

County of San Diego

Health and Human Services Agency

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Health and Human Services Agency Summary

Mission Statement

To make people's lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Agency Description

The Health and Human Services Agency (HHSA) provides critical services to more than 3.2 million residents through its many programs and strategic initiatives that help advance the County's vision for a region that is building better health, living safely and thriving, which is called Live Well San Diego.

Nearly one in three residents (approximately 1,000,000) receive direct services from HHSA such as foster care, adoptions, adult protection, health insurance coverage, assistance with food, drug and alcohol prevention services, mental health care and an array of services by nurses and physicians. These services encourage the people we serve to engage in healthy living and promote safe communities to help the region thrive.

HHSA is dedicated to being a trauma informed system. Being trauma informed is a component of cultural competency to engage all people we serve, all staff and those we encounter while conducting business. Embracing the trauma informed system allows HHSA to: ensure that more than 7,500 vulnerable children are protected, answer more than 40,000 child abuse hotline calls, respond to over 12,000 adult abuse and service referrals and over 93,000 mental health crisis calls each year. In addition, these services ensure 840,000 children, adults, and seniors receive the federal and State benefits they need to meet basic needs.

HHSA shares the commitment of delivering services to those that need them by building relationships with community partners to strengthen families, addressing challenges faced by seniors who cannot live alone safely, coordinating a comprehensive service delivery for all of our military and veteran families, providing access to health care and nutrition, and providing outpatient treatment to patients with serious mental illness.

HHSA provides these services with a budget of \$2.0 billion derived from federal, State, and local funding, 5,976.50 HHSA employees, over 550 contracted providers, and hundreds of volunteers who are committed to providing excellent customer service. HHSA also works with its 17 citizen advisory boards and commissions, and participates in over 160 community advisory groups, to ensure the right services are provided to the right people, at the right time for the best possible outcome.



Strategic Framework and Alignment

In Fiscal Year 2014–15, the County of San Diego completed a major strategic renovation to simplify the Strategic Framework and enhance Strategic Alignment across the organization. This included changes to the Strategic Initiatives. Transitioning from three initiatives—Healthy Families, Safe Communities, Sustainable Environments and the eight Required Disciplines for Excellence—to streamlining the Required Disciplines for Excellence into a fourth Strategic Initiative named Operational Excellence. New Audacious Visions and Enterprise-Wide Goals (EWG) were developed to assist departments in alignment to and support of the County's Vision and Strategic Initiatives. In addition, four focus groups comprised of subject matter experts from departments across the County produced a pre-determined set of Cross-Departmental Objectives (CDO). These CDOs demonstrate how departments and/or external partners are collaborating to contribute to the larger EWG. The creation of CDO nomenclature assists in the identification of each CDO throughout the Operational Plan and shows how the department is making a strategic contribution to its outcome. For more information on the new strategic alignment, refer to the Strategic Framework and Alignment section on page 29.

HHSA Departments

- ◆ Regional Operations
- ◆ Aging & Independence Services
- ◆ Behavioral Health Services
- ◆ Child Welfare Services
- ◆ Public Health Services
- ◆ Administrative Support

2014–15 Accomplishments

Advanced the County’s vision for a region that is building better health, living safely and thriving, which is called *Live Well San Diego*.



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Expanded In-Home Outreach Team (IHOT) program services countywide (from 3 to 6 regions). Team members linked treatment-resistant individuals and their families with existing behavioral health services and community resources. This outreach and engagement was essential in assisting this population to willingly receive needed services.
 - Enhanced the service delivery system for children and youth in foster care by implementing “Pathways to Wellbeing,” a cross-departmental effort with Child Welfare Services that:
 - ◆ Identified and implemented a joint screening tool that integrates mental health assessments into the foster care intake process.
 - ◆ Implemented a cross-training model to ensure Child Welfare Services and Behavioral Health Services staff have common understanding of how to screen and connect children to needed services.
 - ◆ Implemented a plan for the integration and co-location of Child Welfare Services and Behavioral Health Services staff to ensure appropriate referral for assessment and treatment.
 - Stabilized psychiatric staffing at the San Diego County Psychiatric Hospital by utilizing physician recruitment firms.
 - Worked with HHS departments to create a trauma informed atmosphere in new and modernized facilities. This was accomplished at the following locations by creating a professional setting that includes a welcoming customer greeting area and a family-friendly setting.
 - ◆ Mid-City Child Welfare Services
 - ◆ Fallbrook Community Resource Center
 - ◆ North Inland Live Well Center
 - ◆ Magnolia Child Welfare Services, Aging & Independence Services, and Public Health Center
 - Established a common understanding of expectations for Trauma Informed Systems Integration and developed an action plan to implement in each department and region.
 - Improved recruitment efforts for foster and adoptive families resulting in a 34% increase of persons attending the Foster/Adoptive Family Orientation meetings.
 - Expanded caller options and customer support on the Foster and Adoption KIDSline to serve more than 370 calls over an average of 6 months.
- Improved the Adoption website by adding features such as children available for adoption and links to resources.
- Improved customer service through utilizing a Foster/Adoption Ombudsman to provide additional support to foster and adoptive parents.
- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Processed 3,355 compensation and pension claims to allow veterans and their dependents to thrive by promptly facilitating their access to needed benefits.
 - Created 73 new partnerships to achieve the *Live Well San Diego* goals of access to healthy foods, smoking cessation and improving workplace wellness. A list of all contributing *Live Well San Diego* recognized partners and their commitments are included at www.LiveWellSD.org.
 - Enrolled 100% (157,969 of 157,969) of Medi-Cal eligible applicants as part of the Affordable Care Act (ACA) and increased the number of residents with health insurance to reduce the costs of health care to families and individuals.
 - Hosted the Grandparents Raising Grandchildren symposiums in the North, East and Central Regions. Completed updating the Grandparents Raising Grandchildren Handbook.
 - Achieved permanency for 84% (38 of 45) of children identified through the Exceptional Families for Exceptional Children campaign.
 - Performed 20,494 blood pressure screenings at over 150 locations, with 84 partners as part of the 2015 Love Your Heart campaign. One out of every two individuals with a reported blood pressure level was identified as having an elevated blood pressure. Screened individuals received educational materials about heart health. This event helped to elevate the importance that blood pressure plays in overall health and is directly linked to 3-4-50 (3 behaviors—no physical activity, poor diet and tobacco use,—that result in 4 diseases—cancer, heart disease and stroke, type 2 diabetes and lung disease—that result in over 50 percent of deaths in San Diego).
- Leverage internal communication resources, resource groups, and social media to enhance employee understanding of *Live Well San Diego*
 - Collaborated with County Human Resources to educate all County job applicants on *Live Well San Diego* so they can understand the role employees play in helping residents to live well. By educating job applicants, new employees were aware of the County’s vision of *Live Well San Diego* and the role they play in advancing its strategies of building better health, living safely and thriving.





Safe Communities

- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Increased AIS Ombudsman positions from 5 to 11, to improve the oversight of Skilled Nursing Facilities (SNF) and Residential Care Facilities for the Elderly (RCFE). This provides an increase in advocating efforts for SNF and RCFE residents through recruitment, training and oversight of additional volunteers.
 - Provided support to the Board sponsored Alzheimer's Project. Hosted the Care and Public Awareness roundtable discussions and participated in the Clinical and Cure roundtables. Completed the Alzheimer's Project Report prepared for the Board Conference and completed the Project's Implementation Plan to drive ongoing action.



Sustainable Environments

- All residents engage in community life and civic activities
 - Held a *Live Well San Diego Expo* featuring 48 partners and 28 County departments to highlight their services and demonstrate collective impact to the community in support of the County vision.
- Foster an environment where residents engage in recreational interest by enjoying parks, open spaces and outdoor experiences
 - Hosted and promoted the 2015 *Live Well San Diego* 5K Walk/Run and Health Fair to provide a healthy and informative outdoor experience to County residents. The *Live Well San Diego* 5K event encouraged residents to exercise with family and friends at a local park while supporting thousands of children in foster care and receive health information.



Operational Excellence

- Strengthen our customer service culture to ensure a positive customer experience
 - Launched an updated *Live Well San Diego* website (LiveWellSD.org) to provide access to timely, relevant news and material. The *Live Well San Diego* website was developed using feedback from focus groups, one-on-one interviews with subject matter experts and survey of 194 community partners. The number of unique visitors to *Live Well San Diego* website was increased 83% (from 8,838 to 16,144).
 - Completed soft launch of the *Live Well San Diego* Top 10 Indicators dashboard beta site, an interactive and dynamic tool to encourage positive change toward the vision of a healthy, safe and thriving San Diego County. It communi-

cates progress, provides access to community-level health/well-being data, research, best practices and helps to drive public engagement.

- Received 21 awards for excellence:
 - ◆ American Healthcare Association National Quality Award Silver Achievement for Quality to Edgemoor Distinct Part Skilled Nursing Facility (DPSNF)
 - ◆ Harvard Bright Idea for *Live Well San Diego*
 - ◆ Harvard Bright Idea for First 5 Commission Healthy Development Services Project
 - ◆ Bronze Telly Award for First 5 Commission on "Healthy Eating" Public Service Announcement
 - ◆ National Association of Area Agencies on Aging Innovation Award for Grandparents Raising Grandchildren Initiative
 - ◆ National Association of Area Agencies on Aging Innovation Award for the Legacy Corps support for veterans and military families
 - ◆ National Association of Area Agencies on Aging Achievement Award for Care Transitions Partnership
 - ◆ National Association of Area Agencies on Aging Achievement Award for the Beacon Care Transitions Pilot
 - ◆ National Alliance on Mental Illness in California for Outstanding Mental Health Director to Alfredo Aguirre
 - ◆ Web Marketing Association Award for Outstanding Achievement in Web Development for First 5 Commission Website
 - ◆ National Association of Counties Achievement Award for Young Master Chef
 - ◆ National Association of Counties Achievement Award for Implementation of Permanency Roundtables
 - ◆ National Association of Counties Achievement Award for HHSA Lean Six Sigma Program
 - ◆ National Association of Counties Achievement Award for Office of Business Intelligence
 - ◆ National Association of Counties Achievement Award for First 5 First Steps – Countywide Coordination
 - ◆ National Association of Counties Achievement Award for Embedding Eligibility Workers in Food Banks
 - ◆ National Association of Counties Achievement Award for A Guide to Using Facebook to Prevent Suicide and Reduce Stigma
 - ◆ National Association of Counties Achievement Award for The San Diego Care Transitions Partnership
 - ◆ National Association of Counties Achievement Award for San Diego County Adult Protective Services Acutely Vulnerable Adult Protocol
 - ◆ National Association of Counties Achievement Award for Legacy Corps–Support for Veterans and Military Families
 - ◆ National Association of Counties Achievement Award for The Alzheimer's Project



2015–17 Health and Human Services Agency (HHS) Cross-Departmental Objectives

Each of the five business groups has a Cross-Departmental Objectives (CDO) table listing the CDOs to which their departments make significant contributions. This table shows various HHS departments efforts toward the achievement of the CDO and includes additional County business group(s) contributing to the CDO listed. To see more detailed information on a specific contribution to a CDO, see that department’s 2015–17 Objectives with the corresponding CDO nomenclature. A complete list of all CDOs with their alignment to the Enterprise-Wide Goals and Audacious Visions can be found in the Strategic Framework and Alignment section on page 29.

Strategic Initiative	Cross-Departmental Objective	Contributing HHS Departments and Business Groups	
	HF1 Create a trauma-informed County culture	Administrative Support, Aging & Independence Services, Behavioral Health Services, Child Welfare Services, Public Health Services, Regional Operations, Community Services Group, Land Use and Environment Group	
	HF2 Connect residents with local food sources, nutrition education, and nutrition assistance	Administrative Support, Aging & Independence Services, Public Health Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group	
	HF3 Partner with producers, distributors and retailers to increase access to and purchase of healthy local foods in food desert areas	Administrative Support, Land Use and Environment Group	
	HF4 Pursue policy changes that support clean air, clean water, active living and healthy eating	Behavioral Health Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group	
	HF5 Develop an employee-centric campaign based on a simple consistent message to help employees understand how they contribute to <i>Live Well San Diego</i>	Administrative Support, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group	
	SC1 Leverage internal and external partnerships to provide resources to engage residential, visitor and business communities in personal disaster readiness (preparedness)	Public Health Services, Community Services Group, Finance and General Government Group, Public Safety Group	
	SC2 Create opportunities for safe access to places that provide community connection and engagement	Behavioral Health Services, Public Health Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group	
	SC3 Identify and mitigate community threats that impact quality of life	Regional Operations, Community Services Group, Land Use and Environment Group, Public Safety Group	
	SC6 Provide youth and their caregivers with opportunities to promote healthy relationships, identify risk factors and access services to prevent crime, neglect and abuse	Child Welfare Services, Regional Operations, Finance and General Government Group, Land Use and Environment Group, Public Safety Group	
	SC7 Identify and increase multi-agency collaboration to develop, support and enhance enforcement strategies with the biggest impact to protect youth and reduce recidivism	Regional Operations, Community Services Group, Land Use and Environment Group, Public Safety Group	
	SC8 Develop a universal assessment process that drives case planning, sentencing, and linkage to appropriate services both in and out of custody	Behavioral Health Services, Public Safety Group	
		SE1 Improve policies and systems across departments to reduce economic barriers for business to grow and consumers to thrive	Public Health Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
		SE2 Anticipate customer expectations and demands	Administrative Support, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
SE3 Develop a countywide marketing campaign to raise awareness of and increase participation in sustainability and pollution prevention programs so every person considers and makes informed decisions about their effects on the environment		Administrative Support, Community Services Group, Finance and General Government Group, Land Use and Environment Group	





Strategic Initiative	Cross-Departmental Objective		Contributing HHSa Departments and Business Groups
	SE4	Improve access to and use of parks, open spaces and outdoor experiences by assessing policies and community needs throughout San Diego County	Administrative Support, Land Use and Environment Group
	SE7	Promote and communicate the opportunities and value of being actively involved in the community so that residents are engaged and influencing change	Administrative Support, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
	OE1	Ensure our influence as a regional leader on issues and decisions that impact the financial well-being of the county	Administrative Support, Public Health Services, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
	OE2	Build the financial literacy of the workforce in order to promote understanding and individual contribution to the County's fiscal stability	Administrative Support, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
	OE3	Develop a plan to utilize new and existing technology and infrastructure to improve customer service	Administrative Support, Aging & Independence Services, Behavioral Health Services, Child Welfare Services, Public Health Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
	OE4	Provide information access to all customers ensuring consistency, transparency and customer confidence	Administrative Support, Aging & Independence Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
	OE5	Engage employees to take personal ownership of the customer experience	Administrative Support, Aging & Independence Services, Behavioral Health Services, Child Welfare Services, Public Health Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group
	OE6	Develop a Countywide management philosophy that fosters employee well-being, inclusion and development	Administrative Support, Aging & Independence Services, Behavioral Health Services, Child Welfare Services, Public Health Services, Regional Operations, Community Services Group, Finance and General Government Group, Land Use and Environment Group, Public Safety Group

Related Links

For additional information on the programs offered by the Health and Human Services Agency, refer to the website:

- ◆ www.sandiegocounty.gov/hhsa

For additional information about *Live Well San Diego*, go to:

- ◆ www.LiveWellSD.org



Budget Changes and Operational Impact: 2014–15 to 2015–16

Overview

The Health and Human Services Agency's Fiscal Year 2015–16 budget includes appropriations of \$2.0 billion, an increase of \$103.3 million. Almost half of the growth is attributed to increases in the In-Home Supportive Services (IHSS) program due to caseload growth and the State's restoration of the 7% cut in IHSS Individual Provider services. The majority of remaining growth is for negotiated wage and benefit increases, growth in certain public assistance caseloads, and an investment in the Knowledge Integration Program (KIP) to develop an electronic information exchange for improved coordination and delivery of essential services.

The Adopted Operational Plan for Fiscal Year 2015–16 funds several initiatives to expand and enhance services. Programs new to the operational plan include implementation of Laura's Law, new services in support of the Alzheimer's Project, and participation in the Title IV-E California Well-Being Project to allow for the flexible use of federal dollars to improve outcomes in Child Welfare Services.

Additionally, several key programs included in the Fiscal Year 2014–15 Operational Plan will be expanded in the upcoming year:

- ◆ The Cultural Broker program will expand to further support targeted County efforts to decrease disproportionality within the child welfare system.
- ◆ The Office of Military and Veteran Affairs will increase outreach and education services to veterans countywide.
- ◆ An additional ten teams will be added to the Psychiatric Emergency Response Teams (PERT) in collaboration with the Public Safety Group. This will allow for expanded services and coverage to link individuals with appropriate levels of care to avoid unnecessary incarcerations and hospitalizations and assist with making our region safer.
- ◆ The Family Stabilization and Subsidized Employment programs will grow in order to better assist CalWORKs participants in achieving self-sufficiency.
- ◆ In Public Health Services, further investments in information technology will be made as the department moves towards voluntary national accreditation through the Public Health Accreditation Board (PHAB) to ensure quality services are provided as efficiently as possible in protecting the public health of county residents.
- ◆ Facilities will continue to be upgraded and modernized across all program areas to ensure superior customer service by focusing on co-locating services that will be delivered in an integrated, professional and trauma informed atmosphere.

Promoting operational excellence and trauma informed care in all services is a priority and will remain a focus in Fiscal Year 2015–16 with the Knowledge Integration Program. KIP will streamline and enhance information exchange between health, social service, behavioral health, physical health, housing and law enforcement programs to support person-centered and trauma informed practice, resulting in improved coordination and service delivery to clients seeking access to health and human services.

Tobacco Settlement Funds

Tobacco settlement payments were first securitized in Fiscal Year 2001–02 to allow a stable funding stream for health and human services programs. This Special Revenue Fund reflects \$13.5 million for Fiscal Year 2015–16. A decrease of \$14.0 million from the prior year.

The \$14.0 million decrease includes a \$6.8 million decrease in Operating Transfers and \$7.2 million in Other Charges. The \$6.8 million decrease in Operating Transfers is due to lower than projected expenditures in the County Medical Services program associated with the Affordable Care Act. The \$7.2 million decrease in Other Charges is to align the projected expenditures held for contingencies to the estimated Interest on Deposits and Investments revenue. Over the last several fiscal years this decrease of Interest on Deposits and Investments has been an ongoing trend that is expected to carry on into the next fiscal year.

Staffing

Net increase of 3.00 staff years

Other changes are explained in more detail in the program narrative sections.

- ◆ Increase of 5.00 staff years in the Office of Military and Veteran Affairs to augment outreach and education activities by increasing the County's presence at County library outstations and new strategically located Veteran Resource Centers.
- ◆ Decrease of 2.00 staff years in Regional Operations due to a transfer to Auditor and Controller and Office of Revenue and Recovery to support expanded recovery efforts for HHS programs.

Expenditures

Net increase of \$103.3 million. The significant changes are listed below.

- ◆ Salaries & Benefits—increase of \$12.2 million as a result of negotiated labor agreements, fewer assumed vacancies associated with increased hiring and retention efforts and costs associated with the increase of 3.00 staff years.
- ◆ Services & Supplies—net increase of \$99.0 million
 - ◆ Increase of \$92.0 million in contracted services, primarily due to increases in the In-Home Supportive Services (IHSS) Individual Provider costs, the costs for the design,





development and implementation phase of the KIP project to modernize service delivery, the addition of Psychiatric Emergency Response Teams, the implementation of Laura's Law, the expansion of the Cultural Broker, and new services in support of the Alzheimer's Project.

- ❖ Increase of \$4.5 million in rents and leases, utilities and guard services.
- ❖ Increase of \$1.3 million in Information Technology related services and supplies.
- ❖ Increase of \$1.2 million in costs applied to general fund departments.
- ◆ Other Charges—net increase of \$0.8 million
 - ❖ Increase of \$11.5 million in Regional Operations including increases for General Relief caseload growth, Family Stabilization and Expanded Subsidized Employment, CalFresh client benefits, and implementation of the Approved Relative Caregiver program.
 - ❖ Decrease of \$7.2 million in the Tobacco Settlement fund to align projected expenditures held for contingencies to the estimated interest on deposits.
 - ❖ Decrease of \$3.6 million in Child Welfare Services in the Foster Care program to align with caseload trends.
- ◆ Operating Transfer Out—decrease of \$6.8 million in Tobacco Settlement fund due to lower than projected expenditures in the County Medical Services program.
- ◆ Expenditure Transfer—decrease of \$0.8 million due to a cost applied agreement with the Public Safety Group for the expansion of PERT teams.
- ◆ Fund Balance Component Increases—decrease of \$1.1 million for one-time prior year commitment of principal and interest received from the February 2011 sale of the Grand Avenue clinic.

Revenues

Net increase of \$103.3 million

- ◆ Fines, Forfeitures & Penalties—increase of \$0.7 million due primarily to projected penalty assessments in Emergency Medical Services.
- ◆ Revenue from Use of Money and Property—decrease of \$4.1 million in interest from Tobacco Settlement Funds.
- ◆ Intergovernmental Revenue—net increase of \$102.7 million
 - ❖ Increase of \$46.7 million in IHSS Individual Provider Payments and Administration revenue.
 - ❖ Increase of \$21.5 million in Realignment to align with revenue projection.
 - ❖ Increase of \$14.1 million in Social Services administrative revenue primarily due to growth of Medi-Cal related to the Affordable Care Act.
 - ❖ Increase of \$5.9 million related to various assistance caseload programs (Adoptions, Work Incentive Nutritional Supplement (WINS) and State Utility Assistance Subsidy (SUAS) programs, Approved Relative Caregiver, and CalWORKs).
- ◆ Increase of \$4.8 million in various Public Health Services revenues and grants based on additional allocated federal and/or state funding that supports programs and initiatives such as HIV prevention, California Childrens Services, Healthy Works, nutrition education, emergency preparedness and sodium reduction.
- ◆ Increase of \$4.8 million primarily in Family Stabilization and Expanded Subsidized Employment program revenues to align revenue to support expenditure growth described in Other Charges.
- ◆ Increase of \$4.3 million associated with the Title IV-E California Well-Being Project to allow for flexible use of federal dollars to improve outcomes in Child Welfare Services.
- ◆ Increase of \$1.0 million in Short Doyle Medi-Cal revenue to align with program trends related to the Affordable Care Act.
- ◆ Increase of \$0.6 million in various Behavioral and Mental Health revenues to align projected revenues to projected expenditures.
- ◆ Decrease of \$1.0 million in various Aging Services revenues to align funding to expected caseload expenditures in the Community-Based Care Transitions Program and to anticipated allocations for Older Americans Act Services.
- ◆ Charges for Current Services—net increase of \$1.0 million
 - ❖ Increase of \$4.3 million primarily in Institutional Hospital Services for the Edgemoor Skilled Nursing Facility due to Intergovernmental Transfer that was not previously budgeted.
 - ❖ Increase of \$0.7 million in Public Health Services primarily related to third party external administrative fees, increased State fees for certified copies and ambulance transports.
 - ❖ Decrease of \$3.4 million in Child Welfare Services due to reduction of Developmental Screening and Enhancement funding from the First Five Commission.
 - ❖ Decrease of \$0.6 million in Regional Operations for third party reimbursement due to the Affordable Care Act.
- ◆ Miscellaneous Revenues—increase of \$1.4 million primarily in Regional Operations for the Medi-Cal Outreach and Enrollment Grant.
- ◆ Other Financing Sources—decrease of \$5.1 million primarily in Regional Operations in Operating Transfer from Tobacco Securitization revenues due to decreased costs in the County Medical Services program.
- ◆ Use of Fund Balance—increase of \$5.2 million. A total of \$69.2 million is budgeted.
 - ❖ \$24.4 million for the design, development & implementation phase of the Knowledge Integration Program (KIP) to modernize service delivery.
 - ❖ \$20.0 million for management reserves.



- ❖ \$11.6 million for Tobacco Settlement projects that are reimbursed through the securitized Tobacco Settlement Revenue account.
- ❖ \$9.0 million for one-time major maintenance projects.
- ❖ \$3.5 million for one-time technology upgrades in Public Health Services, Behavioral Health Services, and Aging & Independence Services.
- ❖ \$0.5 million for the Cultural Broker Program in Child Welfare Services.
- ❖ \$0.2 million for multiple Alzheimer's awareness and support related projects.

- ❖ General Purpose Revenue—increase of \$1.5 million to contribute to salary and benefit costs related to negotiated labor agreements.

Budget Changes and Operational Impact: 2015–16 to 2016–17

Net decrease of \$2.9 million is the result of an increase of \$14.8 million in Salaries & Benefits due to negotiated labor agreements offset by a decrease of \$17.7 million in Services & Supplies due to the elimination of one-time projects from the prior year.





Group Staffing by Department

	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Regional Operations	3,183.75	3,165.00	3,165.00
Aging and Independence Services	385.00	390.00	390.00
Behavioral Health Services	786.25	789.00	789.00
Child Welfare Services	757.00	768.00	768.00
Public Health Services	484.50	485.50	485.50
Administrative Support	377.00	379.00	379.00
Total	5,973.50	5,976.50	5,976.50

Group Expenditures by Department

	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Regional Operations	\$ 700,078,861	\$ 615,226,914	\$ 597,125,126	588,043,799.9	\$ 629,455,120	\$ 637,049,458
Strategic Planning & Operational Support	119,241	—	—	252.0	—	—
Aging and Independence Services	318,650,244	333,551,249	346,667,662	346,109,616.5	383,582,465	402,632,603
Behavioral Health Services	385,747,166	425,433,577	425,957,540	406,931,616.9	441,551,554	440,388,289
Child Welfare Services	240,563,171	270,597,535	271,204,185	246,810,176.9	276,838,541	278,191,989
Public Health Services	99,395,749	106,403,685	109,942,279	100,766,581.2	115,384,860	113,556,228
Public Administrator / Public Guardian	13,184	—	—	(2,343.3)	—	—
Administrative Support	81,902,586	122,228,623	132,085,324	100,301,387.3	143,903,403	116,006,453
Tobacco Settlement Funds	24,328,584	27,500,000	27,500,000	13,625,943.9	13,500,000	13,500,000
Total	\$ 1,850,798,786	\$ 1,900,941,583	\$ 1,910,482,116	1,802,587,031.4	\$ 2,004,215,943	\$ 2,001,325,020





Regional Operations

Mission Statement

To make people's lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

San Diego County is comprised of 3.2 million residents who reside in 18 incorporated cities and 17 unincorporated communities, which are urban, suburban and rural. These communities reflect great diversity in ethnicity, socio-economic status, and age. The county is also home to the largest naval fleet in the world, is the busiest international border crossing in the world, has more Indian reservations than any other county in the United States, and ranks first among refugee admissions to California.

To address this diversity and the unique needs of each community, the Health and Human Services Agency (HHSA) has divided the county into six geographic service regions. Each region provides direct services such as child protection, immunizations, public health nursing, health education, and promotion, and enrollment of more than 762,000 residents into health care, nutrition, and temporary financial assistance programs. These services are provided in all regions through six public health centers, 12 family resource centers, two call centers, and two document processing centers.

In addition to providing direct services, the regions collaborate with community partners to address the uniqueness of their own communities, identify emerging needs, and develop shared goals to advance Live Well San Diego, to improve health, safety and well-being for all residents.

In order to deliver these essential services, Regional Operations has 3,165 staff and a budget of \$629.5 million, which includes assistance aid payments for residents. For more information about the assistance aid payments, see Appendix D.



2014-15 Accomplishments



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Processed over 1,000 Medi-Cal applications for persons under Sheriff and Probation supervision by collaborating to implement the Medi-Cal Outreach and Enrollment Grant. This was achieved by integrating HHSA staff in public safety facilities to provide assistance in enrolling eligible individuals into health care and better coordinate their release back to the community.
 - Provided 558 public health nurse contacts for military families in North Coastal Region. Target of 640 was not met due to decreased client demand.
 - Placed 51% (669 of 1,311) of foster youth with a relative or non-related extended family member to maintain their connections to familiar environments and minimize the effects of trauma to children.
 - Integrated HHSA resources with 34 North County Community Partners to strengthen relationships with military service providers that promote safe and healthy lifestyles for military personnel transitioning to civilian life. Developed and implemented a Military and Veterans Mental Health Action Plan for North County.
 - Processed 96% (34,726 of 36,023) of CalWORKs applications timely to help eligible families become more self-sufficient.
- Strengthen the local food system and support the availability of healthy foods, nutrition education, and nutrition assistance for those who need it
 - Connected with community-based organizations such as South Bay Community Services and the Family Justice Center in San Diego to provide on-site support for families and individuals seeking assistance and information about public assistance programs such as health, nutrition, and

Strategic Initiative Legend

HF	SC	SE	OE
○	- Audacious Vision		
●	- Enterprise Wide Goal		
□	- Cross-Departmental Objective		
■	- Department Objective		
◆	- Objective Sub-Dot Point Level 1		

For more information on alignment to the Strategic Initiatives refer to the Group Description section within the Health and Human Services Agency Summary.

temporary financial assistance. Answered 31,143 calls from 52 community-based organizations through the ACCESS Customer Service Call Center to facilitate their assistance to individuals and families with public assistance programs.

- Processed 94% (138,815 of 147,545) of CalFresh applications timely to help eligible families and individuals buy food and improve their nutrition.
- Ensured 57% (216 of 373) of mothers in the Maternal Child Health (MCH) and Nurse Family Partnership (NFP) programs continued to breastfeed their infant at 6 months of age to promote healthier outcomes for their infants.
- Hosted quarterly CalFresh Task Force San Diego Hunger Coalition forums that had over 100 community organizations identifying strategic focus areas to address strategies to assist customers with the application process, outreach innovations and best practices.
- Implemented Supplemental Nutrition Assistance Program-Education (SNAP-ED) for seniors project, which was funded with one year grant received by Aging and Independence Services from USDA Food and Nutrition Services engaging more than 75 older Hispanic and Filipino adults into community improvement projects, with a potential of reaching over 200 people. One project established a local mobile food pantry distribution site and the second assisted seniors to obtain CalFresh and Medi-Cal through video interviewing at a local senior facility.
- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Promoted *Live Well San Diego* in the lives of 50,668 children throughout many North County school districts, including Vista Unified School District, Spencer Valley School District, Del Mar Union School District, Solana Beach School District, Escondido Union High School District and Fallbrook Union Elementary School District bringing them on board as *Live Well San Diego* officially designated partner districts.
 - Enrolled 100% (157,969 of 157,969) of Medi-Cal eligible applicants as part of the Affordable Care Act (ACA) and increased the number of residents with health insurance to reduce the costs of health care to families and individuals.

 Safe Communities

- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Immunized 99.9% (16,402 of 16,462) of children 0-18 years of age served at Public Health Centers and clinics to protect them from diseases such as measles and whooping cough.
 - Partnered with 14 community agencies and conducted 14 informational and immunization events resulting in 1,077 persons immunized.

- Collaborated with community partners to host Opening Hearts Creating Community, a free community-wide interfaith conference in Escondido that provided over 100 participants a forum on mental health, training to recognize signs of mental illness, and resources to reduce the stigma often associated with mental illness.
- Addressed homelessness by participating in activities through the Regional Continuum of Care Council, the 25 Communities Effort, the Campaign to End Homelessness in Downtown San Diego, the Emergency Food and Shelter Program, and the Unaccompanied Youth Task Force, resulting in 139 previously homeless individuals being housed.
- Strengthen our prevention and enforcement strategies to protect our youth from crime, neglect and abuse
 - Coordinated partnerships in North County to host the Building Better Futures annual forum and develop the discussion on gang prevention efforts, intervention and suppression. This forum brought together 166 participants such as local policy/decision makers, law enforcement, probation, school-based leaders, community-based organizations and community members.
 - Encouraged 56% (2,478 of 4,402) of families to participate in quarterly meetings regarding their children to encourage joint planning with social workers and families. Families who participate in joint-case planning are more likely to follow through with plans and meet safety goals, to ultimately achieve positive outcomes for the children.
 - Ensured 83% (1,289 of 1,541) of children in foster care (8 days or more, but less than 12 months) had fewer than three placements to minimize the trauma that children experience and lessen negative impact to their school performance.
 - Partnered with Chula Vista Police Department to obtain the Smart Policing Initiative Grant to develop an evidenced based joint response for approximately 3,600 children involved in domestic violence calls each year.

 Sustainable Environments

- Provide and promote services that increase consumer and business confidence.
 - Worked with community partners to develop effective resources allowing refugees to acculturate, gain independence, and enhance long-term self-sufficiency. This was achieved by providing education on child abuse prevention, and streamlining processes for CalWORKs and Welfare to Work, Refugee Employment Services, which resulted in an 18% increase in the number of work ready refugees who are employed. Create and promote diverse opportunities for residents to exercise their right to be civically engaged and finding solutions to current and future challenges.





- Conducted a *Live Well San Diego* – Living Safely community forum in North County with 140 participants to discuss and enhance the collective efforts for a healthy, safe and thriving region. Participants included community stakeholders, law enforcement, schools, cities, community-based organizations, health organizations, and residents.



Operational Excellence

- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Assisted 835 clients in applying for public assistance via video interviewing in North Inland and North Coastal Region. Target of 1,323 was not met due to redirection of community partner efforts.
- Develop, maintain and attract a skilled, adaptable and diverse workforce by providing opportunities for our employees to feel valued, engaged and trusted
 - Provided 1,463 Human Services Specialists and 483 clerical staff various customer service related training opportunities, including: Civil Rights, Domestic Violence, Human Trafficking, and Trauma Informed Service Delivery to address customer service and cultural competence with the goal of improving the customer experience.

2015–17 Objectives



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Process 96% (38,016 of 39,600) of CalWORKs applications timely. This is a key metric required by the State and is a first step in assisting families toward achieving self-sufficiency.
- Strengthen the local food system and support the availability of healthy foods, nutrition education, and nutrition assistance for those who need it
 - Enroll 95% (285 of 300) of eligible Nurse Family Partnership and Maternal Child Health clients in CalFresh and Women Infants and Children Program. (HF2)
 - Ensure that 52% (156 of 300) of infants whose mothers participate in the NFP and MCH programs continue to be breastfed to 6 months of age. (HF2)
 - Process 92% (121,440 of 132,000) of CalFresh applications timely. CalFresh is a financial nutrition program to help eligible families and individuals buy food to improve their nutrition.
- Pursue policy change for healthy, safe, and thriving environments with a special focus on residents who are in our care or rely on us for support

- Enroll 100% (91,000) of newly eligible Medi-Cal recipients as part of the ACA to increase the number of residents with health insurance and cut the overall costs of health care to families and individuals. (HF4)



Safe Communities

- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Establish baseline number for chronic homeless, homeless Veterans and Veteran families who are assessed using an assessment tool (VI_SPDT) and/or referred to improve self-sufficiency. (SC2)
 - Increase the diversity of *Live Well San Diego* partners to include tribal organizations, faith based entities, several business sectors, which may include health, technology, biotechnology, and hospitality. (SC2)
 - Develop an evaluation component for Promise Neighborhoods to outline specific strategic roles for South Region Child Welfare Services, Public Health, Family Resource Center Eligibility staff and other HHS Programs. (SC2)
 - Deliver age-appropriate vaccines to 98% (15,680 of 16,000) of children 0-18 years of age served at regional Public Health Centers and clinics to protect them from diseases such as measles and whooping cough. (SC3)
- Strengthen our prevention and enforcement strategies to protect our youth from crime neglect and abuse. (See Child Welfare Services section for more information on family strengthening)
 - Reunify 47% (152 of 325) of children removed from the home due to safety concerns with parent(s) within 12 months. (SC6)
 - Provide 890 East Region customers and community partners the education and information necessary for prevention, early intervention and family strengthening activities. (SC6)
 - Develop a plan with Chula Vista Police Department and Child Welfare Services to implement the Smart Policing Initiative to reduce the occurrence of domestic violence calls when children are involved. (SC7)
 - Encourage 50% (2,350 of 4,700) of families to participate in quarterly meetings regarding their children for joint planning with social workers. Families who participate in joint-case planning are more likely to follow through with plans and meet safety goals to achieve positive outcomes for the children.
 - Ensure 87% (1,479 of 1,700) of children in foster care (8 days or more, but less than 12 months) have fewer than three placements to minimize the trauma that children experience and lessen negative impact to their school performance.





Sustainable Environments

- Provide and promote services that increase consumer and business confidence
 - Work with community partners in Central, East, and South Region to develop effective resources that allow refugees to acculturate, gain independence and enhance long-term self-sufficiency. (SE1)



Operational Excellence

- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Increase by 5% (5,116 to 5,371) the number of CalFresh recipients who are seniors living in rural areas by promoting the use of video interviewing for public assistance programs. (OE3)
 - Increase by 20% the number of status reports and renewals submitted through Benefits CalWIN, by educating customers about resources and pathways to services online without the need to visit or call an office. (OE4)

- Strengthen our customer service culture to ensure a positive customer experience
 - Create an employee culture that is trauma informed and build an environment that is conducive to reducing trauma for residents seeking services. (OE5)
 - Develop a plan to enhance ACCESS Center self-service call features and web page to improve the customer service experience for San Diego County residents.

Related Links

For detailed information about the health and characteristics of the people living in each HHS Region, go to:

◆ www.SDHealthStatistics.com

For additional information on the programs offered by the Health and Human Services HHS, go to:

◆ www.SDCounty.ca.gov/HHS

For information about *Live Well San Diego*, go to:

◆ www.LiveWellSD.org

Performance Measures	2013–14 Actuals	2014–15 Adopted	2014–15 Actuals	2015–16 Adopted	2016–17 Approved
Family participation in joint case planning and meetings quarterly ⁸	45% of 4,646	50% of 4,700	56% of 4,402	50% of 4,700	50% of 4,700
Children in foster care that are with a relative or non-related family member ⁷	55% of 1,502	55% of 1,500	51% of 1,311	N/A	N/A
Children in foster care for less than 12 months have fewer than 3 placements during that period ^{9, 10}	85% of 1,674	87% of 1,700	83% of 1,541	87% of 1,700	87% of 1,700
Mothers who continue to breastfeed their infant at 6 months of age ⁴	51% of 323	50% of 300	57% of 373	52% of 300	52% of 300
Children 0–18 years of age receive age-appropriate vaccines ¹	99% of 12,769	99% of 15,000	99% of 16,462	98% of 16,000	98% of 16,000
Timely processing of CalFresh applications ⁵	90% of 153,288	91% of 157,368	94% of 147,545	92% of 132,000	92% of 132,000
Timely processing of CalWORKs applications ²	97% of 41,516	95% of 43,488	96% of 36,023	96% of 39,600	96% of 39,600
Enrollment of newly eligible Medi-Cal recipients as part of the ACA ³	N/A	100% of 100,000	100% of 157,969	100% of 91,000	100% of 91,000
Children reunified with parents within 12 months ⁶	N/A	N/A	N/A	47% of 325	47% of 325





Table Notes

- ¹ During Fiscal Year 2013–14, an additional public health vaccine provider site, VIP, was included in the denominator to fully reflect the number of vaccines provided by Health and Human Services Agency. The denominators for Fiscal Year 2014–15 and 2015–16 reflect the recent addition.
- ² Beginning Fiscal Year 2014–15, the CalWORKs timely processing measure will be reported to more accurately reflect the activities in the Family Resource Centers and 2 call centers.
- ³ This is a new measure effective Fiscal Year 2014–15 to reflect program changes associated with implementation of the ACA.
- ⁴ This measure captures the support provided to at-risk mothers and infants participating in the NFP and MCH public health nursing programs by encouraging breastfeeding and other healthy behaviors.
- ⁵ When children ages 0–18 who come to the Public Health Center (PHC) do not receive the age-appropriate immunization according to the recommended schedule, it is referred to as a “missed opportunity” because a patient (child) is not immunized during their visit to the PHC and that child may not ever return to the PHC for services. This data is not equivalent to coverage rates which applies to primary care practices, medical homes, is reported by age group or population and driven by multiple factors.
- ⁶ Effective Fiscal Year 2015–16, the CalFresh and CalWORKs measures were adjusted to reflect annual data.
- ⁷ Performance measure added in Fiscal Year 2015–16 to support strategic alignment to the County's vision of a region that is Building Better Health, Living Safely and Thriving: *Live Well San Diego*.
- ⁸ Measure removed Fiscal Year 2015–16 as it is contained in the Child Welfare Department section.
- ⁹ Target not met as participation by family members is optional.
- ¹⁰ Target not met while goal is to not have more than 3 placements for children in a 12 month period, there are circumstances where cases are difficult such as large sibling groups.

Budget Changes and Operational Impact: 2014–15 to 2015–16

Regional Operations has an overall increase of \$14.2 million. Major initiatives include growing the Family Stabilization and Expanded Subsidized Employment programs in order to decrease time to achieve self-sufficiency for CalWORKs participants. Focus on eligibility operations remains a high priority with continued caseload growth related to the Affordable Care Act, as well as continued growth in the General Relief program.

Staffing

Net decrease of 18.75 staff years

- ◆ Decrease of 11.00 staff years due to a transfer to County Child Welfare Services to support operational needs.
- ◆ Decrease of 2.75 staff years due to a transfer to Behavioral Health Services to support operational needs.
- ◆ Decrease of 2.00 staff years due to a transfer to Administrative Support to support operational needs.
- ◆ Decrease of 2.00 staff years due to a transfer to Auditor and Controller Department's Office of Revenue and Recovery to support expanded recovery efforts for HHSA programs.

- ◆ Decrease of 1.00 staff year due to a transfer to the Emergency Medical Services program to support operational needs.
- ◆ Additionally, staff were transferred among related programs within Regional Operations, including Healthcare Policy Administration, Eligibility Operations, and Regional Self-Sufficiency to manage the service needs associated with the impact of the Affordable Care Act.

Expenditures

Net increase of \$14.2 million

- ◆ Salaries & Benefits—increase of \$4.0 million due to negotiated labor agreements, and fewer assumed vacancies associated with increased hiring and retention efforts offset by the reduction of the costs due to the net decrease of 18.75 staff years.
- ◆ Services & Supplies—net decrease of \$1.2 million.
 - ◆ Decrease of \$4.7 million in contracted services due to a reduction of \$8.6 million in the County Medical Services program associated with the Affordable Care Act (ACA), offset by increases totaling \$3.9 million in other areas including Expanded Subsidized Employment, Family Stabilization and Medi-Cal Outreach and Enrollment.



- ❖ Decrease of \$0.1 million in various other services and supplies.
- ❖ Increase of \$3.0 million in rents & leases and guard services for the Family Resource Centers, Public Health Centers and Child Welfare Services offices as well as the new North County facility.
- ❖ Increase of \$0.6 million in Costs Applied expenses associated with the Public Assistance Fraud Division in the District Attorney’s Office and increased collection efforts in the Office of Revenue and Recovery.
- ❖ Other Charges—increase of \$11.4 million.
 - ❖ Increase of \$4.0 million in General Relief assistance payments to align with projected caseload growth.
 - ❖ Increase of \$3.9 million primarily due to an expansion of Family Stabilization and Expanded Subsidized Employment activities.
 - ❖ Increase of \$2.0 million in CalFresh client benefits due to Work Incentive Nutritional Supplement (WINS) and State Utility Assistance Subsidy (SUAS) programs.
 - ❖ Increase of \$1.5 for the implementation of the Approved Relative Caregiver (ARC) program.
- ❖ Increase of \$1.5 million in State revenue for the Approved Relative Caregiver (ARC) program.
- ❖ Increase of \$0.7 million in Realignment to align with revenue with expenditure increases described above.
- ❖ Increase of \$0.2 million in Medi-Cal Administrative Activities (MAA) revenue to cover growth in Salaries & Benefits.
- ❖ Charges for Current Services—decrease of \$0.6 million in Third Party Reimbursement associated with the Affordable Care Act and Health Care Reform.
- ❖ Miscellaneous Revenues—increase of \$1.2 million.
 - ❖ Increase of \$1.0 million to the Medi-Cal Outreach & Enrollment Grant for contracted outreach and enrollment activities.
 - ❖ Increase of \$0.2 million in General Relief Overpayments.
- ❖ Other Financing Sources—decrease of \$6.8 million in Operating Transfer from Tobacco Securitization revenues due to decreased costs in the County Medical Services program under the ACA.
- ❖ Use of Fund Balance—decrease of \$3.1 million. Zero dollars of Fund Balance is budgeted.
- ❖ General Purpose Revenue Allocations—increase of \$7.7 million.
 - ❖ Increase of \$4.0 million in the General Relief benefit costs due to expenditure growth described in Other Charges.
 - ❖ Increase of \$3.7 million due to cover cost for Regional Administration, Eligibility Operations and Public Health Services.

Revenues

Net increase of \$14.2 million

- ❖ Fines, Forfeitures & Penalties—increase of \$0.2 million in projected Emergency Medical Services (EMS) Penalty revenues.
- ❖ Intergovernmental Revenues—net increase of \$15.6 million.
 - ❖ Increase of \$6.4 million primarily in Social Services administrative revenue.
 - ❖ Increase of \$4.8 million primarily in Family Stabilization and Expanded Subsidized Employment program revenues to align revenue to support expenditure growth described in Other Charges.
 - ❖ Increase of \$2.0 million in CalFresh program revenue due to Work Incentive Nutritional Supplement (WINS) and State Utility Assistance Subsidy (SUAS) programs.

Budget Changes and Operational Impact: 2015–16 to 2016–17

Net increase of \$7.6 million as a result of an increase of \$8.6 million in Salaries & Benefits associated with negotiated labor agreements offset by a decrease of \$1.0 million in Services & Supplies due to the elimination of one-time projects from the prior year.



Staffing by Program						
		Fiscal Year 2014–15 Adopted Budget			Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Regional Self Suffic Elig		2,113.00			2,122.00	2,122.00
Regional Child Welfare Svcs		606.00			596.00	596.00
Central Region		47.00			47.00	47.00
East Region		42.25			39.00	39.00
North Central Region		27.00			26.00	26.00
North Coastal Region		31.00			32.00	32.00
North Inland Region		35.00			31.00	31.00
South Region		30.50			31.00	31.00
Eligibility Operations Administration		217.00			235.00	235.00
Health Care Policy Administration		35.00			6.00	6.00
Total		3,183.75			3,165.00	3,165.00

Budget by Program						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Regional Self Suffic Elig	\$ 338,435,111	\$ 419,485,159	\$ 400,747,788	\$ 392,572,085	\$ 437,932,176	\$ 443,598,270
Regional Child Welfare Svcs	55,644,914	58,547,657	58,547,657	57,161,540	58,425,256	60,279,903
Central Region	19,198,199	10,500,386	10,517,447	10,594,123	10,994,357	11,103,089
East Region	10,261,929	7,500,662	7,533,742	6,994,731	6,944,277	7,021,942
North Central Region	9,404,505	4,167,231	4,180,408	3,691,624	4,024,937	4,080,062
North Coastal Region	6,960,777	5,612,453	5,649,844	5,404,529	5,754,199	5,843,833
North Inland Region	7,132,756	5,598,346	5,665,485	5,215,746	6,148,425	6,231,740
South Region	9,451,293	6,643,934	6,656,851	6,412,417	6,629,265	6,693,083
Eligibility Operations Administration	75,927,577	77,054,775	77,509,593	83,949,759	82,480,934	83,060,486
Health Care Policy Administration	167,661,800	20,116,311	20,116,311	16,047,245	10,121,294	9,137,050
Total	\$ 700,078,861	\$ 615,226,914	\$ 597,125,126	\$ 588,043,800	\$ 629,455,120	\$ 637,049,458



Budget by Categories of Expenditures						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Salaries & Benefits	\$ 232,627,372	\$ 257,212,209	\$ 257,212,209	\$ 248,422,473	\$ 261,167,954	\$ 269,756,124
Services & Supplies	258,910,804	109,693,558	110,591,770	117,561,236	108,474,250	107,480,418
Other Charges	208,334,526	248,321,147	229,321,147	222,060,091	259,812,916	259,812,916
Capital Assets Equipment	206,159	—	—	—	—	—
Total	\$ 700,078,861	\$ 615,226,914	\$ 597,125,126	\$ 588,043,800	\$ 629,455,120	\$ 637,049,458

Budget by Categories of Revenues						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Fines, Forfeitures & Penalties	\$ 3,223,026	\$ 3,200,000	\$ 3,200,000	\$ 3,546,607	\$ 3,400,000	\$ 3,400,000
Revenue From Use of Money & Property	903,087	277,191	277,191	274,034	299,908	299,908
Intergovernmental Revenues	613,511,356	566,192,422	553,192,422	525,002,265	581,806,017	581,806,017
Charges For Current Services	17,838,962	2,003,588	2,003,588	18,492,308	1,403,329	1,403,329
Miscellaneous Revenues	2,499,825	658,451	658,451	2,937,845	1,845,870	845,870
Other Financing Sources	20,600,000	8,500,000	8,500,000	8,500,000	1,700,000	1,700,000
Fund Balance Component Decreases	—	—	—	—	—	6,822,026
Use of Fund Balance	10,251,434	3,144,091	(1,957,697)	(1,960,430)	—	—
General Purpose Revenue Allocation	41,502,605	31,251,171	26,149,383	29,290,741	38,999,996	40,772,308
Total	\$ 700,078,861	\$ 615,226,914	\$ 597,125,126	\$ 588,043,800	\$ 629,455,120	\$ 637,049,458



Aging & Independence Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

In the County of San Diego, it is estimated the population aged 60 and over has increased 38.6% since 2000. Aging & Independence Services (AIS) provides a multitude of services for older adults and people with disabilities at no or low cost to its residents. AIS provides services such as adult protection, advocacy, health independence, home-based services, and caregiver services. AIS achieves this by assisting more than 45,000 older adults and people with disabilities and their family members through a variety of programs to help keep them safe in their homes, answering over 5,000 calls for referrals or information and serving over 1 million meals to low-income older adults.

In addition, AIS administers the Public Administrator (PA), Public Guardian (PG), and Public Conservatorship (PC) programs. PA administers the estates of individuals who die without a will or an appropriate person to act on their behalf. PG serves as the legally appointed guardian to manage the assets or finances of persons found by the courts to be unable to take care of their well-being due to failing health or disability. PC provides individuals deemed by court order to be gravely disabled by mental illness, a temporary legally appointed individual to provide food, shelter, and clothing.

The services provided by the County’s Office of Military and Veteran Affairs (OMVA) under HHS are critical as the County has the second largest veteran population (243,000 veterans) in California and the third largest in the nation. This newly established office assists military, veterans, their dependents and survivors to obtain federal and State entitled benefits including VA disability claims, CalVet college fee waivers, VA Health Care applications and Outreach and Transition Support. The OMVA will provide a variety of professional support services such as comprehensive benefits counseling, assistance with claims preparation, advocacy in support of veteran benefits claims, healthcare, education and housing assistance. The OMVA will continue its aggressive outreach approach with the opening of a new Veteran Resource Center in Escondido, utilizing our County Libraries for veteran outreach, and providing innovative ways to reach out to the county’s rural areas. An example of this innovation is the Vet-Connect Video Teleconferencing pilot in the Julian Library that allows veterans to connect with a Veteran Service Representative at the OMVA office for counseling on VA benefits, claim preparation and submission.



In order to deliver these critical and essential services, AIS has 390 staff years, numerous volunteers and a budget of \$383.6 million.

Strategic Initiative Legend

HF	SC	SE	OE
○	- Audacious Vision		
●	- Enterprise Wide Goal		
□	- Cross-Departmental Objective		
■	- Department Objective		
◆	- Objective Sub-Dot Point Level 1		

For more information on alignment to the Strategic Initiatives refer to the Group Description section within the Health and Human Services Agency Summary.

2014-15 Accomplishments

Healthy Families

- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
- Maintained 100% (550) participation in the Multipurpose Senior Service Program (MSSP) case management program by providing resources and/or assistance which helped avoid, delay or remedy inappropriate placement in nursing facilities.
- Ensured 97% (22,869 of 23,675) of annual In-Home Supportive Services (IHSS) reassessments were recertified timely so that clients receive the appropriate level of care to remain safely in their own home.
- Provided a home visit to 87% (1,374 of 1,579) of high-risk, fee-for-service Medicare patients who were discharged from a partner Acute Care Hospital or Skilled Nursing Facility within 3 calendar days as part of the Community Based

Care Transitions Program (CCTP) to provide clarification of physician directions and maintained the health of vulnerable adults.

- Conducted 97% (5,699 of 5,870) of face-to-face contacts within 10 days of receiving an Adult Protective Services (APS) referral to provide timely assistance and resources which helped adults meet their own needs.
- Provided 96% (5,619 of 5,870) of APS cases with accurate and timely services to prevent re-referrals within six months of case closing.
- Completed 100% (120) of follow-up face-to-face visits with PG conservatees living in San Diego County within 30 days of previous date of face-to-face visit.
- Completed 99% (698 of 700) of assessment notes on conservatorship investigations within 10 business days of assignment of referral minimizing risk to client and community.
- Processed 3,355 compensation and pension claims to allow veterans and their dependents to thrive by promptly facilitating their access to needed benefits.
- Submitted 83% (5 of 6) of Inventory and Appraisal reports of all estate cases in the PG Program to the Court within 90 days of receiving letters of conservatorship to minimize risk and loss of assets and resources belonging to conservatees.
- Submitted 100% (16) of Inventory and Appraisal reports of all formal probate cases in the PA Program to the Court within 120 days of receiving Letters of Administration. A formal probate case is an estate valued over \$150,000 and is under court supervision.
- Hosted the Grandparents Raising Grandchildren symposiums in the North, East and Central Regions. Completed updating the Grandparents Raising Grandchildren Handbook.



Safe Communities

- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Provided support to the Board sponsored Alzheimer's Project. Hosted the Care and Public Awareness roundtable discussions and participated in the Clinical and Cure roundtables. Completed the Alzheimer's Project Report prepared for the Board Conference and completed the Project's Implementation Plan to drive ongoing action.
 - Ensured 100% (1,059) of PA investigations were begun within 2 business days of a referral being assigned for investigation.
 - Ensured that 99% (955 of 963) of conservatorship investigations for PG and PC began within 2 business days of assignment to an investigator to ensure the conservatees well-being and protection as mandated by the Omnibus Conservatorship and Guardianship Reform Act.

- Answered 1,191 calls and distributed necessary resources such as information on SDG&E's energy savings programs to eligible individuals during the implementation of the Cool Zones program from June 26, 2014 through October 15, 2014. The Cool Zones program provided convenient locations for seniors and persons with disabilities to remain cool throughout the summer. The goal of this effort was to reduce the occurrence of heat exhaustion, which is more prone to the elderly population or those with physical or mental limitations.
- Enhanced safety by developing and releasing a Scam Toolkit resulting from the Aging Summit for older adults in conjunction with the District Attorney's Office.
- Increased AIS Ombudsman positions from 5 to 11 to improve the oversight of Skilled Nursing Facilities (SNF) and Residential Care Facilities for the Elderly (RCFE). This provides an increase in advocating efforts for SNF and RCFE residents through recruitment, training and oversight of additional volunteers.



Sustainable Environments

- Create and promote diverse opportunities for residents to exercise their right to be civically engaged and finding solutions to current and future challenges
 - Provided 1,432 older adults with the Feeling Fit exercise program, promoting *Live Well San Diego* by increasing opportunities for physical activity.
 - Connected 2,038 older adults with volunteer opportunities to promote *Live Well San Diego* through active living, improving the quality of life, building relationships and encouraging lifelong learning.



Operational Excellence

- Develop, maintain and attract a skilled, adaptable and diverse workforce by providing opportunities for our employees to feel valued, engaged and trusted
 - Maintained 100% (17) of mandated California State PA/PG certification for applicable PA/PG staff in order to ensure optimal accurate service delivery to conservatees and families of decedents.
 - Promoted health and well-being with staff by engaging and leading the HHSA team in the Walk to End Alzheimer's.
- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Received four recognition awards for outstanding service delivery to our customers from the National Association of Area Agencies on Aging. Acutely Vulnerable Adult Protocol, The Alzheimer's Project, Promoting Independence and Choice, and the Residential Care Facility for the Elderly Rating System.





- Received four recognition awards from the National Association of Counties: Acutely Vulnerable Adult Protocol, The Alzheimer's Project, Legacy Corps and the San Diego Care Transitions Partnership.
- Held five Fall Prevention activities in conjunction with the Fall Prevention Task Force for 211 senior participants to prevent falls, provide appropriate necessary resources and fall risk screenings to share with their physicians. Completed an additional 90 fall risk screenings for seniors at the 2015 Aging Summit.
- Engaged more than 500 older adults at the Get Connected Fair at OASIS in Mission Valley. They chose from 20 different Tech Talks, had an opportunity to Ask the Experts, enjoy a game area and visit with technology vendors. The Get Connected Fair was also the site of the San Diego County premiere of the intergenerational film "Cyber Seniors".
- Collaborated with 38 County departments and the Board of Supervisors to explore how County programs can work together to improve service delivery to active military, veterans and their families. Topics discussed covered veteran challenges, military housing, and veterans outreach.
- Facilitated the planning process for the Residential Care Facilities for the Elderly (RCFE) rating system, held stakeholder sessions, including a Town Hall meeting, received Board support for moving forward, completed and released the Request for Proposal for the system and initiated a contract to begin piloting the rating system.
- Maintain 98% (539 of 550) of participation in the MSSP case management program by providing resources and/or assistance which help avoid, delay or remedy inappropriate placement in nursing facilities.
- Ensure 90% (10,350 of 11,500) of initial eligibility determinations for IHSS are completed within the 45 day program mandate.
- Complete 100% (1,050) of assessment notes on conservatorship investigations within 10 business days of assignment of referral to minimize risk and loss to the client and community.
- Ensure 95% (57 of 60) of Acutely Vulnerable Adult (AVA) APS cases are closed with the client at a stable or higher rating as measured by the AVA Safety Focused Outcome Measure.
- Conduct 22,000 interviews to provide veterans and dependents with benefits counseling and information and referral services.
- Process 2,750 compensation and pension claims for veterans and dependents.
- Strengthen the local food system and support the availability of healthy foods, nutrition education, and nutrition assistance for those who need it
 - Provide the Healthier Living program with nutritional education and ensure 82% (246 of 300) of graduates adopt one or more healthy habits during the 6-week workshop. (HF2)
 - Prevent the readmission of 325 high risk Medicare patients by providing comprehensive, person-centered, care transition services.
 - Decrease the number of older adults participating in senior nutrition program who report experiencing food insecurity by 2%.

2015–17 Objectives



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Collaborate with Administrative Support to create a trauma informed atmosphere in all facilities. This will be accomplished by creating a professional setting that includes a welcoming customer greeting area and a family-friendly setting. (HF1)
- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Ensure 94% (20,680 of 22,000) of annual IHSS reassessments are recertified timely so clients receive the appropriate level of care to remain safely in their own home.
 - Conduct 97% (6,305 of 6,500) of face-to-face contacts within 10 days of receiving an APS referral to provide timely assistance and resources which help adults meet their own needs.



Safe Communities

- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Ensure 100% PA/PG/PC (2,560) investigations begin within 2 business days of assignment to an investigator to ensure protection and well-being as mandated by the Omnibus Conservatorship and Guardianship Reform Act.



Sustainable Environments

- Create and promote diverse opportunities for residents to exercise their right to be civically engaged and finding solutions to current and future challenges
 - Connect 2,010 older adults with volunteer opportunities, including the Retired & Senior Volunteer Program (RSVP) and intergenerational programs, to support thriving, a *Live Well San Diego* component which includes volunteerism and civic engagement.



Operational Excellence

- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Assist Administrative Support in the development of an electronic information exchange system that supports a person-centered delivery by enabling collaboration among County programs with shared customers. The Countywide Knowledge Integration Program (KIP) Unit will design and coordinate a new system to link with multiple information exchange systems and improve customer service. (OE3)
 - Complete the Residential Care Facilities for the Elderly (RCFE) pilot and implement the rating system for a minimum of 30 facilities within the first year.
- Strengthen our customer service culture to ensure a positive customer experience
 - Collaborate with consumer advocates, residential care facilities and Better Business Bureau to develop a rating system for residential care facilities to provide consumers and family members guidance on how to select the best facility for their needs. (OE4)
 - Ensure action on the Alzheimer's Project implementation plan and initiate ongoing actions to prevent and address elder abuse and help community members plan for their financial health and end-of-life needs. Create a regional strategy to improve services for those with Alzheimer's disease by coordinating community responses to incidents of wandering, identifying affordable and available care services for those with the disease, providing support to caregivers and efforts to find a cure for the disease. (OE4)
 - Develop a plan with the Veterans Coalition, other County departments and the community to engage and connect veterans to services through use of technology and other efforts. (OE4)

- Participate in a minimum of 6 Customer Service trainings for HHS Departmental Customer Service Ambassadors to assist with developing skills of over 5,000 County employees so that they Agency provides customers an exceptional and effective County experience. (OE5)
- Develop, maintain and attract a skilled adaptable and diverse workforce by providing opportunities for our employees to feel valued, engaged and trusted
 - Work with Administrative Support to develop a plan to create an HHS Job Shadow program to provide 50 qualified employees the opportunity to explore a specific career interest, develop knowledge and collaborate to build relationships which provide opportunities for growth. (OE6)
 - Work with Administrative Support to develop a plan to improve the HHS New Employee Orientation to ensure a welcoming atmosphere for all new hires to feel valued, become engaged and integrated to the shared vision of *Live Well San Diego*. Providing new hires the opportunity to feel valued leads to increased retention and a productive workforce with an increased appreciation toward their contributions in the lives of our customers. (OE6)

Related Links

A resource guide for seniors, adults with disabilities, veterans and professionals is available through Network of Care at:

◆ www.SanDiego.NetworkOfCare.org

For additional information on the programs offered by Aging & Independence Services, refer to the website at:

◆ www.sdcounty.ca.gov/content/sdc/hhsa/programs/ais.html

For additional information on the programs offered by the Health and Human Services Agency, refer to the website at:

◆ <http://sdcounty.ca.gov/content/sdc/hhsa/programs.html>

Performance Measures	2013–14 Actuals	2014–15 Adopted	2014–15 Actuals	2015–16 Adopted	2016–17 Approved
Average monthly number of filled MSSP case management slots	99% of 550	98% of 550	100% of 550	98% of 550	98% of 550
Annual IHSS assessments recertified timely	92% of 21,846	90% of 16,500	97% of 23,675	94% of 22,000	95% of 22,000
High-risk CCTP Medicare fee-for-service beneficiaries will receive contact from staff within 72 hours of discharge notification from a partner Acute Care Hospital or Skilled Nursing Facility ^{2, 5}	80% of 1,860	90% of 2,000	87% of 1,579	N/A	N/A
Face-to-face APS investigations conducted within 10 days of referral	95% of 5,937	96% of 7,500	97% of 5,870	97% of 6,500	97% of 6,500





Performance Measures	2013–14 Actuals	2014–15 Adopted	2014–15 Actuals	2015–16 Adopted	2016–17 Approved
APS cases not re-referred within 6 months of closing ⁵	96% of 5,937	91% of 7,500	96% of 5,870	N/A	N/A
Face to face visits with conservatees completed within 30 days of previous visit ⁵	99% of 114	98% of 125	100% of 120	N/A	N/A
PC investigator completes assessment note on conservatorship investigations within 10 business days of assignment	93% of 1,137	98% of 1,050	99% of 700	100% of 1,050	100% of 1,050
Number of compensation and pension claims processed by the Veterans Services Office ²	N/A	Ü2,600	3,355	2,750	2,750
PG Estate cases submit I & A reports to Probate Court within 90 days of receipt of Letters of Conservatorship ^{5,6}	100% of 7	100% of 10	83% of 6	N/A	N/A
PA formal probate cases submit I & A reports to Probate Court within 120 days of receiving Letters of Administration ⁵	100% of 12	100% of 20	100% of 16	N/A	N/A
PA, PG and PC investigations begin within 2 business days of referral assignment ^{1,6}	98% of 2,429	100% of 2,280	99% of 2,022	100% of 2,560	100% of 2,560
Number of older adults participating in Feeling Fit exercise program ⁵	N/A	1,300	1,432	N/A	N/A
Number of older adults linked with RSVP and Intergenerational volunteer opportunities ³	Ü2,295	Ü1,900	2,038	2,010	2,010
Deputy PA/PGs certified by California State PA/PG Association ⁵	100% of 17	100% of 19	100% of 17	N/A	N/A
Initial IHSS assessments certified timely ⁴	N/A	N/A	N/A	90% of 11,500	91% of 11,500
AVA cases closed at stable or higher rating ⁴	N/A	N/A	N/A	95% of 60	95% of 60
Benefits counseling interviews with veterans ⁴	N/A	N/A	N/A	22,000	22,000
Healthier Living graduates adopting healthy habits ⁴	N/A	N/A	N/A	82% of 300	83% of 300
Prevent the readmission of high-risk patient to hospital ⁴	N/A	N/A	N/A	325	325
All bank inquiries begin within 2 business days ⁷	100% of 637	N/A	N/A	N/A	N/A
Notification response rate within 14 days for customers applying for the college fee waiver ⁷	99% of 7,032	N/A	N/A	N/A	N/A



Table Notes

- ¹ PA/PG/PC measures were combined in Fiscal Year 2015–16 to reflect strategic priorities.
- ² During the start up phase of the CCTP in Fiscal Year 2013–14, unexpected challenges impacted the estimated actual performance rate for this measure; including patient requests for a delayed home visit, hospital discharge dates not being communicated to AIS staff, and staff not being able to get in contact with the patient post-discharge.
- ³ During Fiscal Year 2013–14 the focus areas for the RSVP grant were modified, consequently fewer sites qualified as RSVP host sites, thus decreasing the number of volunteers. Staff will add sites to increase the number of volunteer opportunities, as appropriate.
- ⁴ Performance measure added in Fiscal Year 2015–16 to support strategic alignment to the County’s vision of a region that is Building Better Health, Living Safely and Thriving: *Live Well San Diego*.
- ⁵ Performance measures deleted in Fiscal Year 2015–16 as targets are consistently met, therefore new measures new measures were added.
- ⁶ Target not met due to one report filed within 120 days to include additional contributions by other County departments and ensure accuracy.
- ⁷ Effective Fiscal Year 2014–15 this measure will no longer be reported in the Operational Plan, but will continue to be monitored internally by program.

Budget Changes and Operational Impact: 2014–15 to 2015–16

Aging and Independence Services has an overall increase of \$50.0 million. This includes major initiatives to expand military and veterans services, as well as services in support of the Alzheimer’s Project. The majority of the budget increase addresses growth with Individual Provider (IP) costs associated with caseload growth in the In-Home Supportive Services (IHSS) program. The County contribution for the IHSS IP cost increase is limited to the annual inflationary MOE.

Staffing

Increase of 5.00 staff years in the Office of Military and Veteran Affairs to augment outreach and education activities by increasing the County’s presence at county library outstations and new strategically located Veteran Resource Centers. Additionally, 1.00 staff years was moved from Public Administrator/Public Guardian/Public Conservatorship to protective services and support operational needs.

Expenditures

Net increase of \$50.0 million

- ◆ Salaries & Benefits—increase of \$1.4 million as a result of negotiated labor agreements and the addition of 5.00 staff years.
- ◆ Services & Supplies—net increase of \$48.5 million.
 - ◆ Increase of \$47.7 million in Contracted Services.
 - ◆ Increase of \$46.7 million in the IHSS IP contracted services costs, due to caseload growth and the restoration of the 7% across the board cut by the State in IHSS IP.

- ◆ Increase of \$1.1 million for one-time costs to enhance the Office of Military and Veteran Affairs, improve awareness about and support of Alzheimer’s, and improve the Adult Protective Services (APS) software system.
- ◆ Increase of \$0.8 million to various other contracts, primarily to the Nutrition (\$0.6 million) and Ombudsman (\$0.2 million) contracts.
- ◆ Decrease of \$0.9 million to the Community-Based Care Transitions Program (CCTP) contracted services to align the budget with projected patients served.
- ◆ Increase of \$0.8 million in rents and leases and guard services, for the new North County facility for the Adult Protective Services (APS), IHSS, and Office of Military and Veteran Affairs programs.
- ◆ Other Charges—increase of \$0.1 million for Patient Care Enhancement expenses in CCTP to align with expected need.

Revenues

Net increase of \$50.0 million

- ◆ Intergovernmental Revenues—net increase of \$49.8 million.
 - ◆ Increase of \$46.1 million in IHSS IP related Payments and Administration revenue to align revenue with expenditure increases described above.
 - ◆ Increase of \$4.6 million in Realignment revenue based on projected statewide sales tax receipts and vehicle license fees that are dedicated for costs in health and human service programs.
 - ◆ Increase of \$0.7 million in Older Americans Act Services revenue to align to projected allocation.
 - ◆ Decrease of \$1.6 million in Community-Based Care Transitions Program revenue to align to projected caseload.





- ◆ Miscellaneous Revenues—increase of \$0.1 million in grant revenues for the Office of Military and Veteran Affairs associated with a projected increase in the number of claims processed.
- ◆ Use of Fund Balance—net increase of \$0.4 million. A total of \$0.7 million is budgeted.
 - ◆ \$0.5 million for the enhancement of ALEX, the Adult Protective Services software.
 - ◆ \$0.2 million for multiple (5) Alzheimer’s awareness and support related projects.
- ◆ General Purpose Revenue Allocations—decrease of \$0.3 million primarily due to increased Intergovernmental Revenues associated with the IHSS program.

Budget Changes and Operational Impact: 2015–16 to 2016–17

Net increase of \$19.0 million is the result of an increase of \$0.9 million in Salaries & Benefits due to negotiated labor agreements, and an increase of \$18.1 million in Services & Supplies due to an increase of \$19.0 million in IHSS IP contracted services, offset by a decrease of \$0.9 million associated with the elimination of one-time projects from the prior year.

Staffing by Program						
		Fiscal Year 2014–15 Adopted Budget			Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
In-Home Supportive Services		160.00			160.00	160.00
Veterans Services		8.00			13.00	13.00
Senior Health and Social Services		60.00			60.00	60.00
Protective Services		78.00			79.00	79.00
Administrative and Other Services		24.00			24.00	24.00
Public Administrator/Guardian/ Conservator		55.00			54.00	54.00
Total		385.00			390.00	390.00

Budget by Program						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
In-Home Supportive Services	\$ 279,014,885	\$ 288,232,957	\$ 301,347,588	\$ 302,650,945	\$ 335,868,841	\$ 355,240,478
Veterans Services	1,055,600	1,094,562	1,094,562	1,172,332	2,039,688	2,032,117
Senior Health and Social Services	18,966,927	22,253,880	22,255,644	21,632,276	21,966,203	22,107,972
Protective Services	8,681,543	9,663,205	9,663,205	9,418,207	11,129,860	10,534,956
Administrative and Other Services	4,514,540	5,050,748	5,050,765	4,748,008	5,372,145	5,393,469
Public Administrator/Guardian/ Conservator	6,416,749	7,255,897	7,255,897	6,487,847	7,205,728	7,323,611
Total	\$ 318,650,244	\$ 333,551,249	\$ 346,667,662	\$ 346,109,617	\$ 383,582,465	\$ 402,632,603

Budget by Categories of Expenditures						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Salaries & Benefits	\$ 35,990,972	\$ 38,593,477	\$ 38,593,477	\$ 38,284,303	\$ 39,969,537	\$ 40,911,729
Services & Supplies	269,957,856	281,266,051	294,381,312	294,331,084	329,843,307	347,951,253
Other Charges	312,619	255,000	256,151	374,638	332,900	332,900
Operating Transfers Out	12,388,797	13,436,721	13,436,721	13,119,592	13,436,721	13,436,721
Total	\$ 318,650,244	\$ 333,551,249	\$ 346,667,662	\$ 346,109,617	\$ 383,582,465	\$ 402,632,603





Budget by Categories of Revenues

	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Taxes Other Than Current Secured	\$ 6,932	\$ —	\$ —	\$ 10,929	\$ —	\$ —
Licenses Permits & Franchises	51,290	46,000	46,000	53,642	46,000	46,000
Fines, Forfeitures & Penalties	309,065	366,509	366,509	277,118	366,509	366,509
Revenue From Use of Money & Property	43,000	40,000	40,000	40,000	40,000	40,000
Intergovernmental Revenues	304,102,295	318,671,389	331,671,389	332,883,924	368,445,587	387,278,397
Charges For Current Services	974,660	893,838	893,838	905,355	916,629	893,838
Miscellaneous Revenues	168,531	102,950	102,950	530,373	220,660	220,660
Other Financing Sources	99,975	100,000	100,000	100,000	100,000	100,000
Fund Balance Component Decreases	—	—	—	—	—	961,119
Use of Fund Balance	573,689	312,169	428,582	(1,710,119)	721,000	—
General Purpose Revenue Allocation	12,894,496	13,018,394	13,134,807	11,308,275	12,726,080	12,726,080
Total	\$ 318,650,244	\$ 333,551,249	\$ 346,667,662	\$ 346,109,617	\$ 383,582,465	\$ 402,632,603





Behavioral Health Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Behavioral Health Services (BHS) is a nationally recognized leader in mental health stigma reduction and substance abuse prevention, achieved by providing a continuum of mental health, alcohol and other drug services to approximately 73,000 San Diego County residents of all ages. Services are coordinated by systems of care such as Adult/Older Adult and Children, Youth and Families and are provided directly through County operated facilities and over 300 contracts with community providers and individual fee-for-services providers. BHS collaborates closely with community leaders to develop and refine its major initiatives, including service integration with primary care, development of a trauma informed system and stigma elimination programs. Clients experiencing co-occurring mental illness and addiction issues benefit from integrated prevention, intervention and treatment services that focus on the whole individual while emphasizing wellness and recovery.

BHS provides an extensive array of culturally competent and community-based services to meet the equally diverse needs of its clients. Full Service Partnerships (FSP) treat individuals diagnosed with a severe mental illness and embrace a “whatever it takes” approach to assist clients. Children with serious or complex behavioral health service needs may be engaged in Wraparound programs to offer an intensive and individualized care management process. In the coming year, BHS will also be expanding its Psychiatric Emergency Response Team (PERT), breaking ground on a new Crisis Stabilization Unit (CSU) in North County and laying down the groundwork for Laura’s Law implementation.

In addition to its core service programs, BHS also operates the San Diego County Psychiatric Hospital (SDCPH) and the award-winning Edgemoor Distinct Part Skilled Nursing Facility (Edgemoor). SDCPH houses the County’s Emergency Psychiatric Unit and Recovery Unit and provides psychiatric evaluation and crisis intervention-oriented acute treatment for over 5,400 individuals annually. Edgemoor is a 24-hour long-term skilled nursing facility to 190 individuals with complex medical needs that require specialized interventions from highly trained staff.

In order to deliver these critical services, BHS has 789 staff, including medical professionals, and a budget of \$441.6 million that includes payments made to providers for care.



Strategic Initiative Legend

HF	SC	SE	OE
○	- Audacious Vision		
●	- Enterprise Wide Goal		
□	- Cross-Departmental Objective		
■	- Department Objective		
◆	- Objective Sub-Dot Point Level 1		

For more information on alignment to the Strategic Initiatives refer to the Group Description section within the Health and Human Services Agency Summary.

2014–15 Accomplishments

Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Led efforts to increase trauma informed awareness among 620 County and provider staff. This was achieved by training staff to recognize and understand the effects of trauma on the overall wellness of individuals, families, groups and communities.
 - Provided 224 KidStart foster care children ages 0-5 an integrated service in collaboration with First 5 Commission to assist with developmental delays and behavioral health needs.

- Expanded SmartCare behavioral health services to primary care clinics by 12% (from 586 to 655 providers). The SmartCare clinical team of board certified psychiatrists, certified nurse practitioners and licensed behavioral health clinicians were available by phone to serve rural areas where there are few resources for behavioral health care. In addition, SmartCare worked to increase awareness and reduce stigma of behavioral health needs by conducting a variety of wellness events and activities in these rural communities.
- Provided 1,204 psychiatric consultations to pediatric providers who serve children with Medi-Cal to ensure that behavioral health and physical health needs are met
 - ◆ Developed 15 agreements to include 655 adult and pediatric providers.
 - ◆ Published 11 wellness blogs in the online newspapers that serve the rural community to educate the community regarding behavioral health resources.
 - ◆ Achieved 98% (236 of 241) client satisfaction among clients in rural communities who were served through an innovative care model which integrated primary care and behavioral health services.
- Supported healthy and safe living by achieving an alcohol and drug treatment services completion rate of 44% (5,575 of 12,767), while only 37% of participants completed alcohol and drug treatment services statewide.
- Expanded In-Home Outreach Team (IHOT) program services countywide (from 3 to 6 regions). Team members linked treatment-resistant individuals and their families with existing behavioral health services and community resources. This outreach and engagement was essential in assisting this population to willingly receive needed services.
- Enhanced the service delivery system for children and youth in foster care by implementing “Pathways to Wellbeing,” a cross-departmental effort with Child Welfare Services that:
 - ◆ Identified and implemented a joint screening tool that integrates mental health assessments into the foster care intake process.
 - ◆ Implemented a cross-training model to ensure Child Welfare Services and Behavioral Health Services staff have a common understanding of how to screen and connect children to needed services.
 - ◆ Implemented a plan for the integration and co-location of Child Welfare Services and Behavioral Health Services staff to ensure appropriate referral for assessment and treatment.
- Provided trauma informed training to 3,868 community members to help them recognize warning signs of suicide and assist those who may be considering suicide to seek help.
- Stabilized psychiatric staffing at the San Diego County Psychiatric Hospital by utilizing physician recruitment firms.



Safe Communities

- Strengthen our prevention and enforcement strategies to protect our youth from crime, neglect and abuse
 - Provided 96% (669 of 695) of adolescents who entered alcohol and drug treatment an educational assessment resulting in high school completion or equivalent, or were enrolled into an educational setting.



Operational Excellence

- Strengthen our customer service culture to ensure a positive customer experience
 - Admitted 99.7% (877 of 879) of adolescents to nonresidential alcohol and drug treatment programs within 14 days ensuring timely access to care.
 - Served an additional 9.6% (from 8,102 to 8,881) of underserved older adults by improving access to prevention, early intervention, and treatment services.
 - Reduced the readmission rate at the San Diego County Psychiatric Hospital to 10.6%, demonstrating accountability and commitment to outstanding patient care exceeding original target of 26%.
 - Ensured access to outpatient mental health assessment for at-risk children and youth by maintaining an average wait time of 7.3 days.
 - Awarded the 2014 Silver Achievement in Quality Award by the American Health Care Association and the National Center for Assisted Living based on Edgemoor’s demonstrated systematic advancements in quality, plans for continual improvement and cost-effective service.

2015–17 Objectives



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Collaborate with Aging & Independence Services to provide services to an additional 5% of older adults by improving access to prevention, early intervention, and treatment services. (HF1)
 - Expand the County’s crisis residential treatment bed capacity by 16.7% (from 84 to 98) by building a crisis residential center in the North Inland HHS Service Region. This is a multi-year goal and is funded by a California Health Facilities Financing Authority and the Mental Health Services Act. (HF1)
 - Provide training to 5,000 employees countywide to enhance community recognition of suicide warning signs so they can refer those at risk to available resources.





- Ensure 42% of alcohol and drug treatment participants complete services to surpass the statewide average of 37% and demonstrate the effectiveness of programs within the County of San Diego.
- Collect baseline data to ensure that 100% of calls to the Access and Crisis Line are answered in an average of 60 seconds to ensure prompt service.
- Pursue policy change for healthy, safe, and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Provide 260 KidStart foster care children ages 0-5 with developmental delays and behavioral health needs, integrated services in collaboration with Child Welfare Services and First 5 Commission. (HF4)
 - Implement a plan to provide services for people with severe mental illness who are reluctant to engage in treatment, in accordance with Assembly Bill 1421, also known as “Laura’s Law,” in collaboration with County Counsel, Sheriff’s Department, Courts, Public Defender, Aging & Independence Services, Public Administrator/Public Guardian/Public Conservator, and local law enforcement. (HF4)
 - Improve the service delivery system through the ongoing integration of physical and behavioral health services with SmartCare, a modified service delivery system program that promotes care coordination between physical and behavioral health services; and has enormous potential for enhancing the quality of care provided for clients as well as increasing efficiencies in the delivery of health care services overall. (HF4)
- Increase by 5% (from 1,100 to 1,155) the psychiatric consultation services to pediatric providers who serve children with Medi-Cal to ensure that behavioral health and physical health needs are met.



Safe Communities

- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Expand the Psychiatric Emergency Response Team (PERT), by 5 (from 23 teams to 28) to provide education, training and clinical support to the Sheriff’s Department, local law enforcement personnel and the community for calls involving persons having a mental health crisis. The Public Safety Group will also be adding 5 PERT teams. (SC2)
- Strengthen our prevention and enforcement strategies to protect our youth from crime, neglect and abuse
 - Support educational growth and overall well-being of adolescents who complete alcohol and drug treatment by requiring educational assessments in all client plans resulting in a minimum of 95% either completing high school or the equivalent, or being enrolled in an educational setting. (SC8)



Operational Excellence

- Strengthen our customer service culture to ensure a positive customer experience
 - Achieve a 90% or higher client satisfaction among clients in rural communities who are served through an innovative care model which integrates primary care and behavioral health services.
 - Admit 90% (1,296 of 1,440) of adolescents entering non-residential alcohol and drug treatment programs within 14 days to ensure timely access to care.
 - Maintain 17% or lower readmission rate at the San Diego County Psychiatric Hospital demonstrating accountability and commitment to outstanding patient care.
- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Assist Administrative Support in the development of an electronic information exchange system that supports a person-centered delivery by enabling collaboration among County programs with shared customers. The Countywide Knowledge Integration Program (KIP) Unit will design and coordinate a new system to link with multiple information exchange systems and improve customer service. (OE3)
- Strengthen our customer service culture to ensure a positive customer experience
 - Participate in a minimum of 6 Customer Service trainings for HHSA Departmental Customer Service Ambassadors to assist with developing skills of over 5,000 County employees so that the Agency provides customers an exceptional and effective County experience. (OE5)
- Develop, maintain and attract a skilled, adaptable and diverse workforce by providing opportunities for our employees to feel valued, engaged and trusted
 - Lead efforts to increase understanding among HHSA staff of how trauma affects individuals, families, groups, and communities by implementing a trauma informed model that recognizes how trauma impacts the overall wellness of clients and staff. (OE6)

Related Links

For information about mental illness, how to recognize symptoms, use local resources and access assistance, go to:

◆ www.Up2SD.org

For information about the Network of Care for Behavioral Health, go to:

◆ www.SanDiego.NetworkOfCare.org

For additional information on the programs offered by the Health and Human Services Agency, refer to the website:

◆ www.sandiegocounty.gov/hhsa



Performance Measures	2013–14 Actuals	2014–15 Adopted	2014–15 Actuals	2015–16 Adopted	2016–17 Approved
Children 0–5 years served in KidSTART program	259	250	224	260	270
Adolescents discharged from alcohol and drug treatment who complete high school (or the equivalent), or are enrolled in an educational setting	93% of 614	95% of 925	96% of 695	95% of 925	95% of 925
Participants in alcohol and drug treatment who complete treatment	42% of 13,891	42% of 13,000	44% of 12,767	42% of 13,000	42% of 13,000
Access time for children's mental health outpatient treatment ³	3.5 days	3 days	7.3 Days	N/A	N/A
Adolescents admitted timely (within 14 calendar days) to non-residential alcohol and drug treatment	99% of 1,003	90% of 1,440	99.7% of 879	90% of 1,440	90% of 1,440
Increase in number of older adults receiving mental health services, including senior-focused prevention, early intervention, and treatment services ¹	82% (from 4,447 to 8,102)	5% increase (from 8,102 to 8,507)	9.9% increase (from 8,102 to 8,881)	5% increase (from 8,507 to 8,932)	5% increase (from 8,932 to 9,379)
Readmission rate at SDCPH ²	8.72%	Less than 26.56%	10.7%	Less than 17%	Less than 17%
PERT calls not resulting in psychiatric hospitalization ⁵	N/A	N/A	N/A	90%	90%
Community members receiving Suicide Prevention Training ⁴	N/A	N/A	N/A	5,000	5,000

Table Notes

- ¹ During the Fiscal Year 2013–14, the measure was expanded to include all senior focused prevention, early intervention, and treatment services. This accounts for the dramatic increase in the number served; for subsequent fiscal years, the 5% increase target remains a realistic goal.
- ² The San Diego County Medi-Cal readmission rate of 26.56% is for Fiscal Year 2012–13. This information is collected by Optum to track Medi-Cal patients in San Diego County and is distributed monthly at hospital partner meetings.
- ³ Measure removed Fiscal Year 2015–16, not a State or federal mandate. Access times vary by program due to specialty mental health services.
- ⁴ New measure added Fiscal Year 2014–15 to reflect mental health training progress of community members.
- ⁵ Performance measure added in Fiscal Year 2015–16 to support strategic alignment to the County's vision of a region that is Building Better Health, Living Safely and Thriving: *Live Well San Diego*.

Budget Changes and Operational Impact: 2014–15 to 2015–16

Behavioral Health Services (BHS) has an overall increase of \$16.1 million. Major initiatives include Laura’s Law implementation, Psychiatric Emergency Response Teams (PERT), crisis stabilization, and efforts to expand trauma informed systems.

Staffing

Increase of 2.75 staff years due to a transfer from Regional Operations to Behavioral Health Services Mental Health Services and Inpatient Health Services.



Expenditures

Net increase of \$16.1 million

- ◆ Salaries & Benefits—decrease of \$1.9 million as a result of a reduction of costs associated with vacant positions in the San Diego County Psychiatric Hospital and BHS Emergency Screening Units, offset by an increase in negotiated labor agreements.
- ◆ Services & Supplies—increase of \$18.9 million.
 - ❖ Increase of \$13.3 million in contracted services.
 - ◆ Increase of \$3.5 million for crisis stabilization to provide stabilization and treatment to persons who are in psychiatric crisis who would otherwise require hospitalization.
 - ◆ Increase of \$3.0 million for Mental Health Services Act (MHSA) Technological Needs (TN).
 - ◆ Increase of \$2.3 million for Laura’s Law implementation.
 - ◆ Increase of \$1.6 million in BHS for the cost of additional Psychiatric Emergency Response Teams (PERT). These costs will be shared by the Public Safety Group.
 - ◆ Increase of \$1.2 million in Alcohol & Drug Services (ADS) for Expanded Intensive Outpatient Treatment Services.
 - ◆ Increase of \$1.0 million in ADS for Drug Medi-Cal contracted services.
 - ◆ Increase of \$0.7 million for expansion of In-Home Outreach Team (IHOT) including evaluations and hospital outreach.
 - ❖ Increase of \$3.5 million for temporary contract help primarily for Locum Tenens services in SDCPH, the clinics and the Emergency Screening Unit.
 - ❖ Increase of \$2.0 million in Institutional Services for out of network facilities.
 - ❖ Increase of \$1.2 million for a one-time software upgrade in the Pharmacy.
 - ❖ Increase of \$0.7 million in special departmental expense for a one-time contribution to the California Mental Health Services Authority (CalMHSA), a joint powers authority of counties focused on the efficient delivery of California mental health projects and programs.
 - ❖ Increase of \$0.6 million in one-time costs for the North Inland Crisis Residential facility.
 - ❖ Increase of \$0.4 million for a one-time purchase of signature pad devices to support electronic health records.
 - ❖ Decrease of \$2.8 million in various services and supplies primarily in Medicines, Drugs, & Pharmaceuticals due to savings related to the implementation of the Affordable Care Act (ACA) and to adjust to anticipated needs.
- ◆ Capital Assets Equipment—decrease of \$0.1 million due to elimination of prior year one-time project costs in Edgemoor.

- ◆ Expenditure Transfer & Reimbursements—decrease of \$0.8 million due to a transfer of a share of the Psychiatric Emergency Response Team (PERT) costs to the Public Safety Group (PSG).

Revenues

Net increase of \$16.1 million

- ◆ Intergovernmental Revenues—net increase of \$12.5 million.
 - ❖ Increase of \$10.6 million in Realignment to align with revenue projections.
 - ❖ Increase of \$1.7 million in ADS Drug Medi-Cal to align with program trends.
 - ❖ Increase of \$1.2 million in State funding for ADS for Expanded Intensive Outpatient Treatment Services.
 - ❖ Increase of \$1.0 million in Short Doyle Medi-Cal revenue to align with program trends.
 - ❖ Increase of \$0.7 million in Mental Health Services Act (MHSA) revenue to align with available funding and program trends.
 - ❖ Decrease of \$2.7 million in ADS Substance Abuse Prevention and Treatment (SAPT) Block Grant funds to align with the anticipated allocations.
- ◆ Charges for Current Services—increase of \$4.3 million.
 - ❖ Increase of \$7.3 million associated with an Intergovernmental Transfer agreement newly entered into with the California Department of Health Care Services to allow the County to access additional federal funds used to cover Medicaid services such as Edgemoor.
 - ❖ Decrease of \$2.6 million associated with State Plan Amendment revenue due to a change in funding structure in Edgemoor related to the Coordinated Care Initiative (CCI).
 - ❖ Decrease of \$0.2 million in pharmacy dispensing fees and third party reimbursements to align with current trends.
 - ❖ Decrease of \$0.2 million in ADS to align with the fee and fine collections.
- ◆ Miscellaneous Revenues—increase of \$0.3 million for client Medi-Cal share of cost in Edgemoor.
- ◆ Use of Fund Balance—decrease of \$1.0 million. A total of \$0.5 million is budgeted for the Workforce Scheduler and facilities maintenance in San Diego County Psychiatric Hospital.

Budget Changes and Operational Impact: 2015–16 to 2016–17

Net decrease of \$1.2 million as a result of an increase of \$1.7 million in Salaries & Benefits due to negotiated labor agreements offset by a decrease of \$2.9 million in Services & Supplies due to the elimination of one-time projects from the prior year.



Staffing by Program						
		Fiscal Year 2014–15 Adopted Budget			Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Alcohol and Other Drug Services		18.00			18.00	18.00
Mental Health Services		215.50			216.00	216.00
Inpatient Health Services		476.75			478.00	478.00
Behavioral Health Svcs Administration		76.00			77.00	77.00
Total		786.25			789.00	789.00

Budget by Program						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Alcohol and Other Drug Services	\$ 52,191,611	\$ 58,330,000	\$ 58,584,790	\$ 51,602,618	\$ 59,654,762	\$ 59,698,951
Mental Health Services	260,447,678	285,857,310	285,976,739	276,977,586	299,588,967	297,741,086
Inpatient Health Services	62,796,858	70,095,913	70,241,307	67,715,195	71,215,930	71,668,101
Behavioral Health Svcs Administration	10,311,019	11,150,354	11,154,704	10,636,217	11,091,895	11,280,151
Total	\$ 385,747,166	\$ 425,433,577	\$ 425,957,540	\$ 406,931,617	\$ 441,551,554	\$ 440,388,289

Budget by Categories of Expenditures						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Salaries & Benefits	\$ 76,905,562	\$ 83,590,794	\$ 83,590,794	\$ 79,877,237	\$ 81,726,341	\$ 83,455,923
Services & Supplies	314,959,104	346,476,207	347,000,170	330,749,892	365,358,637	362,465,790
Other Charges	4,929,147	4,195,000	4,195,000	5,781,488	4,195,000	4,195,000
Capital Assets Equipment	—	215,000	215,000	—	115,000	115,000
Expenditure Transfer & Reimbursements	(11,046,648)	(9,043,424)	(9,043,424)	(9,477,000)	(9,843,424)	(9,843,424)
Total	\$ 385,747,166	\$ 425,433,577	\$ 425,957,540	\$ 406,931,617	\$ 441,551,554	\$ 440,388,289





Budget by Categories of Revenues						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Revenue From Use of Money & Property	\$ —	\$ —	\$ —	\$ 15,552	\$ —	\$ —
Intergovernmental Revenues	327,330,332	374,335,713	374,335,713	358,965,073	386,822,761	384,429,748
Charges For Current Services	34,975,935	36,824,768	36,824,768	36,243,466	41,130,817	41,130,817
Miscellaneous Revenues	1,861,900	891,000	891,000	1,686,099	1,200,000	1,200,000
Other Financing Sources	3,000,000	4,400,000	4,400,000	4,400,000	4,400,000	4,400,000
Fund Balance Component Decreases	—	—	—	—	—	1,729,582
Use of Fund Balance	11,080,858	1,483,954	2,007,917	(1,876,714)	499,834	—
General Purpose Revenue Allocation	18,579,000	7,498,142	8,022,105	5,621,428	7,498,142	7,498,142
Total	\$ 385,747,166	\$ 425,433,577	\$ 425,957,540	\$ 406,931,617	\$ 441,551,554	\$ 440,388,289





Child Welfare Services

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Child Welfare Services (CWS) protects over 7,500 vulnerable children from abuse and neglect across the county. This is achieved by managing, providing policy and direction to the CWS Child Abuse Hotline 24 hours a day, 7 days a week, Adoptions, Residential Care, and Foster Care Home Licensing staff. Services include responding to approximately 40,000 calls a year, identifying opportunities and best practices for Child Welfare Services, and continuously developing staff to ensure practices are culturally competent, family-centered, child-focused and trauma informed. The County is participating in the California Well-Being Demonstration Project (Title IV-E Waiver) which will provide additional opportunities for prevention efforts and family strengthening. CWS also administers the Polinsky Children’s Center (PCC), a 24-hour temporary emergency shelter for children, San Pasqual Academy, a first-in-the-nation residential education campus for adolescent foster youth and the extended foster care youth program for youth 18 to 21 years of age to promote a successful transition into adulthood. The County continues to address the challenges of disproportionality through its support of the Child Abuse Prevention Coordinating Council Fairness and Equity committee and utilization of the Cultural Broker program.

To ensure these critical services are provided, CWS has 768 staff and a budget of \$276.8 million that includes assistance payments. CWS Regional Operations includes an additional 596 child welfare staff and a budget of \$58.4 million. For more information about assistance payments, see Appendix D.



2014-15 Accomplishments



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Placed 82% (252 of 282) of youth enrolled in intensive home-based services (i.e. Wraparound) with resources to help the youth remain or be placed in a home-like setting, further improve their connection to home and community and reduce the use of costly group home placements.
 - Increased the number of completed home studies by 26% (300 to 379). Home Studies are a major milestone in the adoptions process for prospective adoptive families.
 - Promoted housing stability by maintaining safe and secure placements for 97% (469 of 485) of young adults that are in Extended Foster Care each month in order to promote self-sufficiency and prevent homelessness. The remaining 4% are in Guardianship placements or are pending change of placement approval with their supervised independent living plan.
 - Trained 100% (33) Child Abuse Hotline Screeners on the “Safety-Organized Practice” framework to increase best practice in child welfare safety, well-being, and permanency for families served.
 - Continued to build a trauma informed child welfare system through the implementation of the “Pathways to Well-Being” model where children and youth entering the child welfare system were screened and assessed to determine the impact of trauma on development and well-being.
 - Improved child well-being through the implementation of a framework that includes continuous quality improvement (CQI), trauma informed practice, and improved staff development training.

Strategic Initiative Legend

HF	SC	SE	OE
○	- Audacious Vision		
●	- Enterprise Wide Goal		
□	- Cross-Departmental Objective		
■	- Department Objective		
◆	- Objective Sub-Dot Point Level 1		

For more information on alignment to the Strategic Initiatives refer to the Group Description section within the Health and Human Services Agency Summary.

- Supported stability by placing 51% (669 of 1,311) of foster care children with a relative or close non-family member, minimizing trauma to children by maintaining their connections to familiar environments.
- Supported stability by increasing the number of children to 84% (1,289 of 1,541) who have been in foster care for less than 12 months who had fewer than three placements. Fewer placements minimize the trauma that children experience and may help lessen negative impact to their school performance.
- Expanded caller options and customer support on the Foster and Adoption KIDSline to serve more than 370 calls over an average of 6 months.
- Improved the Adoption website by adding features such as children available for adoption and links to resources.
- Improved customer service through utilizing a Foster/Adoption Ombudsman to provide additional support to foster and adoptive parents.
- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Achieved permanency for 84% (38 of 45) of children identified through the Exceptional Families for Exceptional Children campaign. Improved recruitment efforts for foster and adoptive families resulting in a 34% increase of persons attending the Foster/Adoptive Family Orientation meetings.

Safe Communities

- Strengthen our prevention and enforcement strategies to protect our youth from crime, neglect and abuse
 - Increased to 87% (289 of 330) the number of youth, ages 13 to 18, at PCC who participated in a diversion program to educate youth to identify and manage behavior that decreases the risk of crossing over to the juvenile justice system.
 - Identified and increased multi-agency collaborations to improve service integration and delivery for children by developing community partnerships, enhancing resources and identifying new opportunities to co-locate CWS staff in environments such as behavioral health offices, community-based organizations, probation offices, Sheriff and police departments.

Sustainable Environments

- Provide and promote services that increase consumer and business confidence
 - Offered 100% (110) of youth enrolled in the San Pasqual Academy Work Readiness program internships and part-time employment to obtain work skills and experience to help transition to adulthood.

Operational Excellence

- Strengthen our customer service culture to ensure a positive customer experience
 - Conducted Quality Parenting Initiative Trainings for 83% (692 of 834) of Child Welfare Services staff. Quality parenting seeks to strengthen the partnership between social workers, foster parents and community partners to help minimize the impact of trauma on children, help children develop strong attachments, and facilitate information sharing that supports quality caregivers.

2015–17 Objectives

Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Ensure 80% (484 of 605) of children, ages 0-17, with a new CWS case are screened for mental health needs. These efforts will ensure that all children have access to trauma informed mental health services. (HF1)
 - Increase 10% (from 550 to 605), the recruitment and licensure of foster families willing to parent older children or teens particularly those children stepping down from group home care.
 - Provide 78% (209 of 268) of youth enrolled in intensive home-based services (i.e. Wraparound) with resources to help the youth remain or be placed in a home-like setting, by providing resources to help further improve their connection to home and community and reduce the use of costly group home placements.
 - Increase family engagement to 30% (150 of 500) of referrals and cases. Family engagement efforts are shown to increase accurate assessment and decision making by 70% which can ultimately prevent the removal of children and/or facilitate more timely reunification.
 - Support stability by placing 55% (743 of 1,350) of foster care children with a relative or close non-family member, minimizing trauma to children by maintaining their connections to familiar environments.
 - Support stability by maintaining the number of children, 87% (1,479 of 1,700), who have been in foster care for less than 12 months and have fewer than three placements. Fewer placements minimize the trauma that children experience and may help lessen negative impact to their school performance.
 - Enhance the Cultural Broker Program to provide a bridge for the African American community and families in child welfare to develop concrete supports and social connections to strengthen families.





- Pursue policy changes for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Increase by 5% (from 325 to 341), the number of adoption finalizations to achieve permanence for children.



Safe Communities

- Strengthen our prevention and enforcement strategies to protect our youth from crime, neglect and abuse
 - Develop in collaboration with Probation, Behavioral Health, Public Health, and Juvenile Court an interagency protocol to serve commercially sexually exploited children. In addition, develop a training curriculum that will educate foster youth on how to recognize and avoid commercial sexual exploitation. (SC6)
 - Determine baseline data for eligible 17-year-old foster youth placed in San Diego County who participate in an Independence Mapping (IM). This process engages youth and their support networks in identifying strengths, needs or barriers in relation to education, employment, healthy relationships, and stable housing while identifying next steps to assist the youth in their transition to adulthood.



Sustainable Environments

- Create and promote diverse opportunities for residents to exercise their right to be civically engaged and finding solutions to current and future challenges
 - Address disproportionality and disparate outcomes for families by engaging Child Abuse Coordinating Council stakeholders to review current research, promising practices and to develop an action plan.



Operational Excellence

- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Assist Administrative Support with the development of an electronic information exchange system that supports a person-centered delivery by enabling collaboration among County programs with shared customers. The Countywide

Knowledge Integration Program (KIP) Unit will design and coordinate a new system to link with multiple information exchange systems and improve customer service. (OE3)

- Strengthen our customer service culture to ensure a positive customer experience
 - Participate in a minimum of 6 Customer Service trainings for HHSA Departmental Customer Service Ambassadors to assist with developing skills of over 5,000 County employees so that they Agency provides customers an exceptional and effective County experience. (OE5)
 - Develop and implement a customer satisfaction survey for foster parents to gather baseline information to further strengthen the partnership between foster parents and CWS staff.
- Develop, maintain and attract a skilled adaptable and diverse workforce by providing opportunities for our employees to feel valued, engaged and trusted
 - Work with Administrative Support to develop a plan to create an HHSA Job Shadow program to provide 50 qualified employees the opportunity to explore a specific career interest, develop knowledge and collaborate to build relationships which provide opportunities for growth. (OE6)
 - Work with Administrative Support to develop a plan to improve the HHSA New Employee Orientation to ensure a welcoming atmosphere for all new hires to feel valued, become engaged and integrated to the shared vision of *Live Well San Diego*. Providing new hires the opportunity to feel valued leads to increased retention and a productive workforce with an increased appreciation toward their contributions in the lives of our customers. (OE6)

Related Links

For information about San Diego County Adoptions, go to:

- ◆ www.IAdoptU.org

For San Pasqual Academy, go to:

- ◆ www.SanPasqualAcademy.org

For additional information on the programs offered by the Health and Human Services Agency (HHSA), refer to the website:

- ◆ www.SdCounty.ca.gov/HHSA

Performance Measures	2013–14 Actuals	2014–15 Adopted	2014–15 Actuals	2015–16 Adopted	2016–17 Approved
Youth in intensive, wraparound program in a family-like setting	73% of 234	78% of 232	82% of 282	78% of 268	78% of 268
Children removed from home with mental health assessment ²	N/A	N/A	N/A	80% of 605	82% of 605
Foster families willing to parent older children or teens ²	N/A	N/A	N/A	605	665
Family engagement to facilitate timely reunification of children removed from homes ²	N/A	N/A	N/A	30% of 500	32% of 500
Adoptions finalized to increase permanency for children ²	N/A	N/A	N/A	341	358
Foster care child placed with relative or close family member ^{2,6}	N/A	55% of 1,500	51% of 1,311	55% of 1,350	55% of 1,350
Foster care child placed in fewer than 3 placements within 12 months ²	N/A	87% of 1,700	84% of 1,541	87% of 1,700	87% of 1,700
Stable housing for youth in Extended Foster Care ³	97% of 371	96% of 363	97% of 485	N/A	N/A
Youth participation in juvenile diversion program ^{1,4}	N/A	50% of 460	87% of 330	N/A	N/A
Youth enrolled in work readiness program ^{1,5}	N/A	83% of 110	100% of 110	N/A	N/A

Table Notes

- ¹ This is a new measure effective Fiscal Year 2014–15 that is reported in the Operational Plan to reflect the activities that support foster youth transition into adulthood.
- ² Performance measure added in Fiscal Year 2015–16 to support strategic alignment to the County’s vision of a region that is Building Better Health, Living Safely and Thriving: *Live Well San Diego*.
- ³ Performance measure deleted Fiscal Year 2015–16 as target has been regularly met and it remains as a primary responsibility of extended foster care social workers to assist young adults in locating and maintaining safe and stable housing.
- ⁴ Performance measure deleted Fiscal Year 2015–16 due to diversion programming expanding and changed to an at-risk curriculum for youth between ages 11 and 14 and not just for youth engaging in delinquent activities. This ensures youth at risk of delinquency or are actively engaging in delinquent activities are educated about consequences and are taught skills to make better choices.
- ⁵ Performance measure deleted Fiscal Year 2015–16 as the projected performance has been consistently surpassed and system is in place to continuously meet 100%.
- ⁶ Fiscal Year 2014-15 goal not met due to optional participation and extensive approval process.





Budget Changes and Operational Impact: 2014–15 to 2015–16

Child Welfare Services has an overall increase of \$6.2 million. Major initiatives funded include participation in the Title IV-E California Well-Being Project, which allows for the flexible use of federal dollars to improve outcomes in Child Welfare Services. Efforts to expand trauma informed care remain a focus under the Title IV-E project. An expansion to the Cultural Broker Program will further support targeted County efforts to decrease disproportionality within the child welfare system.

Staffing

Net increase of 11.00 staff years

- ◆ Increase of 10.00 staff years due to a transfer from Regional Child Welfare Services to support operational needs.
- ◆ Increase of 1.00 staff year due to a transfer from Eligibility Operations Administration to support operational needs.
- ◆ Additionally, staff were transferred within Child Welfare Services including Foster Care and Adoptions to manage service needs.

Expenditures

Net increase of \$6.2 million

- ◆ Salaries & Benefits—increase of \$5.7 million as a result of negotiated labor agreements, increased costs associated with the addition of 11.00 staff years and fewer assumed vacancies associated with increased hiring and retention efforts.
- ◆ Services & Supplies—increase of \$4.0 million.
 - ◆ Increase of \$2.8 million in contracted services primarily associated with the Title IV-E California Well-Being Project.
 - ◆ Increase of \$0.6 million in various services and supplies primarily due to increases in rents and leases, internal service fund charges and information technology costs.
 - ◆ Increase of \$0.3 million in contracted services associated with the Cultural Broker contract to enhance child safety and family stability outcomes for children and improve upon disproportionality efforts.
 - ◆ Increase of \$0.3 million in costs for additional vehicles.

- ◆ Other Charges—decrease of \$3.6 million in foster care payments to align with caseload trends.
- ◆ Capital Assets Equipment—increase of \$0.1 million in Capital Assets Equipment associated with the purchase of Morpho Live Scan machines for fingerprint clearances requirement.

Revenues

Net increase of \$6.2 million

- ◆ Intergovernmental Revenues—increase of \$17.7 million.
 - ◆ Increase of \$11.2 million in Realignment revenue based on projected statewide sales tax receipts and vehicle license fees that are dedicated for costs for health and human service programs. Growth supports expenditure increases in Salaries & Benefits and services and supplies, and includes a redistribution within the Agency with no impact to services.
 - ◆ Increase of \$4.3 million associated with the Title IV-E California Well-Being Project to allow for the flexible use of federal dollars to improve outcomes in Child Welfare Services.
 - ◆ Increase of \$2.2 million associated with the Adoption caseload conversion to federal cases.
- ◆ Charges For Current Services—decrease of \$3.4 million due to the reduction of Developmental Screening and Enhancement Program funding from the First 5 Commission.
- ◆ Use of Fund Balance—net decrease of \$0.8 million. A total of \$0.5 million is budgeted for the Cultural Broker contract to enhance child safety and family stability outcomes for children.
- ◆ General Purpose Revenue Allocation—decrease of \$7.3 million due to increased federal revenue and realignment funds to cover child welfare, foster care and adoption services.

Budget Changes and Operational Impact: 2015–16 to 2016–17

Net increase of \$1.4 million is the result of an increase of \$1.8 million in Salaries & Benefits due to negotiated labor agreements offset by a decrease of \$0.4 million associated with the elimination of one-time projects from the prior year.



Staffing by Program						
		Fiscal Year 2014–15 Adopted Budget			Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Child Welfare Services		516.00			483.00	483.00
Foster Care		99.00			131.00	131.00
Adoptions		142.00			154.00	154.00
Total		757.00			768.00	768.00

Budget by Program						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Child Welfare Services	\$ 84,137,466	\$ 90,101,951	\$ 90,654,781	\$ 87,945,312	\$ 96,146,380	\$ 96,774,200
Foster Care	142,473,084	165,043,082	165,096,699	142,737,283	163,693,630	163,979,578
Adoptions	13,952,621	15,452,502	15,452,706	16,127,583	16,998,531	17,438,211
Total	\$ 240,563,171	\$ 270,597,535	\$ 271,204,185	\$ 246,810,177	\$ 276,838,541	\$ 278,191,989

Budget by Categories of Expenditures						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Salaries & Benefits	\$ 63,343,185	\$ 69,701,255	\$ 69,701,255	\$ 70,166,041	\$ 75,411,957	\$ 77,198,040
Services & Supplies	41,311,089	43,698,409	44,256,090	42,894,587	47,711,951	47,279,316
Other Charges	135,908,897	157,197,871	157,222,841	133,749,549	153,614,633	153,614,633
Capital Assets Equipment	—	—	24,000	—	100,000	100,000
Total	\$ 240,563,171	\$ 270,597,535	\$ 271,204,185	\$ 246,810,177	\$ 276,838,541	\$ 278,191,989





Budget by Categories of Revenues

	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Licenses Permits & Franchises	\$ 663,026	\$ 654,000	\$ 654,000	\$ 656,000	\$ 654,000	\$ 654,000
Revenue From Use of Money & Property	540,639	681,211	681,211	502,888	681,211	681,211
Intergovernmental Revenues	246,469,329	253,482,907	253,482,907	231,426,534	271,205,931	271,205,931
Charges For Current Services	3,896,912	4,917,233	4,917,233	3,900,995	1,517,233	1,517,233
Miscellaneous Revenues	187,876	91,450	91,450	261,235	91,450	91,450
Fund Balance Component Decreases	—	—	—	—	—	1,853,448
Use of Fund Balance	(20,691,033)	1,274,312	1,880,962	566,103	500,000	—
General Purpose Revenue Allocation	(11,194,611)	9,496,422	10,103,072	10,062,525	2,188,716	2,188,716
Total	\$ 240,563,171	\$ 270,597,535	\$ 271,204,185	\$ 246,810,177	\$ 276,838,541	\$ 278,191,989





Public Health Services

Mission Statement

To make people's lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

Public Health Services (PHS) seeks to identify and address the root causes of priority health issues to achieve health equity among all San Diego County residents. The services PHS provides include: protection against public health threats such as foodborne outbreaks, infectious disease epidemics, environmental hazards, and disasters; prevention of injuries, disease, and disabilities; and promoting wellness, healthy behaviors and access to quality care. PHS ensures quality emergency medical services include planning medical response activities for bioterrorism, natural, and man-made disasters. Providing public health protection for residents and visitors is a multidisciplinary and collaborative effort involving other County business groups, private health care provider networks, schools, businesses, military, veterans, community and faith-based partners and residents. In addition, since 2010, the PHS chronic disease prevention program has leveraged multiple grants averaging over \$50 million in federal funding, advancing innovative approaches to healthy communities through policy and environmental change consistent with the Live Well San Diego vision and strategy of building better health, living safely and thriving.

County preparations and responses for Ebola, measles, pertussis, norovirus outbreaks and a moderately severe influenza season, made Fiscal Year 2014-15 particularly eventful. In a typical year, PHS conducts approximately 8,000 disease investigations, processes 45,000 disease reports, and tests about 70,000 specimens for diseases. PHS detects, prevents, and controls the spread of tuberculosis through treatment, case management and contact investigations. PHS provides over 16,000 residents with sexually transmitted disease prevention and clinical services, and provides more than 2,500 refugees basic health assessments, screenings and referrals. In addition, the California Children's Services program provides medical evaluations, treatment and case management services to 13,300 chronically ill, severely and physically disabled children.

To ensure these critical services are provided, PHS has 486 staff and a budget of \$115.4 million.



Strategic Initiative Legend

HF	SC	SE	OE
○	- Audacious Vision		
●	- Enterprise Wide Goal		
□	- Cross-Departmental Objective		
■	- Department Objective		
◆	- Objective Sub-Dot Point Level 1		

For more information on alignment to the Strategic Initiatives refer to the Group Description section within the Health and Human Services Agency Summary.

2014-15 Accomplishments

Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Ensured that preventive health examinations were performed to identify and correct health issues for 91% (2,302 of 2,516) of children in out-of-home placement.
- Strengthen the local food system and support the availability of healthy foods, nutrition education, and nutrition assistance for those who need it
 - Provided Supplemental Nutrition Assistance Program Education (SNAP-Ed) and obesity prevention services for low-income families such as:
 - ◆ Provided nutrition education in five high schools;
 - ◆ Implemented a Community Agriculture Planning Program with six local jurisdictions;
 - ◆ Enhanced the Healthy Works website with additional resources, success stories on nutrition education and obesity prevention;

- ◆ Funded YMCA to improve nutrition and physical activity in early child care programs; and,
- ◆ Provided ongoing facilitation and support to local agencies, including the County Nutrition Action Partnership (CNAP), as part of a collective effort to promote healthy eating.
- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Completed the framework for a 5 Year Binational Border Health Improvement Strategic Plan, which will identify regional health priorities and define joint health improvement initiatives to improve the health of communities along the border.
 - Created an inventory of binational border health activities, reviewed documents generated by border health agencies, and conducted interviews with local border health leaders.

- Ensured 96% (210 of 217) of tuberculosis (TB) cases were reported within one working day from start of treatment to prevent further transmissions.
- Linked 100% (976) of individuals with a confirmed HIV diagnosis to primary care by verifying a medical visit within 90 days of results disclosure to increase access to health care and control the spread of HIV.



Operational Excellence

- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Expedited and improved the accuracy of 66% (27,868 of 42,224) of referrals for California Children’s Services by processing them through eQuest, a web referral system for children with certain physical limitations, chronic health conditions and diseases.
 - Conducted 6 quality improvement projects to help address a number of priority operational needs. The projects included:
 - ◆ Exchanged health information for foster children, making it easier for foster care public health nurses, foster parents, and community medical providers to keep up-to-date health information for foster youth;
 - ◆ Improved the electronic annual renewals for California Children’s Services program, cutting the overall processing time in half (from 155 minutes to 88 minutes) and preventing gaps or breaks in services to patients;
 - ◆ Designed and piloted a tracking system to determine how many TB patients are high-risk for progression to active TB, monitor treatment regimens and project outcomes;
 - ◆ Centralized document management system to improve staff access to operational policies and procedures to strengthen compliance with standards, mitigate risk and improve productivity;
 - ◆ Reduced by 50% the average time to complete Emergency Medical Technician (EMT) investigations by using a seasoned law enforcement professional to expedite applications of both new and currently certified EMTs;
 - ◆ Improved procedures for reporting availability and usage, of approximately 60,000 doses of flu vaccine to help community partners and public health centers meet the demand for vaccines and minimize waste.
 - Completed a major step toward achieving national voluntary public health accreditation by submitting 100% of required documentation.



Safe Communities

- Encourage and promote residents to take important and meaningful steps to protect themselves and their families for the first 72 hours during a disaster
 - Ensured preparedness for disaster or public health threat by activating the public health emergency response system five times annually. These exercises included:
 - ◆ FEMA San Onofre Nuclear Generating Station Full Scale Exercise, July 2014;
 - ◆ Public Health Center Mass Vaccination Points of Dispensing Drill, November 2014;
 - ◆ Statewide Medical Health Full Scale Exercise, November 2014;
 - ◆ National Disaster Medical System Full Scale Exercise, November 2014;
 - ◆ Extended power outage coupled with mass casualty incident and decontamination drill, May 2015.
- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Provided Health and Human Services Agency (HHSA) service regions technical assistance in implementing their *Live Well San Diego* Community Health Improvement Plans, such as generating community health statistics, providing resources to support health promotion efforts and introducing a new performance management system to capture the collective impact of the regional leadership teams and community partners, including residents.
 - Investigated 98% (220 of 223) of reported selected communicable disease cases within 24 hours to reduce the spread of disease.





2015–17 Objectives



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Ensure 90% (2,700 of 3,000) of children in out-of-home placement receive preventive health examinations to identify and correct undetected health issues. (HF1)
- Strengthen the local food system and support the availability of healthy foods, nutrition education, and nutrition assistance for those who need it
 - Adopt a comprehensive County of San Diego Nutrition and Food Systems Standard to improve the nutritional value of foods offered through County congregate meal programs and food services, procurements, meetings and events. This comprehensive standard will build upon existing federal and State requirements and will be adopted by the end of Fiscal Year 2017 after conducting outreach and designing the standard with input from consumers, providers and other stakeholders. (HF2)



Safe Communities

- Encourage and promote residents to take important and meaningful steps to protect themselves and their families for the first 72 hours during a disaster
 - Ensure preparedness for disaster or public health threat, in collaboration with the Office of Emergency Services, by activating the public health emergency response system five times annually. (SC1)
- Plan, build and maintain safe communities to improve the quality of life for all residents
 - Monitor area medical response times to ensure that 90% of calls are within established response time standards. (SC2)
 - Ensure 100% (1,000) of individuals receiving a newly confirmed HIV diagnosis are linked to primary care with a verified medical visit within 90 days of results disclosure, to increase access to health care and control the spread of HIV.
 - Ensure 100% (210) of tuberculosis (TB) cases are reported within one working day from start of treatment to prevent transmission of TB.



Sustainable Environments

- Provide and promote services that increase consumer and business confidence
 - Increase number of Live Well @ Work locations by 25 to ensure local employers adopt policies and practices that increase opportunities for physical activity, access to healthy foods, and other changes to create a healthier workplace. (SE1)



Operational Excellence

- Align services to available resources to maintain fiscal stability
 - Gain recognition as a nationally accredited public health agency through the Public Health Accreditation Board (PHAB), demonstrating achievement of nationally recognized, practice-focused and evidenced-based standards. (OE1)
- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Assist Administrative Support with the development of an electronic information exchange system that supports a person-centered delivery by enabling collaboration among County programs with shared customers. The Countywide Knowledge Integration Program (KIP) Unit will design and coordinate a new system to link with multiple information exchange systems and improve customer service. (OE3)
 - Initiate 100% (270) of communicable disease investigations within 24 hours of report to reduce disease transmission. Examples of reportable communicable diseases include hepatitis A, meningococcal disease, and E. coli.
 - Expedite and improve the accuracy of 68% (28,560 of 42,000) of referrals for California Children's Services through eQuest, a web referral system for children with certain physical limitations and chronic health conditions and diseases.
- Develop, maintain and attract a skilled, adaptable and diverse workforce by providing opportunities for our employees to feel valued, engaged, and trusted
 - Conduct and implement a minimum of six quality improvement projects to increase efficiency and improve effectiveness of operations. (OE5)
 - Work with Administrative Support to develop a plan to create an HHSA Job Shadow program to provide 50 qualified employees the opportunity to explore a specific career interest, develop knowledge and collaborate to build relationships which provide opportunities for growth. (OE6)
 - Work with Administrative Support to develop a plan to improve the HHSA New Employee Orientation to ensure a welcoming atmosphere for all new hires to feel valued, become engaged and integrated to the shared vision of *Live Well San Diego*. Providing new hires the opportunity to feel valued leads to increased retention and a productive workforce with an increased appreciation toward their contributions in the lives of our customers. (OE6)



Related Links

For additional information about the programs offered by the Health and Human Services Agency, refer to the website:

- ◆ www.sandiegocounty.gov/hhsa

For additional information about Public Health Services, the PHS strategic plans, and information about each of its branches, go to:

- ◆ <http://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs.html>

For more information about the *Live Well San Diego* Community Health Improvement Plans (CHIP), go to:

- ◆ <http://www.livewellsd.org/content/livewell/home/make-an-impact/community-action-for-living-well.html>

For more information about Healthy Works, a component of *Live Well San Diego* and includes the Live Well @ Work project, go to:

- ◆ <http://www.healthyworks.org/>

For more information about public health accreditation, go to:

- ◆ www.phaboard.org

For health statistics that describe health behaviors, diseases and injuries for specific populations, health trends and comparison to national targets, go to the website:

- ◆ www.sdhealthstatistics.com

For additional information about the Top 10 *Live Well San Diego* Indicators, go to:

- ◆ <http://www.livewellsd.org/content/livewell/home/make-an-impact/top-10-live-well-indicators.html>

Performance Measures	2013–14 Actuals	2014–15 Adopted	2014–15 Actuals	2015–16 Adopted	2016–17 Approved
Children in out-of-home placements who receive preventive health examinations in accordance with CHDP guidelines	87% of 2,589	90% of 3,000	91% of 2,516	90% of 3,000	90% of 3,000
Activation of public health emergency response system for drills, exercises and actual responses	6	5	5	5	5
New clients enrolled with an HIV primary care provider within 90 days ¹	97% of 814	100% of 700	100% of 976	100% of 1,000	100% of 1,000
TB cases reported to PHS within one working day from start of treatment ^{1,3}	97% of 203	100% of 260	96% of 217	100% of 210	100% of 210
Number of additional worksites made healthier for employees through Live Well @ Work Project ²	N/A	N/A	N/A	25	25
Selected communicable diseases cases contacted/investigations initiated within 24 hours ^{1,4}	100% of 58	100% of 130	98% of 223	100% of 270	100% of 270
Number of electronic referrals received by CCS	63% of 42,584	65% of 45,000	66% of 42,224	68% of 42,000	68% of 42,000
Quality Improvement Projects ²	N/A	N/A	N/A	6	6
Medical response times are within established response time standards ²	N/A	N/A	N/A	90%	90%

Table Notes

- ¹ Target exceeds State standards and performance benchmarks for TB (CA target is 93%) and HIV (CA benchmark is 45%). There is no national or State target for communicable disease investigations.
- ² Performance measure added in Fiscal Year 2015–16 to support strategic alignment to the County's vision of a region that is Building Better Health, Living Safely and Thriving: *Live Well San Diego*.
- ³ Target was not met because in rare instances providers failed to report TB within one day. Those providers who failed to report within one day typically reported within a few days.



⁴Target not met due to cases being received over the weekend or holiday weekend where there were fewer staff to initiate an immediate investigation. Also, cases may have been received during another disease outbreak where priorities were focused elsewhere.

Budget Changes and Operational Impact: 2014–15 to 2015–16

Public Health Services has an overall increase of \$9.0 million. As PHS moves towards voluntary national accreditation through the Public Health Accreditation Board (PHAB), the budget supports further investments in information technology for the Health Information Exchange, the Prehospital Data Collections system, and the Electronic Health Records system in order to continually improve upon the service model. Additional services supported by expanded funding from the Healthy Works: Prevention Initiative (CDC), and HIV grants are also budgeted.

Staffing

Increase of 1.00 staff year due to a transfer from Health Care Policy Administration to support operational needs.

Expenditures

Net increase of \$9.0 million

- ◆ Salaries & Benefits—increase of \$1.8 million as a result of negotiated labor agreements and the increase of 1.00 staff year.
- ◆ Services & Supplies—net increase of \$7.2 million.
 - ◆ Increase of \$2.8 million in contracted services associated with expanded funding from the Healthy Works: Prevention initiative (CDC), and HIV grants.
 - ◆ Increase of \$2.5 million for one-time information technology upgrades such as Prehospital Data Collections system, Base Hospital radio consoles, Electronic Health Record system development, Medical Therapy Unit Online enhancements, LIMS essential software, and Polymerase Chain Reaction System development.
 - ◆ Increase of \$0.9 million for ongoing information technology updates such as Health Information Exchange, Electronic Health Record system service agreement, Immunization Registry workload, Polymerase Chain Reaction System service agreement and Oral Health Initiative contract.
 - ◆ Increase of \$0.7 million in various other services and supplies including lab supplies related to Ebola prevention.
 - ◆ Increase of \$0.3 million in ambulance services for the CSA's to align with projected need of ambulance services in unincorporated areas.
- ◆ Intergovernmental Revenues—net increase of \$6.6 million.
 - ◆ Increase of \$2.7 million in new grant funding for costs associated with the Healthy Works: Prevention Initiative.
 - ◆ Increase of \$2.7 million in Realignment to align revenue with expenditure increases described above.
 - ◆ Increase of \$1.2 million for costs associated with the HIV Prevention Demonstration Project.
 - ◆ Increase of \$0.7 million in Public Health Emergency Preparedness revenue and Ambulance Transport grant revenue to align to projected allocations.
 - ◆ Increase of \$0.5 million in new grant funding for costs associated with the Nutrition Education Obesity Prevention and Sodium Reduction programs.
 - ◆ Increase of \$0.3 million in California Children Services funding due to a projected increase in Medi-Cal caseload.
 - ◆ Decrease of \$0.8 million in Community Transformation Grant associated with the end of the funding.
 - ◆ Decrease of \$0.5 million in Black Infant Health Program funding to align to projected allocation.
 - ◆ Decrease of \$0.2 million in National Public Improvement Initiative funding to align to projected allocation.
- ◆ Charges for Current Services—increase of \$0.7 million primarily related to third party external administrative fees, increased State fees for certified copies and ambulance transports.
- ◆ Miscellaneous Revenues—decrease of \$0.2 million primarily related to prior year revenues and revenue share to HHS from Assessor, Recorder, County Clerk for Duplicating & Filing Documentation fees.
- ◆ Use of Fund Balance—increase of \$1.5 million. A total of \$2.5 million is budgeted for one-time information technology upgrades.
- ◆ General Purpose Revenue Allocation—decrease of \$0.1 million due to increased program revenue.

Budget Changes and Operational Impact: 2015–16 to 2016–17

Net decrease of \$1.8 million is the result of an increase of \$1.0 million in Salaries & Benefits due to negotiated labor agreements offset by a decrease of \$2.8 million in Services & Supplies due to the elimination of one-time projects from the prior year.

Revenues

Net increase of \$9.0 million

- ◆ Fines, Forfeitures & Penalties—increase of \$0.5 million in projected penalty assessments in Emergency Medical Services.

Staffing by Program						
		Fiscal Year 2014–15 Adopted Budget			Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Administration and Other Services		28.00			28.00	28.00
Bioterrorism / EMS		49.00			50.00	50.00
Infectious Disease Control		107.25			107.25	107.25
Surveillance		84.00			84.00	84.00
Prevention Services		79.50			79.50	79.50
California Childrens Services		136.75			136.75	136.75
Total		484.50			485.50	485.50

Budget by Program						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Administration and Other Services	\$ 4,636,083	\$ 5,977,009	\$ 6,294,601	\$ 5,298,113	\$ 6,260,454	\$ 6,325,265
Bioterrorism / EMS	11,299,214	12,717,648	13,495,280	12,538,488	14,527,735	13,502,636
Infectious Disease Control	26,432,532	27,946,148	29,589,612	26,705,815	30,851,160	30,305,440
Surveillance	11,221,567	12,340,374	12,548,782	11,647,297	13,473,347	12,629,842
Prevention Services	17,235,609	16,192,200	16,385,417	16,800,740	18,615,863	18,574,148
California Childrens Services	18,736,583	20,655,645	20,671,170	18,425,814	20,802,861	20,997,784
Ambulance CSA's - Health & Human Services	9,834,161	10,574,661	10,957,418	9,350,314	10,853,440	11,221,113
Total	\$ 99,395,749	\$ 106,403,685	\$ 109,942,279	\$ 100,766,581	\$ 115,384,860	\$ 113,556,228

Budget by Categories of Expenditures						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Salaries & Benefits	\$ 50,364,326	\$ 54,607,487	\$ 54,607,487	\$ 52,635,077	\$ 56,420,029	\$ 57,373,857
Services & Supplies	45,598,237	47,164,198	50,690,390	45,401,140	54,330,696	51,548,236
Other Charges	3,361,525	4,599,000	4,599,000	2,682,554	4,601,135	4,601,135
Capital Assets Equipment	120,486	33,000	45,402	47,811	33,000	33,000
Expenditure Transfer & Reimbursements	(48,825)	—	—	—	—	—
Total	\$ 99,395,749	\$ 106,403,685	\$ 109,942,279	\$ 100,766,581	\$ 115,384,860	\$ 113,556,228





Budget by Categories of Revenues

	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Taxes Current Property	\$ 1,531,749	\$ 1,602,726	\$ 1,602,726	\$ 1,608,250	\$ 1,565,017	\$ 1,686,560
Taxes Other Than Current Secured	17,418	26,784	26,784	21,705	26,784	26,784
Licenses Permits & Franchises	212,411	214,613	214,613	236,601	194,500	194,500
Fines, Forfeitures & Penalties	2,838,056	2,199,943	2,199,943	3,134,317	2,762,170	2,762,170
Revenue From Use of Money & Property	34,582	54,000	54,000	45,660	54,000	54,000
Intergovernmental Revenues	87,289,039	86,728,206	87,445,450	84,691,519	93,364,434	93,588,855
Charges For Current Services	8,451,561	7,971,031	7,971,031	9,082,780	8,669,570	8,328,645
Miscellaneous Revenues	1,390,173	930,558	930,558	1,154,350	668,988	721,711
Other Financing Sources	500,029	500,000	500,000	500,051	500,000	500,000
Fund Balance Component Decreases	—	—	—	—	—	655,606
Use of Fund Balance	(6,955,207)	1,022,771	3,844,121	(4,861,705)	2,542,000	—
General Purpose Revenue Allocation	(2,869,269)	5,153,053	7,974,403	291,348	5,037,397	5,037,397
Total	\$ 99,395,749	\$ 106,403,685	\$ 109,942,279	\$ 100,766,581	\$ 115,384,860	\$ 113,556,228





Administrative Support

Mission Statement

To make people’s lives healthier, safer and self-sufficient by delivering essential services in San Diego County.

Department Description

The Health and Human Services Agency's (HHS) administrative departments support 5,976 HHS staff that provide critical and essential services to San Diego County residents. Administrative Support department includes: Agency Executive Office, Financial Services and Support Division, Human Resources, Management Information Support, Contract Support, and the Office of Strategy and Innovation. Also included under Administrative Support is the First 5 Commission, the Live Well San Diego planning team and Community Action Partnership (CAP), which oversees the Office of Refugee Services and administers the Community Services Block Grant for the San Diego region.

Administrative Support ensures all HHS departments and regions work together by providing services that allows for business continuity and optimal use of resources. Services include planning and forecasting for fiscal stability, developing and maintaining a knowledge-based workforce, supporting programs with information management and technology, providing general policies to ensure accountability with federal, State, local and County requirements, and guiding HHS in its efforts to advance the County’s vision for a region that is building better health, living safely and thriving, which is called Live Well San Diego.

To ensure HHS service regions and departments can provide critical, essential services; Administrative Support has 379 staff and a budget of \$143.9 million.



2014-15 Accomplishments

Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Worked with HHS departments to create a trauma informed atmosphere in new and modernized facilities. This was accomplished at the following locations by creating a professional setting that includes a welcoming customer greeting area and a family-friendly setting.
 - ◆ Mid-City Child Welfare Services
 - ◆ Fallbrook Community Resource Center
 - ◆ North Inland Live Well Center
 - ◆ Magnolia Child Welfare Services, Aging & Independence Services, and Public Health Center
- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Created 73 new partnerships to achieve the *Live Well San Diego* goals of access to healthy foods, smoking cessation and improving workplace wellness. A list of all contributing *Live Well San Diego* recognized partners and their commitments are included at www.LiveWellSD.org.
 - Performed 20,494 blood pressure screenings at over 150 locations, with 84 partners as part of the 2015 Love Your Heart campaign. One out of every two individuals with a reported blood pressure level was identified as having an elevated blood pressure. Screened individuals received educational materials about heart health. This event helped to elevate the importance that blood pressure plays in overall health and is directly linked to 3-4-50 (3 behaviors—no physical activity, poor diet and tobacco use,—that result in 4 diseases—cancer, heart disease and stroke, type 2 diabetes and lung disease—that result in over 50 percent of deaths in San Diego).

Strategic Initiative Legend

HF	SC	SE	OE
○	- Audacious Vision		
●	- Enterprise Wide Goal		
□	- Cross-Departmental Objective		
■	- Department Objective		
◆	- Objective Sub-Dot Point Level 1		

For more information on alignment to the Strategic Initiatives refer to the Group Description section within the Health and Human Services Agency Summary.

- Leverage internal communication resources, resource groups, and social media to enhance employee understanding of *Live Well San Diego*
 - Collaborated with County Human Resources to educate all County job applicants on *Live Well San Diego* so they can understand the role employees play in helping residents to live well. By educating job applicants, new employees were aware of the County's vision of *Live Well San Diego* and the role they play in advancing its strategies of building better health, living safely and thriving.

 Sustainable Environments

- Create and promote diverse opportunities for residents to exercise their right to be civically engaged and finding solutions to current and future challenges
 - Conducted a countywide community needs assessment through the Resident Leadership Academies (RLA) to incorporate the voice of the customer into San Diego County's Community Action Plan, strengthening economically disadvantaged individuals, families, and communities using the Community Service Block Grant. These regional RLAs:
 - ◆ Trained 116 RLA graduates from low-income communities to assess the needs of their community, plan community improvement projects and implement them through the principles of community building;
 - ◆ Held 6 public forums with 292 participants to discuss barriers and possible solutions to health, safety and well-being in their neighborhoods;
 - ◆ Completed 756 surveys providing feedback on residents' priorities for community resources, as well as their current level of satisfaction with availability of resources in their neighborhoods;
 - ◆ Conducted 18 interviews with community educators, employers and community-based organizations to receive their feedback on how to best empower low-income communities to be safe, healthy and thriving.
 - All residents engage in community life and civic activities
 - Held a *Live Well San Diego* Expo featuring 48 partners and 28 County departments to highlight their services and demonstrate collective impact to the community in support of the County vision.
- Foster an environment where residents engage in recreational interest by enjoying parks, open spaces and outdoor experiences
 - Hosted and promoted the 2015 *Live Well San Diego* 5K Walk/Run and Health Fair to provide a healthy and informative outdoor experience to County residents. The *Live Well San Diego* 5K event encouraged residents to exercise with family and friends at a local park while supporting thousands of children in foster care and receiving health information.

 Operational Excellence

- Align services to available resources to maintain fiscal stability
 - Completed a multi-year financial spending plan to reflect declining revenues and the alignment with the First 5 Commission's Strategic Plan 2015-2020 in order to ensure that critical services are maintained.
 - Completed 22 comprehensive financial reviews of contractors to ensure they were in compliance with standards and had financial controls in place. This activity helps to assure that the County is maintaining fiscal stability.
 - Completed 14 Quality Assurance (QA) reviews to ensure that regions and departments adhered to contracting policies and procedures. This activity confirmed that contracting functions were carried out according to established standards.
 - Completed 15 internal reviews of offices with petty cash to ensure appropriate controls are in place and ensure public funds are used in accordance with external funding requirements.
 - Improved financial competency of staff and management by conducting presentations on funding and financial issues that affect operations and service delivery. These trainings provided staff with the knowledge to make better-informed decisions.
- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Entered into a contract to build an information exchange system with federally accepted standards to pull data from existing systems to improve the health and social service delivery system.
 - Coordinated with County Technology Office to conduct and complete the Websense Endpoint Data Loss Prevention (DLP) Pilot. This new DLP software will help protect the County and its employees from making accidental or inadvertent disclosures of confidential client information.
 - Conducted an enterprise-wide focus group to discuss data security practices, handling data confidentiality, and to minimize accidental or inadvertent disclosures of confidential client information. This information was used to develop an online DLP Awareness Training to educate employees about the importance of employee data security and methods to reduce the number of incidents.
- Strengthen our customer service culture to ensure a positive customer experience
 - Launched an updated *Live Well San Diego* website (LiveWellSD.org) to provide access to timely, relevant news and material. The *Live Well San Diego* website was developed using feedback from focus groups, one-on-one interviews with subject matter experts and survey of 194 community partners. The number of unique visitors to *Live Well San Diego* website was increased 83% (from 8,838 to 16,144).





- Completed soft launch of the *Live Well San Diego* Top 10 Indicators dashboard beta site, an interactive and dynamic tool to encourage positive change toward the vision of a healthy, safe and thriving San Diego County. It communicates progress, provides access to community-level health/well-being data, research, best practices and helps to drive public engagement.

2015–17 Objectives



Healthy Families

- Promote the implementation of a service delivery system that is sensitive to those individuals who have been affected by traumatic circumstances
 - Work with HHSA departments to create a trauma informed atmosphere in all facilities. This will be accomplished by creating a professional setting that includes a welcoming customer greeting area and a family-friendly setting. (HF1)
 - Assist 66% (8,310 of 12,581) of students entering kindergarten to thrive by increasing the number of children identified with a developmental, social emotional or behavioral need and provide the resources necessary to reduce the occurrence of undetected and/or untreated conditions in children entering school. (HF1)
- Strengthen the local food system and support the availability of healthy foods, nutrition education, and nutrition assistance for those who need it
 - Educate 94% (7,215 of 7,676) of parents receiving First 5 Commission services to provide them the knowledge and capacity to advocate for their child's health needs and encourage the healthy development of children ages 0 through 5. (HF2)
- Pursue policy change for healthy, safe and thriving environments with a special focus on residents who are in our care or rely on us for support
 - Support creation of 50 new partnerships to increase efforts that positively impact the health and well-being of residents through *Live Well San Diego*. (HF3)
- Leverage internal communication resources, resource groups, and social media to enhance employee understanding of *Live Well San Diego*
 - Increase County employees' understanding of *Live Well San Diego* through an internal communication campaign. The increase will be measured through a survey conducted in Fiscal Year 2015–16 and compared with survey conducted in Fiscal Year 2013–14. Increasing awareness of *Live Well San Diego* allows employees to cultivate stakeholder relationships and gain public trust as they are all working together towards one vision. (HF5)



Sustainable Environments

- Provide and promote services that increase consumer and business confidence
 - In partnership with the United Way of San Diego County and the Internal Revenue Service (IRS), support and promote the availability of free income tax services to increase applications for the Earned Income Tax and other credits. (SE2)
- Enhance the quality of the environment by focusing on sustainability, pollution prevention and strategic planning
 - Develop a countywide marketing campaign to raise awareness about *Live Well San Diego* among San Diego County residents and encourage positive choices. This campaign will promote healthy, safe and thriving communities, including a sustainable food system that provides fresh and nutritious food for residents. (SE3)
- Foster an environment where residents engage in recreational interests by enjoying parks, open spaces and outdoor experiences
 - Host and promote the 2016 *Live Well San Diego* 5K Walk/Run and Health Fair to provide a healthy and informative outdoor experience to reach 3,000 county residents. The *Live Well San Diego* 5K event encourages residents to exercise with family and friends at a local park while supporting thousands of children in foster care and receiving health information. (SE4)
 - Support the County of San Diego, Parks and Recreation, Summer Movies In The Park efforts through Coast2Coast funding and the accompanying display of videos to promote a healthy, safe and thriving region. The Summer Movies In The Park series is free to residents, offers fun activities for children and encourages families to visit local parks, countywide, for an estimated total of 40,000 residents. (SE4)
- Create and promote diverse opportunities for residents to exercise their right to be civically engaged and finding solutions to current and future challenges
 - Train 15 Resident Leadership Academy (RLA) facilitators, increasing the regional capacity to deliver the RLA curriculum which engages local leaders in the creation of healthy, safe and thriving San Diego neighborhoods. (SE7)



Operational Excellence

- Align services to available resources to maintain fiscal stability
 - Conduct 26 comprehensive financial reviews of contractors to ensure compliance with standards and financial controls are in place. This activity will help assure that the County maintains fiscal stability. (OE1)
 - Conduct 14 Quality Assurance reviews to ensure that contracting policies and procedures are in accordance with funding sources. (OE1)



ADMINISTRATIVE SUPPORT

- Train 100 HHSA employees on contract administration topics to develop, strengthen, and maintain the procurement knowledge and effectively improve contractor performance. (OE2)
- Coordinate 8 financial trainings comprised of budgetary topics impacting program operations such as funding streams and fiscal impacts to service delivery. (OE2)
- Provide modern infrastructure, innovative technology and appropriate resources to ensure superior service delivery to our customers
 - Build an electronic information exchange system that supports a person-centered delivery by enabling collaboration among County programs with shared customers. The Countywide Knowledge Integration Program (KIP) Unit will design and coordinate a new system to link with multiple information exchange systems and improve customer service. (OE3)
 - Increase the number of unique visitors to *the Live Well San Diego* website (LiveWellSD.org) by 50% (from 16,144 to 24,216) by providing access to timely, relevant news and materials. (OE4)
- Strengthen our customer service culture to ensure a positive customer experience
 - Coordinate 6 Customer Service trainings for HHSA Departmental Customer Service Ambassadors to assist with developing skills of over 5,000 County employees so that the Agency provides customers an exceptional and effective County experience. (OE5)
- Develop, maintain and attract a skilled, adaptable and diverse workforce by providing opportunities for our employees to feel valued, engaged and trusted
 - Develop a plan to create an HHSA Job Shadow program to provide 50 qualified employees the opportunity to explore a specific career interest, develop knowledge and collaborate to build relationships which provide opportunities for growth. (OE6)
 - Develop a plan to improve the HHSA New Employee Orientation to ensure a welcoming atmosphere for all new hires to feel valued, become engaged and integrated to the shared vision of *Live Well San Diego*. Providing new hires the opportunity to feel valued leads to increased retention and a productive workforce with an increased appreciation toward their contributions in the lives of our customers. (OE6)

Related Links

For additional information about the programs offered by HHSA, go to:

- ◆ www.sandiegocounty.gov/hhsa

For information about *Live Well San Diego*, go to:

- ◆ www.LiveWellSD.org





Performance Measures	2013–14 Actuals	2014–15 Adopted	2014–15 Actuals	2015–16 Adopted	2016–17 Approved
Comprehensive financially focused review for HHSA contractors ¹	22	21	22	26	28
Quality Assurance reviews of contracting policies and procedures completed for HHSA departments ²	15	14	14	14	14
Unique visitors to the <i>Live Well San Diego</i> website ³	8,838	50% increase (from 8,838 to 13,262)	83% increase (from 8,838 to 16,144)	50% increase (from 16,144 to 24,216)	50% increase (from 24,216 to 36,324)
Children 0 - 5 years of age identified with a developmental, social emotional or behavioral and received resources ³	N/A	N/A	N/A	66% of 12,581	67% of 12,581
First 5 parents with the knowledge and capacity to advocate for their child's needs ³	N/A	N/A	N/A	94% of 7,676	94.5% of 7,676
Certified Resident Leadership Academy facilitators ³	N/A	N/A	N/A	15	15
Customer Service Training workshops ³	N/A	N/A	N/A	6	6
Total <i>Live Well San Diego</i> partners ³	N/A	N/A	N/A	174	224
Staff trained on contract administration ³	N/A	N/A	N/A	100	100
HHSA financial events ³	N/A	N/A	N/A	8	8

Table Notes

- ¹ A comprehensive financial focused compliance review consists of testing financial material, review of contractor financial systems and controls, and observation of contractor systems, activities and processes. A review can range from one month to nine months to complete.
- ² In Fiscal Year 2014–15, the number of reviews was decreased from 15 to 14 to reflect integration of two HHSA programs.
- ³ Performance measure added in Fiscal Year 2015–16 to support strategic alignment to the County’s vision of a region that is Building Better Health, Living Safely and Thriving: *Live Well San Diego*.

Budget Changes and Operational Impact: 2014–15 to 2015–16

Administrative Support has an overall increase of \$21.7 million. The major initiative funded is the Knowledge Integration Program (KIP), which will streamline and enhance information exchange between programs and agencies, resulting in improved coordination and service delivery to clients seeking essential access to health care, public health, human services, probation, and housing assistance. Facilities will continue to be upgraded and modernized across all program areas to ensure superior customer service by focusing on co-locating services that will be delivered in an integrated, professional and trauma informed atmosphere.

Staffing

Increase of 2.00 staff years in Administrative Support due to a transfer from Regional Operations to support operational needs.

Expenditures

Net increase of \$21.7 million

- ◆ Salaries & Benefits—increase of \$1.2 million as a result of negotiated labor agreements, and the addition of 2.00 staff years.
- ◆ Services & Supplies—increase of \$21.6 million.



ADMINISTRATIVE SUPPORT

- ◆ Increase of \$26.4 million in additional one-time information technology contracted costs for the design, development and implementation phase of the KIP project to modernize service delivery.
- ◆ Increase of \$0.9 million in the public liability insurance premium.
- ◆ Increase of \$0.8 million in information technology ISF costs primarily related to server upgrades.
- ◆ Increase of \$0.3 million for facility lease costs.
- ◆ Decrease of \$6.7 million for prior year information technology and innovation one-time projects.
- ◆ Decrease of \$0.1 million in various services and supplies accounts.
- ◆ Fund Balance Component Increases—decrease of \$1.1 million for one-time prior year commitment of principal and interest received from the February 2011 sale of the Grand Avenue clinic.
- ◆ Other Financing Sources—increase of \$1.7 million in Operating Transfer from Proposition 172 Fund for contribution to the KIP project.
- ◆ Use of Fund Balance—increase of \$18.1 million. A total of \$53.4 million is budgeted.
 - ◆ \$24.4 million for modernization of service delivery through information technology that will advance *Live Well San Diego* and the KIP project in the delivery of integrated services.
 - ◆ \$20.0 million for management reserves.
 - ◆ \$9.0 million for one-time major maintenance projects.
- ◆ General Purpose Revenue Allocation—increase of \$1.4 million to cover administrative support costs in Human Resources, Contract Support, Financial Services, Management Support and the Executive Office.

Revenues

Net increase of \$21.7 million

- ◆ Intergovernmental Revenues—increase of \$0.5 million in Social Services Administrative revenue to align with projected allocation.

Budget Changes and Operational Impact: 2015–16 to 2016–17

Net decrease of \$27.9 million is the result of an increase of \$0.8 million in Salaries & Benefits due to negotiated labor agreements, offset by a decrease of \$28.7 million in Services & Supplies due to the elimination of one-time projects from the prior year, including a reduction in one-time costs associated with the Knowledge Integration Program.





Staffing by Program

	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Agency Executive Office	24.00	26.00	26.00
Agency Contract Support	18.00	20.00	20.00
Financial Services Division	161.00	162.00	162.00
Human Resources	83.00	84.00	84.00
Management Support	21.00	21.00	21.00
Proposition 10	23.00	23.00	23.00
Office of Strategy and Innovation	35.00	31.00	31.00
Community Action Partnership	12.00	12.00	12.00
Total	377.00	379.00	379.00

Budget by Program

	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Agency Executive Office	\$ 7,570,586	\$ 40,305,558	\$ 24,826,122	\$ 13,721,718	\$ 33,343,155	\$ 25,397,668
Agency Contract Support	3,851,766	2,463,495	2,466,004	2,349,457	2,774,154	2,806,288
Financial Services Division	29,976,366	34,524,593	43,593,639	34,707,072	35,733,706	33,144,107
Human Resources	13,432,512	10,556,868	10,557,254	9,931,984	11,362,732	11,465,954
Management Support	14,319,995	20,778,528	36,990,686	26,974,482	47,078,788	29,370,320
Proposition 10	2,547,594	2,882,295	2,882,295	2,595,996	2,932,961	2,981,613
Office of Strategy and Innovation	4,443,344	5,318,131	5,370,169	4,109,006	5,310,442	5,441,517
Community Action Partnership	5,760,423	5,399,155	5,399,155	5,911,671	5,367,465	5,398,986
Total	\$ 81,902,586	\$ 122,228,623	\$ 132,085,324	\$ 100,301,387	\$ 143,903,403	\$ 116,006,453



Budget by Categories of Expenditures						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Salaries & Benefits	\$ 34,864,639	\$ 38,908,281	\$ 38,908,281	\$ 36,232,463	\$ 40,113,900	\$ 40,951,807
Services & Supplies	46,650,383	62,177,040	88,033,741	64,063,356	83,789,503	55,054,646
Capital Assets Equipment	309,164	—	—	5,568	—	—
Fund Balance Component Increases	78,400	1,143,302	1,143,302	—	—	—
Management Reserves	—	20,000,000	4,000,000	—	20,000,000	20,000,000
Total	\$ 81,902,586	\$ 122,228,623	\$ 132,085,324	\$ 100,301,387	\$ 143,903,403	\$ 116,006,453

Budget by Categories of Revenues						
	Fiscal Year 2013–14 Actuals	Fiscal Year 2014–15 Adopted Budget	Fiscal Year 2014–15 Amended Budget	Fiscal Year 2014–15 Actuals	Fiscal Year 2015–16 Adopted Budget	Fiscal Year 2016–17 Approved Budget
Fines, Forfeitures & Penalties	\$ 28,020	\$ 50,000	\$ 50,000	\$ 29,463	\$ 50,000	\$ 50,000
Revenue From Use of Money & Property	23,302	—	—	—	—	—
Intergovernmental Revenues	70,157,375	82,399,133	82,399,133	100,764,273	82,887,866	80,887,866
Charges For Current Services	3,546,572	4,386,096	4,386,096	3,838,231	4,364,115	4,412,767
Miscellaneous Revenues	2,509	26,000	26,000	8,124	26,000	26,000
Other Financing Sources	1,120,000	—	—	—	1,700,000	—
Fund Balance Component Decreases	—	—	—	—	—	9,177,406
Use of Fund Balance	7,024,807	35,367,394	45,224,095	(4,338,703)	53,423,008	20,000,000
General Purpose Revenue Allocation	7,024,807	—	9,856,701	(4,338,703)	1,452,414	1,452,414
Total	\$ 81,902,586	\$ 122,228,623	\$ 132,085,324	\$ 100,301,387	\$ 143,903,403	\$ 116,006,453

