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## Strategic Local Planning: A Collaborative Model

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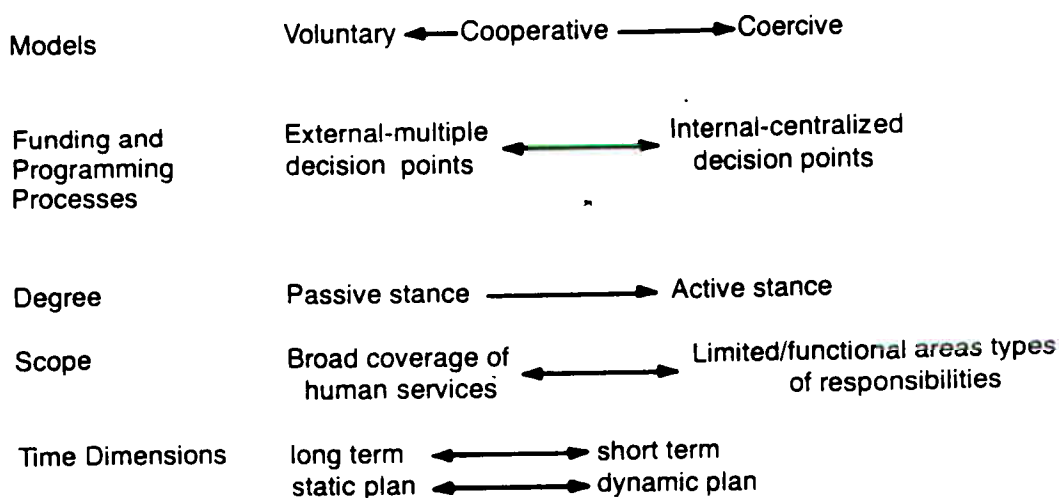
## V. Considerations for Plan Implementation

Policy can be developed without planning. Whether planning has an effect on policy will depend, ultimately, upon the legitimacy of the planning process, the utility of the format and content of the plan, and the approach taken for translating the policy plan into programs. Therefore, choices of participants, planning concepts and planning methods must be based on a clear understanding of the plan's purposes, users, and vehicles for effecting decisions. Without prospects for implementation, comprehensive planning is an intellectual exercise unlikely to command the expenditures of time and resources necessary to sustain it. While implementation is the last step in the planning process, it is the first concern which must be addressed in developing a planning model.

### Implementation Strategy

As noted in chapter IV, the authority to plan for the community comes from the convener and is reflected in the structure of the leadership group. The transfer of this authority lends legitimacy to the planning and defines a purpose for the planning effort. These three factors—the legitimacy, source of authority, and purpose of the planning effort—dictate the choice of an implementation strategy. This implementation strategy is reflected in the choice of an implementation model, a point of focus for funding and programming processes, the degree of implementation, span of coverage, and true dimensions.

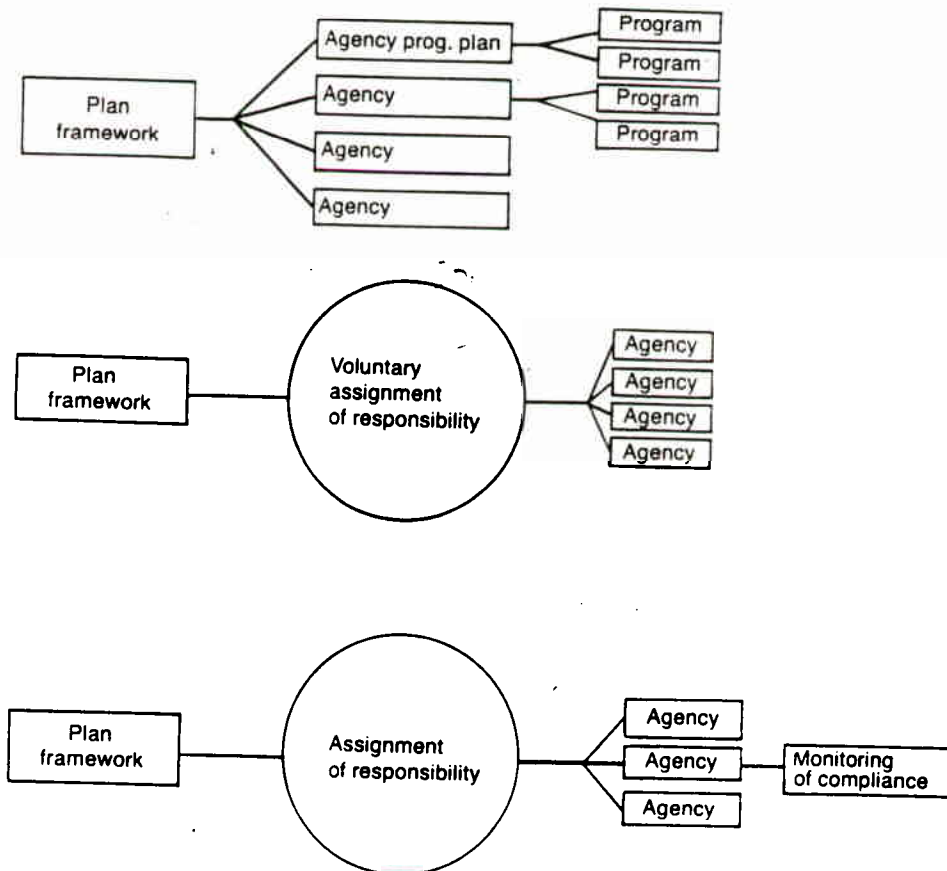
#### Implementation Strategy Alternatives



## Alternative Implementation Models

Plan implementation models can be grouped into three categories: those that seek voluntary agency responses, those that extend the collaborative processes of planning to implementation, and those that utilize the authority of the convener and members of the leadership group to mandate implementation of the plan.

### Alternative Implementation Models



The voluntary model focuses the planning process on the production of a document—a framework to guide human services policy and program decisions. This document is the culmination of the interagency effort. Individual agencies are encouraged to measure programs and policies against the framework, but there is no collective activity to translate the plan into programs or to formally monitor the efforts of the agencies. Coordination is achieved through the use of a single framework as a point of reference. This model recognizes the limits of central authority and individual agency discretion and does not attempt to push cooperation beyond the point of information sharing. It is particularly geared to voluntary governance models where all participants are equals and no one set of actors has sufficient authority to influence the actions of any other set of actors. A voluntary model has the greatest utility for identifying and correcting the unintended consequences of delivery system fragmentation (e.g., inadvertent duplication of services, service discontinuities) or for suggesting a framework for evaluating resource allocation options. It is a weak model for coordinating purposes, modifying programs, or concentrating resources.

The cooperative model extends the interagency activity into plan implementation by identifying and discussing program modifications and by negotiating assignments of responsibility for program development. However, the cooperative model remains exploratory and has an informal monitoring mechanism, but lacks an enforcement capacity. It emphasizes the translation of the broad framework into concrete program details, but is still constrained by a lack of central authority. It relies on the manipulation of peer influence among agency executives to encourage implementation, but it stops short of using overt sanctions to exact compliance. The cooperative model is predicated on the existence of a governance body with diffuse authority, with limited command of sanctions and incentives, or with an unwillingness to expend these political resources on the implementation of a comprehensive plan. Cooperative implementation is most useful for producing program coordination or problem-solving activity among a limited set of actors or a subset of providers. It has limited utility for influencing policy throughout the total local human services system. However, where these few actors are funding sources for other human services providers, multiplier effects may extend this coverage.

The mandated or coercive model builds on the ability of either the convener or members of the leadership group to structure incentives or sanctions to influence the behavior of individual human services provider agencies. In this model, strategies are translated into program modifications and new programs through the cooperative efforts of the participating agencies. Commitment to implementation is negotiated collectively. Agencies develop programs subject to review by a body designated to monitor implementation. The authority of the convener or leadership group is important in encouraging cooperation and in enforcing compliance with previously negotiated commitments. Sanctions and incentives that come into play in enforcing performance of commitments are related to future funding. Where the leadership group represents the key funding sources for human services, the coercive power of this approach is potentially strong. In reality, however, influence rarely operates in a single direction, and the coercive power is more illusory than real. This model, however, has the greatest potential for concentrating resources for problem solving and for improving accountability in the system.

These models do not fully reflect the actual constraints of implementation. These actual constraints include factors which limit the use of influence (e.g., bargaining: there are multiple centers of influence—some conserving, some expending, and some accruing influence—so that, for any one decision, the structure of influence is not predictable nor replicable for any other decision). Other constraints are the effects of external influence from State and Federal agencies, the multitude of actors involved in any single implementation effort, and the resulting diffusion of control and accountability. These models do, however, provide a structure for defining and selecting an implementation strategy.

### **Identifying and Harnessing Existing Processes**

A second choice to be made relates to the selection of funding and programming processes that exist in the community that can be utilized in plan implementation. These existing processes translate policy into resource or program actions in a variety of ways and need to be identified and utilized by those managing the implementation model to advance the plan. One or more processes may be harnessed to enhance the success of plan implementation. These processes include:

- the allocation of local tax revenues through budget review and appropriation activities in local legislative bodies,
- the allocation of Federal block grants through proposal review and funding by conduit agencies,
- the review and comment on Federal grant applications by State and substate regional planning agencies and others pursuant to OMB circular A-95,
- the annual budgeting and planning cycle of community chest agencies, and
- the program planning activities of individual agencies.

Each of these processes dictates a slight variation in the approach to implementation. Centralized decision points (e.g., the deliberation of local legislative bodies) offer more opportunity for uniformity in application of the framework and for broad influence on local human services activity. As a result, there is not the need for coercion in plan implementation. More diffused decision points necessitate the development of external coherence through more coercive approaches to plan implementation—particularly through monitoring and review.

The processes chosen also influence the format and method of approval of the final plan. If the plan is intended to influence allocation decisions of local government, it provides a framework of strategies and priorities to enable budget analysis to evaluate proposals for funding. The plan must have credibility with key public decisionmakers at the highest level of policy articulation. Approval of the plan by key officials can have the effect of establishing the plan as a legitimate expression of public policy.

If the vehicle is agency program planning, the plan includes a statement of desirable program modifications and additions, and some assignment of responsibility among agencies for carrying out these changes. Recommended changes need to be perceived as feasible by the agencies based on an analysis of their internal and external resource commitments. The final plan is approved by participating agencies if the scope of change is limited to participating agencies, and is approved by key funding agents (e.g., State and local government, the community chest) if agencies outside the span of participating agencies are to be involved.

If several processes are selected for use by those responsible for plan implementation, then there must be a number of different products emanating from the overall planning activity responsive to the requirements of each process.

### Degree of Implementation

A third choice to be made in the implementation strategy is the choice between a passive and an active stance for plan implementation. These alternatives represent the extremes on a continuum of options for degree of plan implementation. At one extreme, a passive stance uses the comprehensive framework as a guide for agency program development and measures agency performance in relationship to overall community objectives and strategies. At the other extreme, an active stance pursues the implementation of recommended changes in strategies and priorities through negotiations of program details and responsibilities with provider agencies and through the development of requests for proposals and funding emphasis in priority areas.

In a passive stance, the leadership group may monitor the performance of agencies in relationship to the overall plan, but agencies develop their own approaches to the plan and no specific effort is made to implement any particular recommendations. The plan is used as a yardstick against which to measure change. In an active stance, the leadership group or funding source encourages the development of programs specifically designed to pursue priority modifications.

With a passive stance, planning may end with the publication of community objectives, strategies, and priorities—a planning framework—which becomes the yardstick. With an active stance, the recommended changes to strategies and priorities are developed and used to guide the planning and negotiation of program and budget modifications.

In summary, there are degrees of plan implementation along a continuum from a passive to highly active mode of participation. The passive mode is reactive in nature; it uses the plan to reflect rather than direct future actions. At the other end of the spectrum, prospective or proactive actions are taken to shape programs or rearrange funding patterns to reflect priority social conditions.



## Scope of Implementation

A fourth variable is the extent of coverage of the human services delivery system in plan implementation. Although the plan may encompass the entire domain of human services, actual translation of policy into funding and programming decisions may occur for limited sectors of human services activity. This may occur because some funding agents or providers choose to implement the plan in their sectors while others are not willing or prepared to do so in theirs. Still, other participants may choose to apply the plan only to certain areas of their human service responsibility or to certain types of responsibilities. A local unit of government, for example, may review only new program proposals for compliance with plan recommendations, excluding from review proposals for existing programs.

## Time Dimensions

Two related sets of alternatives to be considered in establishing time dimensions for the plan relate directly to the implementation strategy. First, there is the choice of a planning horizon. Comprehensive planning is usually conceived as long-range planning, partly because of the massive resource commitment required for comprehensive planning and partly because of the time required for translating broad policies into actual program activities. Too short a horizon leaves little time, either for the evaluation of effects or for preparation of a new plan. However, long-range can cover any period from 2 to 5 years. Two-year planning cycles require continuous planning, implementation, evaluation, and planning activities with little room for delays in implementation or for resulting programs to show any tangible results. Five-year planning cycles may require an interim dismantling of the planning apparatus, with consequent costs associated with reorganization and retraining of participants. In addition, 5-year plans lose their relevance in the fourth and fifth years due to changes in the human services environment.

Second, there is a choice of approaches to plan update. A static approach to planning would update the plan in its entirety at the initiation of a new planning cycle. A dynamic approach would maintain some ongoing planning update capacity, modifying the plan to include externally caused changes in the human services system as they occur. With a static approach to planning, the plan may become outdated as a reflection of the actual human service system and may lose relevance, either as a yardstick or as a policy statement. (The dangers of this approach were developed somewhat in chapter III.) With a dynamic approach, the process of updating the plan is made an integral part of the identification of external changes and the adjustment of agency executives and planners to these changes (new Federal and State initiatives, changing goals and priorities, adjustments in implementation). As strategies are modified to reflect knowledge gained in implementation, the plan itself is revised. The dynamic approach accounts for the fact that the comprehensive plan is but one element affecting decisions made in the community, which will play a greater role if it more accurately reflects the choices facing decisionmakers at any particular time.

The choices of a planning horizon and update strategy are interwoven. The selection of a shorter time horizon reduces the necessity of periodic update. The plan is less likely to lose relevance over the short term and staff and participant time is more likely to be consumed in meeting deadlines imposed by the regular planning cycle. With a longer time horizon, periodic update becomes more important, both as a means for retaining plan relevance and as a way to employ participants and staff between planning cycles.

## Conclusion

The five dimensions (e.g., model, funding and programming processes, degree, scope, and time dimensions) are defined in the development of an implementation strategy. The choice of strategy is a strong influence on the choice of actors for planning, the structure of planning decisions made, the content of the planning documents, and the characteristics of the implementation process itself.

In designing the planning concept and method, the convenor and the leadership group first commit to an implementation strategy and then make decisions on the components, roles, and sequencing of activities in the planning process. The culmination of the planning process is the implementation process described in the following chapter.

## Implementation — The Process

There are four generic components of an implementation process which are further defined through the selection of implementation strategy. These four components are:

- assignment of responsibility
- program development
- monitoring of compliance
- evaluation and feedback

Assignment of responsibility refers to the process by which decisions are made for an agency to commit to modifying an old program or initiating a new one. Assignment may range from informal self-assignment (a passive voluntary implementation approach) to formal, consensual assignment in which agencies agree to be held accountable by other agencies and/or local government for the development of a specific program.

Program development refers to the process by which general strategies and priorities are translated into program details and budgets. This activity is usually an individual agency effort, although an active implementation strategy may involve collaboration in setting parameters for programs.

Monitoring of compliance refers to the process by which progress of agencies in plan implementation is reviewed. This component involves the creation or utilization of a plan review or data collection process and the development of an accountability structure. Monitoring is possible in any implementation strategy, but enforcement of compliance requires the existence of authority to mandate performance and the capacity to use sanctions for noncompliance (such as elimination of local government funding or the documentation of opposition to Federal funding of a project).

Program evaluation refers to the process by which data are collected to provide information on whether the plan was translated into programs, whether the programs were successfully implemented and managed, and whether they had positive effects on the problems. Program evaluation may vary from a focus on plan implementation to a more thorough effort to assess the quality of the plan recommendations and the effectiveness of the services produced.

Successful plan implementation is dependent upon structuring a planning process to produce a credible plan and gain the involvement and commitment of participants who will have to implement the plan.

## VI. Conceptual Design and Development

Defining the conceptual design places the comprehensive human services planning effort within the context of ongoing community planning and decisionmaking. It differentiates a unique function for comprehensive planning and rationalizes the legitimacy of a focus of planning which may have no precedent in the local community. Conceptual definition sets limits for the scope of the planning effort and provides the basis for conceptual continuity throughout the design, development, and implementation of the process.

These conceptual choices provide a theoretical referent for the technical group (the interagency planning committee) as they work through the design of the planning model.

### Concept

The conceptual design for comprehensive planning is based on the definition of three aspects of planning:

- level of planning — including the degree of abstraction and the level of decisionmaking,
- frame of reference — including the assumptions about change and the role of planning, and
- scope — including the functional areas and types of services to be included.

### Level of Planning

In every local community, the ongoing allocation of resources, organization of services, and management of programs involves planning. Comprehensive planning does not replace ongoing planning functions, but it does supplement them in a significant way.

The role of comprehensive planning in relationship to other forms of planning is defined in terms of its level of generalization or abstraction, its relationship to authority and decisionmaking, and the *sequence of its execution with regard to the iteration of other planning activities.*

For the purpose of this conceptualization, three levels were defined at which planning occurs: a project level, a program level, and a policy level.

Project planning relates to decisionmaking at the management level within service-providing agencies. It is intended to provide a structure for the operation and evaluation of a specific project for service delivery. It is focused on objective setting, task definition, and resource deployment for a prescribed activity within a defined period of time.

Program planning relates to the highest levels of administrative decisionmaking. It is designed to support the process of allocating a set of resources for program activities within a specific functional area. It is usually focused on the specification of strategies to accomplish prescribed ends within the constraints of (1) a perspective associated with that particular functional area, (2) the regulations defining fundable activities, and (3) externally mandated priorities and services. It may occasionally involve the selection or ranking of ends within established limits.



Policy planning relates to the highest levels of political decisionmaking. It is designed to support the process of defining ends or purposes, making broad choices of strategy and establishing interfunctional priorities for the allocation of community resources. It is usually focused on expressing the purpose behind community services and on ordering the overall system of services to address this purpose.

These three levels are hierarchically ordered in terms of the level of abstraction and level of authority, and sequentially ordered in terms of timing. Policy planning provides the least detail on the substance of programs and has the broadest scope of coverage of functional areas. Project planning provides great detail on the administration and funding of specific services, but is confined to very narrow program areas. Policy planning relates to the policymaking responsibilities of local elected public officials and their chief administrators. Project planning is a management function which operates within the parameters of existing public policy. Logically, policy planning precedes program planning which precedes project planning. In policy planning, officials state purposes and set priorities for funding local human service activities. Program planning organizes strategies to accomplish these purposes and designates providers to receive funds for the implementation of the strategies. Project planning organizes the providers to implement the strategies and establishes a basis for evaluating the quality of the implementation effort.

In addition, there is a difference among the three in the length of the time horizon. Project planning tends to have a focus on the present and the immediate future, up to the end of the fiscal year. Program planning tends to be focused on a fiscal year, with an occasional focus on a multiyear funding cycle. Policy planning tends to be focused on change over a number of years, with plans revised on a multiyear cycle.

Policy planning is, therefore, by definition, an interdisciplinary, multiyear, generalist activity which provides the structure of framework within which more specific and focused policy analysis and planning can occur. It is at this level that local comprehensive human services planning occurs in the community.

## Frame of Reference

Social welfare policy, from a rational perspective, has been purposive and change oriented. It has sought to overcome social problems by either correcting individual deficiencies or by reforming social structures. In its implementation, however, social welfare policy has been translated into human services provided in organizational contexts. In these organizational contexts, human services have become compartmentalized, diverted to organizational rather than rational agendas, and promoted as ends in themselves. In the crush of day-to-day management decisionmaking, administrators have lost sight of the purposes of human services and focused instead on assuring the survival of services and organizations. When asked to justify their budgets, administrators emphasize the quantity of program outputs, but not the quality of outcomes for clients. Those who don't understand human services or don't have a stake in human services delivery, often question the value or purpose of human services. This questioning is likely to be most persistent among local elected officials who are held accountable by the public for the costs and benefits of these services.

Both the administrator's focus on services and the elected public official's questioning of rationale are role-dictated behaviors necessary for the maintenance of their organization or position. Both are, in this sense, legitimate perspectives for their function. The administrator runs an organization with a heavy investment in existing services, making decisions at the margins. The elected public official responds to a constituency concerned about conditions in the community and the efficiency and effectiveness of programs which seek to improve those conditions. The administrator's perspective is incremental: refining and expanding programs. The public official's perspective is strategic: improving the quality of life and solving social problems.

Comprehensive human services planning is designed to formalize and rationalize this problem-solving or strategic perspective, with the understanding that incremental planning is a more appropriate function for the program and project level of the administrator. For this reason, comprehensive planning recognizes some strategies as valid which may vary considerably from existing services. Comprehensive planning focuses on finding the best solutions to problems in a rational sense — linking choices of means logically to ends. Strategic planning is carried out at the policy level with the understanding that its function is to develop a framework within which the incremental choices at the program and project level can be evaluated. It is also carried out with the understanding that rational choices may not be politically feasible choices, and that, ultimately, public officials must treat rational planning as input into nonrational decisionmaking.

## Scope

Comprehensiveness seems to suggest few limits on scope, but the complexity of comprehensive planning demands the narrowing of scope along some dimensions of the human services system to make the task manageable. There are two easy approaches to narrowing the scope of planning. The first is to limit the number of functional areas encompassed in the planning effort. Human services may expansively be defined to include:

- Education
- Employment
- Income security and management
- Material resources
- Physical health
- Mental health
- Environmental safety and health
- Housing
- Public safety
- Administration of justice
- Social development
- Transportation
- Recreation and cultural enrichment
- Community development and organization

It is possible to narrow the scope by excluding functional areas like public safety, housing, or recreation from the human services planning effort. Comprehensiveness can be achieved within a limited set of functional areas, with external influences from the excluded areas acknowledged in the planning. The major disadvantage of excluding functional areas is that there is considerable overlap and interaction among these fields of activity and the exclusion is often accomplished by drawing artificial distinctions.

A second approach to limiting scope is more suitable. Within each of the functional areas, there are services and providers not amenable to change and not likely to be involved in or affected by the planning effort. These can be documented as part of the human services system, but excluded from strategic consideration.

This decision is based on a theoretical distinction between three functions of local government: **maintenance, enhancement, and problem solving.**

Maintenance functions are the primary activities of local government funded largely from general revenue dollars. They are aimed at protecting members of society and maintaining an orderly working social mechanism. Essential government services usually include core fire, police, public

education, and environmental protection services. When funding is limited, there is rarely any question about whether these services should be funded but rather about how much funding they should receive relative to other services.

Enhancement functions of local government are those aimed at improving the overall quality of life. The services provided are not basic services but they are provided universally. Public libraries, parks, and recreational services fulfill enhancement functions of local government.

Problem-solving functions are those aimed at eliminating social problems affecting the community. These efforts tend to be targeted to areas or populations considered to be deficient, rather than provided universally. The main impetus for problem solving at the local level has come from the Federal Government, although, through block grants, greater discretion has been provided to local government to structure problem-solving efforts.

Maintenance functions are viewed, in this conceptual design, as being largely beyond the area of influence of strategic planning. Basic classroom instruction, for instance, is placed outside the strategic planning exercise, but can be included in the documentation of existing policy and resource utilization. Compensatory education programs, however, are considered to be strategic and are included in all aspects of a comprehensive planning effort.

Private health services are also considered to be largely maintenance activities since the goal is to provide treatment universally as needed. On the other hand, public health and health insurance programs are strategic because they are aimed at solving health and health care delivery problems. They seek either to reduce the incidence of disease or to improve access of the poor to health care.

Income entitlement programs, because they are designed to substitute income for lost, disrupted, or missing income, perform a maintenance function. However, programs designed to reduce poverty through job training and job placement are strategic.

Human services seen as intrinsically good or necessary and justified as ends in themselves are typically maintenance functions. These functions may in turn be supplemented by strategic services aimed at improving access to them or improving their effectiveness for specific groups. Strategic services are justified as means of the reduction of specific problems.

By reducing the scope of the planning effort to the problem-solving functions above, planning is focused on sectors of the human services delivery system it could hope to affect. However, to assure comprehensiveness, maintenance and enhancement functions are included in descriptions of community resources.

## Development

The choice of a rational, synoptic, collaborative planning model focused on strategic planning at the policy level follows from a decision of the leadership group to initiate integrative planning to aid elected public officials in allocating resources and sorting out the complexity of the human services system. These features seemed to fit logically together. Narrowing scope by accounting for but not planning for maintenance and enhancement functions offers hope for simplification without compromising the comprehensiveness of strategic planning. Given these parameters for the planning effort, the interagency planning committee can then develop a detailed design for the planning process.

The interagency planning committee is charged with the design of a process for several reasons. First, participation of the committee in design heightens commitment to the process and reduces controversy during planning. It places the focus of the committee on the content of decisions rather than the form. Second, the planning process is involved enough to complicate the task of informing



the committee on process steps. Participation in the design activity serves an educational function. Third, the tendency for staff domination of a complex planning activity is great. Participation in design by the interagency planning committee reduces the sense of staff direction and prevents the development of anxieties over a hidden staff agenda.

The task of the committee is made easier by the theoretical and conceptual choices that served as the basis for the model. Sequencing choices, definitions of components, criteria for forming, and other details of the process are dictated by the conceptual design.

The staff role is to support the committee's decisions with information. The staff prepares research on alternative planning techniques and decision tools for the committee. In addition, the staff maintains responsibility for assuring that process choices reflect the conceptual design and for producing a workable planning process.

## **The Louisville Project**

The components in the next chapter result from a lengthy design process involving, in different roles, the leadership group, the planning committee, and technical staff. The degree of commitment of time and energy from all groups to the design of the process made it easier to maintain momentum during the more difficult moments of execution. The quality of the final product reflects the conceptual integrity of the process and the commitment of participants to its completion.

The description of the components of the planning model builds on specific examples from the Louisville Project. This level of detail is necessary to translate abstract concepts into concrete terms. While the details themselves are unique to this project, the basis for the planning model is generic.

## VII. The Planning Model Components

Planning in its most basic form is problem solving. Presented with a desired condition and a problem which interferes with the attainment of the desired condition, the planner searches for a means of resolving the problem and moves to influence the use of available services to enact those means. Ultimately the planner decides whether the means selected had the desired effects on the problem in order to determine whether the approach should be modified or continued.

As the problem to be solved becomes more complex, the planning process must be elaborated to respond to this complexity. This elaborated planning process must accommodate large quantities of information and diverse views and interpretations and yet still produce conclusive analytic results. This requires a capacity to generalize and categorize a variety of instances in order to make statements about problems, resources, and alternatives. It requires a capacity to identify and respond to diverse views and interpretations, yet be conclusive in selecting or synthesizing a single interpretation. It requires the capacity to reorganize and restate information in terms that make it comparable with other information used in the planning process and yield conclusions. In short, the process must be detailed to specify:

- methods for collecting information,
- methods for identifying and reconciling differing perspectives and for developing consensus,
- methods for categorizing, synthesizing, and standardizing information, and
- methods for comparing information and drawing conclusions.

All of these methods are implemented within the framework of the steps in a simple problem-solving approach.

### Planning Model Overview

The model developed in the Louisville Project follows a four-phase process: 1) problem definition, 2) policy analysis, 3) policy formulation, and 4) plan implementation.

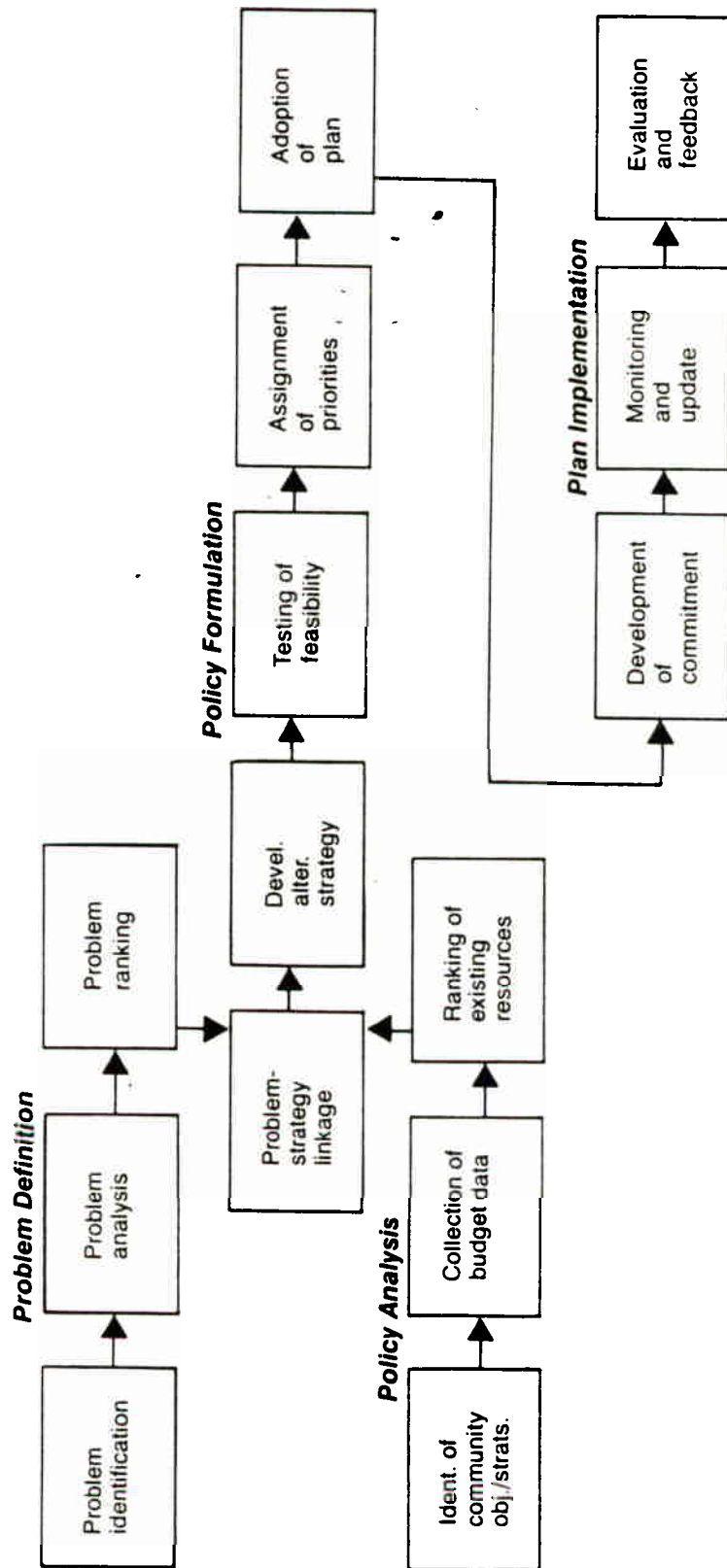
In problem definition, conditions are identified which are considered to be social problems, and information is collected to ascertain the nature and extent of these problems. The data are interpreted to develop an understanding of problem evolution and current conditions and trends. In addition, conclusions are reached, where possible, on probable causes of the problem, and on the nature of previous responses to the problem (the evolution of policy with regard to the problem). The final interpretation of the nature and extent of the problem is distilled into a problem definition and problems are ranked in order of their severity.

Simultaneously, in the policy analysis phase, information is developed on current human services programs in terms of the broad community objectives they are directed toward and the particular problem-solving or intervention strategies they embody. This information enables planners to focus on the intent and purpose behind current programs in the community. Information is collected on the amount of money allocated to each of the strategies and is used in ranking objectives and strategies according to existing priorities in the community.

In the policy formulation phase, existing objectives and strategies are matched to social problems to identify deficiencies in program activity and mismatches in priorities. Alternative strategies and



# **Planning Model**



changes in priorities are discussed. Alternatives are reviewed for their feasibility and then developed and formalized as recommendations. Recommended strategies and priorities are integrated with unmodified community objectives and strategies into a community human services policy plan. This policy plan identifies long-range goals, community objectives, strategies, and priorities which serve as a planning framework to guide the development and funding of new human services programs and the overall allocation of human services resources.

When the policy plan is approved as a statement of intent for local general purpose government and the community of human services providers, the planning process moves to the phase of plan implementation. This phase includes the assignment of responsibility to members of the human services community for implementation of specific recommendations, the modifications and development of programs, the development of proposal review processes, the monitoring of plan compliance, and evaluation of the design and implementation of planning recommendations. The identification of weaknesses in the plan feeds into the policy analysis process for the next planning cycle.

## Problem Definition

Prior to the initiation of the problem definition process, it is necessary to reach agreement among process participants on the characteristics and criteria for the statement of a community social problem. A community social problem can be defined as a *condition in the community which a given group agrees is undesirable and which requires collective action in order to be remedied.*

Any perceived condition or trend against which a legitimate community group has mobilized resources constitutes a social problem, whether this view is broadly held or not. The condition or trend may or may not be documented to exist at the early stages of problem definition. Its test as a social problem, initially, is that it runs counter to a condition some group feels ought to exist.

As social problems are identified, it is important that they be stated in a consistent style and level of generality. When social problems and policies are compared during policy formulation, inconsistency seriously complicates analysis of the adequacy of current responses. Criteria developed for use in the Louisville Project specified that each social problem statement

- identify human conditions and not systemic or institutional conditions,
- specify population but not geographic area,
- not mention causes or effects of the condition, and
- include some sense of change.

It is especially important that the **problem state a condition and not the cause or effect of a condition; and state a human condition and not a service delivery problem.** The statement that "a large number of pregnant women are not receiving minimal prenatal care" is a statement of what might be the cause of another problem, namely: "The health of newborn infants remains below an acceptable level for this community." It assumes that services have a value independent of the problem they are meant to address, and that, therefore, an absence of these services is in itself a problem. Certainly, if these services are ineffective, their absence is not a problem, and they could, if incorrectly provided, create a problem if present. Other approaches may prove more effective. If the value of all existing human services is accepted as a starting point in policy planning, the capacity to rethink strategies and priorities is eliminated and planning is reduced to generating and comparing estimates of need for services. In an age of limited resources, the selection of services for funding should be based on more than the relative number of individuals in need of or likely to demand those services. Some understanding of the relative importance of the service to the community is essential. Once funding decisions are made, however, needs assessment and projections of demand can be instrumental in program planning to make decisions on the use and distribution of program resources.

The initial statement of the problem is important only as a guide for data collection and analysis. Inconsistencies in initial statements of social problems can be corrected as a result of the analytic process. It is the final statement which should meet the criteria presented above.

## **Identifying Social Problems**

Problem identification should seek broad input from human services agencies and the general population. This is an appropriate place to incorporate citizen participation through a survey of either the general population or key informants in the community or through a public hearing. Solicitation of input from a broad base in the community provides some assurance that problems are not overlooked and enables a wide diversity of values and perspectives to be considered. It is important to incorporate the judgment of professional service providers in the identification of problems as well.

To develop a workable agenda for social problem analysis, some decision process may be necessary to consolidate or generalize social problems that are identified. Realistically, there is no objective basis for merging or generalizing the statements of social problems. Judgments are based on an intuitive sense of the nature of available data, the capacity of the planning staff, and the time available to research the problems, combined with a desire to develop specific enough statements to create a meaningful basis of discussion later in the planning process. The final selection and statement of social problems to be analyzed is a legitimate function of the interagency planning group.

## **Social Problem Analysis**

The analysis of social problems involves a four-step process. First, data questions are developed; second, data are collected to answer the data questions; third, the data are analyzed and a report of findings is presented; and fourth, social problem statements are written in concrete terms with supporting quantitative and qualitative information.

The development of data questions and interpretation of the data requires a level of professional knowledge well beyond that of the generalist planner. Members of the interagency planning group either individually or collectively assist and solicit assistance from other specialists in their functional areas in developing data questions, identifying data sources, providing information on current theory regarding factors associated with social conditions, and interpreting and concluding from the data.

The planning staff assumes responsibility for collecting input from professionals, collecting data, analyzing data, and writing reports on social conditions and trends.

### **Development of Data Questions**

The data question is a question which suggests either a quantitative or nonquantitative response describing some aspect of the nature and extent of a social condition or else placing a social condition in some context which will facilitate an understanding of it. Data questions are refinements of the basic logical questions about any condition.

*How widespread is it in absolute terms?*

*How widespread is it here in comparison to other locations?*

*Why is it more (or less) widespread here?*

*Is it becoming more widespread here or less widespread? Why?*

*Who seems to be most affected and least affected by the condition?*

*Why are they more affected or less affected than others?*

*What can we expect is going to happen in the future?*

For example, if the health of newborn infants is of concern, data questions would seek information on:

- the current health status of newborn infants in the community (the proportion of newborn infants with "substandard" health according to existing measures),
- newborn health status in this community relative to that of the nation, other areas of the State, similar cities or towns across the country, and/or available standards, and
- demographic, socioeconomic, and geographic distributions of newborn health status and the characteristics of populations or areas with best and worst newborn health status.

The actual data questions developed within this framework can get quite elaborate. For example, in developing data questions related to newborn health status it might be useful to:

- distinguish among the various indicators of health status (e.g., mortality, birth defects, birth weight) and pursue their trends and implications for health status separately, or
- raise questions not only about the characteristics of those directly affected but also about long-term and chain effects of the condition, about the social costs created by the condition and about how these costs are distributed and paid.

Professionals in each functional area should be able to provide a summary of current thinking regarding these questions, identify areas in which research has been inconclusive or opinions diverse and identify resources which can either provide the answers or help structure the research effort.

### **Data Collection**

Data collection is a process in which sources of data or social conditions are identified, decisions are made regarding the use of existing sources as opposed to the generation of new data, and new data are acquired and tabulated. The art of data collection is highly developed and well-documented. (U.S. DHEW, 1976) This discussion is intentionally cursory.

In the identification of data sources, a formal inventory of quantitative data sources is completed by contacting local planning and service provider agencies and national statistical bureaus. Initial local contacts include the census clearinghouse, the land use planning agency, the housing and community development planning agency, the local manpower (CETA) prime sponsor, the health systems agency, the public school system, the regional crime commission, the welfare agency, and the area agency on aging. The Federal documents depository at the local public or university library maintains guides to Federal statistical sources and publications, and is a useful starting point for identifying statistical sources at the Federal, State, and local levels.

A systematic approach to inventorying quantitative data sources involves the listing of agencies that either maintain automated data bases or compile statistical publications, the classification of available data, and the completion of a form for each data source detailing the nature, availability, and limitations of the data. (A suggested approach to inventorying data bases is detailed in G.L. Atkins, 1979.)

The data source inventory provides a basis for assessing the utility of existing data in addressing the data questions. Where data are inaccessible or unavailable the choice is to answer the questions qualitatively or generate new information through some primary data collection method — usually survey research.

Much of the decision regarding the utility of existing data and the feasibility of primary data collection is based on the time frame built into the planning project for data collection and on the nature of project resources.

If the project has sufficient time and computer resources (access to terminals, qualified personnel, adequate computer budget), existing computerized data bases can be acquired and incorporated in a planning information system focused on addressing the data questions. (Atkins, 1979)

The project may benefit from a specially conducted survey of social conditions and community attitudes, one of several alternative methods for needs assessment and data collection discussed in Warheit, Bell & Schwab (1974). If survey research methods are utilized, however, it is important to involve professionals experienced in survey research in the design and implementation of the method. If time or resources are limited, the project may rely more heavily on printed data.

In addition to the collection of quantitative data, nonquantitative information is collected in order to provide an interpretive framework for the quantitative data. This information includes:

- historical information on the condition and on public and professional interpretations of the condition,
- current alternative interpretations of the condition and theories of causation, and
- current and historical factors in the demography and social and political organization of the community affecting the condition.

Methods used in collecting nonquantitative information range from formal procedures, such as interviews or surveys of key informants (e.g., professionals, community leaders), to informal procedures, such as review of texts, periodicals, and Federal publications. The purpose of the research is to establish a basis for understanding why the condition is a problem, how it evolved, what caused it, and its consequences. Through reading and/or consultation with experts and knowledgeable individuals, an effort is made to synthesize research findings and to define a current range of acceptable interpretations of the social problem.

An example of the important role of nonquantitative information can be found in the analysis and interpretation of the social problem of child abuse. The quantitative measurement of conditions at the local level is imprecise because of problems inherent in the reporting of cases and because of variation in legal, social, and administrative definitions of conditions included in the category of child abuse. As a result, the best information for understanding the problem is the judgment of professionals combined with a synthesis of scattered research findings and a knowledge of historical changes in definitions, values, and social relationships that brought about the awakening of concern for the problem. In addition, it is important in defining this problem, or any social problem, to appreciate the range of interpretations that are extant and to recognize the conflicts that exist in values with regard to the problem. (For example, in child abuse the conflicts are between those who emphasize privacy and parental rights, those who see child abuse in class conflict terms—as a middle-class definition of poverty—and those who emphasize the child's right to protection.)

### **Data Analysis**

Data analysis is the process of selecting from, manipulating, and organizing the data collected to develop answers to the data questions. Because the primary purpose of the analysis is to synthesize existing knowledge and describe social conditions and trends, the statistics utilized are largely univariate descriptive statistics (e.g., measures of central tendency, ratios, percentages, rates-per-population, rates of changes) rather than inferential or multivariate statistics. The role of the analyst is closer to that of a journalist or policy analyst than a scientist. The task of analysis is to review and synthesize the collected material, to organize a presentation of the information in a manner that answers the data questions clearly, and to translate the material into a form for presentation to the interagency planning group (e.g., written paper, graphics, oral presentation).

It is important that the presentation be as objective and balanced as possible and that alternative values and interpretations be recounted. It is the role of the interagency planning group and not the analyst to select an interpretation of the social condition, to place a value on the condition, and to develop the definition of the social problem.



The primary vehicle used in the Louisville Project for the presentation of information to the interagency planning group followed a "State of the County" report format. This document was designed to:

1. describe the population of... (the county)... through a measurement of its characteristics and a comparison to other similar metropolitan areas;
2. identify recent changes in the characteristics of the population;
3. describe... social conditions... and compare the nature and severity of these conditions to those of populations in other metropolitan areas and the nation as a whole;
4. identify trends in the development of these social conditions and determine the direction of change and the rate of change in... (the county)... compared to other metropolitan areas and the nation as a whole; and
5. depict the distribution of social conditions within... (the county)... and identify areas with high concentrations of social problems (HSCA, 1978).

The material in the report was presented in two sections. The first section, titled Community Structure, reviewed relatively static characteristics of the population and the physical environment which influences social conditions. The second section, titled Social Conditions, presented information on current status and changes in the status of the population with regard to progress toward the accomplishment of health, safety, income, and employment goals in the community. In addition, subsections on the functioning of families and the functioning of children discussed changes in family structure and functioning likely to affect future trends in social conditions in the community. The report combined narrative discussion of national conditions and trends with maps and map analysis depicting the local distribution of conditions and factors related to this distribution. The report highlighted local conditions and trends which were either generally severe or which varied in their prevalence significantly from national conditions and trends.

### **Definition of Social Problems**

The final steps in the process of defining social problems require synthesis of the social problem statements that guided the research with statements of social conditions and trends leading to the generation of concrete social problem statements with supporting data. These final statements are prepared with an eye to the process of ranking social problems and to the criteria which guide this process. The information appended to the initial problem statements should, therefore, address:

- the incidence or prevalence of conditions in absolute terms and in relative terms (e.g., trends in comparison to external standards),
- the characteristics of those primarily affected,
- secondary effects of the problem
  - indirect effects on other groups
  - social cost to the community
  - relationship to other problems,
- factors associated with the occurrence of the problem ("causes"), and
- values which are threatened by the problem (these may be implicit in the phrasing of the definition rather than explicitly stated).

Review of the information collected inevitably leads to revisions in the initial social problem statements. The final product is a series of single sentence social problem statements each followed by one or two paragraphs of background information.

The development of these final statements is in the hands of the interagency planning committee. Specialists from each functional area (e.g., health, employment) are assigned the social problems most directly related to their area, to write drafts of the statements and background information. The

staff of the committee comments on modifications necessary to standardize the form and level of presentation and to meet the criteria for a problem statement. Committee members review the statements and background information for content. After revisions, the statements and background information are presented to the committee for discussion and approval using an interactive group process technique with either a majority or consensus decision.

## Ranking of Social Problems

Ranking of social problems in terms of their relative severity is not a purely objective activity. Because the members of the interagency planning committee are representatives of human service planning and provider agencies in the community, they come to the planning effort with commitments and biases related to their individual professional perspectives and organizational missions. It is a challenge to the committee staff to develop some form of consensus which is not perceived by any member as an implicit domain threat.

In the Louisville project a choice was made to use a Nominal Group Process style decision model with a mathematical voting (ranking) technique. This would assure equity in input, identify areas of agreement, and focus attention quickly on areas of disagreement. It would also establish consensus in the end without requiring unanimity. The numeric output was subject to revision by the committee to remove any mathematical quirks which were not reflective of the views of committee members.

The process began with an independent rating of social problem severity by group members. Each member rated the relative severity of each social problem on a 5-point scale (1 equals low severity, 5 equals high severity). In assigning a severity rating to each problem, members were asked to assess qualitatively:

- the number of people in the community directly affected by the condition,
- the numbers indirectly affected by the condition,
- the social cost of the condition,
- the relative importance of values threatened by the condition, and
- the centrality of the problem in relation to other problems in the community (the extent to which this problem seemed to produce the other problems).

These independent ratings were tallied by computer and group means and standards deviations were produced for each social problem. Social problem severity ratings with the smallest variance were accepted as reflecting a consensus. (The definition of an acceptable standard deviation score was left up to the committee. Forty percent of the social problems had a standard deviation less than  $\pm 0.7$ . This meant that for half of the social problems 67 percent of the committee rated the severity with  $\pm 0.7$  of the mean score for the group and 96 percent of the committee ratings fell within  $\pm 1$  of the mean.) The remaining social problems were presented for group discussion of their severity. As each problem was discussed, members rated the severity of the problem again. These ratings were tallied again, and those with an acceptable amount of variance were dropped. When all scores reflected a reasonable consensus of the group, the group means were used to rank the social problems in order of severity. +

The use of group means for ranking the problems has three advantages:

1. Individual rating patterns are offset (i.e., those who always rate problems as high have no disproportionate influence on the final ranking of problems).
2. The final outcome is zero-sum in that ranking any one problem high automatically requires another problem be ranked low — there cannot be a high rank for all problems.
3. All individual input is weighted equally.

A variation in this technique could introduce weights to the ratings to reflect differences in the authority of group participants if these differences were felt to be important. However, if weights were introduced, the first and third points would be eliminated.

The statement of social problems, the background information, and the problem severity ranks constitute the products for the problem definition phase of the planning success.

The products are provided to the leadership group for final review and approval. A review and signoff at this stage is important for several reasons:

1. It provides the leadership group with the first tangible evidence of progress and, as such, is an important means for stimulating interest, a sense of ownership, and a recommitment of support to the planning effort.
2. It provides the leadership group with an opportunity to exercise some control over the process and, if necessary, to rein it in or divert it before the amount of investment by the interagency planning committee becomes a barrier to flexibility.
3. It provides an opportunity for the two groups to forge an agreement on the interpretation of the problems—which becomes a major determinant of the choice of strategies at the end of the planning process.

Problem definition is a necessary first step in policy planning that yields a product useful at other levels of planning as well.

## Policy Analysis

The policy analysis phase consists of a series of tasks which attempt to redefine the existing human services delivery system in terms of its purposes rather than its activities. The question to be answered by this analysis is not, "What are the services provided in the community?" but rather, "What are these services trying to accomplish?" In defining purposes, the analyst's focus is on manifest or explicit purposes. Latent purposes (the hidden agenda and organization strategies) are impossible to identify in objective terms and not likely to be agreed upon by a committee of human services providers.

In redefining the human services system, the analyst is anticipating the structure necessary for matching resources to problems. The requirements for matching resources and problems serve as a guide in decisions about the organization and level of presentation of both resources and problems.

Three steps were incorporated in the policy analysis phase—the first is the identification of existing community objectives and strategies and the assignment of agencies to these. The second step involves the development of budget data for each set of objectives and strategies. The third step requires the interpretation of current priorities for the accomplishment of these objectives and strategies.

### Identification of Community Objectives and Strategies

There is no simple method or single set of information sources for identifying existing objectives and strategies. The task has elements that are both definitional and observational. The definitional aspects require a systems analytic commitment to order and uniformity in the system description. The final product must have mutually exclusive categories, a uniform format, and standard levels of generalization throughout. Relationships must be logical (e.g., the strategies must clearly relate to objectives).

The observational aspects require a knowledge of particulars: legislative mandates, administrative regulations, organizational missions, and existing linkages. The final product has to be acceptable to

human services providers as a reflection of the reality they know. The analyst must pick up whatever information is available, fit it into a logical framework, and modify the results to reflect the concerns of providers and planners.

The first step is to locate information on the purposes of existing human service programs. (Prior to the initiation of the planning activity, the Louisville Project had developed a Community Resource File with detailed information on human service agencies and services. This tool was an invaluable aid in developing the framework objectives and strategies and listing agencies.) For Federal grants-in-aid, information on program intent is provided in the *Catalogue of Federal Domestic Assistance*, published annually by the Office of Management and Budget. Legislative intent for Federal programs may be revealed in the act itself or in the congressional hearings on the act. Further statements of intent may be included in program regulations promulgated by the administering Federal agency.

For State and local programs and for Federal programs subject to State or local discretion (e.g., block grants), statements of program intent are usually provided in plans, particularly in comprehensive plans (e.g., the Comprehensive Manpower Plan, the Health Systems Plan, the Comprehensive Annual Services Plan for title XX). In addition, agency mission statements and budget request documents may provide statements of overall agency goals or objectives.

As a last resort, the literature on human services policy provides ample discussion of both the overt and covert intent (as well as the unintended consequences) of human services activity. A thorough literature search would be time consuming and impractical. But it is often helpful to scan some survey documents, starting with the *Encyclopedia of Social Work*, published by the National Association of Social Workers.

The analyst culls from this material a list of human service programs and a broad statement of intent for each. These programs are then sorted into categories on the basis of their purpose. They are first sorted into fields of social welfare:

- Economic security
- Employment
- Physical health
- Mental health
- Housing
- Public safety
- Family and child well-being
- Education

Within each category they are subsorted into sectors of activity, which may then be assigned community objectives. For example, the Louisville Project ended up with the following sort of activities within the field of physical health:

1. Maternal and infant care
2. Communicable disease prevention
3. Cardiovascular disease prevention, screening emergency care
4. Cancer prevention
5. Chronic respiratory disease prevention
6. Accidental death prevention
7. Aging — health care
8. Vision and hearing care
9. Developmental disabilities prevention
10. Dental care of children



11. Nutrition

12. Financial accessibility to health care

13. Diagnosis and treatment — general

A community objective was written for each set of activities (e.g., to reduce the incidence of maternal and infant mortality and morbidity, and subsequent debilitating conditions for the child). The community objectives are broad statements of intent toward which a number of programs are directed, each of these programs representing a different choice of strategy for accomplishing the objective.

In the third step, these strategies are identified and described for each program. In the Louisville Project, for example, Women and Infant Care (WIC) was defined as a program with the strategy of improving the nutritional status of low-income and presumably high-risk pregnant and lactating women, infants, and small children (through the use of special food vouchers) as a means to the community objective of reducing the incidence of maternal and infant mortality and morbidity.

This redefinition of the existing human services delivery system is completed initially without the assistance of the interagency committee. This is necessary because local human service organizations and administrators tend to have accepted *a priori* the rationale for providing a particular array of services, and to be focused, instead, on issues of performance and service delivery. In addition, if representatives of the agencies are involved in the initial work, they are likely to frame policy statements at a variety of levels and in a variety of forms, making comparative analysis difficult. The role of the analyst is to approach the task with a concern for uniformity in the structure of the final framework and to develop consistency across functional areas in the level of generalization and phrasing of the statements.

It is important that the objectives describe an outcome in the status of the population or in social conditions that is expected to result from community efforts. They should not identify the provision of services as an end in itself. In addition, objectives which have a problem-solving orientation describe a change in status or conditions over present status or conditions (i.e., they use terms such as "improve," "reduce," or "increase"). Maintenance objectives describe the condition or status they seek to preserve (i.e., they use terms such as "protect," "maintain," "prevent"). This distinction between problem solving and maintenance objectives was an important one in the Louisville Project. Areas of service delivery not available for inclusion in a cooperative, community problem-solving effort were defined as areas of maintenance. Entitlements, basic public services (e.g., police or fire protection), and other services which come to be expected as a matter of right (e.g., health care services, public education) were not considered subject to local public discretion or available for coordination in a problem-solving effort (see chapter VI). These services were included in the objectives as programs (not strategies) with maintenance objectives, but were not included in the overall planning effort.

Once the initial set of objectives and strategies is complete, subcommittees of the interagency planning committee are convened in each of the fields (e.g., economic security, employment, physical health) to review and revise the objectives and strategies. These subcommittees address the organization of objectives within the field, the inclusion or exclusion of objectives, the phrasing of objective statements, and the organization and phrasing of strategies. In addition, the subcommittees identify programs which have been left out and list the agencies in the community strategy.

When the objectives and strategies in each field are approved by the various subcommittees, the entire set (for all fields) is reviewed and revised by the interagency planning committee sitting as a committee of the whole, with a final review and approval by the leadership group.

The potential for controversy and lengthy deliberation in the development of statements of community objectives and strategies should not be underestimated. Linking agencies to outcomes in terms of impacts on community conditions creates a dimension of accountability well beyond prior dictates for agency performance. The final approval of community objectives and strategies with the listing of agencies represents a commitment by the agency to a specific statement of purpose against



which its performance can conceivably be measured by local elected public officials and other interested funding sources. For this reason, the organization and phrasing of particular objectives and strategies may be hotly contested. The most difficult decisions encountered during the discussion of objectives and strategies in the Louisville Project were made with regard to multiple listing of programs which placed equal emphasis on more than one objective (e.g., congregate meals for the elderly with equal emphasis on nutrition and social interaction objectives). Wherever possible a single objective was considered primary and programs were listed only once. There were several exceptions.

## Collection of Budget Data

Budget data are used to assess the relative degree of fiscal emphasis currently placed on each of the objectives and strategies by the community. The assessment of current fiscal emphasis provides quantitative information for the discussion on existing priorities. Budget data are preferred to other resource information (e.g., service units) because of the universality and uniformity of money as a measure of activity. Other units may be inconsistently counted across agencies, but all agencies have budgets which define the total fiscal resources available to provide service. Expenditure would yield a better measure of actual activity, but expenditure reports are less likely to be a matter of public record and are not uniformly maintained by agencies. Obtaining comparable budget data from the full range of human service programs is a complex and, in most midsize or larger cities, nearly impossible task. To make this step more feasible, the Louisville Project compromised on the precision and comprehensiveness of the budget data collected. Several measures were taken to simplify the task:

- A limited amount of data was collected to minimize the reporting work for agencies. Breakouts were not attempted for administrative costs or for income transfers as opposed to services (although this information would be useful).
- Agencies were encouraged to estimate the proportion of total budget allocated to various programs (if program budgets were not maintained).
- Emphasis was placed on collecting information from major providers — those with the largest budgets. Small, ad hoc, or neighborhood programs were invited to provide data but followups were not vigorously pursued.
- Wherever complete information was unavailable or difficult to obtain from the agency, the best possible estimates were made by staff from available information with final review by the agency.

Budget data were collected on narrower service definitions rather than on programs in order to obtain as specific information as possible. Once again the compilation of agencies and services in the *Agency Resource File* (published annually by the Human Services Coordination Alliance of Louisville, Kentucky) served as an inventory control in budget collection.

An effort was made, however, to distinguish "movable funds" from "fixed funds." Fixed funds were largely narrow Federal categorical grants (whether or not matched by local or State appropriations) which were either defined as an entitlement or were under strict regulative control and were limited to specific uses and defined target groups. They offered little latitude for manipulation for strategic purposes. Movable funds, on the other hand, were those which were subject in large part to local discretion in allocation. They might be bounded to a particular functional use or to a particular geographic area or target population but they left a dimension open to local discretion. This would enable them to be reallocated in some fashion for strategic use. Aid to Families with Dependent Children (AFDC) is an example of fixed funding, while a block grant, such as a Comprehensive Employment and Training (CETA) grant, is an example of movable funding. This distinction was seen as necessary to support later considerations of feasibility in revising priorities and strategies.

The task of collecting budget data requires the development of precise definitions and decision rules to facilitate uniform treatment of raw data from the agencies. A number of problems are characteristically encountered in the process of collecting budget data. These include:

- variations in geographic areas served by programs, necessitating disaggregation of statewide or districtwide budgets to the area of coverage for the comprehensive plan,
- interagency transfer of funding (from State and conduit agencies to local agencies and private contractors), necessitating tracking and sorting of funding to avoid duplicate counting of the same dollars, and
- variations in fiscal years, necessitating conversion of budgets to a single standard time period.

To the extent possible, problems are anticipated and treated in the decision rules. Obviously, not all problems can be anticipated. Those that arise during data collection are covered by an extension of the decision rules.

Once budget data are collected and compiled, they are provided to the interagency planning committee for review and approval. The data provided to the committee are broken out by strategy and within strategy by agency. The committee reviews the data for accuracy and completes any necessary revisions. At this point, the information is in the form required for the discussion of existing priorities by the committee.

### **Interpretation of Existing Priorities**

While the information provided to the committee is suggestive of existing priorities, the final assessment of existing priorities is still considered to be largely a subjective judgment. Differences between actual resources, commitment, and priorities may develop, for example, when an investment in one type of service is being gradually phased out but must continue to receive allocations over a phaseout period. The final decision on priorities, therefore, is left to the committee.

The committee is provided with the current order of funding magnitude for each strategy. In a variation of nominal group process, committee members are asked to submit their own ordering of existing strategies based on their knowledge and the budget information. Lists of priorities are collected and means and ranges computed. Strategies are discussed by the committee if the subjective order of priority they perceive differs substantially from the order of priority suggested by the budget information or if there is substantial variation in the order of priority assigned by committee members.

The use of independent voting prior to discussion allows for equal input, uninfluenced by the opinions of dominant committee members. Areas of prior consensus are identified and eliminated from discussion, enabling the committee to focus its efforts on reaching agreement in areas of disagreement. Once these issues have been identified, group discussion is used to enable committee members to share information and expand their understanding of the programs and allocations in question. A final voting process may be either open, to allow group pressure to influence voting to reach a consensus; or closed, to facilitate independent judgment. This choice may be dictated by the amount of harmony revealed in the discussion of priorities and the need to exercise group pressure to come to some consensus.

The final statement of objectives, strategies, and choices is presented to the leadership group for review and approval. Approval at this point represents an agreement by major human service planning and provider agencies on the current scope and division of responsibilities in the human services delivery system. The document produced in this phase is both a necessary ingredient for the policy planning phase to follow and a major statement of the rational structure governing the organization and provision of services in the community.

The first two phases of the planning process are focused on information gathering and analysis. They conclude with a consensus among key public officials, human service administrators, and planners on "what is" before embarking on deliberations over "what should be." As a byproduct, these first phases yield documents with independent value for the planning and administration of human services at the local level.

## Policy Formulation

Comparison of the problem statements with current policy provides a sense of inadequacies in current strategies and in the current ordering of priorities at the local level. During the policy formulation phase, planners explore creative solutions to the inadequacies of the current system and select feasible options for change. In addition, a reordering of priorities is suggested to correspond to the severity of social problems. These alternatives are recommended to the leadership group for inclusion in a comprehensive community policy plan for human services.

Five steps are completed in this phase. First, problem statements and strategies are linked and compared. Second, alternative strategies are proposed. Third, alternative strategies are tested for feasibility. Fourth, problem severity rank and current order of priority for strategies are compared and recommendations for revisions in priorities are developed. Fifth, specific recommendations for changes in strategies and priorities are presented to the leadership group, along with documentation on current programs, for approval as a community human services plan.

## Problem-Strategy Linkage

The first task in policy formulation is the mechanical task of matching problem statements with existing strategies. The purpose of this step is to identify, for each problem statement, the activities currently underway in the community that are directed toward the solution of each problem.

Ideally, community objectives would be related directly to the problems as defined, enabling strategies to be related to problems through the objectives. This, however, places a requirement on the problem and objective statements that they be framed on comparable levels and in comparable terms. This constraint endangers the independence of problem statements from consideration of existing commitments of resources. It further necessitates a restatement of community objectives in a fashion which may impair their accuracy as a reflection of actual policy intent.

As a result, the choice was made in the Louisville Project to list for each of the problem statements the relevant strategies independent of their relationship to objectives.

The matching of social problem statements and strategies can be quite difficult—largely because a delicate balance must be achieved between a redundant assignment of strategies on the one extreme, and a functionally narrow interpretation of strategic response on the other. In other words, if an effort is made to be all-inclusive or thorough in the listing of strategies for each social problem statement (in the true spirit of comprehensive planning), then the same strategies will end up being assigned to a large number of social problem statements. On the one extreme is all-inclusiveness and redundancy; on the other is narrowness and unique assignment. The first extreme complicates the analysis of priorities because a single social problem with, say, a low priority may be assigned a large number of strategies, many of these only tangentially related, creating the appearance of a more concerted strategic effort than is, in fact, the case. The second extreme complicates the development of alternative strategies because many of the strategies which are, in fact, currently related to the social problem, even if only indirectly, are not considered.

This difficulty is exacerbated if a large number of the social problem statements overlap. One cause of overlapping is an intercorrelation among various target populations defined as having the problem. For example, if separate social problem statements are generated for the working poor, minority poor,



poor single parents, and elderly poor, these problem statements will overlap because of the high correlation between minorities and the other populations. When strategies are matched to these problems, many of the strategies aimed at improving the economic status of one poor group will also be aimed at others. For example, the strategy of developing placement opportunities for minority persons in union, craft, and trade apprenticeship programs is directed at minority poor who are also the working poor. In addition, it is a key strategy for poor single parents which has proved effective in gaining employment for members of this group. Because these groups are not mutually exclusive, many of the antipoverty strategies will have to be assigned to all of the poverty social problems.

Overlapping problem statements can be controlled if every effort is made during the problem definition phase to develop mutually exclusive target populations for problems in each functional area. Obviously, however, the interactive and multidimensional nature of social problems makes it impractical to strive for too much independence in the social problems that are defined.

A second way of simplifying the choice between all-inclusive and narrow assignment of strategies is to sort the strategies assigned for each problem into primary and secondary strategies. A primary strategy for a given problem is that which has that problem as its single major focus and represents the most direct responses to that problem. Secondary strategies for a given problem are the remainder of the strategies, those which are indirectly related to the problem. For example, to respond to the problem of a high rate of pregnancy among teenagers, the primary strategies currently in force would include improving the knowledge youths have about sex and birth control or improving the access of youths to birth control devices. Secondary strategies would include strategies aimed at a broader population (such as assisting potential parents in making decisions about the number and spacing of children) and strategies aimed at adolescent problems, more generally, which would have a bearing on adolescent sexual behavior and pregnancy (such as increasing the ability of families to recognize and resolve problems and serious conflict). By sorting out primary and secondary strategies, it is possible to match priorities only on the basis of primary strategies but incorporate secondary strategies in any discussion of inadequacies or conflicts in current policy.

The linkage of social problem statements and current strategies provides a basis for critiquing current policy and suggesting policy alternatives. Questions can be raised on the adequacy and effectiveness of current strategies, on the interaction between strategies, and on the appropriateness of current priorities. To support this discussion, a working document is produced which details for each social problem:

- the statement of the problem,
- one or two paragraphs summarizing current conditions, trends, and factors associated with the problem,
- community objectives which (through the strategies) relate to the problem,
- current strategies responding to the problem,
- agencies responsible for administering programs incorporating each of the strategies (for each strategy),
- total budgets and movable funds (for each strategy), and
- current order of priority identified for each strategy.

Analysis of this material enables the committee staff to sort social problems into several categories. The simplest sort provides three categories:

- problems with no strategies,
- strategies with no problems, and
- problems with strategies.

The first category is a candidate for developing strategies. The second category is a candidate for recommending a phaseout in funding (or recognizing an omission in problem identification). The third category is then resorted into three categories:

- dimensions of the problem are not addressed by current strategies; need additional strategies,
- contradictions among strategies or poorly designed strategies which would jeopardize solution of the problem; need modification to existing strategies, and
- strategies and priorities conform roughly to the definition and severity of the problem.

The last category is set aside. Material for the problem-strategy sets in the other five categories is presented to the interagency planning committee for discussion.

## Development of Alternative Strategies

Previous tasks in the planning process have been largely definitional and organizational, aimed at developing an accurate and understandable picture of the existing situation as a basis for planning. Now, with the existing situation defined, the interagency planning committee begins to look to the future—measuring current status against a desired future status and proposing a means for getting there. This step could have been accomplished without the information collected in the preceding steps. Obviously, however, the plans that result are much more useful if they take into account the present reality.

The process of developing alternatives begins with a purely rational review by the members of the interagency planning committee of each social problem and its existing strategies. For each problem, two questions are answered:

1. What is it about the social condition that has changed or is changing?
2. What are the critical factors contributing to the problem?

The first question focuses on key shifts in the nature of the problem which require a change in the strategies traditionally pursued. For example, adolescent pregnancy has been a social problem for a long time, but recently it has become a critical problem, receiving special attention from local planners and providers. What has changed? A review of the background information from the problem definitions should reveal that, among other trends, there has been a recent relative increase in the rate of adolescent pregnancy which is not fully reflected in the birthrate due to an increased number of abortions in this age group. This increase is linked, by several researchers, to changes in teenage premarital sexual activity, to a recent trend toward reduction in the use of contraceptives, and to a general inability to get adolescents to use contraceptives while pregnancy rates for other groups have been declining due to increased contraceptive use. A recent Federal initiative to develop comprehensive services for pregnant adolescents has helped to raise concern about the problem at the local level. These trends point to a failure in existing strategies which seek to increase the availability of contraceptives and birth control information to this age group. Obviously, the factors that impede contraceptive use among teenagers have not been addressed. The new legislation emphasizes postpregnancy services — preventive services have been largely neglected.

The second question focuses on the factors which must be addressed by strategies if the problem (as currently understood) is to be solved. For example, in the case of adolescent pregnancy, a partial list of the critical factors includes the lack of correspondence between adolescent sexual attitudes and practices, and the characteristics of currently available precoital contraceptive methods; contemporary mores and social pressures for adolescents that are changing the nature of premarital sexual activity; possible physiological changes reducing the age of sexual maturity among females; and reduced parental effectiveness in influencing the behavior of adolescents. Existing strategies appear to be limited in their attention to these factors.

The answers to these questions provide the basis for assessing current strategies. This assessment covers three points:

1. Do current strategies address the changed or changing nature of the problem as presented above?



2. Are all factors identified above covered by some strategy?
3. Are any of the existing strategies effective in accomplishing what they intend to accomplish?

Wherever there are omissions or ineffective strategies, the next question is, obviously, what can be done? The first issue is whether these factors can be or should be addressed at the local level. Major economic and social structural problems are not amenable to local solution. Returning to the adolescent pregnancy example, obviously social mores are not likely to be significantly affected by the activity of public or private organizations, particularly locally based organizations which can only operate in a limited geographic area. Those factors which cannot be or should not be affected by local action should be passed over.

The second issue is whether enough is known about the factor to be able to identify techniques for influencing it. Earlier physiological maturation, for example, is not a factor about which much is known. At this point, there are not likely to be any means for changing that phenomenon.

If there is reason to believe there are factors which can be addressed at the local level, then the question is, why aren't they resolved? If strategies logically address the factors but appear to be largely ineffective, then improvements to those strategies are in order. Ineffective strategies suggest administrative improvements: improved service coordination, tighter accountability, reduced barriers to service utilization, etc. *Inadequate strategies suggest an increased allocation of resources.* For example, the strategy of improving access to birth control devices and information may be a logically correct strategy, but, as it is currently implemented, one that is relatively ineffective in dealing with adolescents. At least one set of reasons for this may be lumped under the heading "barriers to utilization": lack of awareness of the service by adolescents and unwillingness by adolescents to identify themselves to clinics as sexually active.

In discussing the ineffectiveness of strategies, it is important to recognize the distinction between interagency and intra-agency concerns. Systems failures, such as service discontinuity, service inaccessibility, and other barriers to utilization, are appropriate interagency issues. Agency failures, such as personnel incompetence, failures in client tracking and followup, or organizational complexity, are internal management issues. The interagency planning committee should avoid these issues unless they have the authority to deal with internal agency matters.

If there are factors that appear to be amenable to solution at the local level but are not being addressed, then there is an opportunity for the development of new strategies. Brainstorming among the interagency planning team can identify possible strategies to address these factors. For each factor there is a range of possible strategy types that might be considered. A suggestive list of strategy types includes:

1. Influencing individual (or organizational) behavior causing the problem through:

- financial incentives
  - subsidies
  - regulation — price or supply controls
- financial disincentives
  - taxes
  - fines
- legal disincentives
  - prohibition and law enforcement
  - administrative regulation
- education
  - public information to change attitudes

- individual training
  - individual treatment
- 2. Offsetting problem effects or disadvantages through:
  - direct monetary compensation
  - in-kind compensation
  - affirmative action
  - protective regulation
  - education and training to develop skills or change behavior
  - provision of supportive services or treatment
    - to restore functioning
    - to sustain over a long term

Brainstorming results in suggestions of alternatives that appear, on the surface, to be feasible as well as alternatives that are obviously infeasible. The committee can quickly reach a consensus on alternatives obviously in conflict with expressed ends or impossible to implement. The remainder of the potential strategies are tested for their feasibility.

## Feasibility Testing

The credibility of the comprehensive plan is greatly enhanced if the alternatives are screened for their implementation potential, and only those alternatives with a great potential for implementation are recommended to the leadership group. The relative feasibility of alternative strategies is assessed through a comparative rating of alternatives according to a series of criteria:

- Resource requirements
  - Additional funds required*
  - Increased space/facilities required*
  - Increased manpower required*
  - Interagency cooperation and coordination needed*
- Political disincentives
  - Interferes with existing authority*
  - Reduces number of jobs/worsens job conditions*
  - Lacks support of external groups, advocacy groups, or individuals*
  - Implemented by agency with poor reputation*
  - Inconsistent with voiced public opinion/lacks sense of crisis*
  - Requires precise or immediate timing*
  - Lacks short-term payoff, demonstrable benefits of service provisions*
  - Requires legislative changes*
- Institutional change requirements
  - Modification of staff behavior or skills required*
  - Changes in organizational structure required*
  - Lack of adaptability to agency agenda*
- Technical complexity
  - Special personnel or training required*
  - Technological innovation required*
  - Projects illusion of technical complexity*

For each criterion, a positive assessment is seen as a barrier to implementation. For example, the requirement of additional funding places the proposal in competition for finite public expenditures with existing agencies, raising a problem which must be resolved before the proposal can be implemented. A proposal assessed high for a number of these criteria has a limited potential for successful implementation.

Proposals are numerically rated according to these criteria, and only the most feasible are selected for recommendation to the leadership group.

## Assignment of Priorities

To conclude the policy formulation phase, recommended priorities are set for existing strategies, proposed revisions to strategies, and new strategies. Two steps are required for this activity. First, problem severity ranks and existing orders of priority for strategies are grouped into three categories (high, medium, and low) and compared. Those strategies ranked different from the problems they address are noted. Second, all strategies (existing and proposed) are reranked by members of the interagency planning committee.

The exercise of reranking strategies is defined as a reallocation problem. Resources are assumed to be fixed. Reranking to increase the emphasis on some strategies requires a reduction in emphasis for other strategies.

The means for achieving this reranking is an exercise in which members of the interagency planning committee are asked to independently distribute a total number of points equal to the sum of points tallied for the current priorities (where high priority category equals 3 points, medium equals 2 points, low equals 1 point). Actual and proposed strategies are assigned 3 points for high priority, 2 for medium, and 1 for low until points are exhausted. The remainder of the strategies are assigned zero points. Independent rankings are collected and tallied. A list of the group mean scores and the distribution of scores for each strategy is provided to members for discussion and strategies are then reassigned priority scores (3, 2, 1, and 0) through either an independent ranking process using tally sheets or a group ranking process by majority voting.

When strategies have been grouped into four categories (high, medium, low emphasis, and no emphasis), discrepancies between recommended and existing ranking of strategies are noted. The discrepancies suggest four types of proposed changes in emphasis: an increase in emphasis, a decrease in emphasis, no change in emphasis, or a total phaseout of the strategy.

## Plan Adoption

Two documents are presented to the leadership group by the interagency planning committee: 1) a set of issue papers, and 2) a policy plan. The first document focuses on proposed changes in either strategies or priorities. These areas of difference are termed "issues," for want of a better word. Issue papers, which identify proposed changes of developments in strategies over present strategies, provide the basis for deliberation of the planning committee's recommendations in the leadership group.

The leadership group focuses its discussion on the issues presented in the issue papers. They have the options of maintaining current strategies or priorities, of accepting the interagency planning committee's recommendations, or of developing their own alternatives. Wherever interagency planning committee recommendations are rejected, the resulting modifications are plugged back into the plan being prepared by the committee.

The second document is a transformation of the working papers and rankings produced earlier into a comprehensive human services policy plan. In this plan, strategies are grouped under community objectives and community objectives are grouped in broad goal areas. Information is included on the agencies and budgets for each strategy and on current and assigned priorities, and the implications of these for the reallocation of resources.

The plan is a human services framework that provides an overview of the human services delivery system as it is intended to be. The document is designed to provide a yardstick of community purpose against which to measure future agency plans and programs. With all final modifications, the plan is presented to the leadership group for review and approval.



With plan approval, the attention of the planning committee and leadership group moves from planning to plan implementation.

## **Plan Implementation**

Plan implementation means essentially the translation of community objectives, strategies, and priorities into programs and resource allocation decisions. This is achieved through a process that involves (1) development of a commitment from agency executives and public officials to use the plan as a guide in program planning and proposal and budget review, (2) ongoing monitoring of plan implementation and periodic plan update, and (3) evaluation of plan effectiveness and feedback into the next planning cycle.

### **Developing Commitment**

Three avenues are open for translation of the plan into programs and program modifications. The first avenue is through the commitment of agency executives, sitting as members of the leadership group, to the use of the plan as a policy guideline for program planning conducted within the agency. These executives have intentionally been involved in the development of the policy plan throughout the planning process—approving problem definitions, statements of existing objectives and strategies, and final recommendations. At each of these stages, products are distributed which can influence intra-agency policy analysis, program design, and decisionmaking. Thereafter, executives are encouraged to promote conformity with plan objectives, strategies, and priorities in agency planning. This level of commitment represents a minimal but essential first step.

The second avenue to implementation comes through the leadership group acting as a unit in developing interagency linkages. These linkages begin with the use of interagency task forces to explore the issues and develop issue-related action plans. The leadership group attempts to gain voluntary commitment from agencies to enact and modify programs incorporating planned objectives and strategies. In addition, the leadership group may develop a mechanism for reviewing program plans and negotiating policy plan compliance with both members of the leadership group and agencies outside the leadership group. In a less formal vein, the leadership group may discuss issues and develop tactics for promoting the policy plan in the resolution of particular community problems as they arise.

The third avenue to implementation comes through the adoption by elected officials of the policy plan as the basis for proposal and budget review and approval in allocating local tax dollars and Federal discretionary grants. The commitment of public officials to plan implementation may range from informal use of the plan as a basis for staff analysis to the impaneling of the leadership group as a formal advisory group on government funding decisions.

The leadership group takes responsibility for determining the means for gaining broad-based commitment to the policy plan and for promoting its use in planning, plan review, and resource allocation. The degree of success they realize as a group is somewhat dependent on the extent of their own commitment to the policy planning process and to the plan itself.

### **Monitoring and Update**

The success of the policy plan in influencing program planning decisions is in part related to its capacity to respond to and incorporate changes in the structure of incentives and constraints facing the agencies. These incentives and constraints are imposed through State and Federal legislation and regulation, environmental conditions (e.g., the state of the economy), political and electoral changes, and constituency demands. Plan rigidity assures a declining relevance over time. Periodic monitoring of plan implementation and periodic plan review and update can provide some of the flexibility required to maintain plan relevance.



Monitoring and update are functions performed by the interagency planning committee, with investigative support provided by the staff.

## Evaluation and Feedback

Plan evaluation addresses two questions:

- What is the effect of the policy plan on program planning and resource allocation decisions? Are strategies being implemented as planned?
- Have the strategies had any noticeable effect on the problem?

The first question is answered through a comparison of program plans and resource allocations to the objectives, strategies, and priorities in the policy plan. Deviations from the policy plan raise concerns regarding the quality of the policy plan, the success of plan implementation tactics, and the flexibility and currency of the policy plan.

The second question is answered through repetition of the problem definition phase and a comparison with prior years' problem definitions. Failures to affect the problems raise concerns about the logic of the strategy, the effectiveness of programs designed to implement the strategy, and the occurrence of mitigating environmental conditions beyond the control of administrators.

A careful review of the outcomes of the prior policy plan is conducted by interagency planning committee staff and incorporated in the problem definition for the subsequent planning effort.

With completion of the evaluation for feedback into the next planning effort, the planning cycle is complete.

## Conclusion

This description of the components of the planning model as they were enacted in the Louisville Project is helpful in translating abstract concepts into concrete terms. However, the details are most likely unique to a particular site at a particular time. There can be an almost infinite array of specific steps and procedures useful for conducting a comprehensive, rational local human services policy planning process. But the Louisville Project provides an interesting case study because the process worked and a plan was created. With similar care for integrity in the conceptual design and for direct translation of the conceptual design to procedures, this approach can work again elsewhere.