



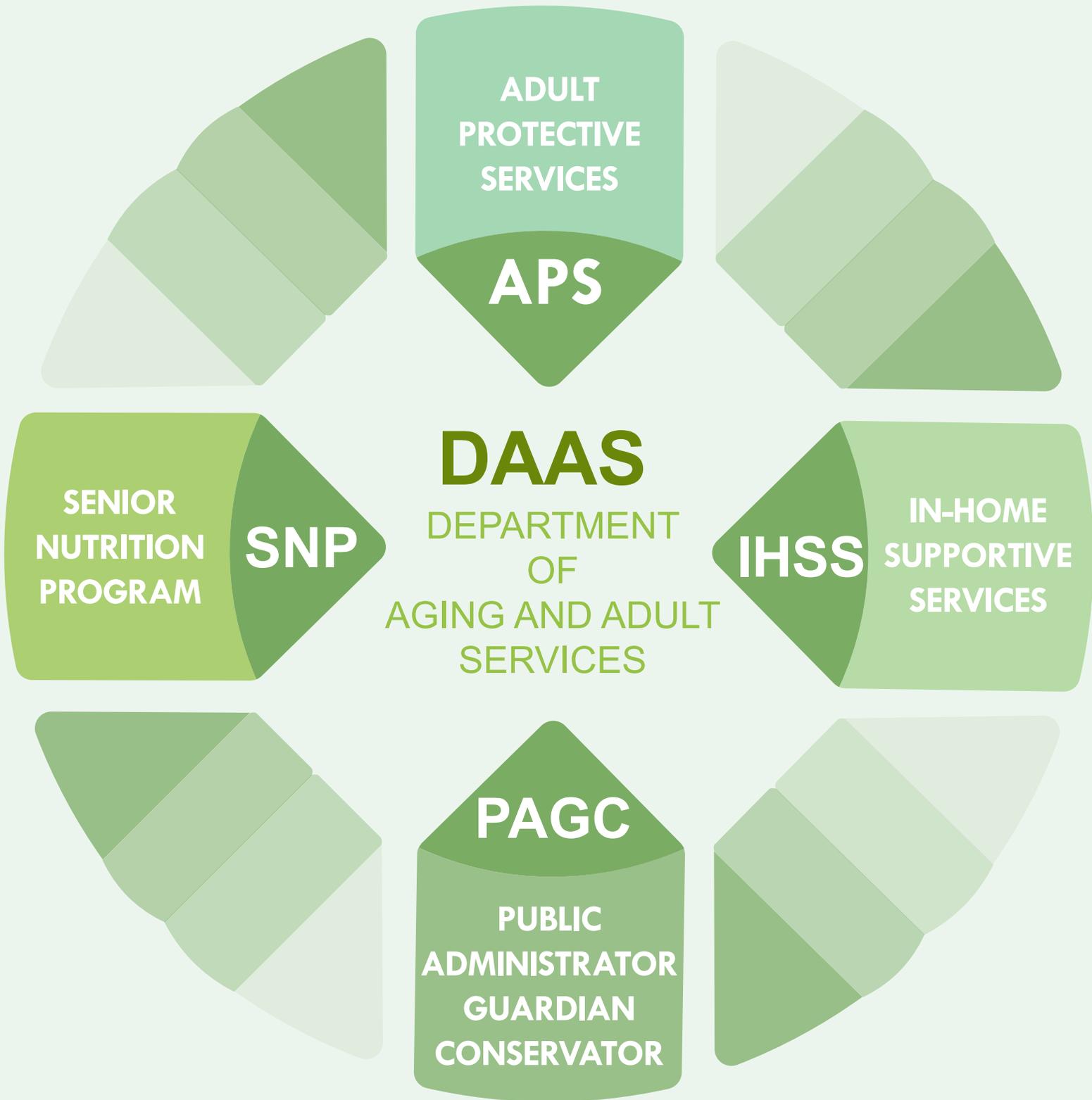
VITAL SIGNS REPORT

DAAS DEPARTMENT OF AGING AND ADULT SERVICES

DEBS DEPARTMENT OF EMPLOYMENT AND BENEFIT SERVICES

DFCS DEPARTMENT OF FAMILY AND CHILDREN'S SERVICES

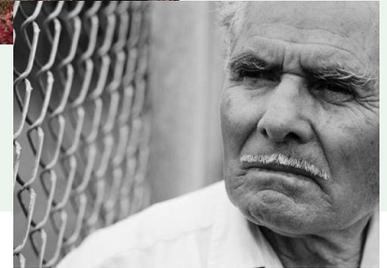
AO AGENCY OFFICE



DAAS

DEPARTMENT OF AGING AND ADULT SERVICES

The Social Services Agency's Department of Aging and Adult Services (DAAS) promotes a safe and independent lifestyle for seniors, dependent adults and the disabled through the delivery of protective services, quality nutrition and supportive in-home services. In addition, DAAS evaluates community needs, develops programs and services, and advises on matters of policy that concern the welfare of seniors and persons with disabilities.



DAAS is focused on equipping each of its programs to better evaluate their effectiveness and develop strategies to correct, strengthen, or improve existing practices and processes. Some challenges that DAAS programs are facing include an increasing complexity of cases, evolving state reporting requirements, and limited resources. With these challenges in mind, DAAS continues to measure the impact of its existing services on improving the well-being of older adults and implement new strategies in order to address the needs of the client population. Some strategies include implementing a new Automated Call Distribution system in APS, exploring the use of automated messages for callers to IHSS, employing Extra Help staff to assist in the closing of PAGC cases, and increasing marketing of SNP programs.

2005 - 2010

2011 - 2017

2018



DAAS experienced a number of changes during this reporting period.



New Performance Measures: Compliance, Quality Improvement, Utility

Beginning Fiscal Year 2018, DAAS decided to adopt a new performance model which highlights three different types of performance measures for program compliance, quality improvement and utility.

ADULT PROTECTIVE SERVICES

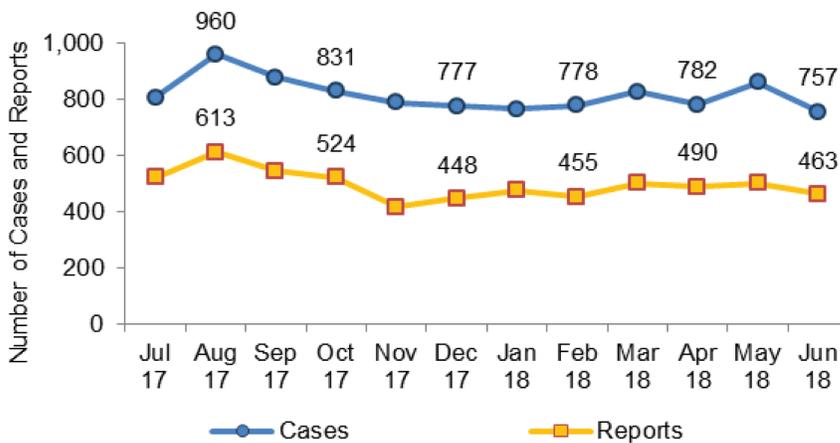
APS

Adult Protective Services is mandated by the State of California, Welfare and Institutions Code to receive and investigate reports of abuse or neglect regarding elders (anyone age 65 or older) or dependent adults (ages 18 to 64 who because of mental or physical disability are unable to protect themselves and advocate on their own behalf). Adult Protective Services is available to respond to urgent situations 24 hours a day, 7 days a week.



APS Program Highlights

Adult Protective Services Cases and Reports



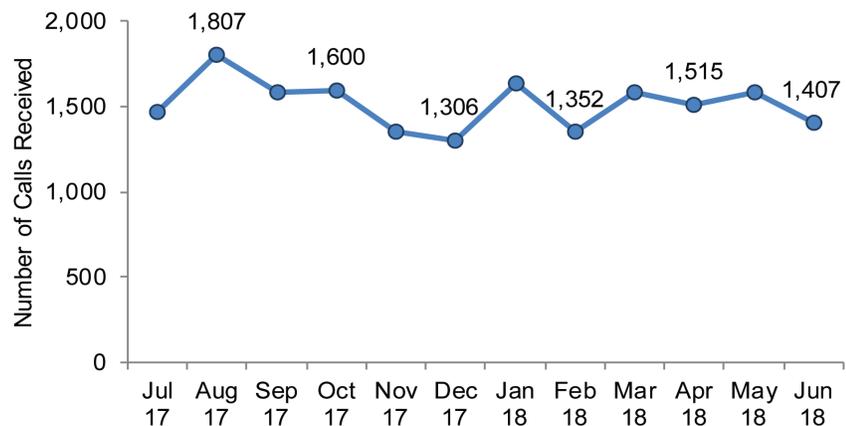
FY18
↓ 1.6%

FY18
↑ 2.3%

The average number of APS cases was 818 in FY18, a 1.6% decrease compared to FY17. The average number of APS reports was 497, a 2.3% increase compared to FY17.

The average number of calls received in the 24-hour call center was 1,517 in FY18, a 11.7% decrease compared to FY17.

Calls Received in Adult Protective Services 24-Hour Call Center



FY18
↓ 11.7%



Challenges

As the older adult population continues to grow, the ability to meet the service need in the same way is becoming ever more challenging. There are fewer services available in the community, and cases have become more complex, resulting in difficulty finding resolutions to many long-standing issues such as poverty, lack of safe and affordable housing, increasing medical costs, and transportation. Demand for APS services has increased by an average of 14% each year since 2015 and by approximately 20% in FY17. In FY18 the number of cases and calls decreased nominally which can be considered a correction or leveling out of the compounding increases in previous years.

Strategies

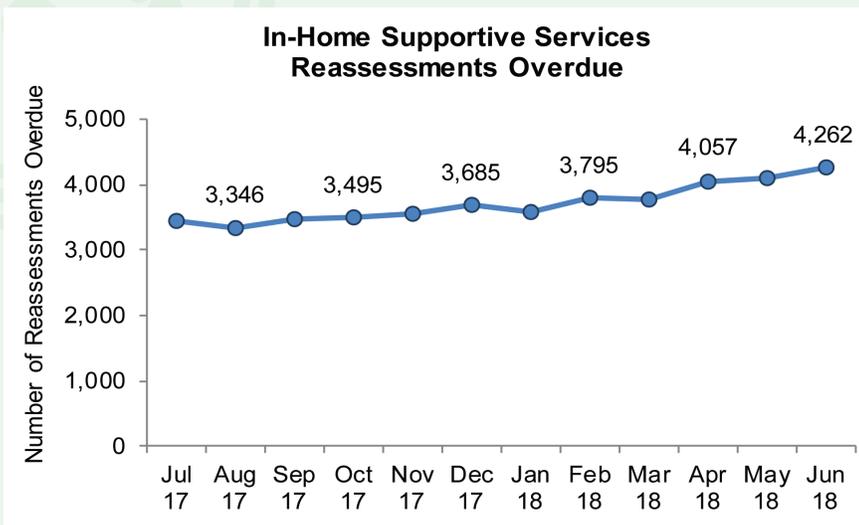
The APS program stands ready to pivot toward a plan that focuses the public's attention on education, awareness, prevention, early intervention, and collaborative practices to create new opportunities and approaches to the concepts of aging in place. In the FY19 budget, APS was augmented with significant staffing increases that will assist in meeting community needs and developing partnerships. Several units will have specialized focus on the most at risk clients. APS is in the process of several program and technology upgrades, including a new case management system that was implemented on July 1, and structured decision making tools to support staff and improve efficiency and consistency of case processes.

The In-Home Supportive Services (IHSS) program is a federal, state, and locally funded program designed to provide assistance to those eligible aged, blind, and disabled individuals who, without this care, would be unable to remain safely in their own homes. IHSS provides services according to the recipient's ability to perform daily activities, and can include feeding, bathing, dressing, housekeeping, laundry, shopping, meal preparation and clean up, respiration, bowel & bladder care, moving in and out of bed, rubbing the skin (to prevent skin breakdown), accompaniment to medical appointments, paramedical services, and protective supervision.

IHSS

**IN-HOME
SUPPORTIVE
SERVICES**

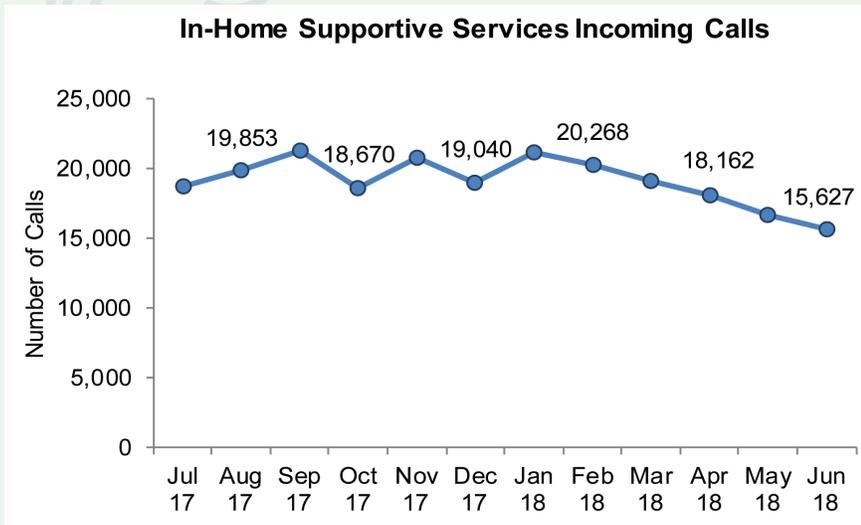




FY18
↓ 5.6%

The average number of IHSS reassessments overdue was 3,714 in FY18, a 5.6% decrease from FY17.

The average number of calls IHSS received per month was 19,132 in FY18.



FY18
Avg
19,132
a month

Challenges

In FY18, the IHSS overdue reassessments compliance rate averaged at 84.2%. Although CDSS requires a minimum 80% compliance, during a recent Quality Assurance monitoring review, CDSS expressed an expectation of 100% compliance, which IHSS foresees to be a challenge with the current staffing levels and the steady growth in caseload. IHSS took steps through UBT efforts to reduce call volume and wait time. While improvements were observed in both of these areas, additional challenges arose due to the change in business process. The UBT created a voicemail system, giving callers the option to leave a voicemail, continue to wait on hold or send an email to IHSS staff. This option reduced call wait time by 25%, but resulted in an incredibly high volume of voicemails requiring a response, further causing a backlog in other clerical duties.

Strategies

To address the challenges that arose with the implementation of the new voicemail system, in the next 6 to 12 months, IHSS plans to engage the assistance of both Social Services Agency Information Systems and Agency Office to utilize Continuous Quality Improvement efforts, as well as working to fill vacancies in the program. IHSS hopes to explore automated messages alerting callers that their requests have been received, in an effort to reduce or eliminate duplicate calls.

The Public Administrator serves the public by managing the estates of persons who die without a will or appropriate executor of the will.

Probate Conservatorships are primarily established for frail adults who are unable to provide for their own personal needs (physical health, food, clothing, and/or shelter) or cannot manage their own finances or resist undue influence.

PAGC

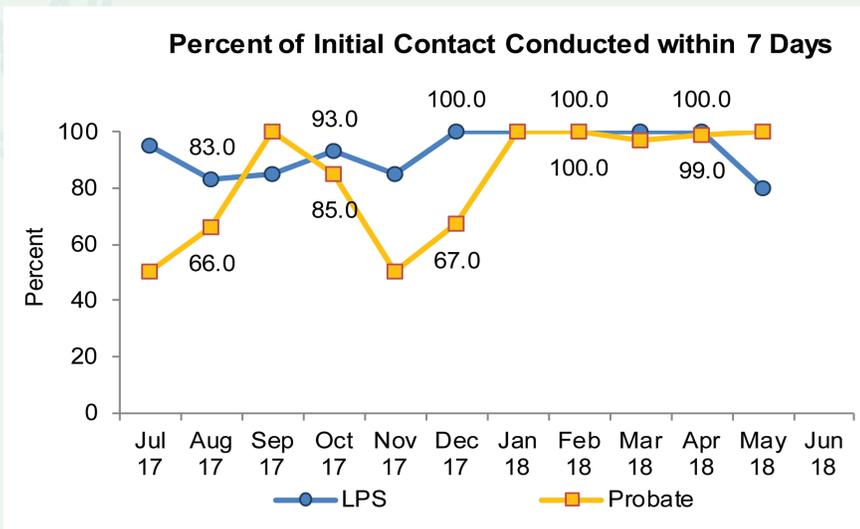
**PUBLIC
ADMINISTRATOR
GUARDIAN
CONSERVATOR**

PAGC Program Highlights

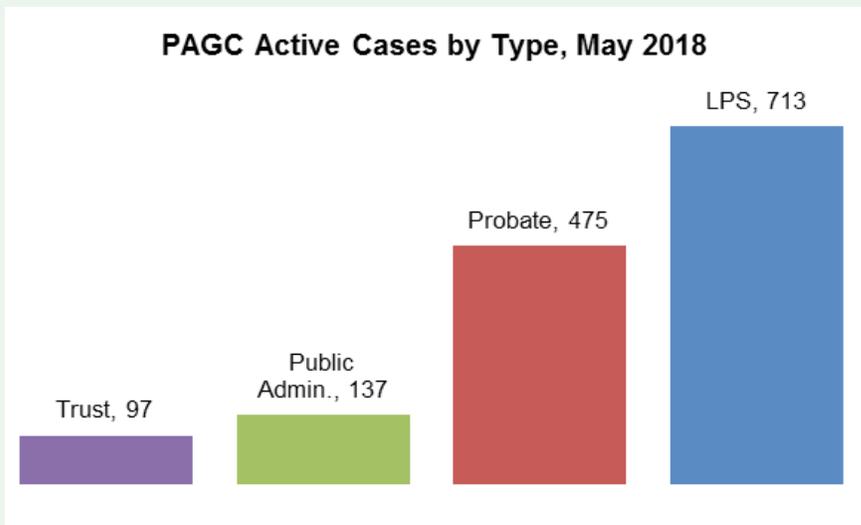
FY18
Avg.
92.8%

FY18
Avg.
83.1%

In FY18, an average of 92.8% of LPS cases and 83.1% of Probate cases were contacted within 7 days of initial entry.



In May 2018, the largest number of active PAGC cases were LPS cases, followed by Probate cases.

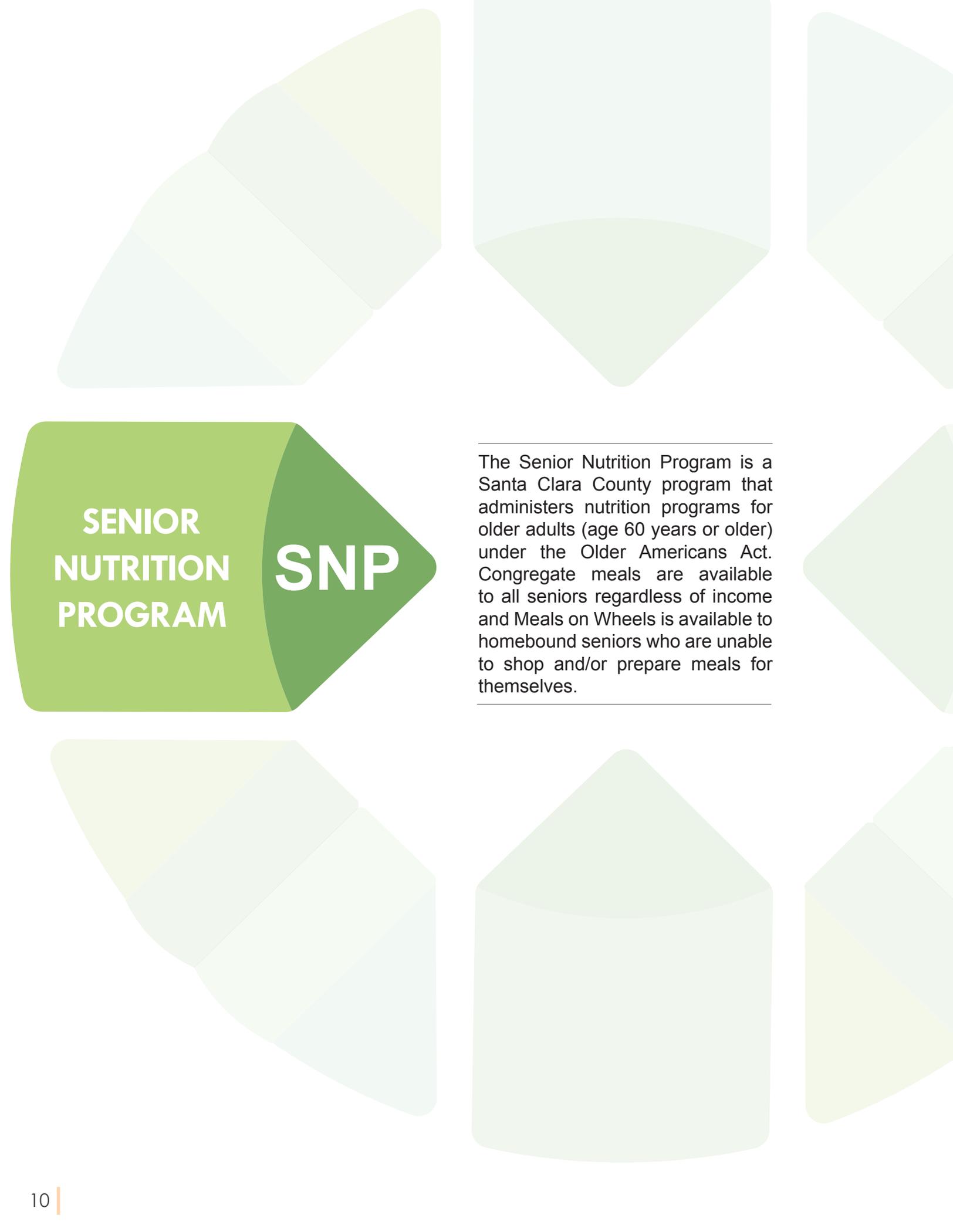


Challenges

PAGC is faced with the on-going challenges of acting as a voice for dependent adults and severely mentally disabled clients who may be homeless, incarcerated and/or hospitalized. Additional challenges include the lack of placements for conservatees and a need for more supervision, mentoring, and training of staff. PAGC is currently focused on the closure of very old cases, improving reports associated with the courts (specifically the timely preparation and deliverance of Inventory and Appraisal reports and Court Accountings), and completing the revision of current policies and the creation of new policies for the four main operations of the PAGC.

Strategies

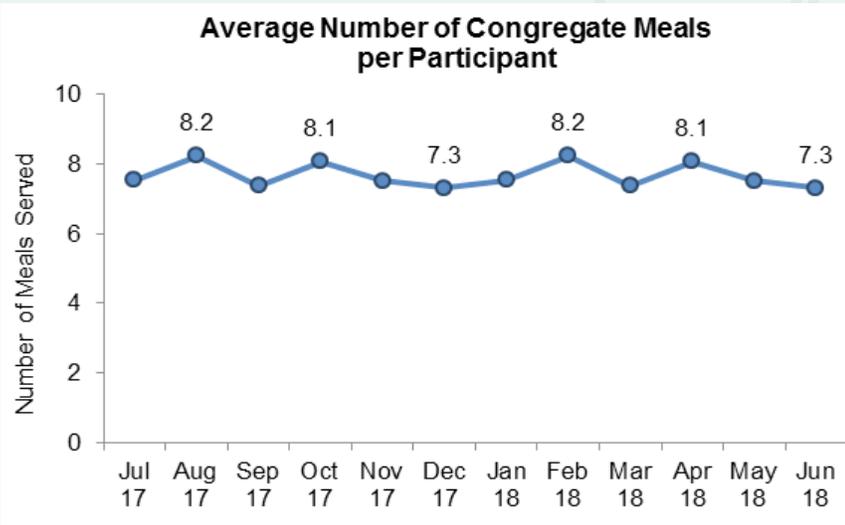
In the next 6 to 12 months, PAGC is using Extra Help staff to decrease the number of cases through case closure. PAGC also continues to try to find placements that can suit the needs of their clients well. Increases and decreases in other areas are due to the nature of PAGC and may result in unpredictable fluctuations.



**SENIOR
NUTRITION
PROGRAM**

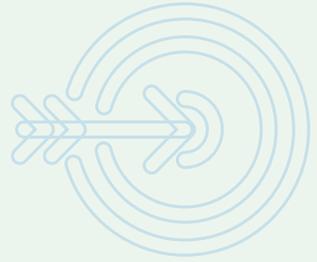
SNP

The Senior Nutrition Program is a Santa Clara County program that administers nutrition programs for older adults (age 60 years or older) under the Older Americans Act. Congregate meals are available to all seniors regardless of income and Meals on Wheels is available to homebound seniors who are unable to shop and/or prepare meals for themselves.

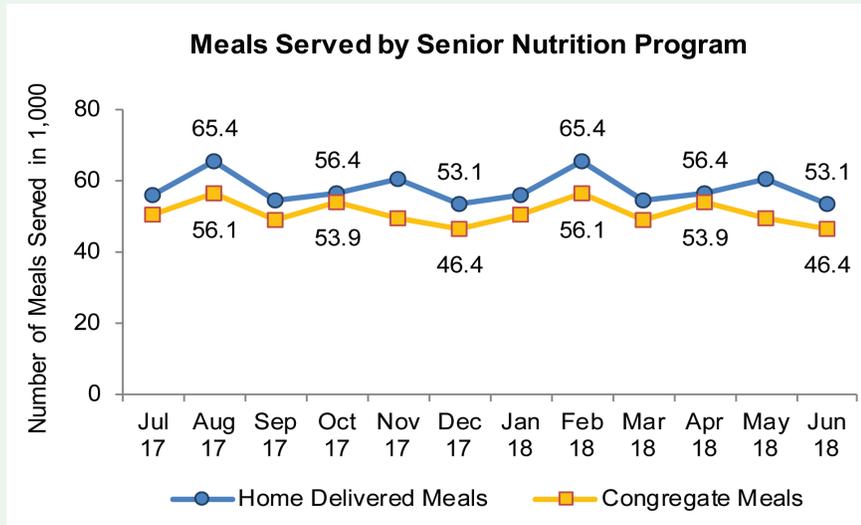


FY18 Avg. 7.7 a month

There was an average of 7.7 congregate meals each month per participant in FY18.



An average of 57,547 meals per month were home delivered, and an average of 50,820 meals per month were congregate meals served at meal sites in FY18.



FY18 Avg. 57,547 a month

FY18 Avg. 50,820 a month

Challenges

Some of the most important challenges impacting SNP in the next 6 to 12 months include transportation, high cost of living in the area, homelessness, isolation, and lack of funding.

Strategies

SNP is working towards increasing program satisfaction and participation, and the program is updating all of their surveys to include outcome measures that can be tracked over time in order to improve the program as a whole. SNP plans to increase marketing in the upcoming months to increase the number of participants at their meal sites, especially to target the older population that may be still working during the later ages in their lives in order to meet the high cost of living in Santa Clara County.

FINANCIAL
ASSISTANCE

CW

DEBS

DEPARTMENT
OF
EMPLOYMENT
AND BENEFIT
SERVICES

EMPLOYMENT

ES

MC

HEALTH

CF

NUTRITION

DEBS

DEPARTMENT OF EMPLOYMENT AND BENEFIT SERVICES

The Department of Employment and Benefit Services (DEBS) takes a two-pronged approach in helping low-income individuals and families meet their basic needs while transitioning to self-sufficiency. First, DEBS offers clients food benefits, medical benefits, and/or cash aid to immediately stabilize their living situations and ensure that all of their basic needs are being met. Second, DEBS offers comprehensive, unique, and individually-tailored Employment Services, which place clients on the path to financial independence and stability.



Historically, public benefits caseloads in the state of California have tracked economic conditions, growing when the economy is weak and declining when the economy recovers. The recent economic recovery has resulted in lower caseloads for benefits offices statewide.

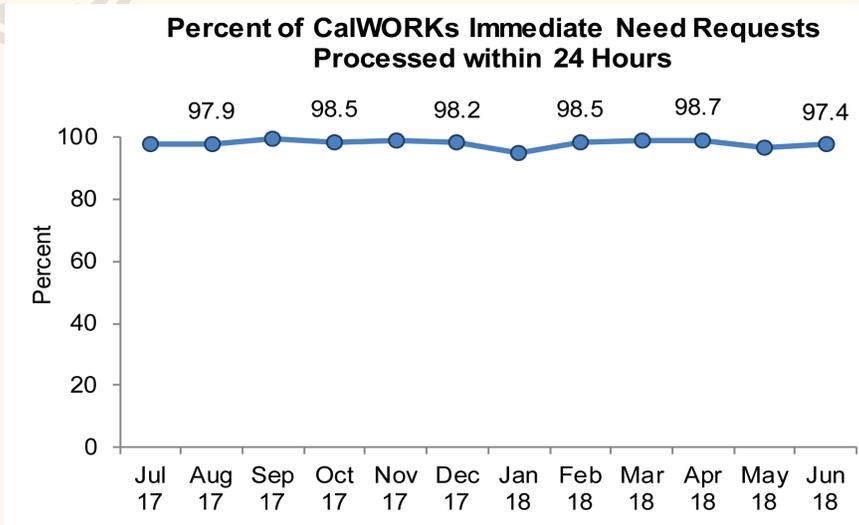
The issue is further complicated in Santa Clara County, where recent minimum wage increases have outpaced Federal Poverty Level guidelines, rendering many individuals and families ineligible for public benefits. Another significant factor of caseload decline is the high cost of living and lack of affordable housing in Santa Clara County, which have driven many eligible families out of the County to more affordable locales.

FINANCIAL ASSISTANCE

CW

CalWORKs is a program that helps eligible families become self-supporting through temporary cash aid and assistance in finding and keeping a job (ES). It is California's version of federally mandated Temporary Assistance to Needy Families (TANF) Program and provides a number of services, including cash aid, child care, and job search guidance. When receiving CalWORKs cash aid, the family also receives Medi-Cal and may be eligible for CalFresh benefits.





FY18
↑ 16.6%



In FY18, 98.0% of CalWORKs Immediate Need Requests were processed within 24 hours, an increase of 16.6% from FY17.

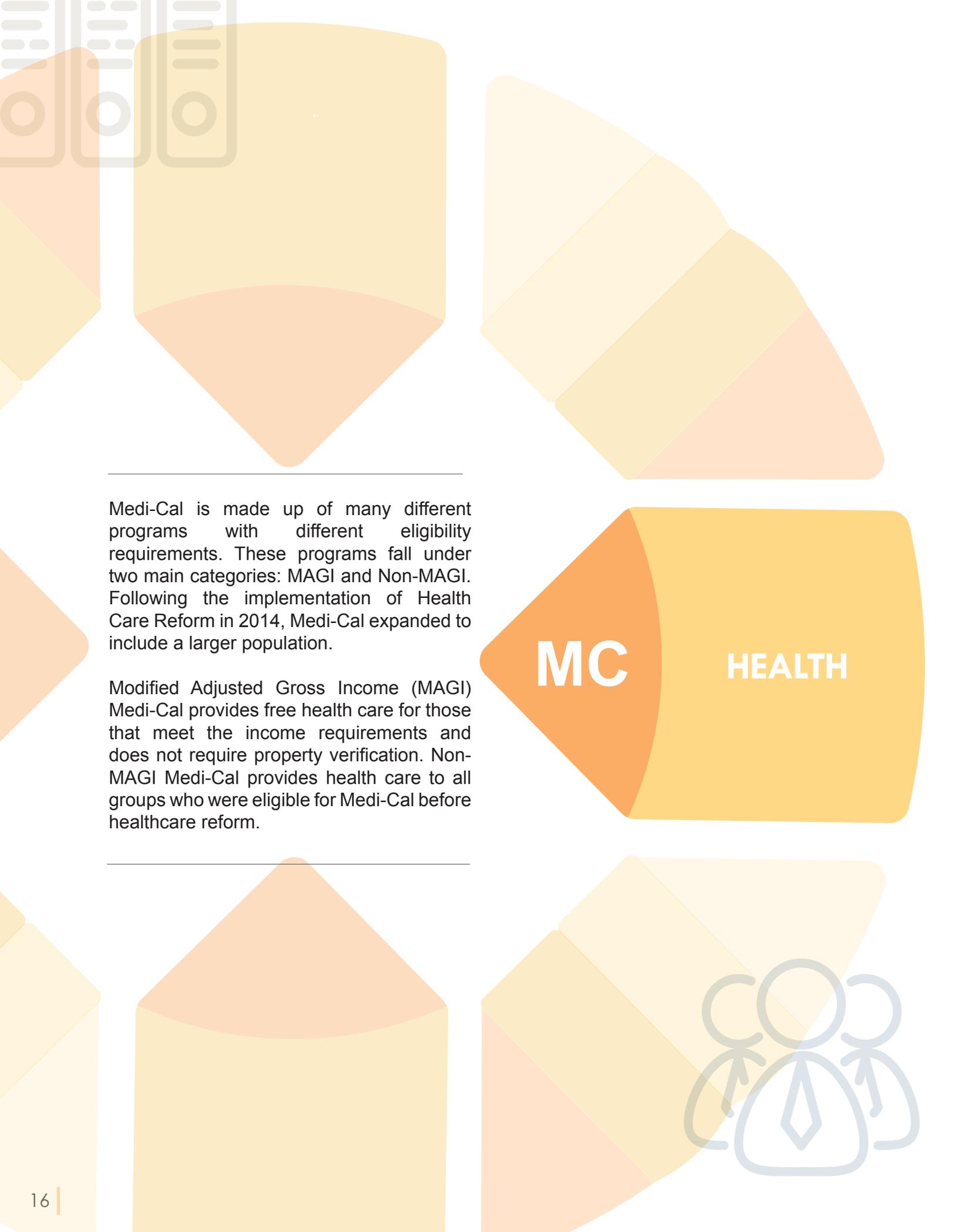
DEBS developed real-time dashboards to track the progress of CalWORKs application times. Dashboard data are reported regularly and shared across CalWORKs offices. Managers and staff make every effort to improve performance by utilizing the dashboard data.

Challenges

The high cost of living and lack of affordable housing in Santa Clara County make it difficult for low-income families to become economically self-sufficient.

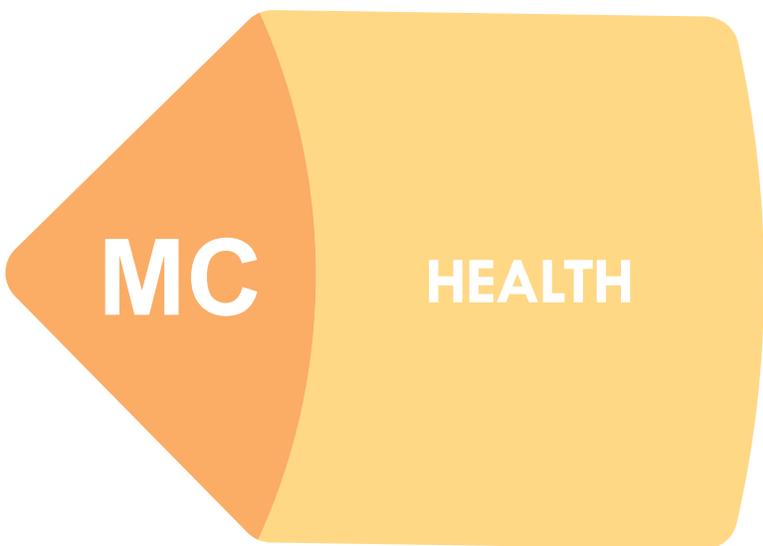
Strategies

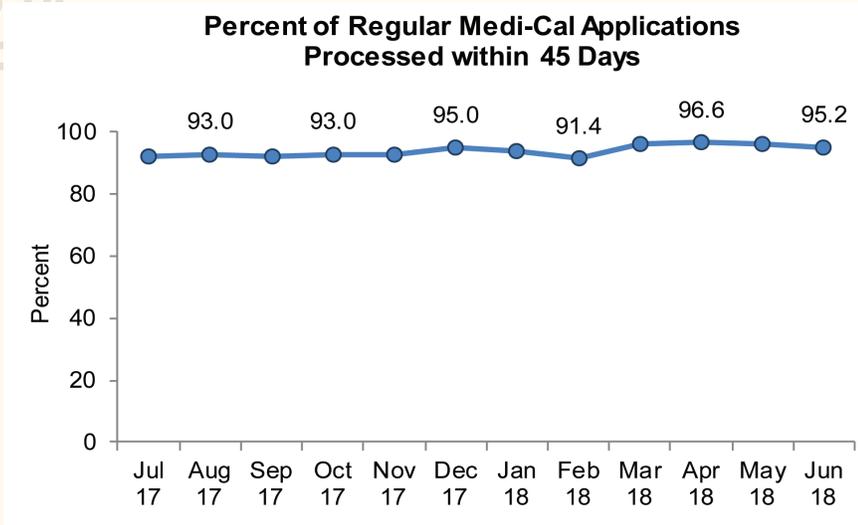
In order to maximize families' chances for success, DEBS is implementing CalWORKs 2.0, the state's new model which utilizes a client-first, whole-family, holistic approach to service delivery in place of the old compliance-oriented framework. CalWORKs 2.0 seeks to improve client outcomes through collaborative goal-setting, streamlined messaging, and supportive relationships. Along with this innovative new service delivery model, DEBS helps low-income families succeed in this high-cost area through important services such as housing assistance and the new home visiting initiative, which is available to first-time mothers and pregnant women under 25 years old who are enrolled in the CalWORKs program and whose child is younger than two years old. Research completed by economists and social scientists has shown that home visiting improves child development, school performance, and maternal well-being.



Medi-Cal is made up of many different programs with different eligibility requirements. These programs fall under two main categories: MAGI and Non-MAGI. Following the implementation of Health Care Reform in 2014, Medi-Cal expanded to include a larger population.

Modified Adjusted Gross Income (MAGI) Medi-Cal provides free health care for those that meet the income requirements and does not require property verification. Non-MAGI Medi-Cal provides health care to all groups who were eligible for Medi-Cal before healthcare reform.





In FY18, 94.0% of Medi-Cal applications were processed within 45 days, an increase of 7.9% from FY17.

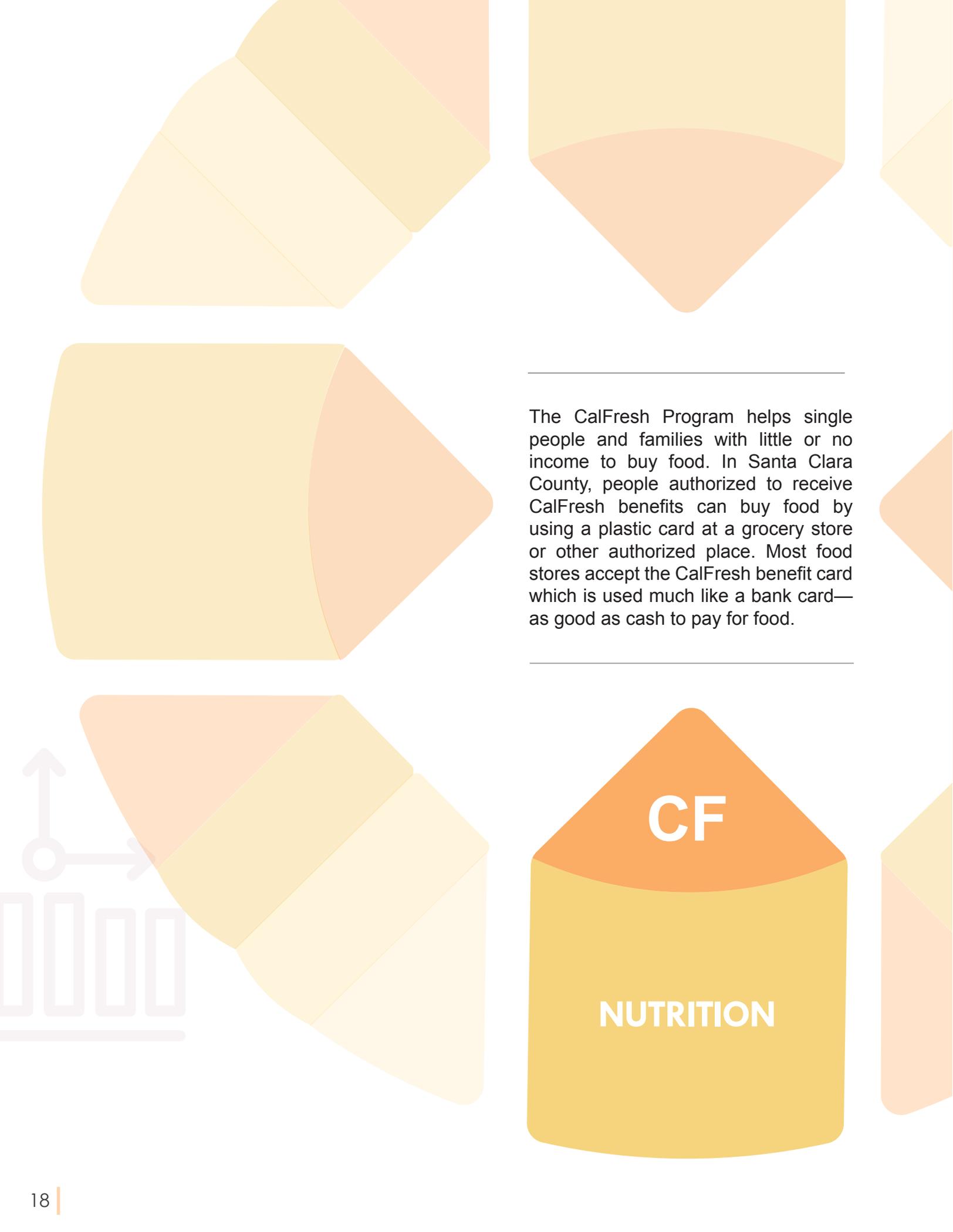
This year, DEBS undertook a Medi-Cal Awareness Campaign to ensure that all Medi-Cal clients are aware that they can both apply for and renew their benefits by phone, online, or in person; as a result, lobby traffic decreased by 34%. Reducing the number of drop-in clients allowed DEBS staff to spend more time on processing applications and annual redeterminations.

Challenges

The main challenge affecting the Medi-Cal client population is the “chilling effect” of anti-immigration policies such as the proposed public charge rule. It is anticipated that eligible individuals and families may decline to apply for Medi-Cal or request discontinuance due to concern for their immigration status.

Strategies

In collaboration with the Office of Immigrant Relations and a broad network of community partners, DEBS is performing community outreach to help dispel misunderstandings about the effect of the new public charge rule on Medi-Cal recipients.

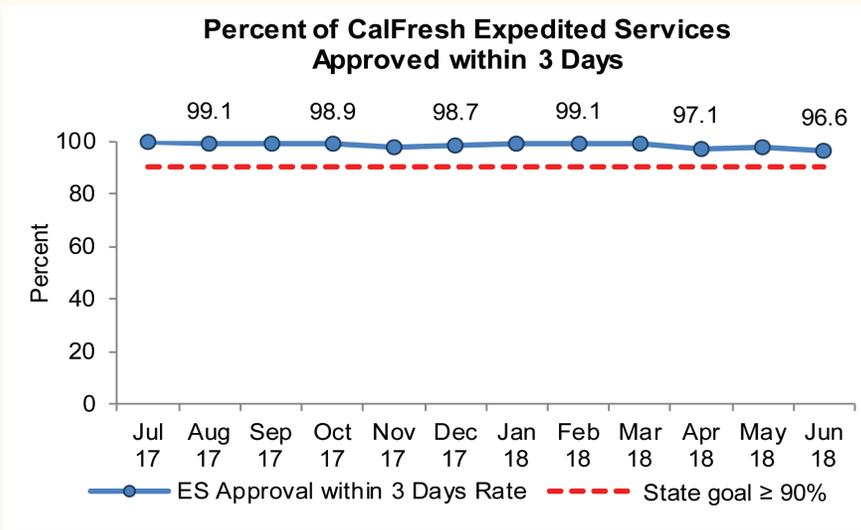


The CalFresh Program helps single people and families with little or no income to buy food. In Santa Clara County, people authorized to receive CalFresh benefits can buy food by using a plastic card at a grocery store or other authorized place. Most food stores accept the CalFresh benefit card which is used much like a bank card—as good as cash to pay for food.

CF

NUTRITION

FY18
↑ 1.2%



In FY18, CalFresh Expedited Services approval rate averaged at 98.5%, which is a 1.2% increase from FY17.

DEBS utilizes real-time dashboards to track the progress of CalFresh application times. Dashboard data are reported regularly and shared across CalFresh offices. Managers and staff make every effort to improve performance by applying the dashboard data. As a result, 98.5% of CalFresh Expedited Services applications are processed within three days. In FY18, the month-to-month approval rate for expedited services ranged from 96.6% to 99.1%, well above the state goal of 90%.

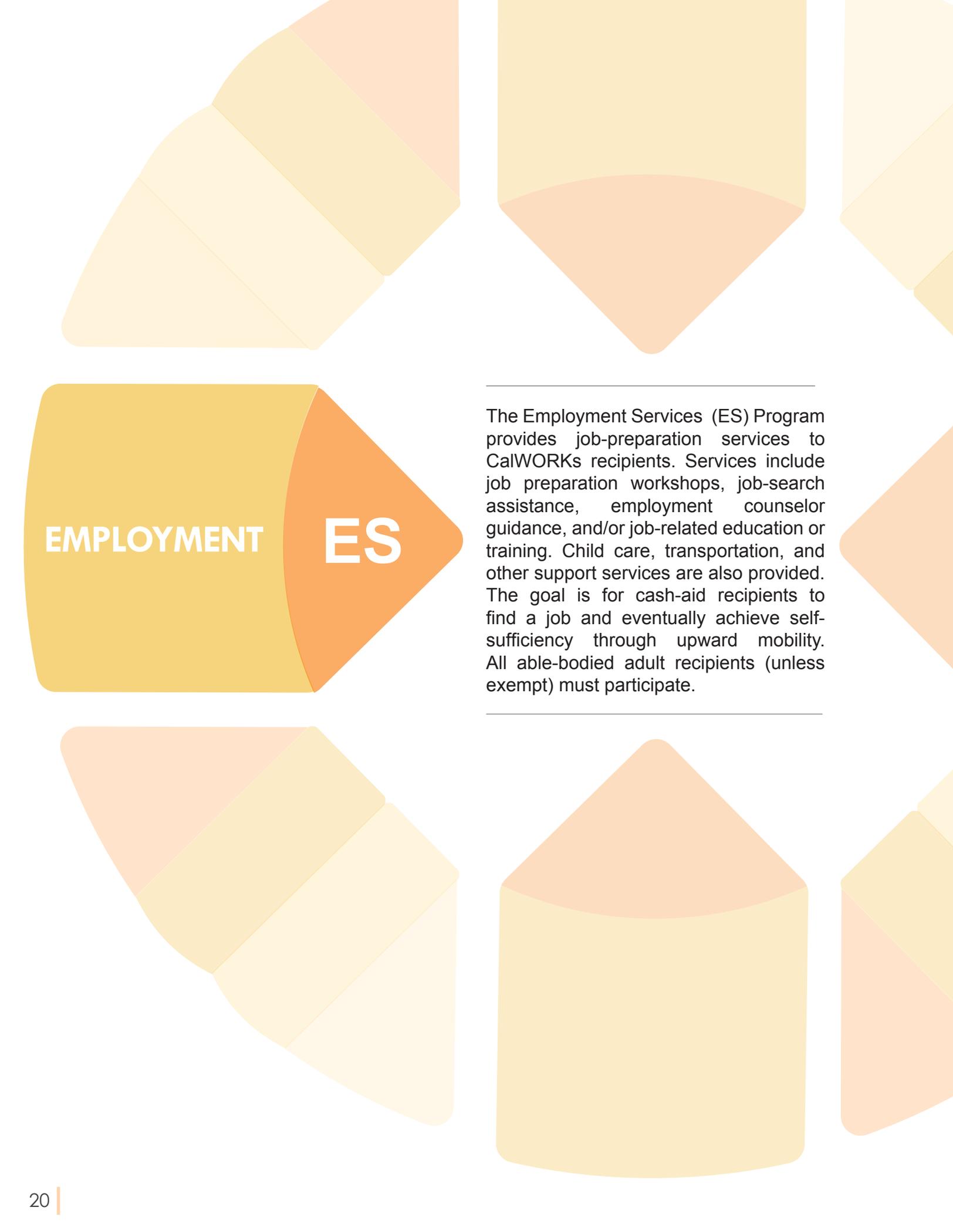
Challenges

In FY 2017-2018, DEBS was faced with operationalizing a work rule affecting the Able-Bodied Adults Without Dependents (ABAWD) client population. This rule stipulates that, beginning September 1, 2018, CalFresh clients between the ages of 18-49 who do not have dependents are eligible for only three months of benefits within 36 months, unless they meet work requirements or are deemed to be exempt.

Strategies

Eligibility Workers started reaching out to ABAWD clients beginning in May 2018—four months before the time limit took effect. Initial data shows that approximately 77% of ABAWDs qualify for a work exemption. Approximately 7% of are already meeting the work requirements on their own. The remaining 16% are referred to Employment Services, where they attend an orientation and participate in employment, vocational, and/or educational training to meet their work requirements.

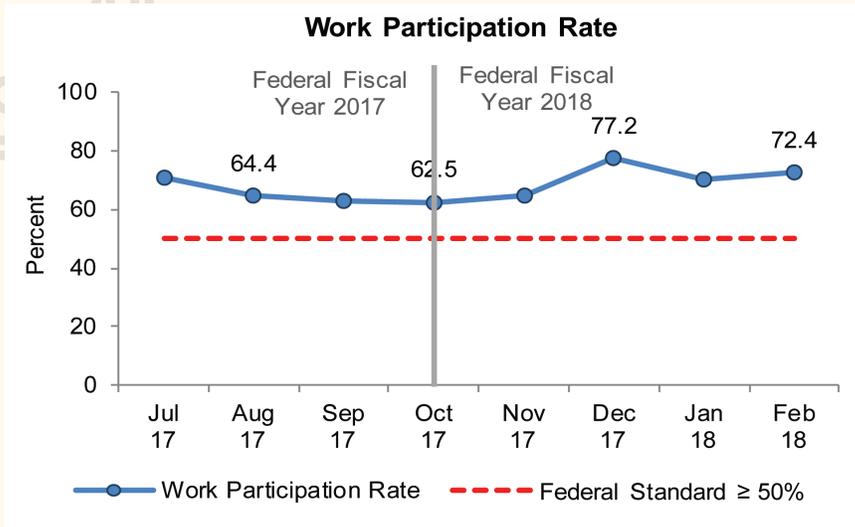
Importantly, DEBS is also conducting substantial outreach to ABAWD clients who are not meeting their work requirements, with the goal of connecting those clients to Employment Counselors and spurring them to begin participation in Employment Services.



EMPLOYMENT

ES

The Employment Services (ES) Program provides job-preparation services to CalWORKs recipients. Services include job preparation workshops, job-search assistance, employment counselor guidance, and/or job-related education or training. Child care, transportation, and other support services are also provided. The goal is for cash-aid recipients to find a job and eventually achieve self-sufficiency through upward mobility. All able-bodied adult recipients (unless exempt) must participate.



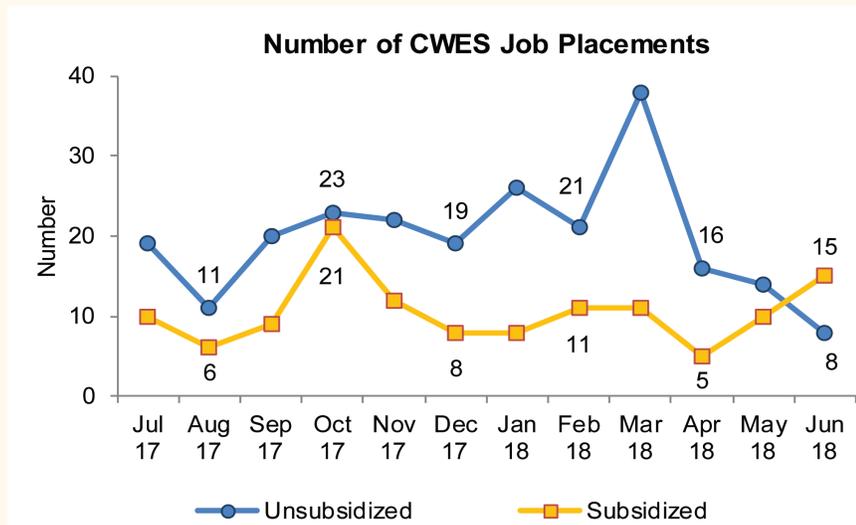
FFY 18
↑ 0.8%

In FFY18, Work Participation Rate averaged at 69.40% in February 2018, representing a 0.8% increase from FFY17.

WPR cases are randomly selected for audit by the state. DEBS's Rapid Response Team works closely with selected clients for the entire audit period, engaging them in work activities as needed to satisfy their participation requirements.

In FY18, both subsidized and unsubsidized job placements decreased 21.3% and 6.0% from FY17, respectively.

The decline in caseload has resulted in a lower number of job placements.



FY 18
↓ 21.3%

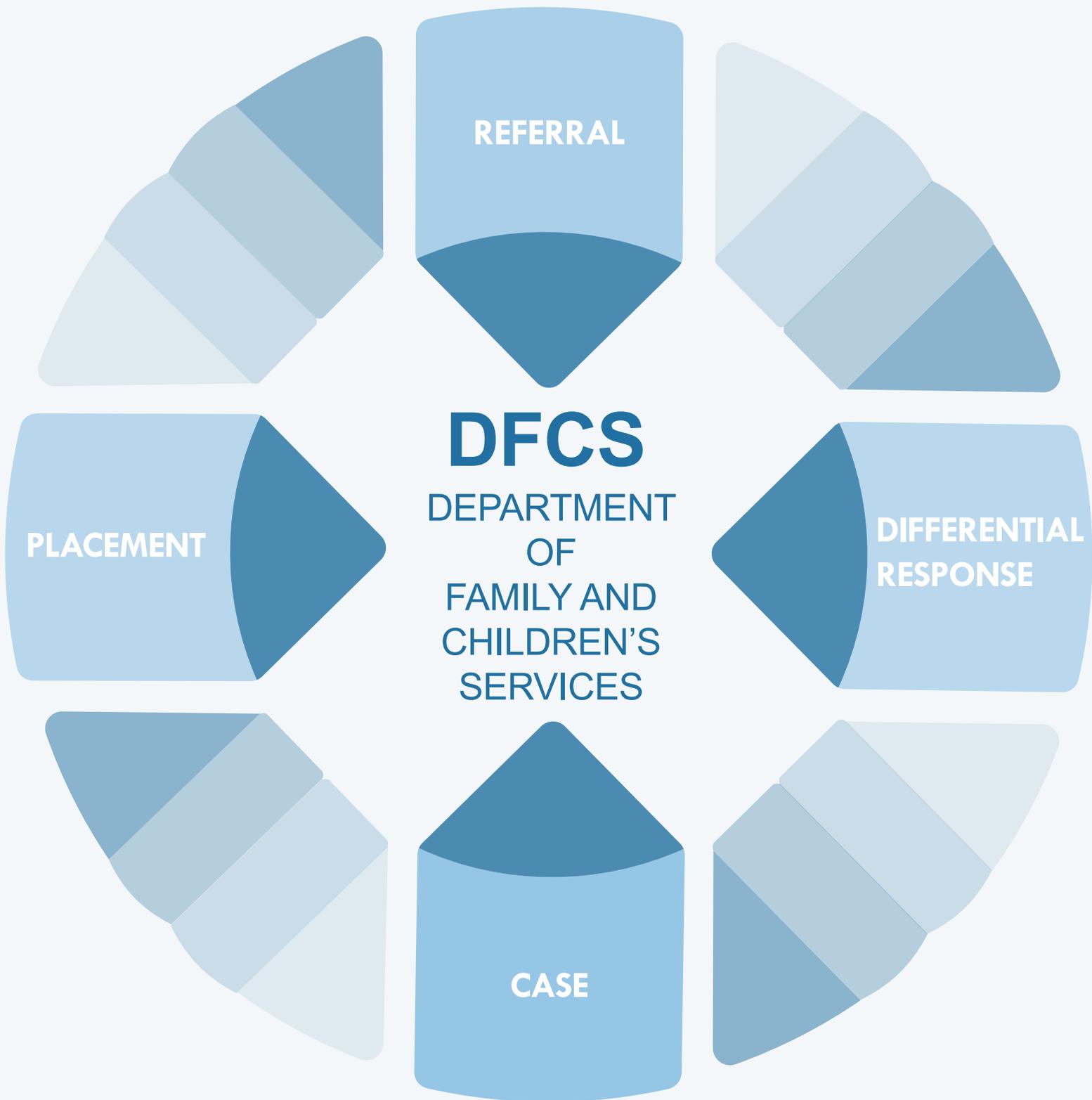
FY18
↓ 6.0%

Challenges

The ultimate goal of Employment Services is to place clients on the path to financial stability and independence—a tremendous challenge given that the CalWORKs' client population tends to have lower levels of education and skills.

Strategies

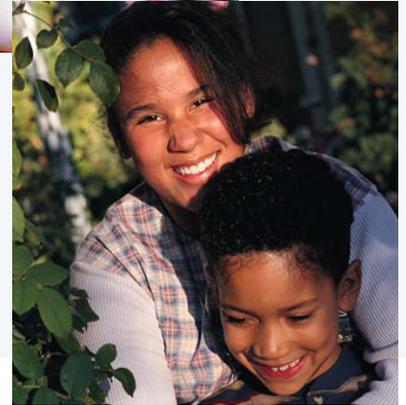
DEBS utilizes educational and training opportunities for adults and internships for youth in order to maximize client potential and break the cycle of generational poverty. CalWORKs' clients are provided with the opportunity to attend schools for higher education. When clients participate in their educational programs, they receive valuable support services in childcare and assistance with expenses. Meanwhile, those clients who prefer a quicker pathway to the workforce are connected to vocational, technical, or trade schools. One of DEBS's most innovative and successful programs is the County of Santa Clara Intern & Earn program. Intern & Earn is designed to help reduce generational poverty and improve outcomes for youth. 2018 marks its third year since inception and every year it continues to grow and offer more opportunities to low-income youth who are eager to shape their own futures.



DFCS

DEPARTMENT OF FAMILY AND CHILDREN'S SERVICES

Santa Clara County Department of Family and Children's Services envisions a community where children and youth are safe, families and young adults are thriving, and every child and family is on a path to reaching their unique potential. The DFCS' mission is to keep children safe and families strong. With respect and cultural humility, DFCS partners with diverse communities to ensure that any child or youth who is at risk or has suffered abuse or neglect is safe, cared for and in a stable, loving family.



The DFCS submitted a 5-year System Improvement Plan to the California Department of Social Services that guides the Department's efforts from 2017 through 2022. The plan identified three strategies that include:

- Full implementation of the Resource Family Approval Process (RFA) will be imbedded in all program areas of the Department. This is intended to ensure that children have the necessary supportive placements so that:
 - Children will have placement stability
 - Children's well-being is a priority
 - Reunification is supported
 - Caregivers are supported so that they in turn can support reunification
 - If reunification is not possible, Permanency outcomes will be enhanced.
- Full utilization of Structured Decision Making (SDM) will be imbedded in all program areas of the Department to ensure standardized decision making. SDM implements objective assessment procedures at major case decision points to guide child welfare decision-making.
- Implement Child and Family Team (CFT) for all children and families involved with the Department.

REFERRAL

DFCS operates a 24/7 Child Abuse and Neglect Reporting Center (CANC) that serves as the central call-in center for reports relating to child abuse and neglect in Santa Clara County. The CANC receives and screens calls from mandated reporters, law enforcement, and the community.

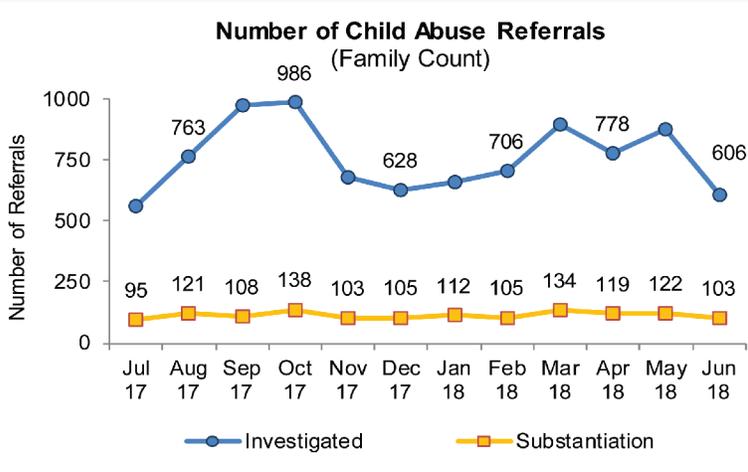
The CANC staff assess the reported information for child risk and safety and generates a referral that is either evaluated out (i.e., does not require an in-person response) or sends the referral to the Emergency Response (ER) team for investigation. Based on the risk and safety assessment information, the response time for investigation may be immediate (within 24 hours) or within 10 days.

The Emergency Response (ER) program provides initial evaluation, risk assessment and crisis intervention services, 24 hours-a-day/7 days a week, for children who are reported to be endangered by abuse, neglect, or exploitation via the CANC. The ER social worker investigates the allegation, assesses risk and safety via a Structured Decision Making (SDM) tool, and concludes whether the allegations are unfounded, inconclusive, or substantiated (i.e., found to be true).



REFERRAL

Program Highlights



FY18
↑ 32.2%

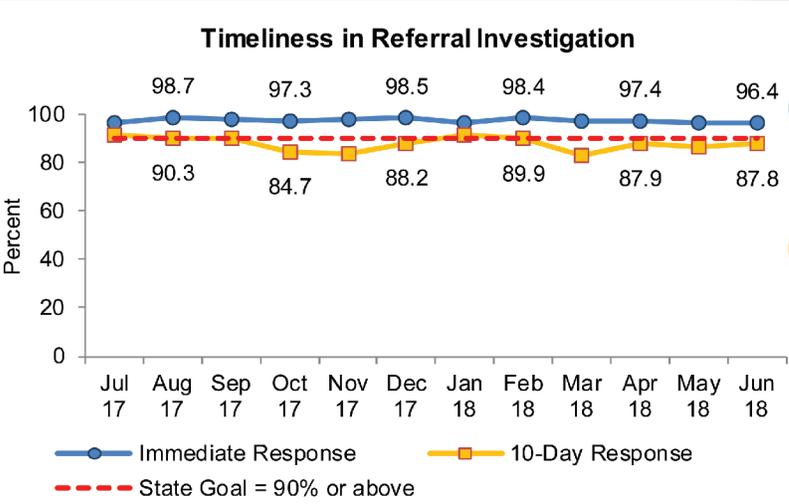
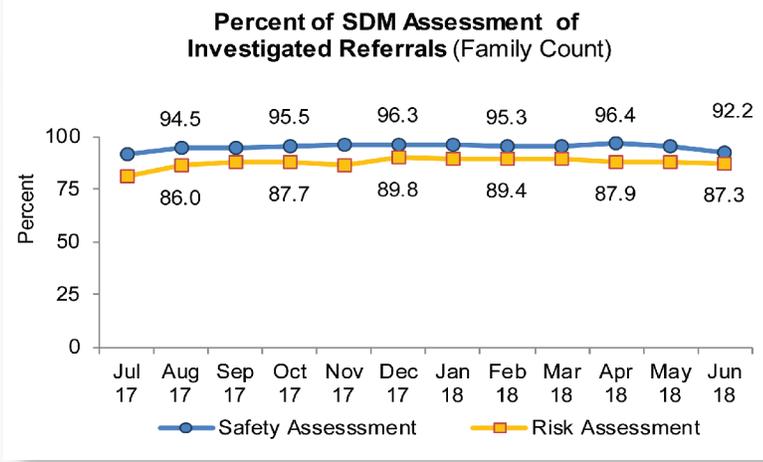
FY18
↑ 16.5%

In the current fiscal year, 9,118 of CANC referrals required an in-person investigation, a 32.2% increase from FY17. Of those referrals, 1,365 had at least one maltreatment allegation substantiated (or found to be true), an 16.5% increase from FY17.

In 2017, DFCS required the completion of SDM tools to assess child risk and safety for all in-person investigated referrals. In FY18, an average of 87.5% investigated referrals had a completed risk assessment and an average of 94.9% had a completed safety assessment.

FY18
Avg 94.9%

FY18
Avg 87.5%



FY18
↑ 9.6%

FY18
↓ 9.2%

The state requires that 90% or more referrals be investigated in a timely manner. The proportion of immediate response referrals that were investigated within 24 hours in FY18 was 97.5% (n=2,830), a 9.6% increase from FY17. The proportion of 10 day response referrals that were investigated in a timely manner in the current fiscal year was 87.7% (n=5,453), a 9.2% decrease from FY17.

Strengths

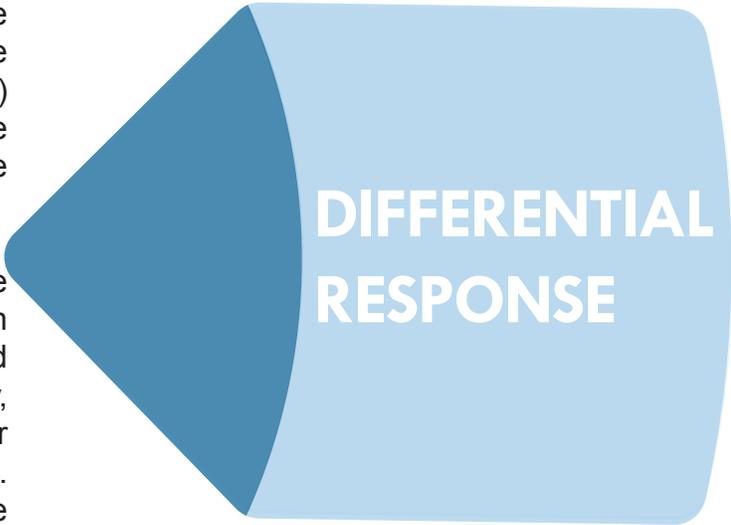
The number of CANC referrals that required an in-person ER investigation increased by 32% in the current fiscal year. Even with the increased number, the proportion of immediate response referrals that were investigated in a timely manner exceeded the state goal of 90% or more and the proportion of 10 day referrals investigated in a timely manner came close to meeting the goal (88%).

Strategies & Challenges

Completed SDM safety and risk assessments are required for all investigated referrals. In FY18, approximately 88% of referrals had a completed risk assessment and 95% of referrals had a completed safety assessment. The DFCS is currently working with SDM consultants to identify and mitigate challenges to ensure that 100% of investigated referrals have completed SDM assessments.

Differential Response is a collaborative effort that provides culturally appropriate and voluntary services to low and moderate risk families based on their unique needs and circumstances. The DFCS refers appropriate families to Community Based Organizations (CBO's) for services. The goal of these services is to provide families with community based resources that promote permanency and resilience within the family.

Families involved in a CANC referral that did not require an in-person investigation are offered Prevention services. Families involved in an ER investigated referral are offered Diversion services. Additionally, Aftercare services are provided for families upon their completion of more traditional child welfare services. Differential Response services include comprehensive assessments, development of individual family success plans, intensive case management and linkage to community resources.

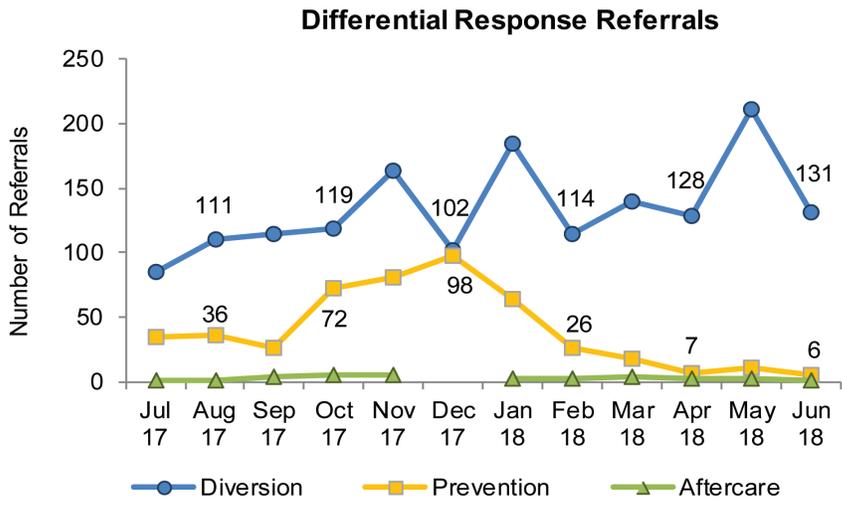


DIFFERENTIAL RESPONSE



DIFFERENTIAL RESPONSE

Program Highlights

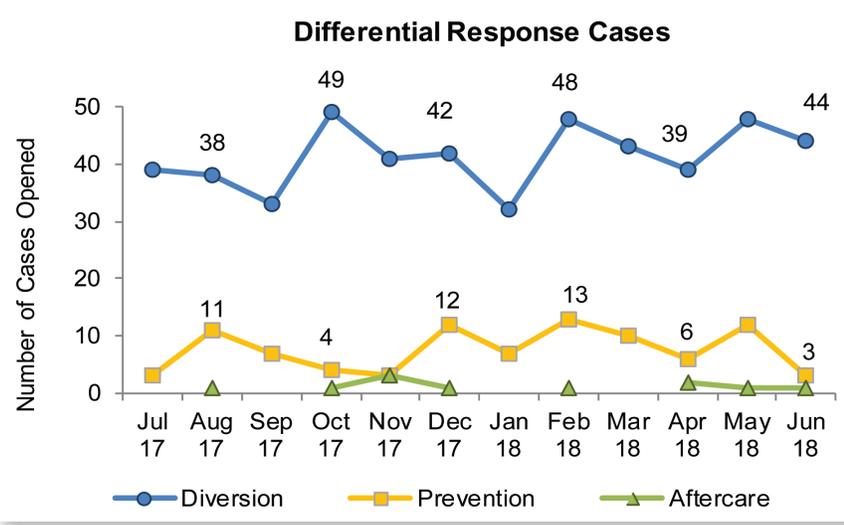


FY18
↑ 31.9%

FY18
↑ 25.9%

The number of families referred to the DR Prevention program in FY 18 was 480, a 25.9% increase from the previous year. The number of families referred to the Diversion program grew from 1,274 to 1,604, an increase of 31.9%.

The number of families who accepted Prevention services grew from 65 to 91, a 40% increase from FY17. The number of families who accepted Diversion services increased by 4%, from 477 to 496 in FY18.



FY18
↑ 4.0%

FY18
↑ 40.0%

Strengths

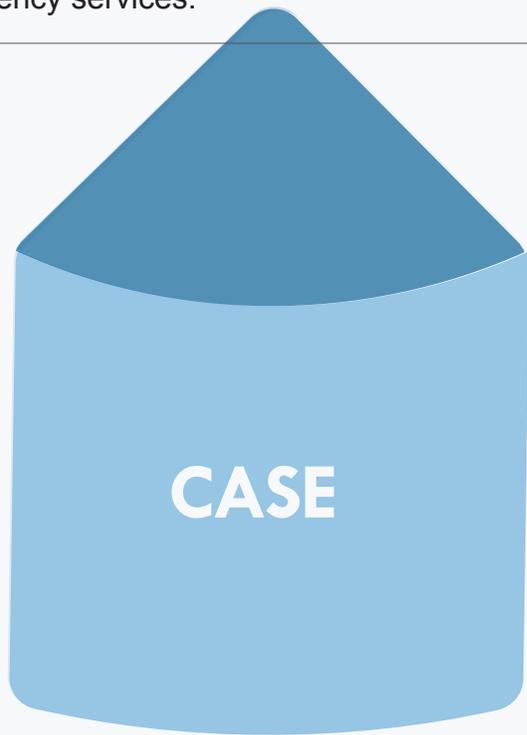
During FY18, a greater number of families eligible for Prevention and Diversion services were referred to the DR program and compared to last year, a greater proportion of families accepted services.

Challenges & Strategies

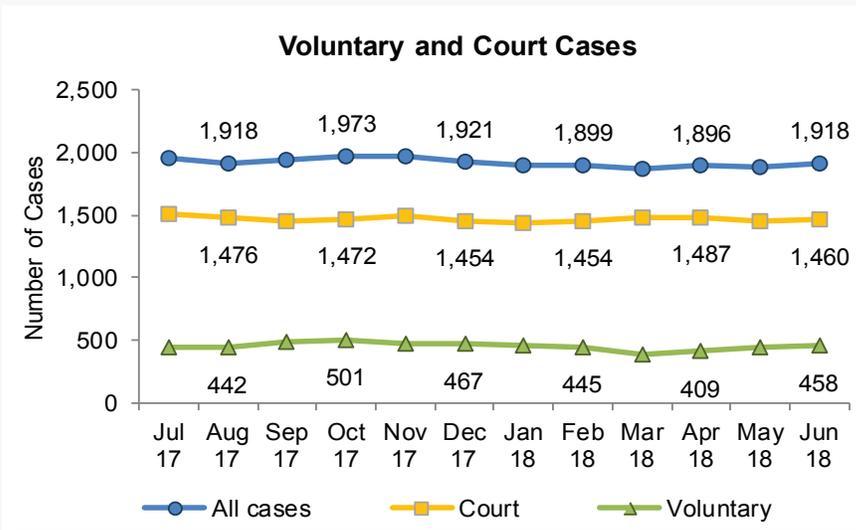
While more families were referred to and accepted Prevention and Diversion services, the utilization of Aftercare services remains a challenge. A primary strategy of the DR team to increase referral and participation is attendance at Child & Family Team Meetings (CFT) to discuss a plan for dismissal prior to the court hearing. This allows families to learn about the DR program and voice their willingness to participate. A DR referral and consent form can be completed at the CFT meeting, thus increasing the likelihood of increasing participation in the Aftercare program.

Cases are opened for families assessed as benefiting from services supervised by the DFCS. Family participation in a case may be voluntary, or mandated by the court if children are deemed to be unsafe or at a high risk for abuse or neglect.

Cases may be voluntary or court ordered. Voluntary services may include in-home services (Voluntary Family Maintenance, VFM) or foster care placement services (Voluntary Family Reunification, VFR). Court supervised cases may include in-home services Family Maintenance (FM), Family Reunification (FR) or Planned Permanency Living Arrangements (PPLA, formerly known as PP). PPLA cases often include children who are no longer receiving FR services but are on track to receive adoption, guardianship, or self-sufficiency services.



CASE Program Highlights



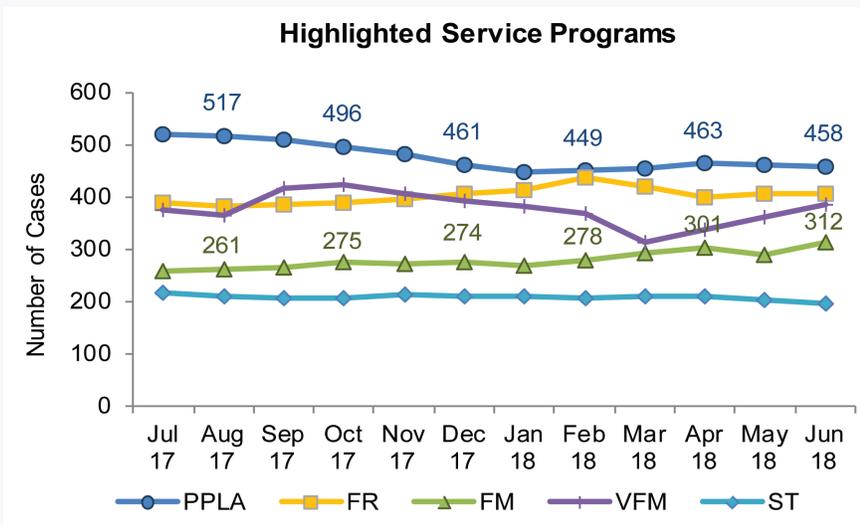
FY18
↓ 3.6%

FY18
↓ 4.5%

FY18
↓ 0.5%

The average number of children in an open case in FY18 was 1,921, a 3.6% decrease from FY17. The monthly average number of children in a court supervised case decreased by 4.5%, from 1,539 in FY17 to 1,469 in FY18. The number of children in a voluntary case was similar in both years with a monthly average of 454 receiving services in FY17 and a monthly average of 452 children receiving services in FY18.

In FY18, the majority of children in an open case received PPLA services. An average of 476 children each month received these services, a 16.8% decrease from FY17. Approximately 279 children received FM services each month, an increase of 5.1%. An average of 377 children received VFM each month in FY18, a decrease of 3.3% from FY17.



FY18
↓ 16.8%

FY18
↑ 5.1%

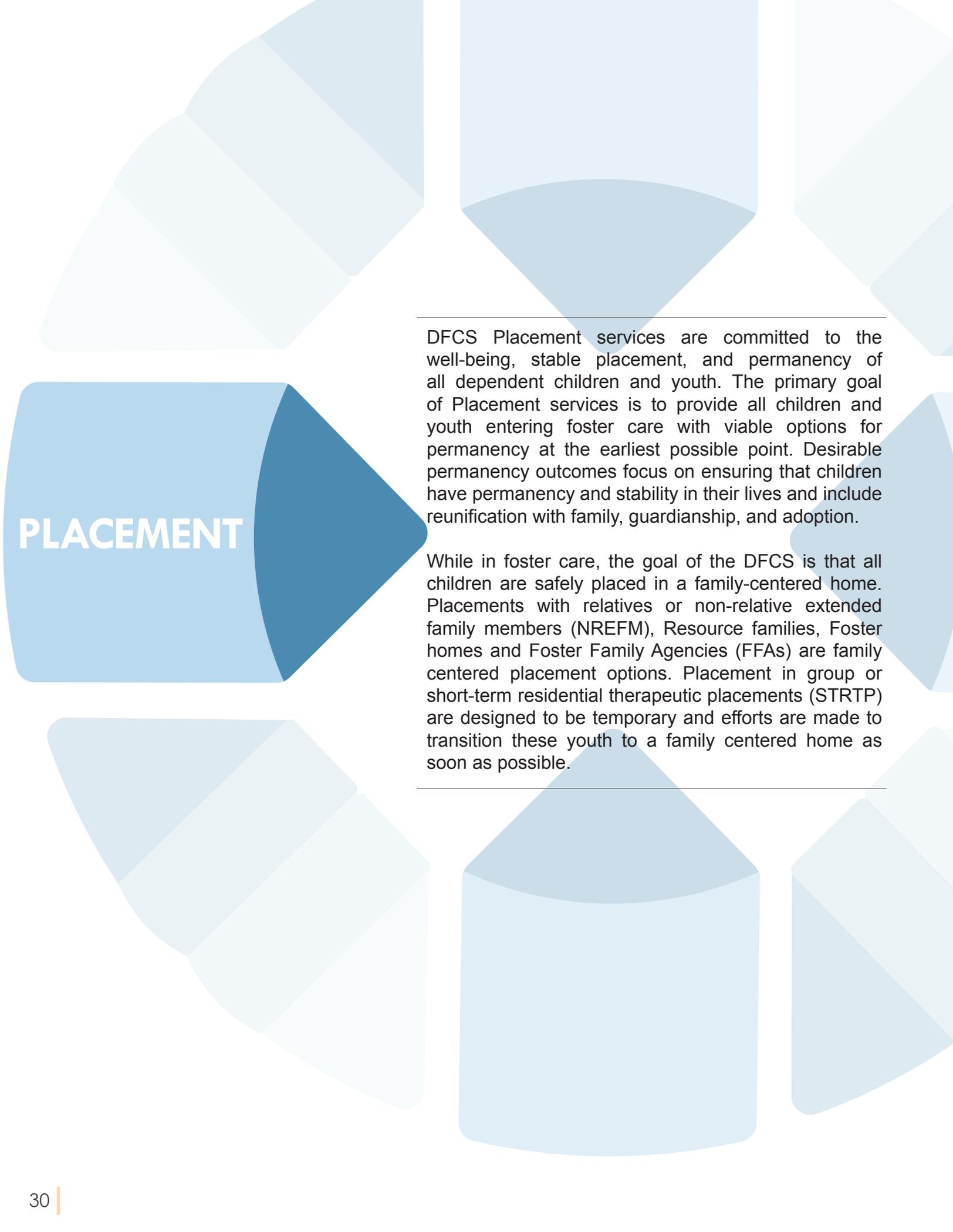
FY18
↓ 3.3%

Strength & Challenge

While the number of children in a court ordered case decreased by 4.5%, the number of children who received PPLA services decreased by approximately 17%. Even though the reduction of children receiving PPLA services is a strength, this service program type still contains the largest proportion of children in court cases.

Strategies

Strategies to ensure that children who receive PPLA services exit to permanency include the use of Child and Family Teams (CFT) to re-explore family connections for older youth, Family Finding, and the streamlining of the Resource Family Approval (RFA) process for caregivers seeking to adopt.



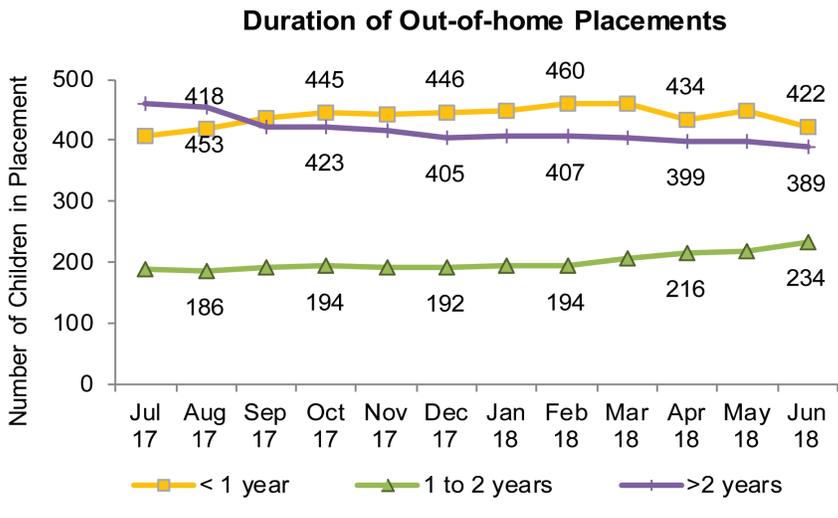
PLACEMENT

DFCS Placement services are committed to the well-being, stable placement, and permanency of all dependent children and youth. The primary goal of Placement services is to provide all children and youth entering foster care with viable options for permanency at the earliest possible point. Desirable permanency outcomes focus on ensuring that children have permanency and stability in their lives and include reunification with family, guardianship, and adoption.

While in foster care, the goal of the DFCS is that all children are safely placed in a family-centered home. Placements with relatives or non-relative extended family members (NREFM), Resource families, Foster homes and Foster Family Agencies (FFAs) are family centered placement options. Placement in group or short-term residential therapeutic placements (STRTP) are designed to be temporary and efforts are made to transition these youth to a family centered home as soon as possible.

PLACEMENT

Program Highlights



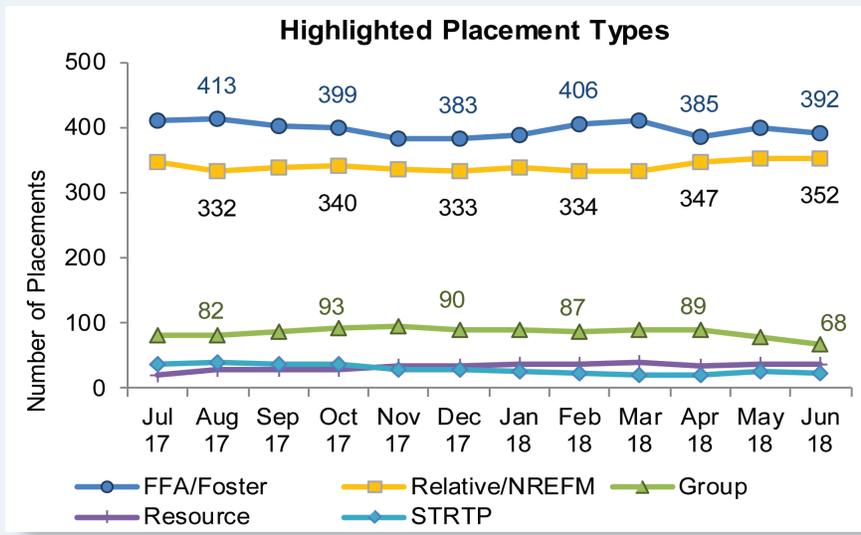
FY18
↓ 15.3%

FY18
↓ 16.6%

The monthly average number of children who had been in an out-of-home placement for 1 to 2 years each month decreased from 237 in FY17 to 200 in FY18, a 15.3% decrease. The monthly average number of children in out-of-home placement for 2 or more years decreased by 16.6%, from 498 in FY17 to 416 in FY18.



The monthly average number of children placed with relatives/NREFM decreased from 368 in FY17 to 340 in FY18, a decrease of 12%. The average number of children placed in a group home decreased slightly from 89 to 86 in FY18, a decrease of 3.5%.



FY18
↓ 12.0%

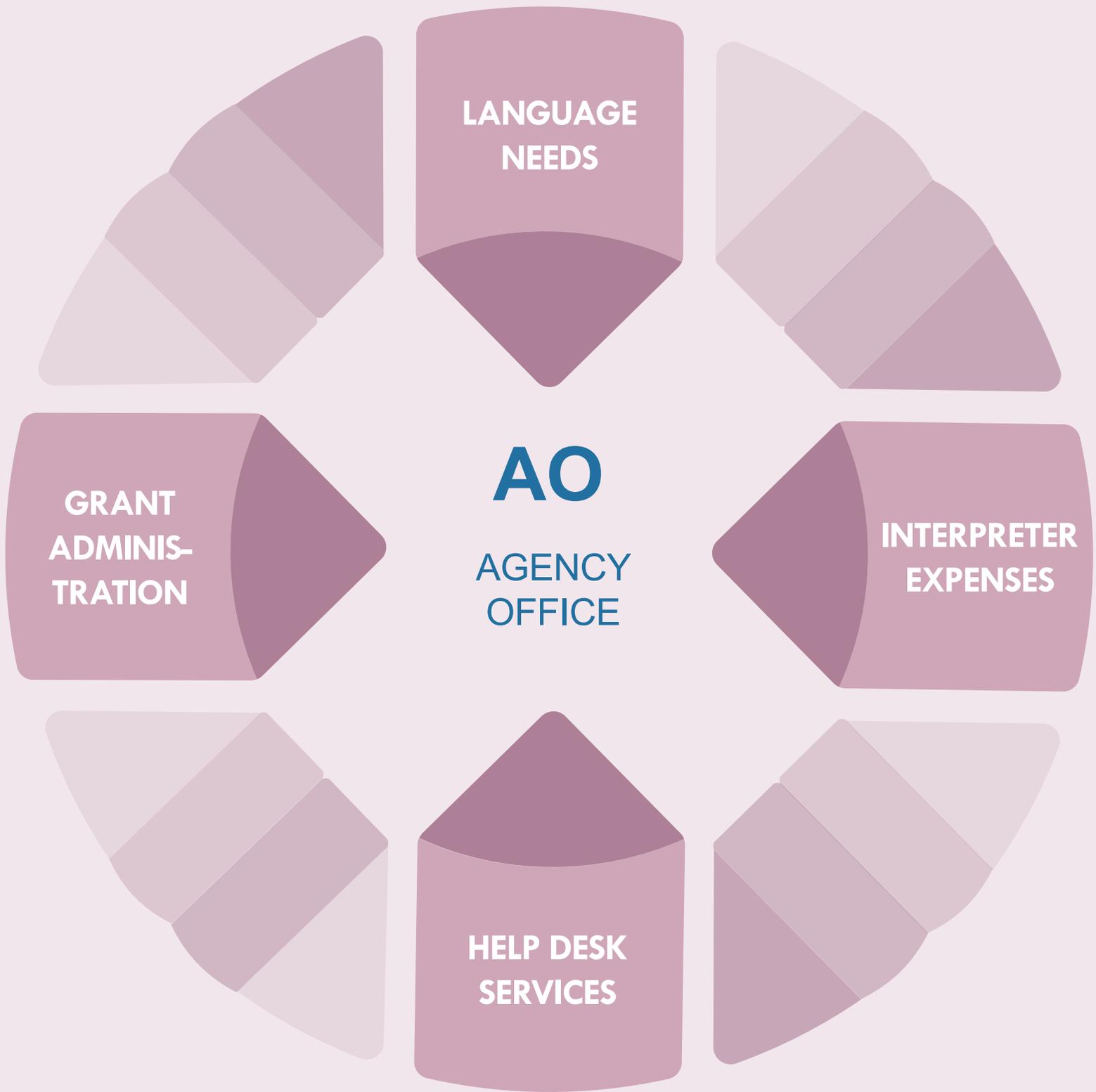
FY18
↓ 3.5%

Strengths

The majority of children in out of home placements were placed in a family centered home (87%).

Challenges & Strategies

In compliance with the Continuum of Care Reform (CCR) the DFCS is working to transition all children in group home placements to a family centered home or short term residential therapeutic treatment program (STRTP). While the number of children placed in a group home continues to decrease, there are still more children to transition. The DFCS recently initiated a county-wide Resource Family recruitment campaign in an effort to increase the number of family-centered homes appropriate for these youth.



AO

AGENCY OFFICE



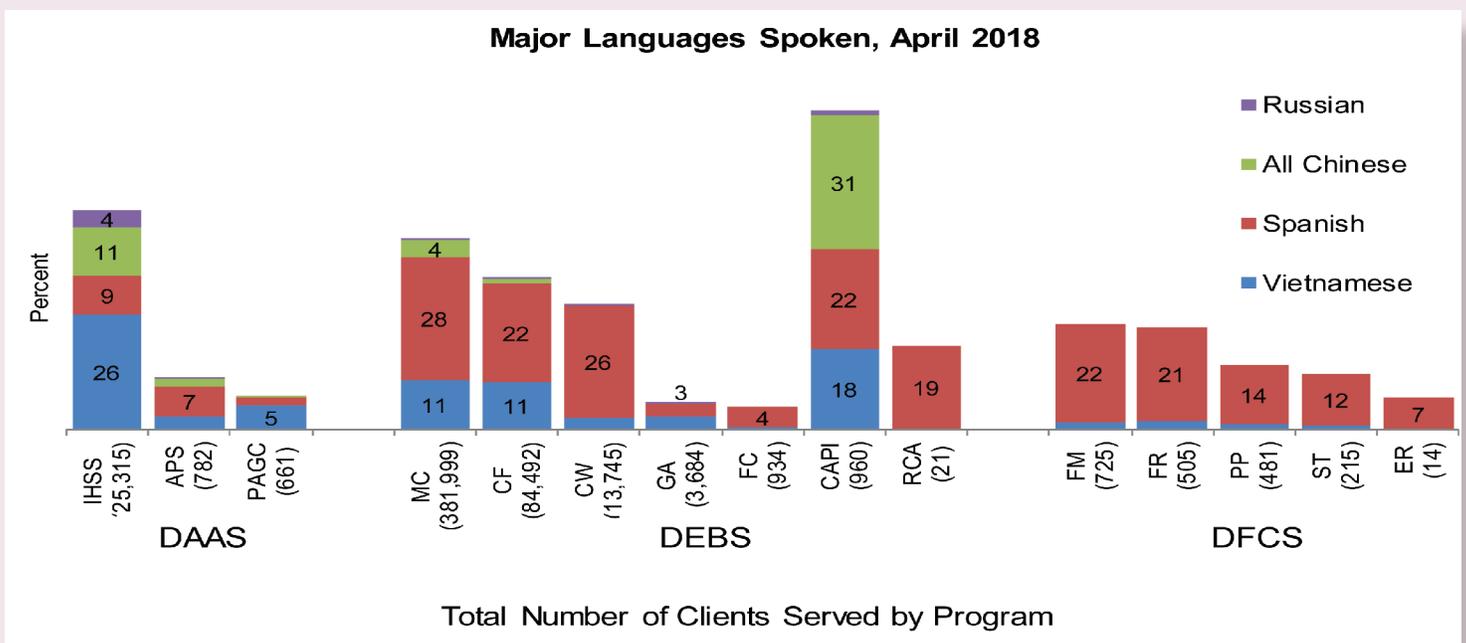
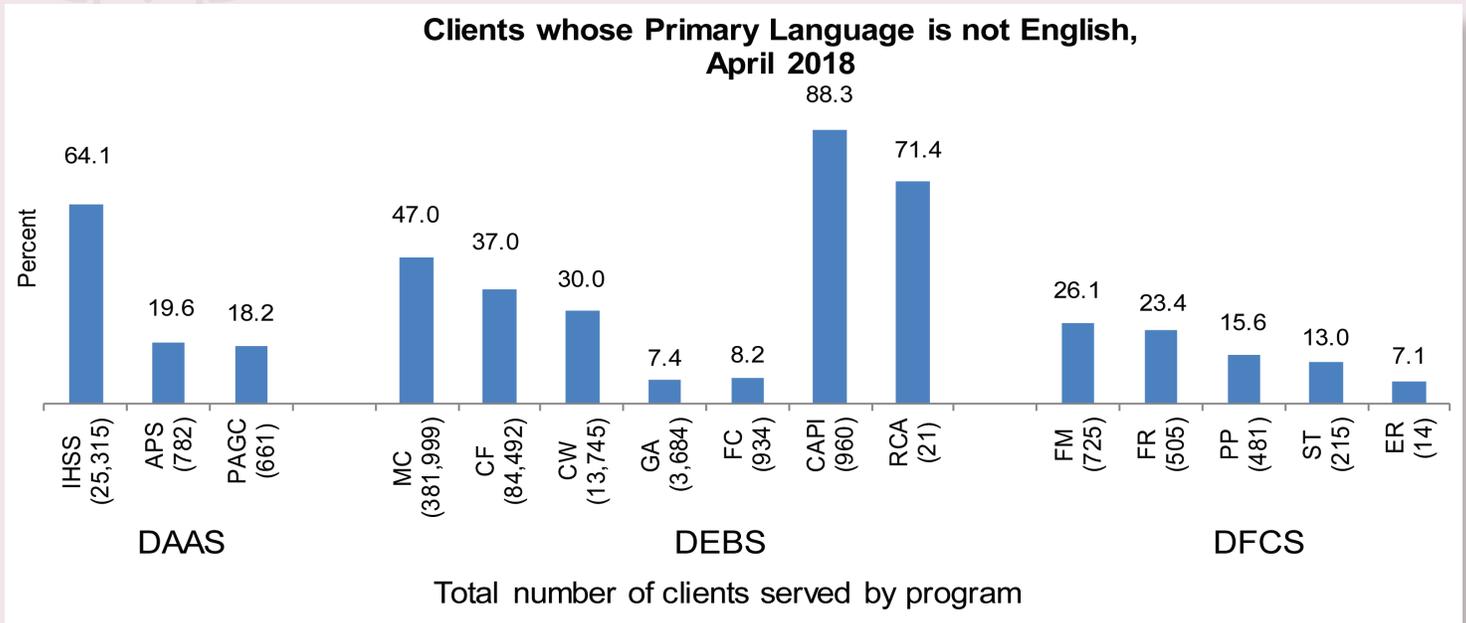
The Agency Office (AO) provides overall leadership and direction for the Agency and administrative support to SSA departments with the goal of increasing public understanding of SSA's programs and allowing for responsive and efficient services to those served. AO provides administrative and ancillary support through the offices of Financial Management Services, Technology Services and Solutions (formerly known as Information Systems), Central Services, Contracts Management and Public and Board Relations.

The Program Support, Research, and Evaluation (formerly known as the Department of Operational Support Services) is also part of AO and includes Staff Development and Training; Data Analysis, Integrity and Reporting; the Office of Research and Evaluation; Program Implementation in DAAS/DFCS; and Government Relations, Policy, and Planning.

LANGUAGE NEEDS

SSA serves a community of diverse language needs. In order to provide services to children, adults, seniors and families in the three service departments (DAAS, DEBS and DFCS), the Agency hires staff with diverse cultural and linguistic backgrounds and experiences to deliver services to clients. When language needs cannot be met by staff, SSA contracts with interpreters to facilitate communication in order to help staff deliver services. Staff and contractors provide interpreter services in 27 languages including American Sign Language. The Agency also has access to Voiance phone interpreter services for over 200 different languages.





Challenges

While there are language needs in all departments, programs such as CAPI and RCA, which primarily serve immigrants and refugees, have a high proportion of clients whose primary language is not English. Primary languages spoken in these programs are Spanish, Vietnamese, and Cantonese/Mandarin. SSA programs are challenged to provide linguistically appropriate services to clients in a timely manner.

Strategies

The Agency strives to minimize service gaps by hiring staff who have language capacity to meet client needs. In cases where client languages cannot be accommodated by staff, SSA contracted interpreters and/or Voiance interpreter services are used to facilitate service delivery.

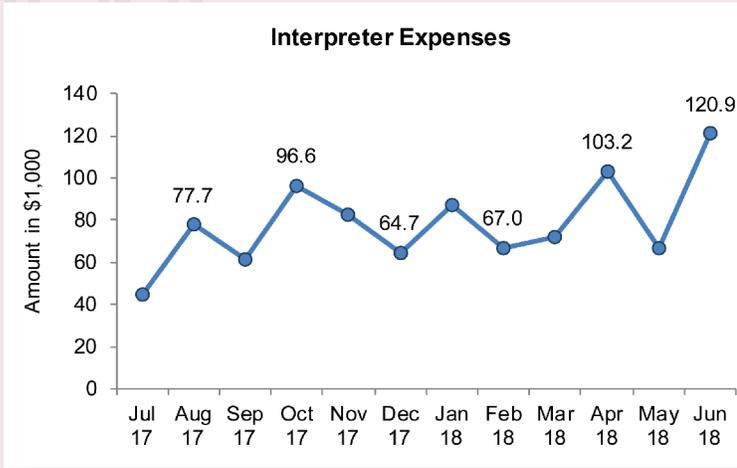
SSA contracts with language interpreters to provide translations for clients as they enroll in benefits or services, fill out paperwork, or during interviews or meetings related to SSA services. These interpreters often meet at district offices and have knowledge of the process and requirements related to SSA programs. In addition, SSA contracts with Voiance to provide on-demand translation assistance by connecting staff, clients, and interpreters over the phone. Phone interpreters cover over 200 languages and generally assist with translation services when no specific program knowledge is needed. Together with in-person interpreters, phone interpreters continue to play a key role in bridging the gap for language needs.

INTERPRETER EXPENSES



INTERPRETER EXPENSES

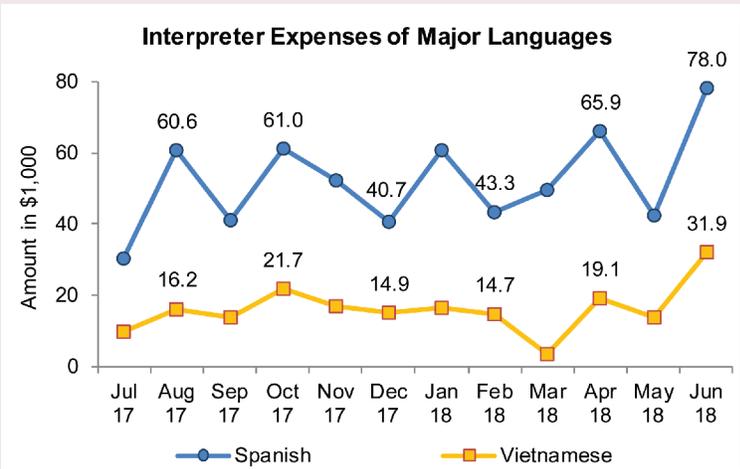
Program Highlights



FY18
↑ 9.1%

Overall, interpreter expenses increased 9.1% from FY17. The average monthly expenses for interpreter services was \$78,686 for FY18. The monthly fluctuations are largely due to how many invoices are received per month (i.e., the number of times interpreter services are needed) and when they are submitted by vendors (i.e., after every call, monthly, quarterly, etc).

On average in FY18, Spanish interpreter expenses accounted for 66.3% of overall expenses and Vietnamese interpreters accounted for 20.4%, an increase of 3.7% and 6.0%, respectively.



FY18
↑ 3.7%

FY18
↑ 6.0%

Challenges

SSA currently has 45 contracted interpreters covering 25 languages; 15 Spanish interpreters, 5 Vietnamese interpreters, and one to two interpreters for each of the high need languages such as Mandarin, Russian, Tagalog, American Sign Language. A major challenge is to have in-person interpreters who speak languages that are not high need such as Farsi.

Strategies

Language needs of clients are considered throughout the process of service delivery from the hiring staff to client contacts. For example, recruitments for hiring new workers are often informed by the language needs of current clients. Cases are assigned to multi-lingual workers based on clients' preferred written and spoken language. In addition, all forms are sent in clients' language of choice. These strategies and considerations help SSA staff deliver services in languages spoken and understood by clients in order to more effectively serve them.

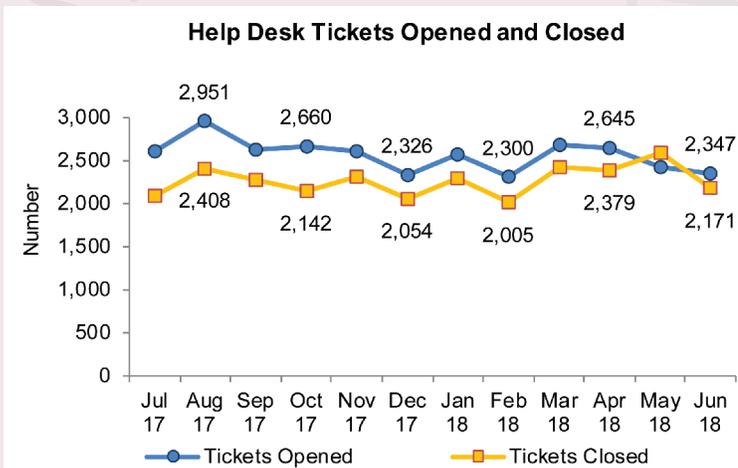


Technology Services and Solutions (TSS, formerly known as Information Systems) provides leadership, coordination, and support for Agency-wide information technology process design, service delivery, and program administration. Through technological solutions, TSS provides business process improvement, business and technology expertise, and the development of applications to enhance operations and service delivery to clients. TSS manages, supports, and provides information for reporting, program administration, decision-making, evaluation, and accountability.

**HELP DESK
SERVICES**

HELP DESK SERVICES

Program Highlights



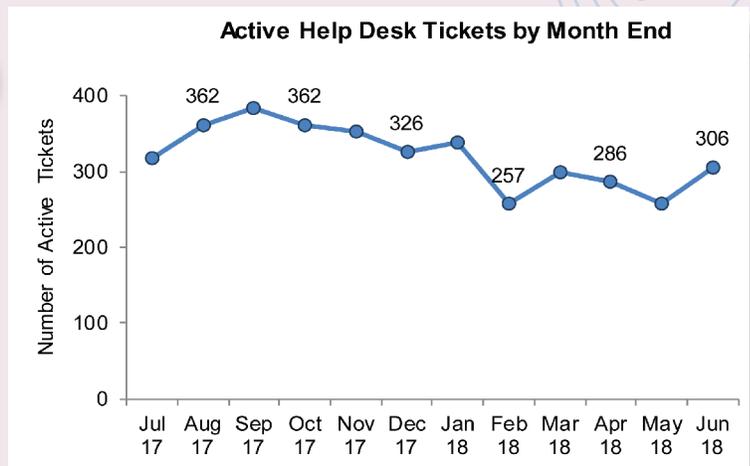
FY18
↓ 1.2%

FY18
↑ 9.1%

In FY18, the number of Help Desk Tickets opened decreased 1.2%, whereas the number of Help Desk Tickets closed increased 9.1%, compared to FY17 averages. On average, there were 2,562 tickets opened and 2,258 closed in a month (including CalWIN tickets).

In FY18, there were an average of 321 tickets per month (not including CalWIN), a 43.2% decrease from FY17.

FY18
↓ 43.2%

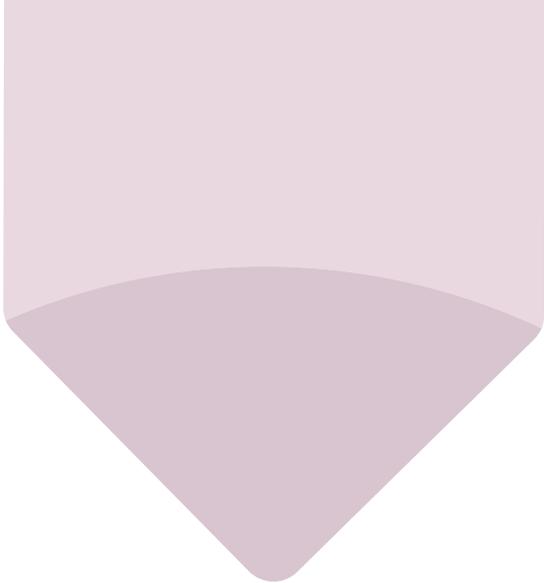


Challenges

Currently, end users have multiple channels to submit requests for assistance. They include email, phone and walk-in. Email options include Help Desk’s main email account, staff members’ individual accounts and various distribution lists. This creates a two-fold challenge: End users are unsure of which channels to utilize and staff members have to check (and keep track of) multiple channels to prioritize and process service requests.

Strategies

In order to best serve end users’ needs, an increased effort shall be made to streamline input channels and educate/inform users of their existence. Existing services such as GadWin shall be further utilized (and advertised) as a primary channel for submission of service requests. End users will benefit by receiving an automatic confirmation in the form of a service desk ticket and help desk agents will be more focused and efficient in their workflow.

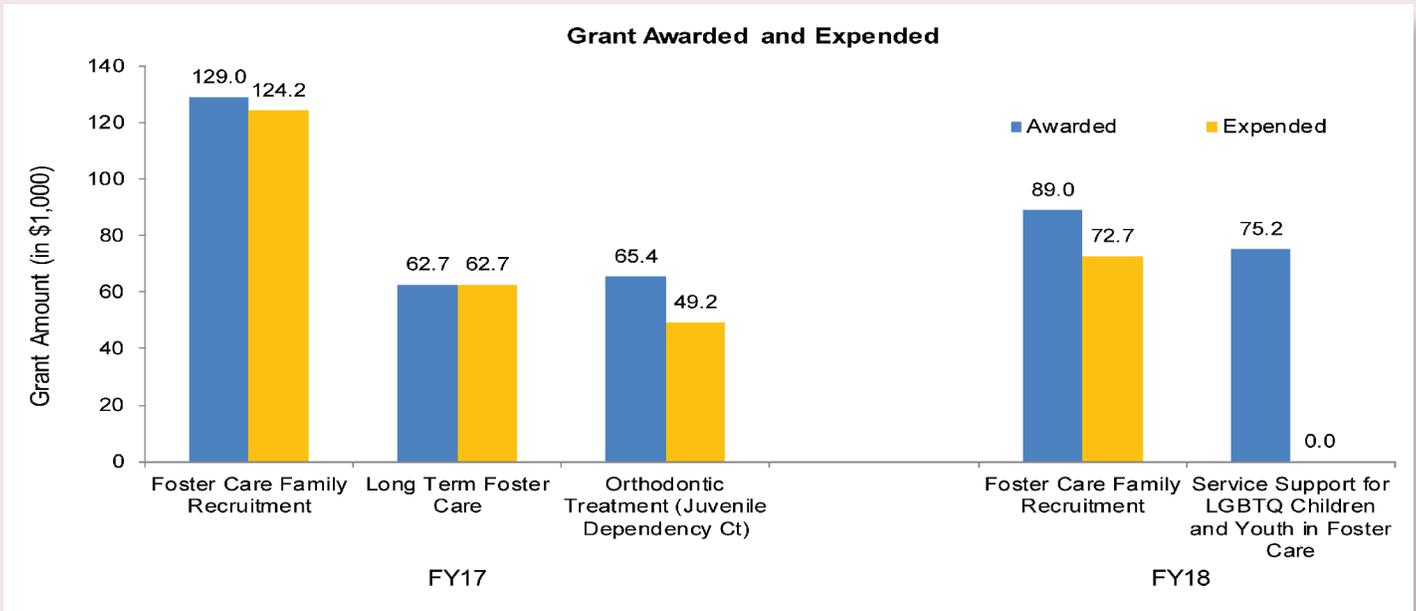


GRANT ADMINISTRATION

In addition to federal, state and county funding, SSA applies for non-allocated grant funding in order to implement innovative programs and strategies as well as to test and improve on current ones. These grants help to supplement current funding for programs and services. Each department is encouraged to pursue grants to supplement their funding.

GRANT ADMINISTRATION

Program Highlights



FY18
↓ 36.2%

In FY18, the Agency administered two competitive grants awarded for a total of \$164,123, compared to \$257,137 in competitive grants administered in FY17, a decrease of 36.2%.

Challenges

The challenge in FY18 was identifying a culturally competent vendor to deliver the services for LGBTQ youth required more time than originally believed, resulting in delays in grant implementation.

Strategies

Due to the unique challenges faced by foster care youth who have special needs or are considered high risk, the agency focused on applying for competitive grants that specifically support these foster care youth.