



COUNTY OF HUMBOLDT

AGENDA ITEM NO.

E-1

 For the meeting of: ~~March 25~~ April 1, 2014

Date: February 27, 2014
 To: Board of Supervisors
 From: Phillip R. Crandall, Director
 Department of Health and Human Services
 Subject: Updated Strategic Space Plan

RECOMMENDATION(S):

That the Board of Supervisors receive and file this update of the Department of Health and Human Services Strategic Space Plan and attachments and re-affirm its support for regional decentralization of services.

SOURCE OF FUNDING:

Social Services Fund 1160, Public Health Fund 1175 and Mental Health Fund 1170

DISCUSSION:

Since its consolidation in 2000, the Humboldt County Department of Health and Human Services (DHHS) has been engaged in a continuous process of strategic planning, phased integration of administration and service delivery, and space planning related to its vision, mission, and operational principles. Periodically these efforts have come before the Board of Supervisors (Board) in the form of strategic plans, staff reports, reports to the State, and space planning documents.

During this period, DHHS has strived to maximize its resources, both fiscal and staffing, towards the integration of State department programs and initiatives, some of which are promising practices towards serving children, families, adults, and older adults in the context of their community and culture in a

Prepared by: Connie Beck, Assistant Director-Administration, DHHS

C.A.O. Approval: *[Signature]*

REVIEW

Auditor: *alson*County Counsel: *[Signature]*Personnel: *[Signature]*Risk Manager: *[Signature]*Other: *[Signature]*

TYPE OF ITEM

- ☐ Consent
☒ Departmental
☐ Public Hearing
☒ Other time set

PREVIOUS ACTION/REFERRAL

Board Order No.

Meeting of:

 BOARD OF SUPERVISORS, COUNTY OF HUMBOLDT
 Upon motion of Supervisor _____
 Seconded by Supervisor _____

Ayes _____
 Nays _____
 Absent _____
 Absent _____

and carried by those members present, the Board hereby approves the recommended action contained in this Board report

Dated:

By:

Kathy Hayes, Clerk of the Board

PER ORDER OF THE CHAIR

holistic manner. One of the approaches listed in the operational principles in DHHS's Strategic Plan is a two pronged approach towards maximizing program integration and ultimately, service transformation which involves centralization of administrative and program support services as well as co-locations of departmental programs where appropriate; and co-located decentralized services in partnership with community stakeholders in a developmental approach towards service delivery transformation. Over the past 13 plus years, DHHS has demonstrated that, through its integrated health and human services delivery structures and processes, significantly higher quality, more efficient, effective, holistic, and outcome-based practices can be planned, funded, and implemented.

The department continues to move forward on space planning and decentralization of programs to meet the individual community needs. Attached is information prepared by DHHS staff that provides more detail of the strategic space planning direction.

FINANCIAL IMPACT:

Funding to pay for space is available through State and Federal DHHS funds and budgeted on an annual basis.

OTHER AGENCY INVOLVEMENT:

CAO, DHHS, Risk Manager, DHHS Executive Committee and County Counsel

ALTERNATIVES TO STAFF RECOMMENDATIONS:

Board's Discretion

ATTACHMENTS:

1. DHHS Strategic Space Plan
2. Maps of DHHS Clients by Program
3. Working Smarter doc

DEPARTMENT OF HEALTH AND HUMAN SERVICES STRATEGIC SPACE PLAN

Planned

<p style="text-align: center;"><u>Regional Decentralization</u></p> <p>Co-location of Adult services and Children and Family Programs in Northern Region, Eastern Region and Southern Region of Humboldt County</p> <ul style="list-style-type: none"> ➤ Discussions with community regarding service needs 	Future
<p style="text-align: center;"><u>Koster Street Campus</u></p> <p>Includes Building A: 929 Koster St.; Building B: 537 West Washington St.; Building C: 445 West Washington St.; Building D, E, G: 638 West Clark St.; Building F: 600 West Clark Street</p> <p>Continued co-location of Adult services</p> <ul style="list-style-type: none"> ➤ Program integration is taking place as space is available. ➤ Relocation to take place after regional decentralization of services to McKinleyville and Fortuna. <p>Continued co-location of Children and Family Programs</p> <ul style="list-style-type: none"> ❖ Field Nursing ❖ NFP ❖ CYFS/Behavioral Health ❖ CWS (all programs including nursing, evidence based practices, and visitation) ❖ WIC 	Future
<p>Co-location of Children and Family Programs to be co-located in New Building</p> <ul style="list-style-type: none"> ➤ 1/08: Preliminary talks have occurred with landlord regarding new building for Children and Family programs on parcel where modulars D, E, and G are currently located. Multi-story building at least 37,000+ sq. ft. – 638 West Clark Street, Eureka ➤ 6/23/08: Executive Committee meeting to update the new construction project which is in active planning. Currently 	<p>On hold since June 2013</p> <p>Currently on Hold</p>

<p>meeting with Tyler and Ronda every two weeks to complete request for proposals.</p> <ul style="list-style-type: none"> ➤ 3/17/09: Board of Supervisors approved RFP for Professional Services to design building. ➤ 6/30/11: Executive Committee meeting to update the next steps for the Children and Family facility. ➤ 9.28/11: Executive Committee Meeting – Children and Family facility on hold until January 2012 ➤ 5/22/12: Board of Supervisors approved architects agreement with NMR ➤ 5/1/13: Schematic Design Phase Owner/Architect ➤ 5/1/13: Real Property Agent Working on Lease ➤ 12/1/13: Project on hold 	
<p><u>Behavioral Health - Clark Complex</u> Co-location of Crisis/Emergency Services and 24 Hour Programs at Clark Complex: 720 Wood Street, 2933 H Street, 734 Russ Street</p> <ul style="list-style-type: none"> ➤ Sempervirens, Psychiatric Emergency Services, Same Day Services ➤ Project Status: ➤ 10/18/05 - working with Tyler on conceptual drawings for ambulance/police entrance; changes to lobby; changes to Psychiatric Emergency Services (PES3/6/06: ➤ 12/06: Discussions on hold. ➤ 4/1/13: Architect working with Director on conceptual drawings and other issues. ➤ 11/2013: Architect drawings submitted to Public Works ➤ 01/2014: Conceptual plans completed by Public Works ➤ RFP for design 	Future

Due

<u>Koster Campus</u>	
<ul style="list-style-type: none"> ➤ Move CalWORKs Eligibility unit from Building C into Building A, room 102 ➤ Move HumWORKs into Building C 	Expected Move-In 6/14
2944/2956 Children Center and Annex	Expected Move-In 8/14
<ul style="list-style-type: none"> ➤ Move TAY from 550 I St 	Expected Move-In 6/14

Completed

Co-location of DHHS Support and Administrative Services <ul style="list-style-type: none"> ➤ Professional Building - 507 F Street, Eureka ➤ Professional Building - additional space on 1st floor, 510 5th Street, Eureka 	Completed 10/03 Completed 1/06
Environmental Health - Public Health remain in current location - 100 H Street, Eureka <ul style="list-style-type: none"> ➤ Renovations completed to add parking and sq. footage 	Completed 11/03
Public Health Lab - Bioterrorism Expansion 529 I Street, Eureka <ul style="list-style-type: none"> ➤ Expansion of lab facilities required and funded through Bioterrorism grant. Modular lab facility approved by State under lease/purchase agreement. 	Completed 2/06
Community Wellness Center - Public Health 908 7 th Street, Eureka <ul style="list-style-type: none"> ➤ Co-location of all Prevention/Health Education programs including AOD Prevention, HIV, Tobacco Education, Project Lean, and some MCAH programs. 	Completed 05/07
Koster Street Campus <ul style="list-style-type: none"> ➤ West Wing including Public Lobby, Window Services, Interview area and CWS ➤ Restroom remodel - Administration area ➤ Great Room - Administration Upgrade ➤ Placed new Health and Nutrition Unit in the great room 	Completed 10/06 Completed Completed 8/12 Completed 6/13
Completed Short Term Projects: <ul style="list-style-type: none"> ➤ Additional office space for Mental Health - 824 Harris Street, Eureka ➤ Re-locate FIT from Professional Building - 231 Second Street, Suite 301 & 303, Eureka ➤ Lease for warehouse space adjacent to Koster campus for storage and records management - 790 W Clark Street, Eureka ➤ TAY Division: Re-locate from 2nd and D Street, Eureka to 550 I Street, Eureka 	Completed 9/05 Completed 2/06 Completed 4/06 Completed 2/12

<ul style="list-style-type: none"> ➤ Service Center – Office space for Social Services – Call Center and Regional Call Center 215 4th Street, Eureka ➤ 605 K Street – Office space for Social Services - 	Completed 12/13
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**Humboldt County
Department of Health and Human Services (DHHS)
Distribution of Clients by DHHS Program
Regional Maps**

The following maps are included in this packet in the order listed:

The following maps include DHHS clients by program by region.

County divided into five Regions:

North
East
Eureka
Central
South

The darker shades within the regions indicate higher numbers of clients.

Program & Time Period	Program
CalFresh – December 2013 CalFresh – Fiscal Year 2012/13	CalFresh
Medi-Cal – December 2013 Medi-Cal – Fiscal Year 2012/13	Medi-Cal
CalWORKs – December 2013 CalWORKs – Fiscal Year 2012/13	CalWORKs
Adult Protective Services (APS) Cases Assigned – Fiscal year 2012/13	APS
CWS Reports Received & Assigned for Investigation – December 2013 CWS Open Cases – December 2013 CWS Reports Received & Assigned for Investigation – Fiscal Year 2012/13	CWS
Adult Mental Health Age 18 and Over – Fiscal Year 2012/13	Adult MH
Children & TAY Mental Health Age 0-26 – Fiscal Year 2012/13 Children's Mental Health Age 0-17 – Fiscal Year 2012/13 TAY Mental Health Age 16-26 – Fiscal Year 2012/13 Children & TAY Mental Health Age 0-22 – Fiscal Year 2011/12 Children's Mental Health Age 0-17 – Fiscal Year 2011/12	Children & TAY MH
Nurse Family Partnership (NFP) – Fiscal Year 2012/13	NFP
Women, Infants & Children (WIC) – December 31, 2013	WIC
Public Health Field Nursing – Fiscal Year 2012/13	Field Nursing

Packet not inclusive of all DHHS programs. Data currently being collected and additional maps will be created.

Source:
Sanborn County 1890 C-27 ad loc report, January 1904
and EBC: ITP Code boundaries shapefile 2013

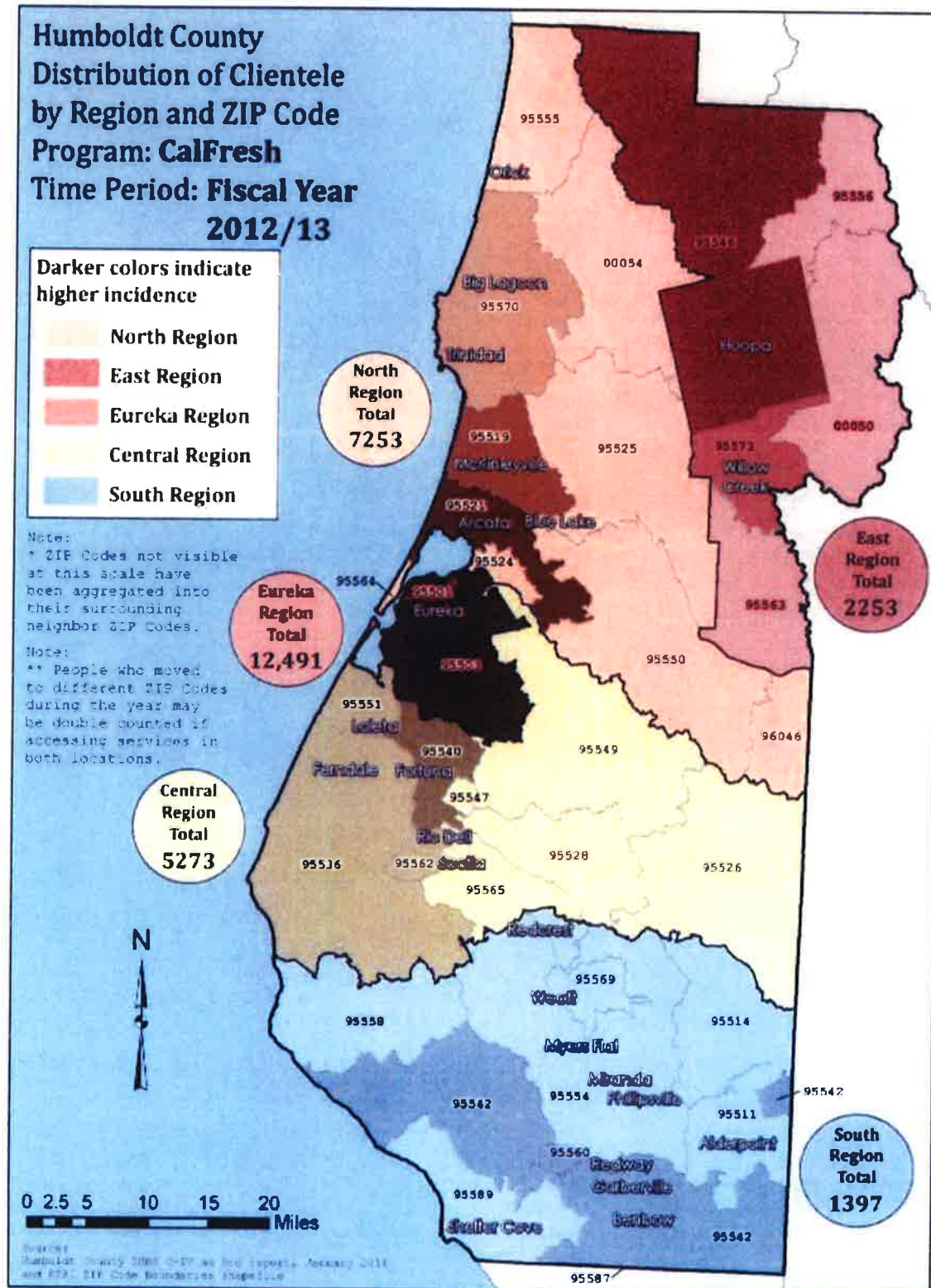
Humboldt County Distribution of Clientele by Region and ZIP Code Program: CalFresh Time Period: Fiscal Year 2012/13

**Darker colors indicate
higher incidence**

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
* ZIP Codes not visible
at this scale have
been aggregated into
their surrounding
neighbor ZIP Codes.

Note:
** People who moved
to different ZIP Codes
during the year may
be double counted if
accessing services in
both locations.



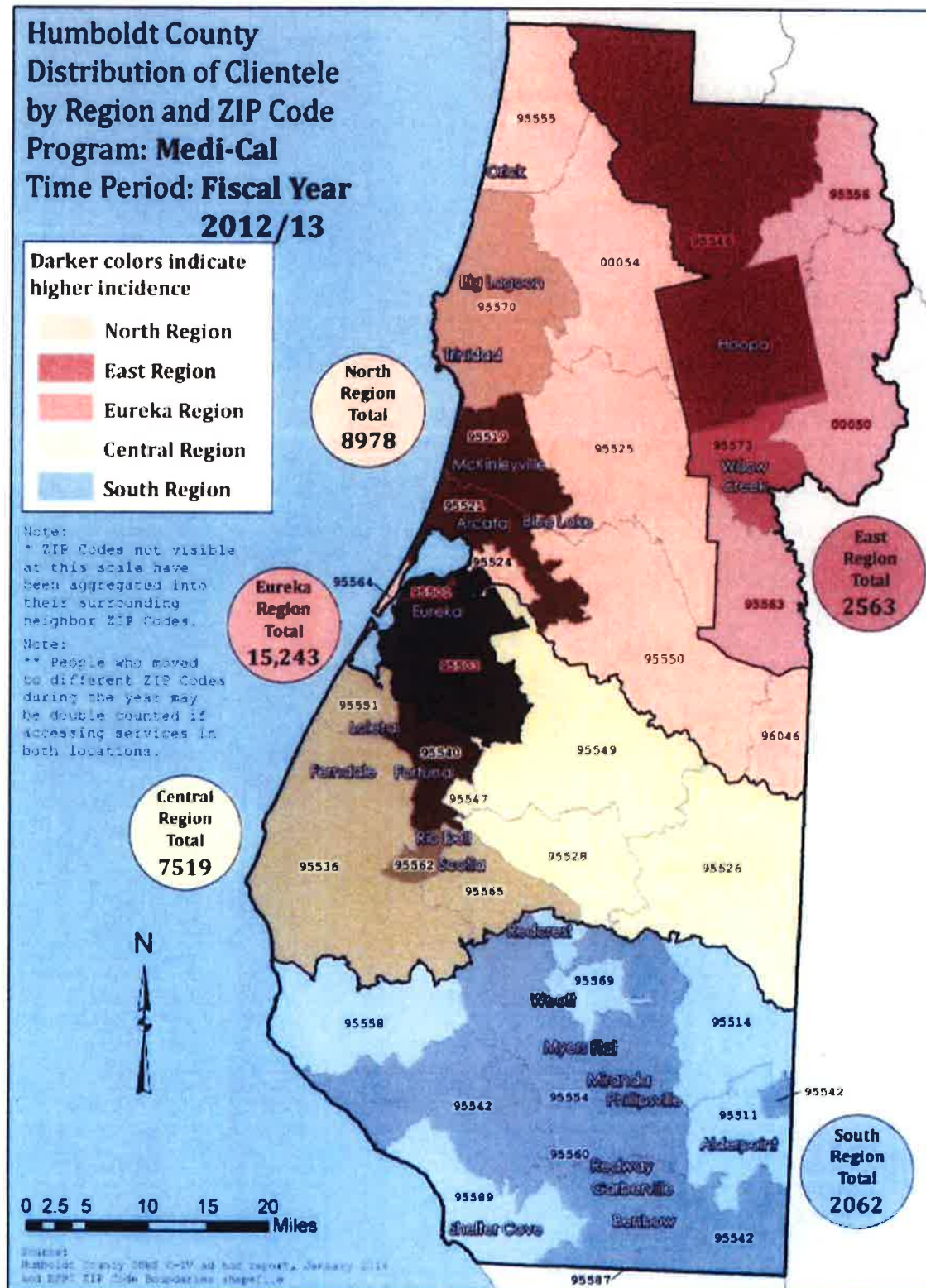
Humboldt County Distribution of Clientele by Region and ZIP Code Program: Medi-Cal Time Period: Fiscal Year 2012/13

Darker colors indicate
higher incidence

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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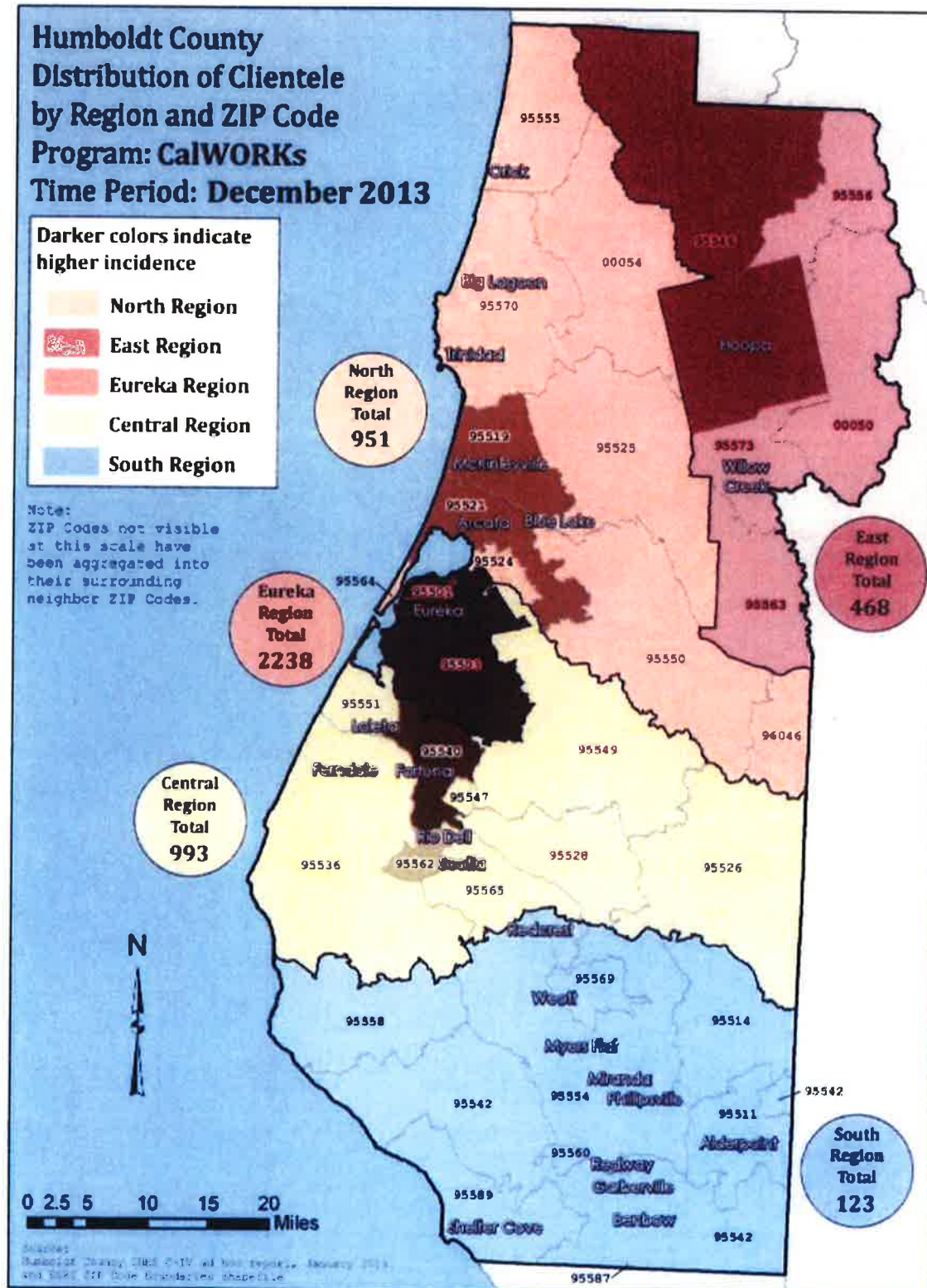
Medi-Cal
FY 2012/13

Humboldt County Distribution of Clientele by Region and ZIP Code Program: CalWORKs Time Period: December 2013

Darker colors indicate
higher incidence

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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neighbor ZIP Codes.



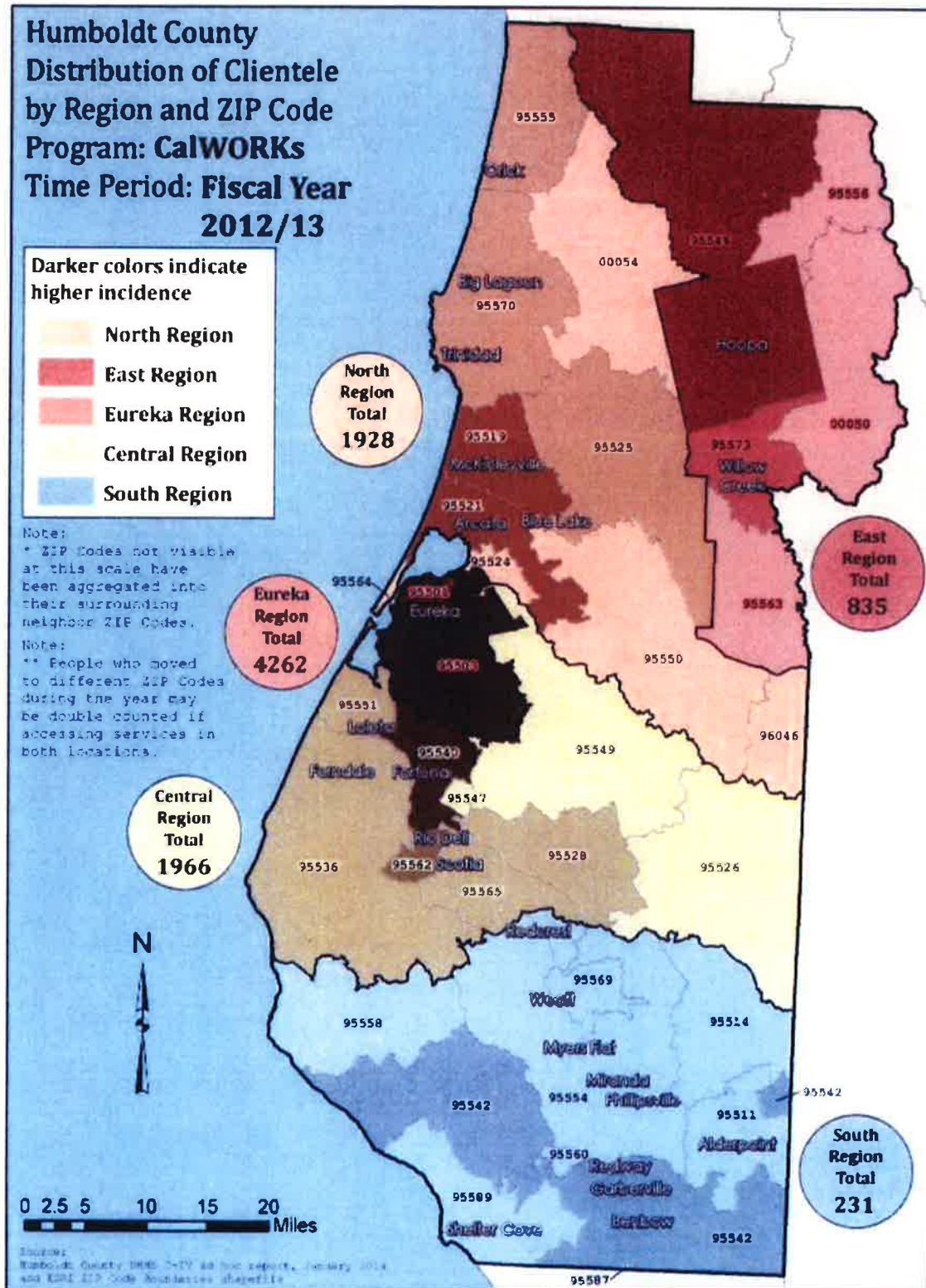
Humboldt County Distribution of Clientele by Region and ZIP Code Program: CalWORKs Time Period: Fiscal Year 2012/13

Darker colors indicate
higher incidence

- North Region
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- Eureka Region
- Central Region
- South Region

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Note:
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both locations.

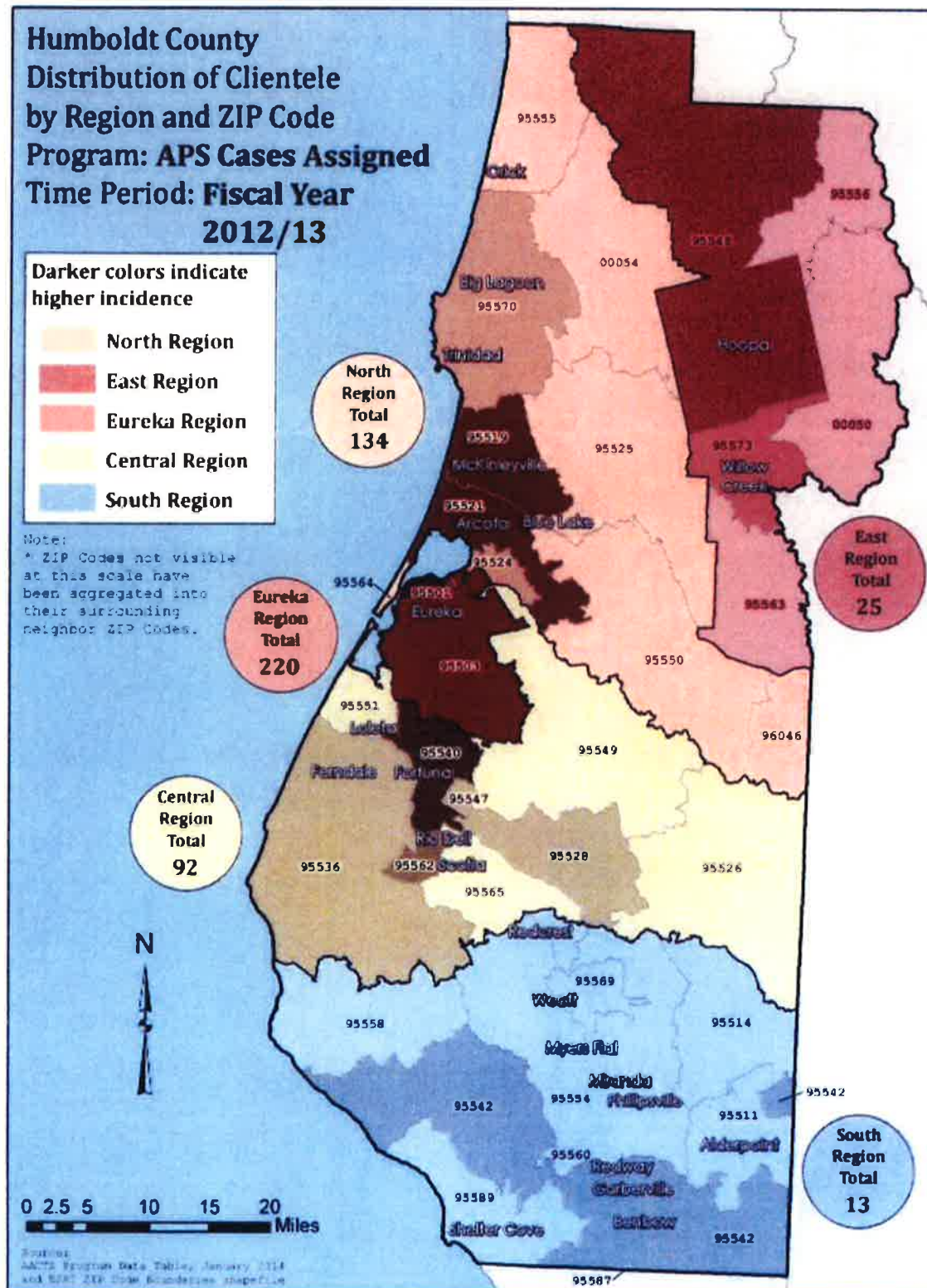


Humboldt County Distribution of Clientele by Region and ZIP Code Program: APS Cases Assigned Time Period: Fiscal Year 2012/13

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- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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their surrounding
neighbor ZIP Codes.



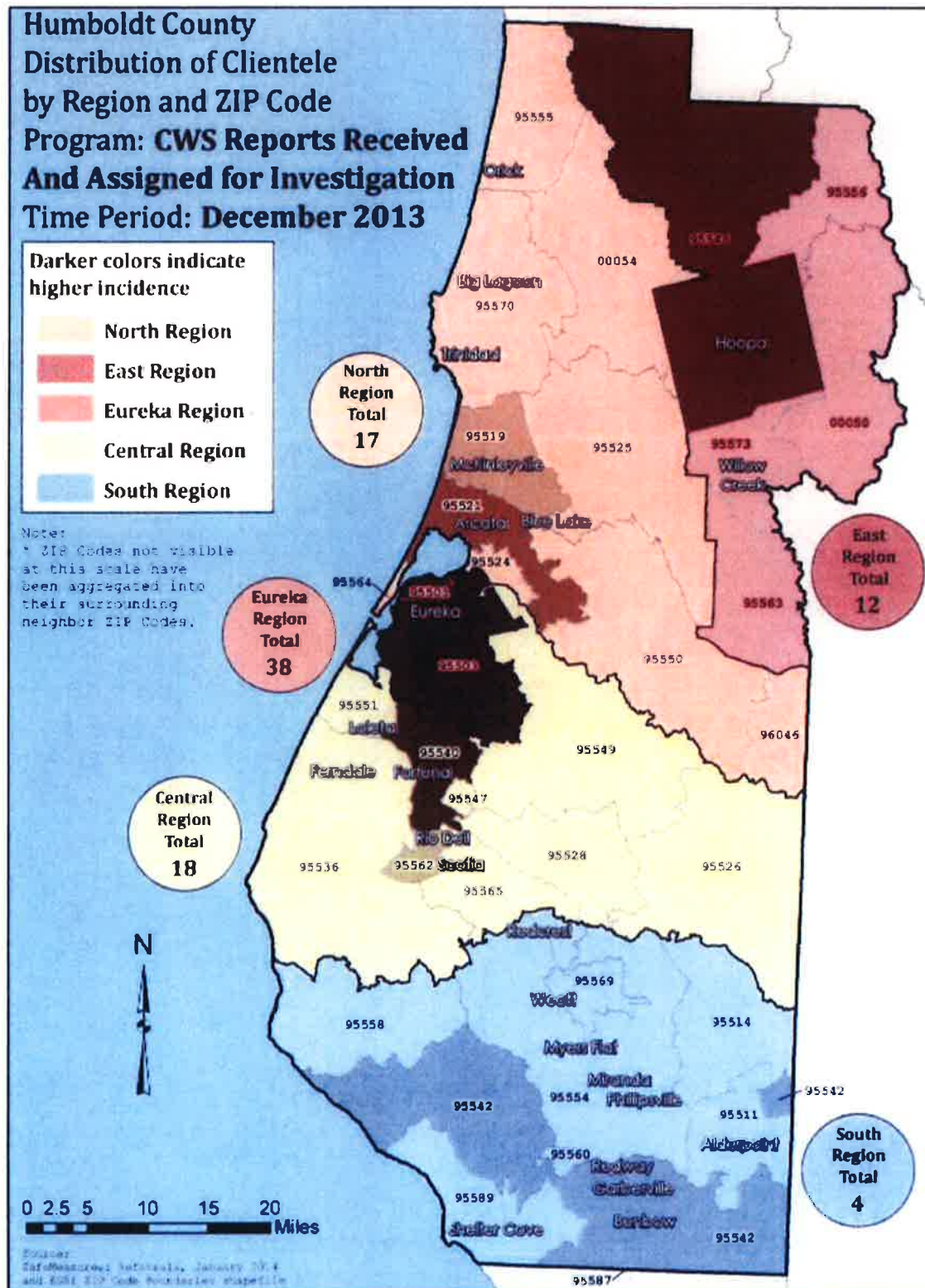
**APS
FY 2012/13**

Humboldt County Distribution of Clientele by Region and ZIP Code Program: CWS Reports Received And Assigned for Investigation Time Period: December 2013

Darker colors indicate
higher incidence

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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neighbor ZIP Codes.



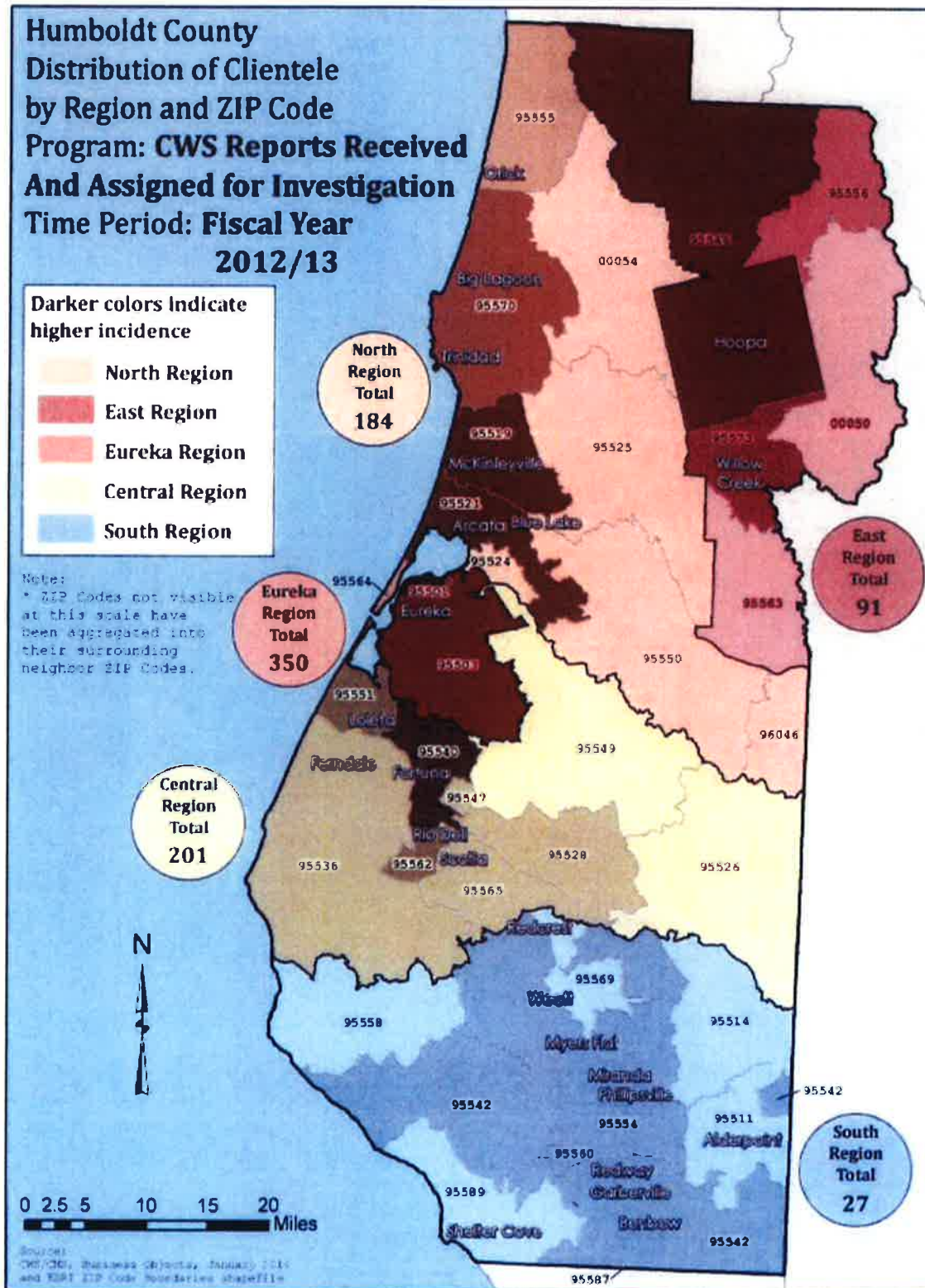
CWS Investigations
Dec-2013

Humboldt County Distribution of Clientele by Region and ZIP Code Program: CWS Reports Received And Assigned for Investigation Time Period: Fiscal Year 2012/13

**Darker colors indicate
higher incidence**

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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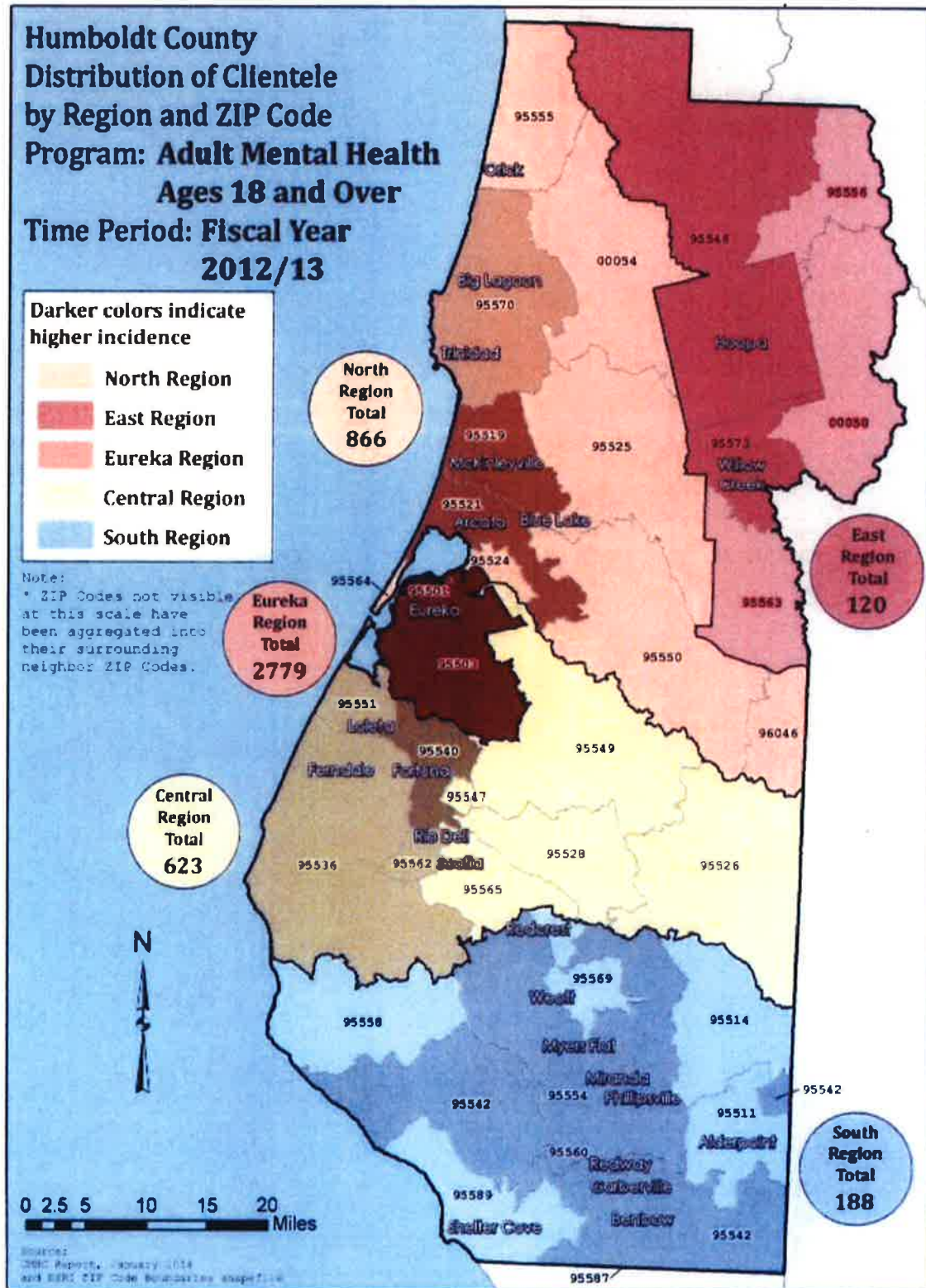
**CWS Investigations
FY 2012/13**

Humboldt County Distribution of Clientele by Region and ZIP Code Program: Adult Mental Health Ages 18 and Over Time Period: Fiscal Year 2012/13

Darker colors indicate
higher incidence

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

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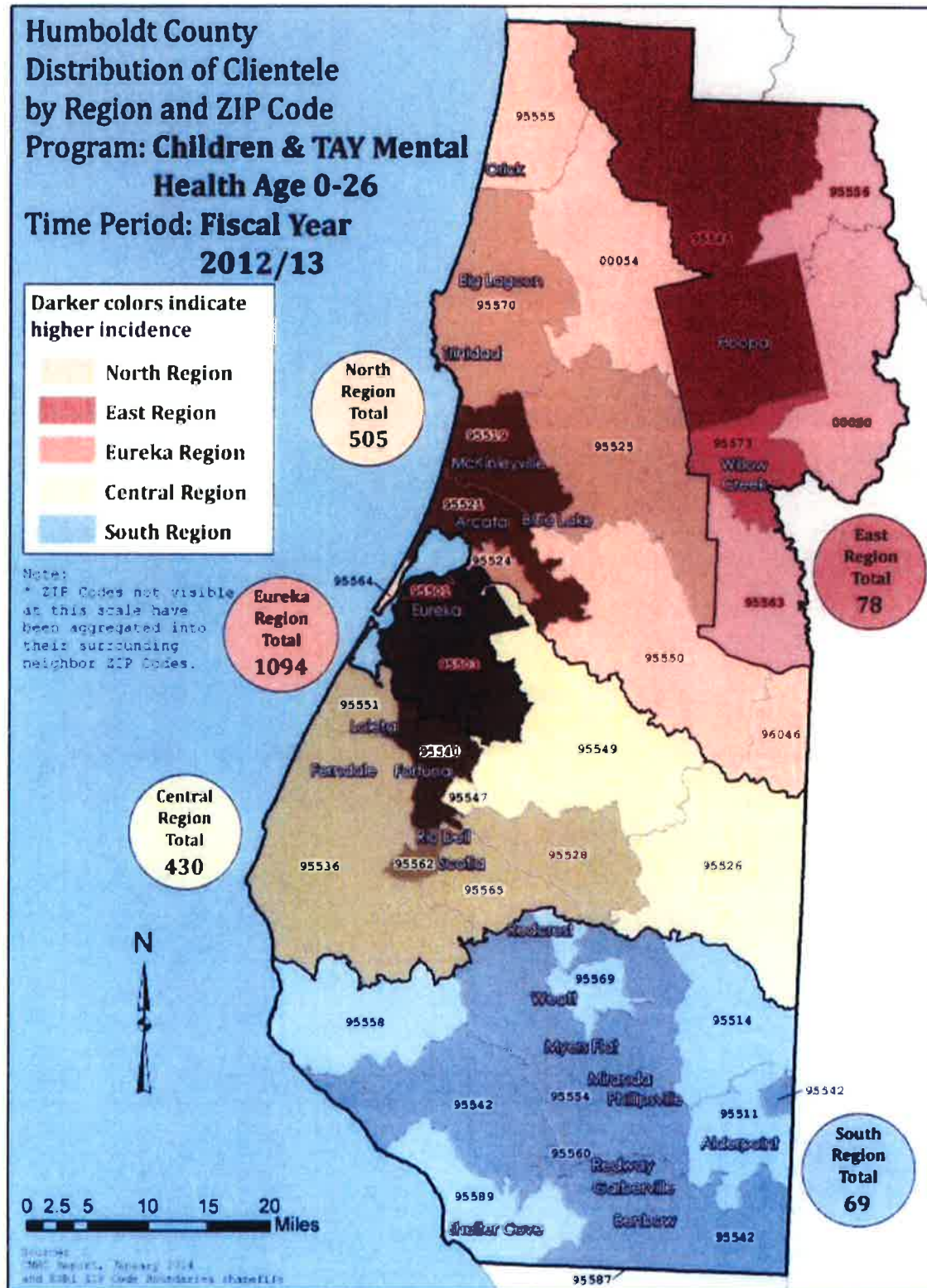


**Humboldt County
Distribution of Clientele
by Region and ZIP Code
Program: Children & TAY Mental
Health Age 0-26
Time Period: Fiscal Year
2012/13**

Darker colors indicate
higher incidence

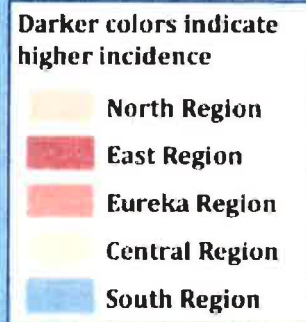
- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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neighbor ZIP Codes.

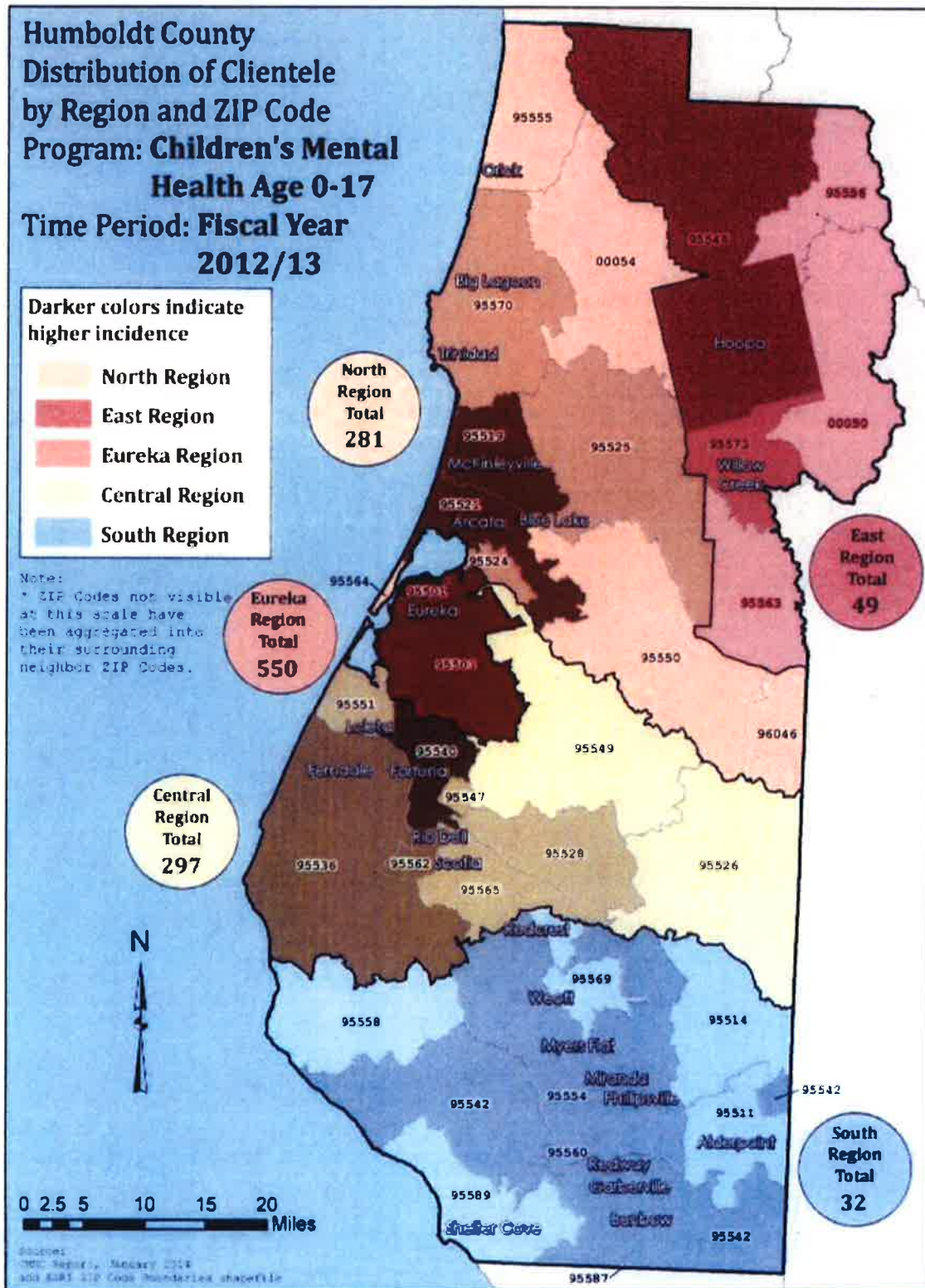


Children & TAY MH
FY 2012/13

**Humboldt County
Distribution of Clientele
by Region and ZIP Code
Program: Children's Mental
Health Age 0-17
Time Period: Fiscal Year
2012/13**



Note:
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at this scale have
been aggregated into
their surrounding
neighbor ZIP Codes.



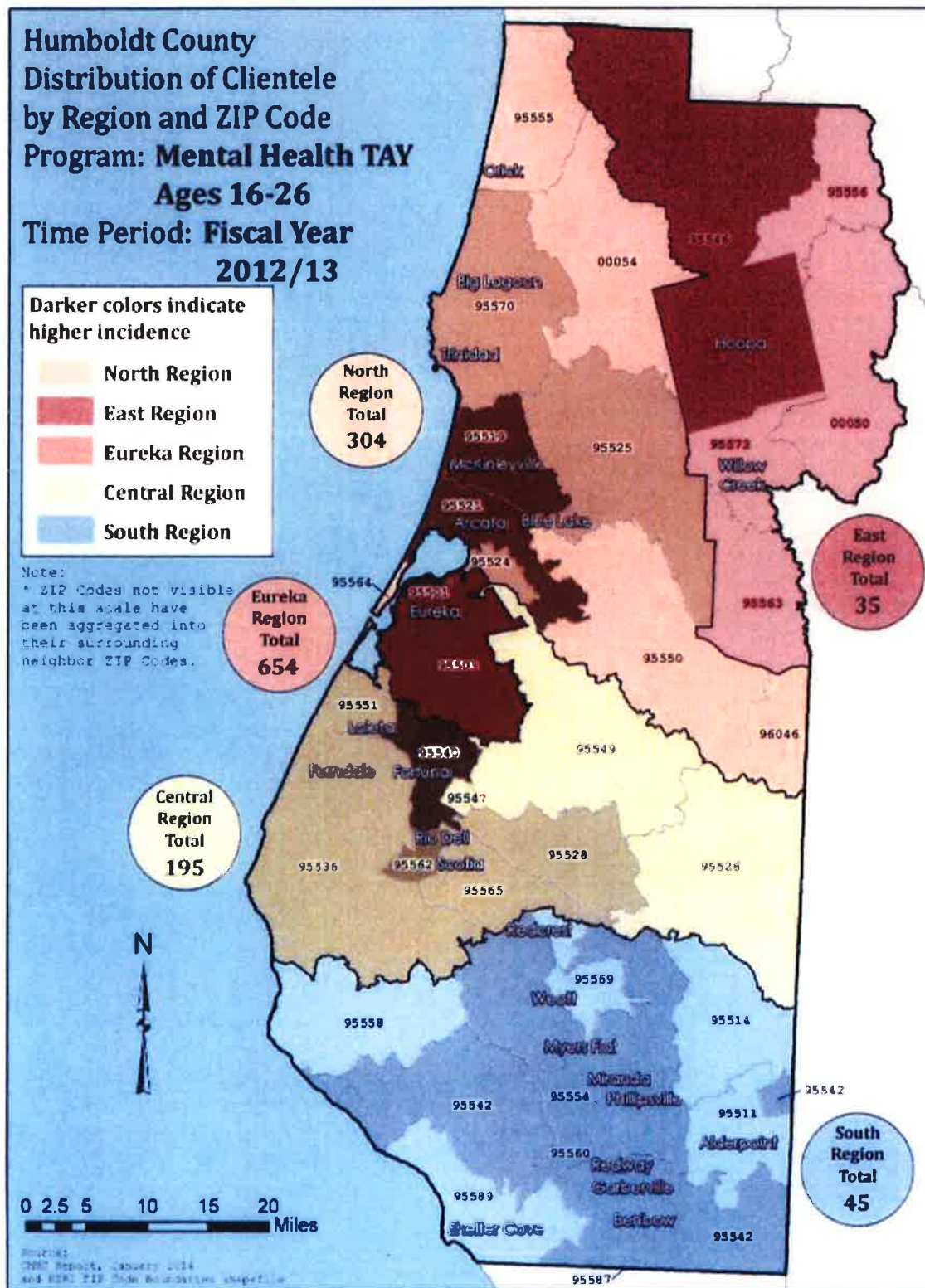
Children's MH
FY 2012/13

**Humboldt County
Distribution of Clientele
by Region and ZIP Code
Program: Mental Health TAY
Ages 16-26
Time Period: Fiscal Year
2012/13**

**Darker colors indicate
higher incidence**

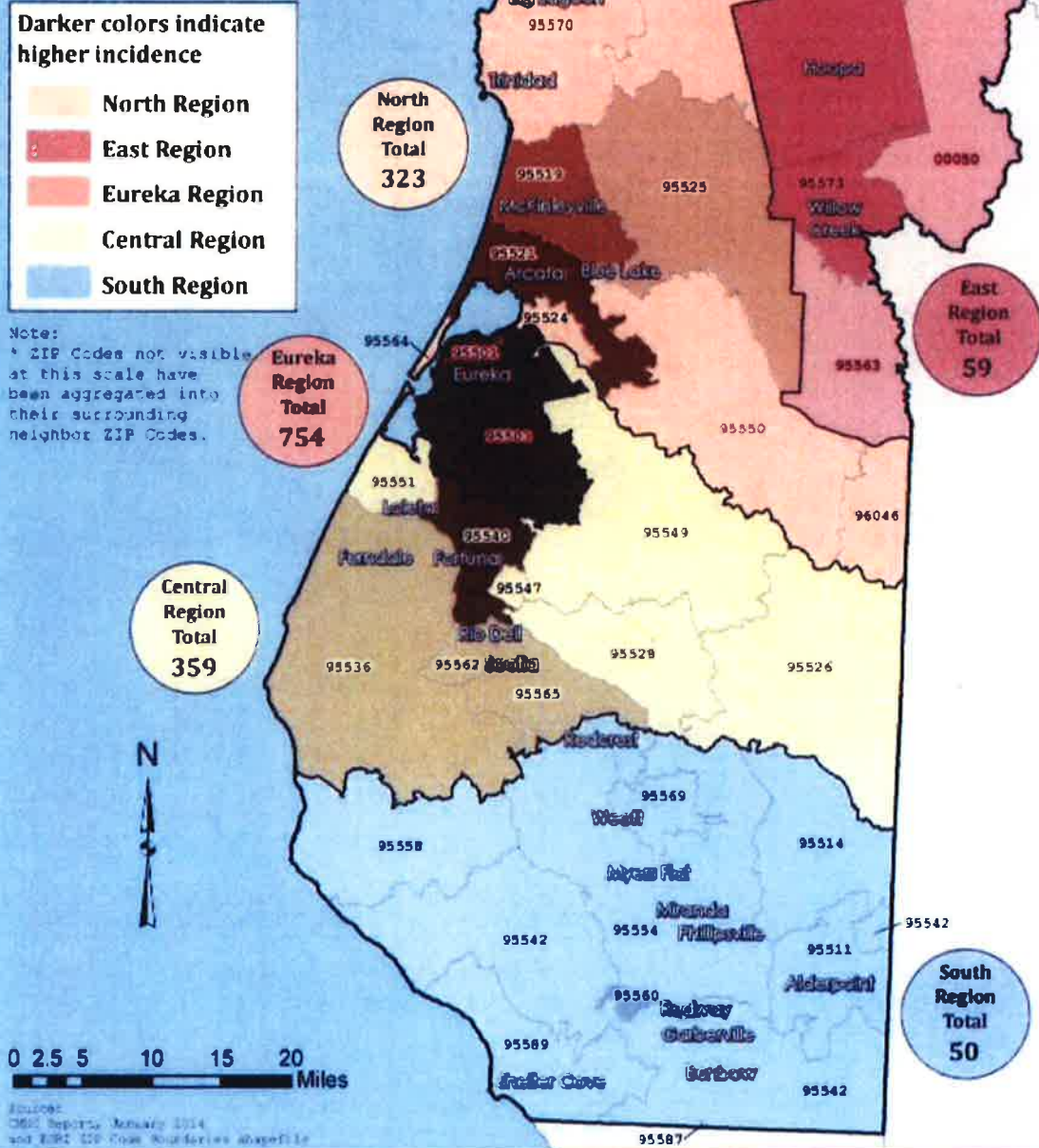
- North Region
- East Region
- Eureka Region
- Central Region
- South Region

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neighbor ZIP Codes.



TAY MH
FY 2012/13

**Humboldt County
Distribution of Clientele
by Region and ZIP Code
Program: Children & TAY Mental
Health Age 0-22
Time Period: Fiscal Year
2011/12**



Children & TAY MH
FY 2011/12

Darker colors indicate higher incidence

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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their surrounding
neighbor ZIP Codes.

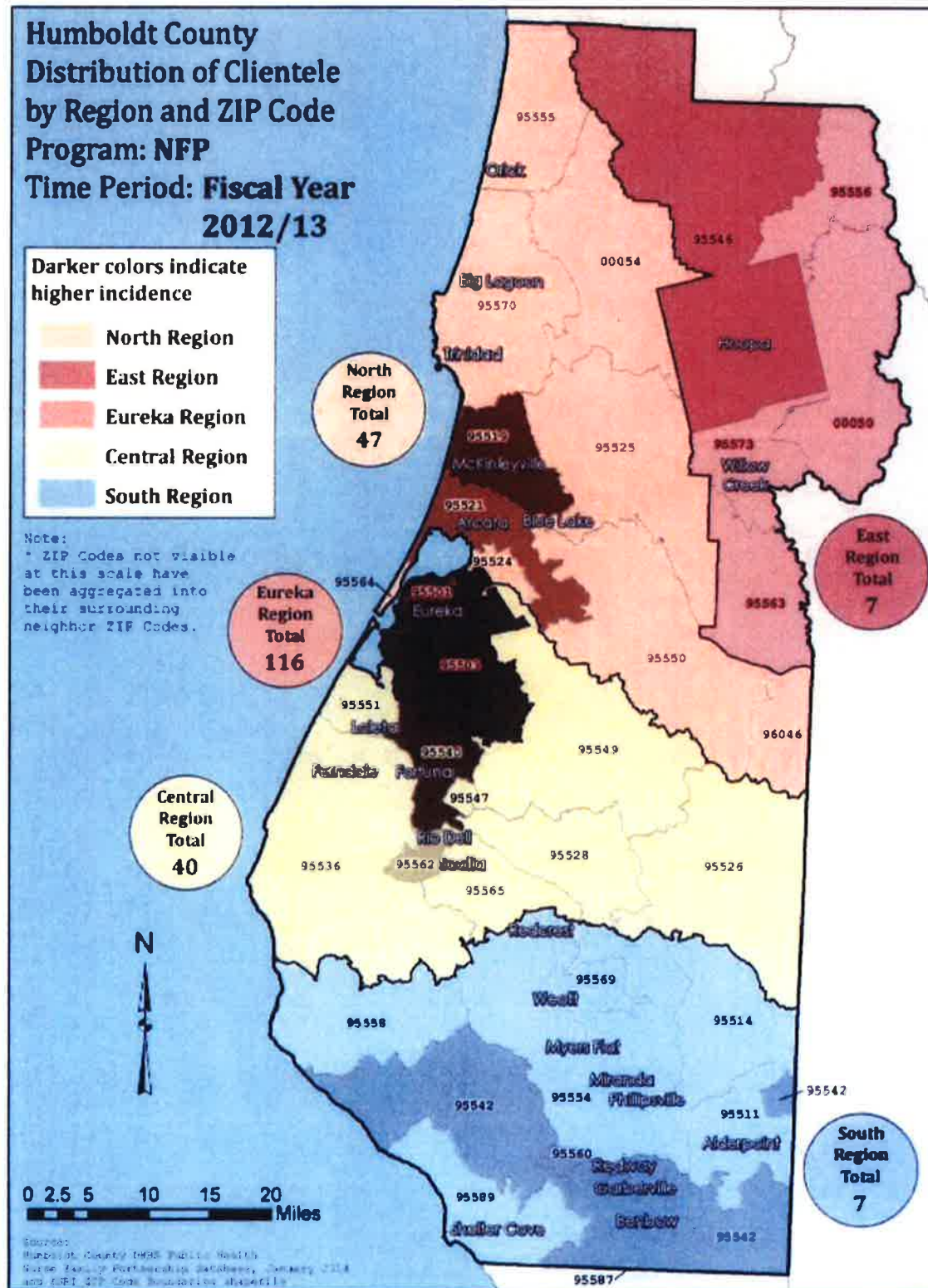


Humboldt County Distribution of Clientele by Region and ZIP Code Program: NFP Time Period: Fiscal Year 2012/13

Darker colors indicate
higher incidence

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

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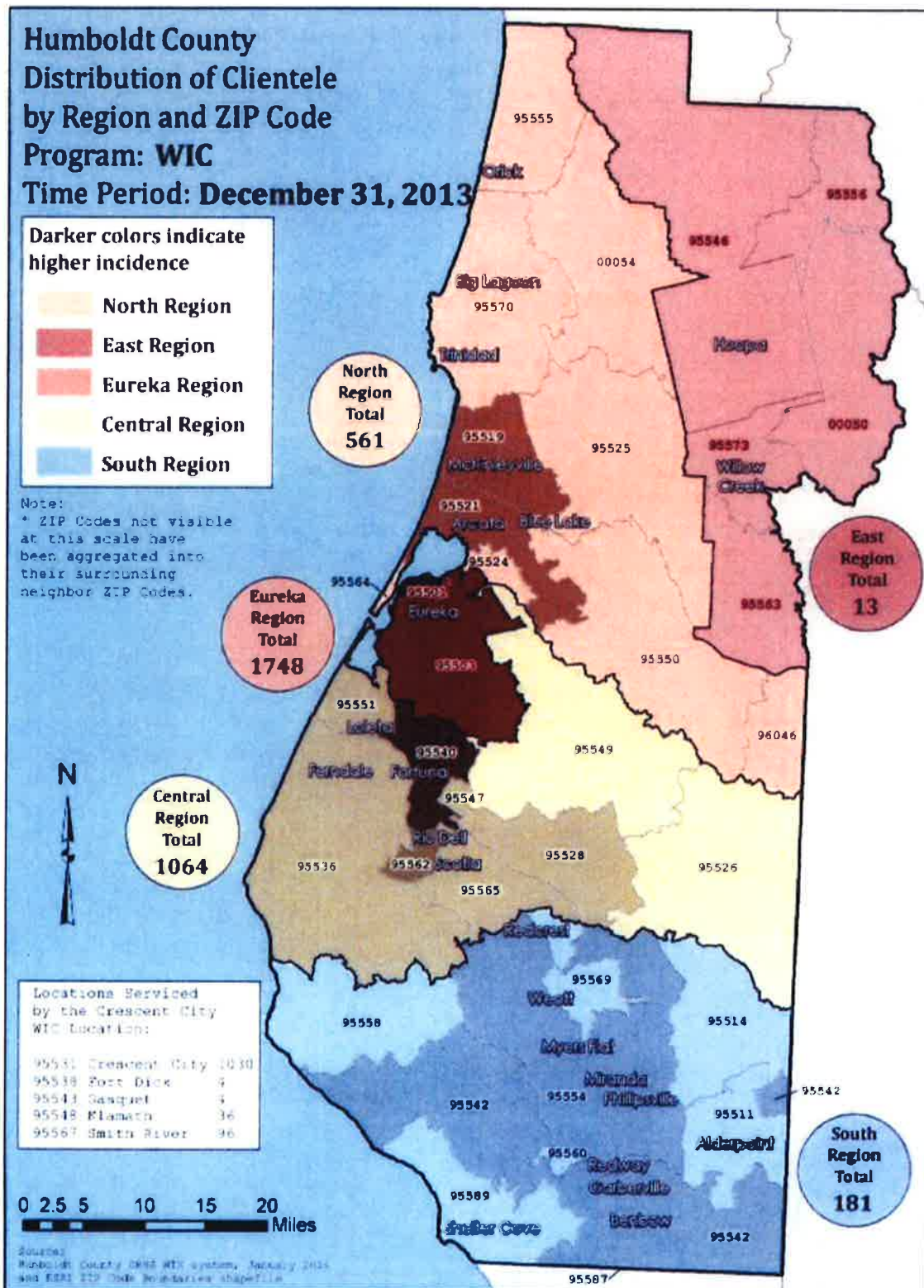
NFP
FY 2012/13

Humboldt County Distribution of Clientele by Region and ZIP Code Program: WIC Time Period: December 31, 2013

Darker colors indicate higher incidence

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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WIC
12/31/13

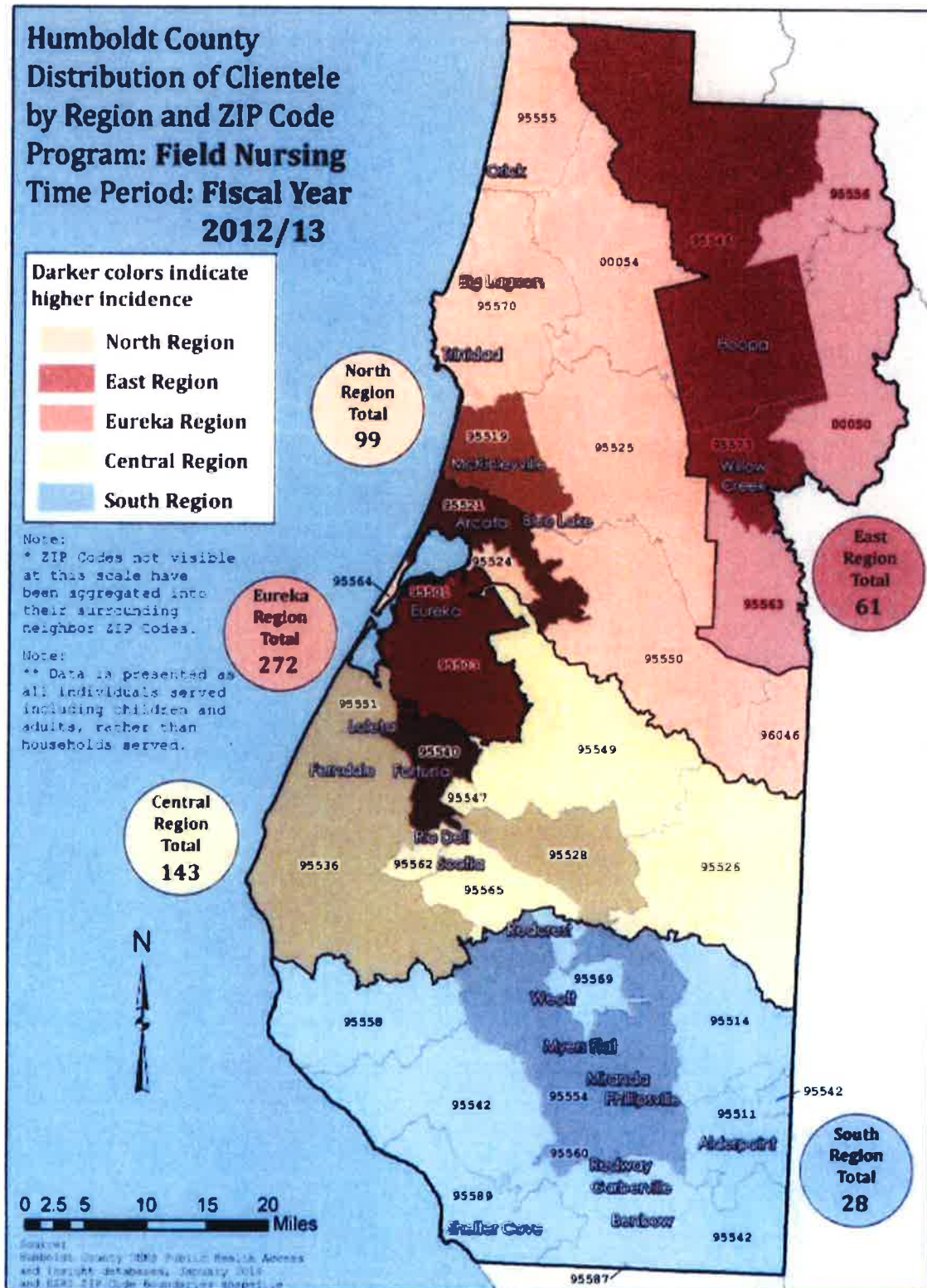
Humboldt County Distribution of Clientele by Region and ZIP Code Program: Field Nursing Time Period: Fiscal Year 2012/13

**Darker colors indicate
higher incidence**

- North Region
- East Region
- Eureka Region
- Central Region
- South Region

Note:
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at this scale have
been aggregated into
their surrounding
neighbor ZIP Codes.

Note:
** Data is presented as
all individuals served
including children and
adults, rather than
households served.



**Field Nursing
FY 2012/13**

COMMENTARY

Hennepin County, MN:**Working Smarter for Better Lives, Stronger Communities**

★ BY REX HOLZEMER

Assistant County Administrator for Human Services
Hennepin County, MN

A few months ago, a family came into a large, three-story brick building in Brooklyn Center, Minnesota, to enroll in school. The Northwest Family Service Center is the first Hennepin County human services "hub" that combines public services – in this case, the Osseo Public Schools and Hennepin County Human Services and Public Health Department – with community-based services, such as the nonprofit Community Emergency Assistance Programs (CEAP).

School staff noted the family seemed anxious and distressed, so they recommended that the family talk to the human service staff right down the hall. We sat down with them and quickly realized that our public programs could only do so much – so we called CEAP who sent over a staff person. We huddled with the family and figured out how to help with their crisis. The family was no longer frozen in fear. They had a plan and resources. And we averted a more costly crisis of a family needing emergency shelter.

I have been in social services for more than 35 years, and this is an example of what works. Government cannot do this work alone. We need partners, and they need us.

In Minnesota, where counties deliver human services, Hennepin County Human Services and Public Health Department has a large footprint: Our county has a quarter of the state's population and a third of its jobs. We're lucky in that we are large enough to do things differently. And we're challenged because we see the full breadth and depth of challenges that come in our line of work.

About eight years ago, we decided – with County Board approval – to try a new path of helping clients. It's a multi-pronged approach that we're implementing to:

- * decentralize our offices, moving staff and services to regional, community-based hubs; and
- * emphasize a new way of delivering services that includes partner services and integration of services for complex clients.

Regional, community-based offices give us two critical benefits – we're simply easier to get to, so people hopefully do not wait until they are in crisis before they come to us. Second, we can partner on-site and nearby with local

agencies and faith communities and leverage each other's strengths. We can enroll a family in SNAP and direct them to the local food shelf to pick up supplies today. We even go the extra step and call the food shelf, letting them know the family is coming.

Our **new client delivery system** starts with a "broader needs assessment," a tool we developed that helps families better tell us about their situation. For example, a woman may come into our office, saying she needs help with food. By filling out the BNA, however, we also learn that she recently lost her job after getting too many calls from school about her autistic child. She moved into her father's home in order to save money and help him with rent, since both are struggling to make ends meet. We also learn that her dad is a Vietnam veteran. Just having a few of these facts helps us open other doors – from Developmental Disabilities services for her child to VA benefits for her father. Plus, we're able to identify community resources, from respite care for caregivers to a clothing closet for women who are job seeking.

Service integration is the next piece of our new client service system. Anyone who works in human services knows that we have clients with complex needs who typically interact with several case managers, including some with local agencies, and who end up with a mishmash of case plans to follow. Service integration pulls together all the experts who touch each complex case. They are asked to meet, review their files about the client and jointly create one simple, short case plan. In addition, they must create a service summary for the client: including their case managers, a list of resources that can help, dates when they need to come back in, and upcoming appointments.

We make it easier for the client to follow through and be more successful.

Yes, service integration takes more staff time and energy. With growing case loads, our staff are stretched for time at work, so it is challenging to even get them together. But staff who have gone through the experience of integrating a plan say they often have an epiphany moment – this is what social services should be doing. If we want the client to build a better life, our work must be centered on the client's needs and situation.

CONTINUED on Back Page

Making a Difference in Hennepin County, MN

CONTINUED From Page 18

Now, I have to admit, undertaking all these massive changes at a time when most of our systems are changing has been stressful and emotional for many staff. We've got growing caseloads, shrinking budgets, and a constant churn of change.

But those of us in human services tend to have one important thing in common: We want to help people. We really want to reach our vision of Better Lives. Stronger Communities.

By stressing our shared values, we maintain motivation and keep moving ahead. It isn't easy. This work never is. But we are making a difference.

FOR FURTHER INFO

Rex Holzemer began working with Hennepin County as a social worker in 1977. He became the Assistant Hennepin County Administrator for Human Services in January 2013. If you'd like a copy of our "New Direction: Delivering Services in the 21st Century" or "HSPHD's Strategic Focus," please email him at Rex.Holzemer@Hennepin.us.

Happy New Year!

2014 NACHSA dues are due.

Don't Delay - click here to get the form to pay!

Our Mission

To promote and strengthen networks of county and community human services that protect children, families and elderly, and that support self-sufficiency of disadvantaged populations. And, to participate in formulating and advocating the human services policies of the National Association of Counties.

The NACHSA Networker is published quarterly by the National Association of County Human Services Administrators, an affiliate organization of the National Association of Counties. Submissions are welcome from all members. The NACHSA Networker is not responsible for errors in submissions and reserves the right to edit all articles for publication.

Kelly Andrisano, J.D., Editor

Executive Director

Pennsylvania Association of County Human Services Administrators

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Harrisburg, PA 17011

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NACHSA Networker