

Proposed Health and Social Services Reorganization

Workshop Presentation

Presented to Board of Supervisors and public on May 21, 2019 Presented by Gerald Huber, Director, H&SS and H&SS Team, and Loree Goffigon, Performance Works



Health and Human Services delivery marches toward integrated care to address increasingly complex needs Within the the last 5 years, Shasta, Placer and Yolo Counties have transformed into integrated organizations to better serve their communities

San Diego County paved the way toward integration beginning in 1998



Our objective is a fully integrated agency, organized around the people we serve and delivering population-centric care



Changes in health and social services

Understanding where we are now

How we propose to improve H&SS



We've been successful delivering services in a less complex environment

- H&SS has long history of providing critical support to residents of Solano County.
- Historically, H&SS served a smaller, more rural county and a less complex constituency.
- Structure of H&SS at the time was largely effective and suitable for our work.



Our landscape is changing quickly

As of May 2018, 24.5% of the County population was receiving public assistance benefits, up from 19.2% five years earlier.



The unmet need for mental health and substance abuse services is leading to higher rates of emergency department visits and hospitalizations compared to state benchmarks: **75% higher for mental health issues and 84% higher for substance abuse issues**.



The **senior population is growing** and the requests for In-Home Supportive Services are increasing.



Single parent households have increased to 37% (2016) from 30% (2011) and domestic violence rates are higher than the state average.



The number of **homeless individuals is up 14% since 2015**, with 62% of those people saying they have a disabling condition such as physical disability, mental illness, alcohol or drug abuse.



We face different challenges today

- Solano County
 - Population size
 - Diversity
 - Complexity
- H&SS
 - Expanded locations
 - Programs siloed
 - Collaboration is more difficult.
- Client experience
 - Range of services, support

We have opportunities to become more customer-centric and more effective.



Complexity of health issues

Solano County compared to California

- Higher rates of obesity, smoking, inactivity
- Higher rates of diabetes, heart disease, some cancers, STDs

Among Medi-Cal clients and undocumented persons

- Higher rates of chronic diseases, multiple conditions
- Among the severely mentally ill, substance users, and chronically homeless persons
 - Much higher rates of chronic diseases
 - Generally have multiple conditions, are medically complex
 - On average, die 20-25 years earlier than rest of us



Causes of complex health issues

Behavioral risk factors

- Poor nutrition, inactivity, smoking, substance use
- Obesity, hypertension, self-care neglect result

Underlying upstream causes

- Social determinants of health
 - Barriers that operate at a community level
 - Examples: education system, poverty, employment options, single parent home, access to care, neighborhood crime, nearby green space and exercise options

Adverse childhood experiences (ACEs)

- Traumas that cause harm at the individual level
 - closely correlate with later health inequities
 - significantly correlate with adolescent and adult chronic diseases, substance use, mental illnesses



Looking forward we need to approach service delivery differently

Rethink organization of service delivery

Focus on customer-centricity

Group services by population.



Changes in health and social services

Understanding where we are now

How we propose to improve H&SS



We took a hard look at how we can improve

In the past 2 years we have taken substantial steps to identify how we can improve, we:

- Looked at the capacity of the organization
- Conducted an organizational assessment to help us identify the best organization model
- Researched trends and best practices
- Benchmarked similar organizations to capture learnings
- Talked to H&SS partner Community-Based Organizations



We engaged a significant number of employees to understand challenges

We directly engaged 500+ members of H&SS for input to find out how we improve

- Met with 90+ employees and managers, across 10 focus groups
- Interviewed 16 H&SS deputies and administrators
- Facilitated meetings on Leadership Principles
- Conducted listening sessions across H&SS locations with 400+ employees
- Met with union representatives



We've focused on increased employee communications and engagement

- Launched Leadership Principles, and will rollout organization-wide in Summer 2019
- Regular program-level meetings led by supervisor and/or manager
- Regular management-level meetings with managers and/or supervisors
- Periodic Division-level meetings for all staff

From Senior Leadership

8 update emails to all staff

5 quarterly **newsletters** to all staff

8 Brown bag meetings with staff through 2018-19

100 flyers distributed throughout locations

Occasional videos



We looked externally for trends and best practices

We spoke to similar CA counties and consulted sources across the nation

- Researched trends in the County, State and beyond
- Benchmarked 5 peer counties and interviewed their senior leaders
- Referenced 30+ research sources



What we discovered: H&SS in 2019

Programs and activities are siloed

- Collaboration for more effective service delivery is complicated by divisional silos.
- Success is enabled by employees' commitment to service, rather than systemic practices or approaches to integrated service delivery.

Organizational structure is inefficient and a barrier to collaboration

- Organizational structure reflects funding streams and legislative initiatives, rather than service requirements.
- Similar programs are scattered throughout H&SS despite shared populations and similar outcome goals.
- Management to supervisor to non-supervisory staff ratios are not appropriate or effective throughout H&SS.
- Work process redesign and/or streamlining are necessary for improving performance and unleashing productivity.
- Information sharing across groups is labored. Data management and sharing are seen as the key to positive client outcomes.

Client experience is often disjointed and complicated

• Significant opportunities exist for better linking services and enabling collaboration across programs to have a greater impact on client care.



We have opportunities to improve in five key areas

Structure

- Build a compelling vision around customer-centricity
- Design the organization to address specific objectives
- Build structured collaboration in key areas
- Increase cross-functional/program
 awareness

Work Process

- Design/redesign work processes
- Enhance onboarding and professional development training
- Clarify consistent work practices to improve efficiency

Culture

- Build an employee-centric culture
- Create a dedicated Workforce Culture role within H&SS
- Foster innovation and creative problem solving
- Prioritize commitment, trust, and engagement of employees

Job Design

- Assess relevance and impact of job classifications
- Shift deputy mindset from divisional oversight to H&SS leadership

Resources

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



Vision for H&SS 2025

- A system that is more efficiently organized
 - Integrate like programs and activities; reduce duplication of effort
 - Modify organizational structure as necessary
- Clients have easier service access, a better experience and optimal outcomes
 - Implement client navigation services
 - Integrate appropriate programs
 - Collaborate across programs to optimize prevention strategies
- Employees are more satisfied and retention improves
 - Employees are engaged, informed and actively involved across systems
 - Monitor workloads and address when necessary
 - Provide professional growth and promotional opportunities

Current Organizational Structure

7501

7591 Creater of Health & Stor Doca Genald R Haber Alocated Pffi: 1 PCN: 013664 Current Job Tiller Director of Health & Stor Svos Location: Beck Avenue Total Orect Reports: 5

						Total Direct Repo Total Headcount								
7545 Cited Statute Encodimentals Response To Readen EE ID: 2029 PCN: 0001874 Convert 36b Title: Convert 36b Title: Convert 36b Title: Convert Apports: 5 Total Interdent: 22	Current 3ob Title: Dep Director H3d5-Hea	10141 00012081	778 Ces.Director Mark Sandra S Adocted PTI: EE D: PCN: Current 30 Title: Dep Dector 40 Title: Dep Dector 40 Total Orect Report.	25 Behavior165 Duong 1 1,1674 3001,2082 25 Behavior165 Beck Avenue		4 00013297 Bed: Avenue Http:///2	25 auto Directory et al Alocated PTIT: DE Uto- PCN: Current Solt Title: Locaterin Total Headcourt:	SReambaffen saltion 1 00014658 Beck Avenue fai 2	7 Canadiana Open Mosenief FFE FE To Poly Current Job Title Looation Teal Previount	position COD15914 Beck Avenue stat: 5	Des Director HS Aaron Allocated FTE: EE ID: PCN: Current Job Title	Cruitison 1 69-1 00015916 # 805-doc Prog CWS Bock Avenue P	Ceo Director Hi Hichael Alocated FTE: EE 20: PCN: Current Job Title	W Stakery 1 9399 00016240 MdS Med Svoii Off Bedd Avenue tristi 50
YS45" 2945 Accounting Specialize Section 1710 Accounting Specialize Section 1710 POIN 001497 Outment Julie Times Accounting Specialize Accounting Specialize Octime Julie Times Accounting Specialize Octime Julie Times Accounting Specialize Octime Julie Times Accounting Specialize Social Program Specialize Total Presents Social Program Specialize Total Presents Total Presents Octime	Allocated PTE: 1 Allocated PTE: 1 Allocated PTE: 1 Allocated PTE: 1 Bit State 1 EE 5 7 1 EE 1 EE 1 Allocated PTE: 1 1 Bit State EE 1 1 1 EE 1 <td< th=""><th>Reathris Kappustinszky całkad PTIE: J Alla Do 12367 EE ii 00030403 PiCT Public HBN Lab Director Public HBN Lab Director storn: Courage Drive Loc Olicect Reports: 15 Tot</th><th></th><th>2760 Merchai Heafth Ser Voor Admer Lettica De La Cruz Saller Biologie (THE 900 2000) 2000</th><th>7650 The Construct of Construction of Construc</th><th>7659 T Ensionment Effolds Admen Telefaba D Peddock Moored FTE: 0.0 EE ID: 0.0015131 COL: 0.0015131 COL:</th><th>7501 Exact Hensor: Kalo Riskehru Alkozeko ITI: PCR: 001059 Connent Job Tite: Locater: Bed Annue Total Hesdount: 4 2007</th><th>2501 Brain Terrains Liapin Albotate/Titt: 1 Citibit 2000 Control 2001 December of Admin Services Total Pice Royal Market Total Pice Royal Total Pice Royal Total Pice Royal</th><th>2658 Sector Program Supervisor Clouds Hiterman Allocate/FIE: 3 BE ID: 0001199 Control Jab 196: 0001199 Control Jab 196: 0001199 Control Jab 196: 0001199 Sector Abritis Sector Program Supervisor Total Price Hadrount: 6</th><th>7501 Dep Constance & GA Manager Chery Lie Okker Listers UII 20 Constance & GA Manager UII 20 Constance & GA Manager Location: Bick Annue Total Precisione & GA Manager Location: Bick Annue Total Precisioners</th><th>7609 Office Coordinator Alboard TN Tarbies Coordinator Corrent Jab 1980 Office Coordinator Coordinator Total Presct Reports: 0 Total Presct Reports: 0 Total Mesidount 1</th><th>7468 Central Constitute Satu Amanda L Smit 16 Cm 557 00011413 Cannet John Constitute Constitute Central Constitute Satu Central Constitute Satu Central Constitute Satu Canada Constitu</th><th>7800 Class Backtered Jaule Wink 3 Gapay Alsoner TIL 25 Ball 2015 Control 100 Class Carent 30 Tile Carent 30 Til</th><th>2588 Christinsten Scettring Hickeler Leary Rometer Till Brite Lizze Corrent skill Teler Corrent skill Teler Corrent skill Teler Corrent skill Teler Corrent skill Teler Corrent skill Teler Telal Treet Reports 14 Total Preed count: 15</th></td<>	Reathris Kappustinszky całkad PTIE: J Alla Do 12367 EE ii 00030403 PiCT Public HBN Lab Director Public HBN Lab Director storn: Courage Drive Loc Olicect Reports: 15 Tot		2760 Merchai Heafth Ser Voor Admer Lettica De La Cruz Saller Biologie (THE 900 2000) 2000	7650 The Construct of Construction of Construc	7659 T Ensionment Effolds Admen Telefaba D Peddock Moored FTE: 0.0 EE ID: 0.0015131 COL:	7501 Exact Hensor: Kalo Riskehru Alkozeko ITI: PCR: 001059 Connent Job Tite: Locater: Bed Annue Total Hesdount: 4 2007	2501 Brain Terrains Liapin Albotate/Titt: 1 Citibit 2000 Control 2001 December of Admin Services Total Pice Royal Market Total Pice Royal Total Pice Royal Total Pice Royal	2658 Sector Program Supervisor Clouds Hiterman Allocate/FIE: 3 BE ID: 0001199 Control Jab 196: 0001199 Control Jab 196: 0001199 Control Jab 196: 0001199 Sector Abritis Sector Program Supervisor Total Price Hadrount: 6	7501 Dep Constance & GA Manager Chery Lie Okker Listers UII 20 Constance & GA Manager UII 20 Constance & GA Manager Location: Bick Annue Total Precisione & GA Manager Location: Bick Annue Total Precisioners	7609 Office Coordinator Alboard TN Tarbies Coordinator Corrent Jab 1980 Office Coordinator Coordinator Total Presct Reports: 0 Total Presct Reports: 0 Total Mesidount 1	7468 Central Constitute Satu Amanda L Smit 16 Cm 557 00011413 Cannet John Constitute Constitute Central Constitute Satu Central Constitute Satu Central Constitute Satu Canada Constitu	7800 Class Backtered Jaule Wink 3 Gapay Alsoner TIL 25 Ball 2015 Control 100 Class Carent 30 Tile Carent 30 Til	2588 Christinsten Scettring Hickeler Leary Rometer Till Brite Lizze Corrent skill Teler Corrent skill Teler Corrent skill Teler Corrent skill Teler Corrent skill Teler Corrent skill Teler Telal Treet Reports 14 Total Preed count: 15
Current Job Title: Special Programs Supervisor Location: 431 Executive Court North Total Direct Reports: 6 Total Direct Reports:	Resident Cosx Advoc 4 Bell Dir. 1 Advoc 5 1 PCH 1 PCH 571 PCH 0012337 PCH PCH 571 Current Joh Tiller Current Joh Tiller PCH PCH 573 Current Joh Tiller Provides Mesager (PL) Current Joh Tiller Provides Mesager (PL) Local 5740 Total Direct Reports: 5 Total Total	Di 9415 EE I: 00014126 PCI rent Job Title: Cur Health Services Administrator tion: Tuolumne Street Loc Il Direct Reports: 2 700		Processing in Roard Certil Richeller Ring Allocated FTE: 1 EE Dr. 12561 RON: 0003712 Current Job Teller Paychearst Bloard Certil Location: Courage Drive Total Direct Reports: 9 Total Headcount: 14			USCS Florma Adaptot Alacces Johnson II Billo II ISS9 PCP: 00015005 Current Joh Tiller HaldS Planmag Avalynt Loadkor Bick Averue Tolar Devet Naports 0 Tolar Heedbaurts 1	HIGG Planne Andret Robins of Haltheam More and States and States Robins of States Robins and States NGS Planne Andrets Locatern Tabl Planne Beck Annue Tabl Planne Beck Manue Tabl Planne Beck Manue	Conclusion: A chainst Summers: Arshad Macours: Arshad BID: 11 100: 01595 Current Job Tifle: Compliance & QA analysis Lication: Beck Analysis Lication: Beck Analysis Lication: Beck Analysis Total HeadGount: 1	Constitution 2 Data Analysis The C Lenson 1 BU ID II 1522 PCN: 00015996 Current 346 Titles: Compliance & GA Analysis Compliance & GA Analysis Total Headcount: 1 2005	7609 Aharstay Tanza Sectification Option Sectification Aharstay Terministication PCIN 000 2005 Content Statistication 0 Sociation: Bock Avenue Total Headboard 0 Total Headboard 0	2468 Social Points Summa Summany Social Points Allocated fills Allocated fills: 1 PE Dr. 2344 Current Jab Title: 0013314 Current Jab Title: Social Programs Supervisier Location: Bock Avenues Total Headlount: 5	73880 Citic Engansi Sundary Shandh J Fuller Labotato TTE E 2015 City	2560 Great Manager Seatha Joney Allocated ITT I PCIC 001224 Current Joh Tise Control Total Twanger Coston Contact Manager Coston Contact Manager Total React Reac Cost Age Shrift Total React Reac 20
Tetal Headcount 7 Tetal Headcou	Jayleen II Richards Aloca Alocatel 715: 1 Aloca ECD: 7959 ECD PCP: PCP: 7059 ECD PCP: Current 3cb 15fe: PCP: PCP: PCP: Location: Beck Avewall Location: Total	Cynthia J Watson cated PTE: I Allo Dr 22030 EE: I: 00036052 PCC I: numeric bo Title: Cau Numing Services Director I Numing Services Director I tom: Deck Avenue Orect Reports: 4 Tot	7560 Mental Hells Services Honoau Andrew H Williamson Isoated FEI II IIII De Division Services Manager cathoric Carage Drive Mental Health Services Manager cathoric Carage Drive Intel Dect Reports S tal Headcourt ID	7799 Hendal Health Service (Mar Dr.) Alexaniary C Lacory Alexaniary C Lacory EE (Dr.) EXTREMENT 1001 FCN: 00015599 Current Job Title: Montal Health Services Mar(Sc) Location: Black Avenue Total Headisunt: 12			Community Devices Coordinates Searchard & Rosee Monzaed/THE El Dr. 19440 PCH: 0002605 Current No TIBE: Community Services Coordinates Locators: Beekkevever Tabla (Peer Reports: 0 Total Headcount: 1	Adam Services Manager Neccere 3 Typer Albord TE: 5196 PC: 00095056 Current 30 Trife: Adam Services Manager Location: Beck Avager Total Prest Reports: 5 Total Prest Reports: 11	Conclusor: B.GA.Anshirat Alcoated TT:: 5.407 PCI: 00019997 Corrent.246 TBI: Complance & GA.Anshirat Complance & GA.Anshirat Toold Divect Reports: 0 Toold Headcount: 1	Construction & Ad Archivest Opene position Additional and a second second Additional and a second second Carrent Job Toles Longston: Back Avenue Tostal Headcount: 0	Social Formous Menazier Christopher W Cassels Alkoardel 712 ED 17 2013 PO20 COLLEGA Collegation Collegatio Collegation Collegation Collega	74680 Social Service: Monace: Monadowick Senith Alexabority: I EE D: 1000 FCN: 0001433 Gurrent Job Title: Social Services Hanager (castoo: Bieck Avenue Total Direct Reports: 2 Total Inestingunt: 20	7580 Patrics 2010 Secretary Patrics 2010ga - Gerhardt El Dio PCP: 0005559 Current 3b Tife: Advantas table Secretary Locator: Beck Avenue Total Direct Reports: 0 Total Headcount: 1	Ziele Gletz Ehsalain Subersteit Gletz Ehsalain Subersteit Constant Subder Tet: Tet: Tet: Toto Constant Cons
Teski Preskount: 5 Teski Preskount: 6	Open portion Allocated PTE: 1 Allocated PTE: 2 Hom PCR: 00016662 PCR: PCR: <td< td=""><td>Joyce A Goodwin cated PTE: 1 Ale D1 S000 EEE 1: 00016388 PCI rent Job Title: Cur Health Services Administrator Ston: Beck Avenue Tot</td><td></td><td>7760 Findowse A Hang Allocated PTE: 1 ETD: 2780 PCN: 000E0000032 Contract Televisere Professional Locators: Tunkinner Street Total Uncet Reports: 0 Total Headcount: 1</td><td></td><td></td><td>7501 Community Services Coordinates Elainet L Saldana Allocated PTE 1 Etito: 11380 PC/01: 0003006 Correspondent Services Coordinates Correspondent Services Coordinates Coordinates Bock-Aretmen Toola Direct Reports: 0 Total Headcount: 1</td><td></td><td></td><td></td><td>7600 Seal Exercise Minaser: Kimberty A Hobwell Allocated PT & Dowell 425 Di 6 400 Carrent 3ob Trise: 0001440 Carrent 3ob Trise: 000140 Carrent 3ob Tris</td><td>7600 Text Administrator FV/M Neck HetTroy Advanced FTE: 1346 PCN: 13165 PCN: 205 TRA Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Total Headcount: 1 Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Synchronia Constraints</td><td>7380 Harta J Gallego Allocated FIE: 0.73 El Di 1902 POI: 000000004 No Phile: 00000004 No Phile: 1900 No Philo: 1900 No Phile: 1900 No Phile:</td><td>2580 Jean A S Unajae Alecated PEt 1 BE D. 13808 PCM 0005000 100 CM 306 Take Force Patient Physics and Neurophysics and Physics Force Reports Total Headcount 1</td></td<>	Joyce A Goodwin cated PTE: 1 Ale D1 S000 EEE 1: 00016388 PCI rent Job Title: Cur Health Services Administrator Ston: Beck Avenue Tot		7760 Findowse A Hang Allocated PTE: 1 ETD: 2780 PCN: 000E0000032 Contract Televisere Professional Locators: Tunkinner Street Total Uncet Reports: 0 Total Headcount: 1			7501 Community Services Coordinates Elainet L Saldana Allocated PTE 1 Etito: 11380 PC/01: 0003006 Correspondent Services Coordinates Correspondent Services Coordinates Coordinates Bock-Aretmen Toola Direct Reports: 0 Total Headcount: 1				7600 Seal Exercise Minaser: Kimberty A Hobwell Allocated PT & Dowell 425 Di 6 400 Carrent 3ob Trise: 0001440 Carrent 3ob Trise: 000140 Carrent 3ob Tris	7600 Text Administrator FV/M Neck HetTroy Advanced FTE: 1346 PCN: 13165 PCN: 205 TRA Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Total Headcount: 1 Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Social Synchronia Constraints Synchronia Constraints	7380 Harta J Gallego Allocated FIE: 0.73 El Di 1902 POI: 000000004 No Phile: 00000004 No Phile: 1900 No Philo: 1900 No Phile:	2580 Jean A S Unajae Alecated PEt 1 BE D. 13808 PCM 0005000 100 CM 306 Take Force Patient Physics and Neurophysics and Physics Force Reports Total Headcount 1
	Allocated PTE: 1 All D: 10019 PCN: 00016543 Current Job Tible: PCN: Health Services Administrator Location: Courage Drive Locat Total Decet Reports: 4 Total	cabed FTE: 0.2 (E) D: PC C: 00036554 current Job Title; abore: Courage Drive Loc Office Aports: 0 Tot	2700 Xing Xing Luo Iliolated PE: 1 IID 200 Ce 000000075 - contract Employee-Professional satisfier Course Drive otal Deett Reports 0 tal Headcount: 1	7788 Hanclin L. Janes-Sullivun Alocated PTE 10 PCN: 000000096 Current Sol Toles: Contront Engloyee Professional Location: Dabbin Steet Float Orient Ingonit: 0 Toles Headcant: 1							2600 Linda Pt Liles Allocated PTEL II I El 2000 00000000 Carrent 3do Trife: Contract Englyse Professional Loadonn Beck Avenue Total Direct Reports: 0 Total Predicount; 1	7660 Deblais L Powell Alocated FTE: 81 00 ED: 0008027 PCN: 0000000053 Current Jab Title: Contract Engloyee Horfesiand Eocation: 8ec4.verse Toda Direct Iugoriti: 0 Toda Heedocut: 1	7580 Alan C Werklin Alocated TTE: 0,73 EF 30: 2158 PCN: 0000000231 Current Jab Tifle: Current Jab Tifle: Conton: Course Drive Total Madication: 0 Total Haddown 1	7580 Christine A Wu Allocatel FTE1 1 EE En OCCOD00303 PCN: OCCOD00303 Current J& Title: Clinic Physical Location) Bedi Avenue Total Preadicuum: 2
<pre>/ellow = Vacant Posit Allocated Positions =</pre>		EE PCI Cor Lec Tot	7706 Hasnain Maqsood Ilocated ITII: 1 IDI: 1440 Ork 0001000144 urrent John Strett Contract Employee-Professional scator: Tuolume Strett Ital Direct Report Ital Direct Report Ital Direct Report Ital Headcount: 1											

Allocated Positions = 1,295 Filled Positions = 1,133 (87.5%) Number of Classifications = 92



Current Programs





Selected New Programs and Key Regulations Since 2010

E&E	FHS	РН	ВН	CWS	
SSI Cash Out	New Guidelines for HRSA Audits	WIC Automation	Proposition 47 Housing Program	AB403 – CCR Requirements	
CalSAWS Implementation	Changes in 340B Pharmacy Programs	Area Agency on Aging	Laura's Law	New Statewide Child Welfare Data System	
1 And Done	Aging Population Demands	Healthy Families America program	Mental Health Diversion	Enhanced Case Review Requirements	
Federal Immigration Impact	Managing Encounters to Enhance Revenues	IHSS New Assessment Methodology	Mobile Crisis Implementation	Resource Family Approval	
Healthcare for Undocumented	Competition for Providers	Whole Childcare Conversion	Drug/Medi-Cal Organized Delivery System	Federal Family First Implementation	
CalWorks Home Visiting initiative	Meeting Fiscal and QA Structure Requirements	Chronic Disease prevention	No Place Like Home and Other Homeless Initiatives	Transitions in Congregate Care for Youth	
CalOAR	Service Demands	Strive2BHealthy	CCR Requirements	Presumptive Transfer	
	Food pharmacy van	Whole Person Care		Bringing Families Home	
		Trauma Center program		Family Team Meetings	
		Solano HEALS		QPI 21	



Emerging Issues

E&E	FHS	РН	ВН	CWS
Employment First Implementation	Stability of Affordable Care Act	Community-wide Health Inequities	Forensics and Re-entry services	Continuum of Care Reform Implementation
Federal Immigration Policy	Healthcare for Undocumented Population	Social Determinants of Health	Homeless with Mental Health Issues	Foster Care Placements
Supplemental SSI Cash Out	Market Competition for Providers	Adverse Childhood Experiences	Housing Resources	New Statewide IT System
New Statewide IT System	Accountable Healthcare	Opiate Abuse	Insufficient continuum of Mental Health care	Transitioning Foster Care Youth
	Behavioral Health Services Integration	Chronic Disease Prevention, Including Dementia	Drug Medi-Cal Organized Delivery System	
	Telehealth	Aging Population	Mobile Crisis Implementation	
		Affordable Housing and Population Dislocation	Mental Health Jail Diversion	



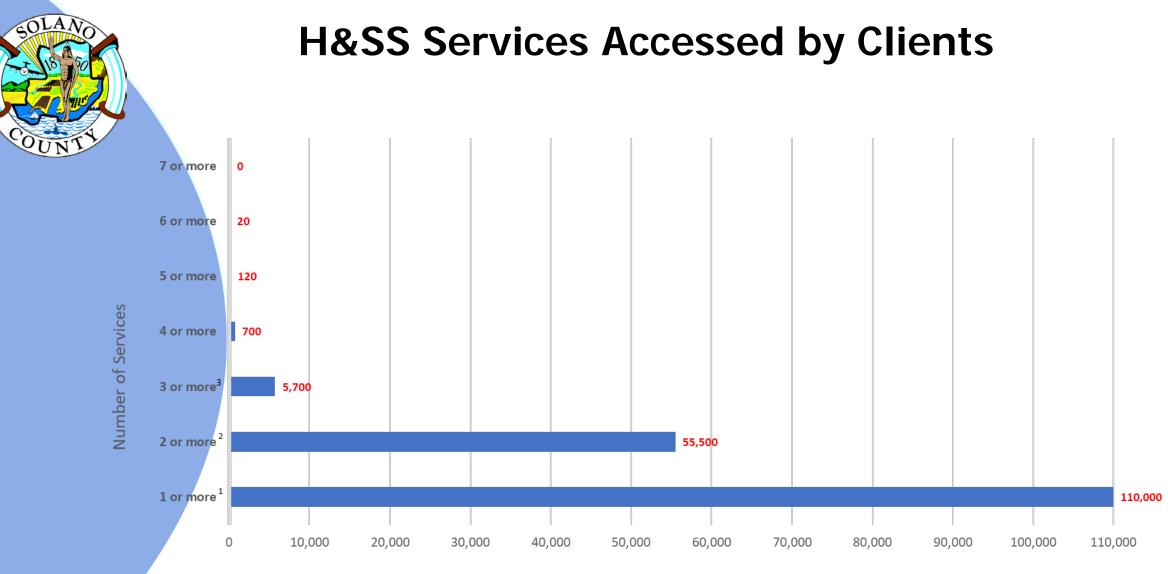
Resulting constraints and challenges

- The breadth of service delivery is expansive but depth of staffing is generally shallow (driven by funding)
 - Most H&SS programs are relatively small and lack enough scale to adjust to surges in demand
 - Limits staff exposure to other programs and cross-training opportunities
 - In contrast, E&E and IHSS are larger in size and numbers with better opportunity for cross-training
- Over past decade, managers have had to oversee more non-supervisory staff; additionally program and regulatory demands are greater
 - Added 226 non-supervisory staff, 14 supervisors, 3 managers since 2010
 - Programs added since 2010 represent 44% of total programs; i.e., there has been a 78% increase in number of programs



Staffing changes over past decade

	Managers	Supervisors	Non- Supervisory Staff
2019	63	112	1118
2010	60	98	892
% Change	+5%	+14%	+25%



Number of Clients

¹ 1 or more services largely driven by Medi-Cal

² 2 or more services mostly Family Health Services, other Employment & Eligibility Services (CalWorks, CalFresh), WIC, IHSS, and Mental Health Services

 $^{\rm 3}$ 3 or more services mostly Behavioral Health and Child Welfare Services



Service delivery is becoming increasingly complex

 Client needs are becoming more complex, especially in Child Welfare Services, Behavioral Health, Family Health Services, nursing programs and senior services

Programs are becoming more complex

- Federal and state requirements are being added all the time
- Documentation requirements are increasingly burdensome
- Service delivery requirements vary considerably across programs, e.g. E&ES vs. IHSS/APS vs. CWS vs. public health programs
- H&SS operates over 40 different IT systems required to receive state and federal funds



Managing employee workloads and caseloads is challenging

- Workloads and caseloads are difficult to compare across programs; services are often very different and are affected by state and federal requirements
- They vary across counties; may be affected by a cap (e.g. E&ES) or local needs
- Workloads and caseloads are dynamic
 - Can increase or decrease based upon the economy and other local factors
 - Some caseloads have grown; others have not
- Workloads and caseloads are impacted by recruitment and retention
- Optimum caseloads are difficult to determine



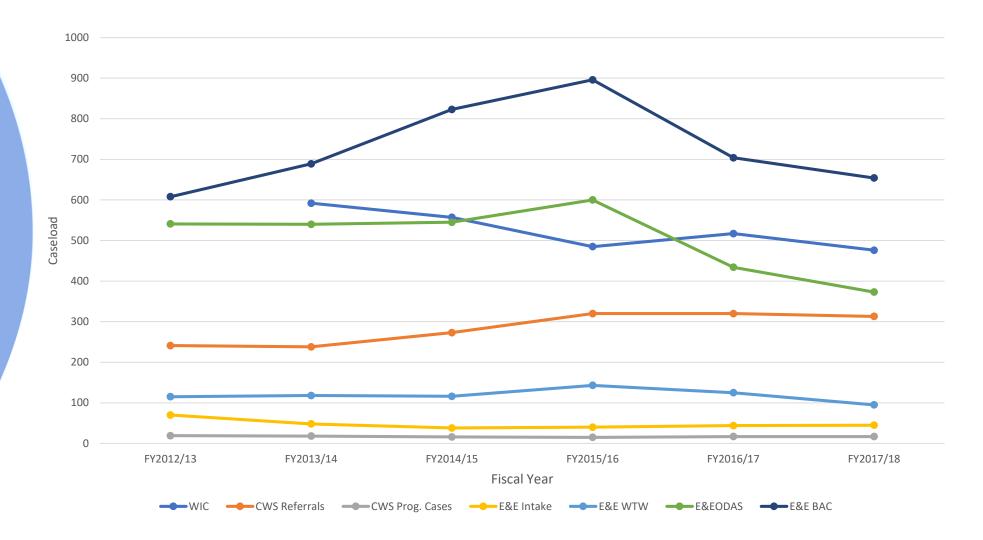
FY2017/18 employee caseloads for selected programs*

Area/Program	Number of clients/worker*			
IHSS/APS	195			
Public Guardian	57			
CWS Referrals	313			
CWS Program Cases	17			
E&ES Intake	45			
E&ES Welfare to Work	95			
E&ES ODAS	373			
E&ES BAC	654			
WIC	476			
FHS Primary Care	157 patient visits/provider/month			

*Actual caseloads, adjusted for vacancies

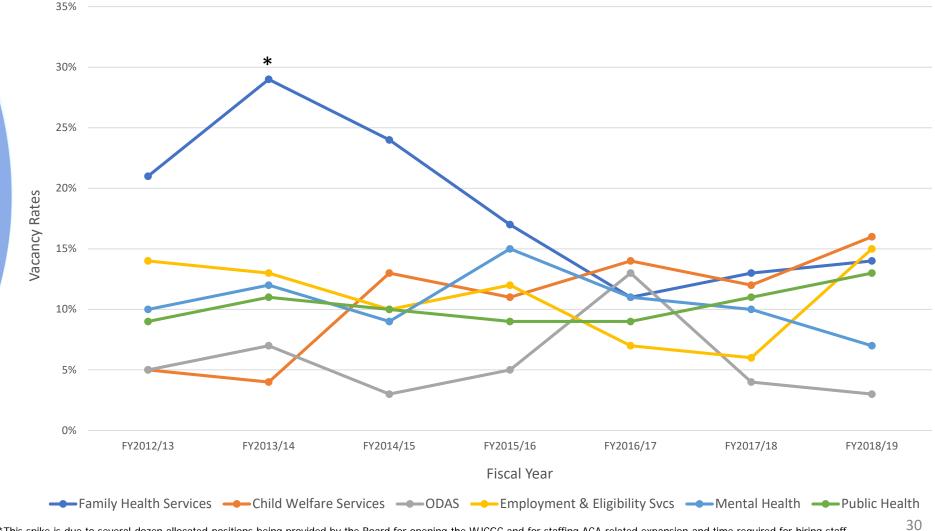


Caseload Growth, selected programs





Vacancy Rates Trends, selected programs



*This spike is due to several dozen allocated positions being provided by the Board for opening the WJCGC and for staffing ACA-related expansion and time required for hiring staff.



Changes in health and social services

Understanding where we are now

How we propose to improve H&SS



We believe through organizational redesign and development...

- Program efficiency can improve productivity and outcomes
- More combined and shared team approaches can create more comprehensive, integrated service
 - Better client and staff satisfaction
 - Respond and adjust to changes in service demand
- Collaborative leadership can promote collaborative care



CA counties are achieving better outcomes through integrated org models

Placer County

2011: Moved to a Population-Centric Model organized around Adult and Children's Service branches.

Sample outcomes:

- Created 19 Whole Person Care Centers throughout the County.
- Reduced response time for adult mental health patients from 3 months to 3 weeks.

San Diego County

1998: Moved to Integrated Model organized around 6 programs and 6 regions.

Sample outcomes:

- Diverted 47% of individuals from hospitalization or incarceration through crisis intervention.
- Recertified 98% of seniors receiving benefits ensuring they are able to remain in their homes.
- Enabled 90% of youth enrolled in services to stay at home

Yolo County

2015: Moved to a Population-Centric Structure focused on Children's and Adult Service branches.

Sample outcomes:

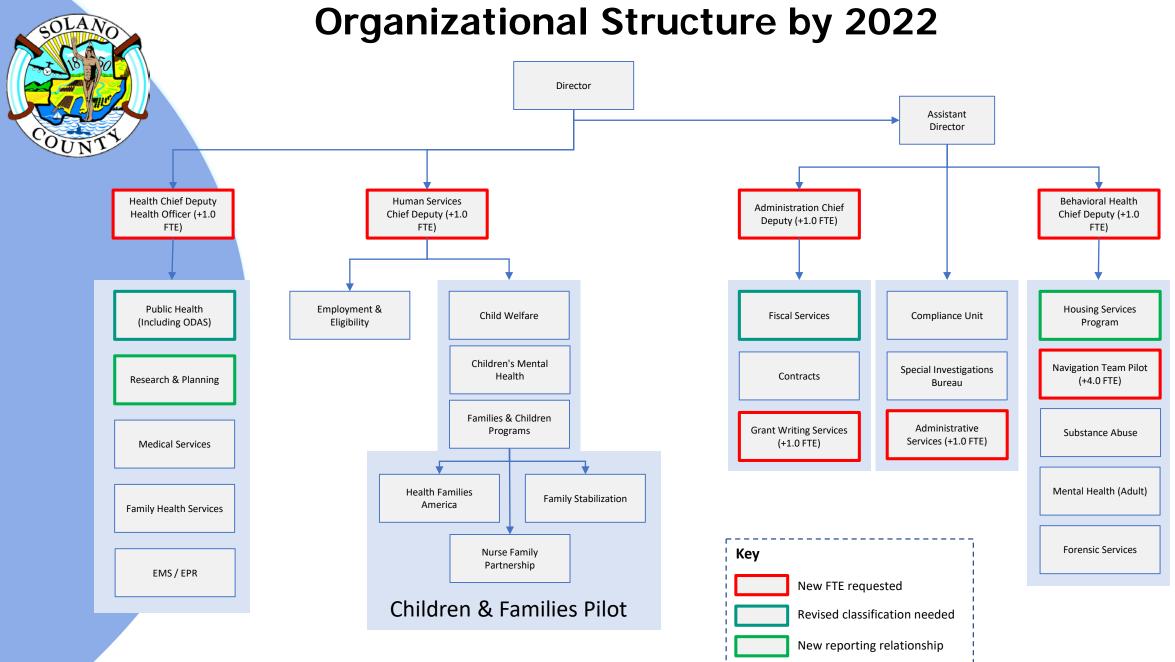
- Doubled number of clients served by Senior Peer Counseling.
- Adult Wellness Program resulted in 40% reduction in hospitalization and 61% reduction in days spent homeless.

Shasta County

2007: Moved to a Population-Centric Structure organized around Customer Life Cycles and Region.

Sample outcomes:

- Increased fiscal efficiency
- Reduction in hospitalization costs
- Increased Agency director leadership capacity



Note: Org Design also adds 3 FTE Administrative Secretary and 1 FTE MCAH Medical Officer positions, not shown



Our roadmap for change

Step One

Year 1

Plan for populationorganized care, prioritizing complex care and child/family programs

Take early action to increase efficiency

Strengthen crossfunctional leadership capacity

Step Two

Year 2

Integrate Child and Family programs

Continue to assess capacity and efficiency

Step Three

Year 3

Assess Child and Family integration

Integrate other areas based on lessons learned

Continue to assess capacity and efficiency



Service Integration to begin in the first 12 months

Begin moving toward population-organized care

Prioritize complex care that crosses divisions:

- Establish pilot client navigation teams (4.0 FTE) to help clients with complex needs access the programs and services they need
- Develop electronic client navigation, with web-based, kiosk and call-in options

Plan for consolidation of Child/Family programs

Develop an implementation plan based upon a feasibility analysis



Infrastructure Actions in the first 12 months

- Early actions already in place to increase efficiency:
 - Consolidated Research & Planning with Epidemiology in Public Health
 - Combined homeless navigators as a unit in Behavioral Health
 - Refocused Compliance Program

Strengthen cross-functional leadership capacity

- Add leadership positions
- Add administrative support
- Begin to integrate, embed or co-locate "like" programs
- Report to the Board on progress



In the Second Year

- Begin integration of Children and Families Programs under shared leadership structure
 - Driven by initial analysis and plan
- Continue to assess the ratio of managers, supervisors and non-supervisory staff to achieve efficiency and integration goals
- Assess effectiveness of navigation teams and expand if successful
- Report to the Board on progress



In the Third Year

- Assess the integration of Children and Families Programs
- Integrate other programs based upon lessons learned
- Evaluate all levels of staffing in accordance with goals of efficiency and integration leading to better service delivery and outcomes
- Report to the Board on progress



H&SS in the Future

- Optimum integration of programs and activities create a streamlined client experience
- Coherent and effective client navigation services
- More efficient organizational structure with strengthened leadership infrastructure
- Population and community outcomes monitored for improvement; not just program metrics



Questions & Answers