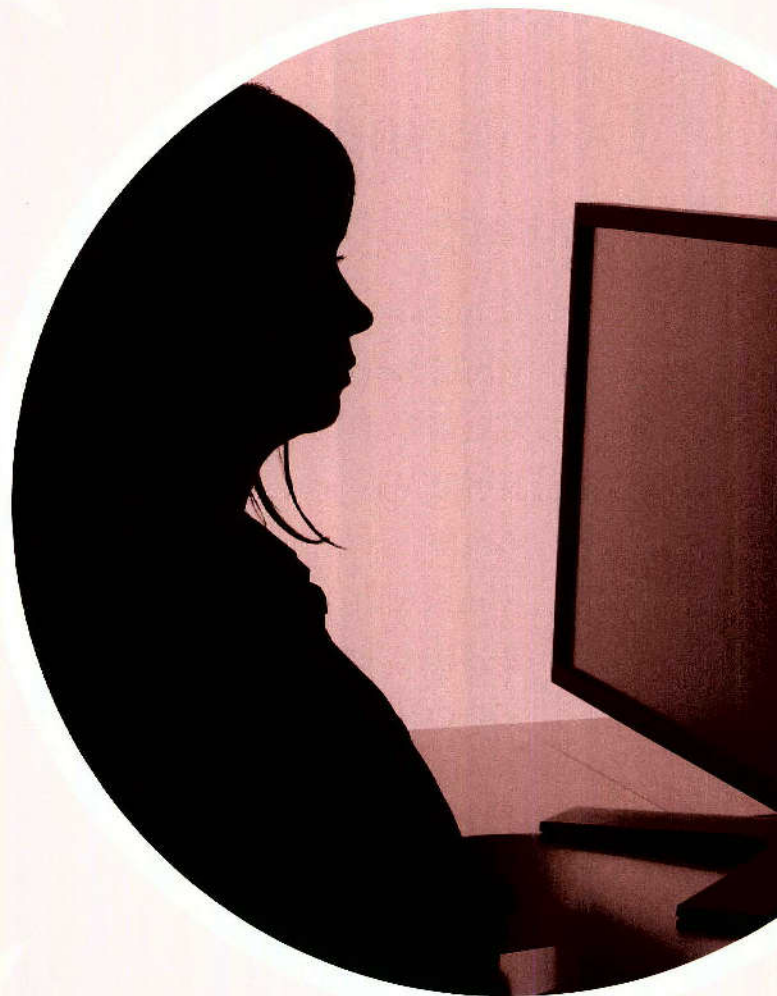


# Rules-Based

## The Path to a Holistic Worker

By Carolyn Kincaid



*Editor's Note: In 1996, Delaware's Department of Health and Social Services (DHSS) had a vision. This vision saw the citizens of Delaware seeking all public assistance services in one office served by one social worker. The state Division of Social Services (DSS), one of the 12 divisions under the DHSS umbrella, embraced this "no wrong door" approach to serving its citizens. Coinciding with this initiative was the development of a rules-based eligibility system implemented in November 1998, designed to support the "no wrong door" approach, and that ultimately led to the implementation of a "generic/primary case worker/manager."*

# Eligibility System

In 1996, Delaware's public assistance program eligibility was determined in a FAMIS—Family Assistance Management Information System—called the Delaware Client Information System (DCIS). Social workers would enter data in the system by using codes that corresponded to specific eligibility determinations.

Eligibility was determined this way for cash assistance, food stamps and Medicaid. There were different social workers who processed multi-program applications and Medicaid-only applications. Child care eligibility was determined by another group of social workers, who put data into a child care-only eligibility system.

There were also employment and training (E&T) workers, who recorded E&T activities in an E & T Management Information System.

Excluding Long-Term Care- (LTC) and Supplemental Security Income (SSI)-related Medicaid cases, each social worker had an average caseload of 174 cases.

The DSS began to pave the way for the new "generic case manager." This case manager would be expected to determine eligibility for cash assistance, food stamps, Medicaid and child care as well as manage E&T activities. LTC and SSI case managers assumed food stamp eligibility for their client population. The process of moving from a specialized social worker to a "generic" case manager took about two years. Delaware broke down the process into several steps and established work groups to address issues. Work groups were developed to handle the following tasks:

- job reclassification
- forms redesign
- procedure redesign
- site capacity issues
- caseload redistribution
- staff relocation based on specialty and need
- generic worker training
- pilot
- administrative redesign

The work group assigned to job reclassification had sensitive and arduous responsibilities. DSS administration promised staff that there would be no layoffs. However, redesign called for the elimination of certain job positions, such as data entry technicians. One of the tasks given to this group was to evaluate other state job classifications and determine which of these positions were suitable to the new roles needed to support redesign.

After determining which positions suited the redesign, job analysis questionnaires were submitted to the State Personnel Office for approval. The goal was to keep the pay grades of staff comparable to the new proposed positions, as well as offer staff the opportunity to apply for new job classifications. In some cases, this meant training staff whose positions were being eliminated so they qualified for the new positions. This also meant working with the labor union so they were satisfied with the proposed changes. This resulted in some staff being promoted to a new classification based on years of service and increased job responsibilities, such as social workers becoming senior social workers/case managers, data entry technicians becoming social service technicians and other staff filling typist and other clerical roles.

No staff members lost their jobs unless they chose to leave, and all staff were afforded opportunities to be retrained so they could qualify for the new positions.

The goal of the forms redesign committee was to combine program-specific applications into a single generic application form and to standardize all supporting verification forms and client communications. Designing one all-purpose application that could gather program-specific information involved policy and operation staff producing much iteration before a final version was approved. Long-term care was not included in the generic application due to specific eligibility criteria. To standardize all supporting forms and client communications, supervisors

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were asked to collect samples of both from staff. If the committee determined that a need existed for a specific form, they redesigned it for readability, accuracy, ease of use and improved client communications. This committee standardized the communications into appropriate format and presented this to the design team for the new eligibility system. Client communications are

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now contained in the Client Notice/Letter sub-section of Delaware's new Client Information System (DCIS II).

The redesign process included procedural redesign. The DSS eliminated photocopying permanent verification at every redetermination or reapplication, and simplified front-desk procedures. "No Wrong Door" was also implemented; clients could come into any office to apply for services. This part of the redesign process lessened the workload for staff and eased the burden on clients.

Another committee dealt with site capacity issues. An evaluation comparing client location to office location determined that to have better area coverage, new office locations were needed. Some new locations were opened and new staff units were added, bringing services closer to the client base.

Analysis was performed on existing caseloads to determine what these caseloads would look like after the

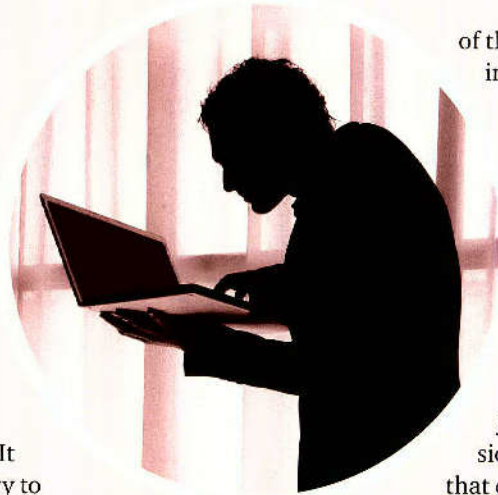
the new eligibility system was implemented.

Following caseload redistribution and opening new offices, staff relocation became the next task. The number of staff needed per site was determined. It was also necessary to have a supervisor and case manager specialist at each site if possible. These individuals would be the experts until all staff were comfortable with the transition. Volunteers were solicited for the new offices or for shifting staff across work units. There were enough volunteers to make all the necessary changes. Staff relocation and redistribution also made work unit sizes more uniform.

A major task essential to the success of redesign was training. The training occurred at three levels: supervisor, senior social worker/case manager and social service technician. For the supervisors, the training targeted was team-building, managing change and program training outside of their specialty. The training for the senior social

worker/case managers was program training outside their specialty. Job shadowing was part of the training for this group of staff. Client relation skills and customer service training was provided for social service technicians. The coordination of the training was critical to the implementation of redesign. It was done statewide over two to three months before staff assumed new responsibilities.

The division also went through an administrative redesign. The purpose



of this redesign was to improve support to service delivery and consolidate contracts, fiscal function and data reporting. It was designed to place people with required skills in the right job to make decisions and to ensure that decision-critical

information was more accessible and that technology support systems were in place to help administration. To accomplish this task, all field operations were shifted under the umbrella of one deputy director of DSS; all policy, planning, fiscal and technology units were under a second deputy director.

Implementing a rules-based eligibility system supported DSS' vision. Staff members now do not need to know all the minute eligibility details for all social service programs. Policy is programmed into DCIS II and eligibility is determined by the system via a program hierarchy known as a cascade. In 1998, when DCIS II was implemented, it determined eligibility for cash assistance, food stamps and Medicaid. In 2005, DCIS II was enhanced to include child care eligibility and employment and training activity tracking. DCIS II also supports caseload management, including alerts and case narratives, supplemental issuances, benefit recovery, quality-control sampling, adequate and timely noticing, mass mailing, reporting and sanctioning. Today, a person applying for services can have an eligibility determination made, benefits issued, and their case managed by visiting one office and seeing one worker. ■

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"generic" worker went into effect. This analysis involved "weighting" cases based on the composition of the case and balancing caseload distribution by the number of cases and the weight of the case. Distribution by ZIP code was also analyzed so we would know the ratio of cases and case managers to an office location. This redistribution of cases was phased in by work units. Actual case records were collected, redistributed and transferred to new locations. This process occurred before

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