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## Human Services Departments

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## Human Services Administrative Units

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A MESSAGE FROM HUMAN SERVICES ASSISTANT EXECUTIVE OFFICER

Welcome to the 2015 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 the pages of 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 2015. 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 those we serve. 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 seven 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 and Program Integrity.

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 2014 National Association of Counties (NACo) Achievement Award. A brief summary is provided below.

**Department of Aging and Adult Services (DAAS)**

A Collaborative Effort - The In-Home Supportive Services (IHSS) program provides services regarding activities of daily living to elderly and disabled individuals in their own homes to avoid institutionalization. DAAS administers IHSS by determining eligibility and establishing services for beneficiaries. In January 2014, Aging and Adult Services reassigned those services to the IHSS Public Authority. The services include enrollment, payroll, criminal background checks, employment verification and workman’s compensation activities. This collaboration has improved efficiency in processing IHSS applications, enhanced customer service and generated labor cost-savings.

IHSS Intake Process Improvement Plan - Aging and Adult Services implemented this initiative which resulted in a 77 percent improvement in the IHSS application processing rate. New applications for IHSS must be processed within 30 days, and IHSS applicants have 45 days to submit a Health Care Certification which is used to confirm the need for IHSS services. Due to the high volume of IHSS applications in the county and staff turnover, there was a monthly average of 1,250 pending applications prior to implementing the program. After implementation, IHSS applications are being processed at a faster rate resulting in timely delivery of IHSS benefits to more beneficiaries and a significant reduction in the monthly average of pending applications from 1,250 to 310.

“It’s Not Your Fault” Campaign - Elders and dependent adults are reluctant to report abuse and neglect due to a false sense of guilt and fear. Aging and Adult Services started the “It’s Not Your Fault” campaign as an outreach to seniors and dependent adults to report any incidents of abuse and neglect that occur. The campaign includes posters, flyers, handouts for social workers, Facebook and bus advertisements. Through “It’s Not Your Fault,” social workers encourage their clients to follow through on making reports of abuse that are occurring either in their lives, or in the lives of others. The number of referrals received throughout the county has grown slightly over 100 percent since the campaign was introduced.

Case Management System - This web-based application is designed to manage and track reports of abuse within the county’s adult community. Each call is logged as an intake record and later routed to the appropriate Aging and Adult Services agency to be further processed. Each step is monitored in the system, from the social worker’s initial face-to-face interview with the victim to identifying perpetrators validating all allegations, working with law enforcement, providing service plans for the victim, and providing case conclusion. The system manages all adult report of abuse in the community and ensures victims receive the help and assistance they need.

Mentoring Program - DAAS Mentoring Program was created to provide a networking opportunity for professional development. The program includes the pairing of participating mentor and mentee employees who work to create a career development plan that focuses on the mentee’s interests and goals. The department has benefitted from having more knowledgeable, well-rounded employees, which results in greater productivity, higher retention rates, and improved customer service. Participants have reported positive impacts such as going back to school, receiving a promotion, or taking on new duties in their current position.
NACO ACHIEVEMENT AWARDS

Department of Behavioral Health (DBH)

Culture-specific Subcommittees - DBH has a community-driven Cultural Competency Advisory Committee with 12 culture-specific subcommittees. These advisory groups engage in policy advocacy, develop trainings and conduct outreach activities by recruiting members of the community and engaging them in program planning. Members attend scheduled forums to address the needs of their community and develop strategies to address those needs. This community outreach and engagement approach assists the department in designing programs and services that are community-driven and culturally informed.

Homeless Outreach Support Team (HOST) - DBH’s HOST team collaborates with the Sheriff’s Homeless Outreach Proactive Enforcement team to conduct outreach and engage the most difficult and hard to reach clients. Staff works with qualified individuals to complete the necessary applications and assessments in the field and, upon receipt of housing voucher, will assist the individual to locate and move into housing. HOST continues to offer recovery-based wraparound case management services to the individual to assist them to recover, gain wellness, and reintegrate into the community with the ultimate goal of independence and self-sufficiency.

Mountain Breeze Villas Housing Project - This project is an affordable adult (18-59 years of age) housing development in the city of Highland. It has 168 one- and two-bedroom units, 20 of which are reserved for individuals that meet the Mental Health Services Act housing criteria. The Phoenix Community Counseling FSP program provides support services and assists individuals in achieving wellness by maintaining self-sufficiency, increasing employment, reducing hospitalizations and incarceration, and successfully re-integrating into the community.

Remote Group Supervision for Rural Intern Placements - This pilot program was created to address placement challenges in rural community behavioral health settings. The purpose is to alleviate long distance travel for an intern to attend weekly group supervision and allow the intern to complete their education to be a clinical therapist in a location that traditionally has recruitment challenges. An employee intern was placed at a rural mental health clinic-Needles Behavioral Health Center, a four hour drive to the group supervision location in San Bernardino.

Access Coordination and Enhancement (ACE) - DBH’s ACE program seeks to have 100 percent of clients discharged from an inpatient psychiatric facility to have an appointment within seven days of discharge and a medication evaluation within 14 days of discharge.

Child and Adolescent Needs and Strengths (CANS) - DBH has systematically implemented the CANS tool across children and youth mental health programs. The CANS is an international clinical tool that facilitates individual clinical services and assists in evaluating the aggregate impact of those services to aid in the assessment and treatment of children and youth. Clinical, administrative, and support staff working for 27 children’s mental health providers at 83 service units have entered approximately 21,600 assessments for 9,333 children and youth between January 2014 and February 2015.

Children and Family Services (CFS) and the Performance, Education & Resource Centers (PERC)

“Be A Hero” Campaign - CFS and the Performance, Education & Resource Centers photographed children alongside their heroes in hopes of inspiring others to become the ultimate heroes: adoptive parents. As a result, these community members were able to assist in finding adoptive homes for the children by creating awareness. Through the “Be A Hero” campaign, firefighters, police officers, medical professionals and members of the San Bernardino Symphony helped to find loving homes for foster children.
NACO ACHIEVEMENT AWARDS

Children and Family Services (CFS)
Child Abuse Prevention and Treatment Services—In-House Service Coordination - CFS consolidated previously private entity services using the In-House Service Coordination initiative. CFS hired five in-house service coordinators to connect children and families to services and entered into contracts with providers of therapeutic services and professional trainers in parenting, anger management, sexual abuse and domestic violence. The initiative has resulted in over 100 percent increase in the number of CFS clients receiving services promptly—from 25 percent in January 2014 to 56 percent in November 2014.

Family Visitation and Support Centers - As part of child welfare services, children are removed from their families under certain circumstances, and placed in foster care for safety reasons. When future reunification of such children with their families is part of their case plans, it is important to maintain ties between the children in foster care and their families. To maintain parent-child ties in preparation for reunification, CFS initiated and implemented the Family Visitation and Support Centers program in June 2013. The program provides children and families with enriching and lively visitation experiences in nine locations spread throughout the county.

Preschool Services Department (PSD)
Community Partnership Project - PSD serves more than 5,500 children ages 0-5 and their families, the majority who live at or below the federal poverty income level. PSD has developed a comprehensive health services and long-term individualized parent health education program utilizing agreements with several universities, community colleges, non-profit organizations, and other county partners. These partners, including bachelor and graduate level students, provide thousands of hours of health services including parent education, health, nutrition, mental health, and disabilities assessment and care.

Department of Public Health (DPH)
Friday Night Live - This DPH program is a youth development and substance abuse prevention program designed to engage youth actively in decision making, planning, and implementation so that participants build on their strengths, develop skills, and engage as leaders in creating healthier schools and communities. Each year, Friday Night Live high school youth chapters sponsor prevention activities before prom to encourage their peers to make the right choices, especially when there will likely be peer pressure to drink alcohol.

100% Food Handler Card Compliance - The California Retail Food Code and San Bernardino Code requires all food handlers to have valid food safety certifications. The Division of Environmental Health Services created the 100% Food Handler Card Compliance Program to ensure compliance. Food facilities now must provide proof of compliance with the County ordinance. Facilities which fail will face billable re-inspections and permit suspension/revocation hearings—which ultimately guarantee compliance. Facilities which are fully compliant with the food handler card ordinance have lower violation rates, including lower rates of critical CDC risk factor violations, as compared to facilities that are not compliant.

Customer Service Portal - The Division of Environmental Health Services implemented a web-based portal which features a service that allows customers to subscribe to information about any facility within the county. Once subscribed, the individual will automatically receive a link to newly generated inspection reports; complaints regarding environmental health concerns can be submitted through the web portal, where the customer will receive automated status updates on the complaint; and facility operators can effortlessly submit electronic payments for health permits through the web portal. The Customer Service Portal provides accessible services and information that meets customers’ needs, further protecting public health, promoting safety and preventing environmental hazards.
NACO ACHIEVEMENT AWARDS

Electronic Pesticide Use Reporting Program - For a mosquito and vector control program, pesticide use and tracking is a necessity, as well as a mandate by the state. The volume of pesticide used to conduct daily operations adds up quickly, and keeping accurate records that are easily manageable can become overwhelming. For this reason, the County’s Mosquito and Vector Control Program looked toward technology to develop an innovative and unique way of logging all of its pesticide use in an electronic database. This advancement has also enabled the quick and easy reporting of pesticide use to outside agencies (such as the Department of Agriculture), and saved hundreds of staff hours.

Transitional Assistance Department (TAD)

CalWORKs Youth Employment - TAD and Workforce Development Department partnered to provide subsidized employment to Transitional Assistance for Needy Families youth, ages 16 to 24. The goal is to provide 1,500 youth with work readiness training and up to 485 hours, or six months, of successful work experience to assist them with learning workplace skills. Outcomes for the program are very positive: Since January 2015, of the 848 youth served, 128 have successfully transitioned to unsubsidized employment, of which 22 have transitioned off aid due to earnings from employment, and an additional 43 are enrolled in further workforce training.

Preventing Fraud Through Analytics - TAD developed an analytics predictive model to prevent fraud and improve efficiency of the investigation process. Statistical analyses were performed on a set of cases which had confirmed findings of fraud in the past. The data from these cases was obtained from the county’s database and the California Statewide Electronic Benefit Transfer System. An analytics predictive model was developed from these analyses and applied to current Supplemental Nutrition Assistance Program cases. Investigations were performed on 500 random cases to determine the percentage of discrepancies found. The identification of discrepancies significantly increased from 6.1 percent to 20.8 percent. The use of analytics has resulted in increased fraud prevention activities, earlier identification of fraud, and a proactive approach to identifying potential cases to investigate.

Customer Video Interviewing - TAD and the Department of Child Support Services developed a Customer Video Interviewing approach to obtaining mandatory child support enforcement information required for eligibility to the Temporary Assistance to Needy Families program. The county is 20,000 square miles, much of which is remote desert land that staff needing to travel to remote offices to obtain required information through an interview. Customer Video Interviewing is customer friendly, flexible, efficient and reduces environmental impact by eliminating unnecessary travel.

Trigger Alerts - TAD developed Trigger Alerts to provide notification to supervisors, managers, deputies and the director specific case actions deemed high priority for the Temporary Assistance for Needy Families, Supplemental Nutrition Assistance Program, Child Care, Medicaid, and Welfare-to-Work programs. Trigger Alerts give management the ability to access information at the county, region, office, unit, worker and case level. Trigger Alerts have proven to be a very effective tool for managing workflow in a task-based environment and preventing delinquencies, as well as preventing case processing errors.

Work@Home - TAD created Work@Home as a solution to improve customer service, process the influx of health care program applications generated by the implementation of the Affordable Care Act, and meet service level agreements mandated by the state. In addition, this program allows the County to efficiently increase its workforce, without the need to build additional offices or restructure existing locations. Work@Home enables eligibility workers to work from a designated space within their home. Performance results show that more than 40 percent of total calls were answered by Work@Home employees, proving that a small group of dedicated staff can make a significant impact to overall workload and productivity.
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.
Soheir Aboushady was in need of assistance with paying her electric bill, but was hesitant to seek out services. It wasn’t until she visited the Department of Aging and Adult Services offices that she learned she was eligible for that and much more.

Listen to her story 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/](http://hss.sbcounty.gov/daas/)

DAAS office locations: [Interactive Map](http://hss.sbcounty.gov/daas/)

DAAS social media: [Facebook](http://hss.sbcounty.gov/daas/)
The Department of Aging and Adult Services (DAAS) provides a wide variety of social service programs and services for seniors 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, Long-Term Care Ombudsman, Senior Supportive Services, Health Insurance Counseling and Advocacy Program (HICAP), Family Caregiver Support Program (FCSP), Multipurpose Senior Services Program (MSSP), and Legal Services for seniors.

**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 2014/15

DAAS ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Completed second year of department mentoring program to educate and expose DAAS staff to other programs within the department other than their current assignment. Twenty-one mentors and 21 mentees participated.

✓ Received 2015 National Association of Counties (NACo) Achievement Award for DAAS Mentoring Program, IHSS Intake Process Improvement Plan (II-PIP), IHSS Provider Services: A Collaborative Effort, and “It’s Not Your Fault” campaign.

✓ Received 2015 National Association of Area Agencies on Aging (n4a) Innovation and Achievement Award for PC 368.1 Law Enforcement Card and Training Program.

✓ Provided a total of 665,333 congregate meals served in senior centers throughout the County and home-delivered meals to homebound seniors.

✓ Provided outreach and education presentations to 120,073 seniors.

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

✓ Distributed bus passes to 1,149 seniors totaling over 53,818 one-way bus rides.

✓ Assisted 2,000 Home Energy Assistance Program (HEAP) applications for $500,000 in utility credits for seniors.

✓ Investigated and resolved 1,719 complaints in long-term facilities through the Ombudsman Program.

✓ Provided transportation service for 91 seniors from Transportation Reimbursement Escort Program (TREP) for a total of 156,843 miles to shopping, banking, and medical and social service appointments.

✓ Received 18,232 requests for IHSS services through the Central Intake Unit (CIU).

✓ Hosted over 252 attendees at the 28th Annual West Valley Adult Protective Services Multi-Disciplinary Team Conference at the Goldie S. Lewis Community Center.

✓ Supported 25,516 seniors staying in their homes with the assistance of the IHSS program.

✓ Responded to 12,104 APS referrals.

✓ Provided senior and dependent adult abuse awareness training to 192 mandated reporters throughout the County, including financial institutions, hospitals, law enforcement and other first responders.
Goals for 2015/16

DAAS ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

**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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<tbody>
<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>
</tr>
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</table>
**Program Information**

**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 education 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 training and 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 2014-2015

<table>
<thead>
<tr>
<th>Program</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>APS</td>
<td>Average 783 reports of elder or dependent abuse monthly</td>
</tr>
<tr>
<td>IHSS</td>
<td>Average 25,516 open cases monthly</td>
</tr>
<tr>
<td>SCSEP</td>
<td>Average 30 eligible seniors</td>
</tr>
<tr>
<td>SIA</td>
<td>Average 1,241 contacts per month</td>
</tr>
<tr>
<td>MSSP</td>
<td>Average 276 cases per month</td>
</tr>
</tbody>
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**Caseload by Program**

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<tr>
<th>Caseload by Program</th>
<th>Workload Indicators</th>
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<tbody>
<tr>
<td>APS - Referrals</td>
<td>783</td>
</tr>
<tr>
<td>APS - Open Cases</td>
<td>1,015</td>
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<tr>
<td>IHSS - Open Cases</td>
<td>25,516</td>
</tr>
<tr>
<td>MSSP Cases</td>
<td>276</td>
</tr>
<tr>
<td>Public Guardian - Probate Cases</td>
<td>139</td>
</tr>
<tr>
<td>Public Guardian - LPS Cases</td>
<td>400</td>
</tr>
</tbody>
</table>
Staffing Information 2014/15

Total staffing is approximately 298 employees.

Department of Aging and Adult Services
Budgeted Staffing

- Public Guardian Staff: 19
- Aging and Adult Administrative Staff: 75
- Adult Fraud Initiative Unit: 6
- Aging Caseworkers: 30
- Adult Caseworkers: 168

Budget Information 2014/15

The department budget for FY 14/15 is $86,653,812.

Department of Aging and Adult Services
Budgeted Appropriations

- IHSS Public Authority: $350,000
- IHSS Provider Benefits: $625,000
- IHSS Provider Payments: $41,222,417
- Public Guardian: $2,236,756
- Aging Programs: $9,304,666
- Adult Protective Services: $5,058,681
- In-Home Supportive Services: $27,856,292
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.
Vivien Limon, Peer and Family Advocate

Vivien became a Clubhouse participant and active member after she sought help to treat her Schizoaffective disorder. It was because of her hard work and determination that she gained full-time employment with the Department of Behavioral Health as a Peer and Family Advocate and now helps other club members achieve their goals.

Listen to her story of success by clicking the link below.

Click here to view the YouTube video.
Overview

The Department of Behavioral Health (DBH) and its contract partners are responsible for providing mental health and substance use disorder (SUD) 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.

San Bernardino County 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 2,100,000 residents living in San Bernardino County. DBH currently manages close to 400 contractual agreements for the delivery of mental health and substance use disorder services.
Accomplishments for 2014/15

DBH ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Received six National Association of Counties (NACo) Achievement Awards:
  • Mountain Breeze Villas - Community & Economic Development
  • Remote Group Supervision for Rural Intern Placements - Employment and Training for County Residents
  • Child and Adolescent Needs Strengths (CANS) - Human Services
  • Culture Specific Subcommittees - Civic Education and Public Information
  • Homeless Outreach Support Team - Human Services
  • Access, Coordination and Enhancement (ACE) - Human Services

✓ Developed system wide goal and outcome framework that aligns with state platforms for increased integration of performance outcomes measures for both mental health and substance use disorders.

✓ Worked collaboratively with County Human Resources to increase staffing. This includes positions across the continuum of care that have historically been chronically vacant, very hard to fill due to location and positions that work with unique populations.

✓ Achieved statewide recognition for excellence in External Quality Review Organization (EQRO) audits and successfully concluded the California EQRO Annual Review.

✓ Implemented a coordinated system with IEHP and Molina to link new members with appropriate Specialty Mental Health Services (SMHS) Tier II, with DBH clinics, Fee For Service (FFS) Providers and Contract Agencies.

✓ Oriented all DBH and contract provider outpatient clinics on Medi-Cal expansion as a result of Affordable Care Act, leading to collaborative efforts between Managed Care Plans and DBH in the management of severe and moderate mental illness treatment service.

✓ Awarded two separate grants from the California Health Facilities Financing Authority (CHFFA) for the construction of Crisis Residential Treatment Centers (CRT) in the East Valley and High Desert regions of the County.

✓ Streamlined the Screening, Assessment and Referral Center (SARC) to serve customers throughout San Bernardino County by providing a comprehensive screen and assessment to meet integrated healthcare needs.

✓ Implemented Residential SUD services to enhance system of care in the areas of youth residential and higher level of residential withdrawal management to address acute intoxication and/or withdrawal potential.
ACCOMPLISHMENTS CONTINUED

✓ Merged Ontario and Upland clinics to form new Mariposa clinic, which on average now serves over 1,000 clients per month and provides increased services including Tele Med Services.

✓ Relocated Ontario’s Amazing Place and Barstow’s Desert Stars clubhouses to facilities that better serve the needs of the consumers.

✓ Achieved re-accreditation for the next three years for the Medical and FAST teams through the National Commission on Correctional Health Care.

✓ 219 law enforcement personnel from 10 different agencies completed the 32 Hour Crisis Intervention Training.

✓ Successfully transitioned Project HOPE, into a permanent program, Homeless Outreach Support Team (HOST), while providing wraparound case management to ensure 175 individuals and their families maintain permanent supportive housing and assisting chronically homeless individuals and families into permanent supportive housing.

✓ Continued collaboration alongside the Sheriff Department’s Homeless Outreach and Proactive Enforcement (HOPE) program in an effort to engage the hard to reach clients in the field to assist them into permanent supportive housing. HOST staff conducted approximately 50 outreach events with the HOPE team reaching approximately 300 individuals.

Goals for 2015/16

DBH ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

1. Expand and improve the department’s ability to provide access to care and establish quality behavioral health services for county residents by opening two county-operated clinics in the East Valley and High Desert regions.

2. Strategically plan and be awarded capital funding through a competitive grant process administered by CHFFA, to purchase property and construct Crisis Stabilization and Crisis Residential facilities.

3. Implement Sober Center services to divert inebriates from jail custody and provide screening and referral for long-term diversion.

4. Host a Clubhouse Summit to allow peers from several counties the opportunity to network and share program successes.

5. Fully implement Triage Engagement and Support Teams (TEST) to work collaboratively with law enforcement and hospital emergency departments to offer interventions, support and resources in the least restrictive environment to avoid hospitalization and jail recidivism.
How Outcomes Are Measured

DBH MEASURES 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>
| Expand and improve the department’s ability to provide access to care and to establish quality behavioral health services for county residents by opening two county-operated clinics in the East Valley and High Desert regions. | - Identification of appropriate space in the designated communities for purchase or lease via collaboration with County Real Estate Services.  
- Establish plan for staffing and training staff to work in new facilities.                                      |
| Strategically plan for capital funding through a competitive grant process administered by the CHFFA to purchase property and construct Crisis Stabilization and Crisis Residential facilities. | - Complete compelling grant to showcase need, ability and commitment to maximize opportunity of grant being awarded.  
- Grant successfully awarded and funded.                                                                                          |
| Implement Sober Center services to divert inebriates from jail custody and provide screening and referral for long-term diversion. | - Establish local sobering center via collaboration with contract agency.  
- Education provided about the purpose and location of the sobering center via collaboration with local law enforcement. |
| Host a Clubhouse Summit to allow peers from several counties the opportunity to network and share program successes. | - Coordinate Summit presentations.  
- Identify host venue via collaboration with local agencies.                                                                  |
| Fully implement Triage Engagement and Support Teams to work collaboratively with law enforcement and hospital emergency departments to offer interventions, support and resources in the least restrictive environment to avoid hospitalization and jail recidivism. | - Expanded community co-locations, including Sheriff station in Barstow, Big Bear, and Twin Peaks.  
- Complete hiring to fully implement staffing.                                                                                  |
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 continuum of substance use disorder services including education, prevention, outpatient and residential substance use disorder treatment programs throughout the County. Services include:

⇒ Outpatient Substance Use Disorder Treatment for Adults and Youth
⇒ Residential Withdrawal Management (Detoxification)
⇒ Residential Substance Use Disorder Treatment for Adults and Youth
⇒ Residential Substance Use Disorder Treatment for Adults with Children
⇒ CalWORKs (Mental Health Program, Alcohol and Other Drug Programs, Family Stabilization Program)
⇒ Community-Based Recovery Centers
⇒ Intensive Outpatient Perinatal Substance Use Disorder Treatment Clinics
⇒ Partnership for Healthy Mothers and Babies
⇒ Environmental Prevention
ALCOHOL AND DRUG SERVICES CONTINUED

⇒ Transitional Housing
⇒ Adult and Juvenile Drug Courts
⇒ Narcotic Treatment Programs
⇒ Screening Assessment and Referral Center

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 behavioral 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 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 behavioral health/medical care providers in collaboration with various teaching institutions in San Bernardino County.

Correctional Mental Health Services provides mental health services to the inmate patients housed in any of the four respective Type II Detention Centers in San Bernardino County. The program provides mental health services that consist of case management, medication support, crisis intervention, brief trauma focused therapy, crisis stabilization and aftercare referrals for those who are either awaiting trial or serving their sentences in the county detention centers including West Valley Detention Center, Glen Helen Rehabilitation Center, High Desert Detention Center and Central Detention Center.

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 Peer and Family Advocates that have lived experience as consumers and/or family members. The primary function of this office is to:

⇒ Assist consumers and family members in accessing mental health and substance use disorder 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
⇒ Assist consumers and family members in navigating the behavioral health system
⇒ Empower families and consumers to make informed decisions
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.

The Office also operates a nationally recognized community-driven Cultural Competency Advisory Committee (CCAC) with 12 culture-specific subcommittees. These advisory groups engage in policy advocacy, develop trainings and conduct outreach activities by recruiting members of the community and engaging them in program planning. This community outreach and engagement approach assists DBH in designing programs and services that are community-driven and culturally informed.

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 behavioral health services to individuals with mental illness and/or co-occurring substance use disorder who are on formal probation. Additionally, training is provided to law enforcement personnel in collaboration with the Sheriff’s Department to address the behavioral health needs of this population experiencing a mental health crisis in the community. Programs under the forensic umbrella include the following:

⇒ 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
⇒ Co-occurring substance abuse and mental health treatment
⇒ Rehabilitation of consumers’ functional skills, daily living skills, social skills, medication compliance, and support resources
⇒ 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 individuals who are homeless or at risk of being homeless with housing, employment and education
⇒ Link and provide mental health services to maintain seriously mentally ill individuals in the least restrictive environment possible
⇒ Provide linkage and care coordination to treatment for individuals who have a co-occurring mental health and substance use 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
⇒ Reduce psychiatric hospitalizations and incarceration
⇒ Develop independent living skills

ACCESS UNIT

The Access Unit provides member services to all beneficiaries of San Bernardino County Medi-Cal. The Access Unit provides a 24/7 telephone line which links callers to mental health services, responds to urgent conditions and provides beneficiary problem resolution through grievances and appeals. Access Unit staff are comprised of administrative and mental health professionals who provide expertise in referral and linkages for consumers. The Access Unit also supports the Fee-For-Service Network of mental health providers through the credentialing of providers and the approval of treatment authorizations as well as ongoing technical support for providers regarding clinical and claiming concerns. 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.
# Statistical Information

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 2014-2015</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>1,206</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Integrated New Family Opportunities</td>
<td>53</td>
<td>277</td>
<td></td>
</tr>
<tr>
<td>One Stop: Transitional Age Youth (TAY)</td>
<td>388</td>
<td>536</td>
<td>1,573</td>
</tr>
<tr>
<td>Clubhouse</td>
<td></td>
<td>5,338</td>
<td>13,802</td>
</tr>
<tr>
<td>Forensics</td>
<td>204</td>
<td>223</td>
<td></td>
</tr>
<tr>
<td>Assertive Community Treatment (ACT) and Members Assertive Program Solution (MAPS)</td>
<td>173</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crisis Walk-In Clinics</td>
<td></td>
<td>6,433</td>
<td></td>
</tr>
<tr>
<td>Triage</td>
<td></td>
<td>4,192</td>
<td></td>
</tr>
<tr>
<td>Community Crisis Response Team</td>
<td></td>
<td>3,977</td>
<td>4,481</td>
</tr>
<tr>
<td>Homeless</td>
<td>58</td>
<td>603</td>
<td>40</td>
</tr>
<tr>
<td>Alliance for Behavioral and Emotional Treatment (ABET)</td>
<td>173</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agewise: Circle of Care System Development</td>
<td>143</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Agewise: Circle of Care Mobile Outreach</td>
<td>28</td>
<td>122</td>
<td>741</td>
</tr>
<tr>
<td><strong>Total Persons Served</strong></td>
<td><strong>2,283</strong></td>
<td><strong>21,844</strong></td>
<td><strong>20,637</strong></td>
</tr>
</tbody>
</table>
### Fiscal Year 2014/2015 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>5,039</td>
<td>54</td>
<td>271</td>
<td>54</td>
<td>5,418</td>
</tr>
<tr>
<td>Coalition Against Sexual Exploitation (CASE)</td>
<td>40</td>
<td>10</td>
<td>0</td>
<td>0</td>
<td>50</td>
</tr>
<tr>
<td>Community Wholeness and Enrichment</td>
<td>0</td>
<td>880</td>
<td>1,320</td>
<td>0</td>
<td>2,200</td>
</tr>
<tr>
<td>Family Resource Center</td>
<td>9,020</td>
<td>3,300</td>
<td>9,020</td>
<td>660</td>
<td>22,000</td>
</tr>
<tr>
<td>Lift</td>
<td>0</td>
<td>54</td>
<td>66</td>
<td>0</td>
<td>120</td>
</tr>
<tr>
<td>Military Services and Family Support Project</td>
<td>126</td>
<td>294</td>
<td>1,680</td>
<td>0</td>
<td>2,100</td>
</tr>
<tr>
<td>Native American Resource Center</td>
<td>272</td>
<td>765</td>
<td>459</td>
<td>0</td>
<td>1,496</td>
</tr>
<tr>
<td>National Curriculum and Training Institute Crossroads Education</td>
<td>2,000</td>
<td>2,000</td>
<td>0</td>
<td>0</td>
<td>4,000</td>
</tr>
<tr>
<td>Older Adult Community Services Program</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>7,000</td>
<td>7,000</td>
</tr>
<tr>
<td>Preschool PEI Project</td>
<td>657</td>
<td>0</td>
<td>243</td>
<td>0</td>
<td>900</td>
</tr>
<tr>
<td>Promotores de Salud</td>
<td>600</td>
<td>2,100</td>
<td>25,500</td>
<td>1,800</td>
<td>30,000</td>
</tr>
<tr>
<td>Resilience Promotion in African American Children</td>
<td>1,900</td>
<td>20</td>
<td>80</td>
<td>0</td>
<td>2,000</td>
</tr>
<tr>
<td>Student Assistance Program</td>
<td>20,250</td>
<td>1,750</td>
<td>3,000</td>
<td>0</td>
<td>25,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>39,904</strong></td>
<td><strong>11,227</strong></td>
<td><strong>41,639</strong></td>
<td><strong>9,514</strong></td>
<td><strong>102,284</strong></td>
</tr>
</tbody>
</table>
STATISTICAL INFORMATION CONTINUED

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.

<table>
<thead>
<tr>
<th>Summary Information by Program for FY 2014/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Mental Health Program</td>
</tr>
<tr>
<td>-----------------------</td>
</tr>
<tr>
<td>Total Number of Services</td>
</tr>
<tr>
<td>Age Groups Receiving Behavioral Health Services</td>
</tr>
<tr>
<td>0-15 years</td>
</tr>
<tr>
<td>16-25 years</td>
</tr>
<tr>
<td>26-59 years</td>
</tr>
<tr>
<td>60+ years</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Source: DBH and ADS SIMON database as of 8/19/2015.
The DBH Alcohol and Drug Services Community Based Recovery Centers provide ongoing support services to the community at large throughout the County.

<table>
<thead>
<tr>
<th>Alcohol and Drug Services Average Adult Clients Served in Recovery Centers 2014/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of Recovery Center Service Provided</strong></td>
</tr>
<tr>
<td>Aftercare Groups</td>
</tr>
<tr>
<td>Drug Education Training</td>
</tr>
<tr>
<td>Family Support Groups</td>
</tr>
<tr>
<td>Life Skills Training</td>
</tr>
<tr>
<td>Parenting Education</td>
</tr>
<tr>
<td>Smoking Cessation Classes</td>
</tr>
<tr>
<td>Social Activities</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Estimate of Other Services Offered by Alcohol and Drug Services Recovery Centers 2014/15</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of Recovery Center Service Provided</strong></td>
</tr>
<tr>
<td>Anger Management Classes</td>
</tr>
<tr>
<td>Nurturing Fathers</td>
</tr>
<tr>
<td>Strengthening Families (Elementary)</td>
</tr>
<tr>
<td>Strengthening Families (Teen)</td>
</tr>
<tr>
<td>Strengthening Families (Parents)</td>
</tr>
</tbody>
</table>
### Estimated Number of Clients Accessing 12-Step Meetings in Alcohol and Drug Services Recovery Centers 2014/2015

<table>
<thead>
<tr>
<th>Number of Activities/Disseminated Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>91,033</td>
</tr>
</tbody>
</table>

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

### Alcohol and Drug Services Average Strategy Counts in EP 2014/2015

<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>10,611</td>
</tr>
<tr>
<td>Health Fairs/Conferences Attended to Disseminate or Receive EP Information</td>
<td>114</td>
</tr>
<tr>
<td>Brochures/Pamphlet Dissemination</td>
<td>18,508</td>
</tr>
<tr>
<td>Active Coalitions Throughout the County</td>
<td>41</td>
</tr>
<tr>
<td>Speaking Engagements Conducted to Deliver EP Information to Attendees</td>
<td>85</td>
</tr>
<tr>
<td>Printed Materials Disseminated (newsletters, flyers, fact sheets, etc.)</td>
<td>19,359</td>
</tr>
<tr>
<td>Training Services Attended or Provided on EP Strategies and Issues</td>
<td>125</td>
</tr>
<tr>
<td>Friday Night Live/Club Live Programs Countywide</td>
<td>24</td>
</tr>
<tr>
<td>Incidences of Technical Assistance Provided</td>
<td>546</td>
</tr>
<tr>
<td>Attempts at Using Media Advocacy and Strategies to Carry the EP Message</td>
<td>374</td>
</tr>
</tbody>
</table>
Staffing Information 2014/15

Total staffing is approximately 1,067 employees.

<table>
<thead>
<tr>
<th>Department</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>106</td>
</tr>
<tr>
<td>Medical Services</td>
<td>49</td>
</tr>
<tr>
<td>Children &amp; Youth Services</td>
<td>154</td>
</tr>
<tr>
<td>Emergency Adult &amp; Older Adult Svcs.</td>
<td>205</td>
</tr>
<tr>
<td>Alcohol and Drug Services</td>
<td>68</td>
</tr>
<tr>
<td>Mental Health Services Act (MHSA)</td>
<td>485</td>
</tr>
</tbody>
</table>

Budget Information 2014/15

The department budget for FY 14/15 is $332,261,653.

<table>
<thead>
<tr>
<th>Department</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>$38,342,410</td>
</tr>
<tr>
<td>Medical Services</td>
<td>$16,819,545</td>
</tr>
<tr>
<td>Children &amp; Youth Services</td>
<td>$44,380,440</td>
</tr>
<tr>
<td>Emergency Adult &amp; Older Adult Svcs.</td>
<td>$76,545,456</td>
</tr>
<tr>
<td>Alcohol and Drug Services</td>
<td>$27,750,893</td>
</tr>
<tr>
<td>Mental Health Services Act (MHSA)</td>
<td>$128,422,909</td>
</tr>
</tbody>
</table>
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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.
Gilbert Williams, Customer

Gilbert Williams sought the help of the Department of Child Support Services for his child support matters. Along the way, Child Support Officers answered all of his questions providing him with clear direction, making the process a much easier one.

Click on the link below to hear how Gilbert paid his $67,000 child support in full.

[View the YouTube video.](#)
FOR MORE INFORMATION

Department of Child Support Services website: http://hss.sbcounty.gov/dcss/
DCSS office locations: Interactive Map
DCSS social media: Facebook
Overview

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 2014/15

DCSS ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Collected over $175 million in child support payments.

✓ Ranked third in the state in program cost effectiveness, distributing $4.35 for each dollar in government funding provided to the department.

✓ Received a joint achievement award, with the Transitional Assistance Department (TAD), from the National Association of Counties (NACo) for the use of webcams in TAD offices.

✓ Generated $1.82 million in reimbursement of public assistance to the County.

✓ Achieved a rate of 100% on the annual federal case processing compliance review.

✓ Assisted 361 customers with their child support-related issues utilizing webcams at TAD offices throughout the County.

✓ Conducted 25 outreach sessions at hospitals and birthing facilities, providing instructions on the preparation and submission of paternity declarations, resulting in submission and accuracy rates which are higher than the statewide averages.

✓ Attended 74 outreach events in the local communities, providing information on the child support program.
ACCOMPLISHMENTS CONTINUED

✓ Managed a caseload of over 113,000 cases providing comprehensive child support services to the public, including:
  
  • Established 9,449 court orders
  • Provided service to 182,791 customers calling into the Call Center
  • Conducted 50,573 interviews in the department’s reception area

✓ Increased the visibility of and use of Child Support Services Facebook® page by having 3,220 “Likes,” the highest number of Facebook® “Likes” of any county child support program in the state.

✓ Implemented a Local Scanning Solution that allows all incoming mail to be imaged into the child support computer system, reducing case processing timeframes and improving efficiencies.

✓ In collaboration with the San Bernardino Superior Court, Family Law Facilitator’s office staff are in the Child Support Offices once a month to assist our mutual customers.

Goals for 2015/16

DCSS ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

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 67%.
   
   D. Cases with arrears collections goal is 69%.
   
   E. Cost effectiveness goal is $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.
GOALS CONTINUED

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 customer and promote improved customer service.

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 percentage of cases with support orders established to 90%.  
                                                                                     • Increase the payment rate on cases with current support owed to 67%.  
                                                                                     • Increase total collections by 2%.                                                                                                     |
| Make effective use of the automated system to ensure compliance timeframes are met. | • Meet 100% of key case processing timeframes 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.                                                                                           |
| Monitor specific strategies and tactics identified in the Performance Management Plan to measure effectiveness. | • Meet projected outcomes of specific Practice Indicators.                                                                               |
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 license 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 outcomes. CPs and 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 and the child support court 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, Facebook® and Instagram pages. 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.

Jeff Schroer at the Inland Empire Fatherhood Conference.  
Child Support Awareness Month banner.
Statistical Information

Paternity Establishment
  Children in caseload born out of wedlock as of June 30, 2015  91,731
  Children with paternity established or acknowledged as of June 30, 2015  84,002

Support Order Establishment
  Support orders established July 2014 - June 2015  9,449
  Cases in caseload with a support order established as of June 30, 2015  100,148

Current Support Collections
  Total current support owed  $174,901,227
  Total current support collected  $114,214,138

Arrears Collections
  Cases with arrears due in fiscal year 2014/15 as of June 30, 2015  65,840
  Cases paying towards arrears as of June 30, 2015  44,370
  Total arrears collected as of June 30, 2015  $61,286,022

Total Collected (both current and arrears)
  July 2014 - June 2015  $175,500,160

Caseload by Program

Open cases as of June 30, 2015  113,892
  Aided cases  35,064
  Formerly-aided cases  58,632
  Non-aided cases  20,196

Children in caseload  129,166
Staffing Information 2014/15

Total staffing is approximately 430 employees.

<table>
<thead>
<tr>
<th>Department of Child Support Services</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Services</td>
<td>67</td>
</tr>
<tr>
<td>Child Support Ops. - Establishment</td>
<td>131</td>
</tr>
<tr>
<td>Child Support Ops. - Enforcement</td>
<td>152</td>
</tr>
<tr>
<td>Child Support Ops. &amp; Prog. Support</td>
<td>50</td>
</tr>
<tr>
<td>Asst. Director &amp; Technical Support</td>
<td>23</td>
</tr>
<tr>
<td>Director &amp; Ombudsman</td>
<td>7</td>
</tr>
</tbody>
</table>

Budget Information 2014/15

The department budget for FY 13/14 is $40,039,593.

<table>
<thead>
<tr>
<th>Department of Child Support Services</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Expenditures</td>
<td>$90,000</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>$7,645,284</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$32,304,309</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.
Judy Weidner struggled with drug addiction while raising her children, but wanted to get clean. She just didn’t know how to and where to start. That’s when Children and Family Services (CFS) stepped in and guided her way back to recovery and her loving family. Judy now helps other CFS customers as a Parent Partner with the department.

Click on the link below to learn how Judy went from a life of substance abuse to a proud mother 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](http://hs.sbcounty.gov/cfs/Pages/Welcome.aspx)

CFS office locations: [Interactive Map](#)

CFS social media: [Facebook](#)
Overview

DESCRIPTION

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:

Immediate Response (IR) - IR 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 IR staff obtain facts to determine the risk factors and whether the referral is related to abuse, neglect or exploitation. The emphasis of IR services is on crisis intervention and avoiding a Juvenile Court action if possible. IR 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
OVERVIEW CONTINUED

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 2014/15

CFS ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Received 31,211 child abuse referrals made through the Child and Adult Abuse Hotline (CAAHL), involving 56,676 children.
✓ Established 1,140 family reunifications.
✓ Finalized 489 adoptions.
✓ Established 219 guardianship placements.
✓ Completed 6,933 Risk Assessment Meetings (RAM).
✓ Hosted 10,124 supervised visits at Visitation and Support Centers (VSC) for 1,406 unique children.
✓ Arranged for 813 children to attend summer camp.
✓ Hosted 301 foster and kinship youth at the 8th Annual CFS Sports Fair.
✓ Provided Transitional Housing Program (THP+) services to 58 youth.
✓ Provided Wraparound services to 720 children, reducing the number of group home placements.
✓ Completed 905 Team Decision Making (TDM) and Child and Family Team (CFT) meetings.
✓ Completed 245 Transitional Conferences (TC) with youth preparing to exit foster care.
✓ Provided services to 1,709 children and youth at the Children’s Assessment Center.
✓ Provided services via educational liaisons to 2,176 school age foster children (6-18).
✓ Achieved a 70% high school graduation rate (average Inland Empire graduation rate is 63%).
✓ Hosted 80 graduating youth and 67 of their guests at the 2015 Senior Celebration to honor graduating high school seniors.
✓ Provided Independent Living Program (ILP) services to 1,778 youth.
✓ Provided Parent Partner services to 988 parents of 2,114 children.
✓ Increased number of County Foster Homes with a new license issued, with 171 newly licensed foster homes in FY 14/15 compared to 96 in FY 13/14.
Goals for 2015/16

CFS ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

CFS annual goals are established in conjunction with the most current System Improvement Plan, 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 is gathered by individual programs which are 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>
**Program Information**

**Collateral Programs**

**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 to provide initial psychosocial screenings/assessments for children in out-of-home care in accordance with the Katie A. requirements. 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.
Family Advocacy Resource Services (FARS) - FARS promotes full and early engagement of parents and assists in achieving positive outcomes. 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 (FVSC) - Visitation and Support Centers were created to facilitate supervised parent/child visitations for families working toward reunification. Visitation Center staff members, who are experienced in child visitation supervision and coaching, provide a safe and welcoming environment for parents to interact with their children. The 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.

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 2011 (12 months)</th>
<th>JAN - DEC 2012 (12 months)</th>
<th>JAN - DEC 2013 (12 months)</th>
<th>JAN - DEC 2014 (12 months)</th>
<th>JAN - JUNE 2015 (6 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals</td>
<td>24,428</td>
<td>27,301</td>
<td>29,101</td>
<td>30,558</td>
<td>16,186</td>
</tr>
<tr>
<td>Number of Children</td>
<td>47,732</td>
<td>52,122</td>
<td>53,054</td>
<td>57,855</td>
<td>30,841</td>
</tr>
<tr>
<td>Average Monthly Number Referrals</td>
<td>2,030</td>
<td>2,275</td>
<td>2,425</td>
<td>2,547</td>
<td>2,698</td>
</tr>
</tbody>
</table>
STATISTICAL INFORMATION CONTINUED

In fiscal year 2014/15, 2,086 children left placement. This excludes 55 Probate Guardianship youth. The following information pertains to the reasons for exiting foster care during this fiscal year.

<table>
<thead>
<tr>
<th>Foster Youth Exiting From Placement</th>
<th>Number Exiting Foster Care FY 14/15</th>
<th>Percent Exit Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td>1,140</td>
<td>53.7%</td>
</tr>
<tr>
<td>Adoption Finalized</td>
<td>489</td>
<td>23.0%</td>
</tr>
<tr>
<td>Guardianship Established</td>
<td>219</td>
<td>10.3%</td>
</tr>
<tr>
<td>Child Reached Age of Majority/Emancipated</td>
<td>89</td>
<td>4.2%</td>
</tr>
<tr>
<td>Non-CWS Agency has Jurisdiction</td>
<td>14</td>
<td>0.7%</td>
</tr>
<tr>
<td>Child Adjudicated 601/602</td>
<td>12</td>
<td>0.6%</td>
</tr>
<tr>
<td>Incarcerated</td>
<td>3</td>
<td>0.1%</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>0.4%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,124</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

As of June 30, 2015, 4,797 children were in out-of-home care. Of these children, 22.2% were placed either outside of the County (990) or out of state (76). This excludes 647 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>1,023</td>
<td>21.3%</td>
</tr>
<tr>
<td>3 to 5</td>
<td>843</td>
<td>17.6%</td>
</tr>
<tr>
<td>6 to 8</td>
<td>750</td>
<td>15.6%</td>
</tr>
<tr>
<td>9 to 11</td>
<td>604</td>
<td>12.6%</td>
</tr>
<tr>
<td>12 to 14</td>
<td>583</td>
<td>12.2%</td>
</tr>
<tr>
<td>15 to 17</td>
<td>606</td>
<td>12.6%</td>
</tr>
<tr>
<td>18 and older</td>
<td>388</td>
<td>8.10%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,797</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
Total staffing is approximately 936 employees.

**Children and Family Services**
**Budgeted Staffing**

- Children's Network: 10
- Administrative Support: 87
- Clerical Support: 188
- Casework: 651

**Budget Information 2014/15**

The department budget for FY 14/15 is $125,666,378.

**Children and Family Services**
**Budgeted Appropriations**

- Other Programs: $2,535,703
- ILP: $1,490,450
- Adoptions: $5,562,941
- Support and Therapeutic Options Prog.: $611,681
- Licensing: $717,048
- Foster Care Training and Recruitment: $200,836
- Promoting Safe and Stable Families: $2,022,669
- Child Welfare Services: $112,525,050
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.
Rosslyn Overstreet and her husband weren’t expecting to take care of their third grandbaby. Being on a fixed income, they worried how they were going to obtain the things they needed to care for her. It was not until a friend referred them to the Children’s Network that their worries were put at ease.

Listen to Rosslyn’s story by clicking on the link below.

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

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.

Accomplishments for 2014/15

CN ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Continued the Safe Sleep for Infants media campaign which included radio commercials, concourse signage at the Inland Empire 66er’s Stadium, movie theater advertisements, and billboards.

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

✓ Hosted the 17th Annual Shine-A-Light on Child Abuse Awards Breakfast at the National Orange Show on April 2nd 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.


✓ Hosted three countywide trainings: Neonatal Opioid Abstinence with Dr. Loretta P. Finnegan; Effective Use of Music With Young Children Who Have Experienced Trauma with Bronwen Landless; and Complex Trauma in Children with their Families: An Integrative Approach to Assessment and Treatment with Dr. Cheryl Lanktree.
ACCOMPLISHMENTS CONTINUED

✓ Continued public awareness efforts of the Coalition Against Sexual Exploitation (CASE) by hosting a series of human trafficking awareness events including the 5th Annual CASE Anti-Human Trafficking Awareness Walk with over 400 attendees. CASE also began hosting community outreach meetings, every other month in Victorville to help engage the High Desert community.

✓ Sponsored the 4th Annual Spring Jam at Martin-Tudor Park in Fontana 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, Postpartum Depression, 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 requests.

✓ Expanded the Preventing Shaken Baby Syndrome program to Barstow Community Hospital in April 2015.

✓ Launched the Cribs for Kids program with the Department of Public Health and public health nursing students from various local colleges.

✓ Held a screening and panel discussion on the film Private Violence in April 2015. The panel included: Kit Gruelle, a local survivor and advocate, the San Bernardino County District Attorney’s Office Chief of Victim Services, and a Deputy District Attorney from the District Attorney’s Family Violence Unit.

✓ IEFIC implemented planning stage of Inaugural Inland Empire Fatherhood Conference to inspire, educate and equip fathers to be actively engaged in the lives of their children.

✓ The Maternal Mental Health Work Group, led by DBH and CN, convened to strengthen resources for, and reduce the stigma on, mothers and families experiencing the effects of Postpartum Depression and maternal mental health issues.

✓ CN partnered with DBH, First 5 San Bernardino, DPH, Inland Empire United Way 211, and ISD Multi-Media Services, to develop a Public Service Announcement on Maternal Mental Health.

✓ Children’s Fund, CN, and First 5 San Bernardino convened the High Desert Stakeholder Meeting in March 2015 to identify the needs of, and strategies to strengthen, the High Desert communities.

✓ SART/EIIS Program celebrated its 10th anniversary in July 2014.
# Goals for 2015/16

CN ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

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 population 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.</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>
</tbody>
</table>
HOW OUTCOMES ARE MEASURED CONTINUED

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continue to strategize ways to meet the needs of the County’s sexually</td>
<td>• Increase participation in CASE Steering Committee.</td>
</tr>
<tr>
<td>exploited minors.</td>
<td>• Increase participation in stakeholder meetings.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Continue to increase awareness of the importance of early identification</td>
<td>• Increase in the number of cases seen at SART Centers.</td>
</tr>
<tr>
<td>and treatment options for the drug exposed and high-risk zero through</td>
<td>• Increase in attendance at countywide and</td>
</tr>
<tr>
<td>five populations by offering countywide training.</td>
<td>professional development trainings.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Continue to research and share grant opportunities with community</td>
<td>• Increase in the number of correspondences regarding grant</td>
</tr>
<tr>
<td>partners to enhance and develop existing and new programs as they</td>
<td>opportunities to our partners.</td>
</tr>
<tr>
<td>relate to the safety and well-being of children.</td>
<td></td>
</tr>
</tbody>
</table>

Program Information

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.
PROGRAMS CONTINUED

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, San Bernardino County 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 youth, probation youth, transitional age youth, kinship youth and other underserved populations of youth.

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.

**Committee Information**

**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.

**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.

**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.

**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.
**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.

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

**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.

**Inland Empire Father Involvement Coalition (IEFIC)**
Children’s Network joined the Inland Empire Father Involvement Coalition (IEFIC) which is a group of community-based organizations, county agencies, faith-based organizations, and individuals from various professions collaborating and pooling resources, services, and expertise to reduce father absenteeism and the negative images of fatherlessness in our communities.

**Maternal Mental Health Partnership**
Children’s Network joined the Countywide Maternal Mental Health Work Group-convened by the Department of Behavioral Health-to address gaps in services and barriers to accessing maternal health care, especially Postpartum Depression.

**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.
Statistical Information

✓ Screened the Infant Safe Sleep, Dial 2-1-1 to Report Child Abuse, and Postpartum Depression video over 48,500 times between October and March in 4 movie theaters in San Bernardino County.

✓ 32 Pack n’ Plays were distributed as part of CN’s Cribs for Kids program.

✓ Over 150 people attended the Private Violence screening held in April 2015.

✓ 2,206 parents whose babies were born at Arrowhead Regional Medical Center received the preventing shaken baby syndrome information prior to discharge as part of our Preventing Shaken Baby Syndrome program.

✓ CN was presented with 18 Proclamations from cities within the County declaring April as Child Abuse Prevention Month for April 2015.

✓ Placed the Dial 2-1-1 to report Child Abuse, ABC’s of Safe Sleep, and Postpartum Depression messages on 21 billboards throughout San Bernardino County and on two major highways in San Bernardino County over the course of 6 months.

✓ The Dial 2-1-1 to report Child Abuse, ABC’s of Safe Sleep, and Postpartum Depression messages were played on radio commercials 72 times per month in October and November 2014 and February of 2015.

✓ Hosted over 600 people at the 17th Annual Shine-A-Light on Child Abuse Awards Breakfast.

✓ Hosted over 500 people at the 28th Annual Children’s Network Conference.

✓ Assisted 77 young people who had been victims of sexual exploitation.

✓ Screened over 1,200 children ages zero to five years for SART services.

✓ Distributed over 400,000 pieces of education materials and giveaways to support child abuse prevention and child safety.

✓ Collaborated on over 80 community events.
Staffing Information 2014/15

Total staffing is approximately 10 employees.

Children’s Network
Budgeted Staffing

- Admin/Social Workers: 6
- Clerical/Other: 3
- Management/Supervisor: 1

Budget Information 2014/15

The department budget for FY 14/15 is $1,452,338.

Childrens Network
Budgeted Appropriations

- Operating Expenses: $566,766
- Staffing Expenses: $885,572

Children’s Network
Preschool Services Department (PSD) strives to improve the well-being of children, empower families, and strengthen communities.
Nicole Williams, Customer

Preschool Service’s Apprenticeship Program provides work experience opportunities for parents of children who are enrolled in Preschool Services programs. Parents have the opportunity to gain entry level work experience within the department and then apply for future openings in those positions. Nicole aspires to be a teacher one day and with the guidance and discipline of the Apprenticeship Program, she will succeed.

Listen to her story of support from the Citrus Head Start program and her loving family.

Click here to view the YouTube video.
FOR MORE INFORMATION

Preschool Services Department (PSD) website: http://hss.sbccounty.gov/psd/

PSD office locations: Interactive Map

PSD social media: Facebook
Overview

DESCRIPTION

The Preschool Services Department (PSD) administers the Federal Head Start (HS), Early Head Start (EHS), Early Head Start-Child Care Partnership (EHS-CCP), 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 2014/15

PSD ACCOMPLISHED THE FOLLOWING IN 2014/15:

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 2014/2015:

✓ Received the Early Head Start—Child Care Partnerships Grant from the Office of Head Start. This partnership will increase the quality of comprehensive services to children aged 0 to 3 years old and offer various family engagement services.

✓ Increased the number of teachers with a Bachelor’s or advanced degree by 10%, at a level above the 50% Head Start nationwide requirement.

✓ Collaborated with the Department of Public Health, Department of Community Development and Housing, and the San Bernardino County Superintendent of Schools for a Building Upward Mobility pilot to provide a literacy training module for residents of an affordable housing complex.

✓ Received funding from First 5 San Bernardino for Mentor Coaching to improve the quality of ongoing professional growth opportunities for child care providers and family care homes.

✓ Purchased a new warehouse to centralize and maintain the entire department’s school supplies and equipment.

✓ Increased school readiness for children by 26% over last year as measured by the Desired Results Developmental Profile (DRDP).

✓ Provided nutrition intervention to 1,721 children identified as being at risk and reduced obesity in 65% of children enrolled through measures set to track obesity in students.
Goals for 2015/16

PSD ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

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. Increase school readiness.

2. Increase the enrollment opportunities for foster children.

   A. Partner with local universities and hospitals to provide nutrition education programs for parents and staff.

4. Promote family self-sufficiency through financial literacy, vocational training, and educational advancement support.
How Outcomes Are Measured

PSD MEASURES OUTCOMES BY THE FOLLOWING METHODS:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase school readiness.</td>
<td>• Use the School Readiness approach in an effort to support and strengthen Preschool Education and School Readiness skills for children and their families.</td>
</tr>
<tr>
<td></td>
<td>• Percentage of children who demonstrate growth in literacy skills for school readiness as measured by the Desired Results Developmental Profile (DRDP) 2015.</td>
</tr>
<tr>
<td>Increase the enrollment opportunities for foster children.</td>
<td>• Enhance the referral process of enrollment with Children and Family Services</td>
</tr>
<tr>
<td></td>
<td>• Number of foster children enrolled.</td>
</tr>
<tr>
<td>Reduce obesity in children.</td>
<td>• Identify children at risk by measuring Body Mass Index (BMI) at the beginning of the school year and refer for services as needed.</td>
</tr>
<tr>
<td></td>
<td>• Number of parents and community members provided training.</td>
</tr>
<tr>
<td>Promote family self-sufficiency through financial literacy, vocational</td>
<td>• Number of financial literacy, vocational training and educational advancement classes offered to PSDs families.</td>
</tr>
<tr>
<td>training, and educational advancement support.</td>
<td>• Number of “Pathways to Success” apprenticeship program participants that enroll in the program. This program provides on-the-job training for parents.</td>
</tr>
</tbody>
</table>
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 6,000 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.
EARLY HEAD START—CHILD CARE PARTNERSHIP (EHS-CCP)

The Early Head Start—Child Care Partnership (EHS—CCP) is a collaboration between existing EHS programs and child care to expand the delivery of high quality education and comprehensive services to low income children aged zero to 48 months and their families who participate in the child care subsidy program. The program promotes success of infant and toddler care through the ability to increase the educational services with the establishment of stimulating learning environments and enhanced professional development opportunities made available to child care center and family child care providers. The role of EHS-CCP is to leverage resources already offered to address the needs of grantees and the families they serve.

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

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 2014 there were 184,464 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>45,473</td>
</tr>
<tr>
<td>3 - 5 Years</td>
<td>45,021</td>
</tr>
</tbody>
</table>
### Child Population by Race/Ethnicity: 2014 Kids data

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>61.9%</td>
</tr>
<tr>
<td>White</td>
<td>21.7%</td>
</tr>
<tr>
<td>African American</td>
<td>7.9%</td>
</tr>
<tr>
<td>Asian</td>
<td>4.5%</td>
</tr>
<tr>
<td>Other</td>
<td>4.0%</td>
</tr>
</tbody>
</table>

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

### Ethnicity of Children Served by PSD

<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>3%</td>
</tr>
<tr>
<td>Other</td>
<td>3%</td>
</tr>
</tbody>
</table>

Child Outcome Planning and Assessment System (COPA) 6/30/15.
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 or referrals in 2014/2015 according to the Family Services Assessment data.

<table>
<thead>
<tr>
<th>Referral Service</th>
<th>2014/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parenting Education</td>
<td>1,147</td>
</tr>
<tr>
<td>Clothing Assistance</td>
<td>42</td>
</tr>
<tr>
<td>Community Resources</td>
<td>3,801</td>
</tr>
<tr>
<td>Family Health Assistance</td>
<td>751</td>
</tr>
<tr>
<td>Housing Assistance – Subsidies, Utilities, Repairs etc.</td>
<td>89</td>
</tr>
<tr>
<td>Employment Assistance</td>
<td>395</td>
</tr>
<tr>
<td>Food Assistance</td>
<td>185</td>
</tr>
<tr>
<td>Emergency/Crisis Intervention (such as an immediate need for food, clothing, and shelter)</td>
<td>53</td>
</tr>
<tr>
<td>Children’s Fund Assistance</td>
<td>119</td>
</tr>
<tr>
<td>Childcare</td>
<td>60</td>
</tr>
<tr>
<td>Transportation</td>
<td>31</td>
</tr>
</tbody>
</table>

Caseload by Program

During the 2014-2015 program year, PSD served a combined total of 6,673 Head Start, Early Head Start, First 5 and State Preschool children and families throughout the County of San Bernardino.
**Staffing Information 2014/15**

Total staffing is approximately 706 employees.

**Budget Information 2014/15**

The department budget for FY 14/15 is $49,830,940.
The Department of Public Health’s (DPH) mission is to work in partnership to promote and improve health, wellness, safety and quality of life in San Bernardino County.
Friday Night Live (FNL) is a youth-led and youth-driven substance abuse prevention program that builds partnerships for positive and healthy youth development. Liz Nocelotl-Rodriguez is a youth leader at her high school. With the help of the FNL program, she encourages and educates fellow students about issues that typical teenagers face in relation to smoking, drugs and alcohol. With the support of the FNL program and the encouragement of the on campus youth advisor, she is able to provide her peers with all of the resources they need to prevent substance use.

Click the link below to find out how FNL has helped her and her friends.

[Click here to view the YouTube video.]
FOR MORE INFORMATION

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

DPH office locations: Interactive Map
The Department of Public Health (DPH), under its 2015-2020 Strategic Plan, offers a range of services for all County residents to ensure a healthy quality of life and to achieve the following goals:

- Support sustainable healthy communities
- Promote healthy eating
- Promote active living and safe environments
- Encourage all San Bernardino County residents to attain the highest level of health
- Empower people to overcome obstacles to achieving health
- Improve access and availability to health services for both preventative care and treatment
- Support equal access to healthy options and environments
- Provide services to address community health needs
- Plan, prepare and recover from public health emergencies
- Ensure maintenance of a highly skilled, well-trained and culturally competent DPH work force
- Ensure external and internal partnerships, systems, and processes to support organizational excellence
- Ensure funding is aligned appropriately with the Vision and Mission
Accomplishments for 2014/15

DPH ACCOMPLISHED THE FOLLOWING IN 2014/15:

**Animal Care and Control (ACC)**
- Partnered with three other municipal animal shelters to place 193 abandoned dogs, resulting from a large scale animal cruelty “puppy mill” case. Through this partnership/collaborative all adoptable/treatable animals found new homes.
- Hosted 4th Annual Homeward Bound Mega Pet Adoption event in which 150 dogs and cats were adopted in partnership with three municipal animal shelters and 13 Rescue Group Partners (RGPs).

**California Children’s Services (CCS) program**
- Completed 100% of all referrals for financial and residential eligibility within the 30 day required timeframe resulting in a 7% improvement over previous fiscal year for financial eligibility and a 100% completion rate for residential eligibility.
- 99.2% of caseload of 13,102 had a designated primary care physician and/or a physician who provides a medical home for them as required in the CCS program.

**Clinic Operations**
- Completed 49,733 patient visits in FY 14/15, averaging 4,144 visits per month.
- Implemented integrated Behavioral Health services at the Hesperia Health Center.
- Relocated the San Bernardino and Ontario Health Centers to larger, more accessible facilities to expand the scope of services to more patients.
- As of August 7, 2015, IEHP has assigned 4,659 members to the Ontario Health Center and 5,405 members to the Hesperia/Adelanto Health Centers.
- Increased access to care through community collaborations with Domestic Violence Health Care Partnership with the Family Assistance Program, Healthy Babies are Worth the Wait with March of Dimes, and colorectal screening with the American Cancer Society.

**Communicable Disease Section (CDS)**
- Successfully mitigated measles outbreak in 2014 by investigating 192 reports and monitoring or following more than 600 contacts.
- Established an effective system to track and monitor travelers from Ebola affected countries.
- Case managed 51 newly diagnosed TB cases in San Bernardino County in 2014.
- Re-implemented State Immunization Skills Institute to equip medical office personnel with tools needed to successfully administer and store vaccine; and trained 56 personnel.
- Successfully conducted two medical provider seminars with local epidemiologic information and data about immunizations, communicable disease, including STD/HIV/AIDS and Tuberculosis to 110 attendees.
- Partnered with UC Irvine Education and Training Center and the California STD/HIV training center to provide training on the new STD treatment guidelines for 58 attendees.
ACCOMPLISHMENTS CONTINUED

✓ Increased community access to flu vaccine by collaborating with and increasing the number of community partners participating in the annual influenza vaccine project to reach the shared goal of vaccinating the community and preventing disease enhancing community health.
✓ Introduced the Kaiser Flu campaign in two San Bernardino/Yucaipa school districts with a total of 17 schools participating and submitted successful application to CDC for Public Health Associate Program.
✓ Capitalized on staff diversity by cross-training clerical staff and Communicable Disease Investigators to provide integrated resources within the varied section programs to improve service delivery, increase the economy of scale and collaboratively enhance community health and public safety.
✓ Collaborated with public and private school partners by assisting with the reporting of immunization up-to-date rates in conjunction with CDPH to promote community health and public safety.
✓ Successfully investigated 241 persons who were exposed to TB cases to prevent contacts from progressing to active TB disease.

Environmental Health Services (EHS)
✓ Conducted five industry round tables for Water System Operators (March 2015), Retail food facilities (June 2015), Recreational Health (May 2015), Organized Camps (April 2015), facilitating networking, collaboration, responsiveness to industry needs and enhancing customer service.
✓ Received 2015 National Association of Counties (NACo) Achievement Award for “The 100% Food Handler Compliance Program.”
✓ Completed Mentorship Program which provides opportunities for local health department (LHD) staff to learn about the Retail Food Program Standards.
✓ Enrolled in FDA Voluntary National Retail Food Regulatory Program Standardization.

Family Health Services, Child Health and Disability Prevention (CHDP)
✓ Implemented National Lead Poisoning Prevention Week campaign October 2014, issuing more than 1,000 informational packets to health care providers, community organizations, community members; broadcasting/telecasting public service announcements on radio/television in eight cities; hanging street banners in four cities; and accepting proclamations from two cities.
✓ Exceeded goal of health care provider recertification by 31%; Provided care coordination for 2,863 children who were diagnosed with medical conditions that needed treatment, as well as children needing assistance getting dental or vision care, during their CHDP well-child exam.
✓ Conducted quality assurance/quality improvement site visit for all 63 CPSP providers to review their compliance of Comprehensive Perinatal Services Program requirements.
✓ Provided prenatal education to 1,819 women.
✓ Provided 4,441 visits to Children and Family Services families.
✓ Conducted 3,565 screenings for school aged children.
✓ Collaborated with California counties and various State of California agencies to advance public health policy.
✓ Passed California Department of Public Health audits without findings.
Health Promotion and Education Section (HPES)
✓ Received 2015 National Association of Counties (NACo) Achievement Award for “Safe & Sober Prom” 2015 campaign.
✓ Alcohol and Drug Abuse Prevention Program (ADAPP) sponsored countywide Safe & Sober Prom 2015 campaign with youth led activities at 18 county high schools. Campaign included four DUI Court in School Projects that reached 1,500 students.
✓ Traffic S.A.F.E. Program/Child Passenger Safety conducted 24 child restraint safety classes in English and Spanish along with four community car seat check-up events. Two new staff were certified as Child Passenger Safety Technicians.

Laboratory
✓ Relocated to a new Public Health lab in Ontario.
✓ Re-validated all testing in the new lab facility.
✓ Increased test capacity building by the addition of Measles and Bordetella Polymerase Chain Reaction (PCR) tests.
✓ Implemented new Laboratory Information System (LIS) to produce secure, efficient, and accurate electronic test reporting.
✓ Successfully commissioned and certified new Biosafety Level 3 laboratory for select agent testing as part of the CDC Laboratory Response Network and Select Agent Registration.

Nutrition Education Obesity Prevention (NEOP) program
✓ Initiated and co-ordinated the first Summer Meals Kick-Off event through the County Nutrition Action Plan (CNAP) Committee with over 400 in attendance.

Preparedness and Response Program (PRP)
✓ Completed eight Resiliency trainings for community agencies and reached out to 60 community members.
✓ Hosted Public Health Department, Public Information Officer (PIO) Network to train selected Health Educators as back up PIOs to assist in Department Operations Center (DOC) and County Joint Information Center (JIC), as needed.
✓ Hosted four quarterly Health Emergency Local Planning Partners meetings with 219 participants and 41 agencies.
✓ Hosted annual Statewide Medical and Health Training Exercise in November 2014 to test emergency response plans for an emerging infectious disease outbreak, with an emphasis on Ebola Preparedness.
✓ Activated DOC two times in FY 2014/15 for Ebola Preparedness (October 17-December 22, 2014) and Lake Fire Activation (June 17-July 2, 2015).
✓ Conducted a Public Health Emergency Preparedness Leadership Training to train leadership staff on their role during Point of Dispensing (POD) site; and Receive, Stage and Store (RSS) warehouse operations. PRP has 67 POD locations countywide and has pre-positioned 8 Mobile POD trailers throughout the County.
ACCOMPLISHMENTS CONTINUED

**Reentry Program**
✓ Achieved an 11.6% recidivism rate through the Pilot Reentry Program.
✓ Provided pre- and post-release services to 89 formerly incarcerated individuals. Of these, 78 individuals were released from incarceration with help from the Reentry Program.

**Ryan White (RW) program**
✓ Scored 94 out of 100 on the most recent grant application.
✓ Successfully maintained funding in a changing healthcare environment.
✓ Monitored all contractors for program, fiscal, and contract compliance.
✓ Underwent the County Single Audit with no findings.

**Women, Infants and Children (WIC) program**
✓ Revamped education contacts for prenatal participants to incorporate promotional breastfeeding information and a participant-centered approach.
✓ Developed a breastfeeding awareness video (shown in WIC lobbies), specifically highlighting WIC participants and staff, to share breastfeeding successes.
✓ Launched a new website for participants and health professionals with option to make or re-schedule appointments online.
✓ Continued to engage the community and participants through 11 social media websites in English and Spanish.
✓ Continued participation in the National Feeding My Baby Study, funded by USDA, Food and Nutrition Services (FNS) to document current infant and toddler feeding practices in 80 WIC sites across the county and assess WIC’s influence on those feeding practices.

**Goals for 2015/16**

**DPH ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:**

1. DPH will serve as the staff liaison to the Countywide Vision Project’s Wellness Element Group, which has initiated a multi-year community-drive 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 potential number of health professionals in the County by providing volunteers, students, and resident physicians opportunities to gain knowledge and experience in a broad range of public health career disciplines.
GOALS CONTINUED

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 partner (corporations).

6. Achieve and maintains the capacity to deliver 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 maintain the capacity to deliver the three public health functions and ten essential services.

How Outcomes Are Measured

DPH MEASURES OUTCOMES BY THE FOLLOWING METHODS:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
</table>
| Public Health serves 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 and wellness. The department will continue to support and facilitate the development, implementation, and evaluation of the Community Transformation Plan. | • Complete the 2015-16 Work Plan for addressing priorities of the Wellness Element Group of the Countywide Vision.  
• Launch Community Vital Signs data platform.  
• Develop and launch comprehensive communications plan.  
• Target 100% completion. |
| Increase Health Education Liaison Program (HELP) consultations to businesses (restaurants) to promote food safety, which leads to more successful businesses. | • Number of HELP consultations:  
2014 –15 Actual: 204  
2015 - 16 Target: 220 |
<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
</table>
| Increase Health Education Liaison Program (HELP) consultations to      | • Number of HELP consultations:  
| businesses (restaurants) to promote food safety, which leads to          | 2014 - 15 Actual: 204  
| more successful businesses.                                             | 2015 - 16 Target: 220                                                                                                                 |
| Increase potential number of health professionals in the County         | • Number of post-secondary student internships, ROP instructor externships, and resident physicians:  
| through a public health intern and extern program that provides           | 2014 - 15 Actual: 25  
| participants with information and experience in a broad range of public  | 2015 - 16 Target: 36                                                                                                                 |
| health professions.                                                     |                                                                                                                                          |
| Implement relevant, high-quality Public Health Leadership training      | • Percentage of current year workforce development activities completed:  
| to ensure stable departmental leadership into the future.               | ◆ Identify training priorities aligned with the DPH Strategic Plan and Workforce Development Plan.  
|                                                                         | ◆ Develop four leadership courses and conduct four training events.  
|                                                                         | ◆ Target 100% completion.                                                                                                              |
| Increase number of public/private collaborations with non-profit animal| • Number of Rescue Group Partners (RGPs):  
| rescue group partners (corporations).                                   | 2014 - 15 Actual: 403  
|                                                                         | 2015 - 16 Target: 400                                                                                                                 |
| Achieve and maintain National Accreditation through the Public          | • Percentage of current year accreditation activities completed:  
| Health Accreditation Board (PHAB) to ensure the department continues     | ◆ Submit Statement of Intent to PHAB.  
| to focus on quality and performance improvement, transparency and       | ◆ Identify gaps in required PHAB documentation.  
| accountability to all stakeholders and funders, and maintains the       | ◆ Develop department marketing strategy.  
| capacity to deliver the three core public health functions and ten      | ◆ Conduct PHAB trainings aligned with accreditation requirements.  
| essential services.                                                    | ◆ Target 100% completion.                                                                                                              |
**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’s 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.

**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 (FPACT, Every Woman Counts); Refugee Health Assessment Program (RHAP) services; 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, located in the high desert, have attained Federally Qualified Health Center (FQHC) status thereby expanding primary care services to uninsured and underinsured County residents. Community based services include: outreach and health education, mobile alternative HIV testing services, domestic violence liaison, collaboration with San Bernardino County Fire Community Paramedics to decrease the rate of hospital re-admissions and improve the quality of life of patients with congestive heart failure and medical care for post-release individuals pursuant to AB109.

**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 specializes in programs that span the cradle to career life cycle and covers the maternal, child adolescent and young adult populations. The various programs seek to address conditions in which families can be healthy and provide services in the homes, medical provider offices, hospitals, public and private agencies and in the community. Services include ensuring quality of obstetrical and pediatric health care, assessing for community health concerns and conditions, empowering families to adopt healthy life styles, organizing community efforts to embrace health promotion and core wellness values, advocating for promising, best and evidence based practices and programs, and working with California counties and state agencies to advance public health policy. Primary programs include Maternal, Child and Adolescent Health; Comprehensive Perinatal Services Program; Fetal Infant Mortality Review; Sudden Infant Death Syndrome; Child Health and Disability Prevention; Health Care Program for Children in Foster Care; Rx 4 Kids; Childhood Lead Poisoning Program; Partnership for Healthy Mothers and Babies; Children Screening Assessment Referral and Treatment; School Screening; and Nursing Student Placement.

Healthy Communities Program - The Healthy Communities Program provides technical assistance to communities throughout the county giving specific recommendations for policy and environmental strategies to improve residents’ health. Currently, Healthy Communities has successfully implemented partnerships with over 20 local cities and 6 unincorporated areas throughout the county.

Health Policy and Promotion (HPP) program - HPP provides community based prevention and education programs in numerous areas including:

- **Alcohol and Drug Abuse Prevention Program (ADAPP)** - The ADAPP serves residents to prevent underage drinking and drug use. 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.

- **Traffic S.A.F.E. Program/Child Passenger Safety** - The Traffic S.A.F.E. Program conducts English and Spanish classes to educate parents on proper use of car seats, booster seats and seat belts. New car seats are distributed for children at low-cost to income eligible families who reside in San Bernardino County. The program also conducts a Violator Intervention Program (VIP) for persons referred by the courts for being cited for non-use of child restraints.
Program Information Continued

**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 collaboratively with 24 cities and towns, local law enforcement and fire departments, state and federal agencies to prepare the County and municipalities to respond to emergencies caused by bioterrorism, infectious disease, natural disasters, and other public health threats through the development and exercise of comprehensive public health emergency preparedness and response plans.

**Reentry Initiative-Special Projects** - The San Bernardino County Reentry Collaborative (SBCRC), under the chairmanship of Public Health, is a partnership of agencies and organizations representing public safety, health and human services, education and workforce development, and faith and community-based organizations committed to making San Bernardino communities safer through the successful reentry and reintegration of the formerly incarcerated.

**Ryan White program** - The Ryan White program provides HIV medical care and support services to approximately 3,500 clients throughout Riverside and San Bernardino Counties. The goal of the program is to improve access, quality, and delivery of services to consumers of Ryan White Part A services.

**Women, Infants and Children (WIC) program** - The WIC program helps families by providing nutrition education, issuing checks for healthy supplemental foods, and making referrals to healthcare and other community services. Participants must meet income guidelines and be pregnant or postpartum women, infants, or children under the age of five. The WIC program has been designed to help its participants make choices that can make a positive and lasting difference in their family's health.
Statistical Information

Animal Care and Control (ACC)
- Housed 13,674 animals in County-operated animal shelters.
- Responded to 30,615 field service calls.
- Received 241,634 office inquiries.
- Inspected 237 animal establishments.

Accreditation
- 100% program participation in accreditation-related survey and trainings.

California Children’s Services (CCS) program
- CCS caseload is 13,102 and services have been provided to all clients. A significant amount of these clients (approximately 40%) experience multiple points of contact because of the complex nature of their medical condition and medical needs.

Clinic Operations
- Provided 9,156 reproductive health visits during FY 2014/15.
- Provided 25,948 primary care visits during FY 2014/15.

Communicable Disease Section (CDS)
- Processed and/or investigated:
  - 12,566 non-STD/HIV cases.
  - 6,046 confirmed non-STD/HIV cases.
  - 12,083 HIV/STD labs processed.
  - 14,273 STD cases investigated, 13,324 STD cases confirmed.
  - 564 HIV/AIDS cases investigated, 263 HIV/AIDS cases confirmed.
  - 240 cases of Pertussis investigated as part of CA Epidemic, 172 Pertussis confirmed/probable/suspect
  - 28 Ebola travelers monitored.
  - Conducted 3,684 directly observed therapy home visits for treatment of active TB.
  - Conducted 77 TB nurse and communicable disease investigator home visits.
  - Distributed 21,488 doses of influenza vaccine to 106 community partners.
  - 95.32% SB County childcare center students up-to-date with required vaccines (401 out of 402 schools).
  - 93.75% SB County kindergarten students up-to-date with required vaccines (430 out of 432 schools).
  - 97.68% SB County 7th grade students up-to-date with required vaccines (229 out of 229 schools).

Environmental Health Services (EHS)
- Trained and certified 47,355 food workers.
- Provided 204 Food Safety HELP consultations for retail food operators to assist in improving safety standards.
- Conducted 11,275 food inspections and 30,597 routine inspections for all programs.
STATISTICAL INFORMATION CONTINUED

Family Health Services, Child Health and Disability Prevention (CHDP)
- Participated in 27 health fairs and local events to disseminate educational information and resources to more than 6,145 community members.
- Completed 3,565 hearing, vision, scoliosis screenings in six districts in the County for the School Health Program.
- Provided the following for Children and Family Services families:
  - 3,875 out of office visits
  - 2,566 court interviews and psychotropic medication reviews
  - 27,758 first time Health and Education Passports and Passport updates
  - 6,655 consultations with Social Workers, Probation Officers, Care Providers, etc.
  - 540 multi-disciplinary team conferences PHNs attended
  - 19,925 care coordination events

Healthy Communities
- 26 jurisdictions in the County have developed Healthy City initiatives reaching 84% of the population.
- 114 documented healthy community-related strategies have been implemented within local jurisdictions.

Health Education
- CARE staff received 283 referrals resulting in at least 229 completed initial home visits.
- 165 clients referred by the courts through VIP.
- 100 parents seeking low cost car seats received instruction on proper use of child restraint devices.

Laboratory
- 31,312 Lab Specimens received.
- 46,977 Lab Tests performed.

Nutrition
- Conducted 135 nutrition and activity education trainings; 169 presentations in support of consuming healthy foods and beverages, increasing daily physical activity and improving food resource management skills.
- Delivered 916 direct education intervention events in varied countywide locations using culturally appropriate learner and family-centered approaches to 404,900 residents.
- Conducted 154 indirect education intervention events at grocery stores, farmer’s markets, and community events/festivals reaching 22,485 community members.

Preparedness and Response Program (PRP)
- Conducted 23 Mass Vaccination Clinics (MVCs) providing 1,321 influenza vaccinations to the public.

Reentry Initiative-Special Projects
- 89 participants were selected to receive services and 78 were released from custody (87.6%). Only 11.6% of those released have recidivated (9).
- 34.6% of those released are still in bi-weekly contact with their Peer Advocates (27).
STATISTICAL INFORMATION CONTINUED

**Ryan White (RW) program**
- Served 3,496 unduplicated clients: White (1,857); Hispanic (1,154); Black (367); Other (118).

**Women, Infants and Children (WIC) program**
- Provided over 835,000 food vouchers at 17 sites throughout the County, generating over $50 million in sales at more than 200 authorized WIC grocers.
Staffing Information 2014/15

Total staffing is approximately 889 employees.

Budget Information 2014/15

The department budget for FY 14/15 is $102,595,432.
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.
Nicole Woodward, HS Administration

Nicole Woodward fell on hard times but persevered with the help of the Transitional Assistance Department. Listen to her story below.

View the YouTube video here.
FOR MORE INFORMATION


TAD office locations: [Interactive Map](http://hss.sbccounty.gov/HSS/tad/)

TAD social media: [Facebook](http://hss.sbccounty.gov/HSS/tad/)
Overview

DESCRIPTION

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 2014/15

TAD ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Continued to provide free tax preparation services through the Volunteer Income Tax Assistance (VITA) program for 14,308 eligible low-income San Bernardino County residents resulting in over $27 million in combined refunds (federal and state), and more than $12.9 million in Earned Income Tax Credits (EITC). This was a 26% increase over 2014 totals, and more than $19 million estimated local economic activity was generated by EITC.

✓ TAD Customer Service Center (CSC) staff continued to provide timely responses to calls from county residents for Health Care Reform (HCR). CSC staff handled calls from Covered CA Service Centers for coverage under the Affordable Care Act (ACA) in 30 seconds or less. Between July 1, 2014 and June 30, 2015, 7,355 calls were handled with an average speed of answer of seven seconds.

✓ TAD partnered with the San Bernardino County Housing Authority, and successfully served 806 families and permanently housed 229 families through the CalWORKs Housing Support Program, which assists families in quickly obtaining permanent housing and provides wrap-around support to foster housing retention.

✓ Customer Service Center continues to handle customer inquiries for CalWORKs/CalFresh/Medi-Cal continuing cases, to included Health Care Reform calls. Over 1,791,000 calls were handled county-wide (137,814 per mo.), freeing up staff resources in district offices to focus on increased caseloads.

✓ Received five (5) National Association of Counties (NACo) Achievement Awards for Customer Video Interviewing, Trigger Alerts, Preventing Fraud Through Analytics, Work@Home, and CalWORKs Youth Employment Program (CYEP).
ACCOMPLISHMENTS CONTINUED

✓ Continued to increase the Work Participation Rate (WPR) of CalWORKs recipients by expanding job training and certified employment in trades needed locally, reengagement of sanctioned customers, and expansion of the subsidized Work Experience (WEX) program. This represents more than an 18% increase over the previous year for a cumulative WPR of 59.7%.

✓ Continued to partner with Technical Employment and Training (TET) Inc. to provide CalWORKs recipients with an industry-based training in manufacturing. Program participants achieved a 78.57% graduation rate and all graduates successfully passed the National Institute for Metalworking Skills (NIMS) certification. To date, approximately 31.82% of program graduates have entered employment in the manufacturing field.

✓ TAD staff successfully authorized nearly 64,000 additional Medi-Cal cases, including Affordable Care Act (ACA) cases from July 2014 through June 2015. This represents a 22% increase. These cases represent low-income eligible customers/families into Medi-Cal program for which they qualify.

✓ 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 7,986 electronic applications per month via the C4Yourself website.

Goals for 2015/16

TAD ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

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 six percent to avoid fiscal sanction.

4. Provide timely responses to calls from County residents for the ACA from the CSC.
   - Department 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>
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</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>
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 - 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 San Bernardino County.
**Statistical Information**

**TAD continuing caseloads through June 2015:**

![Graph showing caseload trends]

**TAD Foster Care, Child Care, and General Relief continuing caseloads through June 2015:**

![Graph showing caseload trends]
## Caseload by Program

TAD continuing caseloads through June 2015:

<table>
<thead>
<tr>
<th>Program</th>
<th>Caseload</th>
</tr>
</thead>
<tbody>
<tr>
<td>CalWORKs</td>
<td>48,946</td>
</tr>
<tr>
<td>CalFresh</td>
<td>150,675</td>
</tr>
<tr>
<td>Medi-Cal</td>
<td>324,807</td>
</tr>
<tr>
<td>Child Care</td>
<td>3,510</td>
</tr>
<tr>
<td>Welfare to Work</td>
<td>35,490</td>
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<tr>
<td>Foster Care</td>
<td>4,915</td>
</tr>
<tr>
<td>General Relief</td>
<td>524</td>
</tr>
</tbody>
</table>
Staffing Information 2014/15

Total staffing is approximately 3,053 employees.

Budget Information 2014/15

The department budget for FY 14/15 is $328,496,827.
To serve veterans and their families and ensure they receive the benefits they have earned.
Niko Housley, Customer

After years of dedicated service, Ms. Housley sought the help of the San Bernardino County Veterans Affairs (VA) office for her Post Traumatic Stress Disorder (PTSD). With the help of qualified staff at San Bernardino County VA and local partners, Ms. Housley now receives treatment, medication and counseling to improve the quality of her life. Listen to Ms. Housley's journey.

Click here to view the YouTube video.
FOR MORE INFORMATION

Veterans Affairs (VA) website:  http://hss.sbccounty.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.

An army veteran in an unmarked grave was honored with a grave marker bearing his name, rank and service information.
Accomplishments for 2014/15

VA ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Provided services to 28,048 county residents, representing a 6.5% increase over the previous year.

✓ Processed and approved 1,059 California College Fee Waivers for dependents of disabled veterans living or attending school in San Bernardino County. This provided county residents a savings of $4,828,716 in tuition and fees at California state colleges and universities.

✓ Helped clients obtain more than $85,000,000 in federal benefit dollars compared to $29 million for Los Angeles, $35 million for Riverside, $19 million for San Diego and $14.5 million for Orange counties.

✓ Initiated the San Bernardino County Veteran Friendly Business Project, in conjunction with the San Bernardino County Veteran ID Card Project. Over 1,000 businesses were visited and 4,686 ID cards were issue to ensure that it is as easy as possible for local veterans to receive discounts offered by local businesses which they earned through Honorable Service.

✓ Obtained $25,000 in Mental Health Services Act (MHSA) funding to support the Incredible Edible Community Garden’s high desert aquaponics greenhouse project to help rehabilitate veterans with Post-Traumatic Stress Disorder and Traumatic Brain Injury.

Goals for 2015/16

VA ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

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

2. Promote staff training and development to maintain United States Department of Veterans Affairs (USDVA) 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>Ensure efficient case management and resolution of claims.</td>
<td>• Percentage of pending case reviews that are less than 90 days old.</td>
</tr>
<tr>
<td>Promote staff training and development to meet continuing education requirements necessary to maintain staff’s USDVA accreditation.</td>
<td>• Percentage of staff maintaining accreditation.</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 San Bernardino 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 services 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 2009, walk-in traffic has increased nearly 37%, due to several factors:

- Soldiers who returned from Iraq and Afghanistan continue to discharge from the military.
- Deactivated Reservists and National Guard members continue to seek benefits.
- Vietnam and Gulf War veterans are ageing and they are seeking more benefits and services.
- Increase in collaborative events with other County departments, including DBH, DAAS and TAD, is resulting in a greater number of client referrals.
- Lingering effects of the Great Recession have driven veterans of all eras to apply for any available benefits.
WORKLOAD

Although the department workload has decreased 14% from that of the previous year, the 34,039 claim activities performed during the past year represents a 62% increase over the workload five years ago. Workload is defined as completed applications for monetary benefits, medical or mental health services, educational assistance, vocational rehabilitation, client correspondence 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. On average, each Veterans Service Representative has 477 open cases. While this number is still high, it does represent a 12% decrease from that of a year ago.

![Veterans Affairs Work Trends](image-url)
Staffing Information 2014/15

Total staffing is approximately 22 employees.

Budget Information 2014/15

The department budget for FY 14/15 is $1,985,233.
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, special projects and research, outcomes and quality support in a professional, ethical and customer-oriented manner.
Overview

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, storage and distribution, and research, outcomes, and quality support. ASD employs ethical, knowledgeable, and professional staff committed to helping our customers reach their goals.

Accomplishments for 2014/15

ASD ACCOMPLISHED THE FOLLOWING IN 2014/15:

Contracts
✓ Successfully administered procurements, prepared and processed all resulting contracts and monitored 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       69
  ⇒ Revenue contracts and amendments              48
  ⇒ Service contracts and amendments              249
  ⇒ Employment contracts and amendments           91
  ⇒ Memorandum of Understanding                    40
  ⇒ Procurements                                      28
  ⇒ Contracts monitored                               134
✓ Participated in the implementation of payment tracking for HS departments.
✓ Worked closely with fiscal monitoring staff, department staff, and PDD to coordinate, streamline, and complete contract monitoring per the HS Monitoring Policy.
ACCOMPLISHMENTS CONTINUED

✓ Collaborated with HS departments, Probation, ARMC, and the Sheriff’s Department to develop Data Sharing agreements and Medi-Cal Outreach and Enrollment agreements.

✓ Interfaced with various stakeholders to further refine efficient use of resources and consistency in the preparation and processing of Board Agenda Items.

✓ Participated in various committees to update and clarify County Policies regarding procuring and contracting.

✓ Participated in PSD’s annual Self-Assessment.

✓ Worked with ITSD and HS Special Projects to increase HS database functionality and capabilities.

✓ Worked with various stakeholders to clarify vetting of subcontractors.

✓ Participated in professional development opportunities including MLA.

Facilities

✓ Replaced former Colton TAD facility (33,000 square feet) with new 48,000 square feet facility.

✓ Completed 8,500 square foot expansion of Program Integrity Division (PID).

✓ Completed San Bernardino PERC furniture reconfiguration project.

✓ Completed paint and carpet replacement project at CFS Juvenile Dependency Courts facility.

✓ Refreshed several HS facilities with new paint and carpet per the scheduled terms of lease agreements.

Finance

✓ Coordinated 2015/16 budget process for 19 budget units totaling over $1.2 billion including 6,000 employees.

✓ Assisted HS departments with maximizing use of available 2014/15 County Expense Claim funding. As a result, 99% ($498 million) of available capped funding was utilized and HS remained within established Discretionary General Fund and Realignment targets.

✓ Effectively continued support of the Electronic Purchasing (ePro) system. Maintained complex HS ePro profiles, coordinated document input into the system and coordinated with the Auditor-Controller/Treasurer/Tax Collector to ensure all invoices were paid by year-end. Continued participation in the County ePro Users Group to support system enhancement efforts.

✓ Worked with ITSD to plan and develop a Contracts Database extract application to provide needed reports.

✓ Worked with ITSD to develop the business requirements for the HS Time Study Replacement Program that will be implemented in 2015/16.

✓ Established a workgroup to plan and develop a Mobile Device Tracking and Billing system.
ACCOMPLISHMENTS CONTINUED

Storage and Distribution
✓ Provided essential set up and delivery for the opening of the new Children’s Assessment Center.
✓ Helped the Yucaipa Sheriff’s office close out old facility and helped facilitate the move into the new facility.
✓ Worked closely with Surplus to help implement new procedures for delivery of material to the Surplus facility.
✓ Continued to partner and exercise with the DPH Preparedness and Response Program via the Strategic National Stockpile workgroup. Currently have 6 staff qualified in Receive Stage and Store warehousing procedures.
✓ Worked with Human Resources to complete an Organization Review of all current positions at the HS Warehouse.
✓ Partnered with VA to store and distribute donated items to veteran’s groups.
✓ Partnered with CF for the 7th consecutive year for the annual “Celebration of Giving” campaign for holiday gifts/donations for children under County programs. This effort includes working with San Bernardino County Fire High Desert Spark of Love Toys and coordinating of storing and distributing surplus toys.
✓ Partnered with CF to store and distribute donations from Hanes Brand, Inc., to help the homeless and disabled.
✓ For the third consecutive year, stored and distributed toys/gifts to the ladies group “Bonnes Meres” as part of their annual birthday luncheon program.
✓ Partnered with CFS and CF for storing and distributing over 5,000 “Campership” supplies and goods.
✓ Accepted, stored and distributed tens of thousands of donated items from Amazon Corp., to the benefit of CF and many other charitable organizations.

Research and Outcomes
✓ Completed several analyses of budget proposals for impact on HS departments and the customers they serve.
✓ Completed triennial needs assessment concerning availability and suitability of group home beds for CFS placements.
✓ Designed, administered, and analyzed online employee surveys for CFS.
✓ Continued production of approximately 100 monthly reports utilized by CFS, TAD, and DAAS managers.
✓ Utilized ARC-GIS to create maps for TAD and CFS to assist in making policy and business decisions.
ACCOMPLISHMENTS CONTINUED

✓ Assisted TAD, CFS and DAAS in implementing numerous policy and program changes.
✓ Assisted TAD in managing significant increases to Medi-Cal caseloads due to the Affordable Care Act.

Quality Support
✓ Assisted CFS, TAD, DAAS, PDD and the Probation Department with ongoing case reviews of over 6,000 cases.
✓ Researched and collected data quarterly for CFS regarding youth aging-out of foster care.
✓ Completed annual General Relief Case review to ensure that county general fund dollars devoted to assisting indigents are properly spent.
✓ 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 documents, course of action, and timeframes met by social workers and social service practitioners when conducting investigations.
✓ Conducted research and case preparation to assist CFS and the state in passing the Federal Title IV-E audit.

Goals for 2015/16

ASD ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

Contracts
1. Continue to participate in the implementation of payment tracking for HS departments.
2. Modify the HS database as needed to improve functionality.
3. Interface with various stakeholders to further clarify vetting of subcontractors.
4. 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.
5. Continue to collaborate with HS departments, Probation, ARMC, and the Sheriff's Department to develop Data Sharing agreements and Medi-Cal Outreach and Enrollment agreements.
6. Continue to work with various stakeholders to further refine efficient use of resources and consistency in the preparation and processing of Board Agenda Items.
GOALS CONTINUED

7. Participate in various committees to update and clarify County policies regarding procuring and contracting as well as refining procurement procedures countywide.

8. Collaborate with departments to improve communication, ensuring goals are achieved, programs are well-defined, and timelines are met.

9. Explore and utilize professional development opportunities.

Facilities
1. Pursue new Ontario TAD Processing Center.

2. Pursue replacement of existing Victorville DAAS building to better serve DAAS business model and clientele.

3. Pursue replacement building for existing San Bernardino CFS; Special Services. Replacement facility to include Emergency Operations Center.

4. Pursue new Apple Valley location for TAD to meet the needs of this expanding clientele.

5. Continue design enhancements of existing ergonomic furniture within HS facilities.

Finance
1. Continue participation in workgroups at County Purchasing to assist with countywide support and enhancement of ePro.

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 implement a Mobile Device Tracking and Billing system. Comply with HS policies regarding issuance guidelines and controls necessary to effectively manage an increasing inventory.

5. Assist ITSD with evaluation and final implementation of the new HS web-based Time Study program.

6. Work with ITSD and HS Contracts unit to enhance the HS Contracts Database and implement an extract application to provide needed control reports.

7. Compile procedure manual detailing requirements/procedures for the year-end closing process.

8. Work with ITSD to complete refinement of the Online Requisition System. Participate in the final roll out to departments and support divisions.
GOALS CONTINUED

**Storage and Distribution**
1. Continue overage box and file destruction of old files. Deconstruct three existing rack rows to facilitate storage of oversized palletized material.
2. Lease open rack space to interested County departments and solicit new County partners to utilize empty rack space as it becomes available.
3. Utilize Risk Management training to continue providing a safe and healthy environment for warehouse employees.
4. Partner with charitable organizations to store and distribute donated goods to deserving County programs.
5. Exercise with the State of California and DPH to ensure we have the capability to respond to both physical natural disasters and Public Health emergencies.
6. Modernize both equipment and software to ensure the HS Warehouse is efficient and robust.
7. Continue to encourage all staff to participate in education and training to enhance their knowledge and ability.

**Research and Outcomes**
1. Support TAD is meeting expectations regarding timelines, accuracy, and customer service.
2. Support CFS implementation of the System Redesign and Performance Improvement Plan, and continuous Quality Improvement.
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.

**Quality Support**
1. Continue to support the Countywide Vision by ensuring quality services are delivered according to policy.
2. Provide case reviews, surveys, and data analysis.
3. Cross-train analysts across programs to reduce specialization and increase flexibility.
GOALS CONTINUED

4. Increase the ratio of federal to non-federal funds in the Foster Care program by reviewing non-federal eligibility determinations.

5. Provide case review services to In-Home Supportive Services to insure that support is appropriate and meets customer needs.

6. Perform case reads and surveys required to measure improvements in outcomes realized by the CFS System Improvement Plan.

7. Support the Countywide Vision by making information on HS programs easily accessible and readily available to residents and stakeholders.

8. Implement analytics and performance dashboards to monitor performance at all levels.

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.

**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. The unit 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. They also track and determine eligibility for foster care children receiving Social Security Income (SSI) to help increase the County’s Title IV-E penetration rate. The unit 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. Additionally, the Quality Support Unit audits foster care cases for Title IV-E compliance and eligibility. The unit also performs quarterly state-mandated Quality Assurance case reviews for DAAS’ IHSS program.
Staffing Information 2014/15

Total staffing is approximately 88 employees.

Administrative Support Division
Budgeted Staffing

- Warehouse: 23
- LRQU: 16
- Finance: 18
- Special Projects: 2
- Facilities: 9
- Contracts: 10
- Emergency Management: 4
- Administration: 6

Budget Information 2014/15

The division budget for FY 14/15 is $7,476,122.

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.

Administrative Support Division
Budgeted Appropriations

- Operating Expenses: $597,959
- Staffing Expenses: $6,878,163
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 2014/15

HS AUDITING ACCOMPLISHED THE FOLLOWING IN 2014/15:

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

✓ Collected approximately $5,653,634 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 120 contractors throughout San Bernardino, Riverside, and Los Angeles counties who receive federal and state funding.

✓ Automated the prepaid card and check counting and verification process by purchasing automated tools such as an electronic card/check counter.

✓ Developed online fiscal training relative to internal controls for immediate use by HS fiscal staff including newly hired personnel.
ACCOMPLISHMENTS CONTINUED

- Established a new unit with a specialty in collection, remittance and reconciliation for processes such as Child Support and In-Home Supportive Services (IHSS).
- Provided additional fiscal support to DAAS-IHSS program relating to receipting overpayment collections directly to the statewide case management system.

Goals for 2015/16

HS AUDITING ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

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. Hire, train and mentor Accounting Interns to assist with fiscal monitoring assignments and help Interns to be better prepared for the job market in the accounting/auditing field.
7. Collaborate with the Information Services Department and ITSD to make the Manual Warrant System (MWS) web-based.
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</td>
<td>• Percentage of reports submitted within specified time frames = 100%.</td>
</tr>
<tr>
<td>time frames.</td>
<td></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</td>
<td>• Feedback from customers.</td>
</tr>
<tr>
<td>generated by staff.</td>
<td></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.
- Provides fiscal contract monitoring services for multiple departments within HS to ensure fiscal compliance with contract provisions and federal and state regulations.

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**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>672,681</td>
<td>$294,314,610</td>
</tr>
<tr>
<td>Cash benefits issued by warrant (MW, GR, CIV)</td>
<td>318,089</td>
<td>$214,052,343</td>
</tr>
<tr>
<td>Collection of benefit over-payments</td>
<td></td>
<td>$19,191,859</td>
</tr>
</tbody>
</table>
Total staffing is approximately 46 employees.

HS Auditing Division
Budgeted Staffing

- CalWorks: 17
- Clerical: 3
- Administration: 25
- Management: 1

Budget Information 2014/15

The division budget for FY 14/15 is $2,602,614.

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 Division
Budgeted Appropriations

- Operating Expenses: $520,523
- Staffing Expenses: $2,082,091
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Information, Technology & Support Division

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.
Overview

DESCRIPTION

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 2014/15

ITSD ACCOMPLISHED THE FOLLOWING IN 2014/15:

**Application Development Team (ADT)**
- Developed and implemented PID Case Assessment Review and Tracking System (CARATS).
- Executed professional services contract with Imperva. ADT is configuring production for Imperva environment.
- Completed the installation and conversion from SQL 2008 environment to new SQL 2014 environment.
- Making final preparations to support local C-IV Data Warehouse processing within the SQL 2014 environment.
- Developing new improved Timestudy Application.

**Business Solutions Unit (BSU)**
- Managed 38 IT projects to increase team efficiencies to better serve our customer’s needs.
- Expanded level II (Business Solutions Unit) customer service support for completed projects that require personalized support.
- Implemented Phase 1 (hardware implementation) imaging/scanning for two departments.
- Completed support to maintain Medi-Cal Personally Identifiable Information (PII) solution throughout HS departments.
ACCOMPLISHMENTS CONTINUED

**Systems Operations & Support (SOS)**
- Completed refresh of 10 TAD and CFS office PC’s and peripheral equipment.
- Implemented new tape backup hardware infrastructure.
- Deployed new HS Active Directory network domain, completing Phase 1.
- Completed Polycom Video conferencing refresh on 12 new units within TAD and CFS.
- Implemented storage hardware for off-site Disaster Recovery site in Hesperia.
- Completed refresh of 240 monitors for Personnel and PDD.
- Completed migration from Internet Explorer (IE) 8 to IE 10 for 5,500 workstations.

**Software Quality Assurance (SQA)**
- Supported HS ITSD customers by completing 1,005 website updates and 184 SharePoint support requests.
- Supported all ITSD units in the testing and implementation of projects.
- Implemented HS Personnel intranet site in SharePoint.
- Implemented the new Work Experience (WEX) SharePoint site that allows tracking of WEX hiring process.
- Implemented Family Stabilization SharePoint site to allow tracking of benefits for reporting to the state.
- Implemented Phase 1 of PDD Online Handbooks site converting the site and TAD forms to SharePoint.
- Conducted IE 8 and IE 10 project testing.
ITSD ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

**Application Development Team (ADT)**
2. Fully implement Imperva PII tracking.
3. Continue support, application development and custom programming for SharePoint.
4. Complete Online Requisition System (ORS) Phase 2 Enhancements.
5. Continue to support local C-IV Data Warehouse processing and convert to SQL 2014 environment.
6. Complete development and implement new improved Timestudy Application.
7. Establish new SharePoint 2013 environment, migrate to SharePoint 2013, and establish SharePoint Business Intelligence services.
8. Develop and implement Mobile Device tracking and billing application for ASD Finance.
9. Rewrite FARRS Application and move from a client/server application to a web-based application.

**Business Solutions Unit (BSU)**
1. Reintroduce project management lessons and curriculum for all project managers to increase team efficiencies to better serve our customer’s needs.
2. Project Managers to complete Project Management Institute (PMI) identified core courses.
3. Continue to expand level II (Business Systems Unit) customer service support for completed projects.
4. Implement Phase 2 (post hardware implementation) imaging/scanning for two departments.

**Systems Operations & Support (SOS)**
1. Complete implementation of Phase 2 of a standardized Storage Area Network (SAN) Technology - Storage Expansion - Disaster Recovery Storage.
2. Replace current ITSD Help Desk product using ISD’s new Help Desk infrastructure - complete Phase 1 implementation.
3. Deploy new HS Active Directory network domain - complete Phase 2 implementation.
4. Complete implementation of BlueCoat internet monitoring reporting tool.
5. Implement Microsoft Lync in production (notification module only).
6. Implement Mobile Iron Administrative console for HS.
GOALS CONTINUED

7. Refresh 22 file/print servers throughout HS.
8. Implement new wireless network infrastructure (centralized).
9. Perform 3270 Emulation Software upgrade throughout HS.
10. Upgrade 230 training laptop stations for the Performance, Education & Resource Centers (PERC).
11. Upgrade 200 ITSD/Admin PC workstations with monitors.

Software Quality Assurance (SQA)
1. Continue conversion of public websites to public SharePoint sites to allow departments to manage their site content.
2. Continue conversion of internal websites to SharePoint sites to allow departments to manage their site content.
3. Complete development of and implement PDD Incident Report SharePoint site.
4. Complete development of and implement CalHEERs Help Desk Phase 2 project. Phase 2 will automate the creation of state required forms for reporting errors with the state CalHEERs system.
5. Complete development of and implement Phase 2 of PDD Online Handbooks project. Phase 2 involves moving all remaining forms and manuals to SharePoint and creating an interface for viewing the content.
6. Continue the internet SharePoint Search Refining project.

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. It accomplishes its mission through integration of four (4) 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>2014/15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desktop computer systems (C-IV and non C-IV)</td>
<td>9,362</td>
<td>7,732</td>
</tr>
<tr>
<td>Printers (network and personal)</td>
<td>1,835</td>
<td>1,892</td>
</tr>
<tr>
<td>Laptops</td>
<td>797</td>
<td>823</td>
</tr>
<tr>
<td>Servers (physical)</td>
<td>190</td>
<td>216</td>
</tr>
<tr>
<td>Tablets</td>
<td>n/a</td>
<td>177</td>
</tr>
<tr>
<td>Servers (virtual)</td>
<td>126</td>
<td>141</td>
</tr>
<tr>
<td>Switches</td>
<td>124</td>
<td>114</td>
</tr>
<tr>
<td>UPS (Universal Power Supply)</td>
<td>203</td>
<td>142</td>
</tr>
<tr>
<td>Pocket PC’s</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Projectors</td>
<td>155</td>
<td>225**</td>
</tr>
<tr>
<td>Scanners (non C-IV)</td>
<td>157</td>
<td>229</td>
</tr>
<tr>
<td>C-IV Scanners</td>
<td>2,476</td>
<td>2,916</td>
</tr>
<tr>
<td>Wireless Access Points</td>
<td>259</td>
<td>277</td>
</tr>
</tbody>
</table>

**Includes displays, projectors, and Polycoms.**
<table>
<thead>
<tr>
<th>Service Provided</th>
<th>2013/14</th>
<th>2014/15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calls to Help Desk</td>
<td>30,057</td>
<td>25,706</td>
</tr>
<tr>
<td>New equipment installed</td>
<td>301</td>
<td>200</td>
</tr>
<tr>
<td>Moved/changed-out equipment</td>
<td>2,330*</td>
<td>270*</td>
</tr>
<tr>
<td>Servers installed (new or upgraded)</td>
<td>20</td>
<td>38</td>
</tr>
<tr>
<td>Site inventories</td>
<td>90</td>
<td>90</td>
</tr>
<tr>
<td>Equipment and software orders for departments</td>
<td>326</td>
<td>224</td>
</tr>
<tr>
<td>County-owned Smart phones</td>
<td>165</td>
<td>702</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 2014/15

Total staffing is approximately 99 employees.

Budget Information 2014/15

The division budget for FY 14/15 is $12,138,652.

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 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 2014/15

PERC ACCOMPLISHED THE FOLLOWING IN 2014/15:

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

✓ Won 2 California Association of Public Information Officials (CAPIO) awards, 3 Public Relations Society of America (PRSA) awards and 1 National Association of Counties (NACo) award.

✓ Coordinated and assisted with training nearly 500 Children and Family Services staff on the Structured Decision Making risk assessment tool.

✓ Assessed and redesigned Orientation and Induction curriculum for Children and Family Services.

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

✓ Conducted strategic planning and facilitation services for the Children’s Policy Council.

✓ Conducted action planning and facilitation services for the Interagency Council on Homelessness.

✓ Developed and delivered succession planning training.

✓ Increased the number of Health Care Reform training modules.

✓ Increased the use of Adobe Connect to host online training forums and focus groups.
Goals for 2015/16

PERC ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

1. Enhance community awareness of Human Services.
2. Continue to support Human Services department initiatives through collaboration and strategic action.
3. Increase awareness and utilization of PERC services and resources throughout Human Services.
4. Broaden utilization of technology resources to enhance training options and deliverables.
5. Launch newly redesigned Orientation and Induction (onboarding) curriculum.
6. Assess and redesign Fundamentals of Supervision/Management to align with current needs throughout Human Services.

CalFresh/CallWORKs Orientation and Induction training
How Outcomes Are Measured

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

Program Information

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 Communications 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 publication of the HS Connection e-newsletter.

*Human Services Connection e-newsletter*

*Video* – Family Exchanges Infinity Rings to Celebrate Son’s Adoption

Animal Care and Control Chief Brian Cronin in the KFON-TV studio recording a “Local Matters” session with Fontana Mayor Aquanetta Warren.

The Communications Unit received the 2015 Polaris Award from the Public Relations Society of America for the “Be A Hero” campaign and the Capella Award for Homeward Bound Project Adopt.

The unit also received the Award of Excellence and the Award of Distinction from the California Association of Public Information Officials for the “Be A Hero” campaign.
Total staffing is approximately 37 employees.

The division budget for FY 14/15 is $3,675,282.

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.
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 2014/15

**HS Personnel Accomplished the Following in 2014/15:**

- Completed multiple updates and improvements to the HS Personnel website.
- Completed several off-site trainings to address new personnel/payroll procedures and recent changes to the MOU.
- Began implementation of Phase IV of the Personnel Database and made progress towards full requirement functionality.
- Started handling all personnel transactions for Preschool Services Department and began handling all payroll and personnel transactions for Veterans Affairs.
- Created new HS identification badge template and disseminated new badges to HS management and key staff members.
- Made incremental progress on transitioning Microfiche records into complete electronic availability.
- Cut back on paper usage by switching to electronic versions of internal documents within HS Personnel.
Goals for 2015/16

HS PERSONNEL ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

1. Continue to monitor electronic-report-delivery success and further examine processes to eliminate as many paper reports as possible.

2. Finish Microfiche records transition into complete electronic availability.

3. Continue to expand outreach efforts towards departments and divisions to offer training, presentations, and increase awareness about HS Personnel duties and services offered.

4. Increase speed and efficiency of County Service Pin delivery.

5. Finish transition of microfiche records for full electronic availability.

6. Examine new hire timeframes, background processes, and physical requirements to help cut down time from job offer to start date.

7. Build upon our fast and efficient delivery of services to customers and explore additional ways that can enhance or augment our 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.
Program Information

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.
Staffing Information 2014/15

Total staffing is approximately 23 employees.

<table>
<thead>
<tr>
<th>Position</th>
<th>Budgeted Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical</td>
<td>5</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>4</td>
</tr>
<tr>
<td>Payroll Specialists</td>
<td>13</td>
</tr>
<tr>
<td>Management</td>
<td>1</td>
</tr>
</tbody>
</table>

Budget Information 2014/15

The division budget for FY 14/15 is $1,527,856.

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>Expense</th>
<th>Budgeted Appropriations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Expenses</td>
<td>$183,343</td>
</tr>
<tr>
<td>Staffing Expenses</td>
<td>$1,344,513</td>
</tr>
</tbody>
</table>
The mission of the Program Development Division (PDD) is to build a foundation for public service by providing accurate and timely program and policy development to HS departments and other agencies, through collaboration, communication, and education.
Overview

DESCRIPTION

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 2014/15

PDD ACCOMPLISHED THE FOLLOWING IN 2014/15:

✓ Provided project management to support HS and County partners’ collaborations/initiatives, including Foster Youth Credit Reports, Coordinated Care Initiative; Tribal Transitional Assistance for Needy Families (TANF); Work Incentive Nutritional Supplement (WINS) to increase Work Participation Rates; and Child Care services transitioned to Welfare to Work staff.

✓ Supported County disaster planning efforts by developing and publishing the HS Policy and Standard Practices (HSPSP) on Disaster Preparedness; updating Disaster Emergency Operations Plans (DEOPs) and participating in the development of a Countywide Disaster Planning document.

✓ Developed, updated and published HSPSP for Mobile Devices, Tuition Reimbursement and Copier policy.

✓ Assisted the Health Care Reform (HCR) Coalition in the development and implementation of a contract with Loma Linda University School of Public Health for Medi-Cal Outreach and Enrollment at ARMC, county jails, Probation Department Day Reporting Centers and public events throughout the county.

✓ Assisted in securing $907,406 in new funding under Senate Bill 18 to provide Medi-Cal renewal assistance.

✓ Supported the implementation of CFS’ business redesign initiatives by assisting with the establishment of Sibling Units and Jurisdiction/Disposition Writer Units; and supported successful implementation of Katie A. /Core Practice Model by providing project management services for the Joint Management Structure and developing core policy.

✓ Assisted TAD with the development of an MOU with the Housing Authority and local non-profit agencies to implement the Homeless Services Program and expand the Family Stabilization program, which provide intensive case management and housing navigation services.

✓ Supported TAD in establishing a Processing Center to meet the need for increased and timely Medi-Cal and CalFresh application processing during Affordable Care Act (ACA) open enrollment.

✓ Developed and completed a Program Specialist II Leadership training series, trained 15 staff on MS Project software, created templates and provided refresher training on InDesign software, and conducted Program Specialist I on-boarding for new staff.
ACCOMPLISHMENTS CONTINUED

✓ Adopted new technology to improve the accessibility and speed of delivering policy handbooks, forms and vision documents to HS departments. Equipped staff with tablets and Virtual Private Network access to increase mobile computing while attending off-site meetings.

✓ Provided critical operational data by completing state/federal surveys regarding the DAAS Case Management System; CalFresh participation; and Trafficking and Crime Victims Assistance Program.

✓ Developed and submitted reports for HS departments to meet state mandates and funding requirements.

✓ Assisted HS departments with audits and quality assurance reviews to ensure compliance with federal and state standards.

✓ Created, redesigned and updated program brochures, outreach and marketing materials, presentations and public-facing publications to meet new county branding standards, including the development of new publications such as: Supervisors’ Reference Handbook for CFS, Relative/Non-Relative Extended Family Member Training Handbook and Post-Adoption Services Guide.

✓ Generated awareness of HS programs and services through more than 20 presentations and trainings regarding privacy and security, the legislative process, available programs, accessibility of online information and application enrollment services.

✓ Supported TAD program training by participating as subject matter experts, assisting with development of online Policy Reviews, reviewing content of numerous on-the-job training modules and creating presentations using enhanced presentation software.

✓ Worked with customer department staff and automation vendors on system enhancements, issue resolution, reporting capabilities and TAD migration user acceptance testing of the LEADER Replacement System.

✓ Ensured ongoing service delivery to the child welfare community by facilitating collaboration among social workers and service providers through vendor fairs and Semi-Annual Contractors’ Meetings throughout the county.

✓ Engaged and supported HS departments in the legislative process by circulating pending bills for review and comment, assisting in the development of county platforms and association priorities for federal and state laws.

✓ Acted as effective liaison between HS departments and state agencies, as well as professional associations.
Goals for 2015/16

PDD ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

1. Assist HS departments in identifying initiatives for award submissions, develop narratives and coordinate inclusion or pertinent data.

2. Support departments in implementing major projects/initiatives including: Continuous Quality Improvement Process; Children and Family Services Reviews; Systems Improvement Plan; Continuum of Care Reform; Structural Decision Making tool; Command Poster/Center; IHSS Overtime regulation changes; CalFresh Quality Control error mitigation plan; 2015-16 ACA Open Enrollment and Medi-Cal renewal processing and online CalWORKs Assessment Tool for Welfare to Work.

3. Develop and publish new policy and procedure products as appropriate.

4. Establish protocol for data sharing among HS departments.

5. Provide contract support services for ongoing and upcoming contracts and MOUs and monitor all new and existing contracts for program compliance.

6. Support the HS Emergency Services Unit in developing policy and procedure materials.

7. Collaborate with ITSD to automate the breach reporting process and transition of PDD forms catalogs to ShareSpace.


10. Support CFS Business Redesign initiatives.

11. Assist DAAS with the Coordinated Care Initiative by supporting the Universal Assessment Tool implementation and Coordinated Care Team activities.

12. Work with automation vendors on system enhancements and reporting capabilities including: AB 1341; new/revised TAD eXemplar reports; LEADER Replacement System comparison with the C-IV system, and other C-IV migration planning activities.
### PDD Measures Outcomes by the Following Methods:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support TAD’s Quality Control error mitigation plan with policy flyers, flow charts, training and other tools.</td>
<td>- TAD’s CalFresh Quality Control error rate is maintained below the federal tolerance level.</td>
</tr>
<tr>
<td>Support CFS’ Child and Family Services Reviews (CFSR) and Continuous Quality Improvement (CQI).</td>
<td>- The required number of children, families and service providers are engaged in CFSR</td>
</tr>
<tr>
<td></td>
<td>- CQI standards are met</td>
</tr>
<tr>
<td>Support TAD’s Customer Service Advantage initiatives.</td>
<td>- Publish one or more handbook letters, flow charts, and forms.</td>
</tr>
<tr>
<td></td>
<td>- Participate in training development/delivery.</td>
</tr>
<tr>
<td></td>
<td>- Show improved service delivery and customer satisfaction through TAD’s customer survey data.</td>
</tr>
<tr>
<td>Develop and implement new programs/contracts and state reports.</td>
<td>- Program/policy is implemented and reports submitted by dates prescribed in regulations.</td>
</tr>
<tr>
<td></td>
<td>- Number of persons successfully enrolled or served under new program/service/contracts.</td>
</tr>
<tr>
<td>Support ACA Open Enrollment and Medi-Cal Renewal Processing.</td>
<td>- Processing of applications and renewals within state mandated timeframes.</td>
</tr>
<tr>
<td>Develop and publish new handbooks for DAAS, PSD and the Public Authority.</td>
<td>- Publish all chapters of the new handbooks.</td>
</tr>
</tbody>
</table>
Program Information

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 departments 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.


15. Develop outreach presentations/materials and provide public speaking services regarding HS programs.
Statistical Information

✓ Provided program and policy development products/services to assist HS departments in meeting their FY 2014/15 business plan objectives, publishing and disseminating 2,825 policy and procedure products.

✓ Developed and/or maintained 3,619 electronic forms in an on-line repository.

✓ Analyzed and implemented 363 state regulatory letters/notices.

✓ Developed and disseminated 3,972 Frequently Asked Questions for the online knowledge database including the dedicated PDD Question mailbox.

✓ Supported a total of 348 Contracts/Memorandum of Understanding (MOUs).

✓ Provided response and resolution to 2,546 C-IV system trouble tickets, and processed 2,626 California Healthcare Eligibility and Enrollment System (CalHEERS) trouble tickets.

✓ Developed and issued 1,936 Medi-Cal Eligibility Determination System (MEDS) reports for compliance action by TAD staff.

✓ Monitored 1,086 legislative bills, completed 18 bill analyses and assisted with developing 13 letters of support/opposition.

✓ Developed award submissions for 11 National Association of Counties (NACo) 2015 Achievement Awards with all 11 awards received, and developed eight submissions for the California State Association of Counties (CSAC) Challenge Award competition.
Total staffing is approximately 61 employees.

### Program Development Division
**Budgeted Staffing**

<table>
<thead>
<tr>
<th>Division</th>
<th>Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Services</td>
<td>17</td>
</tr>
<tr>
<td>CalWORKS</td>
<td>21</td>
</tr>
<tr>
<td>Clerical</td>
<td>12</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>8</td>
</tr>
<tr>
<td>Management</td>
<td>3</td>
</tr>
</tbody>
</table>

### Budget Information 2014/15

The division budget for FY 14/15 is $5,627,307.

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 Appropriations**

- **Operating Expenses**: $168,819
- **Staffing Expenses**: $5,458,488
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 2014/15

PID ACCOMPLISHED THE FOLLOWING IN 2014/15:

**Case Review Unit (CRU)**

- Finalized the development stages of the new web-based Case Assessment, Review and Tracking System (CARATS) in cooperation with Information, Technology & Support Division (ITSD).
- Processed 88 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 76 Grievance Review Hearing requests.
- Received and processed 19 ArrowCare (LIHP) Appeals of Action.
- Received and completed 61 fatality/near fatality referrals.
Continued involvement as core participants at Multi-Disciplinary Team (MDT) meetings, including:
  * Child Death Review
  * Children’s Assessment Center (CAC)
  * Loma Linda University Children’s Hospital, Child Abuse Team
  * Elder Abuse Team

**Quality Review Unit (QRU)**

- Performed 6,935 home visits in support of eligibility and benefit determinations.
- Conducted 56,944 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 49,050 CalWORKs cases to determine eligibility for adults based on time-on-aid.
- Computed $1,009,131 of CalWORKs overpayments and $1,381,182 of CalFresh overissuances resulting from the Quality Assurance reviews completed.
- Reconciled 76,067 earned income abstracts resulting in the establishment of $1,461,796 CalWORKs overpayments and $4,836,852 of CalFresh overissuances.

**Appeals Unit (AU)**

- Received and processed 6,094 requests for hearing.
- Achieved 317 disqualifications from participation in the CalWORKs and/or CalFresh programs through the Administrative Disqualification process.
- Of the decisions received and heard by Administrative Law Judges, 62% upheld the counties determination.
- Appeals staff participated in state trainings and workgroups in partnership with other counties and advocates working towards improved statewide practices and consistent understanding/application of regulations.
- Adapted current and developed new processes relevant to numerous program changes including the many components of Affordable Care Act.
- Embraced the additional requirements presented by the Affordable Care Act while continuing to provide excellent customer service to claimants and meet all mandated deadlines.
ACCOMPLISHMENTS CONTINUED

Fraud Investigation Unit (FIU)
- Conducted 320 investigations resulting in 174 Administrative disqualifications; Currently are a leader in the state at identifying and reducing the misuse of CalFresh trafficking.
- Assigned a dedicated team of investigators whose focus is preventing fraud with the use of Predictive Analytics. Twenty-six percent of the referrals completed by this team were found to be discrepant.
- Referred 121 felony cases to the District Attorney’s Office for prosecution, with an additional 210 cases sent to collections.
- Identified $1.6 million of fraudulent payments.
  - Referred over $1 million to the District Attorney’s Office for review and potential criminal prosecution.
  - Referred over half a million dollars for benefit reduction and other collection means available.
- Completed 10,693 case investigations.

Goals for 2015/16

PID ESTABLISHED THE FOLLOWING GOALS FOR 2015/16:

Case Review Unit (CRU)
1. Complete production and full implementation of the CARATS system.
2. Improve processes on the identification of County liability and exposure by identifying practice and policy issues, abuse trends and outlining areas of improvement in managing Critical Incidents.
3. Improve internal practices through analysis, redesign of current process and efficient use of available technology.

Quality Review Unit (QRU)
1. Develop and implement a process to complete the increase in earned income abstracts.
2. Ensure accuracy of customer benefits through case reviews and collaboration.
3. Establish procedures for referring appropriate Beneficiary Earnings Exchange Record (BEER) cases for Administrative Disqualification Hearings (ADHs).
GOALS CONTINUED

**Appeals Unit (AU)**
1. Identify and update unit practices refining, evaluating and developing innovative approaches to achieve and maintain successful outcomes.
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. Develop and present skill enhancement focused trainings for Appeals staff to increase successful outcomes in hearing.

**Fraud Investigation Unit (FIU)**
1. Continue to provide optimum customer service to TAD by continuously monitoring FIU manpower in order to evenly distribute workloads and complete referrals in a timely and thorough manner.
2. 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.
3. Continue to develop and implement proactive projects, such as the Cal Fresh trafficking program, as well as the analytics project to ensure that the unit remains innovative in combating fraud.

**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>
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<tbody>
<tr>
<td><strong>Case Review Unit</strong></td>
<td>• Satisfactory rating as indicated by customer feedback.</td>
</tr>
<tr>
<td>Provides critical incident investigations and reports.</td>
<td>• Customer feedback.</td>
</tr>
<tr>
<td>Ensure effectiveness of reports to County departments.</td>
<td>• Identified problem areas and corrective action tracked via Action Item reports.</td>
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<tr>
<td>Investigate and provides preliminary recommendations on fatality/near fatality cases.</td>
<td>• Recommendation adopted by CRU/CFS management consensus.</td>
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<tr>
<td>Provide Grievance Review Hearing recommendations.</td>
<td>• Recommendation adopted/rejected or modified by the director of CFS.</td>
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<tr>
<td><strong>Quality Review Unit</strong></td>
<td>• Track and monitor the number of abstracts completed and processed within regulatory timeframes.</td>
</tr>
<tr>
<td>Develop and implement a process to complete the increase in earned income abstracts.</td>
<td>• Maintain active case payment error rate below 6%.</td>
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<tr>
<td>Ensure accuracy of customer benefits through case reviews and collaboration.</td>
<td>• Track and monitor the number of ADH referrals submitted based on the established procedures and the resulting outcomes.</td>
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<tr>
<td>Establish procedures for referring appropriate BEER cases for ADHs.</td>
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<tr>
<td><strong>Appeals Unit</strong></td>
<td>• Evaluate Appeals Process and Unit Policies chapters in the Appeals Resource Manual providing identified refinement and updates.</td>
</tr>
<tr>
<td>Identify and update unit practices refining, evaluating and developing innovative approaches to achieve and maintain successful outcomes.</td>
<td>• Maintain regularly scheduled meetings between Appeals and DAAS staff for open dialogue and discussion. Facilitate a “Harris” forum with CFS RAU for information sharing and common understanding of “Harris” case preparation components.</td>
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<tr>
<td>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.</td>
<td>• Identify, develop and conduct at least two focused trainings for staff.</td>
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<tr>
<td>Develop and present skill enhancement focused trainings for Appeals staff to increase successful outcomes in hearing.</td>
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</table>
## HOW OUTCOMES ARE MEASURED CONTINUED

<table>
<thead>
<tr>
<th>Activity</th>
<th>Measure</th>
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</thead>
<tbody>
<tr>
<td>Fraud Investigation Unit</td>
<td>• Continuously monitor FIU manpower to evenly distribute workloads.</td>
</tr>
<tr>
<td>Continue to provide optimum customer service to TAD</td>
<td>• Monitor and document topics trained and training hours.</td>
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<tr>
<td>by continuously monitoring FIU manpower in order to</td>
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<tr>
<td>evenly distribute workloads, complete referrals in</td>
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<tr>
<td>a timely and thorough manner.</td>
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<tr>
<td>Provide training to FIU investigators and supervisors</td>
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<tr>
<td>to maintain updated and professional staff ensuring</td>
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<tr>
<td>staff are up to date in accepted law enforcement</td>
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<tr>
<td>practices and performing in a professional and</td>
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<tr>
<td>competent manner.</td>
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## Program Information

**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 the Hearing Officer duties of the Grievance Review Hearings and makes recommendations to the Director of CFS for final determination based on the evidence presented.

**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 support 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.
Staffing Information 2014/15

Total staffing is approximately 158 employees.

Program Integrity Division
Budgeted Staffing

- Social Services: 5
- Appeals: 23
- Clerical: 17
- Quality Review: 85
- Fraud Investigators: 27
- Management: 1

Budget Information 2014/15

The division budget for FY 14/15 is $12,789,639.

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 Appropriations

- Operating Expenses: $1,406,860
- Staffing Expenses: $11,382,779
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.