**Practical Measures: Telling your Story through Outcome Measures**

Presented by Dan Kessler, Pat Puckett and Paul Spooner on November 12, 2014

>> TIM FUCHS: Good afternoon, everybody. I'm Tim Fuchs with the National Council on Independent Living here in Washington, D.C. I will welcome you to CIL-Net's, "Practical Measures: Telling your story through outcome measures. This is being presented by the IL-NET training and assistant project for CILs and SILCs. It's operated through a partnership among ILRU, NCIL, and APRIL with support by ISA at the US Department of Education. As always we are recording today's call so it can be archived on ILRU's website. We will break several times during the presentation to take your questions. For those of you on the webinar, not surprisingly, you can ask your question in the chat feature, and to do that, you type your question out or comment, and the white text box and then hit enter, and it will display.
Now, we are going to wait until the Q&A breaks to address them. But we will get them and if you have anything that's technical in nature, or if you are having problems with the webinar, we will respond in real time.
Similarly, for those of you on the CART screen, there are captions on the Adobe but those of you on CCproduction.com, you can log in there and type your questions there. If you are on the pound, you can hit star pound and ask your question.
Again, I will give you a reminder of each of those instructions each time we break for Q&As. And then the PowerPoint will display automatically, if you are viewing the webinar but if you are on the phone or, again on the CART, you will want to make sure that you have the PowerPoint pulled up.
So if you don't have the PowerPoint open that was sent to you in the confirmation email that was sent to you with connection instructions for today's call. If you don't have that handy for any reason, you can shoot me an email at Tim@NCIL.org, and I will make sure to get that to you. Again, if you are on the webinar, it will display automatically.
Okay. Quickly, I just want to mention the evaluation form. So once the call ends today, we have a brief evaluation form. There will be a link to it, actually, in one of the final slides and I will point that out when I get there. And please do fill it out. We keep them brief, so that they are not a burden, but we really do want your feedback. We take that really seriously, as we look to improve our trainings, and ILRU, actually, will be selecting a winner from those of that you fill out the evaluations to receive a $25 Amazon gift card. Not a bad incentive for something that will probably take you a minute or two of your time.
I know of you are participating in small groups today. That's great. We encourage it. But I do hope that each of you will fill out an evaluation so we know that each one of our -- what each one of our participants thinks.
Okay. That's all the housekeeping that I have. I just want to introduce our presenters. And I really want to thank Dan, Pat, and Paul for their time coordinating this presentation, putting a lot of thought into developing this intro to outcome measures for those of you at centers across the country and I really do appreciate it. We had a lot of putting together it. And Dan Kessler is in Birmingham, Alabama. He's the past president of NCIL and co-chair of NCIL's outcome measures task force.
Pat Puckett is the executive director of the Georgia SILC and Pat also represents the eight southeastern states on NCIL's board as our Region 4 representative. And she is also co-chair along with Dan of the outcome measures task force.
And finally, Paul Spooner is with us. Paul is the executive director of the metro west Center for Independent Living in Massachusetts and he's a member of the outcome measures task force. And so anyway, thanks so much to each of you for being with us. And I'm going to go ahead and kick it off to Pat, who is going to begin the call by reviewing the objectives on slide 3. Pat?
>> PAT PUCKETT: Yes, thanks, Tim, and thanks, everybody for joining us. Today the purpose of this webinar is so that you will have the knowledge and the resources to be able to describe the outcome measures task force tool that can be used by Centers for Independent Living, to measure and understand outcome findings to describe reporting and marking opportunities that come from outcomes measurements and illustrate the value of the outcome measures beyond federal and other funding requirements.
So that's the purpose of the webinar today, and now I'm going to turn it over to Dan.
>> DAN KESSLER: Well, thank you very much, Pat. Some of you might be wondering why your CIL should be interested in outcome measures. I think everybody on the call knows that for many years, CILs have been making -- making impacts in their communities and in their states and at various levels and so assisting people with disabilities transitioning from nursing home, advocating for people with disabilities and accessible housing and transportation, personal assistance and assistants and much, much more. We are accountable to multiple stakeholders, our consumers, our boards our staff members, our funders and the members of the general public.
As we all know, we are facing increased competition for fewer dollars and so we need to know how effective we are with those resources that we do have. So outcomes are proof that your center produces lasting results in your community, that you are, in fact, fulfilling your mission. Outcomes can be a key component of your fund-raising message. Funders and donors want to know how their contributions impact the community. Outcomes help you make the case that a contribution to your CIL is a good investment. And outcomes are proof to your stakeholders, your board, your staff, your consumers, your volunteers that they are accomplishing something really important and they want to know that their time, their efforts, their resources truly do make a difference. And that's the reason why people want to be affiliated with your center to make a difference.
Positive outcomes can motivate your stakeholders to make even bigger impacts. So as you will see on the slides, you're on slide number four, your findings will help you share your success stories with your constituents, your community, funders and others. Your outcome measures are a tool that can help you improve your own effectiveness. I think we all want to get better at what we do.
Outcome measures can help you know if you are really helping. Outcome measures can also help you focus on what's important and what's maybe not so important. Outcome measures can also help you know if your advocacy is being effective. And so Paul Spooner with the metro west Center for Independent Living has been working at his CIL and in his state on outcome measures now for several years and Paul, I would like to ask if there's anything you would care to add.
>> TIM FUCHS: Hey, Paul, are you on mute maybe?
>> PAUL SPOONER: Sorry about that!
One of the most interesting things we have learned being a center that's been involved with the NCIL outcome measure tests twice and also implementing a state mandated outcome measure processes is that, you know, we as a center, we are not understanding how we were collecting information and the example I can think of is one of the most important services we do is information referral. We get many calls during the day. We find the answers for the people who call, but we weren't really paying attention at tracking those individuals.
Well, when we started implementing outcome measures, you need to be able to contact the people you provided the service to. So by the simple step of starting to collect names, addresses, phone numbers of I & R callers we started reaching a much larger range of individuals, other providers, organizations, that were seeking our knowledge and information through the I & R process. That enabled us to develop a larger mailing list, a larger outreach list, a larger fund-raising list. It put us in a more prominent position in our community, which benefited both the center and the community at large.
>> DAN KESSLER: This is Dan again. Paul, I think that's an excellent example of how outcome measures could be used at your center.
If we could move on to slide 5, and that is why centers began to work on outcomes. I know in the case of my center, for 15 or more years we have been required to report on outcomes in order to receive United Way funding. We are a United Way agency. Outcome measures used by other nonprofit agencies, you are more -- I guess your more traditional nonprofit agencies, social service agencies, just didn't really reflect the work that we did as a CIL. So we had to develop our own measures in order to community what we did.
We also have a small grant from HUD to assist people with disabilities who are homeless. Now, HUD has developed a very elaborate system, a top down approach, if you will, to measure outcomes. None of which really applied to us. So, again, we had to create our own measures, and so I'm sure many of you have had similar experiences with your funding sources.
If you look on slide 5, centers were calling for a better way, going back to why centers began to work on outcomes, centers were calling for a better way capture for their accomplishments. It's important for your individual CIL to describe outcomes at your center and it's a much greater challenge to tell the story of the independent living movement in a systemic manner.
And the outcome, the work of the outcome measures task force was an attempt at that.
Of course, we all -- many of us know RSA, rehab services administration had begun an increased focus on outcomes. Again, this was a top down approach. The approach was these are your outcomes. Go and measure them and report back to us.
And then in 2003, something called PART concluded, "Results Not Demonstrated." Well, PART stands for performance assessment and rating tool.
Now, in some cases, PART was used to justify the elimination of some programs. However, PART was dropped by the Obama administration and was replaced by an emphasis on using performance information to manage programs. And, of course, we all know that results not demonstrated just didn't do justice to the work that was happening at centers for independent living throughout the United States.
And then funders have placed increased emphasis on outcomes and accountability. And we find this emphasis on outcomes really at all levels of government, as well as with private foundations. They want to know what your outcomes are and they also want to know how you measure those outcomes. If any of you applied for a grant lately, you know what I mean. And so outcome measures are not going to go away.
Pat?
>> PAT PUCKETT: Okay. So we gathered up some folks and the task force on outcome measures was led by Bob Michaels, and then we also hired a consultant, NCIL actually hired a consultant by the name of Mike Hendricks to help us with the process. And so there was extensive work between 2006 and 2011. It was a joint project, actually, between NCIL, ILRU and the University of Kansas. It involved over 40 Centers for Independent Living, and you can find the final report on ILRU's website.
The title of the report is "Focusing on Outcomes in the CIL Program." So I encourage you to take a look at that. It's easy to see exactly what all was involved in the process, and it was -- it took us a while. It was a lot of hard work, but I think that in general, people are pleased with having some better alternatives to sell the IL story.
Slide 7, please. Okay. So what centers learned in the course of this work?
First and very importantly, it is possible to measure the outcomes of center programs, and the benefits are worth of effort. The centers second message is focusing on center outcomes is not simple and not all centers were ready to go for it.
Next slide.
But what centers did learn is that 78% of CILs needed 10 or fewer hours to gather information about their own CIL outcomes. 93% needed 10 or fewer hours to enter all the outcome information into Survey Monkey. 76% thought it was easy or very easy to ask the questions of consumers and 70% thought it was easy for very easy to ask questions of I & R callers.
Next slide.
Indicators define what we mean by outcomes. An indicator is a specific item of information that defines what we mean by outcome. Sometimes we want to achieve things as a result or as an outcome and sometimes we want to prevent things. And I will give you an example of how a center just recently prevented a bad thing from happening. The center down in Macon was threatened with their paratransit hours being cut out on the weekend. And so folks organized to go to the Department of Transportation -- or the transit authority meetings and got that stopped. So that's an example of preventing a bad thing. And we all do that every day, I suspect.
Next slide. Oh, next slide is questions and answers.
>> TIM FUCHS: First Q&A. So this is Tim. We are going to just jump in. I know it's still early, but just to check in with you all to make sure this aren't any early questions. And before we do that, we actually wanted to do a quick exercise. We have a little poll question that's going to pop up here on the screen, and there it is. Over towards the right-hand side -- oh, now it's in the middle. And it says "is this the first time you have heard of the outcomes and indicators that have been developed by the NCIL task force?
And so we were interested, you know this has been a project of NCIL for years now, since 2007, and we were interested to know with those of you that signed up, are you new to your center? Maybe you haven't had a chance to hear about this. Have you been there for a long time and you haven't heard about it? Maybe we haven't done a good enough job of telling people about it.
And so we were really curious. And so letting people fill that out. People are clicking away. Is this the first time you have heard of outcomes and indicators that have been developed by NCIL's task force?
Good these results have been -- oh, here we go. More people filling it out. I will give a few more seconds. And some people typing too. No. No. No, not the first time.
Okay. That's been static for a moment. It looks like 12 of you, yes, this is the first time you have heard of them, and 22 of you, no. So about 30/70% split. So anyway, thanks. That's interesting. We are trying to use more of these polls to be kind of fun and that's helpful for us too, to know, that most of you, two-thirds of you have heard of this before, but you still wanted more information on the details.
Okay. All right. So let's move into the Q&A session here, and I see our first question from Maureen Ryan. Maureen asks: When you said it took ten hours to report, is that 10 hours per year or how was that measured? Ten hours per what unit?
>> PAT PUCKETT: You know what, I don't know. The -- this is Pat. The final report may tell us that, but I suspect it was just a specific period of time that you were collecting the information because this is not something that you do all the time. You know, you set aside a time to call back I & R callers and then you set aside a time to call back or to call CIL consumers to ask them some specific questions. So I think it was just that period of time that you were gathering the information from consumers and for I & R callers.
>> TIM FUCHS: Okay. Good. While we are working through this too, I will put up the report. That's on NCIL's website too, and Sharon from ILRU was kind enough to post the link directly to that same report, identical report on ILRU's web page. I will pull that up and see if I can find that.
Thanks, Pat. I will give you a few moments for you all to type questions. Again, if you have a question on the webinar, you can type it directly in the chat and that's just the textbook underneath the list of participants and hit enter and we'll receive it. And then if you have a question on the phone, you can press star pound. Yes, Dan, go ahead?
>> DAN KESSLER: Hey, Tim, yes, this is Dan. Our center went through this process recently where we -- where we surveyed consumers, a sample of consumers. We surveyed 30 consumers and this is not I & R callers but consumers and it took us approximately 13 hours to -- to complete those surveys, to complete 30 surveys.
>> TIM FUCHS: And that would be done once a year, right, Dan?
>> DAN KESSLER: Yes, that was once a year, yeah. Yeah.
>> PAUL SPOONER: And this is Paul.
>> TIM FUCHS: Mm-hmm.
>> PAUL SPOONER: To follow up, those numbers of ours is actual activity time for collecting a randomized sample, whether it be for I & R calls or direct center consumers. Average time worked out to about ten hours, in some cases a little bit more, particularly with the direct center consumers, there are more questions to ask, more information to collect.
>> TIM FUCHS: Okay. Good. Good context. Thanks, Paul.
Okay. Got our next question from Rodney. Rodney asks: You mentioned that CILs were collecting many outcome measures through calling consumers. Since consumers are reporting on subjective experience, are there other measures the task force suggests that target more objective outcomes? Like passing tests at the end of the skills training classes, for example?
Dan, I wonder if you could start by just explaining sort of the variety of indicators that have been developed and answer Rodney's question.
>> DAN KESSLER: Well, yeah. There were 11 -- I believe it was 11 different -- a total of 11 different indicators and -- and I think the -- the great majority of those indicators were based upon the consumers' experience, and I think that was really done purposefully during that and very consciously, given the philosophy of independent living and that is -- and that is the consumer control and I think to most of the members of the task force, that was -- that was paramount in terms of measuring what -- whether or not outcomes were achieved.
And so, I mean, there were some -- I'll talk a little bit about that later, some issues that maybe might give, I guess, maybe a different way of measurement and that had to do with preventing people from going -- who were at risk of nursing homes, of going into nursing homes. We can talk a little bit about that later, but -- but I don't know that the task force really looked for any sort of standardized kind of instruments.
I think that the -- that the questioner may have -- may have been referring to.
>> TIM FUCHS: Okay. Thanks and like Dan said, we will move through some of those samples later so you can see. Certainly there's a bit of subjectivity to some of them, but you will see the way they were worded and organized to help provide -- help control for that.
Okay. Again -- oh, here's another question. Excuse me, from D Fults, I believe that's Debra. 10 hours for how many contacts? We talked about the 10 hours and the report, 139 hours from the centers experience, but about how many people are we talking about to contact in that amount of time?
>> PAT PUCKETT: Well, do you want to answer that question, since you participated, Paul?
>> PAUL SPOONER: Yeah. In all of the cases, I think we did it three times before we started implementing it. We took a random sample, and we had to get at least 25 responses. So -- and when you say 25, you've got to realize that you really have to have a random list of, say, 30 to 40, because particularly under I & R, you are going to run into people who don't remember or the phone number is not right, or you can never get ahold of them, and so forth. So -- but the amount, the minimum required reporting amount each time was 25 individuals. Both on the consumer collection and the I & R collection.
>> TIM FUCHS: Okay. Great. Thanks, Paul. Okay, I will give about 20 more seconds to see if any more additional questions come in. I haven't seen any. Like I said, this is pretty early. So we will have more Q&A breaks later in the call.
Okay. All right. I don't see anything further. So I will go ahead to slide 11, to the logic model diagram and turn it over to Pat.
>> PAT PUCKETT: Yes, this -- the logic model was the first step in the process that the task force went through, and, you know, while this looks pretty straightforward, I can tell you that this took a lot of processing, a lot of thinking, and a lot of facilitating on Mike Hendricks' part to finally get us down to the essence of what Centers for Independent Living or all about.
And the way that -- the advantages to me, of a logic model, is it is a one-page picture description of what your program does, and why it does it.
And so, what you do with an outcome model, is you start at the bottom with the activities that you carry out at your center for independent living and there were three strings of activities that we refined over time, independent living services, information and referral, and systems advocacy.
And you work your way up using an if/then model. We will start over on the systems advocacy side. So if you do systems advocacy, then barriers and problems toward independence are identified. And if barriers on problems are identified, then a consumer agenda for change exists.
And active coalitions exist around our issues. And if you got active coalitions and a consumer agenda, then decision makers will act on that agenda. And when decision makers act on that agenda, communities have more resources that support independence, and there are more methods and practices that promote independence, and if there are -- if communities have more resources, and if there are more methods and practices, then the communities are more accessible in all realms, housing, transportation, information, employment, education, assistive technology, healthcare and all of it. And if communities are more accessible, people with disabilities are integrated into American society.
So that's the systems advocacy stream.
If you look at the information and referral stream, if you are providing information and referral, then people with disabilities get the information that they need. And if people get the information that they need, they begin to see different possibilities for themselves and for the world around them.
And if people see different possibilities and they get the information they need, then they advocate for increased community supports. And when people advocate for increased community support, communities are more accessible in every realm, the same realm, the housing, transportation, and so forth. And if you look at the IL services stream, if you are providing IL services, people with disabilities have the knowledge and resources to support their choices. And if people have the knowledge and the resources to support their choices, then they are making their own choices.
And if they are making their own choices, people see themselves as more independent, and people are more independent.
If people regard themselves as more independent, if they are more independent, they participate in the communities to the extent that they wish. And when they do that, the ultimate outcome is that people with disabilities are integrated into American society.
Now, those are all boxes that are all connected to one another. So what we know is that doing really good work at the individual level without the systems level is not going to enable people to participate to the extent that they wish. So all of these activities and all of these outcomes are connected to one another, to ultimately result in the integration of people with disabilities.
So, that's the -- that's the logic model. Is that -- is that understandable to people? And I guess one of the questions I would like to ask the audience is, do you think this captures the essence of what Centers for Independent Living are and do? And when we break in a bit, for Q&A, let's go back to that question if we can.
>> TIM FUCHS: Well, I will be watching the chat and summarize that in the next Q&A break.
I will go to slide 12, and turn it over to Dan. Thanks, Pat.
>> DAN KESSLER: Okay, great job, Pat.
Sharon, how is the volume? Is it okay?
I was told there was a little --
>> TIM FUCHS: Sharon's line may be muted, Dan, but your volume has improved since it fell off during the last Q&A. So thanks.
>> DAN KESSLER: Okay. Yes, so if we go to slide 12, we see the desired outcomes. And 9 -- of course, the task force developed outcome measures for eight of the 16 outcomes on the logic model. And for some of those outcomes, the task force developed one indicator. For others, the task force developed a couple of indicators. So it is shown on the logic model, the outcomes relate to the direct services, the independent living services that -- that centers provide consumers, as well as information referral and systems advocacy.
So you can find a chart of all of these outcome measures and indicators on the IL-net website, there's some -- in one of the -- in one of the manuals. And so the outcomes then that were measured, that were indicators were developed, were that people with disabilities have skills, knowledge, and resources to support their choices. There was one indicator that was developed to measure that particular outcome.
The second one was that people with disabilities are more independent, and there is one indicator that measures that outcome.
The third one, the third outcome is people with disabilities get the information they need and there were a couple of different indicators that were used to measure that outcome.
Then the fourth one that people with disabilities advocate for increased community supports, and you will see a couple of different outcome measures for that one.
Then barriers and problems are identified. That's one indicator for that outcome. Then there's a consumer agenda for change that exists. And, again, there's one indicator developed for that -- that outcome. And then at a little higher level, the decision makers act on our agenda that actually change occurs as a result of our efforts.
There was one indicator that has been developed for that outcome. And then finally, there's an outcome for -- or two indicators for the outcome for methods and practices that promote independence.
So the NCIL outcome measures task force developed a total of 11 indicators for eight outcome measures. And it's my understanding that during the process, that the -- of course, the task force did look at each of those -- each of those outcomes that you see on the logic model, that Pat went over, but decided to narrow down the number of outcomes where indicators would be developed for only eight of those.
So if we could move on to the next slide, number 13, and that is the information and the referral stream. Of course, Pat described the logic model, and one of those streams was the information and referral stream, and there are a couple -- and, of course, the outcome for the I & R stream is that persons with disabilities get the information they need. And this would be considered, you know, over on the left-hand side of the logic model, you see initial outcomes, intermediate outcomes and sort of ultimate outcomes that we achieve.
So this would be considered, that is people with disabilities get the information they need, would be considered initial outcome of the logic model. And there were two indicators that were developed for this outcome. The first is persons contacting the center report that they have the information they requested. And Paul talked about that. And then the second one was that people contacting the center report that they use the new resource, that they learned about from the center.
So the first is, the first indicator, you got the information. And then the second indicator is that you actually use the information. Later, we will go over the test results, or -- and then if we move over to the independent living services stream, the outcome for the independent living services stream is that persons with disabilities have the skills -- have the skills, knowledge and resources to support their choices. The particular indicators that you will see up on the slide is that people served bit the CIL can list at least one specific skill, type of knowledge or resource that they have now that they didn't have before approaching the CIL.
So people have a new skill, type of knowledge, or resource that they didn't have prior to coming to the center or approaching the center. And there's another form of IL services stream that's not on here and that people are more independent, and so the indicator for that outcome is when consumers are served, that means that individuals cannot only indicate yes, I'm more independent but they can list a way in which they are more independent or can recall a way in which they are more independent than when they had first approached the CIL.
We can move on to the next one. Slide 15.
Systems advocacy stream. There are a number of different slides that address the systems advocacy stream. So you will find -- and we'll go over several of those -- several of those outcomes. One is that barriers and problems are identified, and the indicator that is that activities, such as surveys, public meetings, focus groups, polls are conducted to identify or confirm the primary barriers or problems in the community that prevent persons with disabilities from leading more independent lives. This is an initial outcome on the logic models and really gets at the activities that the center has engaged in to identify the barriers or the problems in their community, in ways in which consumers are involved in helping to identify those barriers.
Of course, the centers then can use the results of these activities to help to determine the system advocacy priorities. And you may be able to think of others but these were the most common activities that the task force identified.
So centers responses to this item varies actually quite a bit, anywhere from 0 to 10 activities, and all the way up in a couple of instances where there are a couple of centers that engaged in 120 different activities, although I think the median number of activities reported by the centers on this -- for this indicator was 10 different activities.
So you can see that centers were really pretty much all over the map with respect to this particular indicator. As I said, the median number was 10.
If we could move on to slide 16. And that, is again, we are still on the systems advocacy stream, and that is a consumer agenda for change exists. And that indicator -- and the indicator to that outcome is a presence in the CIL's annual plan of a separate section contains an explicit systems advocacy work plan.
Now, again this is considered an initial outcome according to the logic model. So the task force spent quite a bit of time trying to determine what would be an indicator, what sort of -- what would we look at to determine whether or not a CIL had such a plan. So there were four different -- four different factors the task force looked at. First, did the CIL have one or more systems advocacy goals in their annual plan?
And the second factor that they looked at was did the -- did that man list one or more objectives towards reaching those goals? So we have goals and then were there objectives towards reaching those goals in that plan?
And then third, did the plan list the dates the center would begin working on those objectives? And then was there a place to indicate whether or not the objective was met? So these were all the factors that went in to determine whether or not a CIL had an annual plan around their systems advocacy efforts.
You can find some really good examples of work plan in appendix A of the, there's a document called measuring CIL outcomes on the IL-NET website, some really good information up there.
Can we move on to the next slide, slide number 17, thank you. And so, again, we are still on the systems advocacy stream. And so this particular outcome is decision makers act on our agenda, and this is really an intermediate outcome, intermediate or advanced outcome on our logic model and so the indicator of this one was the center -- the number of positive changes or positive changes achieved or negative changes prevented. I think Pat talked about some of the negative things that were happening in Georgia that were prevented.
So these are changes in legislation, policy, practices, or services at the local, state or federal level that address the barriers or the problems identified by the centers consumers.
And you can find some really good examples of systems advocacy outcomes in appendix B of the measuring CILs outcomes document. And so outcomes are categorized according to changes or prevention -- prevention of changes to legislation, policies, practices and services. Again, at different levels. And, you know, Pat already gave one example. I will give another example. One is at the local level and that is, maybe where the CIL and advocates worked with their local community, with their city or county to redirect community development block grant funds to provide home modification services. Maybe that's a service that was not provided before, through CDBG funds.
And then at the state level, one possibility might be -- or one example would be that your state housing trust fund policies were amended to require that all new single family homes constructed with trust fund money must be visitable, and so that would be -- that would be an example of -- of advocacy work at the state level. And then at the federal level, an example of some legislation that occurred would be legislation was passed to create April independent living administration.
And so these are all examples of different types of outcomes that you might see at different levels, local, state and federal level. So then if we could move on then to slide 18, systems advocate -- again, we are still on the systems advocacy stream. We are up there. And so another outcome on that stream is that methods and practices promote independence. And the indicator of that outcome -- or actually, a couple of indicators. One is the number -- the number and the percentages of consumers served by the CIL within the past calendar year who have moved out of an institution and into a self-directed community-based setting. For example, somebody moves out of a nursing home and moves into their own apartment.
The second indicator was the number and the percentage of consumers served by the CIL within the past calendar year, who remained in a self-directed community-based setting on December 31st, despite having been at risk of moving into an institution.
Of course, now the task force spent a lot of time going over that second indicator, and the definition of at risk and it really did prove to be problematic. The task force looked really long and hard at trying to come up with a workable operational definition of being, quote, at risk of being institutionalized. And the task force wasn't able to find one that was acceptable to all -- to the task force members.
So that might be something your state has worked on and if so, we would like to hear from you. We would like to know what are the definitions that you think might work.
However, you can find a couple of different -- there were a couple -- actually a couple of different ways of measuring at risk that you will find on page 11 of the measuring CIL outcomes manual. So there are a couple of different ways that centers could use it, could -- a couple of different methods the centers could use to measure at risk, but I don't think we were fully satisfied with the definition of at risk. And, of course, as you know, we OWA adds transition as a new fifth core service and so included -- included in this definition are transition from nursing home or institutions to the community and prevention of nursing home placement or institutional placement. And, of course, there's also another prong of that definitional transition and that has to do with transition of postsecondary youth. So that got to be a difficult process. That is coming one some definition of at risk.
Now, there was a definition. I know Pat you had sent me a definition of at risk, and, in fact, I think you can find that -- you know, you can find that in the -- in the manual and it does get fairly technical and so if you get some time, you might want to go and check out that definition.
Now, if we go to slide 19, there are some excellent resources regarding outcome measures up on the IL-NET website. One you will find at www.ILRU.org/resources-outcomes-measures. And so what you will find up there are things like interview guides, and I know Pat you are going to be talking a little bit more about some of the interview are questions. Also, there's information, there's an outcome management work sheet, and you can also find -- I think we had a reference before to the final report. You can find the indicators that were measured during the field tests and you can also find the training manual that was used for the field tests which is, I think, has some very valuable information or some information that you will be able to use as you go about measuring outcomes at your center.
And there's a second site that we would like to direct you to and that is, again, on the ILRU website. It's ww www.ILRU.org/training/outcome-measures-for-centers-for-independe nt-living. And what you have up there are materials from a two and a half day training program that occurred out in Portland several years ago. You will find the PowerPoint materials. You will also find on demand videos. So if you like, if you have some time, you can spend some time watching the videos with with Mike Hendricks and Bob Michaels. You can also get some really good handouts and you will find some information up there on that particular site, information about defining what is an outcome, what is a logic model. And, of course you saw what our logic model looked like, lessons that were learned from the field test, what are some challenges to remain, and I tell you what, we still have many challenges to -- that remain out there. Our work isn't done. How to develop measurable indicators for these outcomes. How to identify sources and methods and procedures to measure outcomes. Ways in which, excuse me -- ways in which to use the outcomes information, and why is the focus on improvement and not just reporting. We don't just want to be reporting or measuring just for measurement sake. We want to use the information we collect. Otherwise, what is the point if we are not going to be making improvements in our programs.
And then steps to improve your centers' outcomes in the future. So all of that you will find on the IL-NET website. So I guess that takes us on to the next slide and that has to do with Q&A.
>> TIM FUCHS: Okay. Great. Thanks, Dan. We will jump into our second of three Q&A sessions now. And I will remind you of those instructions, as I'm sure you have all figured out. You can type your questions in the chat, that's easy. But if you are just on the phone, press star pound and that will put you in the queue and you can ask your question live on the call. And then similarly, if anybody is on the full screen CART captioning at ccproductions.com, I'm logged in there and you can type your question in that chat program as well.
So while I wait for you all to type some questions out, I want to point out for those of that you do these Webby snares with us a lot, you probably noticey unders with us a lot, you probably noticed that in the right-hand corner there is a new pod, a new box, it says available now and it describes the type of technical assistance that Paula McElwie is available for and Paula is fantastic. Paula has been involved in IL movement for years, for decades, in fact, both in Kansas, but help centers all over the country, and is really a wealth of history and knowledge on everything from the IL philosophy to regulations and working with RSA and so she's just a tremendous resource and she's looking for CILs and SILCs to help out with direct technical assistance. She's recently been hired by ILRU which is great news. I want to highlight that while you were typing in your questions so that you can see that there.
Also for those of you that are on ILRU's mailing list, which is probably almost everybody on the phone, they just sent an email about this recently, just yesterday. So you can reference that too. You can at this pod in the bottom right-hand corner or go to the newsletter and check it out. Really thrilled with all the work that Paula and ILRU are doing.
I don't see any questions yet. I will give you 30 more seconds to type questions out. Any questions on indicators that Dan just rolls through.
Yes, Pat?
>> PAT PUCKETT: Would you go back and put the logic model up? And --
>> TIM FUCHS: Yeah.
>> PAT PUCKETT: And if people would give us feedback on whether or not they think that that -- that the logic model captures the essence of what Independent Living Centers are about.
>> TIM FUCHS: Great. I will. Thanks, Pat. I didn't see any comments while Dan was presenting, but I've gone back here to slide 11. Oh, since I said that, I noticed Shannon mentioned during the presentation that the slides seem to be off. There as a title slide on the webinar version. If you are looking at the PDF version that was sent to you, you are not missing any content, but they will be off by one. I'm on slide 11, the logic model. What do you think? Many of you indicated that you have seen this before. What do you think? Do they describe what you all do? And then if you just have questions too, don't be shy.
And, again, if you are on the phone, that's star pound.
>> DAN KESSLER: Hey, Pat, this is Dan.
>> PAT PUCKETT: Yes?
>> DAN KESSLER: You know, when I look at that logic model, in my mind -- and, of course, I may be somewhat biased, since I was on the task force, but I think this logic model does capture the work that centers do better than, really, I think any other kind of -- sort of model that's out there.
I mean, I have seen the logic model for other programs, you know, and -- and none of those really seem to capture what we do, but I think the task force has really captured a lot of what we do. Obviously, it's not perfect, but I think it's a great way.
>> PAT PUCKETT: Well, I have been doing this training in Georgia with our Centers for Independent Living and the question that always comes up when the people hook at the logic model is where is peer support.
>> DAN KESSLER: Yep.
>> PAT PUCKETT: And, of course, peer support is the DNA for the centers for independent living. So, you know, it's who -- it's who is there when you show up the a Center for People with Disabilities. It's sort of like if you go to the Hispanic chamber of commerce, you would fully expect to hear Spanish as the language of choice. Just like if you go to a Center for Independent Living, you will see and interact with people with disabilities. So it's ubiquitous and it sort of goes without saying. Peer support is how people see different possibilities for themselves.
>> TIM FUCHS: Okay, you probably noticed Sharon put up a poll to synthesize Pat's question, does the logic model capture what centers do and so far, about 80% of you say yes. But not everybody has responded yet. Pam Davies provides us some context. I think the model does a good job on zeroing in on the outcomes. It focuses the staff on outcomes, and that he is good.
Paul, you were going to make a comment.
>> PAUL SPOONER: I was just going to add about peer support. I think that's one of the hardest things that we do or believe in and promote to actually measure objectively, because that's a lot of discussion went on about how to get to that and that's probably why there really isn't an outcome indicator in here that's related to that.
>> TIM FUCHS: Well, it's funny that you mentioned.
That Ann, you probably -- no, Anne weeks asked, good question. Where do you see the other two core services Fiteing into this model, peer support and transition?
And Pat, I know you explained the thinking of the task force well on our call. Do you mind sharing that reasoning behind that?
>> PAT PUCKETT: I don't know that I understand the question, but I think that it is in those methods and practices promote independence, because, you know, now that we -- you know, basically, adding that core service is a policy change that promotes community involvement and independence. So -- does that answer your question?
>> TIM FUCHS: Well, that's good. I -- maybe it was Dan then. I remember someone saying how because it is difficult to measure peer support, the idea being that peer support fits into each of the categories measured here. So there's peer support.
>> PAT PUCKETT: Right.
>> TIM FUCHS: It goes through the IL services, that because staff centers are staffed by peers that peer support is part and parcel to all of the center services, including the other things in the logic model.
>> PAT PUCKETT: Exactly.
>> TIM FUCHS: Janet Brugger mentioned in response to the logic model, it allows us to map out programmatic outcomes and develop solutions to our weaknesses and strengths. Okay. I see a couple of people -- oh, go ahead, Dan.
>> DAN KESSLER: Yes, I would agree with Pat's assessment as to where the new -- certainly, you know, the new core service, the new fifth core service, it would be to promote independence. The difficulty, I think, the task force has and I think you would have it with any type of description of services, part of teasing out any one particular service because if you do it out of -- out of these activities at the bottom, because it -- they are also closely related, I mean, the work that you are doing with peer support.
>> TIM FUCHS: Dan, your phone is fading out. I don't know if you know or not. Maybe you can get closer to the microphone.
>> DAN KESSLER: Is this a little better?
>> TIM FUCHS: Yes, that's better.
>> DAN KESSLER: Okay. Yeah, I'm just saying it's hard to tease that out, it's really hard to tease out any one particular peer support. I don't know how you do that.
>> TIM FUCHS: Okay. Hey, Dan, Debra Fults has another question. She mentioned your comment on reporting outcomes to United Way. And she's wondering, what are the corresponding report forms look like? Are there report forms and how are they formatted and how do you respond to those to provide outcome measures to, you know, your current requirements?
>> DAN KESSLER: Well, in that -- in that particular situation with our -- with our United Way agency and it may not apply to all the centers because not everybody gets United Way money, but, we basically there's a question where we have to describe what outcomes we hope to achieve over the next funding year, and that really is up to us to define what that would be. And so what we have actually been doing is taking over the past several years, taking some of these indicators from -- from the work of the task force and using those. But they pretty much leave that up to us to define which ones we would like to use.
>> TIM FUCHS: Okay. Good. Thanks. I will give 20 more seconds to double check and make sure there are no more lingering questions. We will have another question session at the end. So you will have another opportunity if something else comes up.
Okay. Just checking quickly. And I don't see anything else.
I'm going to go ahead to slide 21. The process. And turn it back over to Pat.
>> PAT PUCKETT: Okay. So the centers for independent living that beta tested the process doing three different questionnaires. I & R callers were told our CILs want to make sure they are getting the information that they need. May we call you back in a couple of weeks to check? Initially they didn't think that time frame. They found out if you don't call people back pretty quickly, they will forget. So probably calling them back within 10 days to two weeks is the wise thing to do there.
And then CIL consumers were randomly selected until a significant number of consumers were identified and we may have to find what statistically significant means. And then there was an overall CIL question that had to do with the activities that you went through to determine what your barriers and problems towards independence were, and how you went about the process of developing your plan for the year. So it was more for directors but the two that we will go over is for consumers, I & R. consumers or CIL consumers. Paul, do you want to say something about how you determined your 25?
>> PAUL SPOONER: It mainly game from -- I think it came from the NCIL task force number, that was a number that Mike hendricks suggested that you should do at least that number to have a significant -- statistically significant number available. There are a number of questions about the various sizes of centers and would that be significant. So so a number of different centers did use a higher number and I think it went up to maybe a maximum of 50, but it's important to figure out how often you are going to do this as it is how many people you are going to interview because it does take some time as previous questions were raised, there could be a time commitment that grows as you implement more of these steps.
>> PAT PUCKETT: Okay. So let's go to side 22. This is an example of the information've referral questionnaire. I just want to say that it was very, very, helpful to me to be able to understand exactly what the process for gathering the information was. Until I saw these questionnaires I didn't know what was done. They are simple and straightforward. You have the information referral caller on the phone. You say, hi, my name is so and so and I'm with such and such a center and on such and such a date, you will called our information agency for information and referral assistance. In order to improve our services, we are calling back to some people like you, who contacted us during the past year. Now, keep in mind that's now during the past two weeks. I would like to ask you two short questions about the services you got from our center when you contacted us. All answers will be kept confidential. Do you have a moment to answer two short questions?
If the answer is no, try to reschedule for another time. If the answer is still no, document your attempt and thank the person for his or her time. And that's where you need to have a larger pool in case you have a 10 or 15% dropout rate from the people who are willing to participate.
All right, next slide, please.
>> TIM FUCHS: Sorry, Pat. There you go.
>> PAT PUCKETT: Okay. So if the answer is yes, you say thank you. For each question, please be as honest as possible. There are no right or wrong answers, just whatever you feel is true. We want to know how you feel so we can do the best possible job.
Let's begin.
Sometimes we are able to help people get the information they need from us and sometimes we are not. For you personally, did you receive the information you needed from us? And the possible answers are, I don't know, no, or yes -- or I don't remember, no, or yes.
Next slide, please.
And then the next question for I & R callers, sometimes people use a new resource they learn about from us and sometimes they don't. By the word "resource" I mean some place you can call or visit to get more help or more information. For you personally, did you use a new resource you learned about from us? I don't remember, no, yes. And then you do a thank you script. Those are my two questions. Thank you for your help. Your input will be useful to us, and other centers like us, as we work to improve our services for persons who contact us. As I mentioned before, your answers will be kept completely confidential within our center.
So that's the I & R question. The next slide. Now, what we learned from having done this study or what was compiled as the folks who beta tested it or input their information, 72% of the I & R callers received the information they needed. 15% did not and 13% could not remember. 52% used the information they got. 32% did not, and 17% couldn't remember.
So that the desired outcome was people get the information, right? So the next desired outcome is people with disabilities have the skills, knowledge, resources to support their choices 70% of CIL consumers reported that they learned new skill, knowledge or resources and were able to list one or more examples. Next slide, please.
So a couple of ways to use -- oh, no, my computer just died.
>> TIM FUCHS: Oh, no! Well, I will let you reboot. I think Dan, I think you were going to --
>> PAT PUCKETT: Oh, that's right. I turn it over to Dan. Boy, did I ever have a panic attack. I'm staring at a black screen.
>> TIM FUCHS: Well, you can go ahead and restart now, Pat. Sorry about that and then Dan, you can take over here on slide 26. Dan, are you there? Dan, are you on mute by chance?
>> DAN KESSLER: I'm off mute.
>> TIM FUCHS: There you go.
>> DAN KESSLER: You can hear me?
>> TIM FUCHS: Yep.
>> DAN KESSLER: Okay. Great. So, you know, you go through all of this work. You measure your outcomes and gather all the data and you make the telephone calls and you do a report. You want to do something with that information. And so you just don't want to do -- you know, go through all of this work and then just have reports sit somewhere on a shelf. And so we wanted to talk about a couple of different ways in which you could use outcome information and so -- so one way in which you can use the outcome information is shown on slide 26, and that is outsize of your center, and so your outcome measures can easily be understood by many different audiences.
You may have stakeholders or provincial stakeholders who don't have a really good, firm grasp of the independent living philosophy of what Centers for Independent Living are. Has anybody out there gotten a call from somebody -- from the community thinking you might be a residential facility or a Center for Independent Living? I'm guessing many of you have. I know we have. And so measures, the percent of consumers who can list the way they are more independent, or the number of consumers who were able to remain in their homes can really help to explain what we do and how we are unique. And explain it in such a way that could be understood by many different -- many different people. And the outcome measures can also be used as a tool to enhance your fund-raising capacity.
I think all of us are looking for ways in which we can raise funds outside of the government funds that we receive and so any other grants and foundations and so we are looking for maybe other ways in which we can raise funding.
And so funders, of course, if you have ever talked to a private foundation, they want to know watt return on their investment is. And so outcomes prove that people are benefiting from the services at your CIL. You actually have documentation that shows that people are benefiting from the work at your center.
And outcome measures can also help you recruit talented staff and volunteers, and, you know, talented people want to make a difference and they want to be affiliated with an organization that's making a difference, and your outcomes can demonstrate that you are making a difference in your community. So, you know this is another way in which the outcome measures could be of help to your center.
And outcome measures could also be used to help to promote your CIL to potential clients or consumers and referral sources.
So if I'm coming to your center or if I want to refer somebody to your center, I would like to know -- I would like to know what to expect and so successful outcomes show me that your CIL has something to offer me. If I know great things are happening at your center and people are achieving results, I will be more likely to want to talk to the folks at your center. That's another way in which the outcome measures could be used. And outcome measures can also encourage other agencies to collaborate with you. And so several different ways that outcome measures can have PR value that's looks outside of our CIL.
How are we doing on time, Tim?
>> TIM FUCHS: We've got about 10 minutes left, Dan. So maybe we can summarize more on the next few slides.
>> DAN KESSLER: Okay. Okay.
Then there are ways in chuck use the outcome measures internally. One is inside your center, obviously for program improvement, outcome measures can help you know how effective you are being and maybe you are thinking of expanding to a -- expanding one of your existing programs and you want to see how it's working to make sure you do that expansion.
Outcome measures can help do you that, to see what the results are. They can also help you find ways of being more effective. You know, none of us are perfect. But would you want to know as a -- as a center staff member or manager, director, or board member if 80% of people who called your center or 35% of the people who called your center got the information they wanted to receive? I think would you want to know that.
Outcome measures can help you focus on what is important. That is we all get invited to serve on committees and advisory committees and groups like that, but sometimes we have to sit back and say -- learn went to say no and I think if we can focus on our outcomes and not just activities we will be much farther ahead. And it can help you identify some staff training needs, perhaps where you have some gaps.
And then also the outcome measures support long and short range planning, and that is look at gaps in services, training needs, and identify short and long-term goals. These are all different ways you can use the outcome measures for outside PR value and then internally. Some possible next steps, I would first like to suggest you go up and review the information on the ILRU website. I think that would be a great place to start if you haven't seen that information before.
You could also talk about outcome measures. Put that on the agenda at your next staff meeting or board meeting to talk about understanding what outcome measures are and how they could benefit your CIL.
Maybe include a section on outcomes in your next annual report, promotional materials or maybe even put something on your website about outcomes that people are achieving.
What sort of outcomes is your center achieving in terms of your systems advocacy efforts?
And then you can review your consumer satisfaction survey and determine does it capture outcomes? So there may somebody ways in which you could combine your consumer satisfaction surveys with some outcome measures.
So what I would suggest is if you haven't done this before, if you haven't measured outcomes is start off -- start off very simply. I wouldn't try to go and try to measure all of these outcomes at once. So you might want to select several outcomes or maybe just select one indicator to measure if you have never measured outcomes before. And so you might want to start some initial outcomes and work your way up to the inmediate and ultimate outcomes. But take it one step at a time. Don't try to -- if you have not done this before -- try to do it all at once.
So that's the end of my presentation.
Tim, I will turn this back over to you.
>> TIM FUCHS: Sounds good. So thanks for moving through those last few quickly. I think you covered everything. We still got 10 minutes left for our final Q&A break. We have a few questions pending, which I will walk through in a moment. Just a reminder, you can press star pound to ask a question on the phone or type your question out on the CART platform or the webinar platform, whichever you prefer.
Let's start off. First of all, I understand that there's a telephone question pending for a few minutes. I want to start there and we'll take a moment and get that caller's line unmuted. And caller, you can go ahead.
Okay, caller, we can hear you. Go ahead. Do you have a question from the 518 number?
>> AUDIENCE MEMBER: Is that me from before. Okay, this is Brad. My question was answered. I was going to ask about follow-up and evaluation in terms of a -- you know, the outcomes and everything, and whether there was some follow-up, like, evaluation with the consumers and there obviously was. They had a specialized in terms of, you know -- in terms of the resources, et cetera, and whether there was a survey. They already answered.
It thanks.
>> TIM FUCHS: Thanks, Brad. Let me go back to the chat then and I will go back to these questions that came in during the last section. Okay. Kathy requests a question about the I & R questionnaire and suggests wouldn't it be better not to count the could not remember answers?
Pat or Dan, do you want to reply and explain why you decided to include that?
>> DAN KESSLER: Can you repeat that question?
>> TIM FUCHS: Sure. So in regards to the questionnaires, the consumer questionnaires, Kathy was wondering if it wouldn't be better it not include the number of could not remember answers.
>> DAN KESSLER: Well, this is Dan. I would -- certainly if you want to take that approach, you might want to consider that, but I think it was important for surprises of this field test, to have an understanding of the responses that you got, and so that was -- there was -- and I think that tells you something about the fact that, you know, X percent of people don't recall what their contact with injure center. I know by the time a lot of people -- a lot of calls we get, people have talked to so many other agencies, but sometimes we have difficulty remembering where they got the information. And so -- so I think that may point us, give us some ideas that maybe we need to do some follow-up with our I & R callers much sooner than we had done with the outcome measures task force field test.
>> TIM FUCHS: Good. Okay. Thanks, Dan. And I'm going to jump ahead a bit to a question from Olivia, more of a comment, actually, very helpful comment. Olivia points out that on the task force report, there's a particular slide that shows when you add the responses to people who said they used the information, said they did not use the information or said they couldn't remember, that the total is 101% of those polled. So obviously I think a percentage got rounded up that maybe should have been rounded down. Thanks, Olivia, we will take a look at that and get it corrected. That's the other reason you would want toask, that when you share the data, it's clearly understood how the person responded.
The next question comes from Mark and I will share this with Dan and Paul. Can the person who provided the I & R service be the one to do the two-week follow-up via call or survey? How do you all handle those conflicts and do you have rules in place to prevent them?
>> DAN KESSLER: Paul, do you want to take that?
>> PAUL SPOONER: Yeah, clearly, we felt from the start that people who were making the calls to I & R recipients and consumers should not have been the person providing the service. I mean, it just felt a little bit like it would be a conflict there, and it's -- it's -- it was just made more sense to assign this to different staff, to give it that feeling of objectivity and up frontness.
>> TIM FUCHS: Good.
>> DAN KESSLER: I agree with Paul. This is Dan. The person who made the phone calls on behalf of our center was somebody who had not provided services to the individuals and so -- so I think it adds some, I guess, credibility if you will, that these -- that the -- we are getting a more, I guess, unbiased opinion, not to say that, you know, the staff did go. Because there are some centers that have a very limited number of staff and that may not be something you can work around. But if you can, I would certainly suggest having somebody make the call who did not provide the service.
>> PAUL SPOONER: This is also something that's real good, easily, trainable, volunteer project to get into, to do on a regular, monthly, or every couple of months basis. So it really adds to your capacity building by bringing in different folks to ask and participate in this process.
>> DAN KESSLER: That's a very good point, Paul.
>> TIM FUCHS: Good tip. Just quickly, star pound to ask a question on the phone. Or you can type it in the chat. We still have presentee that we are working through here. We still have five under outcomes and indicatorsths. Maureen Ryan asks does the IL services capture what which services resulted in which outcomes? I think going back to the outcomes, is there a way to determine from the results which services resulted in which outcomes?
>> DAN KESSLER: I think -- I think that that's a difficult -- that's a difficult thing to do, given the range of services consumers may have -- may have participated in at your center, but where you have a clearly defined service, that may be a particular -- that certain individuals received, and there might be a way of doing that, although I guess with your documentation, you would have to find some way to tie that in your -- in your -- say in your Survey Monkey, if you are putting the information up there, to include in there the services that individual received and, of course, that is going to take more time. But I think that could provide you with some useful information, but I don't believe that's something that the outcome measures task force field test did. And so -- but I certainly think there might be some potential there.
>> TIM FUCHS: Okay.
>> PAT PUCKETT: Well, to me -- this is Pat. To me, because the services are interactive, I mean, the -- the way in the door very often is information and referral, right? And then sometimes people will become -- will open a CSR, consumer service record, and then get involved in skills development. So because all of those intermediate and -- initial and intermediate outcomes are sort of interactive with one another, I think it's kind of hard to say that this service produced that result, because, again, we've got peer support that, you know, impacts a person.
So there's so many ways that -- I mean, so many -- it's all so interactive that to me, it doesn't -- it doesn't make sense to try to capture it that way.
>> DAN KESSLER: This is Dan.
>> TIM FUCHS: Good point.
>> DAN KESSLER: I think I understand what Pat is saying.
There may be certain services, for example, if somebody has -- they come to your center, all they want is to have a ramp built at your house. That's all they want. They are not interested in peer support and the other services. Other core services, and you might be able to -- I think you probably could more easily in that kind of situation see a direct relationship between the service providers and the outcomes.
>> TIM FUCHS: Good. Okay. Thanks.
>> PAUL SPOONER: I think the caller was asking more specifically tracking resources, you know, knowing what I & R resource you gave out, not necessarily -- it wouldn't necessarily mean just internally, but, you know, if someone called to find out where you could get food stamps or, you know, meals on wheels or any number of services that the center would provide, you know, would we be tracking those outcomes? I think that's also part of the possibility of tracking this data which is collecting more data.
>> DAN KESSLER: Yeah.
>> PAUL SPOONER: But it's a challenge.
>> TIM FUCHS: It is a challenge.
>> DAN KESSLER: And consumers are going to -- as they are interviewed, they will list the ways in which they have -- they are more independent or list the resources they have been able to obtain. So that -- there's some really good information that I think the center would find helpful.
>> TIM FUCHS: Okay. Good. We will go ahead and take these last two questions, actually so we can wrap up. And it's a great question, though. And so missy is wondering if we need to include outcome measures on the 704 report due this year. And coincidentally, the next question is from Maureen Ryan would asks if we want to remind folks that this outcome measures task force tool is not required, you know, from the federal funder or by, you know, ACL and the transition to HHS, and so, of course, yes, we want to remind people that, no, this is not required currently. And this is just a tool, if you remember when Dan mentioned the PART going to the back of the call, for a score of not demonstrated. A group decided that was unacceptable. We knew the value of the IL program and began to develop this tool with centers from all over the country, so that we would be able to demonstrate our results.
But, no, this is not required. Now there has been some work. I would turn it over to Pat to expound on this, but we are short on time. There has been some work to try to incorporate some of that hasn't been done yet and if it does, we will certainly keep you all posted.
It would be big news and you would be sure to know, but for now, no, this is an option. We are glad that you have joined us to learn more. And we welcome your questions going ahead. So I will go ahead here to slide 30, and Dan, Pat, and Paul have all been generous enough to offer their contact information for follow-up questions. And I will do the same. My email, as I mentioned at the beginning of call is Tim@NCIL.org, and this is -- this task force and a lot of this work is a program of NCIL. So don't hesitate, please, to contact any of us. Paul is a member of the task force. I staffed the task force. Dan and Pat are cochairs. Don't be shy if you have questions about the tool or input and comments. We would welcome that and hope to hear from you.
And so if you have comments or questions later today or whether they come up in a few months, by all means please reach out. We would love to hear from you.
Here on slide 31 is the link to the evaluation form that I mentioned at the beginning of the call. And thanks to ILRU, they are offering a gift card, an Amazon gift card for $25. So if you fill this out, you will automatically be entered into the pool and they will contact the winner.
And if you aren't on the webinar, or can't do this right now, please do fill it out, but the same link was included in the confirmation email that was sent to you with the connection instructions. So I do hope that you will fill that out.
And I just really want to thank all of you for joining us today. We had a great audience and I'm really glad to see the interest in this topic. I hope you will remain engaged and send us your comments and thoughts. This is complex, and we hope to hear from you all as you all develop your own programs.
And Pat, Paul, and Dan, thanks so much for your time today. Thank you so much for your time over the last few months preparing the presentation. This is really great and I appreciate it. So I hope everyone has a wonderful afternoon. Take care.

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