**Integrated Resource Team (IRT) Process Mapping Exercise**

**Introduction/Purpose:**

The participants we work with who would benefit from an IRT typically have multiple resource and support needs. Often, a participant’s resource and support needs are beyond what one singular program or agency can provide thus necessitating the need to access resources and support from multiple systems and programs whether that is a result of programmatic limitations (i.e. beyond their scope or authority) or simply the amount of available resources. As you think about your program’s participants, what are some of the common resource needs and supports the individuals you work with need? Transportation? Job Development/Job Coaching? Behavioral Supports? Mental Health Treatment? Medication Management? Supported Decision Making? Housing? Social Outlets? Etc.?

Given the wide range of some of the common resource and/or support needs that arise when working with individuals, it is evident that participants will likely need to access resources and supports beyond what your own program can provide. Moreover, when we consider a holistic and person-centered approach, like that encouraged through Charting the Life Course, even those resource and support needs not directly tied to your own program’s outcomes are still essential to consider.

The purpose of this exercise is to help organizations/agencies think through the specific steps a participant goes through in order to access a specific entity’s services or resources in order to help various entities understand the service flow for each of the various programs or services that might be involved in an IRT. Having an understanding of both how various programs and resources are accessed and the outcomes sought by those programs is a crucial part of developing the necessary partnerships needed to support your program’s participants. This understanding also serves as the foundation of the Active Resource Coordination phase of the IRT process. As such, using the questions in the outline below to help you, complete the chart below by considering the various resources and supports that participants often have, and potential entities that provide them in your area. The chart is organized around the Charting the Life Course domains with each domain including additional lines for other entities or resources not already included for consideration.

* 1. How does the participant get to the agency?
  2. What is the first thing the participant has to do to access services?
     1. i.e. Attend an Orientation?
     2. i.e. Complete an application?
     3. i.e. Attend an intake appointment
        1. How long does it typically take for the participant to complete initial engagement activities?
  3. Once they have completed whatever activity they must engage in to access services, then what happens?
     1. i.e. Eligibility Determination
        1. How long does that take?
     2. Service Coordination?
     3. Plan Development?
  4. If an eligibility determination is required, what happens once that has been completed?
     1. i.e. assessment?
     2. i.e. Service Coordination
        1. Who is involved in service coordination?
     3. i.e. Development of a Plan?
        1. What does the plan look like?
        2. What is included in the plan?
        3. Does your plan address all resource and support needs including those not directly related to your program’s outcome?
     4. What are the outcomes for your program?
        1. Competitive Integrated Employment (full-time/part-time)?
        2. Credential or Certificate Attainment?
        3. Reduction or cessation of benefits or services?
        4. Financial Independence?
     5. What are the outcomes the participant is trying and/or expected to achieve?
        1. Stable Mental Health?
        2. Regular participation in counseling?
        3. Employment?
        4. Housing?
        5. Living Independently?
  5. Once the Participant has a plan, then what happens?
     1. How long does your program provide services?
     2. What happens or how does your program close a case?

**Program/Resource Mapping**

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| **Program** | **How do participants come to the agency or program?**   * Self- referral? * Other referral? | **How does a participant access services?**   * Orientation? * Application? * Intake? | **What happens after the initial access attempt?**   * Eligibility determination? * How long from application to enrollment? | **What services or resources and supports does the agency or program provide? How long do services last? When do services start? Who provides the services?** | **What are the goals of the programs, agency/org providing the resource?**   * Credential * Work * Housing * Food Security * Financial Stability |
| **Charting the Life Course Domain – Daily Life & Employment** |  |  |  |  |  |
| Vocational Rehabilitation |  |  |  |  |  |
| WIOA Title 1   * Adult * Youth |  |  |  |  |  |
| Adult Basic Education |  |  |  |  |  |
| WIOA Title 3   * Wagner-Peyser * Business Services Specialists * Resource Room |  |  |  |  |  |
| Local Education Agency/School District – Special Education Coordinator and/or Teachers |  |  |  |  |  |
| Career-Focused Community Rehabilitation Providers |  |  |  |  |  |
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| **Charting the Life Course Domain – Community Living** |  |  |  |  |  |
| Social Services   * TANF * SNAP * WIC * HEAP |  |  |  |  |  |
| Housing   * Public Housing * Section 8 Housing * Group Home(s) |  |  |  |  |  |
| United Way |  |  |  |  |  |
| Public Transportation |  |  |  |  |  |
| Group/Supported Housing Options |  |  |  |  |  |
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| **Charting the Life Cours Domain – Healthy Living** |  |  |  |  |  |
| Mental/Behavioral Health Programs |  |  |  |  |  |
| ID/DD Programs |  |  |  |  |  |
| Medicaid Waiver Program |  |  |  |  |  |
| Healthcare Discharge Coordinators |  |  |  |  |  |
| Activities of Daily Living Management and Support |  |  |  |  |  |
| Healthy Eating |  |  |  |  |  |
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| **Charting the Life Course Domain: Safety and Security** |  |  |  |  |  |
| Work Incentives Planning and Assistance (WIPA)/Benefits Planning |  |  |  |  |  |
| Representative Payee |  |  |  |  |  |
| Local Credit Union/Banks |  |  |  |  |  |
| ABLE Accounts |  |  |  |  |  |
| Homeless Programs |  |  |  |  |  |
| Domestic Violence Programs |  |  |  |  |  |
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| **Charting the Life Course Domain – Social & Spirituality** |  |  |  |  |  |
| Faith Based Networks |  |  |  |  |  |
| Civic Volunteer Networks |  |  |  |  |  |
| Recreational Organizations   * Outdoor Recreation * Local Library programs * Scouting Groups * Community Theatre |  |  |  |  |  |
| Disability Specific Recreation   * Special Olympics |  |  |  |  |  |
| Dating and Healthy Relationship Programming |  |  |  |  |  |
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| **Charting the Life Course Domain – Advocacy & Engagement** |  |  |  |  |  |
| Independent Living Center(s) |  |  |  |  |  |
| Local Chapters Disability Specific Organizations   * United Cerebral Palsy Association * Autistic Self Advocacy Network (ASAN) * Down Syndrome Association |  |  |  |  |  |
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**Active Resource Coordination/Partner Engagement**

* With the Participant positioned to access your program (i.e. determined eligible and in receipt of services) and now that you have process-mapped the various agencies and services around the *Charting the Lifecourse* life domains and identified additional resources that can be potentially accessed, what are the next steps?
  + Where are the touch points between the programs based on what you mapped out earlier?
  + How are your programs coming together?
* To get to the IRT – Active Resource Coordination is the first step.
  + Based on when your programs come together, with the participant accessing your services, and additional unmet resource needs identified, you can begin to help the participant engage the additional resources.
  + Not just simple referral – Role is to assist your participant to engage their additional supports calling programs together and stressing the benefits of partnering.