Human Services

Annual Report 2014-15

SAN BERNARDINO COUNTY
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Welcome to the 2014 San Bernardino County Human Services (HS) Annual Report. San Bernardino County HS is comprised of nine departments, which serve public and private efforts to ensure that our county’s citizens who are most in need become healthy and productive members of society.

On May 2, 2012, the San Bernardino County Board of Supervisors adopted regional implementation goals through the Countywide Vision process, including targeting cradle-to-career success. This goal calls for partnering with all sectors of the community to support the success of every child from cradle-to-career. In this report, you will find examples of how Human Services met this goal and positively impacted lives, families and the community. This document demonstrates how our programs support the vision adopted by our Board of Supervisors. In each department section, you will find a video testimonial – and hear the words of those whom we have helped in 2014. The data in this report serves as evidence of our great work, but it is in the words of those we serve that best tell the story of human services. It is my hope that you will find inspiration in these changed lives. Following is a description of the services we offer.

**Department of Aging and Adult Services (DAAS)**
Provides protective, in-home and nutrition support, Ombudsman services and training and employment services for seniors. It also includes the Public Guardian/Conservator.

**Department of Behavioral Health (DBH)**
Provides mental health, alcohol and substance abuse services to County residents who are experiencing major mental illness, substance abuse and other addictions.

**Department of Child Support Services (DCSS)**
Provides child support enforcement including establishing court orders for paternity and child support, locating parents and assets to enforce court orders, and collecting support payments.
Children and Family Services (CFS)
Provides protection for abused children, facilitation of adoptions, Foster Family home licensing, and the Independent Living Program (ILP) for emancipating youth.

Children’s Network (CN)
Provides services to at-risk children by improving communications and planning, coordinating and collaborating with agencies who serve children.

Preschool Services Department (PSD)
Provides Head Start and state preschool early childhood education, services to children with special needs, information, advocacy and referral services.

Department of Public Health (DPH)
Provides protection against environmental hazards, promotes and encourages healthy behaviors, responds to disasters and assists communities in recovery and works to prevent injuries, epidemics and the spread of disease to ensure a healthy quality of life for all County residents.

Transitional Assistance Department (TAD)
Provides CalWORKs, Medi-Cal, CalFresh, Foster Care and General Relief Assistance for low income families. Supports self-sufficiency by providing employment services and child care.

Veterans Affairs (VA)
Provides assistance to veterans with claims, information and referral services, advocacy and outreach.

Management Services
Human Services also has eight Management Services divisions that support the work of our nine departments.

Divisions include: Administrative Support Services; HS Auditing; Information, Technology & Support; Performance, Education & Resource Centers; HS Personnel; Program Development; Program Integrity; and Research, Outcomes, and Quality Support.

As you review this report, you will note our accomplishments and the quality service that our agency provides to the citizens in our great county. This is because our staff exemplifies our Human Services mission statement and Countywide Vision.

Linda Haugan,
Human Services Assistant Executive Officer
Human Services works to build a healthier community by strengthening individuals and families, enhancing quality of life and valuing people.
The following Human Services departments were awarded the 2013 National Association of Counties (NACo) Achievement Award. A brief summary is provided below.

Children and Family Services (CFS)

Annual Fatherhood Breakfast Event - Recognizing the importance of a father’s role in a child’s life, Children and Family Services hosts an Annual Fatherhood Breakfast Event as a strategy to promote and enhance the involvement of fathers in the lives of their children. It is the first program of its kind in the County, bringing together male caregivers and biological fathers. The event is a one-stop shop for resources, services and camaraderie offered to help the men further understand their value and role in children’s lives.

Crisis Case Management through Kinship Care - Children and Family Services collaborates with two community agencies to provide three kinship support services centers in the County for individuals raising a child/children of an extended family member. CFS expanded these services by allocating funding for a full-time Crisis Case Manager position at each of the kinship support services centers. The Crisis Case Manager provides a personalized and immediate response to the kinship family’s emergency needs by using the available internal kinship center and external community resources; thereby avoiding the necessity of formal intervention.

CFS View - Children and Family Services View is a communication channel designed by CFS leadership to provide department updates, information regarding upcoming activities and discuss accomplishments and hot topics in a timely and consistent manner. Overtime, CFS View discussions have evolved to include information on the department’s efforts to realize its Mission and the Countywide Vision. Staff appreciates hearing important information directly from management and having the opportunity to ask pertinent questions relating to departmental operation. CFS View occurs the first Monday of every month.

Department of Aging and Adult Services (DAAS)

PC 368.1 Law Enforcement Card and Training Program - The Department of Aging and Adult Services created an enhanced Penal Code 368.1 Law Enforcement Information Card (LEIC) with an associated training program for law enforcement officers. LEIC is an attractive pocket-sized, two-sided, accordion-style card that provides officers with penal codes applicable to elder and dependent adult abuse, enabling them to file proper charges against alleged perpetrators. Social workers provide the informational card and training directly to law enforcement at law enforcement departmental meetings.

Transportation Reimbursement Escort Program - The Transportation Reimbursement Escort Program (TREP) is an effective partnership between DAAS and Valley Transportation Services (VTrans), a non-profit organization that administers TREP to the San Bernardino Mountains, Victor Valley, North Desert, and Morongo Basin areas. The focus of the program is to allow qualified seniors and persons with disabilities to hire their own volunteer drivers to provide necessary escort transportation when they are unable to drive and use other forms of transportation. TREP provides access to necessary medical care and travel to other life-enriching activities.
Department of Behavioral Health (DBH) — JobsInSoCal.com - JobsInSoCal is an online niche job board launched in September 2013 and sponsored by the Southern Counties Regional Partnership as part of its commitment to develop and maintain a diverse and culturally competent behavioral health workforce. The purpose of the job board is to provide a resourceful, user-friendly and informative job board to increase the interest and workforce with Behavioral Health, Drug and Alcohol Recovery and Mental Health Services. Job seekers are able to search for available positions, post current resumes for potential employers to review and can view videos to learn more about jobs such as peer support, social worker, marriage and family therapists and psychologists to help strengthen their job seeking skills.

Loma Linda University Medical Center Psychiatry Resident Rotation Program — Employment and Training - A shortage of psychiatrists in the County was identified during a behavioral health workforce needs assessment. In 2013, in partnership with Loma Linda University Medical Center, the Department of Behavioral Health hosts a fourth-year Psychiatry Resident. While at DBH the resident reports to 3 attending physicians and their programs, including 2 community outpatient clinics and one specialist forensics program. The Medical Director spends the first day with the resident to discuss the importance of community mental health. The success of the program is evident in that DBH has already hired 3 residents which is equivalent to 50% of the residents that have completed the program to date, to work as psychiatrists in DBH clinics.

Magnolia at 9th - Senior Apartments Housing Project - The Magnolia at 9th Senior Apartments Housing Project is a collaborative permanent supportive housing project for individuals with serious mental illness who are homeless or at significant risk of becoming homeless. The Project is an affordable senior housing development containing 119 one- and two-bedroom units. The developer has allowed 10 of the one-bedroom units for occupancy by Mental Health Services Act-eligible older adults. The remainder of the units will be affordable to low and very low income senior tenants 62 years and older.

Prevention and Early Intervention: Family Resource Center (FRC) - The Family Resource Center program consists of multiple “one-stop” centers across the County that address diverse community needs in a culturally and linguistically competent manner. FRC services include: prevention and leadership programs; mental health education workshops; community counseling; adult skills-based education; after school youth projects; and parent/caregiver support and education. These services are delivered to children, youth, adults and older adults in non-critical natural settings that are culturally specific to the needs of the respective community.

Screening Assessment and Referral Center (SARC) - The Department of Behavioral Health SARC serves as a uniform point of assessment, referral and linkage to Substance Use Disorder (SUD) treatment within the County. The SARC filled a gap in the availability of existing services by serving as an access point for referrals and linkages to appropriate and lowest level of care needed for those meeting criteria for SUD treatment services. SARC enhances the level of citizen participation in government programs by providing education on available treatment options, linkages to resources and brief case management to minimize barriers to accessibility. Proven measurable results include improving intergovernmental cooperation by partnering with CFS to address needs of clients serving multi-layered County services.
NACO ACHIEVEMENT AWARDS

Department of Behavioral Health (DBH)

The STAY (Youth Hostel) - The STAY (Serving Transitional Age Youth) is an innovative program designed to address the needs of the County’s diverse Transitional Age Youth (TAY, age 18 to 25) population who are experiencing an acute psychiatric episode or crisis and are in need of a higher level of care than board and care residential, but a lower level of care than psychiatric hospitalization. The STAY is a short-term, 14-bed crisis residential treatment center open 24-hours-a-day, 365 days a year. Program participant’s benefit from residential, case management, connections to housing, education, healthcare, community and mental health services designed to meet their specific needs.

Department of Child Support Services (DCSS)

Kiosks as a Public Service Tool - The Department of Child Support Services has implemented six self-service kiosks in the public reception areas of each of its three offices, as well as its office located at the local child support court. These kiosks offer customers the opportunity to open a case, access information about the status of their case, make a payment toward their child support obligation, or obtain answers to questions they may have about the program. Customers may also access information about community services which assist in addressing other non-child support issues they may be experiencing.

Child Support Regional Legal/Operations Training - In 2012, DCSS in collaboration with Orange and San Diego counties, developed regional child support training for legal and operation staff which has continued quarterly since its inception. The regional training concept offered opportunities to train a large number of staff in San Bernardino and Orange County. By combining efforts, each of the three county agencies was able to gain efficiencies that would not have been realized by any one of the counties alone.

Department of Public Health (DPH)

Improving Food Safety Through the Health Education Liaison Program (HELP) - The Division of Environmental Health Services implemented the proactive Health Education Liaison Program to promote effective strategies to improve inspection scores, raise food safety standards, and strengthen operator’s managerial control measures to meet long-term compliance objectives. Many food service facilities face reoccurring critical violations increasing the risk of foodborne illness outbreaks and resulting in low scores. Low scoring facilities are referred by HELP inspectors. The HELP consultation is performed at no cost to the facility and has assisted participating food facilities in achieving a 10% reduction in critical violations.

West Nile Virus Surveillance Collaboration - The West Nile Virus Surveillance Collaboration is a joint venture between the Division of Environmental Health Services’ Mosquito Vector Control Program and the Aviation Division of the Sheriff’s Department. The program utilizes aerial surveillance to identify and reduce mosquito breeding by targeting unmaintained swimming pools in residential neighborhoods. Addresses of green pools identified during surveillance were given to mosquito vector control to track down the owner responsible for maintaining the pools to reduce mosquito breeding.
NACOG ACHIEVEMENT AWARDS

Transitional Assistance Department (TAD)/Performance, Education & Resource Centers (PERC)

Policy Review Program - The Transitional Assistance Department and Performance, Education & Resource Centers designed the Policy Review Program as a new approach for creating and presenting training using workgroup developed materials and an e-Learning Network. Training for staff administering federal and state programs in a cost-effective and efficient manner is critical to the success of the County meeting its goal to serve the public and maintain performance and quality outcomes.

Transitional Assistance Department (TAD)

Lobby Management - The TAD Lobby Management initiative was implemented to improve customer service and maximize efficiency and productivity in response to increasing lobby traffic. Under Lobby Management, when customers enter the lobby, an eligibility worker (EW) greeter offers them the option to drop off documents, check in for appointments, or request supportive services at the self-service kiosk. An EW greeter may also use a Wireless Barcode Reader to review documents for completeness, scan the barcode designating it as “received,” and provide the customer with a receipt. This expedites the processing of incoming mail, reduces the need for additional customer contact, or return office visits, and prevents discontinuances due to incomplete or unsigned documents.
The Department of Aging and Adult Services (DAAS) provides services to seniors, at-risk individuals, and adults with disabilities to improve or maintain choice, independence, and quality of life so they may age in place in the least restrictive environment.
Ruby Lavalais is a local resident who obtained In-Home Supportive Services (IHSS) when she experienced a back injury that left her in need of assistance. Listen to her experience by clicking on the link below.

Click here to view the YouTube video.
FOR MORE INFORMATION

Department of Aging and Adult Services (DAAS) website: http://hss.sbcounty.gov/daas/

DAAS office locations: Interactive Map

DAAS social media: facebook
The Department of Aging and Adult Services (DAAS) provides a wide variety of social service programs and services for seniors, elders and disabled adults. There are three distinct areas under which services are provided.

**Adult Programs**
Under the direction of the California Department of Social Services (CDSS), DAAS administers two major programs.

The In-Home Supportive Services (IHSS) program provides in-home personal and domestic services which enable people to remain independent in their homes and without which they would be at risk of out-of-home placement.

The Adult Protective Services (APS) program provides emergency response to referrals of possible elder and dependent adult abuse and neglect, and provides investigations, reports to law enforcement, crisis intervention, and links to services for at-risk elders and dependent adults.

**Aging Programs**
Under the direction of the California Department of Aging (CDA), DAAS serves as the federally designated Area Agency on Aging (AAA) for the County of San Bernardino and is responsible for administering programs under the Older Americans Act (OAA). The department works to ensure options are easily accessible to all older individuals and to have a visible resource where seniors can go or call for information.

The programs under the OAA include Senior Information and Assistance (SIA), Senior Nutrition, Senior Employment, and Long-Term Care Ombudsman.

**Public Guardian**
Under the direction of the court, DAAS serves as Public Guardian for the County of San Bernardino and is the conservator of last resort. Conservatorship through the Public Guardian programs ensures that persons who are found to be gravely disabled or lack capacity to manage their personal needs remain safe, receive appropriate medical care, counseling and mental health treatment options, and reside in the least restrictive environment.
Accomplishments for 2013/2014

DAAS ACCOMPLISHED THE FOLLOWING IN 2013/2014:

√ Completed first year of department mentoring program to educate and expose DAAS staff to other programs within the department other than their current assignment. Eleven mentors and 11 mentees participated.

√ Received 2014 National Association of Counties (NACo) Achievement Award for “PC 368.1 Law Enforcement Card and Training Program” and the “Transportation Reimbursement Escort Program (TREP).”

√ Provided a total of 632,434 congregate meals served in senior centers throughout the County and home-delivered meals to homebound seniors.

√ Provided outreach and education presentations to 161,846 seniors.

√ Distributed 2,250 Farmer’s Market coupons to seniors totaling $45,000 worth of fresh fruits and vegetables.

√ Distributed bus passes to 1,686 seniors totaling over 73,012 one-way bus rides.

√ Assisted 2,472 Home Energy Assistance Program (HEAP) applications for $620,000 in utility credits for seniors.

√ Investigated and resolved 1,776 complaints in long-term facilities through the Ombudsman Program.

√ Provided transportation service for 236 seniors from TREP for a total of 148,247 miles to shopping, banking, medical, and social service appointments.

√ Received 15,565 requests for IHSS services through the Central Intake Unit (CIU).

√ Hosted over 275 attendees at the 27th Annual West Valley Adult Protective Services Multi-Disciplinary Team Conference at the Goldie S. Lewis Community Center.

√ Supported 22,660 seniors staying in their homes with the assistance of the IHSS program.

√ Responded to 11,217 APS referrals.

√ Provided senior and dependent adult abuse awareness training to 236 mandated reporters throughout the County, including financial institutions, hospitals, law enforcement and other first responders.
**DAAS ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:**

**Adult Programs**
1. Provide for the health and social needs of County residents.
   A. Provide in-person response within 24 hours to emergency APS referrals, including intake, intervention, and/or reports of life threats or crises.

**Aging Programs**
1. Enhance senior safety and independence.
   A. Connect customers to community resources.

**Public Guardian**
1. Improve County government operations.
   A. Ensure Public Guardian provides timely and accurate financial support to conservatees.

**How Outcomes Are Measured**

**DAAS MEASURES OUTCOMES BY THE FOLLOWING METHODS:**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
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<tr>
<td>Respond to emergency APS referrals within 24 hours of receipt.</td>
<td>• Percentage of emergency APS referrals responded to within 24 hours.</td>
</tr>
<tr>
<td>Connect customers with community resources.</td>
<td>• Number of customers contacted by SIA staff.</td>
</tr>
<tr>
<td>Provide timely and accurate financial support to conservatees.</td>
<td>• Percentage of Public Guardian conservatees’ bills paid within ten days of receipt.</td>
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ADULT PROGRAMS

**In-Home Supportive Services (IHSS)**
The IHSS program provides personal and domestic services for aged, disabled adult and disabled children, which enable them to remain safely in their own homes and prevent or delay placement. The program provides services aimed at health and safety that are performed by a care provider. A wide variety of basic services includes domestic assistance such as house cleaning, meal preparation, laundry, shopping, personal care (feeding and bathing), transportation, protective supervision and certain paramedical services ordered by a physician.

**Adult Protective Services (APS)**
Components of the APS program include investigating reports of potential elder and dependent adult abuse and neglect, developing a service plan, counseling and referral to community resources, and monitoring the progress of the customer. The toll free hotline number is 1-877-565-2020 and is available 24 hours a day, 7 days a week.

AGING PROGRAMS

**Senior Supportive Services**
Includes programs for seniors (age 60 and over) to provide links to services that allow the aging population to remain safely in homes, including adult day care, assisted transportation, legal services, home safety devices, and case management services.

**Senior Nutrition Program**
Provides seniors (age 60 and over) with nutritious meals in congregate settings and home delivered meals for home-bound seniors around the County. Nutrition and education counseling is provided at nutrition sites, along with an opportunity to enjoy companionship and other activities. A suggested donation amount is posted at each site; seniors may donate confidentially and voluntarily. Seniors can call 1-800-510-2020 to learn more about the nutrition program and the site nearest their location.

**Senior Information and Assistance (SIA)**
Provides information and assistance to help senior citizens solve problems and learn about opportunities, services, and community activities. The program provides assistance and advocacy by making contact with various organizations that provide needed services. Follow-up and evaluations are provided to ensure the senior is receiving appropriate services.

Individuals can be connected to the SIA office nearest to their location by calling 1-800-510-2020. SIA offices are open Monday through Friday.
Health Insurance Counseling and Advocacy Program (HICAP)
Provides information and assistance with Medicare, Medicare Advantage Plans, Medicare Prescription Drug Coverage and other related health insurance issues. State-registered counselors offer objective information to help seniors and other Medicare beneficiaries make good health care decisions. HICAP counselors can help resolve problems and offer free community education presentations.

Legal Services for Seniors
Free civil legal counsel and assistance to seniors who are 60 years or older. Services include meeting with senior groups and making presentations on legal topics. Legal services are provided throughout the County by appointment at senior or community centers.

Multipurpose Senior Services Program (MSSP)
The MSSP is an Intensive Care Management system designed to prevent premature institutionalization for the frail elderly population living within the County. A Care Management Team comprised of a Public Health nurse and a social worker assess individual clients for specific needs. The team develops a plan of care and appropriate services are arranged. The team continues to provide ongoing support over the life of each case.

Ombudsman Services
Mandated by federal and state law to identify, investigate, and resolve complaints on behalf of long-term care residents age 60 and older who reside in skilled nursing, transitional care units or residential care facilities for the elderly. The program uses fully-trained, certified volunteers to help with problems regarding quality of care, food, finance, meaningful activities, visitors of choice, residents’ rights and other concerns. Staff visits the facilities regularly to ensure residents know about the program’s services and works with licensing agencies responsible for the facilities. They assist facility administrators and staff in solving problems with families and difficult residents, provide community education to groups, and witness durable power of attorney for health care documents. For information call 909-891-3928 or toll free 1-866-229-0284.

Senior Community Service Employment Program (SCSEP)
Provides part-time employment services for seniors age 55 and older. Seniors in the program receive on-the-job training in various work-related skills, basic computer, résumé preparation, job location strategies, English as a Second Language, and other related topics.

Family Caregiver Support Program (FCSP)
Services include caregiver information, assistance in gaining access to services, counseling, training, support and temporary respite to family and other unpaid caregivers supporting older individuals.
**Probate Conservatee**
Persons under probate conservatorship are incapacitated and may suffer from forms of dementia, stroke, other brain-related injuries and/or debilitating diseases. They are unable to provide for their basic needs: physical health, food, clothing, shelter, or resist fraud or undue influence.

**Lanterman-Petris-Short (LPS) Conservatee**
Persons who are found by the court to be gravely disabled because of a mental disorder or impairment by chronic alcoholism or other substance abuse fall under the LPS conservatorship program. Grave disability is defined as unable to provide food, clothing or shelter as a result of a mental disorder.

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### Statistical Information

#### Statistical Information 2013-2014

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<th>Program</th>
<th>Average Number</th>
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<tr>
<td>APS</td>
<td>646 reports of elder or dependent adult abuse monthly</td>
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<tr>
<td>IHSS</td>
<td>22,660 open cases monthly</td>
</tr>
<tr>
<td>SCSEP</td>
<td>37 eligible seniors</td>
</tr>
<tr>
<td>SIA</td>
<td>1,493 contacts per month</td>
</tr>
<tr>
<td>MSSP</td>
<td>276 cases per month</td>
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### Caseload by Program

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<th>Workload Indicators</th>
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<tr>
<td>APS - Referrals</td>
<td>646</td>
</tr>
<tr>
<td>APS - Open Cases</td>
<td>936</td>
</tr>
<tr>
<td>IHSS - Open Cases</td>
<td>22,660</td>
</tr>
<tr>
<td>MSSP Cases</td>
<td>276</td>
</tr>
<tr>
<td>Public Guardian - Probate Cases</td>
<td>143</td>
</tr>
<tr>
<td>Public Guardian - LPS Cases</td>
<td>399</td>
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Total staffing is approximately 291 employees.

In-Home Supportive Services: 195
Adult Protective Services: 39
Aging Services: 38
Public Guardian Staff: 19

The department budget for FY 13/14 is $74,686,830.

IHSS Provider Payments: $37,782,891
Public Guardian: $2,291,450
Aging Programs: $9,963,822
Adult Protective Services: $4,997,450
In-Home Supportive Services: $19,651,239
The Department of Behavioral Health (DBH) strives to be recognized as a progressive system of seamless, accessible and effective services that promote prevention, intervention, recovery and resiliency for individuals, families and communities.
Faith Ikeda became a Clubhouse participant and active member after she sought help to treat her Bipolar Disorder. Listen to her story of triumph and tribulations by clicking on the link below.

**Click here to view the YouTube video.**
FOR MORE INFORMATION

Department of Behavioral Health (DBH) website: http://www.sbcounty.gov/dbh/index.asp

DBH office locations: Interactive Map

DBH social media: 🌐 Facebook 🐦 Twitter
The Department of Behavioral Health (DBH) and its contract partners are responsible for providing mental health and substance use disorder services to County residents who are experiencing major mental illness and/or substance use disorders. DBH and its contract partners provide treatment, which may include psychiatric medical services, to all age groups. Primary emphasis is placed on treating youth and their families, adults, and older adults who are experiencing serious mental illness or are emotionally disturbed, as well as a full continuum of substance use disorder services that include prevention, treatment and recovery support. Another integral part of the behavioral health service delivery system consists of specialized programs including prevention and early intervention, crisis intervention services, workforce education and training, homeless services, and the Offices of Consumer and Family Affairs and Cultural Competence and Ethnic Services.

The County of San Bernardino has a Behavioral Health Commission that is appointed by the Board of Supervisors (BOS), in accordance with the Welfare and Institutions Code 5604. The Behavioral Health Commission provides the advisory link between the BOS and DBH in providing public input into the delivery of public mental health and substance use disorder services to the communities within the County.

DBH collaborates with agency partners through contracts, agreements and Memorandums of Understanding (MOU) to maximize the provision of available behavioral health services to the approximately 2,000,000 residents living in the County of San Bernardino. DBH currently manages close to 400 contractual agreements for the delivery of mental health and substance use disorder services.
Accomplishments for 2013/2014

DBH ACCOMPLISHED THE FOLLOWING IN 2013/2014:

✓ Received six National Association of Counties (NACo) Achievement Awards:
  • Loma Linda University Medical Center Psychiatry Resident Rotation Program - Employment and Training
  • JobsInSoCal.com - Employment and Training
  • Screening Assessment and Referral Center (SARC) - Human Services
  • Magnolia at 9th Senior Apartments Housing Project - Community Economic Development
  • STAY (Youth Hostel) - Human Services
  • Prevention and Early Intervention (PEI) - Family Resource Center (FRC) - Human Services

✓ Conducted 16 personal visits by DBH director to all program staff to communicate how the department’s day-to-day operations align with the Countywide Vision and support overall wellness.

✓ Incorporated the Access Coordination and Enhancement (ACE) program, providing faster access to services and explaining the total number of behavioral health services provided by hiring nine Clinical Therapist I’s, one Mental Health Nurse, three Licensed Vocational Nurses, three Mental Health Specialists, and seven Office Assistant IIIs.

✓ Twenty-two executive/management/supervisory staff (including two contractors) participated as mentors in the countywide Leadership Development Network program and Management & Leadership Academy, Human Services Leaders in Action program and the DBH Leadership Development program.

✓ Medical Services standardized the clinical rotations for 3rd year medical students from Loma Linda University School of Medicine, Western University of Health Science and Touro.

✓ Completed the Medical Services Physician Orientation Manual currently being piloted to become an orientation program.

✓ In collaboration with Children and Family Services (CFS), developed an effective means for qualifying children for “Katie A” services and ensuring services are available throughout the County. Identified over 700 children as potential sub-class members to date.

✓ Reformatted the DBH administration meeting to provide management staff a forum to further develop their management and leadership skills.
DBH ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Implement the Recovery Based Engagement Services Teams (RBEST) program to address individuals who are either non-compliant or resistant to outreach treatments.

2. Increase department staff’s understanding and role in implementing the Countywide Vision.

3. The System-wide Performance Outcomes Committee (SPOC) will integrate performance outcomes measures for mental health and substance use disorders throughout the system.

4. Develop and implement recruitment strategies for specialized physician positions (Addiction Psychiatry, Forensics-focused, etc.).

ACCOMPLISHMENTS CONTINUED

✓ Implemented the Health Care Reform Collaborative Committee including Inland Empire Health Plan (IEHP), Molina and Kaiser/IEHP Health Plans to address changes in the mental health care system and worked collaboratively to provide clients with the best customer service.

✓ Opened Barstow Counseling Clinic.

✓ Opened a new SARC in Rialto for Alcohol and Drug Services (ADS).

✓ Implemented use of American Society of Addiction Medicine (ASAM) criteria to develop clinical competencies in ADS Substance Use Disorder treatment.

✓ ADS sponsored 15 trainings on co-occurring topics.

✓ Signed a contract for an Electronic Health Record (EHR) and began ePrescriptions pilot.
DBH MESURES OUTCOMES BY THE FOLLOWING METHODS:

DBH performance is evaluated across a series of Key Performance Indicators (KPI) to ensure the accomplishment of department goals. Data is collected from the DBH data warehouse, practice management system, client surveys, and other program specific data sources. The use of KPI helps DBH to regularly render successful treatment and customer satisfaction.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
</table>
| Implement RBEST program to address individuals who are either non-compliant or resistant to outreach treatments. | • Develop and complete business processes, procedures, protocols, and guidelines.  
• Outcome measures will be identified.  
• Staff will be hired to commence outreach, address referrals and implement services. |
| Increase department staff’s understanding of and role in implementing the Countywide Vision. | • Staff will participate in Countywide Vision surveys and will be encouraged to participate in events related to the Vision. |
| The SPOC will integrate performance outcomes measures for mental health and substance use disorders throughout the system. | • Establish framework for coordinated system-wide performance outcomes.  
• Completed matrix of existing outcomes measures cross-walked to identified performance outcomes.  
• Establishment of business process for including performance outcomes into contracts. |
| Develop and implement recruitment strategies for specialized physician positions (Addiction Psychiatry, Forensics-focused, etc.) | • Ensure that all rotations include experience with programs that require specialized physicians.  
• Involve existing specialized physicians to assist in the recruitment and mentoring of future positions. |
Program Information

SPECIALIZED ADULT AND OLDER ADULT SERVICES

The Adult and Older Adult System of Care offers an array of centralized specialty services to the County Department of Mental Health and Community:

⇒ Mental Health Services to Adults and Older Adults (Assessments, Psychotherapy, Meds Support, Crisis Intervention, Case Management)
⇒ Homeless Program Transitional Shelter Beds
⇒ Homeless Program Full Service Partnership Services
⇒ Mobile Mental Health Services to the Older Adult Population
⇒ Subsidized Housing to the Older Adult Population
⇒ Peer Support to the Older Adult Population 60 Years Old and Above
⇒ Conservatorship Investigations
⇒ Long Term Care Placement (Institute of Mental Disease, State Hospitals, Board & Care Facilities)
⇒ Intensive Case Management for Clients Released From Long Term Care Facilities

ALCOHOL AND DRUG SERVICES

Alcohol and Drug Services (ADS) provides a full range of substance abuse prevention, outpatient and residential programs throughout the County. Services include:

⇒ Outpatient Services
⇒ Detoxification
⇒ Residential Treatment
⇒ CalWORKs (Mental Health Program, Alcohol and Other Drug Programs, Family Stabilization Program)
⇒ Recovery Centers
⇒ Perinatal Clinics
⇒ Partnership for Healthy Mothers and Babies
⇒ Environmental Prevention
ALCOHOL AND DRUG SERVICES CONTINUED

⇒ Transitional Housing
⇒ Drug Courts
⇒ Narcotic Treatment Programs

Alcohol and Drug Services Administration also certifies and monitors all providers of Driving Under the Influence (DUI) and Deferred Entry of Judgment (DEJ/PC 1000) programs within the County.

SPECIALIZED CHILDREN’S SERVICES

The Children’s System of Care is a collaboration between DBH, public agencies and community-based organizations that provide a variety of services which include:

⇒ Centralized Children’s Intensive Case Management Services (CCICMS)
⇒ Transitional Age Youth (TAY) Services
⇒ School-Based Services
⇒ Juvenile Justice Services
⇒ Family Services for Early Identification of Mental Health Needs of Children in Foster Care

CRISIS SERVICES

The Community Crisis System of Care collaborates with law enforcement, hospital emergency departments and community partners to provide urgent psychiatric care to consumers in their communities. Services include:

⇒ Psychiatric diversion services, provided at ARMC including a culturally competent screening and diversion of consumers who may not be in need of hospitalization, to a more appropriate level of care in the community.
⇒ Community Crisis Response Teams consisting of multidisciplinary mental health professionals who provide crisis intervention services 24 hours a day, 7 days a week in the field to seriously mentally ill individuals of all ages.
CRISIS SERVICES CONTINUED

⇒ Crisis Walk-In Centers in three geographic regions (Central Valley, High Desert and Morongo Basin) offer an alternative to hospitalization by providing psychiatric services and crisis stabilization to children, adolescents and adults experiencing a psychiatric crisis needing immediate assistance.

MEDICAL SERVICES

Medical Services collaborates with a multidisciplinary team and community providers including primary care to develop culturally/linguistically competent treatment. This includes diagnostic evaluations, acute outpatient stabilization, medication management, crisis intervention and brief focused psychotherapies for the severely and persistently mentally ill. Medical Services also provides education/training/clinical experience to future mental health/medical care providers in various teaching institutions in the County.

OFFICE OF CONSUMER AND FAMILY AFFAIRS

The Office of Consumer and Family Affairs (OCFA) was developed by DBH to better include consumers and family members in the development of services provided. OCFA is currently staffed by a family member and a consumer as Peer and Family Advocates with plans to expand. The primary function of each is to:

⇒ Assist consumers and family members in accessing services

⇒ Reduce stigma by providing resources, education and support to consumers, family members and the community

⇒ Encourage family participation as a team member in the consumer’s treatment plan

⇒ Connect consumers and family members with support agencies
OFFICE OF CULTURAL COMPETENCE AND ETHNIC SERVICES

The Office of Cultural Competence and Ethnic Services provides the administrative oversight for embedding and integrating cultural and linguistic competence across every program within the department. The Office uses the National Culturally and Linguistically Appropriate Services (CLAS) standards and various organization assessment tools to address barriers to services due to culture and language differences across the County.

The Office monitors the adherence of federal, state, and local mandates for cultural and linguistic competence. The Office is also responsible for developing, monitoring, and implementing the state-required Cultural Competency Plan (CCP). The Plan is used by the Department to work towards the development of the most culturally and linguistically competent programs and services to meet the needs of the County’s diverse racial, ethnic, and cultural populations.

CLUBHOUSES

Clubhouses are run by members, individuals 18 and over, who have experienced and lived with mental health issues. They offer support groups, job training, socialization activities and education.

⇒ Barstow - Desert Stars
⇒ Lucerne Valley - A Place To Go Clubhouse
⇒ Morongo Basin - Santa Fe Social Club
⇒ Redlands - Our Place
⇒ Rialto - Central Valley FUN Clubhouse
⇒ Rialto - Pathways to Recovery
⇒ San Bernardino - TEAM House
⇒ Ontario - Amazing Place
⇒ Victorville - Serenity Clubhouse
ADULT FORENSIC SERVICES

Adult Forensic Services is comprised of several programs designed to provide comprehensive mental health services to individuals who are incarcerated or on probation. Programs under the forensic umbrella include the following:

- Jail Mental Health Services (JMHS)
- Supervised Treatment After Release (STAR)
- Choosing Healthy Options to Instill Change and Empowerment (CHOICE)
- Crisis Intervention Training (CIT)
- Forensic Assertive Community Treatment (FACT)

GENERAL MENTAL HEALTH OUTPATIENT CLINICS

Outpatient services are provided in the clinics within the four regions (Central Valley, Desert/Mountain, East Valley, West Valley) of the County of San Bernardino. Services are provided by County-operated clinics or contracted agencies for individuals who have been diagnosed with a severe mental illness that results in substantial impairment in carrying out major life activities.

Services are provided under the Recovery, Wellness and Resilience (RWR) philosophy of care to assist consumers in achieving self-sufficiency and to have lives that are more satisfying, hopeful, contributing, and fulfilling.

Services include:

- Clinical Assessment and Evaluation
- Individual and Group Therapy
- Rehabilitation
- Medication Support Services
- Crisis Intervention
- Case Management
FULL SERVICE PARTNERSHIP PROGRAMS

Adult Full Service Partnership (FSP) programs are a team approach designed for adults ages 18-59 that have been diagnosed with a severe mental illness and would benefit from an intensive service program. FSPs embrace client driven services and supports with each client choosing services based on individual needs. DBH has placed FSP teams in both County and contract locations. FSPs are also available for specialized populations of children and older adults.

FSP programs:

⇒ Provide 24/7 access to the FSP team
⇒ Assist with housing, employment and education
⇒ Link and provide mental health services
⇒ Provide linkage and care coordination to treatment for individuals who have a co-occurring mental health and substance abuse disorder
⇒ Services can be provided to individuals in their homes, the community and other locations
⇒ Intensive case management and inclusion of family and community partners in the recovery process

ACCESS UNIT

The Access Unit is a call center comprised of mental health professionals that provide widespread linkages ranging from referrals to DBH clinics and/or fee-for service providers to authorizations for outpatient services. The Access Unit is available 24 hours a day, 7 days a week and can be reached by calling (888) 743-1478 or 711 for TTY users.
An extended range of program-specific services is provided to enhance the department’s ability to promote wellness, recovery, and resilience.

<table>
<thead>
<tr>
<th>MHSA Programs (Mental Health Services Act) FY 2013-2014</th>
<th>Number of people served through Full Service Partnerships</th>
<th>Number of people served through System Development</th>
<th>Number of people served through Outreach and Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive Child/Family Support System (CCFSS)</td>
<td>1,141</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Integrated New Family Opportunities</td>
<td>46</td>
<td>605</td>
<td></td>
</tr>
<tr>
<td>One Stop: Transitional Age Youth (TAY)</td>
<td>350</td>
<td>445</td>
<td>1,324</td>
</tr>
<tr>
<td>Clubhouse</td>
<td>1,603</td>
<td></td>
<td>5,897</td>
</tr>
<tr>
<td>Forensics</td>
<td>189</td>
<td>186</td>
<td></td>
</tr>
<tr>
<td>Assertive Community Treatment (ACT) and Members Assertive Program Solution (MAPS)</td>
<td>165</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crisis Walk-In Clinics</td>
<td></td>
<td></td>
<td>8,211</td>
</tr>
<tr>
<td>Triage</td>
<td></td>
<td></td>
<td>4,024</td>
</tr>
<tr>
<td>Community Crisis Response Team</td>
<td></td>
<td></td>
<td>4,555</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>12,391</td>
</tr>
<tr>
<td>Homeless</td>
<td>1,252</td>
<td>761</td>
<td>286</td>
</tr>
<tr>
<td>Alliance for Behavioral and Emotional Treatment (ABET)</td>
<td></td>
<td></td>
<td>207</td>
</tr>
<tr>
<td>Agewise: Circle of Care System Development</td>
<td></td>
<td></td>
<td>128</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1,334</td>
</tr>
<tr>
<td>Agewise: Circle of Care Mobile Outreach</td>
<td>13</td>
<td>23</td>
<td>23</td>
</tr>
<tr>
<td>Total Persons Served</td>
<td>3,363</td>
<td>20,541</td>
<td>21,255</td>
</tr>
</tbody>
</table>
Prevention and Early Intervention programs provide strategies, activities, and services designed to deter the onset of, or provide intervention early in the manifestation of, a behavioral health condition.

### Fiscal Year 2013/2014 Estimates

<table>
<thead>
<tr>
<th>Prevention/Early Intervention (PEI) Program</th>
<th>Children and Youth</th>
<th>TAY (Transitional Age Youth)</th>
<th>Adult</th>
<th>Older Adult</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child and Youth Connection</td>
<td>45,524</td>
<td>1,400</td>
<td>13,371</td>
<td>277</td>
<td>60,572</td>
</tr>
<tr>
<td>Community Wholeness and Enrichment</td>
<td>26</td>
<td>2,942</td>
<td>11,586</td>
<td>519</td>
<td>15,073</td>
</tr>
<tr>
<td>Family Resource Center</td>
<td>83,773</td>
<td>11,820</td>
<td>27,081</td>
<td>3,733</td>
<td>126,407</td>
</tr>
<tr>
<td>Lift</td>
<td>149</td>
<td>316</td>
<td>12</td>
<td>0</td>
<td>477</td>
</tr>
<tr>
<td>Military Services and Family Support Project</td>
<td>1,978</td>
<td>1,354</td>
<td>5,398</td>
<td>507</td>
<td>9,237</td>
</tr>
<tr>
<td>Native American Resource Center</td>
<td>1,577</td>
<td>7,046</td>
<td>1,843</td>
<td>519</td>
<td>10,985</td>
</tr>
<tr>
<td>National Curriculum and Training Institute Crossroads Education</td>
<td>4,880</td>
<td>5,028</td>
<td>3,149</td>
<td>616</td>
<td>13,673</td>
</tr>
<tr>
<td>Older Adult Community Services Program</td>
<td>12,717</td>
<td>12,754</td>
<td>0</td>
<td>0</td>
<td>25,471</td>
</tr>
<tr>
<td>Preschool PEI Project</td>
<td>1,441</td>
<td>0</td>
<td>536</td>
<td>0</td>
<td>1,977</td>
</tr>
<tr>
<td>Promotores de Salud</td>
<td>782</td>
<td>3,233</td>
<td>27,708</td>
<td>13,025</td>
<td>44,748</td>
</tr>
<tr>
<td>Resilience Promotion in African American Children</td>
<td>7,969</td>
<td>0</td>
<td>67</td>
<td>0</td>
<td>8,036</td>
</tr>
<tr>
<td>Student Assistance Program</td>
<td>48,472</td>
<td>4,759</td>
<td>10,186</td>
<td>178</td>
<td>63,595</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>209,288</strong></td>
<td><strong>50,652</strong></td>
<td><strong>100,937</strong></td>
<td><strong>19,374</strong></td>
<td><strong>380,251</strong></td>
</tr>
</tbody>
</table>
DBH serves the public by providing both mental health services and substance abuse services. Services include inpatient hospitalization, residential and outpatient services delivered through department clinics, contract agencies and the Managed Care Network.

### Summary Information by Program for FY 2013/2014

<table>
<thead>
<tr>
<th>Age Groups Receiving Behavioral Health Services</th>
<th>Mental Health Program</th>
<th>Alcohol and Drug Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Number of Services</td>
<td>709,482</td>
<td>425,487</td>
</tr>
<tr>
<td>Age Groups Receiving Behavioral Health Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-15 years</td>
<td>13,589</td>
<td>77</td>
</tr>
<tr>
<td>16-25 years</td>
<td>9,045</td>
<td>1,401</td>
</tr>
<tr>
<td>26-59 years</td>
<td>20,269</td>
<td>5,013</td>
</tr>
<tr>
<td>60+ years</td>
<td>2,339</td>
<td>270</td>
</tr>
<tr>
<td>Total</td>
<td>45,242</td>
<td>6,761</td>
</tr>
</tbody>
</table>

Source: DBH and ADS SIMON database as of 7/30/2014.
The DBH Alcohol and Drug Services Community Based Recovery Centers provide ongoing support services to the community at large throughout the County.

### Alcohol and Drug Services Average Adult Clients Served in Recovery Centers 2013/2014

<table>
<thead>
<tr>
<th>Type of Recovery Center Service Provided</th>
<th>Average Number of Clients Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aftercare Groups</td>
<td>3,720</td>
</tr>
<tr>
<td>Drug Education Training</td>
<td>98</td>
</tr>
<tr>
<td>Family Support Groups</td>
<td>529</td>
</tr>
<tr>
<td>Life Skills Training</td>
<td>694</td>
</tr>
<tr>
<td>Parenting Education</td>
<td>811</td>
</tr>
<tr>
<td>Smoking Cessation Classes</td>
<td>221</td>
</tr>
<tr>
<td>Social Activities</td>
<td>19,100</td>
</tr>
</tbody>
</table>

### Estimate of Other Services Offered by Alcohol and Drug Services Recovery Centers 2013/14

<table>
<thead>
<tr>
<th>Type of Recovery Center Service Provided</th>
<th>Estimated Number of Clients Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger Management Classes</td>
<td>1,383</td>
</tr>
<tr>
<td>Nurturing Fathers</td>
<td>176</td>
</tr>
</tbody>
</table>

### Estimated Number of Clients Accessing 12-Step Meetings in Alcohol and Drug Services Recovery Centers 2013/2014

74,000
DBH Alcohol and Drug Services Environmental Prevention (EP) provides ongoing support and technical assistance to communities served throughout the County.

**STATISTICAL INFORMATION CONTINUED**

<table>
<thead>
<tr>
<th>Type of EP Service Provided</th>
<th>Number of Activities/Disseminated Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surveys Collected</td>
<td>10,465</td>
</tr>
<tr>
<td>Health Fairs/Conferences Attended to Disseminate or Receive EP Information</td>
<td>143</td>
</tr>
<tr>
<td>Brochures/Pamphlet Dissemination</td>
<td>287</td>
</tr>
<tr>
<td>Active Coalitions Throughout the County</td>
<td>15</td>
</tr>
<tr>
<td>Speaking Engagements Conducted to Deliver EP Information to Attendees</td>
<td>254</td>
</tr>
<tr>
<td>Printed Materials Disseminated (newsletters, flyers, fact sheets, etc.)</td>
<td>505</td>
</tr>
<tr>
<td>Training Services Attended or Provided on EP Strategies and Issues</td>
<td>80</td>
</tr>
<tr>
<td>Friday Night Live/Club Live Programs Countywide</td>
<td>17</td>
</tr>
<tr>
<td>Incidences of Technical Assistance Provided</td>
<td>184</td>
</tr>
<tr>
<td>Attempts at Using Media Advocacy and Strategies to Carry the EP Message</td>
<td>286</td>
</tr>
</tbody>
</table>
Staffing Information 2013/2014

Total staffing is approximately 953 employees.

<table>
<thead>
<tr>
<th>Department of Behavioral Health</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>111</td>
</tr>
<tr>
<td>Medical Services</td>
<td>46</td>
</tr>
<tr>
<td>Children &amp; Youth Services</td>
<td>150</td>
</tr>
<tr>
<td>Emergency Adult &amp; Older Adult Svcs.</td>
<td>165</td>
</tr>
<tr>
<td>Alcohol and Drug Services</td>
<td>77</td>
</tr>
<tr>
<td>Mental Health Services Act (MHSA)</td>
<td>404</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The department budget for FY 13/14 is $316,391,361.

<table>
<thead>
<tr>
<th>Department of Behavioral Health</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>$26,930,849</td>
</tr>
<tr>
<td>Medical Services</td>
<td>$10,129,111</td>
</tr>
<tr>
<td>Children &amp; Youth Services</td>
<td>$34,819,056</td>
</tr>
<tr>
<td>Emergency Adult &amp; Older Adult Svcs.</td>
<td>$70,048,368</td>
</tr>
<tr>
<td>Alcohol and Drug Services</td>
<td>$26,057,217</td>
</tr>
<tr>
<td>Mental Health Services Act (MHSA)</td>
<td>$148,406,760</td>
</tr>
</tbody>
</table>
The Department of Child Support Services (DCSS) determines paternity, establishes and enforces child support orders, and secures payments to assist families in meeting the financial and medical needs of their children. We provide timely and effective service in a professional manner.
Moises struggled to keep his home and maintain his child support payments when he became unemployed. It wasn’t until he met with a Child Support Officer at the Department of Child Support Services that he could see the light at the end of the tunnel. The Officer worked with Moises on securing payments that would meet and apply to his current life situation so that he and his child would not suffer financial loss. Hear more about Moises’ story by clicking on the link below.

View the YouTube video.
FOR MORE INFORMATION

Department of Child Support Services website: http://hss.sbccounty.gov/dcss/

DCSS office locations: Interactive Map

DCSS social media: Facebook

Child Support Services
Overview

Description

Basic program activities of the Department of Child Support Services (DCSS) include locating absent parents, establishing orders for monetary support and medical support pursuant to state guidelines, and enforcing and modifying those obligations when needed. Families receiving public assistance are required to participate in the Child Support Enforcement program and are paid the first $50 of current support collected each month. The remainder is reimbursed to the County, the state and the federal government for the public assistance paid to clients. Custodial parents (CPs) who are not receiving public assistance may also receive program services and payments received are distributed directly to the custodial parent through the state disbursement unit.

Accomplishments for 2013/2014

DCSS ACCOMPLISHED THE FOLLOWING IN 2013/2014:

- Collected over $170 million in child support payments.
- Ranked second in the state in program cost effectiveness, distributing $4.35 for each dollar in government funding provided to the department.
- Received the California Department of Child Support Services’ Distributed Collections Performance Award in the Very Large Caseload category.
- Received the National Association of Counties (NACo) Achievement Award for the “Child Support Regional Legal/Operations Training Program,” which provides enhanced training opportunities for child support professionals.
- Received the NACo Achievement Award for “Kiosks as a Public Service Tool” for the kiosks located in the department’s public reception areas, allowing customers to access case information and information about available community services.
- Generated $1.82 million in reimbursement of public assistance funding to the County.
- Achieved a rate of 100 percent on the annual compliance review, which measures compliance with federal case processing requirements.
ACCOMPLISHMENTS CONTINUED

✓ Managed a caseload of over 116,000 cases providing comprehensive child support services including:
  • Established 10,037 court orders
  • Provided service to 194,072 customers in the call center
  • Conducted 50,321 interviews in the department’s public reception areas

✓ Continued efforts to ensure the availability of services to all County residents by assisting 190 customers with their child support–related issues at TAD offices throughout the County.

✓ Conducted 19 outreach sessions at hospitals and birthing facilities, providing instruction on the preparation and submission of paternity declarations, resulting in submission and accuracy rates which are higher than the statewide averages.

✓ Increased the visibility and use of the Child Support Services Facebook© page by having 801 “Likes;” the highest number of Facebook© “Likes” of any county child support program in the state.

✓ Developed and implemented a Program Information Kit for new case applicants providing information and resources regarding the child support program order establishment process.

✓ Redesigned and standardized the legal pleading/motion process to reduce the time needed for completing the court process and enabling customers to reach resolution to their child support matters in a more timely manner.

✓ Completed renovation of the Victorville branch office, providing enhanced opportunities in the public reception area for customer education and engagement.

Goals for 2014/2015

DCSS ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Improve performance in the federal performance measures.
   A. Paternity establishment percentage goal is 100%.
   B. Support order establishment goal is 90%.
   C. Current support collections goal is 66%.
   D. Cases with arrears collections goal is 69%.
   E. Cost effectiveness goal is $4.35.
### How Outcomes Are Measured

DCSS MEASURES OUTCOMES BY THE FOLLOWING METHODS:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
</table>
| Improve performance by implementing new processes and modifying existing processes. | - Increase the percent of cases with support orders established to 90%.  
|                                                                          | - Increase the payment rate on cases with current support owed to 66%.  |
| Make effective use of the automated system to ensure compliance time frames are met. | - Meet 100% of key case processing time frames for compliance.            
|                                                                          | - Meet the 95% data reliability standard for quarterly reviews.           |
| Direct resources to the most productive and efficient activities.        | - Maintain a cost effectiveness ratio of $4.35.                          |

2. Continue to evaluate changes to the statewide automated child support system and restructure business processes as appropriate to ensure optimum customer service and performance.

3. Monitor customer feedback to determine the quality of the service they receive and, where appropriate, take follow-up action to address customer issues.

4. Continue to implement early intervention strategies to educate and promote customer participation in the management of their cases, increased collections and improved customer service.

5. Use current technology to facilitate timely communication with customers and promote improved customer service.
Establishment of Paternity - Paternity may be established through voluntary acknowledgment by the biological parents or through determination by the court. Genetic testing is done in any case in which paternity is disputed. Establishment of paternity ensures that the child receives the same legal rights that would be provided to a child born to married parents.

Locate - Action to locate the non-custodial parent (NCP) must commence within 75 days of receipt of the case if the NCP’s whereabouts are unknown, or his/her assets need to be located. Automated interface of data from state and federal sources occurs continuously and workers have access to a variety of information sources in order to establish and enforce child support orders.

Establishment of a Support Order - The establishment of a court order setting a payment amount for child support is necessary before collection actions can commence. It is not always necessary for parties to go to court to establish an order. Orders can be established by mutual consent of the parties, subject to approval by the court. State guidelines are used to determine the amount of child support, taking into consideration the parents’ incomes and the amount of time the child resides with each parent.

Enforcement and Collection - Most child support is collected through orders to withhold the NCP’s wages. Other collection methods include: interception of federal and state tax refunds, attachment of unemployment compensation, disability payments and lottery winnings, liens on real and personal property, suspension of driver’s licenses and other professional licenses, denial of passports, contempt-of-court actions, and criminal prosecution. A $25 annual fee is charged on cases for which at least $500 is collected within a one year period when the CP has never received public assistance.

Review and Adjustment - Orders may be reviewed and modified to ensure that the ordered amount of child support reflects the NCP’s ability to pay. Reviews are conducted when information is received indicating that there is a significant change of circumstances, or at least once every three years for cases in which the CP is receiving public assistance.

Administrative Processes - Administrative processes are used as an alternative to the need for a court hearing when establishing or modifying a court order. Prior to establishment or modification of a child support order, NCPs are given the opportunity to meet with a caseworker to agree to a stipulation which eliminates the need for them to appear in court.
Early Intervention - A comprehensive early intervention program is conducted to engage NCPs in their child support case and promote successful case outcomes. NCPs are contacted at the time their case is opened to provide information regarding the program and answer questions they may have. Customers are also provided with an opportunity prior to the court hearing to meet with a caseworker to discuss the status of their case. Those customers who do not stipulate or appear at their court hearing are contacted after their order is established to ensure they have full information regarding their new obligation. Customers whose accounts become delinquent are immediately contacted to address the delinquency.

Customer Service Activities - A number of services are available to assist customers with the management of their cases. Customers who live in outlying areas may visit nearby Transitional Assistance Department offices and meet with caseworkers via webcam to obtain assistance with their cases. Kiosks are available in all three lobby locations to provide self-service access to case information and community resources. The department also participates in outreach events at locations throughout the County to provide program information and assist customers with their cases.

Customer Communication - Information about department services is available through a variety of sources, including the department’s website and Facebook© page. The website includes a variety of online tools which customers can use to answer questions about their case or obtain program information. To further facilitate customer communication, the department provides Payment Answer Kits to NCPs which describe the various mechanisms available for making child support payments and Program Information Kits to CPs describing the order establishment process.
Statistical Information

Paternity Establishment
Children in caseload born out of wedlock as of June 30, 2014 94,505
Children with paternity established or acknowledged as of June 30, 2014 94,347

Support Order Establishment
Support orders established July 2013 - June 2014 10,037
Cases in caseload with a support order established as of June 30, 2014 101,713

Current Support Collections
Total current support owed $174,661,499
Total current support collected $111,623,779

Arrears Collections
Cases with arrears due in fiscal year 2013/14 as of June 30, 2014 66,087
Cases paying toward arrears as of June 30, 2014 41,149

Total Collected (both current and arrears)
July 2013 - June 2014 $170,328,568

Caseload by Program

Open cases as of June 30, 2014 116,196
Aided cases 38,251
Formerly-aided cases 56,850
Non-aided cases 21,095
Children in caseload 132,141
Staffing Information 2013/2014

Total staffing is approximately 434 employees.

<table>
<thead>
<tr>
<th>Department of Child Support Services</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Services</td>
<td>61</td>
</tr>
<tr>
<td>Operations - Establishment</td>
<td>74</td>
</tr>
<tr>
<td>Operations - Enforcement</td>
<td>162</td>
</tr>
<tr>
<td>Operations &amp; Program Support</td>
<td>112</td>
</tr>
<tr>
<td>Assistant Director &amp; Technical Support</td>
<td>14</td>
</tr>
<tr>
<td>Director &amp; Ombudsman</td>
<td>11</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The department budget for FY 13/14 is $40,699,593.

<table>
<thead>
<tr>
<th>Department of Child Support Services</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Expenditures</td>
<td>$190,662</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>$7,569,865</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$32,838,846</td>
</tr>
</tbody>
</table>
The mission of Children and Family Services (CFS) is to protect endangered children, preserve and strengthen their families, and develop alternative family settings. Services, as mandated by law and regulation, will be provided in the least intrusive manner with a family-centered focus. This mission is accomplished in collaboration with the family, a wide variety of public and private agencies and members of the community.
Michael Levario abused drugs and neglected his wife and child. It wasn’t until he met with Children and Family Services that he realized he needed to get clean and sober for his family. With hesitation and frustration, Michael took the necessary steps to recovery. He is now a successful family man who helps others reach their goals as a Parent Partner with the department. Click on the link below to learn how Michael Levario went from a life of substance abuse to a productive husband, family man and parent partner who now helps other people succeed.

Click here to view the YouTube video.
FOR MORE INFORMATION

Children and Family Services (CFS) website: http://hs.sbcounty.gov/cfs/Pages/Welcome.aspx

CFS office locations: Interactive Map

CFS social media: Facebook
California law defines child abuse as any of the following:
- A child is physically injured by other means than accidental.
- A child is subjected to willful cruelty or unjustifiable punishment.
- A child is abused or exploited sexually.
- A child is neglected by a parent or caretaker who fails to provide adequate food, clothing, shelter, medical care or supervision.

Children and Family Services (CFS) provides intervention and support services to families and children when allegations of child abuse and/or neglect are substantiated within the County of San Bernardino. The goal of CFS is to keep the child in his or her own home when it is safe, and if it is determined that the child is at risk, to develop an alternate plan as quickly as possible. CFS interventions and services include the following:

**Emergency Response (ER)** - ER services are in-person investigations of cases in which children are in danger due to abuse, neglect, or exploitation. Services are available 24 hours a day, seven days a week. When an abuse referral is received by CFS, the ER staff obtain facts to determine the risk factors and whether the referral is related to abuse, neglect or exploitation. The emphasis of ER services is on crisis intervention and avoiding a Juvenile Court action if possible. ER staff may provide the following services:
- Assess or identify risks and danger by gathering facts and clarifying the problems
- Accept/open a case
- Intervene in the crisis, if immediate assistance is required

**Family Maintenance (FM)** - The goal of FM is to allow children to remain safely in their own homes by providing services and supervision to the family. FM services are time limited service to children and families in their own home. FM services are intended to prevent or correct neglect and abuse issues and help create a safe environment for children to remain in the home.

**Family Reunification (FR)** - In cases where it is determined that a child or children cannot safely remain in their own home the court may order them to be removed. The goal of FR is to provide services, supports and resources to families and teach new skills and behaviors that lead to providing a safe and healthy environment for children. Successful completion of FR goals are required for parents, guardians, or caregivers to reunite with a child.

**Permanency Planning (PP)** - PP is defined as a comprehensive case planning process directed toward the goal of having a permanent stable home for a child. In cases where the court determines that the child’s safety would best be provided by permanent removal from the parent or guardian, PP services are implemented. PP plans are generated during the FR process as an alternate plan in
the event FR is unsuccessful, Permanency Plans may include:

- Reunification with non-custodial parent(s)
- Adoption
- Guardianship
- Kin-gap (placement with family members)
- Planned Permanent Living Arrangement (PPLA)

Accomplishments for 2013/2014:

CFS ACCOMPLISHED THE FOLLOWING IN 2013/2014:

- Received 56,336 child abuse referrals made through the Child and Adult Abuse Hotline (CAAHL).
- Finalized 408 adoptions, 138 placements with family members (KinGAP) and 1,078 family reunifications.
- Arranged for 984 children to attend summer camp.
- Hosted 301 foster and kinship youth at the 7th Annual CFS Sports Faire.
- Provided Transitional Housing Program (THP+) services to 52 youth.
- Provided Wraparound services to 669 children, reducing the number of group home placements.
- Completed 1,093 Team Decision Making (TDM) meetings.
- Completed 1,140 Transitional Conferences (TC) with youth preparing to exit foster care.
- Provided services to 1,388 children and youth at the Children’s Assessment Center.
- Provided services via educational liaisons to 2,073 school age foster children (6-18).
- Achieved a 70% high school graduation rate (average Inland Empire graduation rate is 63%).
- Hosted 69 graduating youth and 48 of their guests at the 2014 Senior Celebration to honor graduating high school seniors.
- Provided Independent Living Program (ILP) services to 1,045 youth.
- Completed 128 Risk Assessment Meetings (RAM).
- Started operating Visitation and Support Centers (VSC) last June 2013.
- Hosted 4,233 supervised visits at VSC for 743 unique children from June to December 2013.
Goals for 2014/2015

CFS established the following goals for 2014/2015:

CFS annual goals are established in conjunction with the most current System Improvement Plan report, as well as an analysis of multiple internal and external data sources, staff and stakeholder feedback.

1. Improve timely reunification.
2. Increase permanent placements for children in care more than two years.

How Outcomes Are Measured

CFS measures outcomes by the following methods:

Children and Family Services measures outcomes through the use of specific data primarily collected through the Child Welfare Services Case Management System (CWS/CMS), the California Child Welfare Indicators Project-UC Berkley. Analysis of data is also completed using SafeMeasures and Business Objects analytics programs. Data which is not available or collected through the CWS/CMS system are gathered by individual programs which is then aggregated and analyzed in-house.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase and enhance the role of Parent Partners who work as para-professionals for CFS to help parents navigate the CWS.</td>
<td>• Increase percentage of families involved with a Parent Partner.</td>
</tr>
<tr>
<td>Increase the number of TDM meetings which enhance decisions to ensure children’s safety.</td>
<td>• Increase the number of children for which a TDM is held.</td>
</tr>
<tr>
<td>Utilize foster family home recruitment and retention to increase availability of licensed foster and adoptive homes that meet the needs of our children in foster care both for short term and permanent placements.</td>
<td>• Increase the number of newly licensed county foster homes.</td>
</tr>
</tbody>
</table>
**Family to Family (F2F)** - F2F is a nationwide effort to improve child welfare systems by increasing family and community involvement. F2F strives to create a neighborhood-focused, family-centered and strength-based system to protect children from danger, meet their basic physical and emotional needs, and attach them to caring, safe families. The key F2F strategy is to maintain children in their own community in order to preserve positive relationships, build community partnerships and resources for families, and facilitate team decision making involving families and stakeholders.

**Team Decision Making (TDM)** - TDM is a strength-based approach to working with families which may have multiple and/or complex needs. TDM brings teams of people together and works to build an individualized plan. The model is specifically focused on bringing important adults in the child’s life together to make decisions regarding placement, reunification, removal, or change in placement. Parents, children, extended family members, non-relatives, current caregivers, case workers, community partners (such as CASA worker), service providers, and a facilitator generally participate in the meetings.

**Healthy Homes (HH)** - HH is a collaborative effort between CFS and DBH. The goal of HH is to increase early identification of treatment needs of children in order to stabilize out-of-home placements and increase the potential for children to be reunited with their families.

**Wraparound** - Wraparound is an intensive strength-based, family-centered, needs driven program designed for children with mental health diagnoses who are either residing in, or at risk of being placed at a group home. The goal is to develop an effective support and resource network, increase a sense of competence, and acquire new skills for managing the needs of the children/youth. Plans are developed with an emphasis on each individual child and his or her family’s strengths. Wraparound addresses both active crises and future safety planning.

**Independent Living Program (ILP)** - ILP is designed to prepare youth between 16 and 21 years of age to transition to adulthood and live independently. Compared to other youth, foster youth are at higher risk for homelessness, incarceration, and unemployment as adults. They are also more likely to experience physical, developmental, behavioral, and mental health challenges. ILP assists foster youth by promoting stable, permanent connections to caring adults; assisting youth with the management of physical and mental health needs; supporting economic success through education and employment programs; providing life skills training to help youth navigate the adult world; improving access to stable and safe housing; and structuring opportunities for youth to provide input on state policies and programs.
**PROGRAMS CONTINUED**

**Family Advocacy Resource Services (FARS)** - Parent Partners and Domestic Violence Counselors are housed in each CFS office to support both staff and clients. Parent Partners are former clients who have successfully reunified with their children and are available to assist current parents in navigating the child welfare system. Domestic Violence Counselors are available to assist social workers in identifying and accessing resources for families in which domestic violence may be an issue.

**Family Visitation and Support Centers** - Visitation and Support Centers were created to facilitate supervised parent/child visitations for families working toward reunification. Visitation Center staff members are experienced in child visitation supervision and the Centers provide a safe neutral space for children and families. Centers are located throughout the County and maintain flexible hours to accommodate the needs of families who are participating in reunification services as part of their case plan.

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**Statistical Information**

CFS receives allegations of child abuse and neglect through referrals from the public and mandated reporters to the Child and Adult Abuse Hotline (CAAHL).

<table>
<thead>
<tr>
<th>Referrals</th>
<th>JAN - DEC 2010 (12 months)</th>
<th>JAN - DEC 2011 (12 months)</th>
<th>JAN - DEC 2012 (12 months)</th>
<th>JAN - DEC 2013 (12 months)</th>
<th>JAN - JUNE 2014 (6 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals</td>
<td>27,767</td>
<td>24,428</td>
<td>27,301</td>
<td>29,101</td>
<td>15,544</td>
</tr>
<tr>
<td>Number of Children</td>
<td>52,933</td>
<td>47,732</td>
<td>52,122</td>
<td>53,054</td>
<td>28,951</td>
</tr>
<tr>
<td>Average Monthly Number Referrals</td>
<td>2,314</td>
<td>2,030</td>
<td>2,275</td>
<td>2,425</td>
<td>2,591</td>
</tr>
</tbody>
</table>
In fiscal year 2013/14, 2,196 children left placement. This excludes 95 Probate/Guardian youth. The following information pertains to the reasons for exiting foster care during this fiscal year.

<table>
<thead>
<tr>
<th>Foster YouthExiting From Placement</th>
<th>Number Exiting Foster Care FY 13/14</th>
<th>Percent Exit Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td>1,319</td>
<td>60.1%</td>
</tr>
<tr>
<td>Adoption</td>
<td>385</td>
<td>17.5%</td>
</tr>
<tr>
<td>Guardianship</td>
<td>229</td>
<td>10.4%</td>
</tr>
<tr>
<td>Emancipation</td>
<td>164</td>
<td>7.5%</td>
</tr>
<tr>
<td>Non-CWS Agency has Jurisdiction</td>
<td>52</td>
<td>2.4%</td>
</tr>
<tr>
<td>Child Adjudicated 601/602</td>
<td>16</td>
<td>0.7%</td>
</tr>
<tr>
<td>Incarcerated</td>
<td>3</td>
<td>0.1%</td>
</tr>
<tr>
<td>Other</td>
<td>28</td>
<td>1.2%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,196</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

As of June 30, 2014, 4,223 children were in out-of-home care. Of these children, 24% were placed either outside of the County (950) or out of state (78). This excludes 658 Probate/Guardian youth.

<table>
<thead>
<tr>
<th>Age</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 2</td>
<td>954</td>
<td>22.6%</td>
</tr>
<tr>
<td>3 to 5</td>
<td>746</td>
<td>17.7%</td>
</tr>
<tr>
<td>6 to 9</td>
<td>788</td>
<td>18.7%</td>
</tr>
<tr>
<td>10 to 12</td>
<td>438</td>
<td>10.4%</td>
</tr>
<tr>
<td>13 to 15</td>
<td>525</td>
<td>12.4%</td>
</tr>
<tr>
<td>16 to 18</td>
<td>582</td>
<td>13.8%</td>
</tr>
<tr>
<td>19 and older</td>
<td>190</td>
<td>4.5%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,223</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
Total staffing is approximately 874 employees.

The department budget for FY 13/14 is $101,317,277.
The overall goal of the Children’s Network (CN) is to help at-risk children by improving communication, planning, coordination and cooperation between child serving agencies, both public and private, to better serve children and youth.
Jennette Martinez, 
Peer and Family Advocate

Jennette Martinez is a Peer and Family Advocate with Valley Star Community Services. Click the link below to find out how she helps save sexually exploited children through the Coalition Against Sexual Exploitation and the Children's Network.

Click here to view the YouTube video.
FOR MORE INFORMATION

Children’s Network (CN) website:  http://hs.sbcounty.gov/CN/Pages/default.aspx

CN office locations:  Interactive Map

CN social media:  Facebook
Overview

DESCRIPTION

In 1985, the San Bernardino County Grand Jury recommended that an interagency council be established to study and coordinate children’s services for the County. In 1988 the Board of Supervisors formally approved a resolution establishing the Children’s Network (CN) and specifying the powers and duties of their governing board, which is the Children’s Policy Council.

The Children’s Network of San Bernardino County concerns itself with at-risk children who are defined as minors who, because of behavior, abuse, neglect, medical needs, education assessment, and/or detrimental living situations, are eligible for services from one or more of the member agencies of the Children’s Policy Council. A variety of public and private agencies deliver a broad and occasionally confusing array of direct services to these children.

Accomplishments for 2013/2014

CN ACCOMPLISHED THE FOLLOWING IN 2013/2014:

√ Continued the Safe Sleep for Infants media campaign which included magnetized messages attached to ambulances, video and theater advertising, billboards and bus ads.

√ Continued the Child Abuse Reporting campaign in partnership with First 5 San Bernardino, Children and Family Services (CFS), and Inland Empire United Way/211.

√ Forwarded recommendation to the Board of Supervisors to declare April as Child Abuse Prevention Month in San Bernardino County.

√ Hosted the 16th Annual Shine-A-Light on Child Abuse Awards Breakfast at the National Orange Show on March 27 to kick off Child Abuse Prevention Awareness month.

√ Continued support of countywide efforts to improve the conditions of homeless youth in San Bernardino County through collaboration with the Homeless Youth Task Force.

√ Collaborated with Loma Linda Children’s Hospital on the annual Keep Me Safe Conference and the Too Hot for Tot campaign.

√ Continued Safe Surrender campaign efforts with San Bernardino County Fire Department.

√ Published the Children’s Network 2012/2013 Annual Report.
ACCOMPLISHMENTS CONTINUED

✓ Published the San Bernardino County Child Death Review Team Annual Report with 2012 data obtained from the County Coroner’s Case Management System.

✓ Hosted countywide training featuring Dr. Kyle Pruett, a professor of child psychiatry at Yale University, with funds from First 5 San Bernardino SART/EIIS Grant.

✓ Continued public awareness efforts of the Coalition Against Sexual Exploitation (CASE) by hosting a series of human trafficking awareness events including the 4th Annual CASE Anti-Human Trafficking Awareness Walk.

✓ Sponsored Spring Jam at Fiesta Village in Colton coordinated by the Mentoring Task Force and designed to be a day of fun to introduce system-involved youth to the concept of mentoring.

✓ Collaborated with the Child Care Planning Council, Workforce Investment Board Youth Council, Head Start Shared Governance Board, CASA and Children’s Fund Board of Directors.

✓ Maintained a resource center available to County and community partners with materials on child safety topics such as: Safe Sleep, Safe Surrender, Shaken Baby Syndrome, drowning prevention, positive parenting, and appropriate child discipline.

✓ Tracked group home requests in conjunction with AB 2149, the County-sponsored group home legislation from 2004. Interfaced with the Board of Supervisors on group home issues.

✓ Collaborated with San Gorgonio Girl Scouts on several mentoring events.

Goals for 2014/2015

CN ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Expand child abuse prevention efforts countywide.

2. Evaluate statistics and make recommendations to Children’s Policy Council on safety campaigns to reduce the number of child deaths.

3. Continue to strategize ways to meet the needs of the County’s sexually exploited minors.

4. Continue to increase awareness of the importance of early identification and treatment options for the drug exposed and high risk zero through five populations by offering countywide training.

5. Continue to research and share grant opportunities with community partners to enhance and develop existing and new programs as they relate to the safety and well-being of children.
## How Outcomes Are Measured

**CN MEASURES OUTCOMES BY THE FOLLOWING METHODS**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expand child abuse prevention efforts countywide.</td>
<td>• Increase the number of attendees at the Child Abuse Prevention Committee meetings by 30%.</td>
</tr>
<tr>
<td></td>
<td>• Expand current campaigns to cover more of San Bernardino County.</td>
</tr>
<tr>
<td></td>
<td>• Increase the number of visual media outlets in high-risk areas in order to reach more of the population.</td>
</tr>
<tr>
<td>Evaluate statistics and make recommendations to Children’s Policy Council on safety campaigns to reduce the number of child deaths.</td>
<td>• Decrease the number of sleep related and shaken baby cases and deaths.</td>
</tr>
<tr>
<td></td>
<td>• Develop new safety campaigns based on new data reported by CDRT.</td>
</tr>
<tr>
<td></td>
<td>• Decrease in the number of cases reviewed related to current safety campaigns per month.</td>
</tr>
<tr>
<td>Continue to strategize ways to meet the needs of the County’s sexually exploited minors.</td>
<td>• Increase participation in CASE Steering Committee.</td>
</tr>
<tr>
<td></td>
<td>• Increase participation in stakeholder meetings.</td>
</tr>
<tr>
<td>Continue to increase awareness of the importance of early identification and treatment options for drug exposed and the high-risk zero through five populations by offering countywide training.</td>
<td>• Increase the number of cases seen at SART Centers.</td>
</tr>
<tr>
<td></td>
<td>• Increase attendance at countywide and professional development trainings.</td>
</tr>
<tr>
<td>Continue to research and share grant opportunities with community partners to enhance and develop existing and new programs as they relate to the safety and well-being of children.</td>
<td>• Increase the number of correspondences regarding grant opportunities to our partners.</td>
</tr>
</tbody>
</table>
CHILD ABUSE PREVENTION (CAP) COLLABORATIVE EFFORTS

Children’s Network was involved in a number of collaborative efforts in a variety of areas. Of particular note is the involvement in Loma Linda Children’s Hospital’s Keep Me Safe Parenting Conference, Too Hot for Tot campaign, health and resource fairs, and Safe Sleep for Infants campaign.

An integral part of Children’s Network is disseminating child abuse prevention materials to the greater community. Children’s Network was also involved with video and theater advertising, billboard and bus ads, distribution of ABC’s of Safe Sleep Resource kits and Dial 2-1-1 to report child abuse.

COALITION AGAINST SEXUAL EXPLOITATION (CASE)

The commercial sexual exploitation of youth is a serious and pervasive issue affecting individuals, families, and communities around the world. Exploiting children is a form of child abuse and those being exploited are victims of this serious crime. It is a complicated issue and in response, the County of San Bernardino has formed a coalition made up of law enforcement and social service agencies at a local level to coordinate their activities in order to best connect exploited youth to needed services.

The Coalition Against Sexual Exploitation (CASE) includes partnerships between the District Attorney, Public Defender, Probation Department, Sheriff’s Department, Children and Family Services (CFS), Department of Behavioral Health (DBH), County Superintendent of Schools, and Children’s Network.

Early in 2011, a multi-disciplinary team was formed consisting of a juvenile probation officer, a social service practitioner from CFS and a therapist from DBH. Together, with staff from the Public Defender and the District Attorney’s Offices, they are responsible for providing education, prevention, intervention, referrals and direct services to youth who are at risk of or who have been victims of commercial sexual exploitation.

MENTORING YOUTH TASK FORCE

The Mentoring Resource Coordinator continues to develop collaborative efforts between DBH and CN to assist with connecting high-risk system-involved youth with mentoring programs. High-risk, system-involved target populations include foster and kinship youth, probation youth, transitional age youth, and other underserved populations of youth throughout the County.

The Mentoring Youth Task Force was created to bring existing mentoring programs, County staff, and community partners together to share information and facilitate greater mentoring relationships between high-risk and community-based mentoring programs.
The SART/EIIS programs are designed to improve the social, developmental, cognitive, emotional, and behavioral functioning of high-risk and multiple-risk children ages zero to five. The program is funded jointly by First 5 San Bernardino and San Bernardino County DBH.

SART/EIIS treatment is provided by a multi-disciplinary team comprised of clinicians, public health nurses, a pediatrician, neuro-developmental psychologist, occupational therapist, and speech and language therapists.

There are three SART Centers located throughout the County: West End Family Counseling Center, Victor Community Support Services, and Desert Mountain Children’s Center.

Children’s Network is contracted with First 5 San Bernardino to provide a SART/EIIS program coordinator who is responsible for the effectiveness and the efficiency of the SART and EIIS Models of Care. The Centers are responsible for the day-to-day functions. Children and Family Services continues to provide in-kind support for the programs in each region.

**Committee Information**

**Children’s Policy Council**
The governing body for the Children’s Network is comprised of a member of the Board of Supervisors, a representative from the CEO’s office, the presiding judge of the Juvenile Court and department heads from the County’s child-serving agencies.

**Homeless Youth Task Force**
An interagency team comprised of community and County partners established to address the needs of the homeless youth in the County.

**Child Death Review Team**
A multi-disciplinary team charged with reviewing child (0-17) deaths to identify trends, inform prevention and safety campaigns and develop interagency policies to ultimately reduce the number of preventable child deaths.

**Coalition Against Sexual Exploitation (CASE)**
A taskforce comprised of community and County partners with the goal of educating the community about the growing problem and connecting exploited youth with the appropriate services.
**COMMITTEE INFORMATION CONTINUED**

**Countywide SART/EIIS**
Services provided to children ages zero to five at risk for emotional/behavioral problems associated with substance exposure and issues related to abuse and neglect.

**Mentoring Youth Task Force**
An interagency team comprised of community and County partners with the goal of improving the coordination of mentoring services to system-involved youth.

**Child Abuse Prevention Council**
Composed of representatives from public and private agencies throughout the County who come together primarily for the purpose of coordinating efforts to prevent child abuse and neglect.

**Foster Care Advisory Council**
An interagency team that focuses on improving outcomes for foster youth.

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**Statistical Information**

- Placed magnets with the ABCs (Alone, Back, and Crib) of Safe Sleep for Infants message on the side of 119 American Medical Response ambulances for a three-month period.
- Screened the Infant Safe Sleep video 5,880 times over a 12-week period at a movie theater in the City of San Bernardino.
- Screened the Dial 2-1-1 to Report Child Abuse video 11,760 times over a 12-week period at movie theaters in the High Desert cities of Apple Valley and Victorville.
- Placed the ABCs of Safe Sleep for Infants message on 50 billboards throughout the cities of San Bernardino, Colton and Rialto.
- Placed the Dial 2-1-1 to Report Child Abuse message on three highly visible billboards in the High Desert.
- Placed the Dial 2-1-1 to Report Child Abuse and the ABCs of Safe Sleep for Infants messages on grocery carts at stores in Rialto, San Bernardino, Colton, Victorville, Apple Valley, and Barstow for a three-month period.
- Screened over 1,200 children ages zero to five years for SART services.
- Received proclamations from 14 cities in San Bernardino County declaring April as Child Abuse Prevention Awareness month.
√ Hosted over 500 people at the 16th Annual Shine-a-Light on Child Abuse Awards Breakfast.
√ Hosted over 500 people at the 27th Annual Children’s Network Conference.
√ Assisted 60 young people who had been victims of sexual exploitation.
√ Distributed over 400,000 pieces of education materials and giveaways to support child abuse prevention and child safety.
√ Collaborated on over 80 community events.
√ Assisted in the implementation of a Shaken Baby Prevention Pilot Program at Arrowhead Regional Medical Center.

Ron Powell was presented with the Lifetime Advocate Award, while youth from the Mill Center Head Start State Preschool sang “This Little Light of Mine” at the 16th Annual Shine-a-Light on Child Abuse Awards Breakfast.
Staffing Information 2013/2014

Total staffing is approximately 10 employees.

<table>
<thead>
<tr>
<th>Category</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admin/Social Workers</td>
<td>5</td>
</tr>
<tr>
<td>Clerical/Other</td>
<td>3</td>
</tr>
<tr>
<td>Management/Supervisor</td>
<td>2</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The department budget for FY 13/14 is $1,271,462.

<table>
<thead>
<tr>
<th>Category</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$500,329</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$771,133</td>
</tr>
</tbody>
</table>
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Preschool Services Department (PSD) strives to improve the well-being of children, empower families, and strengthen communities.
Micaila Chairez

Micaila enrolled her daughter in the Head Start program to give her the opportunity for an early education that she did not have growing up. She volunteered at the Head Start Center, completed the Apprenticeship Program and is now an employee with the Preschool Services Department. Listen to her successful journey by clicking on the link below.

Click here to view the YouTube video.
FOR MORE INFORMATION


PSD office locations:  [Interactive Map](#)

PSD social media:  [Facebook](#)
Overview

The Preschool Services Department (PSD) administers the Federal Head Start (HS), Early Head Start (EHS), First 5 Full Day and the California Department of Education State Preschool programs in San Bernardino County. The department’s ultimate vision is that our children will excel in whatever setting they go to next; our families’ quality of life will be measurably better after participating in our programs; and our efforts will increase the quantity and quality of sustainable resources and services countywide.

Accomplishments for 2013/2014

PSD ACHIEVED THE FOLLOWING IN 2013/2014:

PSD worked diligently to not only meet federal and state requirements, but to surpass the program goals set last year. PSD achieved the following during program year 2013/2014:

✓ Passed the Federal Triennial Review with no deficiencies.

✓ Received two National Association of Counties (NACo) Achievement Awards for the “Preschool Referral Project” with Children and Family Services and the “Nicholson Park Family Learning and Community Resource Center.”

✓ Increased school readiness for children by 21% over last year, as measured by the Desired Results Developmental Profile (DRDP).

✓ Exceeded the required 50% level of professional teaching staff that has a Bachelor’s degree or higher.

✓ Successfully implemented a countywide 2-1-1 referral phone line.

✓ Increased service availability for homeless families at local shelters through collaborations with community partners and service providers. Enrollment of homeless children increased by 72% over the previous year through recruitment outreach efforts.

✓ Provided nutrition intervention to 1,394 children identified as being at risk and reduced obesity in 12% of children enrolled through measures set to track obesity in students.

✓ Promoted family self-sufficiency through financial literacy, vocational training, educational advancement support and increasing services to families by 248% from the prior program year.
The program goals established by PSD have been developed as a result of the 2013-2014 Community Assessment update, the findings of the program’s annual report from April 2014, and a review of the 2012-2013 Program Information Report (PIR) results. PSD’s primary focus continues to be to promote school readiness, ensure long term success in school and other life endeavors, and provide support to families to pursue self-sufficiency.

In addition, the prior year goals were reviewed, evaluated and updated as necessary for this second year of the three-year funding cycle. PSD has established two short term goals and updated the progress of the long term goals. These goals are summarized as follows:

1. Develop a funding plan for expanding EHS child development centers in the High Desert.
   A. Identify real costs (leasing, staffing, supplies, facility upgrades).
   B. Identify available funding sources and/or budget savings.
   C. Secure appropriate approvals for budget appropriations.

2. Locate, secure, and develop child development facilities in the High Desert of San Bernardino County.
   A. Identify possible facilities in the High Desert.
   B. Evaluate and select facilities.
   C. Develop plan outline for Board of Supervisors’ approval and Community Care Licensing.

3. Ensure partnerships target High Desert educational facilities to promote the growth and development of qualified staff.
   A. Rebuild educational partnerships to potentially encompass internships and mentoring in the High Desert.

4. Reduce obesity in PSD children.
   A. Partner with local universities and hospitals to provide nutrition education programs for parents and staff.

5. Promote family self-sufficiency through financial literacy, vocational training, and educational advancement support.
   A. Provide family and financial literacy training countywide.
## How Outcomes Are Measured

**PSD MEASURES OUTCOMES BY THE FOLLOWING METHODS:**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
</table>
| Ensure partnerships High Desert educational facilities to promote the growth and development of qualified staff. | - Advertise on Edjoin.  
- Obtain information from schools regarding advertising Teacher and Teacher Aide positions on the school’s blackboard websites. |
| Reduce obesity in PSD children.                                         | - Continue identifying children at risk by measuring Body Mass Index (BMI) at the beginning of the school year and refer for services as needed.  
- Continue training parents and community members. |
| Partner with local universities and hospitals to provide nutrition education programs for parents and staff. | - Seek additional funding sources to provide services countywide. |
| Promote family self-sufficiency through financial literacy, vocational training, and educational advancement support. | - Continue offering financial literacy, vocational training and educational advancement classes to PSDs’ families.  
- Continue offering the “Pathways to Success” apprentice program which provides on-the-job training for parents. |
Program Information

PSD administers the HS and EHS programs in 43 locations throughout the County of San Bernardino. These programs provide early childhood education and family services to over 5,000 disadvantaged children from birth to five years of age, pregnant women and families.

HEAD START (HS)

Head Start (HS) is a national program that provides comprehensive developmental services for children three to five years of age and their families. This program provides specific services such as:

- Health and Social Services
- Developmental and Behavioral Screenings
- School Readiness
- Nutritional Services and Education

Parent education, family support, and social services are designed to support and empower HS families, assist them in becoming economically self-sufficient, and assist them to identify and achieve personal family goals.

EARLY HEAD START (EHS)

The Early Head Start (EHS) program was established to assist pregnant women, infants and toddlers up to age three. EHS is designed to assist with enhancing:

- Children’s physical, social, emotional and intellectual development.
- Pregnant women’s access to comprehensive prenatal and postpartum care.
- Parent education on their child’s development.
- Parents’ efforts to fulfill their parental roles and move towards self-sufficiency.

In addition, the EHS program promotes healthy prenatal outcomes, enhances the development of infants and toddlers, and promotes healthy family functioning.
STATE PRESCHOOL

The State Preschool Program is a comprehensive child development program that provides a safe and nurturing hands-on learning environment that helps each child reach his/her highest potential in the areas of:

- Social Development
- Cognitive/Creative Development
- Language Development
- Physical Development

CHILD AND ADULT CARE FOOD PROGRAM (CACFP)

The Child and Adult Care Food Program (CACFP) is federally funded and administered through the State of California. The program strives to:

- Improve the diets of children under 13 years of age by providing children with nutritious, well-balanced meals.
- Aid in developing good eating habits in children that will last through later years.

LOW-INCOME FIRST-TIME MOTHERS (LIFT)

The Low-Income First-Time Mothers (LIFT) program is designed to improve the health and social functioning of low-income first-time mothers and their infants by providing in-home visits by a Public Health nurse. The nurses follow a visitation schedule that consists of one 90-minute home visit per week over a two and a half year period.
PRESCHOOL EARLY INTERVENTION (PEI)

The Preschool Early Intervention (PEI) program provides teachers and parents with strategies and activities to help them identify social, emotional and behavioral issues in children in order to prevent the onset of more severe behavioral conditions. The program also provides referrals to families in need of additional support services and resources such as:

- Appropriate mental health providers
- Support groups for parents and caretakers
- Primary care providers

FIRST 5 FULL DAY PRESCHOOL

First 5 supports high quality and developmentally appropriate early education programs for children in San Bernardino County. These programs are designed to provide high quality early education programs to improve a child’s cognitive, social and emotional development so that they are better prepared for success in school and life. These programs are also meant to expand the availability of programs to children who were unable to receive services either through income limits or lack of available slots.

Statistical Information

PSD compiles and analyzes all service area data, demographics, and resources in order to determine how to provide the most useful and appropriate services to the largest number of eligible children and families. This process allows PSD to maximize the use of HS and EHS funds.

According to Kidsdata.org, in 2013 there were 186,759 children between the ages of zero to five in San Bernardino County:

<table>
<thead>
<tr>
<th>San Bernardino County</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Female</td>
</tr>
<tr>
<td>0 - 2 Years</td>
<td>44,800</td>
</tr>
<tr>
<td>3 - 5 Years</td>
<td>45,356</td>
</tr>
</tbody>
</table>
STATISTICAL INFORMATION CONTINUED

Child Population by Race/Ethnicity: 2013
Race/Ethnicity: African American/Black; American Indian/Alaska Native; Asian American; Hispanic/Latino; Native Hawaiian/Pacific Islander; White; Multi-racial.

<table>
<thead>
<tr>
<th>Ethnicity of Children 0-18 in San Bernardino County</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latino/Hispanic</td>
<td>61.1%</td>
</tr>
<tr>
<td>White</td>
<td>22.2%</td>
</tr>
<tr>
<td>African American</td>
<td>8.5%</td>
</tr>
<tr>
<td>Asian</td>
<td>4.5%</td>
</tr>
<tr>
<td>Other</td>
<td>3.7%</td>
</tr>
</tbody>
</table>

Definition: Estimated population under age 18, by race/ethnicity.


<table>
<thead>
<tr>
<th>Ethnicity of Children Served by PSD</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latino/Hispanic</td>
<td>61%</td>
</tr>
<tr>
<td>White</td>
<td>17%</td>
</tr>
<tr>
<td>African American</td>
<td>16%</td>
</tr>
<tr>
<td>Asian</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>4%</td>
</tr>
</tbody>
</table>

Child Outcome Planning and Assessment System (COPA) 6/30/14.

Multi-cultural event featuring the food, art, literature, clothing and more from different cultures throughout the world.
STATISTICAL INFORMATION CONTINUED

In addition to high quality educational programs, PSD families receive comprehensive supportive and referral services. The following are the number of families who received services/referrals in 2013/2014 according to the Family Services Assessment data.


<table>
<thead>
<tr>
<th>Referral Service</th>
<th>2013–2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parenting Education</td>
<td>1,487</td>
</tr>
<tr>
<td>Clothing Assistance</td>
<td>315</td>
</tr>
<tr>
<td>Community Resources</td>
<td>1,821</td>
</tr>
<tr>
<td>Family Health Assistance</td>
<td>1,734</td>
</tr>
<tr>
<td>Housing Assistance – Subsidies, Utilities, Repairs etc.</td>
<td>38</td>
</tr>
<tr>
<td>Employment Assistance</td>
<td>349</td>
</tr>
<tr>
<td>Food Assistance</td>
<td>127</td>
</tr>
<tr>
<td>Financial Assistance</td>
<td>161</td>
</tr>
<tr>
<td>Emergency/Crisis Intervention (such as an immediate need for food, clothing, and shelter)</td>
<td>133</td>
</tr>
<tr>
<td>Children’s Fund Assistance</td>
<td>354</td>
</tr>
<tr>
<td>Childcare</td>
<td>19</td>
</tr>
<tr>
<td>Transportation</td>
<td>8</td>
</tr>
</tbody>
</table>

Caseload by Program

During the 2013-2014 program year, PSD served a combined total of 6,398 Head Start, Early Head Start, First 5 and State Preschool children and families throughout the County of San Bernardino.
Total staffing is approximately 706 employees.

### Preschool Services Department
#### Budgeted Staffing

<table>
<thead>
<tr>
<th>Department</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality Assurance</td>
<td>6</td>
</tr>
<tr>
<td>Finance/Human Resources</td>
<td>24</td>
</tr>
<tr>
<td>Support Services</td>
<td>36</td>
</tr>
<tr>
<td>Operations</td>
<td>627</td>
</tr>
<tr>
<td>Administration</td>
<td>13</td>
</tr>
</tbody>
</table>

### Budget Information 2013/2014

The department budget for FY 13/14 is $48,128,188.

### Preschool Services Department
#### Budgeted Appropriations

<table>
<thead>
<tr>
<th>Category</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contingencies</td>
<td>$50,068</td>
</tr>
<tr>
<td>Capital Expenditures</td>
<td>$644,904</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>$18,366,957</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$29,066,259</td>
</tr>
</tbody>
</table>
The Department of Public Health’s (DPH) mission is to satisfy our customers by providing community and preventive health services that promote and improve the health, safety, well-being, and quality of life of County residents and visitors.
Jessica Graham and Nu Ja

Nu Ja was born with limb differences of all four limbs. She was adopted when she was 3 years old. Her parents had a mad rush of medical appointments when they brought her home, including referrals for occupational therapy (OT) and physical therapy (PT). Given that they had a long therapy road ahead of them, they found their way to the Montclair Medical Therapy Unit (MTU).

It’s been just over a year since Nu Ja started therapy at the Montclair MTU. She now drives a bright pink wheelchair, writes her name with a writing cuff or pencil tucked under her chin and eats independently with a U-cuff and modified silverware. She brushes her hair with a long-handled hair brush complete with custom strap and, to the surprise of physical therapy staff and her parents, she has begun walking short distances on her own.

Click the link below to listen to the Nu Ja success story.

Click here to view the YouTube video.
FOR MORE INFORMATION

Department of Public Health (DPH) website:  http://www.sbcounty.gov/dph/publichealth/

DPH office locations:  Interactive Map
The Department of Public Health (DPH) provides a diverse range of services for all County residents to ensure a healthy quality of life in the community by:

- Monitoring health status to identify community health problems
- Diagnosing and investigating health problems and health hazards in the community
- Informing, educating, and empowering people about health issues
- Mobilizing community partnerships to identify and solve health problems
- Developing plans and policies that support individual and community health efforts
- Enforcing laws and regulations that protect health and ensure safety
- Linking people to needed personal health services and ensuring the provision of health care when otherwise unavailable
- Ensuring a competent public health and personal health care workforce
- Evaluating effectiveness, accessibility, and quality of personal and population-based health services
- Researching new insights and innovative solutions to health problems
Accomplishments for 2013/2014

DPH ACCOMPLISHED THE FOLLOWING IN 2013/2014:

**Animal Care and Control (ACC)**
- Partnered with 321 non-profit, private sector, and animal Rescue Group Partners (RGPs) to receive homeless animals from ACC shelters.
- Hosted 3rd Annual Homeward Bound Mega Pet Adoption event in which 181 dogs and cats were adopted in partnership with three municipal animal shelters and 13 RGPs.

**California Children Services (CCS) program**
- Determined medical eligibility for 97% of cases within five days of receipt of all necessary documentation.
- Referred and authorized 100% of children with Spina Bifida to the appropriate Special Care Center to receive services and had a documented annual team conference report in their medical file.

**Clinic Operations**
- Completed 68,719 patient visits, averaging 6,247 per month.
- Implemented pediatric services at the Hesperia and Ontario Health Centers.
- Relocated the Adelanto Community Health Center to a larger, more accessible location intended to expand the scope of services to more patients.

**Communicable Disease Section (CDS)**
- Increased community access to flu vaccine by increasing the number of community partners participating in annual influenza vaccine project to reach goal of vaccinating community and preventing disease to enhance community health.
- Communicable Disease Investigators provided the latest treatment guidelines for STDs and reporting guidelines to 36 provider offices.

**Environmental Health Services (EHS)**
- Received 2014 National Association of Counties (NACo) Achievement Award for “Improving Food Safety Through the Health Education Liaison Program (HELP)” and “West Nile Virus Aerial Surveillance Collaboration.”
- Received California State Association of Counties (CSAC) 2013 Challenge Award for “West Nile Virus Aerial Surveillance Collaboration.”
ACCOMPLISHMENTS CONTINUED

**Family Health Services, Child Health and Disability Prevention (CHDP)**

- Exceeded goal of CHDP provider recertification by 35 percent. During this period, CHDP liaison nurses accomplished recertification of 42 providers by completing inspection of facilities and medical records.
- Enrolled 10 new CHDP providers.

**Healthy Communities Program**

- Sponsored the cities of Grand Terrace and Barstow for a total of 23 cities in the County with Healthy City initiatives.

**Health Promotion and Education Section (HPES)**

- The Alcohol and Drug Abuse Prevention Program (ADAPP):
  - increased the number of Friday Night Live (FNL) and Club Live (CL) active youth chapters from 8 to 15.
  - increased number of core youth participants from 150 to 225 involved in prevention.
  - implemented a total of 300 individual prevention activities affecting 6,000 peers.
- California Personal Responsibility Education Program (CA PREP) completed 101 six-module cohorts to exceed the 2013/14 implementation target goal of 1,045 by 758 participants.
- Coordinated Asthma Referral and Education (CARE) program met the required 200 initial home visits objective in the program year 2013/14 Scope of Work (SOW) two months early.

**Laboratory**

- Improved test capacity building through staff cross-training in critical areas including testing for agents of bioterrorism.
- Participated in the design and building of an enlarged new Public Health Lab with bio-safety level 3 capability in Ontario.
- Completed purchase of a new Laboratory Information System (LIS).

**Nutrition Education Obesity Prevention (NEOP) program**

- Conducted hundreds of presentations on nutrition education and physical activity promotion at school sites throughout the County.
- Established relationships with local businesses and organizations over the past year in an effort to develop a healthy workforce environment.

**Preparedness and Response Program (PRP)**

- Participated in June 2013 Mass Care and Shelter Exercise within the Medical Service Needs Unit.
- Dispensed 1,967 total doses at vaccination clinics.
ACCOMPLISHMENTS CONTINUED

✓ Conducted eight first responder Train-the-Trainer trainings for Public Health program managers, coordinators and supervisors to train their staff on understanding the role of DPH during a public health emergency; increased awareness of staff responsibilities and roles during a public health emergency and increased knowledge of workplace and personal preparedness. Thirty trainings were reported as completed by DPH programs.

**Ryan White (RW) program**

✓ Successfully secured a $600,000 increase in funding over the prior year.
✓ Continued to successfully transition medical care clients to other payer sources.

**Women, Infants and Children (WIC) program**

✓ Engaged community and participants through 11 English and Spanish social media websites.
✓ Provided non-invasive screening for anemia at all 17 WIC sites.
✓ Facilitated the San Bernardino County Breastfeeding Collaborative, formed with DPH to improve lactation services and resources with the County.

**Goals for 2014/2015**

DPH ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. DPH will serve as the staff liaison to the Countywide Vision Project’s Wellness Element Group, which has initiated a multi-year community-driven process to identify priority areas for improving health.

2. Increase HELP consultations to businesses (restaurants) to promote food safety, which leads to more successful businesses.

3. Increase the potential number of health professionals in the County through a public health intern and extern program that provides participants with information and experience in a broad range of public health professions.

4. Implement relevant, high quality public health leadership training to achieve an essential element of public health accreditation and ensure stable departmental leadership into the future.

5. Increase number of public/private collaborations with non-profit animal rescue group partners (corporations).
6. Identify opportunities to transition clients to medical care payment sources that relieve
dependence on decreasing and volatile categorical or local funds, thereby ensuring greater
sustainability and stability in the department’s ability to provide for the health care needs of Coun-
ty residents.

7. Achieve and maintain National Accreditation through the Public Health Accreditation Board
(PHAB) to ensure the department continues to focus on quality and performance improvement,
transparency and accountability to all stakeholders and funders, and maintains the capacity to
deliver the three core public health functions and ten essential services.

How Outcomes Are Measured

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPH will serve as the staff liaison to the Countywide Vision Project’s</td>
<td>• Develop Community Health Improvement Plan (CHIP).</td>
</tr>
<tr>
<td>Wellness Element Group, which has initiated a multi-year community-driven</td>
<td>• Minimum of 5 regional maps identifying health resources.</td>
</tr>
<tr>
<td>process to identify priority areas for improving health.</td>
<td>• Convene regional community meetings.</td>
</tr>
<tr>
<td></td>
<td>• Establish data metrics for evaluation of CHIP performance and to inform future decision making.</td>
</tr>
<tr>
<td>Increase Health Education Liaison Program (HELP) consultations to</td>
<td>• Perform an estimated 150 consultations in FY 2013/14 and an estimated target of 165 the following fiscal year.</td>
</tr>
</tbody>
</table>
### Activity
Implement relevant, high quality public health leadership training to achieve an essential element of public health accreditation and ensure stable departmental leadership into the future.

### Measure
- Attendance at department leadership training events:
  - 2013/14 estimate: 125
  - 2014/15 target: 150

### Activity
Increase number of public/private collaborations with non-profit animal RGPs (corporations).

### Measure
- Number of RGPs:
  - 2013/14 estimate: 321
  - 2014/15 target: 337

### Activity
Identify opportunities to transition clients to medical care payment sources that relieve dependence on decreasing and volatile categorical or local funds, thereby ensuring greater sustainability and stability in the department’s ability to provide for the health care needs of County residents.

### Measure
- Medical care clients currently receiving HIV related care through federal Ryan White funding, transitioned to other payment sources:
  - 2014/15 target: 243

### Activity
Achieve and maintain National Accreditation through the Public Health Accreditation Board (PHAB) to ensure the department continues to focus on quality and performance improvement, transparency and accountability to all stakeholders and funders, and maintains the capacity to deliver the three core public health functions and ten essential services.

### Measure
- Complete 100% of pre-accreditation activities:
  - Development of countywide Health Improvement Plan.
  - Complete department strategic plan.
  - Complete PHAB orientation for all executive and key leadership staff.
  - Submit a Statement of Intent to apply to PHAB.
  - Complete initial collection of documentation required by PHAB Standards and Measures and complete gap analysis.
  - Develop department marketing strategy to inform, educate and motivate staff regarding the importance of accreditation.
**Program Information**

**Animal Care and Control (ACC) program** - ACC works to prevent rabies in humans and pets and teaches responsible pet ownership, which includes the importance of spaying and neutering. In addition, ACC protects and serves the public and pets by enforcing laws and pertinent ordinances which establish levels of care for all animals domestic and wild. ACC also assists with the reunification of lost pets with their owners and places unwanted pets into new homes.

**California Children Services (CCS) program** - CCS provides medical and financial case management services to eligible children with physically handicapping conditions. The program performs medical, residential and financial eligibility determinations on referred children. CCS provides nursing case management to coordinate optimum care for eligible children. The CCS program also provides prior authorizations for medical care by approved medical providers. CCS processes and pays medical claims for patients and provides direct occupational and physical therapy services.

**Clinic Operations** - The Clinic Operations section is the vehicle by which all Public Health clinical-related services are offered. Clinical services are delivered at DPH clinics through a comprehensive and coordinated delivery model that includes: immunizations; maternal and reproductive health; well woman examinations and mammogram referrals (Every Woman Counts); pediatrics; primary care (including integrated mental health services and psychiatric consultation at the Hesperia Health Center); and Tuberculosis screening and clinical care. Specialized HIV/AIDS services include medical care, mental health, clinic-based health education/risk reduction, medical case management, and AIDS Drug Assistance Program (ADAP) enrollment at the DPH facilities in San Bernardino, Ontario and Hesperia. The Hesperia and Adelanto Health Centers have attained Federally Qualified Health Center (FQHC) status thereby expanding primary care services to uninsured and underinsured County residents.

**Communicable Disease Section (CDS)** - CDS reduces the spread of communicable disease by investigating reported diseases, implementing control measures, tracking disease trends and identifying potential sources of disease outbreaks. In addition to disease investigation, CDS provides nurse case management of active and suspect cases of Tuberculosis and ensures completion of long-term medical management. CDS reduces vaccine-preventable diseases by improving immunization practices in physician offices and clinics, by encouraging vaccinations across the lifespan, providing case management services that help prevent the transmission of maternal Hepatitis B to newborns and monitoring how well schools and childcare centers comply with immunization laws.

**Environmental Health Services (EHS) Division** - EHS serves the public in the prevention of disease and illness through the use of education, enforcement and collaboration. EHS Food Protection Program conducts food facility inspections, provides consultation services to food facility operators that would like to improve their safety standards, trains food service workers on safe food handling practices and investigates complaints on facilities at which food-borne illnesses are suspected. The Recreational Health Program inspects public swimming pools, spas, water slides, lakes and lagoons for possible health
and safety hazards. The Housing & Property Improvement Program inspects and assesses environmental hazards, as well as responding to complaints at apartments, motels/hotels, camps, detention facilities and bed and breakfast facilities. EHS Land Use Protection Program (LUPP) serves the public in the prevention of disease and illness caused by environmental factors through effective environmental management, which includes disease surveillance, routine inspections, education and enforcement. LUPP regulates water, wastewater, land use, medical waste, body art facilities and practitioners, solid waste entities and mosquito and vector control.

**Family Health Services (FHS)** - FHS seeks to address conditions in which the maternal, child, adolescent, young adult populations and their families can be healthy by assessing community health concerns, empowering individuals to adopt healthy lifestyles and organizing community efforts to embrace health promotion and wellness.

- **Maternal, Child and Adolescent Health (MCAH)** - The MCAH program, which includes Comprehensive Perinatal Services, Fetal Infant Mortality Reduction and Sudden Infant Health works with communities, social and health care systems to build capacity and infrastructure to assist low-income pregnant, parenting women and children in accessing health care and supportive services.

- **Child Health and Disability Prevention (CHDP)** - The CHDP program provides nursing case management, referral and health education services to children through 21 years of age who are diagnosed with conditions that require follow-up health care or other assistance. CHDP works with medical providers to ensure compliance of child health standards of care.

**Healthy Communities Program** - The Healthy Communities Program provides technical assistance to cities and unincorporated communities to adopt policy, systems and environmental change that promote healthy eating, physical activity and well-being. Some Healthy Communities initiatives include safe routes to school, complete streets policies, development of local farmers markets and community gardens, active transportation systems, access to health care services, joint-use agreements and nutrition education programs.

**Health Promotion and Education Section (HPES)** - HPES provides community based prevention and education programs in numerous areas including:

- **Alcohol and Drug Abuse Prevention Program (ADAPP)** - The ADAPP serves residents to prevent problems with underage drinking and drug abuse. The program builds resiliency skills in high school and middle school teens and parental/community involvement. ADAPP promotes community policy changes to reduce substance abuse. It runs the San Bernardino County Friday Night Live (FNL) Partnership, a youth development program to engage youth as drug-free lifestyle advocates.
√ California Personal Responsibility Education Program (CA PREP) - CA PREP educates high-risk, vulnerable adolescents (13-18 years) on abstinence and contraception by replicating an evidence-based program of interactive modules to change behavior and/or reduce teen pregnancy and sexually transmitted infections among youth.

√ Coordinated Asthma Referral & Education (CARE) - CARE is a free home visit program to educate on how to improve asthma management for children 0-18 years of age. CARE participants receive education on proper medication use, review of physician-provided Asthma Action Plans and an environmental assessment to identify potential asthma triggers.

Laboratory - The DPH Laboratory provides laboratory testing to support public health programs, including Clinic Operations, ACC, EHS, and CDS. Additional services include laboratory testing and reference services to local hospitals, medical providers, and law enforcement.

Nutrition Education Obesity Prevention (NEOP) program - NEOP is part of a statewide movement of local, state and national partners collectively working towards improving the health status of low-income Californians to create environments that support fruit and vegetable consumption and physical activities. Local project partners include schools, faith-based institutions, city governments, universities, health care agencies, community-based organizations, and other public and private agencies.

Preparedness and Response Program (PRP) - PRP works to generate readiness through planning, mitigating, and responding to public health emergencies such as: pandemics/outbreaks, biological/chemical/radiological terrorism, and natural disasters. PRPs goal is to provide a coordinated response along with emergency responders and partner health agencies to meet the public health needs of our residents in the event of such a disaster. During an event, PRP will conduct disease surveillance, provide emergency health information, health precautions, health education and links to additional public health resources.

Ryan White program - The Ryan White HIV/AIDS Treatment Modernization Act (formerly called the Ryan White CARE Act) was passed by Congress in 1990 with the purpose of improving the quality of life for those affected by HIV/AIDS. The Act was named after Ryan White, a teenager from Indiana who brought awareness of the epidemic through his struggle with HIV/AIDS and AIDS-related discrimination.

Women, Infants and Children (WIC) program - The WIC program is a nutrition education and food supplement program that helps lower income pregnant women, new mothers, infants and young children eat well and stay healthy. Pregnancy and early childhood are important times for growth and development. The WIC program has been designed to help its participants make choices that can have a positive and lasting difference in their family’s health.
**Statistical Information**

**Animal Care and Control (ACC)**
- Housed 14,139 animals in County-operated animal shelters.
- Responded to 31,591 field service calls.
- Received 260,010 office inquiries.
- Inspected 247 animal establishments.

**California Children Services (CCS) program**
- Current caseload is 12,234 open cases.

**Clinic Operations**
- Provided 22,064 reproductive health visits during FY 2013/14.
- Provided 1,314 HIV/AIDS visits during FY 2013/14.
- Provided 23,209 primary care visits during FY 2013/14.

**Communicable Disease Section (CDS)**
- Ninety-six percent of San Bernardino County 7th grade students are up-to-date with required vaccines (489 out of 489 schools reporting).
- Ninety-five percent of San Bernardino County childcare center students are up-to-date with required vaccines (708 out of 799 schools reporting).
- Processed and/or investigated:
  - 11,014 non-STD/HIV cases
  - 6,046 confirmed non-STD/HIV
  - 1,001 HIV/AIDS cases identified - 452 new HIV/AIDS cases
  - 16,529 STDs investigated
  - 15,482 STDs confirmed

**Environmental Health Services (EHS)**
- Conducted 58,657 inspections, surveys and/or complaint investigations during FY 2013/14.

**Family Health Services, Child Health and Disability Prevention (CHDP)**
- Conducted 3,060 school health screenings for hearing, vision and scoliosis.
- Participated in 49 health fairs and local events to disseminate educational information and resources to more than 26,625 community members.
- Conducted 12,299 physical and dental exam reviews for foster children.

**Healthy Communities Program**
- Sponsored Cities of Grand Terrace and Barstow, bringing the total to 21 cities in the County with Healthy City initiatives.
STATISTICAL INFORMATION CONTINUED

**Laboratory**
- Accepted 38,952 specimens for testing and performed 64,000 tests.

**Preparedness and Response Program (PRP)**
- FEMA online trainings for DPH staff: Incident Command System 201, 700 and 800.
  - DPH staff completed 1,236 trainings
- Hosted four HELPP meetings:
  - Total number of participants - 171
  - Total number of agencies - 44

**Ryan White (RW) program**
- Served 3,345 unduplicated clients: White (1,784); Hispanic (1,060); Black (388); Other (113).

**Women, Infants and Children (WIC) program**
- Provided over 915,000 food vouchers at 17 sites throughout the County, generating over $55 million in sales at more than 220 authorized WIC grocers.
Staffing Information 2013/2014

Total staffing is approximately 879 employees.

<table>
<thead>
<tr>
<th>Department of Public Health</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Health</td>
<td>183</td>
</tr>
<tr>
<td>Program Integrity/Development</td>
<td>69</td>
</tr>
<tr>
<td>Animal Care &amp; Control</td>
<td>65</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>104</td>
</tr>
<tr>
<td>Disease Control and Prevention</td>
<td>230</td>
</tr>
<tr>
<td>Admin., Fiscal and Medical Svcs.</td>
<td>62</td>
</tr>
<tr>
<td>California Children's Svcs.</td>
<td>166</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The department budget for FY 13/14 is $112,085,759.

<table>
<thead>
<tr>
<th>Department of Public Health</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Expenditures</td>
<td>$1,501,700</td>
</tr>
<tr>
<td>Intra-Fund Transfers</td>
<td>$7,054,178</td>
</tr>
<tr>
<td>Central Services</td>
<td>$1,311,991</td>
</tr>
<tr>
<td>Services, Supplies, Travel and Other</td>
<td>$29,692,421</td>
</tr>
<tr>
<td>Salaries and Benefits</td>
<td>$72,525,469</td>
</tr>
</tbody>
</table>
The Transitional Assistance Department (TAD) enhances the quality of life in the communities we serve by providing economic support to individuals and families. We are committed to working collaboratively to provide our services accurately and efficiently with a high emphasis on integrity, respect and customer service.
Pamela Romero worked her way up through the CalWORKs program with the Transitional Assistance Department. She is now an Office Assistant II with the department, helping customers achieve their goals. Listen to her story below.

[View the YouTube video here.]
FOR MORE INFORMATION

Transitional Assistance Department (TAD) website: http://hss.sbccounty.gov/HSS/tad/

TAD office locations: Interactive Map

TAD social media:Facebook
Overview

The Transitional Assistance Department (TAD) is responsible for administering the financial support programs to persons in need of financial, nutritional, and/or medical assistance. The department also provides Welfare-to-Work (WTW) services to California Work Opportunities for Kids (CalWORKs) recipients.

The goals of TAD are to meet the basic needs of families and individuals, while working with them to attain self-sufficiency and to promote work and personal responsibility.

Accomplishments for 2013/2014

TAD ACCOMPLISHED THE FOLLOWING IN 2013/2014:

✓ Continued to provide free tax preparation services through the Volunteer Income Tax Assistance (VITA) program for 11,362 eligible low-income San Bernardino County residents resulting in over $22 million in combined refunds (federal and state), and more than $10 million in Earned Income Tax Credits (EITC). This was a 47% increase over 2013 totals, and nearly $15 million estimated local economic activity generated by EITC.

✓ Expanded Customer Service Center (CSC) for CalWORKs/CalFresh/Medi-Cal continuing cases, to include Health Care Reform calls. Over 1,170,000 calls were handled countywide (99,700/month), freeing-up staff resources in district offices to focus on increased caseloads.

✓ Received two National Association of Counties (NACo) Achievement Awards for “Lobby Management” and “Policy Review Program.”

✓ Maintained CalFresh error rate at 1% which is far below the federal tolerance rate of 6 percent.

✓ Successfully authorized nearly 80,000 additional Medi-Cal cases, including Affordable Care Act (ACA) cases since October 1, 2013, representing a 47% increase over pre-ACA levels. Cases represent low-income eligible customers/families into Medi-Cal programs for which they qualify.
ACCOMPLISHMENTS CONTINUED

✓ Continued to partner with Technical Employment and Training (TET) Inc. to provide CalWORKs recipients with an industry-based training in manufacturing. Program participants achieved an 81% graduation rate and all graduates successfully passed the National Institute for Metalworking Skills (NIMS) certification. To date, approximately 61% of program graduates have entered employment in the manufacturing field.

✓ Continued expansion and use of C4Yourself website for access to CalWORKs, Medi-Cal and CalFresh benefits for County residents, and the ability to complete annual re-certifications online. Currently the County receives over 10,140 applications per month via the C4Yourself website - an increase of more than 8% over the previous year average of 9,300 per month.

Goals for 2014/2015

TAD ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Increase the total number of eligible families and individuals served by the VITA program.
   - Provide free tax preparation and e-file services for eligible County families and individuals thereby stimulating economic activity.

2. Increase the Work Participation Rate (WPR) of recipients of CalWORKs benefits.
   - Increase the number of WTW CalWORKs participants who are engaged in a mandated federal WTW activity.

3. Maintain the CalFresh error rate proficiency.
   - Maintain the CalFresh error rate below the federal tolerance level of 6% to avoid fiscal sanction.

4. Provide timely responses to calls from County residents for the ACA from the CSC.
   - CSC staff designated to handle the transferred calls from Covered CA Service Centers for coverage under ACA will handle in 30 seconds or less.
### How Outcomes Are Measured

TAD MEASURES OUTCOMES BY THE FOLLOWING METHODS:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achieve a 3% increase in number of eligible families and individuals served by the VITA program.</td>
<td>• Measured annually during the tax season - January through April.</td>
</tr>
<tr>
<td>Achieve 50% of CalWORKs participants who are engaged in a federal WTW activity.</td>
<td>• Measured monthly through WPR reports.</td>
</tr>
<tr>
<td>Maintain a 3% error rate or lower when calculating CalFresh benefits.</td>
<td>• Measured through Quality Control (QC) reports.</td>
</tr>
<tr>
<td>Provide timely responses (30 seconds or less) to calls from County residents for ACA from CSC.</td>
<td>• Measured annually during Health Care Reform open enrollment - November through February.</td>
</tr>
</tbody>
</table>

*Staff assists a customer using the award-winning Lobby Management technology.*
Program Information

**California Work Opportunities for Kids (CalWORKs)** - is a time-limited program that provides financial assistance and WTW services to families with children who are deprived of support or care due to the death, incapacity, unemployment/underemployment, or continued absence of one or both parents. Homeless assistance is included in this program. CalWORKs is administered following federal and state regulations.

**CalFresh program** - is a nutritional assistance program designed to help single people and families with little or no income to buy food. CalFresh benefits are issued on an Electronic Benefits Transfer (EBT) card that is used just like a bankcard at most local food stores. The CalFresh program is a federal- and state-funded program.

**Medi-Cal program** - offers free or low-cost health coverage for California residents who meet certain eligibility requirements. Medi-Cal is supported by federal and state taxes. Medi-Cal now also includes health care through the California Health Exchange, also known as Covered California, which provides for expanded health coverage in which eligible recipients receive coordinated services from the County.

**Welfare-to-Work (WTW)** - is a component of CalWORKs. The program assists CalWORKs recipients in obtaining employment that leads to their self-sufficiency. Employment Services staff work with individuals in overcoming barriers that prevent employment. The program also provides supportive services, such as transportation and child care assistance, to assist individuals in meeting work requirements. Supportive service Child Care assistance payments are reimbursements for child care provided, made directly to the provider, on behalf of CalWORKs recipients in approved work or training programs.

**Foster Care** - provides financial assistance for children in need of substitute parenting who have been removed from the home by either Children and Family Services (CFS) or the Probation Department.

**General Relief (GR)** - provides loan assistance to indigent individuals and families in temporary need of housing, food and/or transportation. General Relief is the only TAD program that is totally funded, as well as administered, by the County of San Bernardino.
Statistical Information

TAD continuing caseloads through June 2014:

TAD Foster Care, Child Care, and General Relief continuing caseloads through June 2014:
## Caseload by Program

TAD continuing caseloads through June 2014:

<table>
<thead>
<tr>
<th>Program</th>
<th>Caseload</th>
</tr>
</thead>
<tbody>
<tr>
<td>CalWORKs</td>
<td>51,390</td>
</tr>
<tr>
<td>CalFresh</td>
<td>139,316</td>
</tr>
<tr>
<td>Medi-Cal</td>
<td>248,719</td>
</tr>
<tr>
<td>Child Care</td>
<td>3,327</td>
</tr>
<tr>
<td>Welfare to Work</td>
<td>32,294</td>
</tr>
<tr>
<td>Foster Care</td>
<td>4,484</td>
</tr>
<tr>
<td>General Relief</td>
<td>467</td>
</tr>
</tbody>
</table>
Total staffing is approximately 2,991 employees.

### Staffing Information 2013/2014

#### Transitional Assistance Department

- **Administrative Support**: 112
- **Clerical Support**: 291
- **Casework**: 2,588

### Budget Information 2013/2014

The department budget for FY 13/14 is $306,286,881.

#### Transitional Assistance Department

- **Other Programs**: $1,617,431
- **General Relief Administration**: $629,908
- **CalWorks - Subsidized Employment**: $6,848,804
- **CalWorks - Mental Health**: $8,614,120
- **Child Care Administration**: $5,143,869
- **Foster Care Administration**: $4,802,046
- **Medi-Cal**: $70,502,124
- **CalWorks - Welfare to Work**: $45,317,018
- **Food Stamps**: $93,574,293
- **CalWorks - Eligibility**: $69,237,268
Veterans Affairs (VA) honors the commitment and sacrifice of our veterans, military and their families, and promotes awareness of the challenges they face. The department identifies and obtains benefits and services for them through advocacy, outreach and education, thereby contributing to the quality of life and well-being of our communities.
After years of filing disability claims without results, Mr. McClain called the San Bernardino County Veterans Affairs (VA) office and spoke to Supervising Veterans Service Representative Rachel Hay. Rachel proved she is a very dedicated representative that truly believes in getting veterans the benefits they deserve. Find out how the San Bernardino Veterans Affairs office changed the life of Mr. McClain and his family.

Click here to view the YouTube video.
FOR MORE INFORMATION

Veterans Affairs (VA) website:  http://hss.sbcounty.gov/VA/

VA office locations:  Interactive Map

VA social media:  Facebook
Those who set aside their comfort and personal safety to serve in the United States Armed Forces do so to secure and protect the freedoms we all enjoy. In grateful response, the federal government maintains a wide array of veterans’ benefits for former military service members and their families including monetary benefits, medical care, and interment in national cemeteries. In addition to the benefits provided by the United States Department of Veterans Affairs (USDVA), benefits for veterans are currently available from more than 1,000 other federal domestic assistance programs with over 4,000 separate agencies responsible for their administration.

The complicated process of figuring out available benefits, deciphering eligibility requirements, completing intricate application forms, obtaining various supporting documents and tracking the status of a submitted claim is truly daunting!

To increase veterans’ ability to obtain their benefits, counties across the U.S. maintain veterans service offices, like the County of San Bernardino Department of Veterans Affairs (County VA). County VA staff members are specially trained in veteran law and once trained, they pass a rigorous USDVA accreditation examination prior to seeing clients. The County VA is often the initial contact to the USDVA system for veterans in our community. It is estimated that 75-90% of all USDVA claims filed annually originate from a county veterans services office.

Our staff makes benefits acquisition as simple as possible and their efforts are measured in number of lives touched, customer satisfaction, and total federal benefit dollars awarded to our veterans and their families.

*Veterans help build “The Incredible Edible Community Garden” aquaponics greenhouse outside the San Bernardino County Museum*
VA ACCOMPLISHED THE FOLLOWING IN 2013/2014:

✓ Provided services to 26,320 County residents, representing a 14% increase over the previous year.

✓ Processed and approved 1,104 California College Fee Waivers for dependents of disabled veterans living or attending school in San Bernardino County. This provided County residents a savings of $4,750,104 in tuition and fees at California state colleges and universities.

✓ Helped clients obtain more than $53,000,000 in federal benefit dollars compared to $18 million each for Los Angeles, Riverside and San Diego counties and $13 million for Orange County.

GOALS FOR 2014/2015

VA ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Emphasize higher standards of customer service that will promote the health, well-being, and quality of life for all San Bernardino County veterans.

2. Promote staff training and development to maintain Federal VA accreditation.
How Outcomes Are Measured

VA MEASURES OUTCOMES BY THE FOLLOWING METHODS:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitor overall customer satisfaction to ensure high quality service.</td>
<td>• Percentage of customer satisfaction survey results with an overall score of A (excellent).</td>
</tr>
<tr>
<td>Promote staff training and development to meet continuing education requirements necessary to maintain staff’s Federal VA accreditation.</td>
<td>• Percentage of staff attending quarterly regional staff training.</td>
</tr>
</tbody>
</table>

Program Information

CLAIMS ASSISTANCE

A. Provide benefits counseling, claim preparation, and case development for compensation, pension, and education claims.

B. Monitor VA claim processing and resolve adjudicative issues or questions in favor of our clients.

C. Provide assistance with administrative and/or appellate review of claims.

D. Administer the California College Fee Waiver program for spouses and dependents of disabled veterans.
INFORMATION AND REFERRALS

A. Provide client referrals to and information regarding other County departments including the Department of Aging and Adult Services (DAAS), Transitional Assistance Department (TAD), Department of Behavioral Health (DBH), County Recorder, etc., and area homeless and emergency providers.

B. Refer clients to state and federal programs and agencies including Social Security and SSI, Employment Development, Railroad Retirement, Department of Defense, etc.

C. Provide veteran-specific information regarding:
   1. Correction of military records and discharge upgrades
   2. Federal tort claims assistance
   3. Government life insurance, home loan guaranty and farm loans
   4. Business licenses, SBA, DVBE and peddler’s licenses
   5. Reduced fees for property tax, hunting/fishing licenses, and parks and recreation passes
   6. DMV registration fees, specialty license plates (veterans and Gold Star plates)
   7. Outpatient medical and dental treatment
   8. Veterans Homes of California
   9. Veterans preference for employment examinations
   10. Funeral and burial assistance

ADVOCACY

A. Individual advocacy includes pro-client determination of adjudicative questions and concerns related to processing a veteran’s claim.

B. Advocacy at the policy level includes resolution of local policy and procedural issues that better serve the bureaucracy rather than our veterans.

C. Legislative advocacy involves providing state and federal elected officials with technical assistance regarding veterans’ legislation.
OUTREACH

A. Provide veterans with San Bernardino County Veteran ID cards.

B. Administer the San Bernardino County Veteran-Friendly Business program.

C. Participate in community events relevant to veterans: job fairs, stand-downs, government day events, etc.

D. Conduct outreach to nursing and retirement homes, mortuaries, schools, military separation programs, and service organizations (American Legion, VFW, etc.) to inform the community of veterans’ benefits and services.

E. Meet with veterans’ services providers in the community to inform them of veterans’ special needs.

Eligible veterans can go to a County VA office to receive a Veteran ID card (similar to this) that may entitle them to discounts or incentives at area businesses that participate in the San Bernardino County Veteran-Friendly Business program.
Visitors: Since 2008, walk-in traffic has increased more than 46%, due to several factors:

- Soldiers returning from Iraq and Afghanistan are discharging from the military.
- Reservists and National Guard members are being deactivated and seeking benefits.
- As Korea and Vietnam veterans age, their health declines and they seek more benefits and services.
- Increase in collaborative events with other County departments, including DBH, DAAS and TAD, has resulted in a greater number of client referrals.

Phone Calls: The number of phone calls for the same period has increased more than 14%, while the number of office assistants (OAs) answering phones has decreased from five to four. The department as a whole now averages more than 200 phone calls per day. OAs answer general information calls, allowing Veterans Service Representatives (VSRs) more time to see clients and manage cases.
C a s e l o a d b y P r o g r a m

W O R K L O A D

The department workload has increased 23% over the previous year. This represents an increase of 86% over the workload five years ago. Workload is defined as completed applications for monetary benefits, medical/mental health services, educational assistance, vocational rehabilitation and the like.

VSR Caseload: The number of open client files has decreased during the past year due to a concerted effort to identify files that could be closed due to completed processing or inactivity. In addition, the department worked diligently with the USDVA to identify and resolve old cases. The VSR caseload, while still 17% higher than it was five years ago, has decreased from the previous year by 34 percent. On average, each VSR has 544 open cases.
Staffing Information 2013/2014

Total staffing is approximately 18 employees.

Veterans Affairs
Budgeted Staffing

<table>
<thead>
<tr>
<th>Department</th>
<th>Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>3</td>
</tr>
<tr>
<td>Veterans Services</td>
<td>15</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The department budget for FY 13/14 is $2,159,665.

Veterans Affairs
Budgeted Appropriations

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$499,881</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$1,659,784</td>
</tr>
</tbody>
</table>
The Administrative Support Division (ASD) is dedicated to assisting HS departments and divisions in the delivery of their services by providing support in the areas of budget and finance, facilities, contracts, and special projects in a professional, ethical and customer-oriented manner.
The Administrative Support Division (ASD) is dedicated to assisting Human Services (HS) departments and divisions in the delivery of services. We do so by providing support and sharing our expertise in the area of budget and finance, contract administration, facilities management, and storage and distribution. ASD employs ethical, knowledgeable, and professional staff committed to helping our customers reach their goals.

ASD ACCOMPLISHED THE FOLLOWING IN 2013/2014:

**Contracts**

√ Successfully administered procurements, prepared and processed all resulting contracts and monitored for administrative, fiscal, and program contract compliance for Children and Families Commission, CFS, CF, CN, DAAS, DCSS, DPH, HS Administration, In-Home Supportive Services, Public Authority, PERC, PSD, Probation Department, Public Guardian, TAD and VA.

√ Prepared, processed, and managed contracts as follows:

  ⇒ Non-financial contracts and amendments 169
  ⇒ Revenue contracts and amendments 32
  ⇒ Service contracts and amendments 263
  ⇒ Employment contracts and amendments 56
  ⇒ Memorandum of Understanding 169
  ⇒ Procurements 22
  ⇒ Contracts monitored 134

√ Collaborated with the Purchasing Department to identify and clarify difficult Electronic Purchasing (ePro) processes.

√ Participated in various committees to update and clarify County policies regarding contracting and procuring.
ACCOMPLISHMENTS CONTINUED

- Demonstrated the HS Contracts database to various officials and department heads.
- Worked with fiscal monitoring staff, department staff, and Program Development Division (PDD) to coordinate and complete contract monitoring per the HS Monitoring Policy.
- Worked with various stakeholders to further refine efficient use of resources and consistency in preparation and processing of Board Agenda Items.
- Attended refresher training on Board Agenda Items writing and interpretation.

**Facilities**
- Opened new 34,000 square foot Redlands TAD facility to replace older Redlands office.
- Opened new 20,000 square foot Yucaipa TAD facility.
- Remodeled and reconfigured existing San Bernardino TAD (4th/Waterman) lobby with new customer service reception area and increased seating capacity to accommodate new business model.
- Opened new 8,500 square foot Needles TAD/CFS/DAAS facility to replace older 7,400 square foot building.
- Opened new 37,000 square foot Rancho Cucamonga CFS facility to replace older 25,000 square foot building.
- Opened new 41,000 square foot San Bernardino CFS facility to replace older 34,000 square foot Carousel Mall location.
- Opened new 15,432 square foot First 5 facility to replace older 12,739 square foot building.
- Converted San Bernardino DAAS admin phone system from open phone switch to cost savings Voice Over IP (VOIP) phone system.

**Finance**
- Coordinated 2014/15 budget process for 20 budget units totaling over $1.1 billion and approximately 5,850 employees.
- Assisted HS departments with maximizing use of available 2013/14 County Expense Claim funding. As a result, 97.5% ($428 million) of available funding was utilized.
- Compiled procedure manual for preparing and completing the County Expense Claim.
- Effectively continued support of the ePro system. Maintained complex HS ePro profiles, coordinated document input into the system, and worked with the Auditor-Controller/Treasurer/Tax Collector to ensure all invoices were paid by year-end.
- Implemented an ongoing process to audit ISD charges and coordinated efforts with ITSD and ISD to implement additional cost savings processes.
ACCOMPLISHMENTS CONTINUED

Storage and Distribution
✓ Partnered with DPH’s “Health Emergency Local Planning Partners” (HELPP) for health emergencies.
✓ Partnered with TAD by hiring and mentoring Work Experience (WEX) employees.
✓ Assisted with the set up and installation of new equipment and office furniture for First 5’s new office.
✓ Hosted two separate giveaway events for VA.
✓ Hosted 6th Annual Children’s Fund holiday toy collection distributing thousands of toys to under privileged children throughout the County.
✓ Established plans to acquire, store and distribute County emergency services and supplies when called upon during an emergency.
✓ Set up and helped establish CFS Camperships and Sports Faire.
✓ Partnered with Bonnes Meres for a spring toy giveaway for children.

Goals for 2014/2015

ASD ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

Contracts
1. Work with HS departments to assess and strengthen payment tracking processes.
2. Continue to work closely with fiscal monitoring staff, department staff, and PDD to coordinate, streamline, and complete all contract monitoring and reports per the HS Monitoring Policy.
3. Collaborate and develop Data Sharing and Medi-Cal Outreach and Enrollment agreements between HS departments, Probation Department, ARMC, and the Sheriff’s Department.
4. Continue to work with various stakeholders to further refine efficient use of resources and consistency in the preparation and processing of Board Agenda Items.
5. Explore and utilize professional development opportunities.
6. Continue to incorporate the Countywide Vision in all work projects.
GOALS CONTINUED

Facilities
1. Replace existing Colton TAD facility (33,000 sq. ft.) with new 41,000 square foot facility.
2. Pursue replacement facility for San Bernardino CFS which will include an Emergency Operations Center.
3. Pursue replacement of existing San Bernardino TAD (Highland/Del Rosa) facility with a new facility to better meet department’s business model.
4. Pursue replacement of existing San Bernardino DAAS Administrative building with larger facility to better serve the department’s business model and clientele.
5. Pursue new Ontario TAD Processing Center facility.
6. Manage San Bernardino PERC furniture reconfiguration project.
8. Create new database to host unit’s furniture/building plans and inventory.

Finance
1. Continue participation in workgroups at County Purchasing Department to assist with countywide support and enhancement of ePro system.
2. Conduct HS budget training presentations as requested for appropriate HS staff.
3. Continue to develop management reporting tools to assist departments and support divisions to operate more effectively and remain within available funding limitations.
4. Work with ITSD and HS departments to identify needs for mobile devices and comply with HS policies regarding issuance guidelines and controls necessary to effectively manage an increasing inventory.
5. Compile procedure manual detailing requirements/procedures for year-end closing process.
6. Work with ITSD to complete refinement and participate in roll out of Online Requisition System.

Storage and Distribution
1. Continue overage box and destruction of old files to make additional storage space and working space for special projects.
2. Lease rack space to interested County departments and solicit new County partners to utilize empty rack space as it becomes available.
3. Expand safety training by attending Risk Management training and monthly meetings hosted by the Safety Forum of the Inland Empire.
4. Continue to provide the best customer service possible.
5. Maintain ability to support County emergencies with fleet of trucks and Storekeeper manpower.
How Outcomes Are Measured

ASD MEASURES OUTCOMES BY THE FOLLOWING METHODS:

ASD measures outcomes through customer evaluations, customer surveys, and comment cards.

Program Information

As identified in our mission statement, ASD provides dedicated resources and administrative support for all HS departments, divisions and programs. ASD consists of the following units:

**Contracts** - Provides procurement and contracting services to all HS departments. The primary function of the unit is to obtain required program services while ensuring public resources are used efficiently and effectively. Staff ensures all procurements and resulting contracts comply with contracting laws, federal and state regulations, and local policies. Fiscal monitoring staff provides fiscal assistance to HS departments and contractors to ensure they operate within their budget constraints and comply with laws and regulations.

**Facilities** - Provides building space coordination and integration services for the physical workplace. Specifically, Facilities coordinates acquisition, use and maintenance of leased facilities; determines future space/equipment requirements; oversees site selection, Request for Proposal (RFP) process and facility construction; secures equipment and supplies; purchases and monitors vehicle fleet, office equipment and furniture inventories; administers security and guard services; and plans and coordinates staff and department relocations.

**Finance** - Develops, prepares, and reviews budgets for departments, support divisions, and subsistence budgets in HS. Collects data and prepares County expenditure claims for HS departments. Processes payments to vendors and employees while applying applicable accounting standards and fiscal controls to ensure that appropriate procurement and purchasing procedures are followed.

**Storage and Distribution** - Provides forms distribution, warehousing, and archive storage.
Staffing Information 2013/2014

Total staffing is approximately 66 employees.

<table>
<thead>
<tr>
<th>Administrative Support Division</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warehouse</td>
<td>23</td>
</tr>
<tr>
<td>Finance</td>
<td>17</td>
</tr>
<tr>
<td>Special Projects</td>
<td>2</td>
</tr>
<tr>
<td>Facilities</td>
<td>9</td>
</tr>
<tr>
<td>Contracts</td>
<td>9</td>
</tr>
<tr>
<td>Administration</td>
<td>6</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The division budget for FY 13/14 is $6,135,870.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

<table>
<thead>
<tr>
<th>Administrative Support Division</th>
<th>Budgeted Appropriation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$570,029</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$5,565,841</td>
</tr>
</tbody>
</table>
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The role of HS Auditing Division is to provide accounting, auditing, collections, and benefit payment services for County departments in Human Services.
Overview

DESCRIPTION

The Human Services (HS) Auditing division submits cost data to the state, which is the mechanism for the County to receive federal and state funds to administer social service and welfare programs to County residents. The division delivers benefit payments for transitional assistance, child care, general relief, and CalFresh programs to residents by County warrant, electronic benefits transfer card, and direct deposit to bank accounts.

Accomplishments for 2013/2014

HS AUDITING ACCOMPLISHED THE FOLLOWING IN 2013/2014:

✓ Met reporting and claiming requirements for transitional assistance paid to program recipients and contractors who delivered those benefits.

✓ Collected approximately $4,919,819 of benefit over-payments through the Welfare Intercept System, intercepting both IRS and Franchise Tax Board (FTB) refunds.

✓ Coordinated Single Audit process between the Auditor-Controller (via external auditors) and HS departments.

✓ Met Social Security department’s fiscal requirements for both the Sub-Payee and Foster Care programs.

✓ Participated in C-IV system workgroups to enhance and refine the system’s capabilities for accounting and reporting purposes.

✓ Conducted financial/compliance audits of over 100 contractors throughout San Bernardino, Riverside, and Los Angeles counties who receive federal and state funding.
HS AUDITING ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Collaborate with Information, Technology & Support Division (ITSD) to automate Wraparound program invoice verification process.

2. Collaborate with ITSD to develop a website aimed at increasing customer awareness of HS Auditing processes and services.

3. Explore possibility of accepting credit card, ATM and EBT payments at the front counter and/or over the phone.

4. Transfer microfiche accounting ledger images to CD in order to preserve images for future reference.

5. Purchase and implement audit management software in order to increase the efficiency of the audit and review process.

6. Automate the prepaid card and check counting and verification process by purchasing automated tools such as an electronic card/check counter and check scanner.

7. Develop online fiscal training relative to internal controls for immediate use by HS fiscal staff including newly hired personnel.

8. Establish a new unit with a specialty in collection, remittance and reconciliation for processes such as Child Support and In-Home Supportive Services.
### How Outcomes Are Measured

**HS AUDITING MEASURES OUTCOMES BY THE FOLLOWING METHODS:**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial and statistical reports submitted within state guidelines and time frames.</td>
<td>• Percentage of reports submitted within specified time frames = 100%.</td>
</tr>
<tr>
<td>Benefit payments issued to clients in a timely and accurate manner.</td>
<td>• Percentage of system-ready benefits audited and processed with 24 hours of availability = 100%.</td>
</tr>
<tr>
<td>Continuous improvement of business processes and best practice ideas generated by staff.</td>
<td>• Feedback from customers.</td>
</tr>
</tbody>
</table>
Program Information

HS Auditing performs a variety of fiscal operations and functions that support the County’s administration of welfare programs and provides services to departments in HS as follows:

- Prepares assistance claims, which are required for funding and reporting benefits provided to County residents.
- Collects over-payments from benefit recipients.
- Serves as representative payee for Social Security benefits for HS customers who are unable to manage their financial affairs.
- Prepares statistical data for mandated state and federal reporting.
- Provides safekeeping and inventory monitoring of negotiable items: bus passes, gas cards, electronic benefit card stock, warrant and check stock, and voucher forms.
- Reconciles welfare accounting data to accounting records of the County Auditor-Controller/Treasurer/Tax Collector.
- Provides audit assistance and training to HS departments relative to developing and updating internal controls and accounting procedures.
- Reviews auditing and accounting standards, and federal and state fiscal regulations to ensure HS compliance.
- Coordinates the Single Audit process and all state and federal audits/reviews for HS departments.

Statistical Information

<table>
<thead>
<tr>
<th>Activity</th>
<th>No. Issued</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash benefits issued electronically (EBT)</td>
<td>675,471</td>
<td>$361,645,693.00</td>
</tr>
<tr>
<td>Cash benefits issued by warrant (MW, GR, CIV)</td>
<td>297,848</td>
<td>$190,503,196.05</td>
</tr>
<tr>
<td>Collection of benefit over-payments</td>
<td></td>
<td>$18,487,524.00</td>
</tr>
</tbody>
</table>
Total staffing is approximately 45 employees.

<table>
<thead>
<tr>
<th>Staffing Information 2013/2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total staffing is approximately 45 employees.</strong></td>
</tr>
</tbody>
</table>

### Budget Information 2013/2014

The division budget for FY 13/14 is $4,291,211.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

### HS Auditing Budgeted Appropriation

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$848,264</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$3,442,947</td>
</tr>
</tbody>
</table>
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The Information, Technology & Support Division (ITSD) provides business and technology solutions to Human Services departments and divisions through business consulting, application development, systems consulting and support.
The Information, Technology & Support Division (ITSD) strives to become the provider of choice for Human Services (HS) departments and divisions. We are committed to providing innovative business and technology solutions to improve the work processes of our customers. Through a partnership with our customers and our team dedication to their success, we deliver customized solutions to meet our customers’ needs. ITSD integrates industry standards and best practice methodologies to support HS departments and divisions in delivering services to the public.

**Accomplishments for 2013/2014**

**ITSD ACCOMPLISHED THE FOLLOWING IN 2013/2014:**

**Application Development Team (ADT)**
- Developed new application for Program Integrity Division (PID) and Children and Family Services (CFS) to manage Critical Incident cases and investigations known as the Case Assessment Review and Tracking System (CARATS); currently in test phase.
- Finished General Relief report migration from Crystal Reports to Reporting Services.
- Implemented Personably Identifiable Information (PII) logging in the Department of Child Support Services (DCSS) Public Automated Check-in System (PACS) Application and DCSS Data Reporting and Warehouse (DRAW) Application.
- Developed and implemented DCSS PII Log Viewer Application.
- Continued support, application development, and customer programming for SharePoint.
- Completed enhancements to Travel Request System; currently in test phase.
- Installed and configured a portion of new SQL 2012 Database Architecture.

**Business Solutions Unit (BSU)**
- Managed 41 IT projects to increase team efficiencies and better serve customer’s needs.
- Continued work in phase two (SharePoint) project management data base with Business Intelligence to better serve internal and external clients, customers and collaborators.
- Created mobile device support team to provide customer service to mobile device users in the field.
ACCOMPLISHMENTS CONTINUED

✓ Completed maintenance data files used by partners for Low Income Health Program (LIHP) and/or Health Care Reform (HCR) programs.

✓ Completed phase two analysis for Project Portfolio Management (PPM) and Project Management Office (PMO) solutions for future development.

**Systems Operations & Support (SOS)**

✓ Assisted with completion of personal computer (PC) refresh project for the Transitional Assistance Department (TAD), CFS, and the Department of Aging and Adult Services (DAAS).

✓ Completed relocation of HS computer equipment to the Information Services Department (ISD) computer room to meet new power and cooling requirements.

✓ Implemented pilot for Microsoft Lync Video Conferencing and Instant Messaging.

✓ Completed implementation of CommVault, a new system backup software solution.

✓ Implemented pilot for BlueCoat internet monitoring reporting tool.

✓ Moved and/or relocated PC’s and peripheral equipment for 10 TAD and CFS offices.

✓ Completed CFS Polycom Video Conferencing deployment for new offices.

**Software Quality Assurance (SQA)**

✓ Completed 1,227 website updates and 141 SharePoint support requests from HS customers.

✓ Supported all ITSD units in the testing and implementation of over 30 projects.

✓ Completed conversion of the Program Development Division’s (PDDs) internal website to a public SharePoint site.

✓ Completed phase one of California Healthcare Eligibility, Enrollment, and Retention System (CalHeers) Help Desk and began phase two.

✓ Completed the CFS internet facing SharePoint site.

✓ Completed implementation of K2 BlackPearl and Smart Forms to allow users to build and run business applications for internal SharePoint 2010 environment.

✓ Completed implementation of Vizit to enhance user search capabilities for internal and external SharePoint 2010 environments.

✓ Completed Public Authority internet form on SharePoint.

✓ Completed Children’s Network (CN) intranet and internet SharePoint sites.

✓ Completed the Volunteer Income Tax Assistance (VITA) website for TAD.
**Goals for 2014/2015**

ITSD ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

**Application Development Team (ADT)**
1. Implement production of CARATS Application for PID.
2. Design, code, test and implement Personnel application.
3. Fully implement Imperva PII tracking.
4. Continue SharePoint support, application development, and custom programming.
5. Implement production of Travel Request System.
6. Analyze ADT’s development framework, software, tools and technologies and implement new development process that will allow the unit to improve service delivery, productivity and quality.
7. Complete phase two Online Requisition System (ORS) enhancements.
10. Continue to support local C-IV Data Warehouse processing and convert to SQL 2012.
11. Develop and test new SQL 2012 Data Warehouse environment.

**Business Solutions Unit (BSU)**
1. Expand level two BSU customer service support for completed projects.
2. Implement phase one imaging/scanning production for departments and support divisions.
3. Continue to support and maintain Medi-Cal PII solution throughout HS departments.

**Systems Operations & Support (SOS)**
1. Complete phase two of standardized Storage Area Network (SAN) technology implementation.
2. Implement new tape back-up hardware infrastructure.
3. Replace current ITSD Help Desk product using ISD’s new Help Desk infrastructure.
GOALS CONTINUED

5. Develop pilot enabling HS employees with domain accounts to use a private cloud-style file sharing system.

6. Complete implementation of BlueCoat internet monitoring reporting tool.

7. Refresh seven Polycom Video Conferencing units within TAD.

Software Quality Assurance (SQA)
1. Continue conversion of public websites to public SharePoint sites allowing departments to manage site content.

2. Continue conversion of internal websites to SharePoint sites allowing departments to manage site content.

3. Develop a SharePoint site for the Family Stabilization project to collect information and produce reports.

4. Implement Children’s Assessment Center on SharePoint internet facing farm.

5. Complete implementation of handbooks, forms, and user guides within SharePoint.

6. Update internet facing SharePoint index service to increase relevant results, and develop a solution to limit internet search crawlers for security.

7. Perform testing for TAD technology upgrade from Internet Explorer 8 to Internet Explorer 10.

8. Move HS Personnel website from intranet to SharePoint site.

9. Implement new Work Experience Program (WEX) SharePoint site.

How Outcomes Are Measured

ITSD MEASURES OUTCOMES BY THE FOLLOWING METHODS:

ITSD measures outcomes through customer feedback from HS departments and divisions. Information received is organized and reviewed to measure the impact, changes and benefits offered to its customers.
ITSD provides business and technology solutions to HS departments and divisions through business consulting, application development, system consulting and support. ITSD accomplishes its mission through integration of four units working dependently and independently as one division within HS.

**Application Development Team (ADT)** - ADT develops and supports applications, including technical consultation, user interface design, software application design, web design, data conversion, report creation and development, Ad Hoc reports, and technical documentation.

**Business Solutions Unit (BSU)** - BSU provides business process analysis and project management for the purpose of improving business systems in HS departments and divisions. Its main function is to act as customer service liaison between HS customers and technical staff.

**Systems Operations & Support (SOS)** - SOS provides technical support for HS's hardware and software needs, including Help Desk assistance, onsite desktop and peripherals, IT inventory and vendor quotes, warehousing, networking, data storage, data back-ups, data security, printing, scanning and imaging, mobile phones and devices, and audio/video.

**Software Quality Assurance (SQA)** - SQA team ensures the software products and processes conform to the customer’s specific requirements and standards are met. In addition, this team is another level in software testing. SQA performs detailed system testing of applications that reduces programmer and user testing time.
**Statistical Information**

SOS provides support to approximately 6,000 users in 140 HS offices countywide. The charts below detail equipment supported and services provided.

<table>
<thead>
<tr>
<th>Equipment</th>
<th>2013/14</th>
<th>2012/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desktop computer systems (C-IV and non C-IV)</td>
<td>9,362</td>
<td>8,137</td>
</tr>
<tr>
<td>Printers (network and personal)</td>
<td>1,835</td>
<td>1,747</td>
</tr>
<tr>
<td>Laptops</td>
<td>797</td>
<td>713</td>
</tr>
<tr>
<td>Servers (physical)</td>
<td>190</td>
<td>147</td>
</tr>
<tr>
<td>Servers (virtual)</td>
<td>126</td>
<td>162</td>
</tr>
<tr>
<td>Switches</td>
<td>124</td>
<td>121</td>
</tr>
<tr>
<td>UPS (Universal Power Supply)</td>
<td>203</td>
<td>184</td>
</tr>
<tr>
<td>Pocket PC’s’s</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Projectors</td>
<td>155</td>
<td>167</td>
</tr>
<tr>
<td>Scanners (non C-IV)</td>
<td>157</td>
<td>234</td>
</tr>
<tr>
<td>C-IV Scanners</td>
<td>2,476</td>
<td>2,093</td>
</tr>
<tr>
<td>Wireless Access Points</td>
<td>259</td>
<td>235</td>
</tr>
<tr>
<td>Service Provided</td>
<td>2013/14</td>
<td>2012/13</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td>Calls to Help Desk</td>
<td>30,057</td>
<td>19,830</td>
</tr>
<tr>
<td>New equipment installed</td>
<td>301</td>
<td>332</td>
</tr>
<tr>
<td>Moved/changed-out equipment</td>
<td>2,330*</td>
<td>990</td>
</tr>
<tr>
<td>Servers installed (new or upgraded)</td>
<td>20</td>
<td>44</td>
</tr>
<tr>
<td>Site inventories</td>
<td>90</td>
<td>82</td>
</tr>
<tr>
<td>Equipment and software orders for departments</td>
<td>326</td>
<td>368</td>
</tr>
<tr>
<td>County-owned Smart phones</td>
<td>165</td>
<td>120</td>
</tr>
<tr>
<td>Site moves and remodels</td>
<td>15</td>
<td>8</td>
</tr>
</tbody>
</table>

* Includes TAD, CFS and DAAS refresh projects.
Staffing Information 2013/2014

Total staffing is approximately 100 employees.

<table>
<thead>
<tr>
<th>Information, Technology &amp; Support Division</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical</td>
<td>4</td>
</tr>
<tr>
<td>IT Support</td>
<td>28</td>
</tr>
<tr>
<td>Programmers</td>
<td>16</td>
</tr>
<tr>
<td>Automated Systems Analysts</td>
<td>20</td>
</tr>
<tr>
<td>Automated Systems Techs</td>
<td>27</td>
</tr>
<tr>
<td>Management</td>
<td>5</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The division budget for FY 13/14 is $12,753,267.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

<table>
<thead>
<tr>
<th>Information, Technology &amp; Support Division</th>
<th>Budgeted Appropriation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$2,444,605</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$10,308,662</td>
</tr>
</tbody>
</table>
The Performance, Education & Resource Centers (PERC) further professional development, promote rich educational opportunities, and create excellence in and among individuals and organizations. We accomplish this by using the most current resources in providing quality, comprehensive training, organizational consulting, facilitation, and career development services.
Overview

The Performance, Education & Resource Centers (PERC) provides workplace training to assist groups and individuals with identifying and achieving professional and operational goals. Skilled professionals develop, coordinate, and deliver training that supports and prepares the County’s workforce to meet the needs of our community. Customized performance improvement services are available. PERC also processes tuition reimbursements for many occupational units. In addition to these services, PERC supports departments within the Human Services (HS) organization with the development and coordination of internal and external communications and media relations.

Accomplishments for 2013/2014

PERC ACCOMPLISHED THE FOLLOWING IN 2013/2014:

✓ Increased community awareness of Human Services programs via social media campaigns and outreach, press releases, radio/television appearances, video, and online annual report.

✓ Transitioned to an online version of the Human Services Connection newsletter and Human Services Annual Report.

✓ Conducted Training for Trainers and partnered with District Training Mentor Program (DTMP) to assist with training. DTMP received a National Association of Counties (NACo) award.

✓ Served as Training Coordinator between San Bernardino County and Covered California for Affordable Care Act implementation.

✓ Developed and delivered Health Care reform training to over 1,700 eligibility staff.

✓ Developed and delivered a statewide webinar to all counties on behalf of the California Welfare Directors Association (CWDA) on Affordable Care Act training and implementation.

✓ Launched a new Civil Rights e-learning module for all Human Services employees; achieved 100% compliance.

✓ Implemented the use of Adobe Connect to host online training forums and focus groups.
ACCOMPLISHMENTS CONTINUED

√ Attained 100% compliance of the mandatory training hours required by the California Department of Social Services (CDSS).

Goals for 2014/2015

PERC ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Expand the use of information and communication technology resources and tools to enhance training options and deliverables.
2. Enhance Human Services succession planning services.
3. Identify underutilized classes and resources in order to increase awareness, communicate their benefits, and improve utilization.
4. On a monthly basis, forecast department initiatives.
5. Assess and redesign Orientation & Induction (on-boarding) curriculum.

CalFresh/CalWORKs Orientation and Induction training
PERC MEASURES OUTCOMES BY THE FOLLOWING METHODS:

Results are measured through a customer driven approach, which includes the following methods:

- Student evaluations; participant response
- Feedback from collaborative partners
- Cognitive outcomes and knowledge checks
- Skill-based outcomes
- Pre-/post-assessments
- Transfer of learning
- Program evaluation
- Peer review and self-evaluation

Employee Training and Development
PERC provides initial and ongoing job skills training in support of various HS programs. These include:

- Orientation and Induction (O&I) training for new Eligibility Workers in the Transitional Assistance Department (TAD)
- Orientation and Induction (O&I) training for new Social Workers in Children and Family Services (CFS)
- Ongoing program training for TAD, CFS and the Department of Aging and Adult Services (DAAS)

PERC is a continuing education provider accredited by the Board of Behavioral Sciences.
In addition to programmatic training, PERC offers a broad spectrum of general enrollment training to County employees. These programs are designed to assist employees with professional development and skill enhancement. Standard training categories include:

- Supervision and Management
- Leadership
- Professional and Career Development
- Computer Applications
- Interpersonal Skills
- Written and Verbal Communication
- New Employee Orientation
- Training Mandated by State or Federal Regulations or County Policy

The Management & Leadership Academy (MLA), Fundamentals of Supervision, and Fundamentals of Management are eligible for degree applicable credit from California State University, San Bernardino.

**Organizational Development**

PERC offers custom services to County departments, as well as public and private sector organizations throughout the Inland Empire. PERC’s professional consultants are available to assist departments with the following services:

- Consultations and Assessments
- Succession Planning
- Meeting Facilitation
- Team Building
- Work Process Mapping
- Strategic Planning
- Performance Improvement Solutions
- Data Collection
- Other Custom Services
**Media and Communication Services**

PERC provides a wide range of media and communication services for HS departments. The Human Services Communications Officer oversees these services, acting as a liaison to the County’s Public Information Office and serving as a point of contact for media inquiries related to HS departments or services. PERC’s Communication Unit issues press releases, creates and manages various social media sites, assists with creating marketing materials, produces the HS Annual Report, and responds to requests for information from the media. This unit is also responsible for assisting with internal communication among HS departments through the monthly publication of the HS Connection e-newsletter.

*Human Services Connection e-newsletter*

*“Dogs in Hoarding Case Available for Adoption” Video*

*The Communications Unit received the 2014 Excellence in Communications Awards from the California Association of Public Information Officials for the online HS Connection newsletter and photography of “Dogs of Rainbow’s End.”*

*CFS Director Randall Schulz and Assistant Director Marlene Hagen in the KFON-TV studio recording a “Local Matters” session with Fontana Mayor Acquanetta Warren.*
Total staffing is approximately 36 employees.

### Performance, Education & Resource Centers

**Budgeted Staffing**

<table>
<thead>
<tr>
<th>Category</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical</td>
<td>8</td>
</tr>
<tr>
<td>Training and Development</td>
<td>11</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>5</td>
</tr>
<tr>
<td>Staff Training Instructors</td>
<td>10</td>
</tr>
<tr>
<td>Management</td>
<td>2</td>
</tr>
</tbody>
</table>

### Budget Information 2013/2014

The division budget for FY 13/14 is $4,462,839.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

### Performance, Education & Resource Centers

**Budgeted Appropriation**

<table>
<thead>
<tr>
<th>Category</th>
<th>Appropriation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$1,293,128</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$3,169,711</td>
</tr>
</tbody>
</table>
Our mission at Human Services (HS) Personnel is to provide high quality customer service, ensuring HS employees receive their pay and benefits in a prompt and accurate manner, while providing HS departments the staffing tools they need to provide critical services to County customers.
Overview

Human Services (HS) Personnel is responsible for handling departmental needs, which includes managing payroll and handling internal personnel transactions for over 5,400 employees. Departments served include Children’s Network (CN), Children and Family Services (CFS), Department of Aging and Adult Services (DAAS), Preschool Services Department (PSD), Transitional Assistance Department (TAD), Information, Technology & Support Division (ITSD), Performance, Education & Resource Centers (PERC), HS Management Services, Work Experience Workers (WEX) and volunteers.

Accomplishments for 2013/2014

HS PERSONNEL ACCOMPLISHED THE FOLLOWING IN 2013/2014:

√ Completed redesign and overhaul of HS Personnel website.
√ Began electronic delivery of several paper reports needed internally within HS, thereby saving time and resources.
√ Began utilizing recommendations from Phase IV of the Personnel Database requirements.
√ Identified, developed and tracked management/supervisory training needs.
√ Redesigned and completed new customer lobby to enhance productivity and customer experience.
√ Updated several microfiche personnel records for electronic accessibility.
√ Updated and completed new Personnel and Payroll Procedures for Supervisors manual.
HS PERSONNEL ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Successfully complete several off-site trainings to address new personnel/payroll procedures and recent changes to the Memorandum of Understanding (MOU).
2. Begin identifying and tracking HS supervisory and management promotions to better assist newly promoted employees with learning E-Time responsibilities and functions.
3. Continue to monitor the success and examine the electronic report delivery process to further reduce and/or eliminate paper reports.
4. In conjunction with ITSD, complete Phase IV of the Personnel Database and proceed to full requirement functionality.
5. Finish transition of microfiche records for full electronic availability.
6. Expand outreach efforts towards departments and divisions to offer trainings and presentations, and increase awareness of HS Personnel duties and services offered.
7. Build upon the fast and efficient delivery of services to customers and explore additional ways to enhance or augment customer service practices.

How Outcomes Are Measured

HS PERSONNEL MEASURES OUTCOMES BY THE FOLLOWING METHODS:

Outcomes for payroll are measured on a bi-weekly basis by the number of time sheets processed, the number of pay warrants issued, and the timeliness of completion.

Outcomes for all other HS Personnel transactions are measured by frequency of satisfied department-requested start dates, validity of transaction-required paperwork, and turnaround expectations set forth by the County’s Employee Management and Compensation System (EMACS) requirements.

Outcomes for the Volunteer Program are measured by the responses received from recruitments, utilization of volunteer services by departments, feedback from departments and feedback from the HS Personnel website.
Payroll
Responsible for completing all required pre-employment paperwork for newly hired, promoted, or transferred employees; arranging pre-employment physicals, Live Scan fingerprinting and background checks; processing reference checks and employment verifications; maintaining files of all interview materials; processing all electronic time sheets, disability and extended leave paperwork; making payroll corrections; processing step advancements, work performance evaluations and required paperwork to place new employee information in the payroll system; performing reception/customer service, telephone, photo identification card, and mail distribution duties.

Integrated Volunteer Program
Responsible for conducting recruitments; processing applicants; assisting departments in tracking volunteer hours worked; filling vacancies; writing and maintaining volunteer assignment descriptions; maintaining volunteer personnel files; writing public service announcements and press releases; representing the program at a variety of service organizations, school meetings and functions; and maintaining the volunteer website.
Total staffing is approximately 23 employees.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

The division budget for FY 13/14 is $1,706,456.
Deputy Director Lory Klopfer

The mission of the Program Development Division (PDD) is to provide accurate and timely program and policy development to HS departments and other agencies, through collaboration, communication, and education.
The Program Development Division (PDD) performs program and policy development support services for Human Services (HS) and other County agency customers. The division provides program representation for HS departments to state, county, and local agencies. PDD coordinates the implementation of adopted legislation, regulations, and state/federal policy clarifications. The division develops and maintains administrative program, policy and operations manuals; automated systems user guides; forms; and notifications for use by over 6,000 staff in HS departments.

The division is comprised of six units providing program and policy development services to HS and other County agency customers:

* Adult Services/Contracts Support
* Children and Family Services (CFS)
* Transitional Assistance Department (TAD) Health Care Programs/Special Projects
* TAD Eligibility/Welfare to Work (WTW)
* Human Services Policy/Privacy & Security/Legislation
* Office Administration & Support
Accomplishments for 2013/2014

PDD ACCOMPLISHED THE FOLLOWING IN 2013/2014:

√ Provided program and policy development products/services to assist HS departments in meeting their FY 2013/14 business plan objectives, publishing and disseminating 3,239 policy and procedure products.

√ Developed and/or maintained 3,494 electronic forms in an on-line repository.

√ Analyzed and implemented 405 state regulatory letters/notice.

√ Developed and disseminated 3,208 Frequently Asked Questions for the online knowledge database.

√ Supported a total of 344 contracts/Memorandum of Understanding (MOUs).

√ Provided response and resolution to 2,644 C-IV system trouble tickets, and processed 874 California Healthcare Eligibility and Enrollment System (CalHEERS) trouble tickets.

√ Developed and issued 1,970 Medi-Cal Eligibility Determination System (MEDS) reports for compliance action by TAD staff.

√ Developed submissions for ten National Association of Counties (NACo) 2014 Achievement Awards with seven awards received, and developed six submissions for the California State Association of Counties (CSAC) Challenge Award competition.

√ Acted as the central agency for the development and monitoring of privacy and security policy related to Personally Identifiable Information (PII) for HS departments and facilitated 20 privacy and security trainings to ensure compliance with regulations.

√ Collaborated with the HS Emergency Services Unit to initiate the development of an HS disaster preparedness program and its supporting policies, and assisted HS departments with departmental Emergency Operations Plans.

√ Facilitated Health Care Reform (HCR) Coalition meetings, and coordinated with HS departments, national and state associations, and federal and state agencies on legislation and implementation of the federal Affordable Care Act (ACA) effective January 1, 2014.

√ Assisted HS departments in securing $1.3 million in grant funding to enhance Medi-Cal outreach and enrollment efforts among high-risk and underserved populations.

√ Transitioned HS legislative duties to PDD; reviewed, monitored and reported on more than 600 bills related to human services and assisted HS departments in developing their input to the County’s federal and state legislative platforms.
ACCOMPLISHMENTS CONTINUED


✓ Assisted TAD with the development of policies and procedures for ACA implementation, which expanded the Medi-Cal program to childless adults, provided a new budgeting methodology in a separate automated system, and required staff to become knowledgeable about the health care plans available in Covered California, the state’s insurance marketplace.

✓ Supported TAD’s transition of 61,704 Healthy Families children, 30,000 Low Income Health Program (LIHP) adults, and hundreds of CalFresh recipients (using Express Lane enrollment), into the Medi-Cal program.

✓ Developed policies, procedures, tools, knowledge assets and technical support for TAD implementation of major program changes in the CalFresh, CalWORKs, Cal-Learn, Child Care, Foster Care, Medi-Cal and Welfare-to-Work programs and supported annual Volunteer Income Tax Assistance (VITA) program efforts.

✓ Provided TAD with User Guides and technical assistance for C-IV automation changes and usage of CalHEERS.

✓ Supported TAD’s efficiency measures including implementation of telephone interviews for CalWORKs Re-Evaluations, transitioning Child Care from eligibility to WTW, Customer Service Center Work@Home staff policies, Lobby Management pilot procedures, and Processing Center planning.

✓ Performed project management services for implementation of Child Abuse Prevention and Treatment Services (CAPTS) and produced the Promoting Safe and Stable Families/Child Abuse Prevention, Intervention and Treatment (PSSF/CAPIT) state report.

✓ Provided program and contract support services for the establishment of five CFS Family Visitation Centers.

✓ Supported ongoing implementation of CFS Business Redesign initiatives including the CFS View monthly presentation, communication plan, and use of technology.

✓ Provided project management services for CFS implementation of Core Practice Model/Katie A.

✓ Collaborated with CFS to produce County Self-Reassessment, System Improvement Plan and public summary booklet.

✓ Provided project management services for implementation of Case Management Information and Payrolling System II (CMIPS) and supported the Department of Aging and Adult Services (DAAS) with post-implementation technical services.
ACCOMPLISHMENTS CONTINUED

✓ Provided project management services to DAAS for implementation of Cal MediConnect component of the Coordinated Care Initiative (CCI).

✓ Coordinated DAAS Redesign initiative and changes to In-Home Supportive Services (IHSS) provider payroll duties.

✓ Supported DAAS in implementing the IHSS Statewide Program Integrity Protocol.

✓ Supported initiation, development and implementation of DAAS Mentoring Program.

Goals for 2014/2015

PDD ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

1. Provide project management and facilitation to support HS and County partners’ collaborations/initiatives.

2. Support County disaster planning efforts by publishing all HSPSP handbook sections related to disaster preparedness.

3. Facilitate HS efforts to improve integration and delivery of ACA and Medi-Cal program services to the remaining uninsured populations.


5. Assist TAD with implementation of several new programs and contracts to bring new revenue to the department and enable expansion of services, effective utilization of non-profit and community resources, and streamlined operations for maximum efficiency.

6. Provide project management services to DAAS and Public Authority for implementation of new overtime regulations for IHSS providers.

7. Continue training and development of staff in project management tools and techniques, publication design software, leadership skills, and succession planning.

8. Continually assess internal operations to ensure efficient and effective operations, which include adopting new technology to improve accessibility and speed of delivering policy handbooks, forms and Vision documents to HS departments.
## PDD Measures Outcomes by the Following Methods:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support CFS in implementation of 12 business redesign initiatives, Katie A./Core Practice Model and Safety Organized Practice (SOP).</td>
<td>• Increase number of policy publications and related tools produced for achievement of CFS redesign goals.</td>
</tr>
<tr>
<td></td>
<td>• Nominate major redesign initiatives for national and state awards.</td>
</tr>
<tr>
<td>Assist TAD with implementation of several new programs and contracts to bring new revenue to the department and enable expansion of services, effective utilization of non-profit and community resources, and streamlined operations for maximum efficiency.</td>
<td>• Increase CalWORKs allocation by $1,075,906 to provide new Housing Support services to 405 homeless families.</td>
</tr>
<tr>
<td></td>
<td>• Increase funding by $1,300,564 for Medi-Cal outreach and enrollment to increase Medi-Cal coverage of the uninsured population.</td>
</tr>
<tr>
<td></td>
<td>• Expand services to the community through contracted services including Tribal TANF and WTW Family Stabilization services.</td>
</tr>
<tr>
<td></td>
<td>• Monitor 100% of contracts and analyze compliance with performance and program outcome measures.</td>
</tr>
<tr>
<td>Provide project management services to DAAS and Public Authority for implementation of new overtime regulations for IHSS providers.</td>
<td>• Complete the development of all pertinent policy and procedure publications.</td>
</tr>
<tr>
<td></td>
<td>• Develop tools and solutions to ensure the smooth ongoing operation of overtime regulation.</td>
</tr>
<tr>
<td>Continue training and development of staff in project management tools and techniques, publication design software, leadership skills, and succession planning.</td>
<td>• Track completion of MS project training for 17 PDD staff and evaluation comprehension based on use of the software for managing major projects.</td>
</tr>
<tr>
<td></td>
<td>• Track completion of leadership training for existing staff and program specialists O&amp;I training of new staff.</td>
</tr>
</tbody>
</table>
Services provided by the division support HS departments’ objectives and successful outcomes.

1. Develop knowledge assets, such as policy and procedure handbooks, forms, and electronic tools for use by HS staff.

2. Review and determine the potential impact of proposed and enacted federal and state regulatory/legislative changes on specific programs and services, providing recommendations and impact analysis to customers.

3. Initiate and maintain contact with federal, state, and other officials to ensure accurate local implementation of regulations.

4. Act as operational, programmatic or technical expert for the various HS programs. Conduct and coordinate comprehensive research and analytical studies of program and operational activities.

5. Organize, coordinate, and monitor progress of special projects and provide reports for HS management.

6. Assist in preparing contract solicitations and monitoring contract program compliance.

7. Prepare reports and recommendations for appropriate action, based on research and studies.

8. Provide assistance to customer department and management concerning program-related questions or complaints received from the public or community stakeholders.


10. Provide technical assistance and guidelines to staff on use of automated case management systems.

11. Research, prepare and coordinate requests for available funding opportunities.

12. Coordinate legislative analysis and support and assist in developing legislative platforms.

13. Review, track and monitor HS related bills.
Staffing Information 2013/2014

Total staffing is approximately 59 employees.

![Program Development Division Budgeted Staffing](image)

Budget Information 2013/2014

The division budget for FY 13/14 is $5,480,860.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

![Program Development Division Budgeted Appropriation](image)
The Program Integrity Division (PID) is devoted to providing quality services to the Human Services departments it serves, and is committed to ensuring that welfare programs are administered fairly, equally, and without system abuse.
**Overview**

**DESCRIPTION**

The Program Integrity Division (PID) provides supportive services to three Human Services (HS) departments: the Transitional Assistance Department (TAD), Children and Family Services (CFS) and the Department of Aging and Adult Services (DAAS). These include specialized functions, which are mandated by the state to be apart from benefit processing, ongoing tasks that require special training, as well as special projects and assistance for unusual situations.

PID is comprised of four units with unique functions that support HS departments.

1. Case Review Unit (CRU)
2. Quality Review Unit (QRU)
3. Appeals Unit (AU)
4. Fraud Investigation Unit (FIU)

**Accomplishments for 2013/2014**

**PID ACCOMPLISHED THE FOLLOWING IN 2013/2014:**

**Case Review Unit (CRU)**

- Initiated the planning and development stages of the new web-based Case Assessment, Review and Tracking System (CARATS) in cooperation with Information, Technology & Support Division (ITSD).
- Processed 74 Critical Incident (CI) referrals comprised of in-depth investigation, analysis, recommendations and conclusions for process development and policy/procedure revision with the goal of reducing liability exposure for the County.
- Received and processed 80 Grievance Review Hearing requests.
- Completed assignment of the Hearing Officer duties for the ArrowCare Low Income Health Program (LIHP) appeals through December 31, 2013.
- Received and completed 65 fatality/near fatality referrals.
ACCOMPLISHMENTS CONTINUED

- Continued involvement as core participants at MDT meetings, including:
  - Child Death Review
  - Children’s Assessment Center (CAC)
  - Loma Linda University Children’s Hospital, Child Abuse Team
  - Elder Abuse Team
- Received 166 ArrowCare LIHP Appeals of Action; 32 were adjudicated; 26 actions upheld; 6 granted to claimant.

**Quality Review Unit (QRU)**
- Performed 6,608 home visits in support of eligibility and benefit determinations.
- Conducted 66,692 case reviews in support of the Quality Assurance/Quality Control function, Failure to Provide function, Welfare-to-Work program, TAD Tier/Focus Review System and CalFresh Negative Reviews.
- Reviewed 52,861 CalWORKs cases to determine eligibility for adults based on time-on-aid.
- Reconciled 90,662 earned income abstracts resulting in the establishment of $1,247,953 CalWORKs over-payments and $5,306,985 CalFresh over-issuances.
- Trained all QRU staff in Health Care Reform and Semi-Annual Reporting for CalWORks and CalFresh.
- Successfully transitioned to the SMART case review program for all quality assurance reviews and re-reviews completed by QRU.

**Appeals Unit (AU)**
- Received and processed 6,701 requests for hearing.
- Disqualified 201 persons from participation in the CalWORKs and/or CalFresh programs through the Administrative Disqualification process.
- Participated in state workgroups working towards improved statewide practices while preserving the County’s interests.
- Partnered with ITSD and CFS in developing a new database for specific identified hearings that involve both Appeals and CFS. The new database will provide for communication of hearing status and results among all parties.
- Adapted current and developed new processes relevant to numerous program changes including the many components of Health Care Reform.
- Provided excellent customer service to claimants through the resolution of filings within the first few days of their filing a request for hearing.
ACCOMPLISHMENTS CONTINUED

**Fraud Investigation Unit (FIU)**

- Continued to lead the state as one of the first fraud units in California to implement CalFresh benefits trafficking program resulting in 292 cases involving EBT trafficking being investigated and forwarded to the Appeals Unit for review. Out of those cases, action was taken on 164, which resulted in disqualification through either a waiver process or a hearing decision by an administrative law judge.

- Completed 2,428 fraud referrals utilizing a computerized analytic data report through June 2014 with a total of 689 cases with discrepancies, for an overall discrepancy rate of 28 percent.

- Referred 151 felony cases to the District Attorney’s Office for prosecution, with an additional 156 cases sent to collections.

- Identified $1,194,954.91 in fraud overpayment/over-issuance which was sent to the District Attorney’s Office for prosecution, while the total amount sent to collections was $475,166.

- Completed a total of 11,274 case investigations.

**Goals for 2014/2015**

**PID Established the following goals for 2014/2015:**

**Case Review Unit (CRU)**

1. Complete testing and development phase of CARATS and fully implement the new system.

2. Continue focus on the reduction of County liability and exposure by identifying significant abuse trends and outlining areas of improvement in managing Critical Incidents.

3. Continue efforts to increase awareness of CRU and the Critical Incident referral process through communication, feedback and increased personal contact with staff.

**Quality Review Unit (QRU)**

1. Develop and implement a CalWORKs/CalFresh recoupment computation unit.

2. Develop and implement an expanded Home Call process.

**Appeals Unit (AU)**

1. Continue to evaluate unit practices refining, updating and developing innovative approaches to achieve and maintain successful outcomes.
GOALS CONTINUED

2. Continue to work on and improve communication and increase positive interaction with all departments served through active participation and collaboration in the resolution of obstacles and achieving common goals.

3. Increase the number of skill enhancement focused trainings given to staff to increase successful outcomes in hearing.

Fraud Investigation Unit (FIU)
1. Continue to provide optimum customer service to TAD.

2. Complete referrals in a timely and thorough manner, and reduce caseload backlog to a minimum.

3. Continue to provide training to FIU investigators and supervisors in order to maintain an updated and professional staff, ensuring staff are up to date in accepted law enforcement practices and performing in a professional and competent manner.

How Outcomes Are Measured

PID MEASURES OUTCOMES BY THE FOLLOWING METHODS:

1. Analyzing data and tracking specific program outcomes.

2. Surveying staff members.

3. Testing effectiveness of improvements to programs, policies, and processes.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Review Unit</td>
<td>• Fully implement system’s functions.</td>
</tr>
<tr>
<td>Complete testing and development phase of CARATS and full implementation of the new system.</td>
<td>• User feedback.</td>
</tr>
<tr>
<td>Continue to focus on the reduction of County liability and exposure by identifying significant trends and outlining areas of improvement in managing Critical Incidents.</td>
<td>• Add/revise County policy</td>
</tr>
<tr>
<td></td>
<td>• Customer feedback.</td>
</tr>
<tr>
<td></td>
<td>• Corrective action taken on identified problem areas tracked via Action Item reports.</td>
</tr>
</tbody>
</table>
### Activity

#### Quality Review Unit
Develop and implement a CalWORKs/CalFresh recoupment computation unit.
Develop and implement an expanded Home Call process.

- Track the number and dollar amounts of recovery accounts created and activated.
- Track and monitor the number of additional home visits completed.
- Feedback from TAD.

#### Appeals Unit
Continue to work on and improve communication and increase positive interaction with all departments served through active participation and collaboration in the resolution of obstacles and achieving common goals.
Increase the number of skill enhancement focused trainings given to staff to increase successful outcomes in hearing.

- Maintain regularly scheduled meetings between the Appeals Unit and DAAS staff for open dialogue and discussion.
- Identify, develop and conduct at least two focused trainings for staff.

#### Fraud Investigation Unit
Continue to provide optimum customer service to TAD.
Complete referrals in timely manner and reduce caseload backlog.
Provide training to investigators and supervisors to maintain updated and professional staff.

- Continuously monitor FIU manpower to evenly distribute workloads.
- Track referral progress and review referral findings regularly.
- Monitor and document topics trained and training hours.
**Case Review Unit (CRU)**
- Conducts specialized case reviews at the direction of County Counsel.
- Makes preliminary findings on fatality/near fatality incidents which may be reportable to the state.
- Holds Hearing Officer duties of the Grievance Review Hearings and makes recommendations based on the evidence presented to the Director of CFS for final determination.

**Quality Review Unit (QRU)**
- Reviews and reconciles reports, cash aid over-payment and CalFresh over-issuance calculations and collections; CalWORKs Work Participation Rates and time-limit calculations; CalFresh Quality Control case reviews; and other specialized welfare functions for TAD.

**Appeals Unit (AU)**
- Represents the County in State Administrative Hearings in which applicants or recipients (A/R) of public assistance dispute a case action.
- Requests and prepares Administrative Disqualification Hearings for recipients who have violated program rules.
- As Hearing Officer, conducts General Relief hearings.
- Investigates civil rights complaints and receives/responds to complaints from various sources.

**Fraud Investigation Unit (FIU)**
- Prevents, identifies, investigates, and prepares cases for prosecution to ensure the integrity of the welfare system.
Total staffing is approximately 158 employees.

Program Integrity Division
Budgeted Staffing

<table>
<thead>
<tr>
<th>Category</th>
<th>Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Services</td>
<td>5</td>
</tr>
<tr>
<td>Appeals</td>
<td>23</td>
</tr>
<tr>
<td>Clerical</td>
<td>17</td>
</tr>
<tr>
<td>Quality Review</td>
<td>85</td>
</tr>
<tr>
<td>Fraud Investigators</td>
<td>27</td>
</tr>
<tr>
<td>Management</td>
<td>1</td>
</tr>
</tbody>
</table>

The division budget for FY 13/14 is $14,457,586.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

Program Integrity Division
Budgeted Appropriation

<table>
<thead>
<tr>
<th>Category</th>
<th>Appropriation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$1,639,738</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$12,817,848</td>
</tr>
</tbody>
</table>
The mission of the Research, Outcomes, and Quality Support (ROQS) Unit is to provide up-to-date information and analysis on important legislation that impacts Human Services departments and the County, and to utilize surveys, administrative databases and case review to provide statistics and feedback on county and state programs in order to measure their success in improving programmatic outcomes.
Overview

DESCRIPTION

Research, Outcomes, and Quality Support (ROQS) performs data analysis, program evaluations, measurement of outcomes, quality assurance and survey administration. ROQS provides information and analysis regarding coordination and delivery of services to the residents of San Bernardino County. Analysis of administrative data, surveys, and reviews of case files are employed to assist Human Services (HS) departments with service delivery that aligns with regulation and policy, while exploring innovative delivery methods in support of the Countywide Vision.

Accomplishments for 2013/2014

ROQS ACCOMPLISHED THE FOLLOWING IN 2013/2014:

Research and Outcomes

✓ Completed several analyses of budget proposals for impact on HS departments and the customers they serve.

✓ Designed, administered and analyzed surveys from HS customers to better tailor programs and services to meet their needs.

✓ Designed, administered and analyzed online employee surveys for Children and Family Services (CFS).

✓ Continued production of approximately 100 monthly reports utilized by CFS, the Transitional Assistance Department (TAD), and the Department of Aging and Adult Services (DAAS) managers.

✓ Utilized ARC-GIS to create maps for TAD and CFS to assist in making policy and business decisions.

✓ Assisted TAD, CFS and DAAS in implementing numerous policy and program changes.

✓ Assisted DAAS in their transition to a new case management system.

Quality Support

✓ Assisted CFS, TAD, DAAS, Program Development Division (PDD) and the Probation Department with ongoing case reviews of over 6,000 cases.
ACCOMPLISHMENTS CONTINUED

- Researched and collected data quarterly for CFS regarding youth aging-out of foster care.
- Conducted review of General Relief cases to measure accuracy of eligibility determinations and data entry.
- Assisted CFS with improving the quality and structure of narration within the Child Welfare Services/Case Management System (CWS/CMS).
- Assisted CFS in evaluating the documentation, course of action and timeframes met by social workers and social service practitioners when conducting investigations.
- Assisted state in developing tracking system for youth re-entering foster care.

Goals for 2014/2015

ROQS ESTABLISHED THE FOLLOWING GOALS FOR 2014/2015:

Research and Outcomes
1. Support TAD in meeting expectations regarding timeliness, accuracy, and customer service.
2. Support CFS implementation of the System Redesign and Performance Improvement Plan.
3. Explore best practices in outcome and performance evaluation through collaboration with other public and private agencies.
4. Assist TAD with program monitoring and outcome evaluation related to new service delivery models and regulation changes.
5. Evaluate and monitor programs administered by HS to ensure high-quality, cost effective service delivery to County residents.
6. Support the Countywide Vision by making information on HS programs easily accessible and readily available to residents and stakeholders.
7. Cross-train analysts across programs to reduce specialization and increase flexibility.
8. Implement analytics and performance dashboards to monitor performance at all levels.
How Outcomes Are Measured

ROQS MEASURES OUTCOMES BY THE FOLLOWING METHODS:

ROQS measures outcomes by the following methods: case reviews, internal and external customer surveys, analysis of administrative database data, and continuous customer feedback from HS departments.

Program Information

Research and Outcomes

A critical function of the Research and Outcomes Unit is to provide research services concerning all HS departments and programs. The unit provides services related to program evaluation, such as research design, creation of survey instruments, survey implementation, data evaluation, and final reports. Surveys are designed and administered to assist County departments and decision-makers in identifying and addressing the concerns of County residents.
Additionally, the Research and Outcomes Unit conducts assessments of service populations and areas to determine whether a service population’s needs are being met. The service population’s needs are first identified and then matched to accessible and available service areas using Geographic Information Systems (GIS).

The unit creates specialized reports from administrative databases serving TAD, CFS, and DAAS. This allows departments to quickly answer questions concerning caseload demographics and movement, as well as program performance. It also provides the ability to perform fiscal estimates concerning effects of statewide legislative or programmatic changes, as is often requested by the County Welfare Directors Association (CWDA), the California Department of Social Services (CDSS), and various other state-level entities.

**Quality Support**

The Quality Support Unit responsibilities include case reviews, audits, and data tracking.

- Assists in maximizing funding for CFS by increasing federal Title IV-E revenue for administrative costs for CFS and the Juvenile Probation Department, and for the TAD foster care maintenance payments.
- Tracks and determines eligibility for foster care children receiving Social Security Income (SSI) to help increase the County’s Title IV-E penetration rate.
- Identifies and tracks all non-federal foster children residing with a non-related legal guardian to ensure they are properly counted and identified in the welfare database.
- Audits foster care cases for Title IV-E compliance and eligibility.
- Performs quarterly state-mandated Quality Assurance case reviews for DAAS’ IHSS program.
Staffing Information 2013/2014

Total staffing is approximately 17 employees.

<table>
<thead>
<tr>
<th>Staffing Category</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical</td>
<td>1</td>
</tr>
<tr>
<td>Legislative Staff</td>
<td>1</td>
</tr>
<tr>
<td>QSS Staff</td>
<td>10</td>
</tr>
<tr>
<td>Statistical Staff</td>
<td>4</td>
</tr>
<tr>
<td>Management</td>
<td>1</td>
</tr>
</tbody>
</table>

Budget Information 2013/2014

The division budget for FY 13/14 is $1,479,741.

Costs for this unit are expensed through programs within TAD, CFS and DAAS. Costs shown here are included in program expenditures identified in each respective department.

<table>
<thead>
<tr>
<th>Budgeted Appropriation</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$46,558</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$1,433,183</td>
</tr>
</tbody>
</table>
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We envision a complete county that capitalizes on the diversity of its people, its geography, and its economy to create a broad range of choices for its residents in how they live, work, and play.

We envision a vibrant economy with a skilled workforce that attracts employers who seize the opportunities presented by the County’s unique advantages and provide the jobs that create countywide prosperity.

We envision a sustainable system of high-quality education, community health, public safety, housing, retail, recreation, arts and culture, and infrastructure, in which development complements our natural resources and environment.

We envision a model community which is governed in an open and ethical manner, where great ideas are replicated and brought to scale, and all sectors work collaboratively to reach shared goals.

From our valleys, across our mountains, and into our deserts, we envision a county that is a destination for visitors and a home for anyone seeking a sense of community and the best life has to offer.

For more information about the Countywide Vision visit www.sbcounty.gov/vision.