Solano County Health & Social Services Organizational Assessment and Design Findings and Recommendations

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Purpose and Approach

A confluence of factors led to HSS contracting Performance Works for an Organizational Assessment engagement, including issues both external and internal - **capacity of the department, bandwidth of leadership, alignment of expertise with service delivery and the changing nature of the County** itself. At the heart of the effort though is the question of **how best to optimize performance** of HSS. The goal of the work is nothing less than transforming the organization to better serve clients. This project sits as part of a continuum of work that starts with Mission, Vision and Values, and moves into the instantiation of Leadership Principles^{*} throughout the department. Anchored by Research to document emerging trends in the State and the County, it will ultimately lead to Strategic Planning and a robust Communications and Change program to help realize the desired changes – structural, cultural, and operational.



Specifically, the direction given for the Organizational Assessment was to **lead a process for evaluating the effectiveness of the current organizational structure, looking externally to benchmark Best Practices from comparable California counties, and internally at leadership, span of influence and service delivery to present a recommended organizational model**. As outlined in the contract, the recommendations for the HSS department model is to include the following:

- Summary of research findings related to organizational structures
- Evaluation of the effectiveness of the current structure
- Performance objectives for implementing a new structure
- Recommendations for a new organizational structure
- Change management plan to support implementation

Purpose and Approach

Anchored in the belief that the answers to the questions about ways to **unleash productivity** and build a **culture of service** reside within the department, the process relied on deep conversations with employees throughout the organization. We balanced the internal view with a study of peer counties to learn how they're navigating the delivery of health and social services in today's climate. And, ultimately we analyzed both in order to develop a point of view of the **changes necessary to accomplish the twin objectives of customer-centricity and organizational performance**.

Early on in the project, it was discussed with Department leadership that there were likely **multiple viable structures depending on the priority issues looking to be solved** – Leadership bandwidth? Client service? Minimizing disruption? Optimizing inter-agency collaboration? And, as such, Performance Works would present options for structural redesigns in accordance with those priorities.

This report captures our findings and recommendations across a spectrum of organizational areas including Structure, Culture, Work Process, Resources and Job Design and lays out a prioritized set of short- and long-term actions to implement. All findings reported here represent common themes heard across multiple assessment engagements, and clarified during research through inquiry and examples.

This document is intended to provide a foundation for discussion and decision-making. It reflects Performance Works' assessment of organizational issues impacting performance with a roster of recommendations. The translation of these recommendations into a detailed operations plan will follow and is not part of this analysis. Although many of the recommended actions will benefit HSS performance regardless of the organizational model chosen, the specific actions to implement will need to be informed by the ultimate vision for organizational direction and structure.

Assessment Overview

The HSS organizational assessment was conducted between October and December 2018

HSS participants were nominated by HSS leadership and represented a proportional cross section of the Department.

The Assessment included:

- 9 employee and manager focus groups, involving a total of 83 participants
- 27 interviews with HSS and County Senior Leaders and Administrators (refer to appendix for full interview participant list)
- 5 best practices interviews with Senior Leaders at Monterey, San Diego, Placer, Yolo and Shasta Counties

Research topics included Span of Control, Decision-Making, Employee Recognition, Training and Development, Information Sharing, Organizational Structure and ultimately Service Delivery to understand improvement opportunities and priorities from multiple perspectives.

Project Overview

Organizational Context: Recognizing Constraints & Tensions

In navigating our assessment focus and proposed recommendations, it is impossible to overlook the context within which HSS operates and the relationship with the County as a whole. A few challenges presented themselves as most pronounced:

Constraints

- Strict funding parameters
- Changing demographics and demands
- Multiple stakeholders with differing pathways to change (ie. County, Board, etc)

Tensions

- A desire to innovate within a highly regulated environment
- Increasing need for services with limited resources
- Interest in improvement with reluctance to change



Structure for Achieving Success

In organizations of all types, aligning and linking actions across divisions poses one of the greatest challenges. At the core of this alignment is a cascading focus to ensure daily priorities and everyday actions are ultimately in service of the organization's mission.

When organizations pursue change, their success is reliant on balancing strategic priorities and the specific actions that address large and small opportunities for improvement. The following framework organizes our recommendations for action and links them to broader Strategic Priorities and Organizational Imperatives which must be in place for success.



Strategic Priorities

HSS successfully delivering on its mission hinges on coordinating its resources and efforts across a set of clearly articulated Strategic Priorities while using the full expertise of employees and ensuring the organization has the capacity to execute.

Customer Centricity

Positive Community Impact lies at the core of HSS's work and is enabled by a **strategic focus on Customer Centricity**, orienting the organization and its service delivery to match the customer's needs. A Customer Centric approach ensures HSS customers can receive the full range of the Department's services, embodied by a "No Wrong Door" approach.

Innovation and Creative Problem Solving

Demographic, societal and political shifts will continue to add complexity to service delivery and demand novel solutions to emerging problems. A strategic focus on innovation and creative problem solving will set HSS on a course to meet the challenges of a changing environment. Innovation relies on accessing the full expertise of Department employees and overt encouragement and recognition of their invention.

Employee Engagement

Without HSS's highly committed and experienced experts, the department cannot deliver. Relying on employees for input and decisions is critical to enabling them to do their best work. Placing a **strategic focus on Employee Engagement** strengthens the quality of HSS service delivery while celebrating their value to the organization.

Organizational Capacity

Resource availability and constraint is a universal challenge across all organizations. While additional resources would be ideal, unleashing the Department's current resources will improve productivity and expand what is possible for better service delivery. A **strategic focus on increasing organizational capacity** with an eye toward process improvements and efficiency, tied to desired outcomes, will be essential to long term success.

Department Performance Imperatives

Linked to Strategic Priorities are a set of conditions that must exist for HSS to successfully deliver on its mission. These conditions, or Department Performance Imperatives, are necessary to balance external and internal focus, and set the stage for organizational changes.

To set the stage for change and lasting success, HSS must:

- Build a **compelling vision around customer-centricity** that can motivate service, organization, and/or collaborative redesign and change.
- Shift toward an **employee-centric culture** that demonstrates the value of employees and motivates them to bring their best everyday.
- Clarify consistent work practices and processes to improve efficiency overall.
- Prioritize commitment, trust and engagement of employees and governing stakeholders through exhaustive and visible execution of all organizational change underway.
- Diligently adhere to a comprehensive action plan for execution.

Foundational to all of this is establishing a mindset for continuous improvement to ensure the efforts of all are met with receptivity and a realistic view of the incremental nature of change. It will be important that County and HSS leadership and employees see innovation and change as ongoing and necessary aspects of continuing improvement, rather than a series of one time, disparate events.

Key Findings from Organizational Assessment

- Significant opportunities exist for better linking services and enabling collaboration across programs to have a greater impact on client care.
- HSS culture can emphasize, and put in place, increased support for employee efforts to offset the perception that employees are not valued.
- Employees are hungry for more transparency and executive level communication to better understand the department's priorities and underlying logic.
- Work process redesign and/or streamlining are necessary for improving performance and unleashing productivity.
- Success is currently enabled by employees' commitment to service and isolated practices in select groups, rather than by systemic practices or approaches to service delivery.
- Collaboration for more effective service delivery is complicated by divisional silos.
- Lack of adequate people resources is a consistent inhibitor of more effective service delivery and a source of great frustration.
- Information sharing across groups is labored but increasingly necessary for productive work. Data management and sharing is seen as key to positive client outcomes.
- Employees are skeptical about change stemming from internal organization assessments because there is little history of sustainable improvements.
- Any significant change to how work happens will face challenges from within and beyond HSS due to both the regulatory nature of the work environment and entrenched behaviors and mindsets.

Key Findings from External Best Practices Research



Foundationally, for a Health and Human Services Super-Agency to be both an efficient and innovative enterprise, it must be organized as a matrix flexible enough to encourage collaboration while maintaining a strong through line of policies, culture and vision to guide purpose.



Conversations emphasize there is no such thing as too much communication. Engaging every employee in the reorganization process and creating opportunities for buy-in at every step is fundamental to ensuring everyone feels part of a shared effort and necessary to its success.



Tapping the expertise of the community and joining forces with existing companies is a necessary step toward solidifying HSS's role in the county as both a resource for support and advocate for local organizations.



Polarization, resistance and tension are all to be expected while navigating through this process, however, with strong leadership and a commitment to a shared goal, the struggle for power will lead to a culture of acceptance.



Creating systems and structures to support collaborative efforts is key to best serving populations in need. It is widely understood that no issue exists in a vacuum and it is up to the HSS agency to recognize and provide the continuum necessary for a client's wellbeing.

Recommendations Summary

HSS must demonstrate commitment and take action in key areas in order to deliver on its mission, organizational imperatives and strategic priorities. Our high level recommendations capture the key categories for focused action that will enable HSS to achieve its objectives (refer to Recommendations section for full review of actions).

Structure

- Design the organization to address specific objectives
- Build structured collaboration in key areas
- Significantly increase cross-functional awareness
- Instantiate language and behavior that represents HSS as a whole

Culture

- Build an employee-centric culture
- Rollout Leadership Principles
- Drive accountability
- Create a dedicated Workforce Culture role within HSS

Work Process

- Design/redesign work processes
- Enhance training
- Build a business case for Technology improvement

Resources

- Assess data systems and leverage existing best practices from peers
- Address employee workloads and caseloads

Job Design

- Assess relevance and impact of job classifications
- Build shared understanding that the job isn't just the classification
- Shift deputy mindset from divisional oversight to HSS leadership

High Level Implementation and Change Management Plan

Structure	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC
Design the organization	Design		Plan					Implem	ent			
Build structured collaboration in key areas							•					
Significantly increase cross-functional awareness							•					
Instantiate language and behavior reinforcing dept vision	•											
Culture												
Build an employee-centric culture	Short-t	erm actio	ns + Com	municatio	ns		Long-t	erm actio	ns + Comi	nunicatio	ns	
Rollout Leadership Principles	•											
Drive accountability							•					
Create a dedicated Workforce Culture role within HSS							•					
Work Process												
Design/redesign work processes	Identify	/ Task For	ce + Proc	esses	Redesi	gn Proces	ses					
Enhance training		Plai	1		Build				Delive	r		
Build a business case for technology improvement						•						
Resources												
Assess data systems, and leverage best practices from peers						•						
Address employee workloads and caseloads						•						
Jobs Design												
Assess relevance and impact of job classifications	Job De	sign Seleo	ction		Job De	sign Anal	ysis + Rev	vork				
Build shared understanding that the job is about org success	•											
Shift deputy mindset from divisional oversight to HSS leadership	•											

Detailed Findings

Employee Focus Groups

Employees are skeptical about change stemming from organization assessments

Employees express skepticism and reluctance toward the organizational assessment process, since previous efforts and initiatives have produced few known results. Despite their skepticism, they believe in leaderships' intent to do good, they actively participate in the process and ask for greater involvement and transparency.

- Organization assessments and improvement initiatives in the past have yielded little feedback or change, leading to employees feeling discounted and reluctant to share information
- Assessments and initiatives do signal to employees that leadership generally wants to do good and supports change
- Employees suggest building future initiatives with frontline input versus implementing them from the top down as may have occurred with IIE
- There is strong interest from employees in having greater transparency and understanding of organizational change efforts and timelines

Success is currently enabled by commitment to service and specific practices

The quality of people and commitment to service, along with co-location of services/programs and discrete group practices, are cited by employees as what works well and will enable successful service delivery.

- Employees cite the character, commitment and overall quality of their people as a primary strength of HSS
- A shared understanding and commitment to service and compassion, across the entire department enables their work and effectiveness as exhibited in an example shared of an HSS Admin employee helping a client on the street
- Employees shared several instances of co-location and cross divisional collaboration as examples of where things are working well
 - BH staff, PH nurses and E&E collaborating through co-location
 - Co-location of programs in Regional offices during the 90's
- Employees also cite isolated examples of effective practices in some divisions/groups, for example the Benefit Action Center (call center) has a "one and done" policy, where the person answering the call is responsible for seeing it to resolution

Process development and streamlining are necessary for improving performance

A lack of process, or burdensome processes are both considered issues that detract from service delivery and overall performance. "The behaviors required to navigate the system don't represent people at their best."

- There is a sense that processes have increased significantly in recent years, with clerical, administrative work and documentation now getting in the way of client service, examples include contracting, travel approval requirements, getting vendors paid
- In general, mutual understanding and knowledge of internal processes can be improved across all divisions, currently some processes are seen as inconsistent across groups and even varying from person to person
- Employees believe HSS clients are being asked to navigate difficult processes requiring lots of waiting, documentation and multiple trips
- There is recognition that some processes are passed down from the County and State and are not in the purview of HSS to change

Collaboration is complicated by divisional silos

Silos are making collaboration across divisions more difficult with potential impacts on client service. This dynamic is partly due to structure and lack of formalized collaboration processes, and is to a certain extent mitigated by employees through personal cross-group relationships.

- Employees generally attribute cross-divisional collaboration issues to structure and culture including:
 - Divisions "staying in their lanes"
 - An individual rather than team focus in some groups
 - Procedural behavior and employee apathy in some cases "pulling teeth" to get things done
 - Lack of formal collaboration processes and management support to enable cross-division collaboration
- Relationships between cross-divisional employees, which are self-initiated and built over time, have been key to getting things done "it depends on who you know"
- Tenured employees are concerned about the impact on informal/relationship-based processes after department veterans leave

Employees believe they are undervalued

There is widespread perception across employees and divisions that they are undervalued, as demonstrated to them by the lack of development opportunities, workload and involvement.

- From the employees' perspective, HSS...
 - Undervalues the experience of tenured employees, preferring degrees and credentials
 - Undervalues internal movement and development
 - Demonstrates low level of respect and discounts employees
 - Places priority on clients to the detriment of employees
- The perceived lack of value toward employees is demonstrated via
 - Low communication and involvement
 - Not asking regularly for employee feedback (e.g. waiting until exit interviews)
 - Placing insufficient emphasis on work and life balance, and workloads
 - Very basic employee evaluation process, versus more robust process for managers
 - Making decisions without getting input from or vetting them with front-line staff
 - Insufficient focus on comfort and safety, for instance lack of security and cameras in parking lots, and HVAC issues
- Employees encourage a greater focus on HSS staff, for example through a "personnel director" that can drive organizational development, communication and more directly support HR needs, as well as staff evaluations for supervisors

Lack of staffing and integrated technology are a consistent performance inhibitor

Lack of staffing and integrated technology is consistently and frequently cited as an issue that inhibits the performance of the department. While there is an understanding of constraints, employees believe more can be done with regard to adding resources.

- There is a general sense that departments know what they have to do, and performance challenges are heavily driven by lack of staff to deliver on expectations
- Due to lack of analysts, managers step in to fulfill that role, taking away from their client-work to build the business case for additional staff
- Employees are asked to go above and beyond, and when they deliver, working under constraints becomes the new normal
- Under performance due to shortage of staff is also addressed by an ask to work even harder
- Not enough IT staff to make data collection, management and analysis as robust as it needs to be
 - Data systems don't communicate with each other and different departments can't access client information

Priorities and their underlying logic are not clear to employees

Competing and shifting priorities are common across HSS, and the underlying logic behind decisions and changes are typically not clear for employees.

- Employees often cite that they don't have awareness and understanding of the logic behind decisions and changes. An example being the current rumors of organizational change
- From the employee perspective, HSS appears to have competing priorities, potentially across the organization and through the hierarchy
- To some, priorities seem to shift frequently, leading to lack of clarity regarding success, which is also described by some as lack of clearly defined expectations from leadership – this collective sentiment on shifting priorities was exemplified by the statement "don't know what a win looks like"
- Some employees view HSS priorities as being reactive, and suggest a need to be more proactive and strategic before jumping into things

Employees want more transparency and executive level communication

Communication is broadly considered to be an improvement area, primarily with regard to increasing frequency of executive communications, more effective cascading through the organization and more strategic communications planning.

- Employees consistently note a lack of communication from management regarding organization direction and change. Additionally, existing communications are sometimes difficult to access, and suggestions were made for new communications tools like Sharepoint
- In some instances, employees note a lack of communication strategy and planning, for instance citing the focus group invitation as a case in point
- In the absence of communication, gossip pervades and eventually leads to behavioral change at the front line an example is the chatter about organizational change without awareness of what it is (occurring at the time of this reporting)
- Employees generally cite a need for clearer, more shared and strategic communications, with effective cascading throughout the organization

Information sharing is labored but very necessary for effective service delivery

While information sharing is seen as key to servicing clients, it is also difficult given the current structure and practices in HSS.

- Communication between units at the frontline is considered necessary for quality service delivery
- Employees note that getting information from across divisions for a single case can be difficult
- The current organization structure and HSS building are thought to limit effective information sharing, and employees note that all units touching a single case are not communicating
- Employees mention several metrics and outcomes that may result from better information sharing, these include
 - Linking communication to measurable action
 - Usage of services versus eligibility for services
 - Client clicks on website and services

Significant opportunities exist for better linking services and enabling collaboration

HSS, while linking a range of services, has significant opportunity for better service integration and crossdivisional awareness and collaboration in order to better serve clients.

- In general, employees have low awareness and knowledge of the services that are provided across divisions throughout HSS, diminishing their ability to appropriately route and fully serve clients, the following statements characterize the current state of awareness
 - "How many divisions do we have and when did they change?"
 - "Don't know where to route incoming calls"
 - "Can't help my own family navigate the system as an employee"
- Lack of service and cross-divisional integration is clear to employees, who observe their clients going to multiple divisions for service, and also find difficulty themselves in accessing information
- Employees don't see HSS as "one agency," instead experiencing it as separate units with lots of internal handoffs and less than ideal collaboration this is the collective sentiment on integration and was exemplified by the statement "[we are] not set up to know what our best work is"
- Paths for collaboration are not seen as evident and readily available, and employees see opportunities for better performance if leadership made the paths operationally accessible with better identified linkages
- Opportunity also exists for improved collaboration by creating better relationships and supporting creative problem solving
- Employees see possibility for greater penetration of services through integration and collaboration, ultimately resulting in better service and more funding

HSS culture can be strengthened and more supportive of employee efforts

HSS culture is firmly grounded in a commitment to service, in some areas however the culture may be hindering rather than enabling service and performance, particularly with regard to adherence to hierarchy, low support for innovation, some apathetic employees and pockets of contention.

- The culture of HSS is grounded in the character of its employees and their commitment to service, as well as the department's purpose
- The current culture is potentially divergent from the department's stated values, this is demonstrated in mixed messages between values and behaviors for instance:
 - Employees are asked to resolve issues at the lowest level but still have to go through a change of command
 - Innovation is espoused but some employees are experiencing low levels of risk-taking, trust and safety for innovation
 - Observance of hierarchy and low risk taking are sometimes seen as trickling down through HSS culture starting from "Downtown" (HSS employees commonly refer to "Downtown" when generally describing the County's Administration, the CAO's office and County HR)
- In some instances, employees describe a "fear of action" related to helping clients, due to potentially violating regulations or processes, examples include:
 - Being told to stick to chain of command or be reprimanded
 - Hesitating to give food to a client on the street for fear of violating regulations (e.g. food allergy)
 - Having to remove a children's playbox in an E&E cubicle due to liability concerns
- A "culture of apathy" may exist in some areas resulting from an erosion of confidence in the system over time, this is characterized as employees:
 - Not engaging in team work and exhibiting low comradery
 - "Spending astounding energy" to push things to other divisions
 - Not deviating from schedules (8-5, 9-80...) to accommodate requests
- HSS culture may be contentious, particularly between frontline workers and management, due to employees' thinking management doesn't understand their circumstances. Contention may also exist across divisions and groups, characterized as an "us versus them" mentality

Accountability is seen as lacking, with impact on organizational and individual performance

Lack of accountability is perceived as undermining the overall performance of HSS with an impact on high performers.

- There is a perception that some employees who lack the intrinsic motivation and commitment for the work are underperforming and only engaging for a paycheck
- Underperformance for some individuals may have developed over time as a result of feeling overworked and underappreciated, along with other related organizational circumstances
- Employees see little differentiation in rewards and consequences for high versus low performance respectively, an important factor which can lead to loss of motivation and commitment
- Managers think the tools for managing underperformance are cumbersome, and difficult to implement given an already significant workload
- Overall there is interest in raising the level of accountability through all levels of HSS, based on more clear delegation of workflow from the top down

Improving training may increase performance and morale

Adequacy of training can vary by group, however most cite some deficiency in the training they received and point to it as contributing to challenges in job performance and impacting employee morale.

- Lack of training is seen by some as making the job more difficult, demonstrating a lack of value and support for employees and contributing to turnover
- Employees emphasize a desire for greater focus on trainings that are specific to getting their work done, rather than general trainings
- In some areas employees report a significant delay between starting the job and receiving appropriate training – this is exemplified by the statement "after two years, I am still learning the process from colleagues"
- A good deal of training is said to occur informally therefore causing variance and limiting the level of client service, for instance an informal conversation represents the full extent of training for some
- The number of programs, and frequent changes to programs complicate the issue, leading to employees being assigned to implement program elements without sufficient training
- Trainings provided by the County are considered high quality, though they may be more general and not very specific to each job
- Knowledge of training opportunities varies across groups, some divisions announce their trainings (e.g. E&E) while others may not do so as consistently; employees must seek out and search for County trainings

Any change will face challenges from within and beyond HSS

Employee's believe any HSS change will need to address significant challenges including:

- Removal of silos when the State itself is very siloed
- Severe shortage of IT staff to address technology updates, and improve information sharing systems
- Constraints on county HR which leave employees confused about why things happen
- The size of the department makes change implementation more difficult
- Changing the way leaders think about and approach things, so employees can embrace it

During Focus Groups, Employees were engaged in groups to design the future HSS organization; the following categories and ideas directly represent employees' recommendations and vision for HSS's future.

A shift toward greater integration across the department, characterized as:

- A one stop shop
- Central hub, with service experts
- Taking on the burden of routing internally and off of the client
- Having internal liaisons to better enable access to information and services across divisions
- Having multi-disciplinary teams
- Decentralized and flatter than the current state
- "Wheel" shaped rather than the current top down hierarchy
- Co-locating and embedding employee across divisions for service delivery
- Leveraging E&E as the entry point, and bringing in all divisions to coordinate and direct the work

Improve resources with better access, for instance:

- A better website and SharePiont access
- Better equipment for programs
- Updated technology including (FaceTime, Texting, AI, Dropbox, IOS and Android staff)
- Shared electronic records with accessibility

Increased support from analysts, fiscal, contracts, administration..., including:

- A contracts unit to administer contracts, thereby shifting program employees toward their area of expertise
- Fiscal employees who can bridge between services and payment
- Removal of program integrity responsibility from HSS, for better checks and balances on internal quality
- Embedded IT support

Greater focus on value of employee through:

- Staff development and training opportunities without having to provide onerous justification
- Employee recognition and appreciation
- More manageable workloads, and reducing employee turnover
- Variable resources, such as "relief team" to support units "drowning in work" due to staff shortage
- Employee evaluations of managers, and reverse accountability
- An HSS focused Personnel Director or HR
- Higher accountability to keep high performers motivated, by rewarding their efforts
- Involving frontline staff in process design, and generally looking for their input prior to change

Greater levels of training and support for:

- Completing administrative and other work, for instance templates and desk manuals
- Best practices within Divisions and programs
- Raising awareness of services provided by each Division
- Cross training and cross-division collaboration
- Formalized networking across HSS
- Focusing on specifics needed to get the job done rather than general
- Essential skills, to potentially occur annually (e.g. customer service)

Enhanced communication and information sharing, including:

- Greater interaction between managers across divisions
- Clear chain of command and expectations
- A dedicated communications function providing: managers for HSS, with supporting staff
- Strategic communication plan
- Regular updates, (e.g. Monday updates on programs)
- Branding/messaging

Streamlining of red tape and processes:

- For getting every day stuff done (e.g. a work order for AC repair)
- Related to travel, contracts, supplies, training, staff development..., to make things easier to find and do
- Through the involvement of those closest to the processes

A culture that is characterized by:

- Proactive collaboration across groups
- Trust in and support for employees to perform their function (oversight and compliance)
- Accountability from the frontline to executives
- A focus on internal customer service
- Strong communication and transparency in decision making
- Placing value on feedback, rather than it being punitive
- Embracing "no bad ideas" policy
- Strong ownership from all employees
- Engaging challenges and identifying root causes
- Confronting inconsistencies and entitlement
- Execution of change

Detailed Findings

Leadership Interviews: Executive Team

HSS's executive leaders' understanding of the department's current performance, integration and collaboration are favorable relative to those of their direct reports and frontline employees. While acknowledging areas for improvement, the group has somewhat divergent ideas with regard to organization design and related factors.

Culture

• There is a sense in some areas that a culture of fear pervades, being heavily influenced by "Downtown". This manifests as limiting innovation and improvement for fear of being shutdown or devalued.

Bandwidth

• Jerry's bandwidth level is a concern for the group, though not necessarily owing to a shortage of contact or access. While all agree a second assistant makes sense for the size of the organization, some also see an opportunity to release more bandwidth through greater empowerment of deputies.

Current performance, integration and collaboration

- Leaders may look favorably on their current performance given a lack of strong criticism. They tend to look at the current ad hoc collaboration and integration as sufficient, which is somewhat at odds with perception of line staff , who believe "collaboration at the management level doesn't trickle down."
- There is acknowledgment that there is a gap to bridge and that more can be done to support collaboration and ultimately bring more services to each client

Organization design

- Group thinking on organizational design and overall design process are somewhat divergent
 - The sketch of organizational design makes sense to some especially when looked at through the lens of operational efficiency
 - Some don't have confidence in the organizational design process, seeing the sketch (Option #1 in Recommendations) as an already determined solution
- While leaders tend to solve for organization design from their perspective, they also bring a mix of approaches, on the one hand solving for bandwidth and operational efficiency, and on the other suggesting willingness to solve for client and community outcomes
- Exec team members don't strongly advocate for any one design including "the sketch" (Option 1 in Recommendations) or Integration (Option 3 Recommendations). They understand that accountability and reporting lines dictate action and can drive collaboration in the Governance structure, and also that co-location or integration (reporting lines) are not required for collaboration

Rollout

• Leaders strongly advocate for an effectively communicated roll out of any organization changes

Detailed Findings

Leadership Interviews: Administrators

- While communicating similar concerns as division leaders, administrator levels tend to have a less favorable view of their service delivery, holding a perspective more closely aligned with their frontline staff. They frequently cite:
 - Staffing and technology constraints
 - Difficulty in collaboration across groups, with diminishing service
 - Asking the client to meet HSS where it's at, rather than HSS meeting the client where they are at
- They think leadership at all levels of the organization is key and should be aligned and strengthened
- Communication and clarity of direction are cited as areas for improvement

Recommendations

Recommendations

Structure

How HSS organizes itself moving forward is heavily dependent on what specific problems management wants to solve through a new structure. The initial aim of this assessment focused on developing an organizational design that increased capacity primarily at the executive level. Through the course of the assessment, input from employees and best practices from peer organizations revealed opportunities to look at HSS's organization design more broadly. Specifically, the problems presented during the assessment extended beyond increasing capacity and firmly pointed toward integration, and a "no wrong door" approach toward client service.

• Design the organization to address specific objectives:

 Based on assessment findings, HSS can pursue three different organization designs, each solving a specific problem: increasing executive level bandwidth, improving service delivery through collaboration, providing seamless service delivery through integration. The organizational structure that is chosen will influence the direction of additional initiatives and actions stemming from this assessment.

	Option 1 Organized by Expertise	Option 2 Organized by Network	Option 3 Organized by Population
Organizing Principle	Control	Leverage	Purpose
Organizational Model	Vertical hierarchy	Vertical hierarchy + Networks	Matrix
What the model solves for	Aims to release Executive level bandwidth in order to improve service delivery	Aims to broaden and improve service delivery and department integration	Aims to put the client first and provide seamless full-service delivery with a strong focus on the clients' experience
Description	Organizes around expertise primarily by shifting executive level reporting lines, in effect adding to the assistant director level. Functional areas will consist of: • Health Services • Social Services • Administration Each functional leader directly reports to the Department Director.	Enables service delivery through networks by enhancing collaboration, knowledge sharing and internal processes, within the current structure (or organization designed around expertise). Solutions may include: • Co-location of staff • Dotted reporting lines across divisions Deputy directors largely maintain their current oversight of their areas.	Organizes around populations rather than expertise, bringing all areas of Health, Behavioral Health, Social Services, E&E etc that provide service to a given population within one hierarchy. Each provider serving a population also maintains a direct reporting relationship to a Center of Excellence for their specialty (e.g. Behavioral Health Center of Excellence), to ensure quality delivery. Administration and Operational functions can remain standalone, or may be matrixed entirely or in select areas.

Recommendations: Structure

...Table extended from previous page

	Option 1 Organized by Expertise	Option 2 Organized by Network	Option 3 Organized by Population
Advantages	Releases Director bandwidth by effectively having three Assistant Directors. Allows focused oversight of divisions and expertise. Does not significantly disrupt the organization or how services are delivered.	Releases organizational capacity by streamlining many aspects of service delivery (e.g. collaboration, processes). Maintains a focus on technical expertise, and leverages enhanced collaboration to meet client needs. Focuses informal networks on clients and their needs. Does not significantly disrupt the organization through reorganization, though it does impact how services are delivered. Likely the least disruptive transition for leadership.	 Puts the client and their needs first. Focuses accountability around integrated service delivery rather than performance within an area of expertise. Streamlines processes, handoffs, informal collaboration etc for services delivered to a given population. Elevates focus on best practices alongside actual service delivery and management. Provides more flexibility to cater resources by population.
Challenges	Does not specifically solve for service delivery or the greater need for client centricity. Seemingly subordinates some existing functions and leaders by adding a senior level layer to the hierarchy.	 Will require more focused understanding of collaboration opportunities drawn from the frontline. Will require a substantial and sustained focus on enabling collaboration through training and culture change. Collaboration gains are likely to dissipate over time, since they are not driven by accountability. Model relies on influencing and cross-functional collaboration skills, versus top down hierarchy. 	Reorganization will pose a disruption, with many employees adapting to new reporting lines and changing job descriptions. A portion of employees will likely voluntarily leave the organizations. May require negotiation with labor. Requires increased level of trust, to achieve shared accountability and mutual dependence. Will require improved systems for accountability. Relies on influencing skills and cross-functional collaboration skills, versus top down hierarchy.
Time Required	6 months to 1 year	2–3 years	3+ years

Option 1: Organized by Expertise

Releases Executive level bandwidth to improve service delivery. Reorganizes HSS around expertise and primarily shifts executive level reporting lines, reducing Direct Reports to the Agency Director and redistributing oversight, in effect increasing the number of Assistant Directors to two and potentially three.



Recommendations: Structure

Option 2: Organized by Structure

Improves service delivery through networks, by formally structuring collaboration, knowledge sharing and internal processes, either within the current structure or within Option 1 (as shown below).



Option 3: Organized by Population

Puts the client first and provides seamless full-service delivery by reorganizing around populations, bringing all areas and Programs that service a given population under one hierarchy for greater accountability to client service.

The matrix organizes service delivery through three Branches with Programs and Administrative Functions embedding staff across them. This drives collaboration and integration through a formal structure and through dual accountability (see full explanation on following page).



Option 3: Organized by Population Additional Detail

Executive Level

The Executive Level of the Department will be made up of a Director, with two direct reports, an 1) Assistant Director for Admin/Ops and 2) Assistant Director for Service Delivery



Programs

Serve as Centers of Excellence for their specific focus areas, with significant parts of their organization's working under the direct supervision of Branches.

Responsible for ensuring services under their focus area meet quality standards and adhere to regulations. Responsible for training and supervision of staff under their programmatic focus, linked to Branch requirements.

Work with Branches to properly distribute their resources as needed. Supervise service delivery as needed to ensure quality, integrity and efficiency. Ensure staff are properly trained and working within regulations.

Each Program will be led by a senior leader with targeted experience relevant to their program.

Task forces, multi-disciplinary teams, and other structured collaborations will link delivery of services.

Administration/Ops

Work closely with Branches and Programs to enable service delivery and ensure HSS meets its fiscal, compliance and other requirements, with parts of its organization embedded and working under the direct supervision of Branches.

Responsible for overseeing the administration and overall functioning of HSS, ensuring Branches and Programs have what they need to get the work done while meeting County, State and other requirements.

Work with Branches and Programs to properly distribute their resources as needed. They supervise the work of their staff to ensure quality, integrity and efficiency. They ensure staff are properly trained and working within regulations.

Each Administrative function will be led by a senior leader with targeted experience relevant to their function.

Branches

Serve as the primary vehicle of service delivery, each representing a population or discrete service area, and drawing heavily on resources within Programs and Administration to deliver.

Responsible for ensuring the populations they serve receive the full breadth and depth of HSS's services in an integrated fashion.

Assemble the department's relevant resources together, through organization, colocation, coordinated activity, communication, and shared goals for accountability.

Led by a senior leader with broad experience relevant to the population and services who will be accountable for servic e quality.

Recommendations: Structure

Based on the current state of cross-divisional collaboration and culture, the following actions are considered necessary steps for *bolstering the performance of any organizational design* HSS chooses to adopt.

• Build structured collaboration in key areas

Moving forward HSS must identify areas where service quality and efficiency will benefit from strong links and collaboration, and take necessary steps to ensure these links and collaborations are structured rather than haphazard. Whether collaboration between groups takes place should never be driven by the existence of personal relationships, proximity or bandwidth. Steps to structure collaboration will include but are not limited to:

- Design collaboration into processes and SOP, if it frequently takes a common form
- **Create standing touchpoints between groups** where proactive information sharing will improve or expedite service
- Create cross-divisional or multi-disciplinary teams assigned to address specific service areas

• Significantly increase cross-functional awareness

To bring the full breadth and depth of the department's services to clients will require employees have solid working knowledge of service capabilities across divisions. In any possible future, putting the client first will require that HSS makes a deliberate and sustained effort to ensure employees have a solid understanding of what services each division and bureau provides their clients or internal customers. The knowledge should be at a level to allow any employee to direct a client within the system to the group that may best serve them (e.g. limit to one internal referral). Steps to increase cross-functional awareness will include but are not limited to:

- **Showcase each division and its services** through multi-media communications for instance websites, videos, and at all-hands, management or team meetings
- **Develop a highly accessible overview of HSS**'s divisions, bureaus and services that is at arm's length for all employees, this can take the form of an infographic, or highly user friendly online directly

• Instantiate language and behavior that presents HSS as an integrated whole

Success in a client-centric organization requires all groups within HSS to work as one. This is in contrast to an "us vs. them" dynamic in which employees identify with their divisions solely and may use blaming language toward other groups. For HSS to work as one, employees, starting with leaders, must think of HSS as a single entity; this thinking will then direct client-centric action. Shifting language and narrative will serve as key starting points for this change. Steps in shifting toward one entity are primarily focused on Department level and Division level communications, and include but are not limited to:

- Leveraging the People First* communication campaign to promote a vision of a single highly client-centric HSS
- Use **language that reinforces HSS as a single entity** and diminishes differentiation between divisions
- **Couch the priorities of any division as HSS priorities** rather than belonging to the Division, e.g. fiscal budget process vs. program needs

Recommendations

Culture

The impact of culture on performance and service outcomes in any organization cannot be overstated. Organizational culture simultaneously provides the mechanisms for action (e.g. norms of behavior...) and also forms its backdrop. For culture to be an effective enabler, it needs to equally address two characteristics: it must support the right behaviors that achieve desired performance outcomes, and it must also create a positive environment where its employees want to contribute every day. In short, the culture must be one that allows both HSS and its employees to thrive.

HSS currently has a number of opportunities to develop its culture to achieve better outcomes and ensure employees are valued. While HSS is vast with many subcultures, the following recommendations apply to virtually all areas.

• Build an employee-centric culture

HSS currently appears to emphasize a focus on service delivery and operations at the expense of its employees who feel overworked and unsupported. Moving forward, HSS must balance client centricity and operational rigor with an employee-centric culture which equally weighs employee and service delivery needs. While all suggested actions throughout this report will positively impact the employee experience, we recommend a specific set of long-term focus areas and short-term actions, to shift culture and demonstrate employee appreciation.

Short-term actions

The following actions should be completed within a 3-6 month period following this report, and should be made visible through the People First communications campaign.

- **Provide security and cameras for the Beck parking lot**. This will visibly demonstrate that HSS listens to, and cares for its employees by focusing on ensuring their safety.
- **Build a program to recognize HSS's high performers**. The program should identify individuals that embody HSS values (e.g. specific Leadership Principles) as recommended by colleagues and leaders. High performers should be publicly and visibly recognized for their actions, in order impact morale of recipients and reinforce aspects of culture.
- Make HSS Director and Assistant Director visible across the Department's facilities and groups. Leadership visits can be informal (e.g. joining line level meetings, hosting fireside chats...) and should focus on demonstrating appreciation of a group's efforts, listening to their concerns and providing a higher level of picture of the Department's direction and priorities.

Long-term focus areas

The following must become enduring focus areas for HSS.

- Enhance information sharing throughout HSS. Free and ready exchange of information across groups is vital to timely and quality client service, yet it is a challenge. Improvement will hinge on 1) establishing information sharing as a part of the job and culture, with appropriate accountability (e.g. for instance through dual or dotted line reporting), 2) ensuring information sharing is streamlined through the use of technology, common databases and broad organizational access to data. Overall, enhancing information sharing will require more in-depth understanding of the current state and future performance requirements.
- Reflect employee input in decisions. Engage employees as much as possible to provide input that may influence consequential decisions. Ensure the underlying logic of decisions and how employee input has been factored into a decision is well communicated and understood by employees. If the decision contradicts employee input, be transparent about the reasons why it does so.
- Build trust by demonstrating it throughout the organization. Take a critical look at where management practices, such as time reporting, policies around sick days, approval requirements, etc... may be inadvertently sending a message that management does not trust employees. Extend a greater level of trust by removing approval requirements, documenting decision-making logic and communicating decision process and criteria, and by assessing performance against outcomes rather than presence in the office. These and other specific actions will need to be sustained in order to build trust.

• Rollout Leadership Principles

The Leadership Principles outline the key behaviors that will move HSS into its desired future and bring the Mission and Values to life. Having been introduced to management, the Leadership Principles now need to be cascaded and effectively embedded throughout the organization. Ensuring this happens will require the following:

- Rollout the Leadership Principles deep into the organization through frontline level training that challenges employees to think through how they can live each Principle during the course of their daily work.
- **Tie Leadership Principles to employee recognition and accountability** in order to support building an employee centric culture. Link public recognition for performance (see previous recommendation on culture) directly to the Leadership Principles by asking leaders and employees to nominate colleagues for recognition whose specific actions embody the principles.

Recommendations: Culture

• Drive accountability

Accountability, when in place, directly and indirectly impacts organizational performance. It assesses outcomes against specific targets, and it builds morale when high performance results in rewards and recognition. Moving forward HSS has a significant opportunity to enhance performance through better accountability, via the following:

- Drive clarity around performance expectations, tied to delivering on Divisional and Departmental objectives, so each individual understands how their performance will be assessed. Ensure this happens by providing administrators and supervisors with the tools to translate high level objectives to local action (e.g. strategic planning facilitation), and training them in setting clear expectations with employees (e.g. training on effective delegation).
- Provide tools that allow managers to hold individuals accountable. Holding an individual
 accountable may be considered more trouble by some managers than its worth, based on the work
 involved. Take steps where possible to streamline and reduce the effort involved for a manager to
 actually hold their direct reports accountable for underperforming.
- Reward performance and disincentivize lack of performance. Employees currently do not see differentiation in accountability between high and low performance, which is highly demotivating for top performers. Aligning rewards and consequences with performance expectations is very important and will be a long-term improvement area tied to culture change. To begin on this path, HSS must take a targeted approach and look at specific areas where underperformance is currently having the biggest impact on service.

Any strong effort toward driving accountability must occur after early wins in building an employee centric culture.
Recommendations: Culture

• Create a dedicated Workforce Culture role within HSS

Building organizational culture, workforce development and related areas, often called Organizational Development, requires constant attention and benefits significantly from expertise. Without a dedicated role to oversee organization development, the task now falls on the shoulders of leaders and managers who are already stretched thin.

HSS can make a significant impact on the employee experience by creating a dedicated role for Workforce and Culture development. The role should be focused specifically on:

- Assessment of organizational health and employee engagement to understand areas for improving culture and performance.
- Leadership and talent development, to ensure HSS is growing its capabilities internally and valuing employees by investing in their development.
- Process design to ensure the organization as a whole is functioning efficiently.
- Training development and delivery to ensure employees across divisions have the information and skills necessary to best meet client needs.
- Supporting communications to ensure internal messages reflect employee sentiments and achieve the desired impact.

Recommendations

Work Process

Over time all organizations tend to see a degradation of process integrity. This happens when service requirements evolve without a proportional shift or redesign of processes. The resulting state is one in which too much process and red tape results in wasted effort. Or conversely where lack of process leads to wasted effort in constantly rebuilding steps and reinventing the wheel.

HSS currently has opportunities to develop some processes while streamlining others, with significant positive impact on service delivery, employee workloads and morale. While service delivery is an obvious area for process improvement, more impact may occur initially by reducing the weight of internal processes, for instance travel approval or other administration driven processes. To improve processes, we recommend the following actions.

• Design/redesign work processes

Where possible, HSS should focus on redesigning processes in order to ensure the new state is clear of old patterns. However, given the complexity of the regulatory environment, broad range of stakeholders and change challenges within a large organization, process design may need to proceed incrementally. The following steps will lead to process design that best leverages the organization's resources and engages employees.

- Identify processes for improvement through a scan of the organization. This can be done by looking at service performance, interviews with leaders (and employees) close to the frontline, and targeted inquiry with employees to understand where they unnecessarily waste time. Specific criteria should be developed to surface areas for process improvement.
- Prioritize processes With processes identified, determine criteria to prioritize the order in which processes are redesigned. Key factors to consider may include impact on outcomes, ease of redesign, dependency on other factors, e.g. IT improvements, visibility of outcomes across the organization and more.
- **Design (and redesign) processes with a focus on efficiency and the user experience**. This will help lead to processes that minimize resource requirements, and involve the fewest stakeholders, while also limiting challenges for users and increasing compliance.
- Maximize process design input from frontline employees. By virtue of actually delivering the
 organization's services, frontline employees often have the best understanding of process issues,
 making it critical to engage them during process improvement. Engaging frontline staff in process
 design will also allow greater buy-in and adoption of ultimate outcomes. Employee engagement can
 be leveraged through Task Forces setup to support process development in their areas of expertise.

Any strong push toward process improvement should take place with clarity around the potential future organizational design.

• Enhance training

Across HSS, inadequate training of new employees or training to support shifting service delivery requirements, is raised as an issue that inhibits service delivery and negatively impacts employee morale. Some employees have received minimal formal training for their jobs, while others are asked to take on new service delivery responsibilities without training. To address issues around training, we recommend HSS conduct an audit of training practices and quality across areas where there is high growth, high turnover, or frequently shifting service delivery requirements. Training development and delivery can be determined according to audit findings.

• Build a business case for Technology improvement

In modern organizations, process efficiency is closely tied to technology, which drives workflow and provides access to information. As indicated in the assessment, it is likely that throughout HSS opportunities exist for using technology to streamline processes or decrease employee workloads. While costly, technology holds significant potential for return on investment. HSS must deliberately focus on identifying where technology can streamline process, and use that data to build a comprehensive business case demonstrating the return on investment for technology improvements. This step must be undertaken with involvement from the County's IT stakeholders (e.g. those focusing on Enterprise Architecture) to ensure appropriateness of solutions and support for change.

Resources

While resource constraints exist in all organizations, they are especially severe across many public entities, a circumstance also seen at HSS. In addition to limiting service delivery, constant resource constraints can put undue stress on employees, leading to decreased morale, lower employee engagement and ultimately, burnout and turnover. Resource challenges may never be fully remedied, however they can potentially be substantially improved by reducing resource demand. Process, culture and structural recommendations already noted will no doubt improve the current state. The following recommended steps will build on those improvements.

• Assess data management systems for improvement opportunities

Accessing data and information sharing are particularly difficult within HSS due to the lack of systems that link client information across divisions. As a result, employees spend time and energy looking for, requesting and accessing information. To lessen the load around information sharing, HSS must take a concerted approach to understanding its data sharing and database needs. In building databases and technology, HSS may be able to leverage existing platforms and technology architecture being leveraged by its peer organizations.

• Identify ways to decrease caseloads or explain why

HSS caseloads are significant, and how they are balanced or justified may not be effective and potentially a cause for decreased morale. Employee perceptions are that caseloads are unevenly distributed and their requests for support fall on deaf ears. To address the issue, HSS must take a close look at the distribution of caseloads across employees and identify underlying root causes to avoid issues in the future (e.g. varying employee capabilities, lack of training, process for assigning caseloads...). HSS must also take steps to ensure employees' resource concerns are heard, and are properly explained if they cannot be addressed.

Job Design

Job Design essentially relates to the scope boundaries of each position within HSS. In some cases, boundaries are set by classifications, which may lose relevance overtime as roles evolve due to service delivery needs. In other cases, the boundaries of jobs are limited by employees themselves as they become rooted in their daily work. The result in either case is that employees think of their work as narrowly confined, for instance as working a particular division and concerned about their outcomes rather than working for HSS as a whole and responsible for all of the department's outcomes. HSS has an opportunity to evaluate job design to pinpoint how they can be improved to broaden employee thinking around their role. To improve job design and identification with roles we recommend the following.

• Shift deputy mindset from being division leaders to HSS leaders

For many of the changes suggested in this assessment to come to fruition, the HSS leadership team must begin to function as a more cohesive unit. Achieving this state is rooted in how deputies think of their role, either as divisional leaders or as HSS leaders. Currently HSS leadership places a bit more of its emphasis on individual divisional outcomes. A future state, where HSS is even more client-centric will require leaders to look at and own department level outcomes as much as their divisional outcomes. This step can be accomplished through focused team building and leadership discussions within the context of becoming more client centric and potentially shifting toward a different organizational design.

• Assign a Taskforce to assess the impact of job classifications

To ensure job classifications are not negatively impacting the job's design, HSS can convene a task force with a mandate to examine the relevance and impact of job classifications. This step will be particularly important if HSS pursues a reorganization. If done outside the context of reorganization the task force will be well served to focus on areas where organizational changes have been difficult due to job classifications. Relying on support partners, this work should be done in collaboration with County HR to ensure appropriateness of solutions and support for change.

• Develop shared understanding that the job is more than the classification

Beyond looking at job classifications, HSS will benefit from developing a shared understanding amongst employees that their work need not be confined by their classification, or even their particular role. The intent for this shift in thinking is to move toward a unified vision, rather than siloed and compartmentalized view of HSS. This shift will require a sustained effort and reinforcement by leaders, beginning with consistently voicing it within the People First communication campaign. Essentially, employees have two jobs: to represent the full scope of HSS as well as being responsible for their particular domain.

Implementation & Action Planning

Implementation and Change Management Plan

To aid in thinking through how the recommendations are implemented, three lists of tactical activities (short, medium and long-term) will help begin to translate the recommendations to actions.

Short-term – mo 1–6

- Determine HSS organizational design and gain buy-in from stakeholders
- Rollout Leadership Principles
- Launch People First communication campaign focusing on, mission, vision and values that will guide HSS into the future... communicating quick wins
- Execute short-term actions to build employee centric culture (security, recognition, leadership visibility)
- Instantiate language and behavior that represents HSS as a whole
- Shift deputy mindsets from being division leaders to HSS leaders
- Organize task forces to dive into process design

Medium-term – mo 7–18

- Plan and execute reorganization
- Build multi-disciplinary teams as a vehicle to structure cross-functional effort
- Organize task forces to address accountability, training, data systems and technology analysis, training, caseloads, job design and classifications
- Build business cases for technology, resourcing, and process improvements
- Develop tools to drive accountability
- Create a dedicated Workforce Culture role
- Expand cross functional awareness

Long-term and ongoing

- Plan and execute reorganization
- Enhance information sharing
- Reflect employee input
- Build trust by walking the talk
- Identify ways to decrease caseloads or explain why

The information learned during the Organizational Assessment will directly inform the design of the Scenario Planning* workshops. The Scenarios used to support the long-term strategic planning will incorporate external emerging trends and internal departmental challenges to include employees in planning and problem solving. Leveraging the power of employee knowledge and commitment as a cornerstone of inter-agency planning will yield benefits to both community impacts and employee engagement.

Appendix

Appendix

Peer County Benchmarking: Best Practices

Shasta County

Tracy Tedder, HHSA Business and Support Services Branch Director

Context

Founded as a superagency in 2006/07, Shasta County HHSA organized as a target-population specific structure to **"help our local residents in an integrated way with the variety of social, physical and behavioral health challenges they face."**

Prior to consolidation, Shasta faced **programmatic and department-wide siloing, disorganized service delivery to clients, overspending on hospitalization costs and fiscal inefficiency** as a result of a lack of communication between branch directors and program and admin staff.

Solution

Current structure reflects ongoing reorganization established by 2011-2020 Strategic Plan

- The first 10 years of the Strategic Plan focused on integrating each individual branch and providing consistent messaging for people who hadn't worked together prior
- The recently revised Strategic Plan is focusing on agency-wide integration, improving inter-branch communication and implementing new policies and customer service standards. Additionally, they plan to strengthen external partnerships and community mobilization to better respond to issues of substance abuse.

Organized by customer life cycle and region (Children's Services, Adult Services, Public Health, Regional Services and Business and Support Services branches)

- All administrative functions that operate across branches exist under the Business and Support Services branch
- Agency Director has 6 direct reports and 1 dotted line reporting relationship
 - All Branch Directors report to the agency director
 - HHSA Program Manager oversees Community Relations Unit/Outcomes, Planning and Evaluations
 - This is one individual who handles internal and external communication and coordinates across different branches, stakeholder groups and peer supports.
- Currently in discussion to promote Business and Support Services Branch director to Assistant Agency Director Role
 - While it served the new structure initially to have all branch directors equivalent, the role has expanded as the agency has grown to operate as an "in between," for programs and finance and between county and agency.

Impact

Shasta County has seen success by **promoting leadership with a preventative care mindset** and a balance of interpersonal skills and administrative knowledge

- An emphasis on prevention prioritizes mental health care and reduced hospitalization, therefore reducing costs.
- This restructuring to integrate Business and Support Services staff across all branches has opened up resources across the agency and creates more flexibility for funding by making fiscal staff more available to all programming staff and to each other.



Placer County

Jeff Brown, HHS Department Director Rebecca Mellot, Former HHS Administrative Director

Context

Though Placer County has long been considered a pioneer as one of the **first Health and Human Services agencies to integrate in the mid-1990s**, since 2011 they have been undergoing an additional restructuring with a focus on the **integration of the administrative division and breaking down silos within the agency**. They are **organized by population, offering two systems of care for Adults and Children's Services** and supported by a centralized Admin/Fiscal division, Public Health division, Human Services division and finally, Environmental Health and Animal Services.

Agency director, Jeff Brown, recognized the importance of structure but emphasized the need for trusting relationships nurtured by a collaborative environment and culture as a pivotal element to success.

Solution

While **more fiscally complicated**, **Placer is committed to creating intensive and wraparound programming** that address what individuals actually need to survive, especially for the most resource-needy clients. Current structure highlights a number of mechanisms in place to support integration and collaboration to better serve clients and families.

- Agency Director has 8 direct reports including Division Directors, Staff Services Manager and a Secretary
- Children's System of Care is entirely co-located and working as a multi-disciplinary team
 - Probation officers work directly with mental health officers and child welfare services to provide family advocates and build a case together
- Mental Health Director also serves as the Adult Services Director to better tackle the issue of getting adults into timely mental health services.
 - Over the last year, Placer has reduced this process from 3 months to 3 weeks.
- Coordination committee created to specifically focus on Homelessness with representatives from all divisions plus sheriff and probation.

Impact

Following challenges with the county's IT Division and conflicting directives, the Agency is committed to moving toward a data warehousing system and enhancing data collection, analysis and public dashboards.

• In the meantime, they now hold monthly Directors Meetings that include IT staff to improve IT-Executive communication and streamline processes and IT knowledge.

One of the ways Placer has implemented the **Whole Person Care approach is through bundled payment options in which clients pay per member per month, rather than a fee for service.**

Yolo County

Rebecca Mellot, HHS Assistant Agency Director

Context

Following a relatively recent integration in 2015, Rebecca Mellot (formerly of Placer and Shasta counties) was brought in as Assistant Agency Director to oversee all administrative functions and reorganize the agency for more efficiency. The **agency is organized by population**, with a branch dedicated to Children, Youth and Family and another to Adult and Aging and are supported by an Administrative branch, run by Ms Mellot, and a Community Health branch. With a **focus on offering a continuum of care, Yolo works diligently to offer a "no wrong door,"** approach, relying on a centralized call line and the ability for **any client to walk into the agency and have access to as many services as they might need with as few assessments as possible**.

Solution

In this model, **the agency director has 6 direct reports**; Assistant Agency Director, Child, Youth and Family Director, Adult and Aging Director, Community Health Director, a part-time Health Officer with no direct reports and finally, a Service Centers Branch Director.

With a great deal of experience, Ms Mellot suggested the following structural and collaborative approaches to creating a customer-centric agency that serves each client holistically.

- All administrative functions report to one person who understands the financing of all branches and how they work together.
- Program managers work together to teach each other about their programs and create coordinated case plans.
 - Implement linkages programs and write case plans with eligibility and financial services at the table
 - Mental health directors sit in both Children, Youth and Family and Adult/Aging
- While the challenge of translating an integrated financing approach into state and federal funding streams (organized around specific services) is challenging, having an agency wide compliance committee helps ensure quality from a data driven approach.

Impact

In FY 2016-17, Children, Youth and Family Branch's Mental Health (CYF-MH) program met its program objectives by *establishing an internal team of 3 clinicians, 2 mental health specialists, a child welfare services social worker and a child welfare services manager.* Identified *successes are in large part attributed to the program's integration and partnership with multiple HHSA partners*, including the department of Employment and Social Services, the Adult and Aging Branch, the CA Children's Services and Child Welfare Services.

The Adult Wellness Alternatives program implemented several strategies for supporting adults with mental health issues and who were experiencing homelessness and incarceration by expanding programs and partnerships. HHSA decreased the percentage of Full Service Partnership consumers experiencing homelessness by 75%. Of the program's 105 consumers, 103 of them (98%) were not incarcerated. The Adult Wellness AOT program had a 40.7% reduction in days spent hospitalized (from 572 to 339 days), a 18.7% reduction in days spent incarcerated (from 203 to 165 days), and a 60.9% reduction in days spent homeless (from 448 to 175 days). The program also notes increased socialization in the Wellness Centers.

Senior Peer Counseling mobilizes volunteers from the community to provide free, supportive counseling and visiting services for older adults aged 60+ in Yolo County who are troubled by loneliness, depression, loss of spouse, illness, or other concerns of aging. **The program notes that the number of clients served by Senior Peer Counseling has doubled during FY 2016-17**.



UPDATED: August 23, 2018

San Diego County

Dale Fleming, HHSA Strategy and Innovation Director

Context

Serving a population of over 3 million people in a profoundly diverse and quickly changing region, San Diego has built a deliberately interwoven Health and Human Services Agency designed to serve the rich and poor, inland and coastal, young and old, urban and rural. **Prior to their current structure, implemented in 1998, they operated as two agencies siloed through funding streams**, with a one size fits all policy approach that met about 80% of the populations' needs but left too many unserved. The **organization is overseen by the CAO**, a deputy within HHSA, and the COO, with support from a financial executive for the county. Additionally, they are directly connected to the community through Live Well San Diego, a community-based initiative launched in 2014 to improve awareness and health throughout the county. In the early stages of the reorganization, they were met with tension and a struggle for power and autonomy, however, with time and a commitment to improved communication and branding, they have imbued the agency with a culture of acceptance and shared vision.

Solution

Organized by a dual-matrix structure, San Diego **delivers 6 programs through 6 regions, overseen by 3 regional directors.** Each regional director acts as an implementor for the agency's priorities and practices, while deploying assets and resources on the ground based on specific needs and regional differences. The agency relies on **interwoven goals and expectations at the executive level that are then driven down by region.**

Since **moving to this model in 1998**, San Diego has spent much of the last 20 years refining their communication efforts and coordinating across the leadership and frontline staff, finding as many opportunities as possible for cross-department collaboration and internal/external partnerships. Most important to maintaining this structure is the need for a single voice and a shared goal and vision from the top to the bottom of the agency.

Programs are organized into 6 departments: Aging and Independence Services, Public Health, Child Welfare Services, Eligibility Operations, Behavioral Health and Housing and Community Development.

Underpinning this complex structure is an expansive Administrative Department including the Office of Medical Care Services, Office of Strategy and Innovation, HR, Information Technology Services, Office of Business Intelligence, Office of Integrative Services and Connect Well San Diego.

- The Admin division works directly with programs to ensure they understand both traditional revenue streams and the opportunities for innovative funding practices.
- The Agency works hard to ensure those on the frontline are well informed and onboard with all decisions and changes, prioritizing empowerment, delegation and a bottom-up transfer of information.
- They hold weekly Executive Cabinet meetings for updates and HR issues followed by Executive Team meetings to discuss deployment and implementation.

Impact

In 2017, San Diego, increased the number of customers served by email at the Access Customer Service Call Center by **103%** (**39,854** to **81,010**), by promoting alternative pathways for individuals and families to access information about self-sufficiency programs and their ability to provide information electronically.

Diverted 47% (3,685 of 7,852) of individuals from psychiatric hospitalization or incarceration through crisis intervention services provided by PERT, which include linkages to appropriate services. The PERT model pairs a clinician with law enforcement to ensure appropriate response to an individual who may be experiencing a mental health crisis.

Provided 90% (140 of 156) of youth enrolled in intensive home based services (i.e. Wraparound) with resources to help them remain or be placed in a home-like setting, this further improved their connection to home and community and reduced the use of costly group home placements, in accordance with the California Well-Being Demonstration Project.

Maintained 99% (546 of 550) participation in the Multipurpose Senior Services Program (MSSP) case management for seniors by providing resources and/or assistance that helped avoid, delay or remedy *inappropriate placements in nursing facilities*.

Recertified 98% (24,495 of 25,066) of annual reassessments for IHSS timely so that older adults and persons with disabilities received the appropriate level of care to remain safely in their own home, exceeding the State performance expectation of 80%.

Served 9,521 (4% increase) older adults and caregivers who are vulnerable to mental illness in collaboration with Aging & Independence Services, and improved their access to prevention, early intervention and treatment services.



Appendix: Sources

HSS Interview List

Aaron Crutison, Child Welfare Andrew Williamson, Behavioral Health Angela McClure, Compliance Angela Shing, Employment & Eligibility Bela Matyas, Public Health Brigitta Corsello, County Administrator Connie Patterson, Administration Debbie Vaughn, CAO Analyst Debrah Ditto, Administration Emery Cowan, Behavioral Health Esala Nakalevu, Administration Girlie Jarumay, Administration Janine Harris, Administration Jayleen Richards, Public Health Joyce Goodwin, Public Health Kelley Curtis, Employment & Eligibility Kristen Neal, Administration Leticia De La Cruz- Salas, Behavioral Health Lisa Lin, Administration Meg Nealon, Special Investigations Bureau Michael Stacey, Medical Services Niccore Tyler, Administration Sandra Sinz, Behavioral Health Santos Vera, Medical Services Ted Selby, Medical Services Teri Ruggiero, ODAS Tess Lapira, Administration

Best Practice Interview List

Amie Miller, Behavioral Health Director, Monterey County Health Department

Dale Fleming, Strategy and Innovation Director, San Diego County Health and Human Services Agency

Jeff Brown, Director, Placer County Health and Human Services Department

Rebecca Mellot, Assistant Agency Director, Yolo County Health and Human Services Agency

Tracy Tedder, Business and Support Services Director, Shasta County Health and Human Services Agency