e-Tools and Organization Transformation Techniques for Collaborative Case Management

Brenda Kunkel
Toni Yowell

SUMMARY. Welfare and workforce development reforms propel individual agencies into formal partnerships with one another. Collaborative Case Management is the cooperative delivery of social services to common clients. This paper describes technological tools and organization transformation issues for collaborative case management. A road map for a successful transition includes a shared vision, business/technology requirements, an information management strategy, redesigned jobs and processes, and a change management strategy.

KEYWORDS. Collaborative case management, technology transformation tools, technology transformation issues

RoseMarie is a social worker at the Tri-County One Stop Center. Her primary responsibility used to be case management for welfare clients, but her state recently restructured the agencies involved in delivering

Brenda Kunkel and Toni Yowell are affiliated with IBM.
Collaborative case management is the cooperative delivery of social services to common clients. The major activities within case management are intake, eligibility screening, assessment, enrollment, service plan development, activity tracking, follow-up and reporting. Collaboration among social service delivery programs can range from sharing information to joint responsibility for achieving an outcome with a common client. Through the use of collaborative case management the social service delivery system for a state or locality can leverage staff, physical, and funding resources with the goal of attaining self-sufficiency, security, and good health for shared clients in a more efficient and effective manner.

Best practices within the social service delivery field, and social work in particular, have moved to a holistic view of clients, their families, and their communities. Social workers have long been trained to work with clients and communities to change detrimental patterns and circumstances. However, most social workers leave their training to work in one of many distinct types of social service agencies, such as welfare, employment and training, or mental health. Each agency receives funding from different sources and each source brings restrictions and specific obligations for what a social worker may do with a client. Recent state and federal welfare and workforce development reforms provide social workers with an opportunity to influence agency leaders to take a more collaborative approach to managing the clients for whom they are responsible.

Collaborative case management requires a fundamental shift from policy-based decision making to information-based decision making. In this new collaborative information system, front-line social workers transform data into knowledge that enhances customer service with outcomes focused on client self-sufficiency, safety, and health. An information-based collaborative case management system requires a significant organization transformation, involving policies, technology, processes and managing the change.
The format of this article is to provide the reader with a glimpse into a day in the life of a social worker serving clients using a collaborative case management model. After briefly describing what our future social worker, RoseMarie, is doing at a given point in time, we describe the enabling technology and the relevant organization transformation issues. The article concludes with a road map for moving to a collaborative case management model.

**ELECTRONIC SCHEDULING AND WORKFLOW MANAGEMENT**

At 8:00 a.m. RoseMarie begins her day by communicating with her electronic office assistant. The voice response unit informs RoseMarie that she has three client meetings and an administrative chat room session scheduled today. Her tickler file indicates that Mrs. Stevenson should have completed her office skills certification and the system recommends sending an e-mail to obtain a copy. Today is RoseMarie’s day to assist in the Intake Unit. She checks the electronic wait list to begin her preparation for meeting the first client.

*e-Tool Description.* RoseMarie’s organization chose to use electronic scheduling and workflow management tools to dramatically increase staff efficiency and consistency. These tools include individual calendars, ticklers, resource scheduling and wait lists.

Groupware tools with calendar functions enable RoseMarie to keep an electronic calendar that she can share with peers. She also carries an electronic portable organizer that she updates to and from her desktop or laptop computer. The collaborative partnership agencies (the partners) keep a calendar for each client that allows the client anytime, anywhere access. It also makes referrals and activity coordination easier for social workers.

RoseMarie uses ticklers, which are notes that she writes to herself or a colleague asking to be reminded of a specific event at a specific date or time. The collaborative case management system also generates reminders that are created when certain information is entered. For example, the system could create reminders at the critical time points for a Temporary Assistance for Needy Families (TANF) recipient so that he did not lose days waiting for something to be scheduled or results to be shared.
Resource scheduling allows RoseMarie to know whether an event has availability or a resource is in use. Without this tool, a social worker will go through many time-intensive steps to schedule a resource. With the tool, a social worker can schedule the resource with the client still present to confirm her availability. Alternatively, the client can schedule the resource, using a kiosk or other networked computer, and the social worker can receive notification that this was done. The client’s plan can automatically be updated using more complex technology.

Resource scheduling can also be used by agencies to schedule appointments on each other’s calendars. For example, a local substance abuse treatment center may agree to allow the local One Stop Center to schedule substance abuse assessments on Tuesdays and Thursdays between 1:00 and 3:00 p.m. Both agencies can then view the availability of slots on a given day and plan accordingly.

Automated wait lists allow clients to register themselves for either a specific type of service or with a specific person or type of service provider. Flexibility built into the wait list tool could allow for daily changing of the wait list options so that sporadic events could have their own wait list on the days they occurred, for example interviews done by large employers once a month. A social worker could then select a client from the wait list and the appropriate form or action could be initiated.

RoseMarie saves time and hassles by using her electronic calendar, resource scheduler, tickler, and wait list. Electronic scheduling and workflow management tools allow more effective use of time and reduce delays, oversights, and inconvenience.

Organization Transformation. The collaborative partnership agencies, of which RoseMarie is an employee, are meeting the organizational challenges created by new legislation, budget constraints and changing client needs. The federal and state welfare and workforce development reforms changed the way the agencies operate, cooperate, and deliver services to clients. The “work first” approach and One Stop service delivery model established a renewed emphasis on collaborating to assist clients in attaining self-sufficiency.

The partners responded to the new requirements by breaking down stove-piped organizations and integrating processes and service delivery mechanisms. As the walls come down, organization strategies, budgets, and cultures collide. Agency identity and “turf” are at stake and
the organizations must negotiate through a myriad of systems, policies and procedures that exist to meet specific goals.

Leaders cast aside “how business has always been done” and adopt a new, integrated vision. The common vision drives development of business requirements, again, all focused on client service delivery. Given the complex issues inherent in partnering, the leaders realized that it would take time to reach consensus on, develop, and implement new processes, standards and basic operating procedures. A phased approach would allow some flexibility and provide the time necessary to create additional buy in. They acknowledged that this was not necessarily the most efficient or cost-effective approach, but it was the most realistic. As a result the partners started the transition by defining common ground rather than letting differences stall the integration process. However, the differences are being addressed and resolved. Leaders established a vision, mission, and strategy for combining services and major technology investments must support that strategy.

As shown in the following diagram (see Figure 1), the partners moved from stove-piped processes to collaborative, integrated processes.

Process and job redesign decreases administrative time and frees up RoseMarie and her peers to use more advanced judgment and training-based skills. The organizational and technological changes open informa-

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**FIGURE 1**

![Diagram showing the transition from stove-piped processes to collaborative, integrated processes. The diagram illustrates the changes in processes such as Intake, Eligibility, Assessment, Enrollment, Planning, Tracking, and Reporting, highlighting the collaborative model's benefits over the stove-piped model.](image-url)
tion channels, automate repetitive information capture and procedures, and empower employees with the ability to cross over traditional organizational boundaries in serving a client. The collaborative partnership agencies align redesigned jobs, processes, and technology with business requirements.

When the partners made significant changes to their processes, structure, and technology they realized performance measures needed to change. The current trend in social services moves away from measuring outputs and moves toward measuring outcomes. Federal funding was previously tied to measures such as number of slots filled, number of clients served, and total program cost. Recent state and federal reforms shifted performance measurement to outcomes and enabled social workers to serve the total needs of their clients in an effort to achieve higher order outcomes of self-sufficiency, safety, and health. This shift allows the partners to apply resources in areas that derive the best outcomes. Table 1 contains typical outcome measures; this example is from the Welfare-to-Work program.

### INTAKE AND ELIGIBILITY SCREENING

At 10:00 a.m. RoseMarie prepares to see a client new to the Tri-County One Stop Center. She uses the system to guide her through intake and eligibility screening.

RoseMarie goes to the Reception Area and calls her first client. Pat needs assistance in writing a resume and has a visual impairment.

#### TABLE 1. Typical Outcome Measures

<table>
<thead>
<tr>
<th>Value/Outcome</th>
<th>Performance Measure*</th>
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<tbody>
<tr>
<td>Placement in unsubsidized jobs</td>
<td>Number of clients employed in the target population</td>
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<tr>
<td>Duration of job placement in unsubsidized jobs</td>
<td>Number of placements in unsubsidized employment</td>
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<td>- 6 months</td>
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<td></td>
<td>- 12 months</td>
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<tr>
<td>Increase in earnings by individuals placed in unsubsidized jobs</td>
<td>Average earning of individuals at 6 months who obtain employment in unsubsidized jobs</td>
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</table>

*The partners define desired outcomes and corresponding performance measures.
RoseMarie sets Pat up in the resource room, which is designed for self-directed assistance. Pat will use the system to create a resume, schedule a role-play interview, and identify other programs for eligibility screening.

Prior to calling her next client on the Human Services waiting list, RoseMarie conducts an electronic search to determine if Chris received assistance from another state agency. Chris currently receives Unemployment Insurance, so the system populates all of the necessary forms with the information from the UI database. They discuss Chris's needs and then RoseMarie screens Chris for eligibility for services offered by all agency partners in the One Stop System.

**e-Tool Description.** Rose Marie was able to set Pat up in the Resource Room because the partners chose to use technology that gives clients more control over their use of the social service delivery system by allowing them to play a direct role in the service delivery process. When Pat decides to find out what else she may be eligible for, the computer asks her a series of questions. The partners chose a screening application that uses the answer from one question to determine which question to ask next. This makes the screening process faster and less confusing for Pat. When the electronic interview is complete, Pat receives a list of programs for which she may be eligible and she can choose to see why she was not eligible for other programs.

The eligibility-screening tool is part of the self-registration component of the partner’s case management information system. Clients see information about the services offered by all partners, do a preliminary eligibility screening, select from local service providers offering the services for which they may be eligible, and, for some programs, begin to fill out the application. The application allows Pat to browse anonymously and to link to electronic services offered by any of the partners. **Interactive, intelligent tools give clients a stronger role in obtaining services.**

The partners not only needed to negotiate on the electronic tool they could all use for eligibility screening, but they also had to agree on how client information would get into and out of that application. Some of the collaborative partners could not afford a large technology investment while others were not dissatisfied with their current data gathering, storing and reporting capabilities. Therefore, the solution for communicating and collaborating with partners needed to leverage
existing technology as much as possible. This requirement involved finding a way to share information between the different databases and applications, or legacy systems, of each of the collaborative partners.

Most of the collaborative partners chose to use the same application to gather the information they wanted to share. The partner that did not want to use a new application still shares intake information with the other partners. The shareable information gets translated into the software language spoken by the legacy systems of each partner. The collaborative information system is designed so that information is both taken from the legacy system to be used by the common application and taken from the common application to be used by the legacy system. The advantage to integrating legacy data into a common application is that during intake, RoseMarie could type in Chris’s name, ask the system to search all of the partners’ legacy systems for information on Chris, and then have the form she was using automatically filled in with that information.

The partners validated that the intake and eligibility screening tools met important business requirements:

- **Focus on mission critical services.** The collaborative case management information system made the partners more aware of what each has to offer a client. Partners now refer clients when their agency cannot meet a need rather than creating a new program. This benefit has been realized most significantly for support services like child care and transportation.
- **Tailor service delivery to meet the unique needs of each client and give them a choice in how those needs may be met.** The partnership maintains a database of all of the local service delivery providers. An electronic tool allows client needs to be matched against service provider characteristics.

An easily-accessible screening tool increased referrals between agencies because staff became cross-informed of each others’ programs. The partners also found that clients spent less time in the service delivery system and were more satisfied because most of their needs were met with the right array of services through their first contact with the service delivery system.

The partners decided that the benefits of the common intake and eligibility screening components of the case management tool justified, and even demanded, that these components be web-enabled.
They believe that web-enabled self-registration will save staff time and enhance customer satisfaction. The partners envision the self-registration module available on the Internet, in their local offices, and even in kiosks in libraries or shopping malls. *Collaboration requires a strategy for sharing information among existing information systems.*

Organizational Transformation. The technology vision of the partners moves them into the internet space to provide clients with increased access to services. They view this move as an evolutionary process rather than a revolutionary transformation. Currently, the agencies are at different points in terms of their Internet capabilities and philosophies.

Most partners publish information about programs and services. In addition, the web sites provide telephone numbers, local office locations, and operating hours. Partner agencies originally hesitated to move past publishing because of the perception that the clients most likely to use their services had no access to an electronic delivery system. Three factors pushed the partners beyond publishing. First, their shared vision includes minimizing the gap between the “computer rich” and poor. Second, the partners face continued budget pressures and the need to integrate service delivery, both of which electronic business assists in addressing. Third, clients already receive services from commercial entities through the Internet and they expect the same from government.

Several agencies moved into informational use of the Internet. In these agencies detailed information on services and government processes is available to clients. In addition, clients can download tools, such as forms. They no longer need to call or make a trip down to the local office. This decreased the need for some administrative staff coverage. Clients also e-mail social workers with specific questions, rather than go through telephone/voice mail channels. Service levels increased and social worker time on administrative tasks decreased.

The partners envision moving toward transactional and then transformational uses of the internet. Transactional uses would include real time interaction with government. Eligibility screening and scheduling for assessments could be accomplished “live” on-line, with intelligent systems prompting clients and providing information based on client answers. Transactional uses require limited integration of departments and this seems realistic based on the partners vision and planning strategy. Transformational uses would provide real-time query capa-
bility for employees and clients. The Internet would become inte-
grated into the overall collaborative case management system. In addi-
tion to the self-registration module described above, the partners
believe that the Internet can change the service delivery system in
many ways, including:

- Contracted service providers could enter time and attendance,
case notes, or other client specific information onto an electronic
form that is then read by the collaborative case management in-
formation system which puts the information both in all of the
forms required across the partner agencies for that particular cli-
ent and in the integrated service plan
- Clients can schedule appointments over the Internet, be informed
of the required documentation, scan that documentation into the
system from wherever they are, and receive confirmation of their
appointment and file status. This interaction is then logged into
the related service plan(s).

The partners moved from a business vision of collaborative case
management to defining business requirements to creating technology
requirements. They built an Information Technology Strategic Plan to
capture these requirements and assist them in deciding what their
Internet strategy should be, what software they required, and what
changes needed to be made to their technology infrastructure to allow
them to achieve their vision. The Internet is transforming the way the
partners deliver social services.

**SERVICE DELIVERY PLANS**

After lunch with nearby colleagues, RoseMarie conducts a home
visit to update an existing client’s Individual Service Plan. She uses
her laptop computer and a state-of-the-art case management applica-
tion that uploads to her electronic office assistant.

RoseMarie reviews Stacey Miller’s service plan for employment and
training. Her laptop provides RoseMarie with Stacey’s previous plan
as well as updated financial tracking information and target goals
with intermediate steps. RoseMarie compares the plan against the
trend information stored on her laptop. Together, RoseMarie and
Stacey update Stacey’s progress and revise activities and goals.
RoseMarie reviews, with Stacey, service plans for each of the children. They talk with Joey about his probation status. They schedule an assessment for Timmy’s possible learning disability. Finally, they check on Kerry’s Medicaid payment claim.

When RoseMarie arrives back at the office, she types in a case note for the family and replicates to the electronic office assistant.

e-Tool Description. The partners chose a collaborative case management application that allows RoseMarie to work while connected to the network at her office, while connected over the Internet from home or a partner’s office, or while disconnected, such as from a client’s home. The laptop that RoseMarie brings to the Miller’s home contains all of the functionality of the application in her office, but only contains the files for her current caseload. Through replication, RoseMarie is able to download the most current version of the files that she needs and then later to upload her information into the common database. Mobile computing give social workers greater flexibility in how and where they work.

The collaborative information system gives each individual their own file, but also links that file to those with whom the individual has a relationship. In this way, each partner agency can create documents and track progress according to their requirements—either as an individual or as part of a grouping.

The assessment, enrollment, service plan development and activity tracking components of collaborative case management traditionally have been program specific. Until regulations change, each partner may have to maintain their own forms for these processes. However, the partners felt strongly that the benefit to the client was in creating an integrated service delivery plan. Therefore, their collaborative information system pulls from the plans maintained in the individual legacy systems and presents RoseMarie with an integrated plan. She can then make planning decisions based on the full continuum of services being provided to the Millers by all of the partners. The Tri-County One Stop Center took this one step further and made RoseMarie the primary case manager across all partners. As a result, she takes responsibility for connecting the Millers to the right person within each program, for monitoring progress across all service plans, and for convening cross-program strategy sessions to facilitate the delivery of the best array of services to meet the Millers’ needs. The
system notifies RoseMarie of significant status changes in any of the programs in which the Millers are involved.

Organization Transformation. When RoseMarie was given the capability of viewing information across agency lines, she was both encouraged and concerned. The increased accessibility to information allows a holistic approach to providing services to a family. However, she had reservations about sharing potentially confidential client information. She also was not certain that she could adequately guide clients through services that were not offered by her agency.

The partner agencies found that existing policies were preventing needed changes in business processes and technology that aimed at enhanced customer service. For example, organizations were often reluctant to unleash the full power of technology-enabled information sharing due to policies related to confidentiality. Conventional thinking advised that compartmentalization of information better protected client rights, and also maintained some measure of security. In addition, the social work ethical code advised against disclosing client information.

Today confidentiality is as important as ever, however, the information paradigm is shifting. Organizations expanded their definition of “need to know” and “can know” information related to clients. These agreed-upon definitions and procedures increased comfort that program-specific details about a client will not be disclosed. RoseMarie’s agency provided rationale, processes and education on security issues to address confidentiality and privacy concerns. The partnership agencies continue to focus on issues related to vulnerability and risk for systems and data. They formed a cross-organization security team to identify and make recommendations pertaining to the issues. The team was comprised of social workers, information technology employees, policy makers, and legal advisors. The group defined six key security points:

- Integrity—protection against unauthorized modification or destruction of critical data;
- Access Control—security services to enforce the rights and privileges of authorized users;
- Availability—measures to prevent viruses or other code from disrupting the system;
• Authentication—ways to make sure that the user was correctly identified
• Non-repudiation—methods to provide proof of the origin and delivery of a message or data
• Confidentiality—protection against unauthorized disclosure of information or invasion of privacy.

The team recommended a comprehensive security policy. *Addressing real and perceived security issues builds confidence in the technology.*

**ELECTRONIC TEAMWORK AND REPORTING**

At 3:00 p.m. RoseMarie dials into an inter-agency chat session on a proposed policy to provide home computer terminals to families receiving state assistance. After the session, she verifies that electronic summary reports are sent to the main office.

Prior to the chat session, RoseMarie compiled statistics, via the internet, on poverty and the computer age. During the chat, she transmitted this information in a side-bar conversation to colleagues down-state. RoseMarie received an e-mail with a URL for a distance learning opportunity for using technology in group supervision. She “clicked” on the URL to download the course description.

At the end of the day, RoseMarie submitted a query on how many of the Center’s families attending the local elementary school received Food Stamps. She intends to use the information to advocate for a greater share of state funds for her jurisdiction.

*e-Tool Description.* RoseMarie can participate in decision-making meetings that would be deemed “too much effort” if she needed to be physically present. As a result, front-line insight and information can influence policy setting.

As the partners move toward transformational use of the Internet in service delivery, RoseMarie and her peers will have access to a wider range of tools for finding, organizing, and sharing information. Currently, RoseMarie uses the collaborative information system to do ad hoc queries and reporting. The leaders in this partnership use the collaborative information system to comply with their individual reporting requirements.

The partners developed a common intranet, where knowledge is
shared between employees and other organizations. In the past, agencies duplicated efforts and recreated similar types of information (best practices, policy interpretations). Also, contract service provider research was not readily available to all employees that could make productive use of the data. The agencies did not always have all the information they needed, or they had the information but could not locate it. In response to these difficulties and the paper intensive environment, the partners implemented a knowledge management system. They also use data mining capability for daily operational decisions and long-term planning. The decision support system used by the partners enables them to measure their progress toward their original vision. Knowledge management turns data into information that can be used and shared.

Organization Transformation. Collaborative case management involves significant changes for agencies and individuals. Unfortunately, employees often fear process redesign and technology insertion. They are not resisting change, but rather the way that it disrupts their lives. Major technology changes may result in:

- a perceived threat to job security,
- a shift in influence, authority and control,
- loss of expertise,
- a requirement to learn new skills,
- and, a change in the way it was always done before.

In order to counteract these fears, the partners developed and implemented an aggressive change management strategy, including a communication plan and a training plan. The change management strategy positioned them to deal with human reactions to organizational restructuring and new technology. It involved visible and committed leaders providing clear direction and articulating a compelling need for change. To effectively manage significant change, the partners helped employees understand the reasons for the change, created commitment to the new model, provided capabilities to make needed adjustments and tracked the process of change to make sure that it was happening. Even when employees understood the compelling reasons for change, they needed personal involvement to fully accept the changes. Types of involvement included opportunities to express concerns and input into new designs.

As a social worker, RoseMarie feels she is in a win-win situation.
She has opportunity to enhance her own job skills through exposure to a myriad of state programs that used to be stove piped by agency. In addition, she is on the cutting edge of technology. Not only are the technology skills marketable, but also the valuable time and resources she saves by using technology can be redirected toward serving her client.

*The partners developed a comprehensive change management plan and involved social workers in determining products, services and system features.*

Communication, or lack thereof, often sub-optimized the integration process. Early on, leaders recognized that good communication builds agency coalitions and peer relationships that support the new integrated model. However, reluctance to release preliminary plans and failure to solicit input moved the negative rumor grapevine into high gear. The partners finally developed a communication plan to address these problems. Key elements of their communication plan included downward flow, upward flow and horizontal flow of information related to the organization transformation. The partners found that in order for a person to truly receive a communication and accept its message, that person must understand it, believe that it reflects organizational goals and feel that it supports their interests. Also, the communication must be delivered in a timely manner. Effective upward communications from employees to managers and leaders required management involvement, active listening and action on ideas. Since the grapevine will always exist, leaders continue striving to create positive message traffic. *A comprehensive, proactive communication plan is essential.*

The Training Team, comprised of training professionals, technology specialists and users from multiple agencies, recommended a strategy to improve the social worker’s ability to successfully use technology. The team developed a training philosophy to minimize time away from clients, while providing a phased approach to educating users on relevant topics. Computer-based training allowed social workers to improve their skills with new technology at their own pace. Classes provided over the internet allowed social workers to interact with their peers while remaining in their offices. Ever-increasing types of distance learning tools and strategies continue to simplify the effort required for social workers to increase their skills. In person training classes were also provided on an as needed basis. In addition, applica-
tion training resident on the collaborative case management system included both help for how to use certain features and functions, as well as help specific to what the social worker is trying to do in a certain field in the application.

The partners built a support system that social workers can call regarding problems connecting to the network or performing a required procedure using the new technology. The support system has three key elements: peer support, process and procedure support, and the traditional technology help desk. The training team built an evaluation process and collected data on the value and impact of different types of training and support. The partners developed training and support programs to ensure effective use of technology.

**ROADMAP TO COLLABORATIVE CASE MANAGEMENT**

The transformation to a collaborative case management system requires a comprehensive approach to addressing business and technology requirements. In most social service agencies, business requirements are driven by legislative policy decisions. Information technology planning and implementation are based on business strategy and requirements. Table 2 summarizes key considerations for organization transformation and technology initiatives.

The road map described above applies to agencies wanting to use all of the tools and techniques described in this paper, as well as to those agencies attempting only a portion. Successful projects allow adequate time for a planning and assessment phase because rework costs far more, in terms of dollars and momentum, than building from consensus and strategy. The technology and business transformation components are interdependent. To implement only one will result in lost opportunity at best, and possibly in failure of the initiative. At the same time, people need to see action and celebrate success if they are to sustain their commitment to a new collaborative case management model. Therefore, leadership requires long term vision with a series of success points.

We are familiar with the efforts of several states to move to a collaborative case management model for social services delivery. The technology used or planned for in these initiatives varies widely. Most partnerships want to use an electronic government approach, however, they need to leverage their current technology investment. Therefore,
TABLE 2. Key Considerations for Organization Transformation and Technology Initiatives

<table>
<thead>
<tr>
<th>Business Transformation</th>
<th>Technology Initiatives</th>
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<td>Leaders established a vision, mission, and strategy for combining services and major technology investments must support that strategy.</td>
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<td>• The partners define desired outcomes and corresponding performance measures.</td>
<td>• Collaboration requires a strategy for sharing information among existing information systems.</td>
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collaborative case management technology investments need to maximize use of current technology while enabling increased use of the Internet.

Compliance with the Workforce Investment Act has been the strongest motivator for adopting a collaborative case management model. States faced a July 1, 2000 deadline for implementing their One Stop initiatives. However, we also find that some states, counties, and localities have been using a collaborative case management model for quite a while. These efforts have often been informal and face tremendous policy barriers. The lessons learned from these earlier attempts suggest that once social workers from different agencies begin to work with and rely on one another on a regular basis, many of the change management issues discussed in this paper become much less signifi-
cant. For instance, many partnerships report that their clients are very willing to sign release of information waivers because they see a benefit to themselves. We also find that partners respect each other’s service delivery approaches and often revise procedures based on experience with another program’s better way of doing certain activities.

Collaborative Case Management is the cooperative delivery of social services to common clients. Electronic tools and organization transformation techniques support multi-agency partnerships in their efforts to integrate service delivery and to allow clients to enter the service delivery system anytime, anywhere.

**AUTHORS’ NOTE**

The authors wish to acknowledge our colleagues at IBM whose experience and expertise, combined with our own, provided the vision and direction for this document. Readers wishing additional information on the e-government tools and organization transformation techniques that support collaborative case management can visit the following web sites or contact the Social Services Solution Consulting and Integration practice principal, Pat Condon, at pcondon@us.ibm.com (301) 320-2424.

http://ec.fed.gov/
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