

Colbert v. Rauner

**Case No. 07-C4737
(N.D. Ill.)**

Annual Report to the Court

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Colbert Court Monitor
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I. Scope and Context of Report

Judge Lefkow approved the original *Colbert v. Quinn* Decree on December 21, 2011. The Decree provided both a framework and a timeframe for State Defendants to provide willing and eligible Class Members the chance to move from Nursing Facilities in Cook County into their own homes (with all needed services) or into other non-institutional settings. The original Decree was amended by agreed Order in early December 2015. Among the other elements, the amended Order changed the mandatory timeline for the movement of 1,100 Class Members to January 8, 2016 and stated that the Cost Neutral Plan should be agreed upon by the Defendants, Court Monitor and counsel for Plaintiffs by May 8, 2016. Failing agreement on the plan, the Defendants and Class counsel will submit separate plans by June 8, 2016.

This is the third Annual Report to the Court. Per direction of the Court, this Report is filed two months later than prior annual Reports – with the intent of evaluating the 6-month plan that was effectuated for June 1, 2015 through November 30, 2015 and also providing the Court with updated information on the status of the Cost Neutral Plan. Both of these elements will be highlighted in this Report to the Court.

II. Assessment of Progress and Compliance with Major Elements of the Decree for Past Eight Months (May 2015 through December 2015)

The Illinois Department of Aging (IDoA) continues its responsibility to manage the Colbert implementation through the Office of Transition and Community Relations (OTCR). There are currently nine (9) staff – including the Project Director, Housing and Transition Liaison, Outreach and Technical Assistant Specialist, Information Systems Analyst, Financial Analyst, Quality and Compliance Nurse Liaison and two (2) Project Assistants.

This Report will include an updated assessment of progress/compliance as relates to seven (7) key components to include: Outreach and Education, Evaluations, Transition, Housing, Quality Management, Cost Neutral Planning and Budget Support.

A. Outreach, Education and Referral

There continues to be multiple methods to inform Colbert Class Members of their rights and opportunities.

1. ADRC/ADRN

IDoA continues to have significant outreach contracts with Age Options, the Aging and Disability Resource Center (ADRC) for Suburban Cook County and also with the City of Chicago, which operates the Aging and Disability Resource Network (ADRN) for the city of Chicago. Each of these agencies has funds to employ three (3) Transition Engagement Specialists to do targeted outreach and engagement for Colbert Class Members. It should be noted that the city of Chicago has terminated its temporary full-time Engagement Specialists – necessitating that supervisors carry out outreach functions. This entire contract is now under review – with the possibility of engaging a different vendor.

Both ADRC and ADRN have continued the Peer Mentoring program that was begun in 2014. This program continues with 13 Peer Mentors who are called upon – as requested – to accompany Engagement Specialists to Nursing Facilities for either individual or group sessions. This program is being used on average twice per week, which is only half of the utilization during the prior six-month period (four times per week). It is unclear whether this is a direct result of the ADRN performance issue, but needs attention since this is such a valuable initiative. It should be noted that the Peer Mentoring program was cited as a promising and innovative practice during the Federal CMS site visit for Money Follows the Person (MFP) in July 2015.

2. Other Outreach Efforts

In addition to the ADRC/ADRN there are other new and ongoing strategies including:

- the ongoing outreach by contracted MCOs (Aetna and IlliniCare) to their already-enrolled Care Plan members
- the continued collaboration and referrals by the city and suburban Cook County Ombudsmen's Office
- a new partnership between Age Options and Metropolitan Family Services (MFS) that targets Nursing Facilities in South Chicago with higher percentages of persons with serious mental illness. Under this initiative, Age Options makes the referral and MFS conducts the evaluations.
- three contracted Care Coordination Units (CCUs) do outreach (and evaluations) for Class Members over 60 in targeted Nursing Facilities

3. Referrals for Evaluations

Exhibit 1 (below) tracks the number and percentages (by source) of referrals for evaluations

Exhibit 1

Colbert Referrals to Evaluation by Source

Source	# of Referrals Prior to 9-30-14	# of Referrals from 10-1-14 to 3-31-15	# of Referrals from 4-1-15 to 11-30-15
NH Staff/ MDS 3.0 Q	1141 (40.4%)	358 (25.4%)	629 (26.8%)
ADRC/ADRN	660 (23.4%)	498 (35.4%)	563 (24.0%)
Ombudsman	361 (12.8%)	72 (5.1%)	206 (8.8%)
State or Community Agency	259 (9.2%)	195 (13.9%)	445 (18.9%)
Self	100 (3.5%)	93 (6.6%)	225 (9.6%)
Family/Friend/Guardian	63 (2.2%)	5 (0.4%)	16 (0.7%)
MCO	74 (2.6%)	166 (11.8%)	266 (11.3%)
Other	169 (5.9%)	19 (1.4%)	0 (0.0%)
Total	2827	1406	2350

The following changes from prior Reports are of note:

- The total number of referrals per month (on average) continues to increase. For the past eight (8) months (April 1, 2015 – November 30, 2015), the average per

month was 294 per month as compared to 235 per month for the prior six months (October 1, 2014 – March 31, 2015).

- The ADRC/ADRN percentage of total referrals has decreased from 35.4% to 24%.
- The percentage of self-referrals has improved to nearly 10% of total – hopefully reflecting broader awareness of the Colbert Decree in Nursing Facilities
- The mandated Nursing Facility staff requirement to refer persons who are interested in potential community placement remains at a flat level from the prior six months (26.8% v. 25.4%).

Overall, the Court Monitor finds State Defendants in general compliance as it relates to Outreach, Education and Referral. The ADRN contract needs resolution and arguably a different organization to serve the city of Chicago.

The Peer Mentor program needs to be supported to every degree possible – given its strong success. The IDoA has continued to look for innovative and targeted strategies to improve knowledge and engagement by Class Members. The overall continued increase in referrals is reflective of that effort.

B. Evaluation by Qualified Professionals

There have been two (2) major factors regarding evaluations – the total number of evaluations completed and the quality/completeness of the evaluations themselves. In prior Reports to the Court, the Court Monitor has found that State Defendants met the Colbert Consent Decree requirements as to numbers of evaluations completed (2,000 by May 8, 2014); however, there were ongoing concerns about evaluations and care plans as relates to quality, consistency, completeness and rationale for decision-making.

In terms of the quality of evaluations, the IDoA has continued to contract with two MCOs (Aetna and IlliniCare) to do the large majority of evaluations. IDoA has also added contracts with three

(3) CCUs and two (2) CMHCs to target specific Nursing Facilities. The net effect is that overall evaluations completed per month have continued to increase – with an average of 119 evaluations completed per month over the past eight (8) months. In addition, the percentage of Class Members evaluated who have been recommended for community placement has also gone up – moving from 59% from the prior reporting period to 65% for the most recent eight (8) months. There was a total of 747 Class Members recommended for transition in the April-November 2015 time period.

In terms of quality, there were three (3) recommendations regarding quality that the Court Monitor made in the November 25, 2014 Report to the Court. All of these have been included as tasks for the fully executed (September 1, 2015) Intergovernmental Agreement (IGA) with the University of Illinois College of Nursing (UIC-CON). A brief summary of status is as follows:

1. Standardization of the evaluation forms and required information – A more comprehensive evaluation tool has been developed and was implemented on January 4, 2016 for all agencies doing evaluations. Training on the new form was conducted on December 18, 2015.
2. Routine audits to ensure consistency, quality and comprehensiveness – The audit process has begun for all review agencies with preliminary outcomes developed. This will be an ongoing task.
3. Review of all evaluations that do not recommend community placement – This process (under the IGA) has also begun – with the capacity to overturn the reviewer's decision (as indicated) and to return incomplete evaluations for further work.

In terms of overall compliance on evaluations, the Court Monitor notes that there has been substantive progress on both the numbers of evaluations completed, and development of a system to ensure reasonable quality and

consistency. The number of evaluations completed per month has increased – in part due to the addition of new evaluator entities. This in turn means more Class Members are now in the placement queue. The quality system – despite front-end delays due to contractual hurdles – is now in full play. All three (3) of the original recommendations are being fully addressed. The Court Monitor defers judgment on Consent Decree compliance on the quality issues until such time as actual reports are produced and there is time to review findings in some level of detail.

C. Transition Planning and Community Placement

The original Consent Decree required the placement of 300 Class Members by November 8, 2013, 800 (cumulative) by November 8, 2014 and 1,100 (cumulative) by May 8, 2015. As documented in the May 28, 2015 Interim Report to the Court, the actual May 8, 2015 placement total was 767 (333 fewer than required). The State Defendants (with the concurrence of Class Plaintiffs counsel) developed a 6-month plan in April 2015. Among other items, the 6-month plan called for placement of 1,100 Class Members by November 30, 2015. During this 6-month period, the State placed 306 Class Members (51 per month average), resulting in a cumulative placement of 1,101 Class Members by November 30, 2015. This accomplishment was even more noteworthy given all of the budgeting and payment issues that were at play early in the FY 2016 cycle. The IDoA leadership team is to be recognized for its persistent and effective work to accomplish this goal.

The amended Consent Decree language of December 1, 2015 called for the placement of 1,100 Class Members by January 8, 2016. The actual January 8, 2016 total was 1,116. The revised Consent Decree also requires the continued placement of Class Members at the same pace as Year 3 of the Implementation Plan until such time as there is resolution with the Court on the Cost Neutral Plan. This translates into a required average placement rate of 43 per month.

The IDoA has developed a data system that tracks multiple elements. Exhibit 2 (below) shows the breakout of service systems for the 1,101 persons placed:

Exhibit 2

Transitioned Disposition Total

Aging Network	191
DRS Home Services	177
CMHS	480
Other Services	41
No Services	121
SLF	91
Total =	1101

As anticipated, the large majority of Class Members (77%) are referred to either the Aging Network (17.3%), the Rehabilitation Home Services System (16%) or the Community Mental Health system (43.6%). This would appear to represent a reasonable mix given what is known of the overall demographics of the Colbert Class Nursing Facilities population. It is also noteworthy that the average age of transitioned Class Members is 55 – significantly lower than the average age of all Class Members. This is not surprising given the large numbers of younger persons with serious mental illness who have been inappropriately placed in Cook County Nursing Facilities.

IDoA is also tracking specific sub-categories for further analysis. An example are Class Members referred to CMHCs who are deemed “unable to serve” for a variety of reasons, e.g., medical condition, cognitive issues, perceived danger to self/others. The IDoA has committed to drill down on this group (19% of total referrals) to better understand the reasons for denial and identify any systemic barriers that need addressed.

In terms of the provider network, there are currently nine (9) CMHCs and two (2) Housing locators who provide transition services. This does not include the two (2) recent contracts with Housing locators related to the CCU pilot initiative and the RSSI Clustered Model (see II.D. Housing section for detail).

The Court Monitor finds the State Defendants are now in compliance as relates to community placements. While recognizing that the timeframes in the original Decree were badly missed, an ambitious 6-month plan was agreed to and was met (with 1,101 placements by November 30, 2015). Given the State's budgetary stalemate, this accomplishment is all the more commendable. A level of system continuity and accountability has now been achieved – with regular provider communication and good State-level support and oversight. Given this, the State should be able to meet its near-term requirement of 43 transitions on average per month until a Cost Neutral Plan is in effect.

D. Housing Development and Capacity

The overall collaboration on housing development and housing access for Class Members continues – including the IDoA, the Statewide Housing Coordinator (now at DHS), the Illinois Housing Development Authority (IHDA), the Housing Authority of Cook County (HACC) and the Chicago Housing Authority (CHA). Among the most significant of housing initiatives are the following:

- Bridge Subsidy – Nearly two-thirds of the transitioned Colbert Class Members have received a housing Bridge Subsidy, which makes up the difference between fair market rent and 30% of the Class Members income. This is an essential element of the overall Colbert effort. The remaining one-third received a federal housing subsidy, moved to a Supportive Living Facility (SLF), senior housing or moved in with family or friends.
- Cluster Model – The State has now implemented a cluster housing model with Renaissance Social Service, Inc. (RSSI) on the north side of Chicago. This model provides onsite professional staff (including enhanced nursing support) – allowing persons with significant medical and mental illness needs to be served. As of November 30, 2015, all ten committed units have been filled at a new building, and ten proximate neighborhood units are being sought.
- Master Leases – The State now has master lease agreements with four (4) property management companies throughout Chicago and Cook Suburban. There are a total 39 master

lease units – with 34 currently occupied. The master lease model is necessary for some Class Members with a criminal history and/or negative credit histories.

- Accessible Housing Initiative – The State’s agreement with IFF (formerly known as the Illinois Facilities Fund) has acquired and made available 70 units for Colbert Class Members with physical disabilities. Currently 51 Class Members have occupied these units with another 12 in the application process.
- Chicago Housing Authority (CHA) – The CHA has committed a total of 600 federally-supported housing units for Olmstead Decrees. However, the process of actualizing these units continues to be laden with many barriers – some at the Class Member level, some with landlords, and some with the complex process. There are currently 65 Colbert Class Members with a federal Housing Choice Voucher (HCV), of which 25 have a signed lease and have converted from Bridge Subsidies. Fifteen additional Class Members are in the process of obtaining a lease.
- Housing Authority of Cook County (HACC) – HACC continues to commit 10% of its turnover vouchers to Colbert Class Members (120 units). To date, 72 of these units have been utilized or are in process. HACC has committed an additional 60 units per year.
- Section 811 – The State continues to move forward with the targeted \$17.4 million in funds to develop new or renovated housing. The first Section 811 units are beginning to come on line and were made available to Colbert Class Members as of December 2015. It remains to be seen how much of a resource the 811 funds will be in reality. The State is committed to a planning and development process for these units that focuses on where Class Members want to live (“communities of preference”).
- Online Waiting List Module – The State has developed and trained on a new waiting list module that attempts to match individual needs with the best available housing resource. This initiative has been overseen by the Statewide Housing Coordinator.

Overall, the Housing efforts are to be commended. There is ongoing energy and collaboration at all levels. While not all initiatives have materialized as hoped (e.g., Section 811), mid-course corrections have been made as needed. DHS has committed an additional staff person for the Statewide Housing Coordinator – with the intent of delegating most of the critical responsibilities for working the waiting list to this new person. This is indicative of the State’s ongoing commitment to support housing needs for Olmstead Class Members.

E. Supported Employment

The innovative supportive employment initiative is now well under way. The Individual Placement and Support (IPS) model will target persons with Serious Mental Illness (SMI) – with a strong emphasis on Class Members who are currently enrolled in one of 18 Drop-In Centers. An IPS trainer who was already working in the system has been engaged since October 20, 2015; she brings a strong and relevant skill set to the task and has already visited 15 of the 18 Drop-In Centers. An evaluation tool is being developed to measure impact over time. A concurrent initiative is being developed with the Division of Rehabilitation Services (DRS) for Class Members with physical disabilities. This initiative will share common goals of enhanced outreach, education and motivation for persons to consider the DRS options for supported employment. The goal is to have this effort in place by March 1, 2016.

Both of these efforts are timely and necessary – given the low number of Class Members engaged in competitive employment.

F. Consumer Involvement

The Peer Mentoring role referenced in II.A. continues to be a vital part of the overall outreach effort. The IDoA also continues to seek feedback from the Peer Advisory Council. The Peer Advisory Council meets quarterly and currently has 14 active Peers as members – with a range of tenure each has had post-transition. The Council has good cross representation of the three major disability groups – Aging, Physical and Mental Illness. The Peer Council has

had the opportunity not only to comment on overall progress/policies but also to make suggestions on many pragmatic issues e.g. managing Move Day and creating a Community Resource Guide.

This has been an excellent forum to help shape practice by those who have/are living with all of the challenges of a welcome but major change in their lives.

G. Quality Management

With the UIC-CON contract now in place, IDoA has moved to broaden and deepen its overall quality management program. Major areas of development include the following:

1. Mortality Reviews

The UIC-CON is contracted to conduct mortality reviews on any Class Member who has died post-transition. The purpose is not only to look at causative factors for each death, but also to aggregate any patterns or organizational behaviors that should be systemically addressed. Exhibit 3 (below) shows the all-cause mortality numbers and rates for Class Members and others who transitioned from Nursing Facilities from February 2009 through December 2014.

Exhibit 3

Colbert Transitions and All-Cause Mortality Rate

Organizations	Transitioned (n=)	Died (n=)	All-Cause Mortality Rate
Aetna	336	16	4.8%
IlliniCare	441	17	3.9%
Colbert Total	777	33	4.2%
MFP/Pathways ¹	1,232	57	4.6%
MFP National Program (MPR) ²			6.0%

It should be noted that the Colbert mortality rate was 4.2%, somewhat lower than the Illinois MFP/Pathways rate of 4.6% for a very similar population. Nevertheless, UIC-CON has recommended clinical/practice enhancements that could impact successful and sustained community living. The

Colbert quality staff are following up on these recommendations.

2. Incident Reports

IDoA continues to report all incidents. These can range from relatively minor events to serious ones that could jeopardize community placement. For this 8-month period there were 322 reported incidents involving 277 different Class Members. The overall rate of incidents appears consistent with prior periods. Exhibit 4 (below) shows the numbers of significant medical occurrences for this period as compared to the prior period:

Exhibit 4

of Colbert Incident Reports

Type of Medical Incident	Prior Reporting Period Oct 2014-March 2015	Current Reporting Period April 2015-November 2015
Medical Hospitalization	63	109
Psych Hospitalization	35	55
Death	7	11
Return to Nursing Home	-	13

In reviewing the total numbers, it is important to factor in that this report is for 8 months vs. 6 months for the prior period and also that (on average) there are a large number of additional Class Members living in the community for this most recent period.

Nevertheless, as with deaths, the critical task is to analyze incidents with an eye toward system improvements. IDoA – in reviewing when incidents occur – determined a high percentage (97%) of incidents occurring within 8 weeks of transition were for significant events, e.g., hospital visits and emergency room visits. Hence, MCO contracts were tightened to increase the frequency of contacts for Class Members considered to be at higher risk.

The UIC-CON is currently aggregating and analyzing all of the reportable incidents and will be presenting findings and recommendations in the near future.

3. Quality of Life Surveys

A standardized Quality of Life Survey is conducted at specific intervals for all Class Members – consistent with the overall MFP protocol. UIC-CON will be unbundling the specific Colbert subset from the overall MFP data and will report on this in future periods.

4. Contract Performance Audits

The IDoA quality staff have been actively involved in conducting in-depth audits of all of the contractors involved in Colbert; these contractors include the MCOs, Housing Locators, CMHCs and Outreach and Engagement agencies. These audits were done in a highly professional manner with specific protocols for each – including staff interviews, Class Member interviews, site visits, policy reviews and random reviews of records. Compliance indicators were based on contracts and specific IDoA goals.

Findings were shared with agency management staff in writing – with the necessary opportunity to interact about specific findings and recommendations. Future audits will determine the degree to which recommendations are being addressed.

5. Complaints, Grievances and Appeals

All Colbert Class Members receive written information about their ability to file complaints, appeals or grievances during any period of the evaluation or placement process. IDoA (as of January 2015) has maintained a specific log to individually track all complaints, appeals or grievances. There were no grievances of rights violations during the 8-month period of April 2015 through November 2015. The

complaint process begins with the provider agency but then progresses up to IDoA if not resolved at the provider level. During this period, there were 38 total complaints for various reasons – including four (4) regarding negative evaluation result results; these four (4) were subsequently resolved. The remaining complaints were all reviewed with every effort to achieve resolution.

6. Community Tenure

Through its information system, IDoA has the ability to track and analyze community tenure. Exhibit 5 (below) details community tenure by timeframe:

Exhibit 5
Community Tenure

In Community	# of Class Members
1-30 Days	81
31-60 Days	42
61-90 Days	40
91-180 Days	123
181-365 Days	248
365+ Days	465
In Community =999	
No Longer in Community	
Deceased	39
Returned to NH	52
Incarcerated	2
Moved out of state	2
Unknown	7
No Longer in Community = 102	
Total	1101

It is noteworthy that 999 (91%) of all Class Members remain in the community and that 465 Class Members have lived in the community for over one year.

Overall, the Court Monitor is very pleased with the multi-dimensional scope of the evolving Quality Management system. The UIC-CON contract is off to a robust start and will add depth of reviews in critical areas, e.g., mortality

reviews and reportable incidents. The contract audit reviews are also essential and the interactive process of conducting these will only improve performance and provider relations. While recognizing that these efforts are at early stages, the foundation is now solidly in place and should only improve over time. The two (2) dedicated quality and compliance staff (including the recently engaged R.N.) are essential to this whole effort.

H. Training

The IDoA staff continue to identify and provide a range of training opportunities for provider staff – based on identified needs and new initiatives. During the past eight months, the trainings included topics such as: Access to Section 811, Tracking System and Transition Fund Request, MFP Quality of Life Training, and housing Training with HACC. The IDoA also organized and conducted a full-day training session on July 10, 2015 which covered a variety of relevant topics.

I. Other Relevant Colbert Contracts

In addition to the core provider contracts enumerated in this Report, there are two (2) other contracts that provide specialty supports. These include:

- University of Illinois Assistive Technology Unit (UIC-ATU). The purpose of this contract is to provide specialty evaluations for persons in need of assistive technology and/or have physical accessibility needs. The contract also calls for Home Modification services as needed. As of November 30, 2015, a total of 200 Class Members had received a core evaluation of general skill levels in Activities of Daily Living (ADL) and mobility – 189 of these evaluations in Nursing Facilities and 11 in community apartments. It has become apparent that key elements of the evaluations are more meaningful if done on site at the Class Member apartment. Hence, UIC-ATU has outfitted a van with requisite equipment to go on-site; the large advantage is that both the evaluation and implementation can be done in one visit.

The Home Modification program has had 39 apartment evaluations – with eight (8) Class Members having apartments modified as needed. The \$5,000.00 Consent Decree cap for Home Modification has put two (2) additional cases on hold due to inadequate funds.

- University of Illinois Jane Addams Center on Social Policy and Research –This contract with the UIC School of Social Work began its work in September 2015 with a wide-ranging community dialogue to explore topics including current system strengths and weaknesses, unique needs of persons transitioning from institutions to community and innovative service responses. The outcome of this meeting will help form the year one plan for specific Colbert trainings and consultations.

J. Budget Support

The IDoA budget request for FY 2016 was at the same level as FY 2015 – \$32.5 million. This was the amount in the Governor’s introduced budget for FY 2016. The early July 2015 Agreed Order by Judge Lefkow has maintained payment levels for all Colbert-specific services and supports at FY 2015 levels.

The State budget impasse, however, continues to loom large. There is ongoing provider concern about services that are not being reimbursed and the resultant impact on provider fiscal viability. This is an obviously untenable situation – but with no resolution in sight.

K. Impact of New Overtime Rules

The U.S. Department of Labor has issued new rules making clear that home health care workers are entitled to overtime pay when working more than 40 hours a week, including travel time. Each state is required to develop policies to implement these new rules. As a way to limit its overtime costs, Illinois has issued a policy that generally prohibits people with disabilities from using one personal care attendant (PCA) for more than 35 hours a week. People deemed eligible for more than 35 hours of PCA services will be

required to secure a second PCA. Although here are some exemptions to this general policy, they are quite limited. Illinois' new policy went into effect on January 1, 2016 and enforcement will begin on March 1, 2016.

At this point, it is unclear what impact this new policy will have on Colbert Class Members. The State has agreed to identify how many Colbert Class Members receive more than 35 hours of PCA services, but at the time of this report, that information has not yet been provided. The Court Monitor will be following up with the State to obtain this data and to ensure that Colbert Class Members affected by this policy are able to secure the necessary PCA services to enable them to remain in the community.

III. Cost Neutral Planning

The revised Consent Decree calls for an agreed Cost Neutral Plan by May 8, 2016. The Cost Neutral Workgroup continues to have the extremely valuable pro bono support of consulting firm Berkeley Research Group (BRG). The current set of tasks include: 1) final approval of the matrix and methodology for accessing and allocating all expenses through December 31, 2015; 2) determining how to handle part-year community costs; 3) preparing a final technical report which will presumptively be an attachment to the final proposed Cost Neutral Plan to be submitted to the Court for its review and evaluation.

As the technical BRG report is anticipated to be completed in late March 2016, the Parties have committed to a collaborative process of negotiating the final elements of the Cost Neutral Plan. The Court Monitor is hopeful that an agreed Plan is within reach by the May 8, 2016 date.

IV. Overall Compliance

The Court Monitor finds State Defendants in general compliance as relates to Outreach and Community Transition. The 6-month plan to transition 1,100 persons by November 30, 2015 was achieved – thanks to full throttle efforts by IDoA leadership and contracted providers.

The area of Evaluations by Qualified Professionals has shown major progress – due to dedicated IDoA quality-focused staff and the beginning implementation of the UIC-CON contract. Formal reports will soon be forthcoming from UIC-CON. The overall Quality Management efforts are also to be commended. There is now an overall quality framework in place and the requisite staff resources to implement it. These efforts will provide near-term and longer-term payoff in terms of improved transitions and continually improving service capacity.