Allegheny County Department of Human Services One Smithfield Street Pittsburgh, PA 15222

Phone: 412.350.5701 Fax: 412.350.4004 www.alleghenycounty.us/dhs

ALLEGHENY COUNTY LINK:A Summary of Data and Consumer Feedback

Prepared By: Brian Bell, Charles Odah, Evelyn Whitehill and Erin Dalton

May 2012



Allegheny County Department of Human Services

The Allegheny County Department of Human Services (DHS) is dedicated to meeting the human services needs of county residents, particularly the county's most vulnerable populations, through an extensive range of prevention, early intervention, crisis management and after-care services.

This report was prepared by the Office of Data Analysis, Research and Evaluation (DARE), an office within DHS. DARE supports and publishes research related to the activities of DHS offices, including: Aging; Behavioral Health; Children, Youth and Families; Community Services and Intellectual Disability.

DHS research products are available for viewing and download at the DHS Research and Evaluation webpage at www.alleghenycounty.us/dhs/research.aspx.

©Copyright 2012 Allegheny County DHS

Published 2012 by Allegheny County DHS

Allegheny County Department of Human Services One Smithfield Street Pittsburgh, PA 15222 Phone: 412.350.5701

Fax: 412.350.4004

www.alleghenycounty.us/dhs

Table of Contents

FIGURES	5				
CONTRIBUTORS					
OBJECTIVE					
SUMMARY	7				
DEFINITION OF DISABILITY	8				
ALLEGHENY COUNTY LINK					
METHODOLOGY	10				
Data Available	10				
Data Limitations	10				
DATA ANALYSIS	11				
CASE MANAGEMENT DATA SUMMARY	11				
SERVICE GAP	13				
Potential Client Base	13				
Staffing Needs	14				
2010 DATA SUMMARY	15				
SAMPLE STUDY OF CASE MANAGEMENT					
CHARACTERISTICS OF SERVICE SEEKERS	21				
Age Distribution	21				
Income	21				
Geographic Distribution	22				
Summary by Type of Disability	22				
Callers Needs	23				
MOST REQUESTED SERVICES	25				
Housing	25				
In-home Services	25				
Employment	25				
Financial Assistance	26				
Food	26				
Transportation	26				
Assistive Technology	26				

Table of Contents

OUTCOME OF	CASE MANAGEMENT	27
Positi	ve Outcomes	27
Negat	tive Outcomes	27
Uncle	ar Outcomes	28
UNMET NEEDS	5	28
Home	e Modification Programs In Pittsburgh & Allegheny County	30
Rente	rs Living with a Disability	31
SATISFACTIO	N SURVEY	33
CONCLUSION	S	37
BIBLIOGRAPH	Υ	38
APPENDIX A:	DISTRIBUTION OF CALLS BY ALLEGHENY COUNTY COMMUNITIES	39
APPENDIX B:	LINK SATISFACTION SURVEY	40
APPENDIX C:	VIGNETTE AR	42
APPENDIX D:	VIGNETTE ML	44
APPENDIX E:	VIGNETTE NK	46
APPENDIX F:	SAMPLE SIZE DETERMINATION	47
APPENDIX G:	NEEDS DESCRIPTIONS	48
APPENDIX H:	CASE NOTES CODING	50

FIGURES

List of Figures & Tables

Figure 1: Service Call Volume Change Over the Years	11
Figure 2: Service Calls from May 2008 to July 2010	12
Figure 3: New Callers Projection	13
Figure 4: Total Number of Actions Taken Each Month by All Workers In 2010	17
Figure 5: Sum of Steps by Action Taken	17
Figure 6: Service Call by Age Groups	21
TABLES	
Table 1: Allegheny County, Pennsylvania and US Residents Living with a Disability 2005-2007	8
Table 2: Service Calls Averages	11
Table 3: Average Time Spent by Activity	15
Table 4: Average Time Spent by Service Needs Type	16
Table 5: Service Calls by Categories	19
Table 6: Sample Size	20
Table 7: Additional Sample	20
Table 8: Service Calls by Categories	24
Table 9: Casework Outcome Duration, in Days	27

Contributors

The Allegheny County Department of Human Services (DHS) Office of Data Analysis, Research and Evaluation (DARE) would like to thank the following individuals from the DHS Office of Community Relations (OCR) for their assistance in initiating the research, providing the data, distributing the consumer surveys and sharing their expertise during the development of this report:

- Judith Barricella, Bureau Director, Disability Connection
- Joseph Elliot, Community Programs Manager, Disability Connection
- Karen Blumen, DHS Deputy Director, Office of Community Relations

Objective & Summary

OBJECTIVE

To analyze case notes and consumer surveys from Allegheny LINK to Aging and Disability Resources (LINK):

- Identify areas in which community/human service capacity does not meet the needs of people calling LINK for assistance (older adults and people with disabilities.)
- Evaluate the internal capacity of LINK to expand the provision of quality services to clients.

SUMMARY

The mission of LINK is to simplify and streamline access to long-term living services and supports and provide assistance to consumers who are seeking services and making long-term living decisions. LINK provides a wide array of services to Allegheny County residents of any age with a disability and/or anyone over the age of 60, and their advocates and professionals. LINK was founded in 2006 and is funded by the Pennsylvania State Office of Long Term Living.

The LINK website is a source of information on all aspects of life related to living with a disability; referrals are made to existing services within the Allegheny County Department of Human Services (DHS) or to other organizations.¹

A review of the data provided by the LINK administrative team and the consumer survey revealed the following findings:

- Service calls are steadily increasing over time.
- The majority of calls are about housing and home accessibility issues, especially for non-home owners.
- Based on past trends, service requests are predicted to increase by at least 2,300 annually; the total number of new callers should reach at least 15,000 by 2016.
- Callers were satisfied with the services they received.

These findings indicate that housing needs are paramount, LINK services are valued and additional casework resources will be required to manage the increase in consumer demand.

¹ http://www.alleghenylink.org/

Definition of Disability

DEFINITION OF DISABILITY

The Americans with Disabilities Act (ADA) defines a person with a disability as one who: (1) has a physical or mental impairment that substantially limits one or more major life activities; (2) has a record of such an impairment; and/or (3) is regarded as having such an impairment. A physical impairment is defined by ADA as "any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine."

Almost one-third of the general population has some functional disability. Functional disability is associated in part with lifestyle choices and increases with age in a nonlinear manner. (Krishnan, Sokka, Hakkinen, Hubert, & Hannonen, 2004). According to the 2000 US Census, 2.1 percent of the Allegheny County population live with a self-care disability and 3.3 percent live with a disability that prevents them from going outside of their home. A self care disability is defined as a physical, mental or emotional condition lasting six months or more, causing difficulty for the individual in doing activities such as dressing, bathing or getting around inside the home².

AGES 16-64

Area	Total Persons	M.E³.	With self-care	M.E.	With go-outside-	M.E.
			disability (Count)		home disability	
					(Count)	
Allegheny County	786,801	1,070	2.1% (16,523)	0.1	3.3% (25,964)	0.2
Pennsylvania	7,942,218	3,625	2.4% (190,613)	0.1	3.5% (277,977)	0.1
US	192,854,657	19,571	3.2% (6,171,349)	0.1	2.2% (4,242,802)	0.1

Ages 65 and over

Area	Total Persons	M.E.	With self-care	M.E.	With go-outside-	M.E.
			disability		home disability	
Allegheny County	198,930	301	9.7% (19,296)	0.5	17.3% (34,415)	0.7
Pennsylvania	1,779,802	1,256	9.2% (163,742)	0.2	16.7% (297,227)	0.2
US	35,664,222	8,735	17.6% (2,276,903)	0.1	10.4% (3,709,079)	0.1

Table 1: Allegheny County, Pennsylvania and US Residents Living with a Disability 2005-20074

² http://www.census.gov/hhes/www/disability/disab_defn.html

³ M.E.: Margin of Error

⁴ http://www.pascenter.org/state_based_stats/acs_counties.php?

Allegheny County

Link

ALLEGHENY COUNTY LINK

The LINK is a collaborative effort among local agencies, organizations and individual consumers, designed to help older adults and people living with a disability maintain their independence, dignity, and quality of life. Funded by the Pennsylvania State Office of Long Term Living, the mission of the LINK is to simplify and streamline access to long-term living services and supports and provide assistance to consumers who are seeking services and making long-term living decisions. Within the Allegheny County Department of Human Services (DHS), the Office of Community Relations (OCR) plays a primary role in managing the Allegheny County LINK.

LINK's Aging and Disability Resources are accessed by visiting the LINK website at http://alleghenylink.org/, by calling (866) 730-2368 TTY, (412) 350-5205 or by emailing allylink@dhs.county.allegheny.pa.us.

The LINK website provides a rich source of information for service seekers and providers at no cost. The Disability Community Resources publication provides a list of resources available through DHS and other sources. Individuals can find information on all services available to help older adults and people with a disability maintain their independence, dignity and quality of life.

While most service seekers request service by calling the phone number listed on the LINK website, a small percentage of service requests come from walk-ins.

Issues are resolved by referring clients to existing DHS services or services offered by other organizations. A small number of organizations can also provide financial support or lend assistive technologies.

LINK workers provide on-line or telephone assistance with the application process; they also make follow up calls and inquiries as necessary.

⁵ http://www.alleghenylink.com/

⁶ http://www.county.allegheny.pa.us/dhs/Link/about.asp

Methodology

METHODOLOGY Data Available

Services call data

A case file is created for each service call, to record information on services requested and provided. Demographic and income information is also recorded in order to make appropriate referrals. Case management data is recorded in a state-sponsored database available to local supervisors for the purpose of analysis.

Survey of caseworker time usage

Because data recorded was not time stamped, caseworkers were surveyed to evaluate time usage for each type of call. An average time was then calculated for each type of call.

Consumer satisfaction survey

When a service is provided, the consumer receives a satisfaction survey. These surveys are sent to a third party:

Commonwealth of Pennsylvania
The Governor's Office of Health Care Reform
Long Term Living Office/Survey
4th Floor Forum Building
Harrisburg, PA 15120

LINK receives a copy of each returned survey. More than 4,072 surveys were sent; 81 were returned. This represents about a two percent rate of reply. Each survey question is analyzed individually.

Data Limitations

Because the state database is designed for case management service, which makes it useful for purposes of analysis, the data is not useful for assessing quality and for evaluating complexity of issues. Time consuming activities, such as research to identify resources for a specific need, cannot be properly recorded. Additional information, such as veteran status of caller or whether or not the assistance served its purpose, could be useful.

Nonetheless, the data collected provide important information about the services provided by LINK.

Data Analysis

DATA ANALYSIS Case Management Data Summary

Service call volume averages can be found in Table 2, below.

Year	Count of service calls (y)	Percent Change=100* ((y2 - y1) / y1)
2006	851	
2007	2078	144%
2008	3151	52%
2009	4914	56%
Average	2749	84%

Table 2: Service Calls Averages

The volume of inquiries is increasing steadily. New callers initially inquire about services provided by LINK; repeat callers inquire about new issues.

There was a steady increase in the volume of calls from inception of the program in 2006 through 2009.

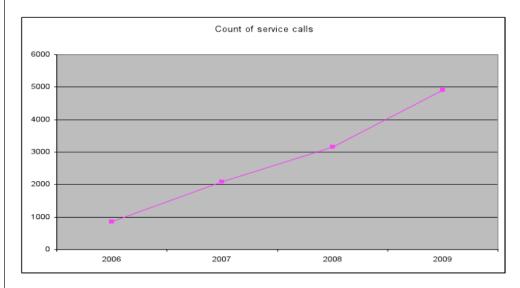


Figure 1: Service Call Volume Change over the Years

Not only is LINK becoming more widely known, it is also seeing an increase in the number of repeat calls regarding new issues. Both volume and diversity of calls are expected to continue over the next few years, primarily through word of mouth.

Data Analysis

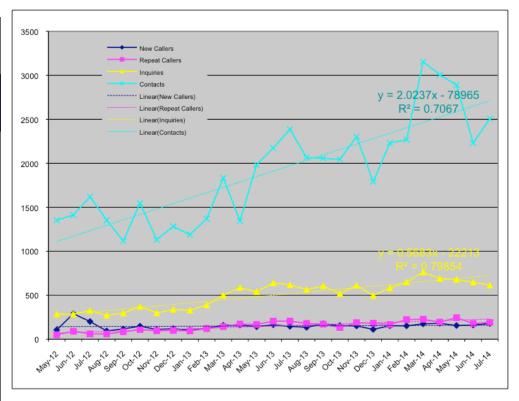


Figure 2: Service Calls from May 2008 to July 2010

An in-depth examination of service calls shows some notable trends:

- Service inquiry volume increases over time, particularly through word of
 mouth advertising. There is no evidence of periodic trends or seasonality
 in the data. The number of total callers is about the same every month.
 Nevertheless, there is an increase in the number of contacts required to
 resolve issues as the issues become more complex and require more
 time to resolve.
- When LINK opened, there was a rapid surge in the number of new callers.
 The number of new callers increased until August 2008 and has stayed about the same every month since.
- For each new caller, a case file is opened. When the same person calls for another issue, the case note will be added to that particular file.
 While the number of repeat callers has not increased significantly over time, there has been an increase in the number of times they call for additional issues (see Appendices C E).
- The increasing complexity of issues demands more time from caseworkers to resolve. The slope of the trend line for contact is four times greater than the slope of total inquiries, demonstrating the increased number of contacts required to resolve issues.

Service Gap

SERVICE GAP Potential Client base

From the start of LINK in May 2006 to June 2010, 3042 new callers requested services. Between 2005 and 2007, approximately 16,523 Allegheny County residents had a self-care disability and 25,964 were living with a disability that prevented them from going outside of the home. Although potential LINK clients often report SSI as a source of income, the small amount of this benefit has a limited impact on the well-being of the individual. These two groups represent potential LINK consumers, either through self-referral or through a request from a caseworker, neighbor or relative.

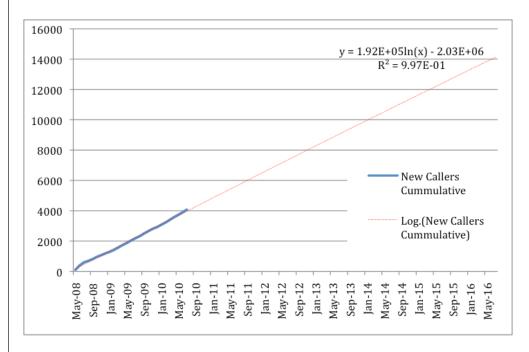


Figure 3: New Callers Projection

From the trend line equation shown in Figure 3 ($y = 1.92E + 05\ln(x) - 2.03E + 06^8$) we can project the number of months it will take to reach 21,243 individuals, a number which represents half of the individuals living with a disability severe enough to be classified in a census. Using this projection, we can see that by mid-2016, only about 15,000 individuals will have utilized LINK's services, leaving room for continued growth. A plateau for new service callers might occur at a later date.

⁷ Go-Outside-the-Home Disability definition based on a two-part question: "Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities: (c.) Going outside the home alone to shop or visit a doctor's office? From http://www.ilr.cornell.edu/edi/disabilitystatistics/glossary.cfm?g_id=244&view=true

⁸ R2 = 0.9976

Staffing Needs

Service Gap

A significant number of new callers become repeat callers (see Figure 2), and this is expected to increase in the future. Results from the Satisfaction Surveys, which can be found in Appendix B, demonstrate both a high rate of satisfaction as well as some areas in which service expansion is required. In order to maintain the quality of the service and to improve in the areas identified, additional staff will be needed. With the expected rate of growth over the next several years, it is expected that calls will increase by at least 2300 per year, even without outreach efforts. These data, combined with projected state and federal budget cuts, indicate that there will be an increase in need significant enough to require twice as many staff. Staffing must be at a level necessary to meet peak demand at all times; although Figure 4 shows that activity does fluctuate from month to month, a longer view of the data (Figure 2) shows that the peak of activity is not linked to any particular time of the year. Therefore, a seasonal increase in staffing will not be sufficient to meet this increased demand.

2010 Data Summary

2010 DATA SUMMARY

All data from 2010, the last complete year of data, were analyzed. Qualitative research with LINK leadership indicated that staff was currently at its maximum capacity, barely covering the current number of requests. In 2010, four staff members spent almost a thousand hours in direct case management activities, leaving little time for other responsibilities such as training, supervision, and administrative and ancillary duties.

Workers spend about five and half minutes per action and each episode requires at least an action and half, therefore, each episode requires about nine minutes. Actions range from 1.27 minutes to 16.83 minutes.

Data from Figures 2 and 3, in conjunction with Tables 3 and 4, show that an additional 332 hours of direct casework will be required each year to meet the increased number and complexity of calls. This trend is expected to continue for at least 5 years, at which time the cumulative increase will plateau.

Action Taken	Count of EPISODES	Number of ACTIONS	Time Spent in Minutes: ALL	Time Spent in Hours: MINUTES	Average Time Spent in Minutes: ALL
Advocacy	1683	3736	11311.33	188:31	6.72
Application Assistance	388	1156	6531.42	108:51	16.83
Counseling	2173	3330	13209.42	220:9	6.08
Information Provided	4036	7779	20018.08	333:38	4.96
Other	675	773	855.17	14:15	1.27
Referral	1789	11529	6324.33	105:24	3.54
Research	322	768	1634.08	27:14	5.07
Grand Total	11066	29071	59883.83	998:3	5.41

Table 3: Average Time Spent by Activity

2010 Data Summary

General Service Needs	Count of EPISODES	Number of ACTIONS	Average Number of Action per EPISODE	Time Spent in Minutes ALL	Time Spent in Hours: MINUTES	Average Time Spent per Action in MINUTES
Aging services	401	564	1.41	1645.58	27:25	4.10
Disability Services - Cognitive Impairment	42	122	2.90	198.33	3:18	4.72
Disability Services - Developmental	49	88	1.80	211.00	3:31	4.31
Disability Services - MH Services	435	703	1.62	2290.75	38:10	5.27
Disability Services - Physical	657	1137	1.73	2713.58	45:13	4.13
Disability Services - Sensory Impairment	45	75	1.67	185.50	3:5	4.12
Employment	246	421	1.71	1125.83	18:45	4.58
Housing	6162	20226	3.28	31750.50	529:10	5.15
Institutional/Resi- dential	122	210	1.72	531.00	8:51	4.35
Insurance	452	788	1.74	3681.67	61:21	8.15
Legal and Financial Services	1257	2547	2.03	6478.00	107:58	5.15
Pharmaceutical Ser- vices	46	73	1.59	218.83	3:38	4.76
Public Cash Benefits	740	1414	1.91	6799.67	113:19	9.19
Transportation	412	703	1.71	2053.58	34:13	4.98
Grand Total	11066	29071	2.63	59883.83	998:3	5.41

Table 4: Average Time Spent by Service Needs Type

Judging by 2010, it appears that the peak of activity occurs in April, coinciding with the end of winter. This may represent an increased demand for housing-related assistance such as utility assistance or weather-related repairs.

2010 Data Summary

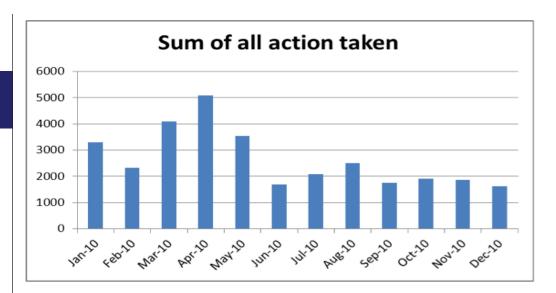


Figure 4: Total Number of Actions Taken Each Month by All Workers in 2010

As shown below in Figure 5, actions taken are categorized into seven groups:

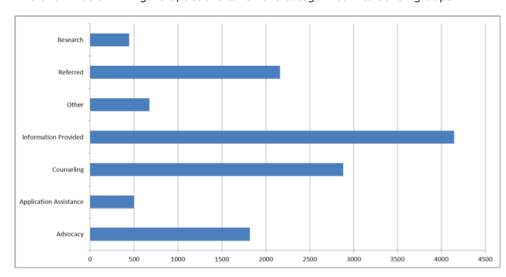


Figure 5: Sum of Steps by Action Taken

- 1. Research: After receiving a call, the caseworker will research the information, using the internet and other available resources that the consumer does not always find easy to navigate or comprehend.
- Referral: The caseworker will refer the caller to existing services.
 In most cases, a client 65 or older will be referred to the Area Agency on Aging; clients under the age of 18 or with an intellectual disability or mental health issue can be referred to the appropriate DHS program office.

2010 Data Summary

- 3. Information: Caller is given requested information.
- 4. Counseling: Caller is offered counseling (e.g.; budgeting).
- Application Assistance: Caller is assisted in applying for benefits; this is often after the caller has attempted to complete the application without success.
- 6. Advocacy: Caseworker advocates for caller in the case where an application is rejected because caller did not provide all the required information, such as details about his specific disability.
- 7. Other: anything that does not fit in the previous categories.

Application Assistance is the most time-consuming activity; referrals are the least. About one third of callers seeking information received it immediately; others required additional time and research or a further referral.

SAMPLE STUDY OF CASE MANAGEMENT Sample determination:

Sample Study of Case Management

Calls were tabulated as follows:

Categories	Count
Adult Day Care	11
Aging Services	85
Assistive Technology	297
Caregiver	10
Childcare	4
Disability Specific Information	87
Employment/Education	366
Financial Assistance	641
Food	491
Home Improvement/Repair	601
Home Modification	383
Household Needs	432
Housing	3572
Information and Referral	201
In Home Services	971
Insurance	599
Legal Services	397
Mental Health Services	270
Intellectual and Developmental disability Services	31
Personal Identification	26
Recreational/Social Activities	10
Respite	19
Safety	98
Social Security	224
Transportation	804
Utility Assistance	553
Total	11183

Table 5: Service Calls by Categories

Of the total case work sheets available, a small sample was identified for more in-depth reviews. A sample size⁹ above 99 was adequate to capture most of the trends with enough confidence. Each category is then represented in the sample according to its total percentage as follows:

⁹ See Appendix F: Sample Size Determination

Sample Study of Case Management

Categories ¹⁰	Count	% of total contacts	# of records to review
Adult Day Care	11	0%	0
Aging Services	85	1%	3
Assistive Technology	297	3%	4
Caregiver	10	0%	0
Childcare	4	0%	0
Disability Specific Information	87	1%	3
Employment/Education	366	3%	4
Financial Assistance	641	6%	7
Food	491	4%	5
Home Improvement/ Repair	601	5%	5
Home Modification	383	3%	4
Household Needs	432	4%	5
Housing	3572	32%	12
Information & Referral	201	2%	3
In Home Services	971	9%	10
Insurance	599	5%	6
Legal Services	397	4%	5
Mental Health Services	270	2%	3
Intellectual and Developmental disability Services	31	0%	0
Personal Identification	26	0%	0
Recreational/Social Activities	10	0%	0
Respite	19	0%	0
Safety	98	1%	3
Social Security	224	2%	3
Transportation	804	7%	8
Utility Assistance	553	5%	6
Total		Total (9.76 % margin of error, 95 % CI)	100

Table 6: Sample Size

In order to conduct a more thorough review of cases specifically related to barriers to accessing community services, 76 more cases were pulled as follows:

MAIN CONSUMER NEEDS	TOTAL
297-ASSISTIVE TECHNOLOGY	32
366-EMPLOYMENT	32
87-DISABILITY SPECIFIC	12

Table 7: Additional Sample

Characteristics of Service Seekers

CHARACTERISTICS OF SERVICE SEEKERS Age distribution

All age categories are represented.

Mean	56
Minimum	18
Maximum	95

The majority (66 percent) of service seekers are older adults and senior citizens. Thirty-three percent are young adults. Only two percent are 18 years old or younger.

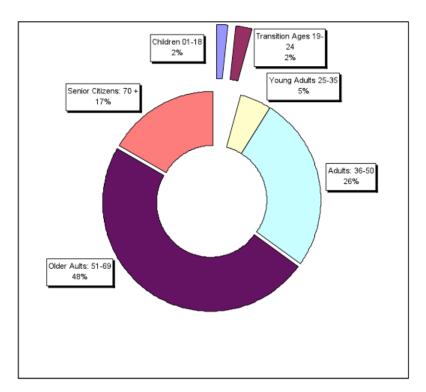


Figure 6: Service Call by Age Groups

Income

The mean household income of service seekers is \$1,023.44 per month, which is below 125% of the poverty level for a household with a single individual. The majority of callers lack social support and income to afford the necessary services. Some callers are just looking for information and guidance.

Characteristics of Service Seekers

Geographic distribution

Service requests came from throughout Allegheny County. Most calls originated from the City of Pittsburgh and immediate surroundings. There were also some service requests from outside of Allegheny County, seeking information or assistance for people who may or may not live within the county. A relative might call requesting information for a loved one or a call might be placed on behalf of a human services client living in or planning to move to the county.

The distribution is not correlated to racial, gender or economic factors. Requests occur from all neighborhoods of Pittsburgh and all the municipalities of Allegheny County, independent of average income or home values.

Summary by Type of Disability

Of the nine categories of disability (Mobility and Physical Impairments; Spinal Cord Disability; Head Injuries - Brain Disability; Head Injuries - Brain Disability; Vision Disability; Hearing Disability; Cognitive or Learning Disabilities; Psychological Disorders; Invisible Disabilities)11, about 60 percent of service seekers have Mobility and Physical Impairments. Service seekers who have a physical disability often cannot work and therefore rely upon a small fixed income from Social Security. Many service seekers have more than a single disability. Forty-six percent reported at least two disabilities and 11 percent reported more than three disabilities. Fortyone percent of callers reported having disabilities due to chronic diseases such as Diabetes, back pain, Alzheimer's disease and Osteoporosis. Some disabilities are the result of accidents. Some service seekers' disabilities are not severe enough to qualify for traditional services through federal and state subsidies, but they are severe enough to impede normal functioning at a work place. Even when reasonable accommodations are provided, working with such a disability is difficult. Because Social Security Disability benefits are awarded based on the presence and degree of functional impairment, many people in this category do not qualify for these benefits. (Eddy A. Bresnitz, 1994) Further compounding the problem is the fact that the payment is often not sufficient to cover needs.6

⁶ http://www.disabled-world.com/disability/types/

Caller Needs

Characteristics of Service Seekers A partial list of needs by individuals living with disabilities includes:

- In-home care
- Housekeeping and chore services
- Home modifications, safety and maintenance
- Health support (e.g., healthy lifestyles, management of chronic conditions, dementia)
- Respite Care
- Transportation
- Nutrition, including home delivered meals
- Housing, including senior and low income housing
- Assisted Living, nursing homes and other long term care facilities
- Financial assistance (e.g., Social Security, SSI, Disability, Medicare, Medicare, aid and other benefit programs)
- Legal issues (e.g., guardianship, power of attorney, client rights advocacy)
- Abuse, neglect and financial exploitation
- Mental health, alcohol and drug abuse, crisis intervention
- Employment, vocational services, volunteer work
- Adaptive equipment

For purposes of this summary, all calls were categorized as follows:

Characteristics of Service Seekers

Categories	Counts	Percentage
Adult Day Care	11	0.10
Aging Services	85	0.76
Assistive Technology	297	2.66
Caregiver	10	0.09
Childcare	4	0.04
Disability Specific Information	87	0.78
Employment Education	366	3.27
Financial Assistance	641	5.73
Food	491	4.39
Home Improvement Repair	601	5.37
Home Modification	383	3.42
Household Needs	432	3.86
Housing	3572	31.94
Information and Referral	201	1.80
In Home Services	971	8.68
Insurance	599	5.36
Legal Services	397	3.55
Mental Health Services	270	2.41
MR / DD Services	31	0.28
Personal ID	26	0.23
Recreation / Social Activities	10	0.09
Respite	19	0.17
Safety	98	0.88
Social Security	224	2.00
Transportation	804	7.19
Utility Assistance	553	4.95

Table 8: Service Calls by Categories

MOST REQUESTED SERVICES

Further information about the most-requested services follows:

Most Requested Services

Housing

Issues related to housing represent about 1/3 of call volume:

- Finding accessible and affordable housing
- Landlord/tenant issues
- Moving assistance
- Inability to pay rent
- Potential foreclosure assistance

In-Home Services

In-home services can be provided by private agencies that send a caregiver to the residence of the person living with a disability. In-home services often make the difference between being able to remain in one's home and having to move to a more restrictive environment. Examples of in-home services include

- Caregiver assistance
- Providing companionship and personal care
- Providing laundry and light housekeeping services
- · Assisting with bathing and dressing
- Preparing meals, serving meals and cleaning up
- Running errands and shopping
- Escorting to appointments
- Providing bathroom assistance
- Assisting with activities

Employment

- Employment assistance programs
- Information about/access to training and education

Most Requested Services

Financial Assistance

- Looking for direct financial assistance
- Seeking help with filing for unemployment
- Money management
- Credit counseling

Food

- Food pantry
- Food stamps
- Home meal delivery

Transportation

- · Vehicle purchasing
- Vehicle repairs
- Vehicle modification
- ACCESS¹²
- Medical Assistance Transportation Program (MATP)¹³

Assistive Technology

In order to keep individuals in their home and out of a more restrictive setting, modifications may be required.

- · Installation of Stair Glide
- Purchase of stair lift
- Handrails
- Grab bars

¹² ACCESS Transportation Systems is door-to-door, advance reservation, shared ride transportation provided throughout Allegheny County, serving primarily senior citizens and persons with disabilities.

¹³ MATP provides Allegheny County residents, who are eligible and receiving Medical Assistance, non-emergency medical transportation to and from MA-billable, non-emergency medical services.

¹⁴ See Appendix H: Cases Note Coding

Outcome of Case Management

OUTCOME OF CASE MANAGEMENT14

Casework outcomes can be divided into three main categories: Positive, Negative and Unclear.

The outcome duration is the number of days from the day a new service request is made until there is an outcome. The average duration is 54 days for all calls. Negative outcome duration is more than twice that of positive outcome duration. One possible explanation for the negative outcome duration may be the extra time that caseworkers are devoting to overcoming barriers. Only three percent of outcomes are clearly negative.

	All Calls Outcome	Negative Outcome	Unclear Outcome	Positive Outcome
	Duration	Duration	Duration	Duration
Mean	54	106	61	50
Standard Error	7	59	14	8
Median	10	49	29	8
Standard Deviation	92	144	87	91
Range	527	376	325	527
Count	174	6	39	129
Percentage	100%	3%	22%	74%

Table 9: Casework Outcome Duration, in Days

Positive Outcomes

Seventy-four percent of service requests have a positive outcome. Some examples of positive outcomes follow:

- Callers are referred to appropriates services within DHS or its providers
- Callers are linked to appropriate resources in the community such as non-profit organizations and foundations
- Information packages such as housing lists and newsletters are mailed to them

Negative Outcomes

The outcomes are negative when a caller expressed some dissatisfaction because:

- Needs are not being met
- The deadline for the application has passed
- The request is beyond the scope of LINK

Unclear Outcomes

Outcome of Case Management

Unclear outcomes represent 22 percent of service requests. The designation indicates that one cannot ascertain whether the need was met or not. There are several reasons why cases are designated unclear. This typically occurs because the caseworker's notes lacked sufficient information to make a positive or negative determination, the client stopped returning phone calls, or the phone was disconnected.

UNMET NEEDS

Unmet Needs

From the sample information collected, two general categories of unmet needs were identified:

- Conditions are not severe enough to qualify for services
- Finances were insufficient to pursue even subsidized services.

Many services are available for people who have a physical disability requiring a nursing facility level of care¹⁵ or Intermediate Care Facility / Other Related Conditions (ICF/ORC) level of care¹⁶, but most requests through LINK are from people who might not qualify for those services or simply do not have the information to apply.

Purchasing assistive technologies (wheelchair, stair glide/stair lift, access ramps and bathroom modifications) is a frequent financial challenge for callers. Subsidized financing of these technologies is available to callers, offering loans from \$100 to \$1,000 with little or no interest. The loan repayment terms can range up to three years, depending on the life expectancy of the assistive technology equipment purchased. However, most callers cannot afford to take a loan because their income is insufficient even for their basic household needs. One caller was quoted as saying that "It was too expensive, \$5,000 and I can't take out a loan."

For people who have a household income of up to 150% of the federal poverty level, a grant may be available for up to 50% of the total cost of the device or service. Grants are only available to borrowers who have exhausted all other funding sources and who meet grant eligibility guidelines.¹⁷

Most resources are available to people who meet stringent requirements for the level of disability and income. In order to qualify for services, persons over the age of 21 must have total countable resources of less than \$8,000 (\$2,000 Medicaid limit that includes a \$6,000 resource disregard). Resources include, but are not limited to, cash on hand, bank accounts, stocks, bonds, mutual funds, life insurance and vehicles. When income exceeds this limit, callers are referred to local charities or local churches. Housing needs account for 1/3 of all calls. For individuals living with a disability who own their home, there are limited home modification programs available. Two of those are described below.

^{.5} http://www.alleghenycounty.us/dhs/independentwaiver.aspx

¹⁶ http://www.alleghenycounty.us/dhs/obra.aspx

¹⁷ http://www.patf.us/pdf/PATF-Mini-Loan.pdf

¹⁸ http://www.alleghenycounty.us/dhs/aidswaiver.aspx

Unmet Needs

Home Modification Programs in Pittsburgh and Allegheny County

In Pennsylvania there are few services available that allow for individuals living with a disability to stay in their homes. Services available are in the form of public housing or supported/assisted housing. But the options are limited:

The Home Accessibility Program for Independence (HAPI), provides a limited number of grants and low interest loans for accessibility modifications.

Eligible HAPI Accessibility Modifications:

- Exterior Lift
- Exterior ramps
- · Interior stairglide
- Modifying doors (e.g., changing hinge system, rebuilding existing door frame and replacing the door)
- Visual doorbells and/or visual smoke alarms
- Relocating environmental controls (e.g., light switches, electrical outlets, heat controls to accessible heights)
- Bathrooms: Enlarge and/or modify the existing bath (e.g., grab bars, turning radius, widening doors)
- · Creating new first floor bath
- Kitchen: Safety/accessibility modification (e.g., vent gas cooktops, counter oven, appliances with front controls, lowering kitchen counters)
- Other items may be considered at the discretion of the HAPI Consortium.

Rebuilding Together Pittsburgh is a non-profit organization dedicated to keeping low-income elderly and disabled homeowners living in warmth, safety, independence, dignity and decency, through home repair and rehabilitation.

Rebuilding Together Pittsburgh assists elderly Allegheny County residents who have worked hard to maintain their homes in the past, but have become physically frail and financially unable to continue with the upkeep of their homes. Many of the homes have deteriorated to the point of being unsafe and unlivable.¹⁹

¹⁹ http://www.rebuildingtogether-pgh.org/

Unmet Needs

Renters Living with a Disability¹⁰

According to the National Council on Disability, in a report to President George W. Bush²⁰, renters living with a disability tend to live in a congregate care situation. Those living in a family setting tend not to seek help, as family members take on the burden of care. Renting on one's own creates an entirely different set of issues.

A review of casework notes reveals examples of some of the obstacles individuals with disabilities face when attempting to rent a home:

Citation 1:

 "She said she had a Section 8 voucher from McKeesport, but she lost it because she didn't find anywhere to live, she got it in August, she said she couldn't find anywhere that she liked to live, that there is no help for people under the age of 60 with disabilities and no one calls you back."

Citation 2

- "Rent to own, started 2 years in September. Deed is not in her name.
- The property owner is willing to let whatever needs to be done to make the house work for her.
- Not receiving any other services from anyone else.
- Is there something that the property owner can do to be reimbursed for that?
- Husband is a veteran, but is not receiving any services through them.
- Maybe there would be something that could help them there too?
- She went into the hospital for a brain hemmorage and when she came out she went to rehab to get help with functioning. She was released from rehab on Friday and people are following through with physical therapy at the house. She has a push wheelchair that she uses to get around.
- The boys take her down 3 steps to get to appointments if she has to leave the apartment.
- She does have an electric wheelchair getting fixed, so that will help with her moving inside, but she still won't be able to leave the apartment to the outside.
- Called Rebuilding Together Pittsburgh. They wouldn't be able to do it because of the rent to own."

²⁰ Workspace\Literature\Livable Communities for Adults with Disability.pdf

Citation 3

- "Looking for a ramp from the outside into her apartment.
- She does rent, and her landlord said he would sign papers to allow her to have a ramp put in. She currently does not have a wheelchair, but she will be getting one soon so she needs to have this process started. Her doctor did order her a wheelchair but she doesn't have it yet."

From these testimonies, some observations can be made:

- Renters living with a disability have housing needs similar to those of people living in their own homes
- Modifications are often needed to make the living space more accessible.
- Modifications costs are high.
- Renters have greater difficulty when needing to have modifications made because:
 - Modifications can change the aesthetic of the living space without necessarily improving the value of the property.
 - Approval from the landlord is needed prior to making the modifications.
 - The decision about whether the modifications would be temporary or permanent becomes more complicated.
 - Deciding who pays for the modification is also complicated.
 - If the modification must be financed, fewer options exist for the renters.

Unmet Needs

Satisfaction Survey

SATISFACTION SURVEY

More than 4000 satisfaction surveys were sent; the 81 returned represents approximately a two percent rate of reply (see Methodology section). A summary of responses to each question is below:

Did you contact our offices for yourself or someone else?

Respondent categories	Count	Percentage
Child	3	4
Client	1	1
Other	9	11
Parent	5	6
Self	62	78
Total	80	100

Did you call or come to our office?

Respondent categories	Count	Percentage
Call	76	90
Came in	7	8
Mail	1	1
Total	81	100

The fact that only eight percent of respondents accessed services by physically travelling to the office may be explained by the fact that the LINK office is located in Downtown Pittsburgh, where accessibility and parking can be problematic.

How would you rate your overall experience with our office?

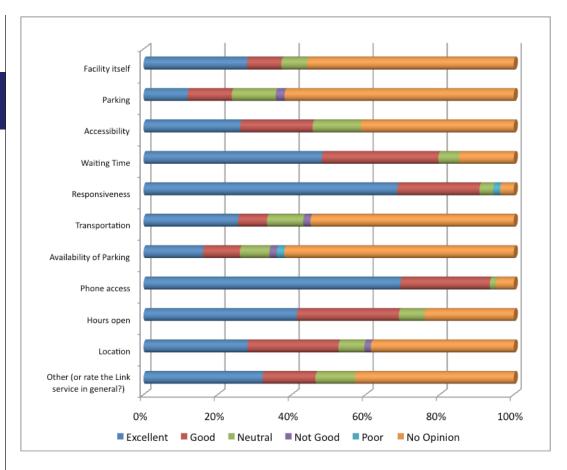
	Excellent	Good	Average	Poor	No Opinion
Count	49	23	3	3	3
Percentage	60	28	4	4	4

Only four percent of respondents expressed displeasure with their experience.

How would you rate our office's ability to help you locate the services you requested?

	Excellent	Good	Average	Below Average	Poor	No Opinion
Count	44	22	4	1	4	4
Percentage	56	28	5	1	5	5

Satisfaction Survey



The high degree of effectiveness may explain why such a high percentage of respondents previously rated their overall experience as being positive.

By using our office's services, were you able to access the information that you needed as easily and simply as possible?

	Yes	No	No Opinion
Count	64	7	5
Percentage	84	9	7

Roughly four out of five respondents indicated LINK services were not only easy to navigate but uncomplicated as well.

If you were referred by our office to another agency, did you call or go to that agency?

	Yes	No	Further Referral
Count	26	25	1
Percentage	50	48	2

If you were referred to another agency and contacted them, were you satisfied with the services provided by the other agency?

Satisfaction Survey

	Yes	No
Count	30	14
Percentage	68	32

Sixty-eight percent of respondents referred to another agency reported satisfaction with the services received.

Referred Agency

There were sixteen agencies to which the respondents were referred: APRISE; United Cerebral Palsy; Department of Independent Living; Dominion Peoples Gas Company; EAP; Motor Vehicle; Nazareth Housing Services, the Community at Holy Family Manor, Inc.; Northern Area Cleaning; Still waiting; OVR; Three Rivers; Travelers Aid; United Way; Urban League; and Workers with Disability Program.

It is important to us that consumers are able to gain access to the Allegheny LINK and its services as easily as possible. Please rate our office in the following areas.

Was the person you talked to knowledgeable²¹?

	Yes	No	unsure
Count	73	1	1
Percentage	97	1	1

Was the person you talked to courteous?

	Yes	unsure
Count	73	2
Percentage	97%	3%

If our offices were to make information and resources accessible by computer would you be able to use this type of system?

	Very Likely	Likely	Not Likely	Would not use
Count	22	12	13	22
Percentage	32%	17%	19%	32%

More than half of the respondents would not use the internet to access the information if posted on the internet.

 $^{21\,\,}$ This question changed over time. It was combined with the question that immediately follows it.

If you would use this type of system, do you have access to the internet?

	Yes	No	Unsure
Count	28	3	37
Percentage	41%	4%	54%

Additionally, only 41 percent of respondents have access to the internet.

Additional Comments

Fifty-four surveys included at least one additional comment; there were a total of 80 comments. These comments are summarized below.

- The majority of respondents appeared satisfied with the services. Slightly fewer than 75 percent of respondents included a thank you note or offered some form of praise.
- One out of five respondents was dissatisfied as demonstrated by complaints about the program.
- Ten percent of respondents expressed mixed feelings; a frequent response
 was that they were satisfied with their interaction with LINK, but dissatisfied because they did not meet the eligibility criteria of the agency to which
 they were referred.
- For the purposes of this survey, expectations were considered met and/
 or the services offered by LINK were considered useful if no comments
 indicating otherwise were included in the comments section. Using this
 methodology, just over 70 percent of respondents indicated that LINK has
 been useful; results were unclear in 21 percent of responses. Fewer than
 ten percent of respondents indicated that LINK failed to meet their expectations or was not useful.
- Approximately half of all positive comments on LINK services also included praise of a particular staff person, although ten percent of complimentary responses could not be attributed to a particular worker due to illegible handwriting.
- Fewer than one out of ten of all respondents volunteered any recommendations for improvement in service delivery or quality.
- More than a quarter of respondents utilized the comment section to request additional assistance for their unmet needs.

CONCLUSIONS

LINK Infrastructure:

Based on past trends, the total number of service requests is expected to increase by at least 2,300 annually, leveling off at approximately 15,000 in 2016. To meet this increased demand, additional casework resources will be required.

Service Needs:

Housing and home accessibility services are not adequate to meet demand, particularly for those individuals who do not own their own home. Development of additional housing and home accessibility services should be a priority.

Conclusions

BIBLIOGRAPHY

Bibliography

- Applied Real Estate Analysis (AREA), I. C. (1995). *Evaluation of Supportive Housing Programs for Persons with Disabilities.* U.S. Department of Housing and Urban Development Office of Policy Development and Research.
- Disability, N. C. (2010). The State of Housing In America In the 21st Century: A Disability Perspective .
- The National Fair Housing advocate, (2006, July). *E2 No6*. Retrieved from http://fairhousing.com/include/media/pdf/0706.pdf
- Onslow County, North Carolina Social Services Website. (n.d.) Retrieved January 14, 2011 from www.onslowcountync.gov/socialservices.

APPENDIX A: DISTRIBUTION OF CALLS BY ALLEGHENY COUNTY COMMUNITIES

Appendix: A

Cities & Towns	%
Allegheny	1.52
Allison Park	0.38
Arsenal	0.76
Avalon	1.14
Bellevue	1.14
Bellvue	1.14
Ben Avon	1.14
Bethel Park	0.38
Boston	0.38
Brackenridge	0.38
Braddock	1.14
Brookline	1.14
Carnegie	0.38
Castle Shannon	1.14
Cedarhurst	0.38
Clairton	0.38
Coraopolis	1.14
Coulters	0.38
Crafton	0.38
E Pittsburgh	0.38
East Liberty	1.89
East Pittsburgh	0.38
Edgeworth	0.76
Emsworth	1.14
Etna	0.76
Floreffe	0.38
Gibsonia	0.38
Glassport	1.14
Glenshaw	0.38
Greenock	0.38
Hazelwood	0.38
Heidelberg	0.38
Homestead	1.52
Homewood	0.76
Jefferson Hills	0.38
Jefferson Hls	0.38
Kilbuck	0.38
Large	0.38
Library	0.38
McKees Rocks	2.27

Cities & Towns	%
McKeesport	2.65
Millvale	0.38
Monroeville	1.52
Moon Township	1.14
Moon Twp	1.14
Mount Lebanon	0.38
Mount Oliver	3.03
Mount Washington	1.89
Mt Lebanon	0.38
Mt Oliver	3.03
Mt Washington	1.89
Munhall	1.52
N Versailles	0.38
Natrona Heights	0.76
Natrona Hts	0.76
North Versailles	0.38
Observatory	0.76
Penn Hills	2.27
Pittsburgh	27.27
Pleasant Hills	0.38
Pleasant HIs	0.38
Plum	0.38
Rankin	1.14
Sewickley	0.76
South Hills	0.76
South Park	0.38
Springdale	0.38
Squirrel Hill	0.38
Swissvale	0.38
Turtle Creek	0.38
Verona	0.76
W Homestead	1.52
West Homestead	1.52
West Mifflin	1.14
West View	1.14
Wexford	0.38
Whitaker	1.52
White Oak	0.76
Wilkinsburg	3.03

APPENDIX B: LINK SATISFACTION SURVEY

Appendix: B

The Allegheny LINK to Aging and Disability Resources Consumer Satisfaction Survey

The Allegheny LINK is a new program being tested in Pennsylvania. Your input into the performance of the Allegheny LINK is valuable in helping us to determine how this program is serving the residents of Allegheny County. Please take a few minutes to complete this short survey and return it in the enclosed envelope.

Dia you cont	act our offic	es for yours	self or some	eone else?		
Self	Parent	Child	Friend	Client	Othe	er
Did YOU call	or come to	our office?				
Called _	Came in					
How would y	you rate you	r overall ex	perience wi	th our offic	ce?	
ExcellentG	ood Average	Below	Average Poo	or No C	Opinion	
How would yo	u rate our offi	ce's ability to	help you loo	cate the serv	vices you r	equested?
Excellent	Good	Average _	Below	Average	Poor	No Opinion
By using our o	office's service as possible.	es I was able	to access the	e informatio	on that I no	eeded as eas-
Strongly A	AgreeAgı	reeDisa	igreeStr	ongly Disag	reeNo	Opinion
If you were re	eferred by our	office to and	ther commu	nity agency	did you g	o? Yes N
Nere you sati	sfied with the	services pro	vided by tha	t agency?		
Yes	NoN	o Opinion			Name o	f Agency
•	t to us that cos		-		_	•
			(over)			

Appendix: B

	Excellent	Good	Neutral	Not Good	Poor	No Opinion
Location						
Hours Open						
Phone Access						
Availability of Parking						
Transportation						
Responsiveness						
Waiting Time						
Accessibility						
Parking						
Facility itself						
Materials						
Other						

Was the person vou talked to knowledgeable and courteous?
□ Yes □ No □ Unsure
If our office were to make information and resources accessible by computer would you be able to use this type of system?
Very LikelyLikelyNot LikelyWould Not Use
If you would use this type of system, do you have easy access to the Internet?
□ Yes □ No □ Unsure
Thank you for taking the time to complete this survey. Your responses will be used to shape the way our office - and resource and referral offices around the state - operate to serve consumers.
If you would like the Allegheny LINK staff to call you about any questions or concerns that you have, please provide your name and telephone number:
Please return this survey to:
Commonwealth of Pennsylvania The Governor's Office of Health Care Reform Long Term Living Office/Survey 4th Floor Forum Building Harrisburg, PA 17120
Feel free to use the space below for any additional comments.

Appendix: C

APPENDIX C: VIGNETTE AR

AR called the LINK in January 2010. She is 34 years old with Lupus, thyroid cancer, Raynaud's Syndrome, Circadian Rhythm Sleep Disorder and depression.

January 2010 through August 2010 we assisted AR with the following needs:

- Mortgage Assistance provided information and resources for Mortgage Assistance and Foreclosure Prevention
- Medical/Mental Health Advocacy assisted with communication to medical team (PCP, Endocrinologist, Psychiatrist, Therapist, Lupus Center).
 Also assisted with completing and submitting application to Patient Assistance Program through CephalonCare
- Utility Assistance (Electric) completed application and applied for CAP
- Utility Assistance (Gas) completed application and applied for CAP.
 Also completed application for LIHEAP and submitted a necessary documentation on behalf of AR
- Utility Assistance (Water & Waste Management) assisted AR in completing the application and collecting the necessary documentation to apply for Salvation Army Discretionary Funds to assist with water and waste management arrears
- DPW Benefits completed and submitted application for Cash Assistance, along with all supporting documentation. Also advocated for consumer through the eligibility process
- **Food Assistance** researched and provided food pantry information in AR's area
- Transportation Assistance assisted consumer with enrollment into MATP and provided appointment protocol information to AR. Also coordinated transportation assistance through North Hills Community Outreach on an as needed basis
- Homemaking/Chore Services completed and sent application for Homemaking Services through North Hills Community Outreach.
 Also advocated for AR through the eligibility process

Appendix: C

- Waiver Services counseled AR on Waiver services. Completed referral
 for process to begin with TRCIL and also advocated for AR through the CAO
 IRED Office process of financial eligibility determination process. Additionally, assisted AR is choosing service providers and assisted AR in training
 attendants from provider agencies. Also assist AR in dealing with issues
 that arose from attendants.
- SSDI Application completed Work History, Adult Disability Report and other documents and faxed to SSA. Counseled AR on the application process for benefits through SSA. AR was denied SSDI
- SSDI Appeal completed necessary documentation for AR to appeal SSA decision. Requested copy of medical records from all of AR's medical professionals. Completed the medical summary report with input from AR and her family and sent it with all other necessary documentation to SSA-ODAR. Continued to follow up and advocate to SSA on behalf of AR. SSA overturned initial denial and awarded AR SSDI benefits.
- Health Insurance counseled AR on how SSDI would affect her current
 MA benefits and provided information on Medicare and relating processes.

Appendix: D

APPENDIX D: VIGNETTE ML

ML called the Allegheny LINK in March of 2009. ML is 70 years old and lives with her 36 year old son. ML has had a stroke, has breathing and heart conditions and uses a wheelchair. Her son has Cerebral Palsy, but does not acknowledge it and has had never had any service for or based on it. ML receives SSI in the amount of \$669 per month and her son received \$699 per month in unemployment.

From March 2009 through June of 2010, the Allegheny LINK assisted ML and her son with the following needs:

- Housing provided information to assist with housing search. Once apartment was identified, provided resources to assist with 1st month rent and security deposit
- **Employment (son)** connected son with CareerLink. Son was unwilling to work with OVR as he states that he does not have a disability
- Transportation provided ML with information regarding MATP and OPT, as she was already enrolled with ACCESS. Also advocated on ML's behalf to ACCESS for issues she was having with various drivers. Additionally assisted ML in terminating services with ACCESS and providing instructions on riding bus.
- Personal Identification assisted ML in obtaining a photo ID. Also assisted ML in obtaining a SS Card and correcting errors as SS Office, as SSA identified her as two different individuals, one having her married name and on having her maiden name.
- Wheelchair Repair Link staff identified and delivered temporary wheelchair to use until her wheelchair was repaired/replaced. Accompanied ML to Center for Assistive Technology appointment for wheelchair evaluation.
 Advocated and assisted ML in obtaining necessary paperwork
- Aging Care Manager/Senior Companion assisted in the process of obtaining an Aging Care Manager and a Senior Companion. Also, as ML's abilities were deteriorating assisted and advocated for a personal care.
 Aging completed assessment and ordered personal care attendant. Also worked with CAO IRED office to expedite her financial eligibility determination for Waiver services.

Appendix: D

- Food Stamps assisted ML with redetermination for Food Stamps
- **Telephone Bill Assistance** enrolled ML for SafeLink phone service
- Assistive Technology identified and arranged for delivery of a shower bench for ML to use while bathing
- Food Assistance enrolled ML in Angel Food Ministries and provided information for local food pantries
- **Income Tax Assistance (son)** researched and provided information for nearest tax preparation site for ML's son
- **Health Insurance (son)** Provided information on Medical Assistance for Workers with Disabilities. Also provided information on Health Clinics in their general vicinity

Appendix: E

APPENDIX E: VIGNETTE NK

NK called the Allegheny LINK in January, 2010. She is 67 years old with cancer and cares for her 43 year old son who was in an automobile accident. She also supports her daughter's household financially.

From January 2010 through August 2010 the LINK assisted NK with the following needs:

- Health Insurance applied for LIS and MSP
- **Prescription Assistance** assisted with PACE application
- **Eye Care Resources** completed and sent Gift of Sight application
- Credit Counseling Connected consumer with Ursuline Money Management Program
- Aging Services discussed services but NK was not interested initially.
 Finally made referral for PDA Waiver in June 2010.
- Food Assistance provided information on 5 food pantries in her vicinity
- **Home Repairs** connected consumer with Rebuilding Together Pittsburgh, Nazareth Housing Services and Hosanna Industries
- Foreclosure Assistance provided information on Homeowners Emergency Mortgage Assistance Program
- Legal Resources provided information for Neighborhood Legal Services and Elder Law Clinic
- Case Management Resources as the consumer was not interested in AAA Care Management Services initially, connected consumer to local Senior Center as they could assist with paperwork needs
- Accessible Parking Information assisted consumer in completing the renewal form for a Accessible Parking Placard and provided information on free notary services through State Senator's and Representative's offices

A referral to AAA would have been appropriate in this situation; however, NK was not interested in those services, initially. As indicated above, a referral was sent to AAA in June for PDA Waiver Services. The LINK assisted NK in understanding the necessary documentation and coordinating application assistance with the PDA Waiver RN Consultant.

APPENDIX F: SAMPLE SIZE DETERMINATION

Appendix: F

Mean	430
Standard Error	137
Median	284
Standard Deviation (s)	696
Sample Variance	484781

Using the descriptive statistics of the count of calls for services and the sample size determination Cochran's sample size formula for continuous data No=((t)2x(S)2)/(d)2

Where t = value for selected alpha level of .025 in each tail = 1.96^{22}

Where $s = estimate of standard deviation in the population = <math>696^{23}$

Where d = acceptable margin of error for mean being estimated = 137²⁴

No = ((1.96)2x (696)2)/(137)2 = 99.14

No = ((1.96)2x (696)2)/(137)2 = 99.14

^{22 (}The alpha level of .05 indicates the level of risk that true margin of error may exceed the acceptable margin of error.)

^{23 (}Estimate of variance deviation for 7 point scale calculated by using 7 [inclusive range of scale] divided by 6 [number of standard deviations that include almost all (approximately 98%) of the possible values in the range]).

^{24 (}Number of points on primary scale * acceptable margin of error; points on primary scale = 7; acceptable margin of error = .03 [error researcher is willing to except]).

APPENDIX G: NEEDS DESCRIPTIONS

11-ADULT DAY CARE-adult day care

Appendix: G

- 85-AGING-AAA info, complaints, case management, companions
- **297-ASSISTIVE TECH**-shower chair, transport chair, wheelchair, special shoes, toilet chair, chairlift, can, hoyer lift, TTY, hospital bed
- 10- CAREGIVER- caregiver assistance
- 4-CHILDCARE-childcare assistance
- **87-DISEASE SPECIFIC**-Alzheimer's, Dementia, Stroke, MS, Lupus, Autism, Blind and Visual, Deaf
- **366-EMPLOYMENT**-employment assistance programs, senior employment, training and education
- **641-FINANCIAL ASSISTANCE**-rep payee, general financial assistance, money management, credit counseling, life insurance, bankruptcy, burial assistance, financial advocacy, investment information, tax assistance, trust fund info, Veteran pension info, Cash assistance, short term disability, unemployment, rent rebate
- **491-FOOD**-food stamps, meals on wheels, food pantries, angel food ministries, grocery shopping assistance
- **601-HOME IMPROVEMENTS**-weatherization, home repairs of all kinds (except home mods), pest removal
- **383-HOME MODS**-all accessible modifications, ramps, grab bars, handrails, bathroom modifications, stair glide
- **3965-HOUSING**-residental facilities, subsidized, accessible and affordable housing, 1st months rent and security deposit, delinquent rent, landlord tenant issues, fair housing law, homeless assistance, moving assistance, home buying information, foreclosure assistance, dom care
- **432-HOME NEEDS**-furniture, appliances, clothes, toiletries, computers, toys, incontinence supplies, household goods
- **1134-ICM SEVICES**-Allegheny LINK ICM services
- **201-I&R** Information and Referral, resource guides, phone #'s and other general resource info

Appendix: G

971-IN-HOME SERVICES-all waiver services, homemaking, nursing home transition

599-INSURANCE-Medicare, MA, adultbasic, MAWD, health related needs, glasses, dental information, prescription assistance, uninsured information, private insurance information, hearing aids

397-LEGAL-POA/Guardenship info, advocacy, wills, burial, trusts, estate info, complaints, divorce, deed info, PFA, general legal info, lawyer referral, ADA info

267-MENTAL HEALTH-outpatient services, support groups, evaluations, support groups, inpatient, case management, D&A, counseling

31-MENTAL RETARDATION-case management, support coordination, MR programs

26-PERSONAL ID-birth certificate, driver's license, ss card, photo id

10-RECREATIONAL/SOCIAL ACTIVITIES-summer camps, senior activities, recreational activities

19-RESPITE-respite care

98-SAFETY-emergency response systems, protective services over and under 60, fire safety

224-SOCIAL SECURITY-al info pertaining to social security, ssi, and ssdi, applying, appealing, complaints or questions

804-TRANSPORTATION-escorts, medical and non medical transportation, ACCESS, reduced fares, OPT, MATP, handicap placards, vehicle modifications, vehicle repairs, vehicle purchasing

553-UTILITIES-electric gas, water, telephone assistance, complaints, problems, oil assistance, LIHEAP, and safelink

APPENDIX H: CASE NOTES CODING

The case notes were coded using the following code.

Initial request: The initial request is the first call received by the caseworker. This information is usually contained under the Consumer's needs and solution/referral section of the intake form.

Request follow up: This occurs when the client calls or leaves a message for the caseworker to call them back.

Caseworkers follow up: This occurs when the caseworker initiates contact with the client to follow up on an issue.

Other: Other is selected when a caseworker sends something in the mail to the client or contacts a third party for additional information. For example, a caseworker may contact someone at Duquesne Light Company to get info on whether a client is enrolled in a payment assistance program.

If the caseworker contacts a third party and talks to the client on the same day, the day is coded as either a Request follow up or a Caseworker follow-up. In other words, client contact trumps the "other" designation.

Issue Resolved: Yes

Appendix: H

An issue is typically designated as resolved for the following reasons. 1) The case notes indicate that the client requires no additional information or assistance; 2) The caseworker refers the client to a resource or sends information in the mail pertaining to the need highlighted. Many of the clients have multiple needs that continue after the highlighted need is resolved; however, phone calls unrelated to the need cited are not coded.

Issue Resolved: No

Clients with unresolved issues have a need that was not met.

Pending: Pending indicates that a case is in progress.

Unclear: The designation indicates that one cannot ascertain whether or not the need was met. This typically occurred because the caseworker's notes lacked sufficient information to make a yes or no claim or the client stopped returning phone calls, phone was disconnected, etc.

The assumption is that all callers have similar characteristics and service requests were similar for all groups.