



November 4, 2021

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**Nancy Drane**  
*Executive Director*

Kirra Jarratt, CEO  
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Kirra and Team:

I am pleased to submit this Commission response to the DC Bar Foundation's Request for Design Feedback and Input on a Coordinate Intake and Referral (CIR) System for the District. In the Commission's view, the development of a CIR system would be a transformative development for access to justice in the District, one specifically called for in our *Delivering Justice* report. We are grateful to the DC Bar Foundation for its leadership in moving this critical effort forward.

Thank you for the opportunity to provide our thoughts on the project's design, an extension of the ongoing discussions our own *Justice for All* CIR working group has had with the DCBF team. As we have said in the context of those discussions, we encourage DCBF to be ambitious in its plan to ensure that this unprecedented effort results in a system that provides the maximum amount of help to District residents.

As always, the Commission stands at the ready to provide any support it can as DCBF continues on this important access-to-justice journey.

If you have any questions about the attached response, please do not hesitate to reach out to us.

Sincerely,

Nancy E. Drane  
Executive Director

## **Request for Design Feedback and Input**

### **RESPONSE FROM THE D.C. ACCESS TO JUSTICE COMMISSION**

#### **Coordinated Intake & Referral System**

DC Bar Foundation



**This document is provided as a template for respondents to use in drafting their feedback and input. This document only includes the questions. It does not include the question prompts.**

## 1. INSTRUCTIONS FOR RESPONDENTS

### To submit a response, you should know:

- **WHO** - This document is geared toward legal services organizations and other justice system professionals, given their proximity to the coordinated intake and referral process. Other system stakeholders, e.g., court personnel and social services providers, are welcome to submit responses and skip the questions that are not relevant to them. If you are a non-legal services organization respondent, please prioritize addressing the issues raised in sections 10, 11, 12, 13, and 14.
- **WHAT** – Your input is sought on several different components of the CIR system and its integration into the civil justice community. This document is organized into sections that focus on particular aspects of the system.
- **HOW** - ***Each organization should submit only one response.*** Ideally, organizations will confer internally, collect input from multiple staff members, and compile this information into a single document. If a single organizational response is not possible, multiple responses will be accepted.
- The Request for Feedback and Input document includes multiple questions to guide respondents' feedback. Respondents do not have to answer every question or provide feedback on every section.
- **WHERE** – All responses must be submitted in Microsoft Word or PDF through the [online form](#). If you are unable to submit an online form in this manner or have questions about the process, please email [innovation@dcbfoundation.org](mailto:innovation@dcbfoundation.org) for assistance.
- **WHEN** – Responses must be received by **Friday, November 5, 2021 at 5:00 PM ET.**

### If You Have Questions

Questions can be submitted to [innovation@dcbfoundation.org](mailto:innovation@dcbfoundation.org).

## 2. SYSTEM STRUCTURE

**From your perspective,**

**This plan proposes employing non-attorney navigators to field intake calls and place referrals with legal services organizations. Please provide feedback on the use of non-attorney staff for this role.**

The Commission strongly supports the use of non-attorney navigators for the CIR system. The use of non-attorney navigators is recognized as an essential element of expanding access to justice. The Justice For All initiative (housed at the National Center for State Courts and operated in partnership with the Self-Represented Litigation Network) recognizes the use of non-attorney navigators as an important innovation in expanding access to justice. (See JFA Components, *available at* <https://www.ncsc.org/jfa/guidance-and-tools/jfa-components>.)

Non-lawyer navigators can (and in many jurisdictions, already do) perform a wide variety of functions to assist users who do not have legal representation. In state courts, non-lawyer navigators perform functions such as providing referrals, information about court rules and procedures, provide self-help materials and information, and assistance with filling out legal paperwork, among other tasks. (See Mary McClymont, *Nonlawyer Navigators in State Courts: An Emerging Consensus* (2019), *available at* <https://georgetown.app.box.com/s/t2zf6mjv2x74w944t8ejbsku7i2jc7mc>). The proposed tasks for CIR non-attorney navigators of fielding intake calls and placing referrals fall well within established practices for the use of non-lawyers.

We would add several important qualifications to this support, however. First, non-attorney navigators should be supervised and managed by licensed attorneys. This ensures that licensed attorneys are able to review and provide legal issue-spotting in more complex matters and are aware of legal provider considerations such as conflicts. And, as discussed further, they should be well-trained. Second, the CIR system should rely on logic-trees to guide non-lawyer navigators in the information and referrals they provide to the extent possible to ensure consistency and objectivity. Third, access to robust legal information resources is a necessary tie-in, as further detailed below.

**In the proposed plan, the CIR program does not provide legal advice. Do you think that the CIR should include legal advice? If so, how might the CIR navigators be able to connect applicants to legal advice immediately (while the referral for services is still pending)?**

The CIR system should and must offer something more than connecting callers to a lawyer (through a legal services provider). A primary benefit of this CIR effort will of course be to ease user access to legal assistance. However, even under the current system, providers receive more requests for assistance than they are able to place, prioritize or de-prioritize certain types of matters, or encounter callers who are not eligible for their services. It does not significantly improve access to justice if we ease

access, but then callers find there is not actually an organization able to take their case. The system has the capacity to do much more.

As DCBF has already noted in the Request For Feedback document, legal assistance can come in different forms. Not all callers will require a lawyer (perhaps their claim is not ripe, for example), nor are there enough lawyers to provide assistance with every legal problem. In the Justice for All model, people with legal needs can access the system where they are and without the assistance of a lawyer. The JFA model “acknowledges that *lawyers alone cannot make justice for all a reality.*” (National Center for State Courts, Justice For All Initiative Guidance Materials (November 2019), at 6, available [https://www.ncsc.org/data/assets/pdf\\_file/0021/25464/pdf-ifa-guidance-materials.pdf](https://www.ncsc.org/data/assets/pdf_file/0021/25464/pdf-ifa-guidance-materials.pdf)). This CIR system can only be successful if it includes building additional resources so that, once across the initial threshold, it facilitates user access to a continuum of services, from self-help materials to brief advice and limited scope representation, to full representation. (We’d note, parenthetically, that looking at how we might broaden and improve the availability of non-traditional legal help is something the Commission is looking at through its Justice for All project.)

The CIR system must include a triage component and should work to connect users with a spectrum of services beyond the assistance of a lawyer, including other forms of help such as legal information (such as through LawHelp), document assembly, and other self help materials. We note that this will require content creation and the commitment to regular updates and user testing of the materials. This could be accomplished through a funded effort to upgrade and partner with Lawhelp.org/DC, for example.

The CIR system should include the building of an online application and triage system that would generate tailored legal information and legal and community resources for callers. For example, in response to a caller reaching out for information about seeking an uncontested divorce, a navigator could say, "I'm going to refer you to Legal Aid, but in the meantime, I will provide you with other resources, including ... ." In this example, the caller might receive a set of materials on the topic of divorce, potentially including fact sheets, access to online forms, information about the Family Court Self-Help Center, etc., in addition to any appropriate referrals.

Providing brief legal advice is another important element in the system where the CIR system could play an important role. Many District legal services providers already provide brief advice or services (*See Delivering Justice* at 43 for discussion of models in the District), but there would be significant value in creating a centralized way to access this advice while building upon these existing efforts. Providing brief advice would give services to an exponentially larger number of District residents, while preserving provider capacity to take on cases for full representation. The CIR system would of course have to identify or develop resources to provide the advice, either internally through CIR capacity or in partnership with others.

An example of the power of brief advice to expand access to justice is the Coordinated Advice and Referral Program for Legal Services (CARPLS) in Illinois, which is

recognized nationally as a leader in legal advice hotlines. The approach was developed from a study that determined that many legal problems could be resolved with advice or brief services. CARPLS is a standalone organization that combines centralized intake and referral with advice and brief services for all legal issue areas, which are delivered over the phone by a team of 36 attorneys.). CARPLS does not provide full representation, instead referring out to legal services providers or coordinated hotlines when that is warranted. Attorneys conduct all CARPLS intakes so that they are able to also provide brief advice seamlessly and in-house. Of callers who connect with an attorney, about 85% are resolved by CARPLS attorneys through advice or brief services.<sup>1</sup>

A brief advice line would need more attorney staff to provide advice across a range of issue areas, or could be staffed in coordination with legal services providers. There would also be the potential to explore the use of pro bono resources to support the provision of brief legal advice. Non-legal navigators, in addition to providing information, could potentially have more of a role in conveying legal advice if there were updates to legal practice rules and of course, adequate training and supervision. For example, the Boston Volunteer Lawyers Project uses non-lawyer intake specialists who also provide information and advice, with the advice being monitored and supervised by supervising attorneys through LegalServer. Further work would certainly be needed to fully develop this concept, including staffing, but the CIR project would provide a solid base for this effort.

The access to justice crisis in the District also extends to the modest-means population, and the CIR system should anticipate that some callers will need referrals to reduced-fee rather than free legal services. The CIR system must incorporate these resources. These include DC Affordable Law Firm, DC Refers, DC Tenants Rights Center, Legal Counsel for the Elderly's reduced fee panel, and others.

We are at a unique moment to build these platforms in such a robust and comprehensive way. We may not have another opportunity when there is so much community enthusiasm for change, the ability to make significant changes due to COVID-19 disruptions, and unprecedented funding for civil legal services in the District. DCBF should take this moment to be ambitious in its plan to ensure that this unprecedented effort results in a system that provides the maximum amount of help to District residents.

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<sup>1</sup> Smith, Michael, *Best Practices for Coordinated Intake, Triage, and Referral* at 9 (attached); see also [CARPLS 2020 Annual Report](#).

### 3. USERS' ACCESS TO THE CIR SYSTEM

#### From your perspective,

#### What are the main concerns that should be addressed when considering how people would access the CIR?

The CIR should be promoted and encouraged as the primary point of entry to legal services. Ease of access to the CIR system will be critical to achieving this. The CIR must have a simple, user-centric design focused on the end-user rather than being a system built by lawyers for lawyers. The CIR system should aspire to ensure individuals get the help they need, in the form they need, when they need it. When a caller is routed to a provider, the CIR should attempt to transfer the caller directly to an intake worker at the legal services provider to seize the opportunity when the caller is on the line. When considering how people will access the CIR, crucial concerns are hours of operation and availability of on-demand features; multiple ways to interact with the CIR such as by text and live chat in addition to phone conversation; promotion of the line as a primary point of entry both to end users and to social services and other partners who may be assisting end users to connect to legal services; and language and disability access.

#### What do you see as the main benefits and drawbacks of a single phone line?

In considering how users reach the CIR system, a single phone line is preferable to multiple phone lines. The CIR system should not have different numbers to call for different legal issue areas. Callers may have multiple legal issues that would necessitate calling multiple lines, negating the benefits of centralization, or callers might not conceive of their problem or issue area in the same way as the system designers. Having one public-facing phone number will also increase ease of access to the system and improve visibility of the line for users and community providers. For example, it would be greatly beneficial for DC Court navigators to be able to provide litigants with one number to call, or to even assist litigants in calling, rather than combing through a multiple page document of District legal services providers who may or may not have current capabilities to assist a litigant, or for whose services a litigant may or may not qualify based on myriad eligibility criteria beyond income.

However crucial one phone number to access is, access to the CIR system should not be limited to being by phone call. The system should meet end users where they are by offering multiple avenues to connect – in line with the principle of “no wrong doors” to legal assistance, we also need to build multiple doors. Some callers may not be able to call a phone line during normal hours of operation, while others may prefer text or chat interactions or more automated, on-demand services. Some might want to access a website that provides information on demand, as opposed to waiting to talk to someone (even if they’d be open to a subsequent conversation). As to texting, District providers reported that texting is a preferred method of communication for many clients (*Delivering Justice* at 47).

We do also acknowledge that there are benefits to in-person interactions and intakes that will be lost through relying primarily on phone calls for the CIR system.

Some callers may not feel as comfortable or disclose as much relevant information in a call as they would in-person. The proposed set-up for the CIR system would still allow the legal services provider to complete the more in-depth intake in person if warranted or desired. In considering the balance of where we want clients to form more trusting personal connections, we would want clients to be able to build those deeper connections with a legal services provider rather than with the CIR system. We see a successful CIR system as having more limited and brief interactions to route clients, so having in-person intake availability for the CIR would not be a necessity.

Final note: Several legal services providers in the District already offer online intake, which may offer District-specific lessons for the build of this system, as well as demonstrate that there is user demand for such technology.

### **Are there other access channels that should be considered?**

In addition to the live navigator function, the CIR system should include an online application and triage tool. Users would be able to input the same information an intake worker might collect, and could be guided to resources through the same logic-tree used by navigators, or be connected to a navigator. An integrated online application and triage system would have the advantage of making some services and information available “on-demand.” This would be especially helpful for those not able to access a CIR phone line during its hours of operation, or who would prefer to input their information themselves and be routed to a provider. An online platform could also incorporate an online chat function. The phone line and online platform should also incorporate the use of text messaging to interact with and follow up with callers.

Another access model is the Minnesota Legal Kiosk Project (Website: <https://www.legalkiosk.org/about>), which created a statewide network of over 250 legal kiosks placed at court, agency, non-profit, and other community locations; some kiosks are public-facing and serve as community access points to civil legal information, self-help services, and civil legal aid intake. Other kiosks are managed by a provider and provide a portal for intake and client meetings and virtual appearances. A similar project is being launched within the Connecticut library system. These portals seek to help overcome technology and transportation barriers to access to services. Once developed, the CIR system could eventually include “kiosks” placed with partners to allow residents a direct connection to the CIR and its associated resources.

#### 4. INITIAL INTAKE & CONFLICTS CHECK

**From your perspective,**

**What information should or should not be collected during the CIR intake? What information should be shown to the legal services organization before the conflicts check and what information should be shown after it is determined there is no conflict?**

The CIR system should aim to focus on gathering brief case information and case status, eligibility information, minimal information necessary for conflict checks, and then efficiently connect callers to the right information and provider. It should not be a burdensome or long call for a caller. The CIR should function as an information hub akin to a “Legal 211”. Existing networks such as the Victim Legal Network may be able to provide some useful insight into their practices, though that particular model may be more decentralized than our vision for a CIR system.

Given the broad spectrum of eligibility criteria across the myriad legal services providers, the CIR could take a tiered approach to information gathering – gather the most common eligibility information (such as income) and legal problem, with more specific questions only asked later as the logic-tree guides a case towards a provider (or as a final manual check to confirm eligibility once the case has been routed through the system). This way, every caller does not need to answer every eligibility question for every organization, even ones who will not be able to assist them.

We expect that legal services providers who actively conduct intake will have more detailed feedback to you on this point and what specific questions the CIR should ask. In the end, our view is that the CIR should collect enough information to ensure the caller is directed towards the right organization, and provide an adequate picture to that organization about the nature of the caller’s problem, what they have done already to address it, and as current a status of where the issue stands as possible. The key will be to provide enough information such that the legal services organization can ask specific, follow-up questions to the caller as opposed to starting anew with a question like “tell me about your issue?”

**How can we reduce the storytelling burden on the applicant so that they don't have to tell their story to the CIR navigator and each organization that they are referred to? (i.e., intake notes being shared between organizations)**

The user experience and reduction in storytelling burden is a primary benefit of this CIR effort, and adequate technological resources should be directed towards achieving this goal at the front-end. Some redundancy of story-telling will be unavoidable – even if the CIR system conducted a very detailed initial intake, a legal services provider would be sure to have follow-up questions for callers (as would a second provider if the case needed to be forwarded). Discussing the situation is also a way to build rapport. There will be a reduction in story-telling burden and effort needed to access services if the system is able to successfully route callers to the legal services provider most likely able to take their case. Callers will be much less likely to call and share their stories with

organizations only to find out they do not have capacity, or the caller is not eligible for their services.

To reduce storytelling burden, the CIR system and legal services providers' systems should be integrated and able to share information. Existing integration plug-ins could handle some of this work of making sure that information from the CIR system can be plugged in directly to different case management systems without providers needing to manually re-enter all data. There is also long-term potential to move participants over time to the use of a single case management system. Technological integration from the start is crucial to building an efficient system. If there is not initial integration, providers will grow accustomed to less efficient means of information sharing, meaning future upgrades would require again building buy-in and enthusiasm for changes. Building this integration at the front-end saves this effort down the line. The use of integrated case management systems (through plug-ins or through use of a single case management system) would also be more secure and less likely to fall through the cracks than if such information was sent between the CIR and providers by email.

The optimum solution which would take longer to accomplish would be for all participating legal services organizations to move to one case management system to allow for seamless sharing and integration of information. While not the primary intended benefit of the system, reducing the time intake workers at legal services providers need to spend copy/pasting or manually entering intake data would be a benefit to providers.

Callers should be informed that as part of the referral, information will be shared with the legal services provider. The CIR system and the referred legal services provider should also inform callers that limited information will be shared back to the CIR system about the intake outcome if the provider is able to accept the case, and that the more detailed intake notes will be passed along if the matter needs to be referred to another legal services provider. Providers should follow a common and consistent protocol in describing to callers whose cases they cannot accept what information is being passed back to the CIR and to the next legal services provider. On the back-end, the system should allow sharing between the CIR and providers about the intake outcome.

Policies and protocols could be built into the system to allow callers to opt-out of this information sharing, but information sharing should be the default.

**What information would be important to consider when determining the protocols for case routing?**

Decisions about routing should be based on an automated logic-tree to the extent possible. DCBF should use feedback received from individual providers in response to this question to help build this logic-tree, and it should incorporate real-time data about capacity (including and especially if the provider is not able to accept referrals due to already being at-capacity). Building the logic-tree will be a time-intensive project at the outset of the project and will require extensive input from legal services providers about how routing decisions should be made equitably. However, this type of automated

routing has been successfully developed in other jurisdictions including Michigan (Michigan Guide to Legal Help), Illinois (Illinois Legal Aid Online), Minnesota, and Massachusetts (Massachusetts Legal Resource Finder).

Because of the large number of providers in the District, such automation is key. It will not be realistic for navigators to comb through 40+ providers individually to consider which is the best referral, and balance this against provider size and capacity. Automation will also help avoid biases as to which providers receive referrals and ensure smaller providers receive a proportional number of appropriate referrals. This can also help the system avoid the appearance of favoring certain providers over others. Automation could also help sort eligibility questions that are more general versus those that only need to be asked if a case is being routed to a particular provider, reducing the number of irrelevant questions callers need to answer.

Case routing should also consider whether a caller has multiple legal issues that could all potentially be served by the same organization and routed to one organization to the extent possible. Again, this would be quite a complicated task for a navigator without the aid of automation.

Participating providers should be mandated as part of their participation in the CIR to continually update their capacity and eligibility criteria to ensure accurate case routing (meaning the CIR system will also need the technological capacity and resources to make updates on the back-end as needed). Outreach and monitoring by supervisory staff to ensure accuracy should be secondary, and supervisory staff can provide follow-up when an unusual number of cases are rejected.

**Is 24 hours a reasonable amount of time for a legal services organization to contact the applicant after the initial referral? Should it be more or less?**

We hope that legal services providers input as to the exact hours that are reasonable will provide DCBF with a guide as to a reasonable time period. Our sense from our experience and conversations with legal service providers is that 24 hours might be a challenging time frame, and there should be a differentiation between attempts to reach a client and making actual or meaningful contact (which can take longer). Business hours or days should be used as a measure and the expectation made clear to participating organizations. There might also be policies set up to address cases that appear to be emergent in nature.

Existing networks in the District will also provide useful data. For example, the Victim Legal Network of D.C. has been able to achieve relatively quick turnarounds in case placement. The network employs a “hub and spoke” model by which a navigator can place cases according to the focus and capacity of each member organization; in one instance, a case was placed within less than 48 hours of a single phone intake, even though the first four organizations turned down the case. (*Delivering Justice* at 46).

No matter the timeframe chosen, there should be ongoing monitoring and evaluation to ensure that this is a realistic and useful time frame. Areas such as the percentage of callers who are able to be contacted by the legal services provider, and

the percentage that actually complete a full intake with the assigned provider will help guide whether, and why, callers are not completing the referral intake process and whether there need to be adjustments.

The Commission would also assume that any CIR system would have the capacity to track referrals and their statuses, and that the CIR system could send automated and manual reminders to legal services providers to check on the status of referrals.

## 5. FULL INTAKE CONDUCTED BY LEGAL SERVICES ORGANIZATIONS

**From your perspective,**

**Having intake staff indicate the status of the case with the legal services organization will be a critical piece of the workflow to ensure that no applicants fall through the cracks. In your opinion, how can this loop most effectively be closed every time?**

Integration of intake systems will be an effective tool in ensuring that cases and applicants do not fall through the cracks. The use of automated reminders for both CIR staff and legal services providers who have been sent intakes are both critical. Legal services providers should be providing intake outcomes and statuses to the CIR system. There should also be policies developed about who (CIR staff and/or legal services staff) and when to contact users who are not able to be reached to complete their full intakes.

**What procedures should the CIR have in place to ensure confidentiality?**

Information should be shared between the CIR and legal services providers using secure platforms. Information collected during intake should be distilled to essentials and avoid the collection of unnecessary personally identifying information. Domestic violence services providers in specific will be a crucial voice on this issue, and the National Network to End Domestic Violence has created templates around confidentiality and technology available at <https://www.techsafety.org/confidentiality-templates>. Additional resources are available through the Confidentiality Institute, <https://www.confidentialityinstitute.org/>.

## 6. INTEGRATION WITH EXISTING LEGAL NETWORKS AND OTHER RESOURCES

**From your perspective,**

**There are several existing intake and referral networks that focus on specific legal issues areas, like eviction, family law, benefits, and victims' rights. How can the CIR system best intersect with these existing networks?**

Integration with existing lines is essential, but the CIR line should be widely advertised as the primary public-facing point of entry. There is value in the continued separate existence of other networks as part of a “no wrong door” approach to legal services, particularly where those networks are offering in-person services that the CIR line would not be providing immediately (e.g., court-based service), or offer social services in addition to legal resources. The CIR line should be compatible with existing

lines to develop strategies on the back-end for integrating the work of the CIR system with that of existing networks. This integration should work in both directions – if someone calls a specialized line but they cannot assist, the line should direct the caller to the CIR.

But promoting both a centralized CIR line and a series of specialized lines will perpetuate the problem the CIR is trying to solve. While it may take time for the system to adapt to centralization around the CIR, the CIR needs to have more ambition than simply filling gaps or becoming another number to call amidst others. Simplicity is key to increasing access to justice, and one primary entry point is a key to simplicity.

That said, the CIR should make room for successful referral strategies that are currently in place. For example, medical-legal partnerships allow medical staff to directly refer families to often co-located legal services attorneys. One of the greatest benefits of programs like this is the ability for lawyers to “adopt” the trusted relationship between the medical staff and the individual seeking help in order to move more quickly towards results. Having a doctor tell a patient, “I know Kathy and she is a great lawyer who’ll be able to help you,” is incredibly powerful. Referring that individual to the CIR, as opposed to the co-located attorney, runs the risk of losing the benefits of that trusted relationship. Some providers also have funding obligations beyond DCBF funding that require accepting cases directly through other partnerships (such as with District agencies or health insurance providers).

The CIR should be considered the primary point of entry for unconnected people (the “biggest” door) but there should be an allowance for other “doors” to legal services that have been established through strategic relationship building. For example, as conceived, the CIR system would also leave room for clients to connect directly with a legal services provider with whom they had a previous relationship or a trusted connection.

With respect to integration, the CIR system should also collaborate with other lines or services that provide assistance to clients of modest-means populations who do not qualify for legal services but may call the line if they see it advertised. This does not mean that these providers need to be CIR participants, but that the CIR navigators have the information to appropriately direct the caller. The CIR system should also ensure collaboration with resources and networks for legal issues not handled by legal services providers (such as criminal matters and personal injury claims) so that callers can be appropriately directed.

It will also be important for the CIR to integrate and/or connect with the District’s network of law schools, each of which is uniquely involved in the delivery of legal services in the District: Georgetown University Law Center; George Washington University Law School; Catholic University Columbus School of Law; UDC David A. Clarke School of Law; Howard University School of Law; American University Washington College of Law. Law school clinical programs can serve as both a source and target of referrals, and thus should be consulted throughout the CIR development process. In

addition, law schools clinics and/or pro bono programs could be a potential resource for navigation or other system support.

Finally, the CIR (and its staff) should be trained to connect users with services outside of the District of Columbia. D.C. legal services providers often receive calls from residents in neighboring jurisdictions (Maryland, Virginia) and having ease of access to comparable systems in those locations (or an equivalent) would be useful. Because D.C. is our Nation's Capital, providers can sometimes receive calls outside of the immediate metropolitan area. Knowing to refer users to another state's equivalent of a CIR or LawHelp, for example, would be a useful resource to incorporate.

**CIR navigators might be in a position to inform applicants about other available resources. What services or information could potentially benefit applicants beyond connection to a legal services provider (e.g., links to legal information online, forms, non-legal service providers)? Please be as specific as possible.**

Beyond connection to legal services, applicants would benefit from receiving targeted, tailored resources appropriate to their needs, not just a laundry list of possible resources across multiple issues. The provided resources should also be accessible to the specific caller, both in terms of language and disability access, and in terms of technological constraints (which the navigator should ask about). Referrals, links, information, and/or assistance could include:

- Legal information resources through LawHelp.org/DC (as noted previously in our response, the CIR system could be paired with a robust investment in streamlining, updating, and user testing to enhance LawHelp).
- Court forms, including (but not limited to) those available to fill out online (<https://www.probono.net/dccourts/>)
- Other court-based self-help resources.
- Community mediation services.
- Application assistance and programs for SSI/SSDI, TANF, SNAP, Medicaid/Alliance housing or other rental assistance, unemployment, utility assistance, and other public benefit programs for which they may qualify.
- Accessing mental and behavioral health services.
- Accessing other government services.
- Other crisis resources – emergency food, emergency shelter, resources for domestic violence and other safety emergencies (including procedures and protocols for connecting calls with 911 or other emergency resources)

## 7. PROGRAM STAFFING

**From your perspective,**

**This plan proposes two full-time staff members to manage the CIR Program. This proposal was made based on the number of management staff for similar initiatives in other jurisdictions. Please provide feedback on this level of staffing.**

Legal services providers who conduct intakes will be better equipped to provide information about the staffing necessary to handle their call volumes and provide adequate supervision than the Commission. We would support this input being used to ensure the development of sufficient staffing, both for full-time management staff and for navigators. For the line to be successful, there will need to be robust community outreach to non-legal services providers and community members, as well as constant management of relations with participating legal services providers, so any staffing plan should account for these duties as well. To pull off an ambitious effort like this will require ample staffing, both on a management level and through the navigators with direct access to individuals seeking assistance.

Research previously provided by the Commission to DCBF included the following information about staffing for coordinated intake projects in other jurisdictions (both of which serve larger populations than the District, but may provide some guidance – the CIR system should also anticipate receiving calls from callers throughout the DC Metro area, many of whom may have DC cases even if they are not residents):

- Volunteer Lawyers Program of Boston (Boston VLP) screened around 13,000 calls for 2019 (providing about 7,500 with information, advice or outside referrals, and about 6,000 accepted for limited or full representation by Boston VLP or its partner organization, Greater Boston Legal Services) using a staff of 8 non-attorneys, 1 full-time supervising attorney, and 9 other supervising attorneys providing rotating support. (The Greater Boston area has a population of approximately 4.87 million people).
- Washington Coordinated Legal Education Advice and Referral (CLEAR) hotline handled over 300,000 calls from 80,000 unique callers, screening 15,000 and providing 10,000 with brief advice or service with a staff of 20 attorneys (including some part-time) and 13 non-attorney screeners. The program anticipated a need of 20 additional non-lawyer screeners to support statewide eviction work. This program supplements direct calls and walk-ins to regional legal services providers in Washington state. (Washington State, minus King County which is not served by the hotline, has a population of approximately 5.45 million).

Adding an online triage tool would likely require comparatively limited additional legal staffing (after the more intensive “build” stage and excluding IT support) – for example, the Massachusetts Legal Resource Finder which provides statewide referrals through an automated online platform is staffed by one supervising attorney. Statewide tools in Minnesota, Illinois, and Florida have a similar level of legal staffing, with support

from legal services providers within the network. If the CIR system is expanded to provide brief advice, then a much larger number of attorneys would be needed. We'd note that in some jurisdictions, advice lines such as these are staffed by pro bono attorneys through platforms such as Free Legal Answers. We are not voicing a view on who should staff an advice line at this time, but rather noting that there may be choices among various staffing models.

While the Commission does not have a specific idea of the number of staff needed, it is essential that management-level staff be attorneys. This is in line with practice in coordinated intake projects in other jurisdictions, as detailed above. Attorneys are able to provide supervision, understand and screen for ethical issues such as conflicts, can assist with legal issue-spotting in more complex or convoluted calls, and create and maintain connections with District legal services providers and understand the local legal landscape.

**The CIR navigator positions will require considerable training. What should this training include? Please include any essential training components, such as subject areas, resources, or possible trainers.**

Commission staff assisted with training for DC Court navigators providing remote services in September 2020. While the role of a CIR non-attorney navigator will differ from the role of a DC Court navigator, there are many parallels for training purposes. Areas covered for court navigators included an orientation of the DC legal system; overview of District legal services providers; eligibility considerations for legal services; overview of existing District resource and self-help centers and their scope of assistance; overview of legal information resources; and responding to social service-related inquiries.

For CIR navigators, we would suggest also adding an overview of District legal resources for "low-bono" and modest means litigants; an overview of the types of law that are not covered by legal services providers; and appropriate referrals for these types of calls (for example, criminal law, personal injury). Navigators should also receive training and information on crisis resources in the District and training on working sensitively with callers in crisis or experiencing trauma.

Navigators would also need considerable skills and training in areas such as the line between [legal information vs. legal advice](#); customer service; cultural competency and being trauma-informed; and the use of technologies for facilitating language access and accessibility. Customer service training in particular should not be overlooked – our *Delivering Justice* report details how providers reported marked improvements for both intake staff and callers when trained in this area. (*Delivering Justice* at 46). Customer service can include training on how to "cut off" calls when they are no longer productive or when the level of information being shared should be reserved for the referred provider.

While navigators would not be expected to be subject matter experts themselves, they should also receive trainings on legal issue-spotting and on substantive areas of the

law by local subject matter experts so that the navigators are able to identify key terms and vocabulary that will assist in distilling caller stories into legal referrals.

Navigators should also receive training on “lessons learned” from legal service intake staff. We’d urge DCBF to tap into the existing network of professionals at legal services organizations already skilled at intake and referral activities. They are among the most knowledgeable members of our legal services community, often with superior human skills developed over the countless calls they’ve fielded over time.

The Self-Represented Legal Network has compiled a sampling of trainings used in other jurisdictions for court navigators that may also provide useful guidance:

<https://www.srln.org/taxonomy/term/754>

The Commission would be happy to assist in identifying and connecting with appropriate trainers. We’d emphasize that training modules already exist for almost all the issues identified above, and leveraging resources currently available in the community – and those who created them as trainers – would be ideal.

Intake is a high-turnover position at many legal services organizations, which presents challenges when it can take up to a year for staff members to get up to speed. The CIR system should anticipate turnover and have appropriate supervisory supports. New navigators will rely heavily on lawyer supervisors for guidance and information. DCBF should also seek to learn from legal services providers who have retained long-term intake staff on how they keep intake staff engaged and supported in this difficult position.

## 8. CONTACT CENTER LOCATION

**In your opinion,**

**What type of organization would be best suited to house and staff the CIR contact center? Please explain your reasoning.**

An existing legal services provider or entity with existing connections and relationships with the District’s legal services community in the District would be best suited to house the CIR contact center. The CIR contact center could be its own entity housed with a legal services organization (akin to the Victim Legal Network, housed at the Network of Victim Recovery of DC (NVRDC), though we recognize this project is less centralized and thus not exactly comparable) which could, through governance and structure, alleviate concerns specific to the unique District legal services community. An outside technology provider is not likely to navigate and be responsive to the complex District legal services ecosystem without having to put significant resources into duplicating knowledge and expertise that already resides with legal services providers.

Conflicts and other ethical and practical concerns will need to be considered in housing the contact center and in its governance and structure, but these are not insurmountable challenges. The organization housing and staffing the CIR also needs to have a history of sophisticated and secure management of confidential data. Finally,

whatever organization takes on this effort would need to have appropriate in-house resources and expertise (supplemented by additional funding specific to the CIR) to support the work over the long-term.

## 9. PARTICIPATION OF LEGAL SERVICES ORGANIZATIONS

**If you work with or for a legal services organization, please tell us:**

**How many calls does your organization receive per month, and how many intake staff do you have?**

The Commission does not receive or process intakes, though Directors and staff from multiple District legal services providers are represented on the Commission. Data collected from legal services providers about their intake staffing and logistics should inform staffing and other decisions made for the CIR system.

**How could the CIR system and processes maximize the efficiency for your organization to receive referrals from the CIR system and send referrals to the system?**

Not applicable

**What case management system does your organization currently use? What should be considered in the CIR system design that would allow for future integration with your case management system?**

Case management plug-ins and migration to one uniform case management system across providers would optimize the functioning of the CIR system. Research conducted by the Commission found that in almost every jurisdiction with coordinated intake, participating programs used a single case management system, most often LegalServer. Workarounds and plug-ins to accommodate different case management systems are available but do require time, money, resources, and governance to maintain their utility. Existing District networks such as the Victim Legal Network of DC, the Landlord Tenant Legal Assistance Network, the Family Law Assistance Network and the OAH Legal Assistance Network may have “lessons learned” regarding integration or challenges from non-integration of case management system to guide this effort.

**What other technology integration possibilities should be explored?**

The CIR system should integrate with a triage system, a website that uses a series of questions to guide users to individualized legal information, and should have built-in ability to complete an online intake with the CIR and be directed there by phone if the user prefers.

**What is your organization's level of interest in participating in the Coordinated Intake and Referral system?**

While the Commission would not be accepting referrals (as it is not a service provider), the Commission and individual Commissioners are well-positioned to champion this system through collaboration and facilitation with District legal services

providers. **In our view, the development of a CIR would be a transformative development for access to justice in the District.**

At a broad level, participation by legal services providers needs to be at a large enough scale to make the investment of time and resources into this project worthwhile. To that end, participation (which would include accepting and considering referrals from the CIR system and completing those intakes, as well as keeping the back-end of the CIR system updated as to the provider's eligibility requirements and capacity) should be mandatory for DCBF grantees.<sup>2</sup>

The terms and expectations of that participation need to be clear to grantees at the outset. Mandated participation should mean accepting and considering referrals sent from the CIR system as well as keeping eligibility and capacity information up to date with the CIR, and comply with other governance requirements that would be developed. Mandated participation would not mean that providers would *only* accept cases through the CIR system (and in the DCBF conception, providers would maintain other avenues to intake, including those mandated by other funders) or that they would have to take a case if referred by the CIR. DCBF should also ensure that there is funding for this mandate – that is, that grantee providers have the necessary additional resources to screen and accept referrals from the CIR system and to keep the back-end of the system updated, as this will require provider resources.

The CIR system should also complete outreach to non-grantees who provide legal services (particularly those who serve modest means populations) to encourage their participation or collaboration.

## 10. COLLABORATION WITH NON-LEGAL SERVICES ORGANIZATIONS

**If you work with or for a non-legal services organization, please tell us:**

**What types of non-legal services organizations should the CIR program connect with?**

The CIR program should be widely advertised throughout the following categories of organizations, all of which engage with the public and can help connect District residents with the CIR. Some of these might also be appropriate to consider as potential points of referral for non-legal services:

**Non-Legal Organizations that Currently Partner with Legal Services Organizations:** e.g., Children's National Health Center (MLP with Children's Law Center); Unity Health Center (MLP with Children's Law Center); DC Coalition Against Domestic Violence; DC Survivors and Advocates for Empowerment (DC SAFE) (run the DV Intake Center at DC Courts); and more

<sup>2</sup> There could be different requirements or considerations for any law school clinics receiving DCBF funds given the unique functioning of clinics, with limited times during the year when intakes may open, case acceptance criteria may be directed by pedagogical concerns, and some callers may not be appropriate for or feel comfortable with student attorneys.

**Social Services Providers:** organizations providing assistance with case management; domestic violence supports; access to food, employment, other services

**Housing Providers and/or Tenants Rights Groups:** case management staff at individual programs and shelters; tenant and other comparable coalitions

**Schools:** particularly social work or parent liaison staff

**Faith Community:** going through entities like the Washington Interfaith Council; also individually

**Medical, Public Health Entities, and Health Associations:** MCOs; community health clinics; social work and/or case management staff at larger health systems; health associations such as the DC Behavioral Health Association, DC Hospital Association, DC Primary Care Association

**Courts and Tribunals:** DC Courts (DC Court of Appeals and DC Superior Court); DC Office of Administrative Hearings; DC Office of Human Rights

**Other Government entities:** District agencies; DC Office of the Attorney General (particularly those Divisions that interact with DV, consumer protection, civil system more generally, etc.); DC Council (particularly constituent services offices); ANCs

**Other Legal Leaders:** Pro bono attorneys (Association of Pro Bono Counsel, DC Chapter; individual law firms; DC and Federal Government Pro Bono Program, etc.); D.C. Bar; Washington Council of Lawyers

**How can the CIR most effectively reach and serve people in your client population?**

In addition to the concepts outlined above with respect to reaching and serving the client population, the launch of the CIR should incorporate training for non-legal services professionals on how to flag legal issues, when and how to refer individuals to the CIR, and a demonstration of why going through CIR is both a trusted and best way to access legal help. This training should complement other community engagement and outreach activities, ones that the Commission hopes to advance in the future through its *Justice for All* effort.

**How can referrals to the CIR be integrated within your organization's processes? What would your staff need to integrate CIR referrals into their work?**

See above.

**In your opinion, what are the biggest barriers to accessing legal services that your clients face? How might the CIR remove or address these barriers?**

The Commission's *Delivering Justice* report extensively examined and details barriers to accessing legal services. District residents facing additional barriers to access to legal services in D.C. include: veterans, the homeless, the elderly, individuals with disabilities, limited English proficient individuals, returning citizens, gender expansive individuals, survivors of intimate partner violence and sexual assault, and illiterate or low-literate individuals. Self-identification (or non-identification) of legal problems is

another, if not a primary, barrier. This makes the CIR coordination with other community stakeholders so essential.

These populations may face additional barriers due to limited mobility, decreased physical and mental health capacity, lack of internet access and limited ability to access resources through the internet, inability to recognize legal needs, language, fears of engaging with the justice system, incarceration, diminished access to information, complex needs, and lack of training on the part of LSPs and other professionals to recognize certain issues. (*Delivering Justice* at 21-24)

*Delivering Justice* also indicates that, organizations have trouble connecting individuals with legal services because “(1) organizations cannot take any more clients (76%); (2) clients cannot find providers to take on their specific issues (59%); (3) clients do not know who to call (18%); and (4) providers do not return calls (18%).” (*Id.* at 25). While nearly 85% of community-based organizations had partnerships or relationships with legal services providers, 48% of those organizations were only “somewhat” aware of income, eligibility criteria, and where providers were geographically located. 24% of organizations were “not at all” familiar with the existence of resource centers, and 36% were only “somewhat” familiar with them. (*Id.* at 25),

The *Community Listening Project* found that when survey participants sought help for their issues from someone other than a family or friend, churches or other religious organizations, community groups, social workers or counselors, D.C. government agencies, and shelters were the primary sources to which they turned. ([Community Listening Project Report](#) at 29) When survey participants sought a lawyer to obtain legal help, they typically asked for a referral from a friend, “but others found a lawyer through a court-based resource center, a “know-your-rights” clinic, or a referral by a court, a social worker, the police, or medical personnel.” (*Id.* at 30) Cost kept the majority of those who sought but did not find a lawyer from finding one, and cost, real or perceived, could have kept other individuals from even looking for legal assistance. (*Id.* at 30).

## 11. COMMUNITY MEMBER INPUT AND OUTREACH

**Please tell us:**

**How might your organization help us gather community member input? Are there particular population groups that you would recommend us reaching for feedback?**

User input should be solicited generally from non-court involved people, and people who are court-involved but are not connected to legal services; more specific communities whose unique perspectives should be considered include elders, immigrant communities, limited-English proficient communities, people with disabilities, and people experiencing homelessness. Outreach to these particular populations should elicit feedback on issues of accessibility of a coordinated intake and referral system (with the outreach to elicit the feedback itself also needing to be accessible).

Current clients of legal service providers can also provide perspective on their experience of getting legal help and their feedback about the process and possible improvements that they would find useful.

Outreach should be targeted through partnerships with trusted community providers, not exclusively through a general advertising campaign. Medical clinics and medical-legal partnerships, non-profits that target economic and community development, and public library partnerships could be useful. DCBF should also ensure input from immigrants and non-English proficient communities, from people with disabilities, and the elderly, all who may especially have input as to accessibility needs for a CIR system. Areas where potential clients may be waiting, such as at ESA Service Centers and Social Security Offices may also be useful and some organizations have experience conducting pop-up type interviews in these settings.

Court-based self-help centers (when they reopen for in-person services, or through organizations staffing remote resource centers), legal services organizations with established Community Advisory Councils or groups, and other existing networks (such as the Victim Assistance Network and Washington Interfaith Network) could also be potential partners for reaching end-user populations for feedback and user testing.

**How should the CIR system be advertised? What do you see as key things to include in the messaging?**

The CIR system should be advertised and promoted as the primary entry point to legal services for free or reduced cost legal services in the District. Outreach for feedback and testing throughout the development of the system should be targeted and done through trusted community providers. See the list above for those to whom these efforts should be targeted.

**If you work with or for a legal services organization, how can your organization help support the CIR outreach to ensure that it is comprehensive?**

The Commission is in a position to facilitate contacts and connections with potential partner organizations as well as with potential sources of volunteers to conduct pop-up interviews and other assistance with gathering user feedback, such as law students and pro bono attorneys or support staff. The Commission is also invested in providing strategic guidance and support to the CIR effort, as it has been over these past months. We are grateful for the opportunity to be thought partners with DCBF in the development of this critical justice resource.

**What outreach lessons from your organization can you offer that will help the CIR outreach be as effective as possible, particularly in reaching communities that are not already existing or past legal services clients?**

We would recommend “lessons learned” both from the *Community Listening Project* and in developing our *Delivering Justice* report. The *Community Listening Project* used focus groups, which were hosted by members of the DC Consortium of Legal Services Providers who agreed to recruit participants from their client populations. Each organization was

provided training to ensure consistency between the focus groups. The *Community Listening Project* also developed a survey tool, and used a focus group to develop both the tool and to generate ideas about where it should be administered in the community – suggestions are available at [The Community Listening Project Report \(April 2016\), Appendix I, pg. 59](#). The *Community Listening Project* also relied on “snowballing” for interviews – recruiting, training and compensating volunteers to identify a certain number of survey participants and to administer the survey to them.

The Commission’s 2019 report, *Delivering Justice*, which examined the civil justice crisis in the District, also sent surveys that were sent to legal services providers, law schools, and community-based organizations. A list of those organizations that returned surveys can be found in Appendix C of the report, as well as copies of the surveys. The report also notes that in response to survey questions about effective outreach for those without access to technology, “[s]everal organizations stressed the importance of convenience for their clients and employed various strategies to improve accessibility, including locating intake at community centers and libraries (e.g., NLSP); creating a mobile intake unit (e.g., The Washington Legal Clinic for the Homeless (“WLCH”); and initiating intake online (e.g., NLSP).” (*Delivering Justice* at 45)

In partnership with community providers, DCBF should be explicit about the time and input being asked from providers, and mindful of the resources that will need to be provided to allow the providers to provide this assistance while also maintaining their core missions.

**How can the CIR ensure that it is increasing access for all DC residents in need of civil legal aid, even those without ready access to technology?**

Early and frequent opportunities for user feedback and testing, including about preferred means of access to a system, is crucial for this system, as will be multiple ways of accessing it (online and mobile-friendly formats, by phone call, future possibility of in-person entry to system noted in the DCBF Request for Feedback narrative) to account for different technology capacities among the target population.

**12. CHALLENGES**

**From your organization's perspective,**

**What would be the greatest challenges to implementing the CIR program in DC?**

The greatest challenge will be the sheer number of legal services providers in the District and the associated challenges of organizing this information, communicating and coordinating with that number of organizations, understanding their interactions, and building this into the design and governance of the system. But it is important to remember that these challenges already exist and currently present real access to justice barriers to District residents. In some ways, the sheer number of legal services organizations is exactly why a CIR system is so necessary here in the District, when the burden of the complexity of the system falls disproportionately on the user. The CIR has the potential to ease barriers for all stakeholders of course, but most especially users. Moving towards centralization

could also promote culture change and spark future efforts to consolidate or organize the work of myriad organizations so that the CIR system has the dual purpose of both making navigating the system easier while actually making the system simpler. Simplifying the user experience should be the north star of this effort, knowing that these challenges can be surmounted with the resources, skill, and shared values of our District community.

**What will be needed to surmount these challenges?**

The Commission is uniquely situated to champion the CIR system and to help facilitate many of the important discussions between stakeholders that will need to take place throughout development and implementation of the system.

Given the effort that will need to be directed towards any CIR effort, DCBF should be ambitious in its plan, and upfront about these ambitions even as they solicit feedback throughout the design process. It is worth building a system that is ambitious and guided by best practices at the outset, when there is community enthusiasm, rather than trying to build appropriate supports for the system piecemeal later.

Financial resources to support the work and development of the system itself will be crucial. So too will be compensation for legal services providers for the work they put into developing, adopting, and eventually participating in the new system. Directing appropriate resources for early, frequent, and continued user testing are also necessary, as well as being respectful of the asks made to non-legal services providers who assist with gathering this user input and promoting the system to their users, and providing appropriate resources to cover these asks.

**13. BENEFITS AND OPPORTUNITIES**

**From your organization's perspective,**

**What would be the greatest benefits of implementing the CIR program in DC?**

A CIR system will make it significantly easier to access legal assistance in the District for end users and the community partners referring end users to legal services, particularly if the system is built with triage and legal advice components. Accessing help could become more efficient, less frustrating, and less traumatizing for users. Easing the burden of navigating the web of District legal services providers in order to get services is a significant benefit on its own, but we urge DCBF to be ambitious and use this opportunity to expand access to justice beyond linking people more efficiently to legal representation.

Additional benefits could include deepening community relationships and trust between legal services providers and community-based organizations by giving community providers an easier route to help their clients find legal services; avoiding duplication of resources by multiple legal services providers independently maintaining their own lists of other legal services providers and their eligibility criteria for their own client referrals; providing more space for legal services providers to identify areas of need and engage in systemic advocacy to address the conditions that underlie legal needs and identify service

gaps through data gathering and analysis; and better integrate pro bono programs into the work of the legal services community.

**What would be the most critical indicators of success? How would you know that the CIR program was successful?**

Other coordinated triage and intake programs have evaluated success around positive user feedback, impact on reducing intake call time and increasing eligible referrals for legal services providers, and quantifying services provided.

For example, in Washington, the Northwest Justice Project (Northwest Justice Project, [CLEAR Online Final Report LSC TIG #9558](#), May 10, 2012) tracked the number of people using the application, when it was being used, means of contacting (the system is available both online and to call in, though certain areas of legal need receive priority), percentage of clients with priority legal needs served before and after implementation of system, and call-back response time. CLEAR reported success as data showed a significant increase in the number of eviction and benefits cases handled, reduced number of ineligible callers (they were able to use the online system and learn they were not likely not eligible – though ineligible users still receive legal information), and that 100% of clients with high priority cases who requested (and were eligible for) callbacks received one within 48 hours.

The Michigan Advocacy Program’s evaluation of their statewide online triage portal centered on collecting use data, in addition to survey and descriptive data focused on user feedback – how easy to use and helpful they found the portal, if they would recommend it to a friend, which options they would use, if they would use the portal again, if the system had information and referrals that met the user’s legal problem, and general requests for feedback and other suggestions, among other user-focused questions. Survey data was also used to measure if programs were seeing an increase in the appropriateness of clients coming for intake since the system launch and time savings for intakes, and general feedback. ([TIG Final Evaluation Report](#), Michigan Advocacy Program, February 21, 2019).

Other indicators of success could include improved efficiency in legal services providers allocation of resources currently committed to intake. Another would be if users were able to access help earlier in their legal case through the system. The system should also monitor drop-off rates (the percentage of callers who call the CIR but are not able to be reached by providers or who are reached but do not complete a full intake) carefully as part of ongoing monitoring and improvement of the system. Having a central hub for information and referral could also increase users’ reports of feeling they had a fair shot in their legal matter, which increases confidence in the legal system generally.

**What benefits or opportunities might exist for your organization as a result of the CIR system implementation?**

The CIR has the potential to provide a wealth of information on civil legal needs in the District. Centralizing information about needs presented and ability to serve those needs – even if not inclusive of all intake functions – could provide valuable data to the Commission and to others about the need presented and where to invest resources. For example, if there are consistently no providers with capacity in certain issue areas, these are issue

areas that may need additional financial resources or there may be a need to rethink practice models – for example, how could a brief advice line or legal services providers be providing more robust limited scope services to meet the needs of more people.

The CIR would also create a central inventory of contact information and eligibility criteria of legal services providers in the District. Commission staff has worked on compiling a simplified list version of this information, as many providers and external stakeholders request this information. Having a more public and consolidated document or electronic platform, with opportunity for real time updates, is far preferable. Long-term, the system could have even greater benefits in terms of information and data sharing about community need, how legal services are delivered and in what way, etc.

#### 14. OTHER FEEDBACK

**From your organization's perspective,**

**Any additional feedback, ideas, or considerations?**

As we have articulated throughout our response, we are at a unique moment where we have the need and enthusiasm to build robust, comprehensive platforms that would significantly increase access to justice in the District. We may not have another opportunity when there is so much community enthusiasm for change, driven by the gaps and needs exposed by the COVID-19 pandemic, coupled with unprecedented funding for civil legal services in the District. DCBF should take this moment to be ambitious in its plan and build its platforms in line with best practices at every step to ensure that this unprecedented effort results in a system that provides the maximum amount of help to District residents.

**The Commission is grateful to DCBF for its leadership in moving this project forward in the District, and stand ready to support the effort in any way it can.**

## Best Practices for Coordinated Intake, Triage, and Referral

### Introduction

This paper emerged out of my work with the DC Access to Justice Commission’s working group on intake, triage, and referral. I begin with background information on why the Commission is engaged in this work. Next, I define intake, triage, and referral and discuss why these components of service delivery—particularly when coordinated among providers—are crucial in efforts to address the legal needs of low-income people in a given jurisdiction. I then provide several examples of states (Florida, Illinois, Massachusetts, Michigan, Minnesota, and Washington) with some form of coordinated intake, triage, and/or referral. I conclude with thoughts on how the District can utilize lessons learned in other jurisdictions to design an effective coordinated intake, triage, and referral system.

### Background

In 2019, the DC Access to Justice Commission received funding from the DC Bar Foundation (“DCBF”) and the Meyer Foundation to engage in a process modeled off the Justice for All (“JFA”) initiative developed by the National Center for State Courts and other national access to justice stakeholders. The JFA initiative aims to, “offer a sustainable framework for building a 100% access ecosystem through a strategic planning approach.”<sup>1</sup> One component of the JFA initiative is triage and referral, which is defined as “how providers (including courts, civil legal aid and pro bono providers and trusted intermediaries) assess and sort inquiries to best allocate resources and get people the legal help they need, when they need it and in a format they can use.”<sup>2</sup> The DC legal

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<sup>1</sup> National Center for State Courts, [Justice for All Initiative Guidance Materials](#) (2019), 4; see also [Justice for All Guidance Materials page](#).

<sup>2</sup> *Id.* at 30.

services community, as part of its own JFA process, is committed to addressing and improving this component of service delivery in the District.

In its 2019 report, [Delivering Justice: Addressing Civil Legal Needs in the District of Columbia](#), the DC Access to Justice Commission recognized that:

Individuals seeking legal services may find themselves making contact with several legal services providers and undergoing multiple intake processes in various locations before securing assistance, or worse, learning that no assistance is available to them. Even providers offering referrals struggle at times to know where to send individuals seeking services at any given moment. This creates a disincentive for seeking legal assistance.<sup>3</sup>

The recognition of these shortcomings in the District’s civil legal services intake and referral infrastructure has led to consensus among local stakeholders on the “need to identify more efficient ways to connect District residents with legal services providers... [and to] pursue approaches to improve the experience of referral and intake through coordination and integration among our large ecosystem of providers and community stakeholders.”<sup>4</sup> To that end, in early 2021, the Access to Justice Commission established a working group on intake, triage, and referral. The working group has been tasked with providing advisory support to the DCBF, which is currently working on designing and implementing a new coordinated intake and referral system. The DCBF’s plan is to create, “a single phone number that people can call to get legal help and a website where people can apply online for legal help too.”<sup>5</sup> This paper seeks to offer lessons learned from other jurisdictions to support the advisory efforts of the Commission’s working group.

### **An Overview of Intake, Triage, and Referral**

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<sup>3</sup> DC Access to Justice Commission, [Delivering Justice: Addressing Civil Legal Needs in the District of Columbia](#) (2019), 154.

<sup>4</sup> *Id.*

<sup>5</sup> DC Bar Foundation, “Support Through Coordinated Intake,” <https://www.dcbfoundation.org/post/support-through-coordinated-intake> (April 27, 2021).

Before I offer examples of coordinated intake, triage, and referral, I first want to define each of these concepts, demonstrate how and why they are interconnected, and discuss their importance to the delivery of civil legal services.

### **Intake**

Intake refers to the process through which legal services providers screen and assess applicants seeking legal assistance. Different legal services providers have different models of doing this work, ranging from in-person intake (conducted at an organization's office or at remote locations such as a courthouse, domestic violence shelter, doctor's office, among many other examples) to telephone intake and online intake. In-person and telephone intakes are often conducted on a limited schedule (i.e., on specific days at specific times), though some legal services providers conduct in-person and telephone intake Monday through Friday, 9 AM to 5 PM. Some providers offer a telephone intake voicemail system, through which applicants leave a message and have their calls returned the next time the provider is open for intake. Other providers have a recorded message directing potential clients to call back during specified intake hours.

Online intake, on the other hand, is designed to be available 24/7 so that individuals can apply for legal help when even when phone lines or offices are closed. Online intake can also “reduce the amount of time intake staff spend on the phone or entering data into the case management system.”<sup>6</sup> In a typical online intake process, an applicant will submit information about their household, income, and legal problem through a form on a provider's website. Almost always, the information entered by the applicant is automatically transferred into the provider's case

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<sup>6</sup> Dan Rivas, Angela Tripp, and Chris Bernard, [Online Triage and Intake: A Toolkit for Legal Aid Organizations](#) (2018), 5.

management system.) Subsequently, intake staff will verify the applicant’s eligibility, run a conflict check, and contact the prospective client for additional information, usually within 24-48 hours.

While each form of intake offers a different point of entry to potential clients, all forms of intake share similar goals. The Legal Services Corporation (“LSC”) states, “It is important that the organization's intake system be welcoming to applicants, foster confidence in services, accurately identify the applicant's legal needs, and promptly determine the assistance to be provided.”<sup>7</sup> And, importantly, different forms of intake all work together to meet these goals. In its [Standards for the Provision of Civil Legal Aid](#), the American Bar Association Standing Committee on Legal Aid and Indigent Defense states:

Different types of intake process—telephonic, walk-in, or online—will impact differently on different persons in need of help. For many isolated persons, telephone intake may be the only viable option to seek help. For others, face to face contact may be very important, and for some cultures may be essential. Others may work hours that make any contact during normal business hours extremely difficult. A provider should strive, therefore, to offer multiple avenues for persons to seek assistance, or should actively participate in a delivery system that provides such opportunities.<sup>8</sup>

As the JFA materials on triage and referrals suggest, jurisdictions should strive to think about intake through a “no wrong door” approach,<sup>9</sup> connecting individuals to the legal help they need through any way they choose or happen to enter the system.

## **Triage**

The term “triage” is adopted from the medical context, where it refers to the process of

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<sup>7</sup> Legal Services Corporation, “Client Access & Intake,” <https://www.lsc.gov/grants-grantee-resources/resources-topic-type/client-access-intake>.

<sup>8</sup> American Bar Association Standing Committee on Legal Aid and Indigent Defense, “Standard 4.1 on Provider's Intake System,” *Standards for the Provision of Civil Legal Aid*, [https://www.americanbar.org/groups/legal\\_aid\\_indigent\\_defense/resource\\_center\\_for\\_access\\_to\\_justice/standards-and-policy/standards-for-the-provision-of-civil-legal-aid/standard-4-1-on-providers-intake-system/](https://www.americanbar.org/groups/legal_aid_indigent_defense/resource_center_for_access_to_justice/standards-and-policy/standards-for-the-provision-of-civil-legal-aid/standard-4-1-on-providers-intake-system/) (2006).

<sup>9</sup> *Justice for All Initiative Guidance Materials*, *supra* note 1, at 6.

assessing a patient’s conditions and identifying and prioritizing treatments. In the legal aid context, triage refers to “assess[ing] what services each individual and situation needs”<sup>10</sup> and providing or referring to appropriate legal and/or non-legal help. Given the range and number of providers in DC, effective triaging of individuals is both important and challenging.

While triage in the legal aid context can and should include legal needs assessments (sometimes referred to as “legal checkups”) conducted by staff at both legal and non-legal services providers, most access to justice advocates use the term triage to refer to “a website or website module that uses a series of questions to guide users to individualized legal information.”<sup>11</sup> Online triage tools are automated, relying on coding and logic trees on the backend of a website to direct applicants to potential sources of help. An LSC funded toolkit on online triage identifies that while “[t]here are many different versions,[ ]generally online triage creates opportunities for users to sort themselves by demographics, legal issue, eligibility for services, and urgency, and then receive referrals to self-help or direct services from an attorney or other professional.” The toolkit identifies the following as potential functions of an online triage system:

- A centralized web portal that serves a defined geographic region.
- Navigation to self-help information and online forms.
- Referrals to organizations that are particularly suited to help the user.
- Preliminary legal aid eligibility screening based on factors such as geography or income.
- A path to an intake system for eligible users.
- Prioritization of cases based on urgency or the specialization of a referral partner.
- Diversion of low-priority cases away from hotlines and other intake systems.<sup>12</sup>

The most successful triage systems, many of which are discussed later in this paper, offer *all* of these functions and more. And importantly, as identified above, a key component of many online triage systems is providing for a seamless transition to online intake, through which eligible applicants can

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<sup>10</sup> *Justice for All Initiative Guidance Materials*, *supra* note 1, at 31.

<sup>11</sup> *Online Triage and Intake*, *supra* note 6, at 4.

<sup>12</sup> *Id.*

apply for legal help from an organization that meets the needs they identified in the triage tool.

## **Referral**

Though their purpose is more obvious, I will briefly discuss referrals in the legal aid context to underscore their significance. Most legal services providers maintain robust lists of other providers in the area who can help with the legal and non-legal needs of their client community. When an applicant or a client identifies a need that a provider cannot meet (oftentimes identified during an intake process), that provider will consult their referral list to direct the individual to suitable help. While these referrals sometimes involve a “warm hand-off” (i.e., the provider makes the initial connection to another provider for the individual), most of the time, the applicant or client is responsible for following up with the referred provider on their own. There are two issues in particular that can arise with legal services referrals. First, if providers do not regularly update their referral lists, they may be directing an individual to a provider that no longer provides the services the individual is seeking. Second, without doing a warm hand-off, it can be difficult to know if an organization has the staff capacity to meet the needs of the individual being referred. Both issues can lead to needy individuals wasting their time and not securing help. These issues can also lead to an erosion of trust in providers. Thus, it is crucial for legal services providers to be thoughtful about their referral process and to ensure that referrals are accurate and helpful. One way of doing so, as will be discussed later this paper, is through online triage systems.

These three components of legal services delivery—**intake**, **triage**, and **referral**—can be used independently of each other to bring potential clients into the system, but they work best in conjunction with one another. By combining in-person and telephone assistance with automated online triage and intake, providers can: serve greater numbers of people; more quickly connect

needy individuals to help; provide immediate help when offices or phone lines are closed; provide help to individuals who may not be ready to speak with someone or who may have access issues such as a lack of transportation or phone minutes; free up staff-time; provide individuals with more holistic help and options for how they want to address their legal issues.<sup>13</sup> These outcomes are more likely and more pronounced when providers coordinate on intake, triage, and referral—particularly in a jurisdiction like DC that has a large numbers of providers with different eligibility requirements, services, and intake methods.

### **Examples of Coordinated Intake, Triage, and Referral in Other Jurisdictions**

Below, I provide overviews of coordinated intake, triage, and/or referral systems in other jurisdictions—Florida, Illinois, Massachusetts, Michigan, Minnesota, and Washington. I conducted hour-long interviews with key staff members involved in the administration of each of these states' coordinated systems. This paper focuses on the systems most frequently pointed to by individuals who work on legal aid technology. As will be made clear below, none of the identified systems are perfect, and everyone I spoke with expressed some frustrations with their system. However, all of the individuals I spoke with also felt that their client community was better off with a coordinated system in place than it was prior to the establishment of a coordinated system. In addition, there are key lessons to take away from the successes and setbacks of each of these jurisdictions that I will highlight and discuss throughout the remainder of this paper.

#### **Florida - Coordinated Statewide Online Intake**

In 2014, Legal Services of Greater Miami received an LSC Technology Initiative Grant to begin work on the development and implementation of a single online intake system for legal services

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<sup>13</sup> *Id.* at 5.

programs in Florida with the goal of providing low-income Floridians with an additional, uncomplicated point of access for legal help. The system went live in 2017 and has undergone continued enhancements and expansions since. In 2018, I worked with Ilenia Sánchez-Bryson, Chief Information Officer of Legal Services of Greater Miami and overseer of Florida's coordinated online intake, to highlight the system at an LSC best practices forum. Ilenia and I recently reconnected so I could learn about updates to the system since then.

When the system first launched in 2017, it included just three of the seven LSC funded organizations in the state (Legal Services of Greater Miami, Bay Area Legal Services, and Three Rivers Legal Services). Ilenia explained that starting small was a good choice given the initial complexity involved with establishing a coordinated system. She also suggested that starting with just a few programs allowed for a demonstration of success that helped secure buy-in from more skeptical organizations. Since 2017, Legal Services of Greater Miami received a second Technology Initiative Grant from LSC to expand the system. Now, all seven LSC funded programs have joined on to the online intake system, and Ilenia is currently working to add two non-LSC funded organizations to the system. The online intake application can be accessed through each organization's website as well as the statewide legal help website ([FloridaLawHelp.org](https://www.floridalawhelp.org)). The intake system also links users to legal information, including self-help resources, forms, videos, and legal service providers' contact information. The system is available in English, Spanish, and Creole.

Florida's coordinated online intake system lives on LegalServer. Notably, all of the providers who participate in coordinated online intake use LegalServer as their case management systems, which Ilenia explained helped to make the development of the system significantly easier. Intakes are routed to the proper program based on the zip code that applicants enter when completing the intake form. On the back-end of LegalServer, providers who participate in the coordinated online intake system are able to set limits on the number and types of cases accepted to prevent the

organization from receiving an influx of cases that it cannot handle. More information about the technical aspects of the system as well as screenshots of the system are available in the [LSC Technology Initiative Grant report on Florida’s coordinated online intake system](#).

Ilenia stressed the importance of doing user testing *early* and *often*. She pointed to several examples of applicants getting tripped up on the online intake form and giving up on completing the form. These examples included an honorific field that many applicants were confused by and asset-related questions that led to applicants erroneously screening themselves out of services. While seemingly small, these issues were actually significantly impacting the utility of the tool for individuals eligible for legal services, and they were only detected (and then corrected) through a rigorous user testing process.

### **Illinois – CARPLS and Illinois Legal Aid Online**

Of all of the programs I looked at, I was most excited and impressed by the two programs I spoke with in Illinois: CARPLS (formerly known as the Coordinated Advice and Referral Program for Legal Services) and Illinois Legal Aid Online (“ILAO”). CARPLS runs a free legal advice and referral hotline for residents below 350% of the federal poverty line in Cook County (Illinois’s most populous county and home of Chicago). ILAO runs the statewide legal help website and a coordinated online triage and intake system. Both of these programs are recognized nationally as leaders in their respective fields—legal advice hotlines (CARPLS) and legal self-help sites (ILAO).

Launched in 1993, **CARPLS** was one of the first legal hotlines in the country. I spoke with Al Schwartz, Executive Director of CARPLS, to learn about the organization’s work. CARPLS was born out of a study by Illinois’s IOLTA funder that identified (1) difficulties experienced by potential clients in accessing needed services and (2) that many legal problems could be resolved with advice or brief services. CARPLS was established to address both of these issues by combining a centralized point of

intake and referral for Cook County with advice and brief services—all delivered over the phone. The program has grown exponentially since it first launched and now employs 36 attorneys and eight paralegals. In addition to its main line, which covers *any and all* types of legal problems, CARPLS also operates several coordinated hotlines, including an eviction hotline, an early resolution hotline, a cannabis expungement hotline, and an armed forces and veterans hotline. These hotlines each serve as telephonic points of access to networks of legal services providers in Cook County who work on the specified issues. CARPLS is responsible for intake and referral, and other providers help provide brief or extended services. Notably, some of these coordinated hotlines have over 40 participating legal services organizations. When applicants call in to the “wrong” hotline number, they are simply transferred to the main hotline queue and reconnected with another attorney within minutes. CARPLS also has a chatbot on its website that can direct individuals to call one on the hotlines, link to self-help information on ILAO, and provide contact information for referrals.

CARPLS is opened for calls Monday through Friday. It has morning and afternoon shifts every day and evening shifts two nights per week. CARPLS receives about 120,000 phone calls each year, and the average wait time is less than 20 minutes. About 25% of callers hang up before being connected with someone, and 5% are denied due to capacity. A small number of callers are rejected due to conflicts, which AI explained is a growing concern given that the organization has now served almost a million people, all of whom have records in their case management system. Of the callers who connect with an attorney, CARPLS attorneys resolve about 85% of matters (about 63,000 cases) in-house through advice or brief services. CARPLS refers out 15% of matters (about 11,000 cases) for extended representation to a network of over 50 providers in the Cook County area. Unlike many legal helplines, CARPLS has always had attorneys on the front-end answering calls. AI explained that placing attorneys on the front-end allows for the best triaging, provides for more expeditious intakes (most intakes take about five minutes), and eliminates the need for clients to repeat their story

multiple times. CARPLS's attorneys (and paralegals) are all generalists who are cross-trained in different areas of the law and in the work of the different hotlines run by the program. Paralegals are responsible for returning voicemails and placing follow-up calls for additional information.

CARPLS runs on two software programs: inContact, a call center software, and Salesforce, which hosts CARPLS's case management and referral system. Al explained to me that both of these software programs are crucial to the organization's success. Salesforce, which CARPLS heavily customized to meet its needs, plays a key role in facilitating fast and accurate referrals. Attorneys performing intake for clients who need to be referred out for extended representation are able to filter programs based on a client's geographic area, income, problem code (the system contains 3000 unique problem codes), demographic information, and language spoken. Once an attorney has narrowed the list of potential organizations down, they can click on each program to see more detailed information about the program, including its recent case acceptance rate. Al explained, however, that after the initial filtering of potential referrals, most attorneys quickly know which providers they should refer to based on experience. Attorneys can create a referral through the Salesforce system, which triggers an email notification to be sent to the referred provider. This email contains a link to the client's Salesforce record.

Each partner-provider has a limited license for Salesforce that allows them to access referrals, keep their organization's filters (i.e., case acceptance criteria) up-to-date, open or close referrals if necessary, and chat with attorneys from CARPLS to get more information. Once a provider accepts a referral (which they can only do after first running a conflict check), it gains access to the client's record, including contact information, demographic information, household composition, household income, a problem code, a description of the case, and a referral note. While some providers manually transfer this information to its own case management system, others (specifically those using LegalServer) use a plug-in to transfer the information directly into their case

management system. After reviewing CARPLS's initial intake notes, the referred provider then follows up with the applicant to get additional information about the case. All providers participating in the referral network are required to report back to CARPLS on the outcome of the referral (i.e., if the provider is accepting or rejecting the referral, and if accepting, for what type of service.). If a referral ends up being rejected, CARPLS attempts to place the case with other providers.

I asked AI if there were any pain points with the referral network. He responded with two issues (and solutions). First, AI explained that Salesforce flags when programs begin rejecting a significant number of cases. When this happens, CARPLS reaches out to the organization to learn why and updates the program's information on Salesforce accordingly. Second, even with the best of efforts, AI mentioned that it can be difficult to ensure that referral information for more than fifty organizations is always up-to-date without a point person on staff. To that end, CARPLS is planning to hire someone who will focus their time exclusively on partner relations.

As mentioned, **ILAO** ([Illinois Legal Aid Online](#)) runs Illinois's statewide legal help website. It is considered the gold standard of legal help websites by folks from across the national access to justice community. ILAO's website is rich with self-help content. Its "Form Library" provides guided assistance to help users generate 80 different types of legal documents. In 2020, more than 40,000 personalized legal documents were created using these tools. ILAO also runs a Drupal-based coordinated online triage and intake system, identified on its site with a big button that says, "Get Legal Help." ILAO has approximately 3.5 million visits per year, with 80,000 visitors completing the triage tool about 10,000 visitors completing online intake. I had an in-depth discussion about the system with Mike Rush, ILAO's Online Intake and Triage System Product Manager.

When a user first clicks through to ILAO's coordinated online triage and intake system, they are first prompted to type out their legal problem in a specified box. The website uses built-in logic to translate the user's problem into a specified legal problem and continue through a series of

questions related to eligibility and their legal issue. Depending on the type of help a user is seeking (i.e., legal information or a lawyer), the user will either be directed to a customized list of self-help resources or to online intake for one of ten different legal service provider partners currently participating in the system. (Some users may also be directed to a page with phone number referrals if the issue they identified is not served by one of the programs participating in the coordinated online intake system or if their income is too high to meet eligibility guidelines.)

The 12 programs that participate in the online intake and triage system include both LSC funded and non-LSC funded organizations, and they have overlapping service areas. An algorithm on the back-end of the website routes users to the proper online intake based on geographic area, the proximity of a provider's office to the user's home, and the provider's capacity (which is updated by each provider on the back-end of the system). Ultimately, the information collected in the system—including name, contact information, consent to text message, household size and income, and case information—is transferred via LegalServer. A client's information is protected by the system until the organization referred to completes a conflict check. Two other highlights of ILAO's online intake and triage system include provider-specific URLs that connect people directly to triage and intake for a specific organization and the ability for users to schedule follow-up calls with providers through the system. Future upgrades for the system include introducing artificial intelligence into the system and allowing for system intakes via text message, Facebook Messenger, and an automated phone system that records individuals' responses. Like other jurisdictions, ILAO's work is driven by extensive user feedback and testing.

In terms of governance, Mike and his supervisor work together to oversee the system, with Mike spending all of his time focused on the system and his supervisor spending about 20% of her time on the system. Mike meets with all partners individually once per month to ensure everything is working well, and Mike and his supervisor host a meeting of all of the participating providers

quarterly. While decisions are generally consensus-driven, ILAO ultimately makes the final call when conflicts arise. Mike's position is funded entirely through Illinois IOLTA funds.

### **Massachusetts - Coordinated Intake for Eastern Massachusetts and the Legal Resource Finder**

Massachusetts has two projects that I highlight below—coordinated telephone intake for the greater-Boston area run by the Volunteer Lawyers Program of Boston (“Boston VLP”) and the Massachusetts Legal Resource Finder, an online triage tool developed by Community Legal Aid, an LSC funded organization that serves central and western Massachusetts, and now managed by the Massachusetts Law Reform Institute. These projects are smaller in scope than others identified in this paper, but there are still helpful lessons to be gleaned from their development and implementation.

I spoke with Joanna Allison, Executive Director of the Boston VLP, about coordinated phone intake in eastern Massachusetts. This phone intake system serves as a central point of intake for just two programs—Greater Boston Legal Services (which also has its own intake line) and the Boston VLP (the LSC funded provider for the Boston metropolitan area). It is funded with LSC funding and IOLTA funds distributed by the Boston Bar Association. This coordinated intake line used to be operated by the Legal Advocacy and Resource Center, but the Boston VLP took over operations over the past decade in an effort to consolidate resources. The VLP had a call center that closed its physical location during the pandemic, and Joanna explained that it will likely continue to operate on a fully remote basis given that staff prefer this structure and it has not interfered with services. The staff for the intake line includes six intake specialists, two AmeriCorps fellows (who also serve as intake specialists), one supervising attorney, and one call center manager. Nine staff attorneys from the Boston VLP also support the intake line on a rotating basis, each providing oversight and on-demand support to intake specialists one or two days per month. The intake line is open three days a week from 9:30 A.M. to 12:30 P.M. and two days per week from 1:30-4:30 P.M. Joanna explained that

there is a desire to expand the hours of availability but that the organization's current staff capacity prevents expansion. The average wait time for the intake line is between 15 and 30 minutes.

In 2019, the eastern Massachusetts coordinated intake line screened 13,000 callers. 7,500 of those called were given immediate information, advice, and/or a referral (i.e., did not result in an LSC case closed). About 4,000 callers ultimately received more in-depth advice, limited representation, or extended representation from the Boston VLP (i.e., resulted in an LSC case closed). And about 1,500 callers were referred to Greater Boston Legal Services for limited or extended representation. Each year, about 75% of the Boston VLP's cases and about 25% of Greater Boston Legal Services' cases come in through the intake line. The Boston VLP and Greater Boston Legal Services coordinate on case acceptance areas, with the programs attempting to provide coverage for case types that the other does not take. For example, Greater Boston Legal Services takes all immigration cases given limitations on the Boston VLP imposed by LSC funding. Where the programs have overlap in case acceptance criteria, Boston VLP will usually take the case unless it is at capacity.

Generally, intake specialists are responsible for both screening and intake as well as the provision of legal information and legal advice. Joanna explained that the intake specialists typically gain enough experience to know what information and advice to convey on their own. When this is the case, they record the information or advice given in LegalServer, the case management system used by the Boston VLP and Greater Boston Legal Services. The rotating staff attorneys mentioned above are then responsible for reviewing these LegalServer records to ensure that intake specialists provided correct information and/or advice. If an error is made, the attorney marks the issue in LegalServer and assigns the intake specialist to call the client back the next day to provide corrected information or advice. When an intake specialist does not know how to handle a call, they text the supervising attorney for the call center and the on-call staff attorney on rotation that day for assistance. When necessary, intake specialists schedule a callback with the applicant. When referring

a case to Greater Boston Legal Services, intake specialists do not complete a full intake; instead, they ask five “deal-breaker” questions identified by Greater Boston Legal Services to ensure eligibility (in terms of income and case type), enter the information in LegalServer, and simply hit a button in LegalServer to complete the referral.

Joanna provided some other useful information about the functioning of the call center. First, she explained that the call center software allows the call center manager and supervising attorney to monitor and join call-lines for quality assurance checks and to intervene when an intake specialist reports that they need assistance. Second, she explained some of the other roles of the intake specialists, who Joanna acknowledged usually only stay on for two to three years. In an effort to prevent burnout and/or boredom among the intake specialists, each is assigned to staff a different monthly project outside of the call center, such as a court-based project. In addition, one intake specialist is tasked with emailing all referral partners every month to ensure that the information in the Boston VLP’s referral guide is up-to-date and accurate, and one intake specialist is tasked with following up on all intakes that come in through the Boston VLP’s online intake system.

Unfortunately, I was unable to connect with the individual who manages the [Massachusetts Legal Resource Finder](#) (“MLRF”), but I included information I gathered about the tool from my time at LSC and from my conversations with Joanna. MLRF is an online Drupal-based triage tool that provides a coordinated point of entry for users to find information and referrals relevant to their particular situation. It launched in 2014 with initial funding coming from an LSC Technology Initiative Grant and is available in English and Spanish. Similar to ILAO’s online triage and intake system, MLRF guides users through a series of questions related to eligibility and their legal problem. Once a user completes the guided questionnaire, they are provided with a customized list of referrals, including links to online intake if a referred program offers it, as well as legal and non-legal information relevant to the issue specified by the user. For example, an income-eligible user of the system who

indicates they have received an eviction notice will be provided with contact information for and links to nearby legal services providers as well as relevant content on MassLegalHelp (the statewide legal help website) and other self-help resources. The triage tool covers 600 different legal problems, provides referrals to all LSC and state-funded legal aid providers in the state as well as some low-bono providers, and links to over 300 webpages with legal information and other self-help resources relevant to a user's identified needs. More information on MLRF is available in the [LSC Technology Initiative Grant report on the project](#).

### **Michigan - Guide to Legal Help**

Michigan's online triage tool, the [Michigan Guide to Legal Help](#) ("Guide"), is frequently pointed to as a model. The Guide was developed through an LSC Technology Initiative Grant to the Michigan Advocacy Program, LSC's grantee in south-central Michigan. Like the other online triage tools identified above, the Guide is Drupal-based and steers users through a series of questions to ultimately provide the user with customized referrals, information, and court forms. The Guide is built into [Michigan Legal Help](#), Michigan's statewide legal help site. The system integrates with coordinated online intake for the state's LSC-funded legal services programs, ensuring a smooth transition for accessing a lawyer. For individuals ineligible for LSC funded services, the Guide provides users with phone numbers for other legal services providers who can assist them with their identified legal problem. One feature unique to the Guide (and one that I am particularly fond of) is that it screens users for eligibility for benefits programs and, when applicable, provides links and information for users to enroll in SNAP, Medicaid, TANF, and other public benefits. On average, users complete the triage process in less than two minutes.

The Guide is built on a logic tree that was developed by Angela Tripp, the designer and director of the Guide. The logic tree allows for users to be directed to the information they need to

help them with their legal problem. The [toolkit on online triage](#) that I mentioned above, which was developed by Angela, includes several suggestions for designing a logic tree as well as template logic trees developed by legal services providers in other jurisdictions. (This toolkit also provides a number of other tips and tools for creating an online triage tool that meets the needs of a given jurisdiction's client community.) Something that Angela shared with me about the design of the Guide's logic tree that is not included in the toolkit is the level of governance required to make the logic tree successful. Angela explained that it was difficult to get some providers to properly narrow down the types of cases that they handle; some providers insisted that they accepted "any and all" case types. Because Angela and her team did not want the Guide to direct users to a program that would not be able to help them, they ultimately made some executive decisions about the logic tree to ensure that users would be steered in the right direction.

Angela and her team conducted a significant amount of user testing both before and after the launch of the Guide, and they continue to solicit feedback on and make improvements to the Guide. More details on this user testing and the triage tool more broadly are available in the [LSC Technology Initiative Grant report on the Guide](#). Also, I want to note that Angela is a fantastic resource for jurisdictions looking for guidance and advice in designing and implementing an online triage tool. Angela volunteered to share her organization's planning materials with stakeholders in the District and to provide support as needed.

While not explored in depth in this paper, Michigan's LSC funded providers also have statewide coordinated telephone intake handled by Lakeshore Legal Aid ("Lakeshore"), LSC's grantee in the Detroit-metro area. The other LSC funded programs in the state are each billed by Lakeshore for this service. Lakeshore's intake line also provides brief advice to folks across the state who qualify for LSC funded services. Depending on the client's zip code, the LSC funded program who would have jurisdiction reports this brief advice as a case closed. While Lakeshore's intake line

does not complete full intakes for non-LSC funded programs, it does provide screening for and referrals to these providers.

### **Minnesota – Centralized Telephone and Online Intake, Triage, and Referral**

Minnesota has been engaged in the development of a centralized telephone and online intake, triage, and referral system for several years now. I spoke with Bridget Gerander, Legal Services Grant Program Manager at the Minnesota Supreme Court, who is overseeing the project. Bridget mentioned early on in our call that she wishes some providers consolidated prior to the start of this project as it would have made the project a lot easier. The project began in 2014 when the state's Legal Services Advisory Committee (LSAC)—a committee of the Minnesota courts that is functionally similar to the D.C. Bar Foundation in that it is responsible for granting appropriated funds to legal services programs across the state—worked with the Mayo Clinic to conduct a process improvement analysis of the user experience of accessing legal services in Minnesota. The report that resulted from this analysis recommended centralized intake, and upon receiving the report, the Minnesota Supreme Court decided to allocate funding to create a centralized intake system for the state. The project has a total budget of \$45 million.

Once the project had funding, Minnesota first hired a consultant to conduct a comprehensive two-year study of how intakes were being done by legal services providers across the state. This study included focus groups with client-eligible individuals from across the state as well as surveys of legal aid staff from every program. The consultant's final report recommendations—all of which the Minnesota Supreme Court decided to adopt—included getting the nine full-service providers from the state on the same case management system (LegalServer) and creating centralized online and telephone intake for these nine providers. Bridget explained that getting all of the full-service providers on LegalServer was actually quite easy as many providers were already on LegalServer, and the providers who were not were happy to receive funds to upgrade to a newer system. Providers

initially pushed back on the idea of a centralized intake system, but the Legal Services Advisory Committee overcame this pushback by making participation in the centralized system a condition of grant funding for these programs.

Minnesota first tackled centralized online intake (and triage). As part of the development of the new online intake system, Minnesota created the Legal Organization Online Network (LOON), a backend directory hosted on [LawHelpMN](#) for all of the participating providers to keep information on their services up-to-date. This upkeep is another condition for state funding. In addition to LOON, Minnesota also created an online triage tool, the [LawHelpMN Guide](#). This tool is Drupal based and is very similar to the other triage tools outlined in this paper. Upon completing the triage tool, users can click to apply for legal help. After answering a few additional questions such as household size, income, and location, eligible users are seamlessly directed to online intake for a legal services provider in their area. The triage system pulls from information in LOON to direct users to the correct provider. The information that users enter into the intake form is automatically uploaded into the relevant provider's LegalServer case management system, and the provider receives a notification each time an applicant completes online intake. Bridget mentioned that her team worked with a consultant to improve the triage tool after noticing from website data that several users dropped off before completing triage. She recommended to plan for continuous system improvements like this.

Development of a statewide centralized phone intake system is still underway. Eventually, there will be one 1-800 number that anyone from the state can call to get connected to the correct legal services provider. Like the online intake system, the centralized phone intake system will only include the nine full service legal services providers in the state, but intake staff will have up-to-date referral information (maintained in LOON) for all providers in the state. When users call in to the centralized phone line, they can either say the name of their town or enter their zip code using the keypad on their phone. Their call is then routed to one of four regional hubs. Each hub will have one

program—the LSC funded program in the region—that is responsible for conducting telephone intake for the entire region and providing referrals for ineligible clients. The intake coordinators at these hubs enter the information into LegalServer and are then able to transfer the information to the correct provider by clicking a button. The receiving provider can then either accept or reject the intake. Policies and procedures for what happens after a provider rejects a case are currently being established. One regional hub is currently piloting the centralized intake system with support for a consultant. Next steps for the rollout include choosing a vendor for the 1-800 number; determining who is responsible for governance (i.e., ensuring consistency, resolving conflicts, and setting expectations for intake staff); and bringing legal advice hotlines that already exist in the state onto the 1-800 number.

Notably, these centralized intake systems do not include the immigration legal services providers or other specialized providers in the state due to some complicated dynamics related to funding. However, many of these providers receive Legal Services Advisory Committee grant funding and are required to keep information up-to-date on LOON as a condition of their grant. Thus, information for these programs is included on LOON, allowing the triage tool to direct users to these providers and allowing intake specialists at regional hubs to access up-to-date information on these providers in order to refer eligible applicants.

### **Washington – Coordinated Legal Education Advice and Referral (CLEAR) Hotline**

Northwest Justice Project has been operating a free telephone intake and referral hotline, CLEAR (Coordinated Legal Education Advice and Referral) since 1996. I spoke with Eva Wescott, an attorney who manages CLEAR, to learn more. The CLEAR hotline serves low-income people from across Washington state except King County (where Seattle is located). King County is served by [Washington 2-1-1](#), which is a central access point for individuals seeking any community resources.

CLEAR is funded almost entirely by state funding sources. The CLEAR hotline is staffed by 20 attorneys (some of whom are part-time) and 13 screeners. Some of these 20 attorneys have areas of specialization, but all of them are generalists. Eva told me that CLEAR is about to hire 20 more screeners—10 permanent screeners and 10 temporary screeners to respond to the expected surge of clients requesting help once the eviction moratorium ends—to help meet the expected increase in demand for services now that Washington state has a right to counsel for tenants facing evictions. Eva also explained that, in response to the new right to counsel for eviction cases, CLEAR is planning to ask partner organizations to lend housing attorneys to help staff the hotline.

CLEAR accepts callers Monday through Friday from 9:15 AM to 12:15 PM. CLEAR receives 300,000 calls per year from 80,000 unique callers, screens about 15,000 callers per year, and provides advice and/or brief service to 10,000 callers per year. The steep drop-off between the number of calls received and the number of calls screened stems primarily from folks hanging up before being connected with a screener. When an individual calls in, they are placed in a hold queue until they are connected with a screener. The screeners ask questions about financial eligibility and the caller's legal problem. Eva said that the latter are written by attorneys and are fairly robust. When callers are over-income or if the legal issue identified is not one handled by Northwest Justice Project, the screeners will refer the caller out to another organization. Attorneys review all legal issue-based rejections, and when an attorney finds that a rejected caller's issue can be handled by Northwest Justice Project, a screener is assigned to call the individual back the following business day.

Callers who are income and legal issue eligible are then transferred to one of several dozen queues that are each tied to a legal problem code. If attorneys are not available, the caller is placed on a callback list. All callbacks are conducted in the afternoon when the intake line is not open. Once connected with an attorney, the caller is screened for LSC-eligibility (i.e., immigration status). For

individuals who are not eligible, the attorneys will collect some more information and then provide legal information and a referral. For individuals who are eligible, the attorneys complete a full intake, immediately provide legal advice, and then assess the need for additional help. CLEAR attorneys handle brief service cases on their own, while cases requiring full representation are referred to a Northwest Justice Project field office or a partner organization. Eva noted that field offices also do their own telephone and walk-in intakes in addition to accepting clients who come in through CLEAR. When CLEAR attorneys make referrals to partner organizations, they send over intake notes via email to the organization being referred to and, assuming the organization can accept the case, the organization then contacts the individual to provide assistance.

Eva flagged some other aspects of the CLEAR intake system that are worth noting. First, CLEAR also has online intake, and eligible applicants with public benefits, consumer debt, or housing cases are placed on a callback list. Second, domestic violence cases—both those that come in through telephone and online intake—are handled by a special group of five attorneys who make up the “CLEAR-DV” team. Applicants seeking assistance for domestic violence typically receive more expeditious service. Third, CLEAR (and Northwest Justice Project as a whole) uses LegalServer for its case management system so online intakes, phone intakes, and callbacks are all tracked in one system. Referrals, however, are almost all handled over email. CLEAR also relies on call center software. Fourth, CLEAR always has one attorney on-call Monday through Friday from 9:00 AM to 5:00 PM to handle emergency cases such as someone with a same-day court hearing.

Eva also noted some challenges. First, she explained that one downside to having Northwest Justice Project as the host is that some clients end up being rejected for full service due to conflicts. Second, she expressed that CLEAR staff generally worried about the number of people who hang up before they are served. She explained that there is an internal debate over whether it is better to serve more clients and spend less time on each client or to serve less clients but spend more time

with each client as well as internal debate over whether to continue to do a live queue or to switch to a call-back only model. Lastly, Eva mentioned that a process improvement endeavor was launched shortly before COVID, but this effort was halted due to the pandemic. Eva said that Northwest Justice Project is planning to relaunch the effort soon and to make it an ongoing one.

### **Lessons Learned and Next Steps**

Through my conversations with staff from each of the above programs, I identified several takeaways that I think the District should consider in the designing and implementation of its own coordinated intake, triage, and referral system.

1. **There is no clear parallel to what the District is trying to do.** For coordinated **online** intake systems, no jurisdiction has a system with more than 12 participants. This means that the District will either need to temper its expectations for what is possible for a coordinated online intake system or it will need to pave new ground. For coordinated **telephone** intake, the closest analogue to what the District is attempting to do is CARPLS's system. CARPLS, notably, is an organization with an annual budget of \$2 million, and it does not provide full intakes for the legal services providers it refers to. However, CARPLS does play an important role in being a centralized hub for legal advice and accurate legal referrals for Chicagoland's poverty population. I believe stakeholders here should take a close look at CARPLS's service delivery model and consider whether it meets the needs of the District.
2. **It is important not to do this work in a vacuum.** While every jurisdiction has its own unique challenges and needs, there is no reason to reinvent the wheel when creating a coordinated intake, triage, and/or referral system. Several jurisdictions have created replicable tools that

can surely be implemented here in the District. In addition, providers from other jurisdictions are eager to support entities looking to replicate their work. The District should tap into these assistance networks. The District should also look to build off its own successes in coordinated intake and referral—namely the [Victim Legal Network of DC](#), the [Landlord Tenant Legal Assistance Network](#), the [Family Law Assistance Network](#), and the [OAH Legal Assistance Work](#).

3. **Coordinated intake needs coordinated technology.** In almost every jurisdiction with coordinated intake, all of the participating programs use one case management system, and that case management is almost always LegalServer. While there are doable workarounds—such as affordable (\$2,500) plug-ins that transfer information between LegalServer, Salesforce, and other case management systems—these workarounds will require more time, more money, and more governance/oversight.
4. **Coordinated intake requires robust staffing.** For example, as mentioned above, the Boston VLP has eight intake specialists and multiple attorneys who assist with supervision, and CARPLS has 36 attorneys and eight paralegals. If the District wants to implement a robust centralized call center, it will, in my opinion, require a staff of at least 10 individuals—both lawyers and non-lawyers. And while coordinated online intake and triage systems require less staffing, all of the jurisdictions with these systems that I spoke with have at least one individual dedicated to oversight and maintenance. Notably, these individuals are all attorneys.
5. **When designing and implementing a coordinated intake system, governance is just as**

**important to consider as technology.** All of the programs I spoke with stressed the importance of identifying a decision maker. While it is good to strive for consensus, governance issues will emerge, and it is helpful to have a decision maker who can make tough calls. The programs I spoke with also stressed that this decision maker should be someone who is known and trusted in the community to ensure that both clients and providers have trust in the system.

6. **Designing an effective coordinated intake, triage, and referral system takes a great deal of time and resources.** The District should expect to spend several years designing, implementing, and perfecting a coordinated system for intake, triage, and referral. Some components are easier than others, but all are labor-intensive and will require a significant investment of resources and energy by providers and other stakeholders.
7. **An effective coordinated intake, triage, and referral system requires ongoing input from potential clients, ongoing collaboration between providers, and ongoing system improvements.** None of the programs I spoke with operate static systems. Instead, they are continually soliciting feedback from and engaging in user testing with low-income people to continually improve their systems and processes. They are also routinely troubleshooting and coordinating with other legal services providers in their jurisdictions. Many jurisdictions—particularly Michigan—have created excellent resources on user testing and collaborating with other providers.
8. **The best coordinated intake, triage, and referrals systems not only connect users to lawyers but also to legal information and self-help materials.** For individuals who are ultimately

unable to access a lawyer, user-friendly legal information and self-help materials are crucial. Applicants who are rejected for service should be provided with these resources whenever possible, especially because they may not connect with any other service provider about their issue. This resonates with comments that DC stakeholders have made that every live connection with an individual seeking assistance should be maximized to offer as much help as possible beyond a simple referral in case that referral is never actualized.

Program	Scope	Scope Details	Participation	Client Access	Staffing	Funding	Software/ Case Mgmt	Volume/ Year	Additional Notes
<a href="#">Florida Coordinated Statewide Online Intake</a>	Intake	-Links to Self-Help/ Legal Information	All LSC orgs state-wide; working to add 2 non-LSC orgs	Online (through FL LawHelp)	1 chief information officer (attorney); supported by staff from LSC-funded orgs in FL	LSC TIG / general LSC funding	LegalServer	<i>Not avail.</i>	-Available in English, Spanish, Creole -LSP can limit number and type of cases accepted from the online system through LegalServer
<a href="#">Coordinated Advice and Referral Program for Legal Services (CARPLS) (Illinois)</a>	Intake, Referral	-Links to Self-Help/Legal Info through ILAO (see below) -Brief Advice/ Service	Main line is standalone; coordinated hotlines have varying number of participants (up to 40)	Phone; online chatbot refers to hotline and ILAO	36 attorneys, 8 paralegals	IOLTA and private	inContact; Salesforce (LSP partners use limited license Salesforce; plug-in to LegalServer available)	120,000 calls; about 63k brief advice/ service; about 11k referrals	-General line, and multiple coordinated hotlines for specific issue areas. CARPLS provides intake and referral for all calls/lines, and brief service for main line -Providers can update information like case acceptance criteria in real-time
<a href="#">Illinois Legal Aid Online (ILAO)</a>	Intake, Triage, Referral	-Links to Self-Help/ Legal Info, court forms	10 LSC and non-LSC funded organizations with overlapping service areas	Online; planned expansion to text, Facebook messenger, automated phone system	1 product manager (attorney); supported by staff from partner orgs	IOLTA	LegalServer; Drupal	3.5 million visits; 80k use triage tool; 10k online intake	-Self-help resources “gold standard”
<a href="#">Volunteer Lawyers Program of Boston (Boston VLP)</a>	Intake, Referral	-Brief Advice	2 providers (one LSC-funded org. who operates the hotline, one non-LSC org.)	Phone, online	8 non-attorneys (incl. 2 Americorps) , 1 supervising attorney, 9 rotating support attorneys	IOLTA and LSC funding	Legal Server; call-center software	13,00 calls screened; 7500 info/ advice/ referral; 4000 cases to VLP and 1500 to partner	-Intake specialists provide information and brief advice, or referral (VLP does not complete full-intake if referring out)

Program	Scope	Scope Details	Participation	Access	Staffing	Funding	Software/ Case Mgmt	Volume/ Year	Additional Notes
<a href="#">Massachusetts Legal Resource Finder</a>	Triage, Referral	-Links to Self-Help/ Legal Info	Referrals to all providers in the state	Online	1 supervising attorney	LSC TIG / general LSC funding	Drupal	<i>Not avail.</i>	
<a href="#">Michigan Guide to Legal Help</a>	Triage, Referral	-Links to Self-Help/ Legal Info (customized information and court forms)	Referrals to all providers in the state	Online (built into Michigan LawHelp)	1 supervising attorney; supported by staff from LSPs across MI	LSC TIG / general LSC funding	Drupal	<i>Not avail.</i>	-Screens for eligibility for benefits programs -Integrates with LSC online intake
<a href="#">Minnesota</a>	Intake, Triage, Referral	-Links to Self-Help/Legal Info	All state-funded "full-service" grantees (no specialized providers)	Online; phone in development	1 supervising attorney; supported by staff from LSPs across MN	State (MN Supreme Court)/ \$45 million project budget	Legal Server; Drupal	<i>Not avail.</i>	-Online triage tool links to online intake; intake info sent in LegalServer to relevant provider -Providers required as grant funding condition to keep information on services up-to-date on backend -Phone line will route to regional hub, who will conduct intake or provide referral
<a href="#">Washington Coordinated Legal Education Advice and Referral (CLEAR) hotline</a>	Intake, Referral	-Provide legal information	Brief advice for entire state (except King County); full service referrals to field offices and partner orgs	Phone; online for limited case types	20 attorneys (some part-time), 10 non-attorney screeners (+addtl staff for pandemic eviction need)	State	LegalServer (referrals done by email)	300k calls (80k unique callers); screen 15k; 10k advice/brief service	-Separate phone queues (backend) by legal issue -Field offices also complete intakes through direct calls/walk-ins -Intake notes sent to referral partners by email -Need 20 more screeners to handle eviction surge (WA right to counsel for evictions) -Seattle/King County excluded, use local 2-1-1