the participant group involved it is recommended that quasi-experimental methods be used. This type of interrupted time series evaluation will ensure that the participant group is monitored throughout the evaluation period. Due to the nature of *Choice and Opportunity* it is important that a sample of participants be contacted as follows: at the baseline of project implementation (time 0 months); again six months later (time 6 months); and finally after the project has been in full operation for twelve months (time 12 months).

A case study component, as outlined in the original Terms of Reference for the Phase I evaluation, should be the main component of the quasi-experimental study in both the regional demonstration and province-wide project implementation. This component was believed to be more appropriate for the summative evaluation as opposed to the formative evaluation.

Due to the outcome-oriented nature of a summative evaluation, it is important to demand the following from the evaluation team chosen for the Phase II evaluation:

- In-depth knowledge and interview experience with target group;
- Skills in questionnaire/interview design and qualitative and quantitative data analysis;
- Minimal bias (i.e., cannot realize personal gain from outcome of evaluation, biases of in-province involvements, no conflict of interest); and
- Ability to commit long-term (due to case-study time series — may have 6 months in between interview series — month 0, 6, 12).

It has become evident in this evaluation process that the most appropriate methodology to use in conducting the summative evaluation is a two-phased approach. The *Choice and Opportunity* Resource Allocation Model is scheduled for a demonstration phase in one P.E.I. Health and Community Services' region. This demonstration phase is intended to be used as a trial run to determine strengths, deficiencies and necessary model and project modifications. It is also important that the data collection/tracking/intake/ analysis methods, tools and software be tested in this demonstration phase. Therefore, it is necessary to ensure a continuous feedback loop during this phase of model implementation. It is recommended that a small scale evaluation be conducted during this demonstration phase to ensure that feedback is received and plans of action are formulated to deal with problems and barriers to implementation before the project goes province-wide.

This small-scale/demonstration evaluation will come before the larger summative evaluation to be conducted once the model has been implemented province-wide. The demonstration evaluation will contribute to methodology development and the successful implementation of the summative evaluation.