

## **BOOST FOR KIDS**

### *Better Opportunities and Outcomes Starting Today*

## **EXPRESSION OF INTEREST County of San Diego**

### **A Unique Opportunity**

Vice President Gore and the National Partnership for Reinventing Government have announced the “Boost for Kids” Initiative: Better Opportunities and Outcomes Starting Today, Performance Partnerships for Results for Children. This federal initiative establishes up to ten “performance partnerships” with State and local governments to recognize the leadership of innovative states and localities that are improving the lives of their communities’ children. The performance partnerships will provide participating localities with a unique opportunity for greater flexibility to streamline program administration, integrate services, and use current funding more effectively to enhance positive outcomes for children and families.

The “Boost for Kids” Initiative is consistent with policies, projects, programs and strategic planning efforts directed by the San Diego County Board of Supervisors. San Diego is a recognized leader in promoting system change. San Diego’s progress can be attributed to several factors: a fundamental effort to reorganize government functions around its customers; the high priority the Board of Supervisors and the County’s Chief Administrative Officer have placed on continuous improvement of government services; and the development of strong partnerships with the private sector and community-based organizations that are reaching out to promote family and community well-being.

In recent years, the Board of Supervisors has directed sweeping reform to improve health and human services in San Diego County to improve outcomes for the region’s children, youth, and families. Consistent with Board directives, County government has been streamlining the delivery of services, reducing overhead costs, and reinvesting savings in high-priority front line services. County government has also been seeking to minimize the negative impacts of federal and State categorical funding requirements on its customers.

### **About the County of San Diego**

Covering 4,280 square miles, the County of San Diego is roughly the size of Connecticut. Located in the southwest corner of the United States, San Diego shares a border with Mexico and is home to two major border crossings. The county has a population estimated at 2.7 million residents. It is the second most populous of California’s 58 counties, and it is the fourth largest county in the United States. The county has 18 cities and 43 school districts.

San Diego County represents an area of tremendous contrast and diversity. San Diego’s diverse communities range from the rapidly growing suburban North County and the urban central metropolitan area, to the unique communities of East County and South Bay. It is the second largest urban area in California, yet much of the county is considered rural. Approximately 19% of the county’s population are immigrants who come from more than 100 countries and speak 68 different

languages. Finally, the region has 17 federally recognized American Indian tribes, more than any other singular county in the United States.

## Readiness and Commitment

Nationwide, health and social service systems are funded by a fragmented and confusing array of categorical funding streams. In San Diego County, the nearly \$1 billion budget for health and human services has more than 100 sources of federal and State dollars, with over 500 contracts for service. On the customer service end, this results in an equally fragmented and categorical service delivery system, with each portion of categorical funding targeted to fix a narrow problem or diagnosis. In other words, a family-centered approach to service delivery, which establishes a three-way partnership among family, service provider, and government, is far more the exception than the rule.

In 1995, the Board of Supervisors adopted a set of five strategies that form the framework for administration of County services. These strategies call for:

- ↳ Reforming federal and State resource allocation systems to allow greater local control and management of taxpayer dollars.
- ↳ Encouraging and promoting the self-reliance of citizens through County policies and programs.
- ↳ Creating a smaller, more efficient/productive organization with fewer services, better delivered.
- ↳ Improving efficiency of services through consolidation.
- ↳ Developing a performance-based human resource system.

### **RE-ENGINEERING: PROJECT SYNERGY**

Within the Board approved framework for County administration, and using landmark welfare reform legislation as a catalyst for change, *Project Synergy*<sup>1</sup> was launched in San Diego in 1997 to re-engineer health and human services programs into a family-centered, neighborhood-based service delivery system. The departments of Health and Social Services were functionally eliminated, and six regional County Health and Human Service Agency (HHSA) administrative centers were established to combine the staffs of health and social services. As a result, public health nurses, social workers and eligibility workers no longer work for separate programs, whose customer is the grant fund. Instead, they work as members of a single, integrated, regional team, whose customer is the family. Department head positions for children and families programs have been eliminated. Department heads have been replaced by regional general managers who are responsible for engaging community leadership in outcome-driven partnerships to improve service delivery for families. Two or three Family Resource Centers in each region provide those services which must be provided by government, such as eligibility services, public health, child protective services, and those county-wide services which are physically located within the region.

The regional service model was crafted by a private sector consulting firm after an intense phase of focus groups with families, providers, and staff. The firm, KPMG/Peat Marwick, recommended a “No Wrong Door” model<sup>2</sup> of integrated service delivery. The mainstay of service delivery is an integrated network of community providers, linked by service agreements and County contracts,

which provides a continuum of integrated services and is accountable for pre-established outcomes. This linkage provides improved access to service and establishes the groundwork for uniform information, assessment, and referral. Regional general managers are responsible for community and network coordination, and Family Resource Centers. Community networks cross-evaluate each other to ensure constant improvement in this joint system of care.

The new service model requires a system-wide client and service information system to link more than a dozen program-based systems through a secure, web-enabled solution. A \$5 million three-year investment in technology has been approved by the County Board of Supervisors to catalyze the information system enhancements necessary to achieve the “No Wrong Door” model.

*Project Synergy* demonstrates a commitment to regionalize and rationalize San Diego’s service delivery system on behalf of families and neighborhoods. Additional, and equally important, benefits are the opportunities to:

- ↳ consolidate and integrate programs;
- ↳ ensure all activities are outcome-driven;
- ↳ assure fiscal responsibility; and
- ↳ enhance resources for preventative services.

These opportunities have advantages for families and taxpayers alike. *Project Synergy* produced \$6.7 million of cost savings in the first year as a result of the consolidation and downsizing of bureaucracy, clearly impressive results.

### **INVESTMENTS IN PREVENTION**

The Board of Supervisors has placed a high priority on serving children and youth, not only because they are dependent on adults for care, but also because providing good care for young people can prevent problems later in life, such as substance abuse, violence, and poverty. Believing that children are our community’s most valuable resource, the Board of Supervisors has made children and youth a priority for County funding and services. In support of this priority, the Health and Human Services Agency developed *Reaching for New Heights: A Strategic Plan for Children and Youth*<sup>3</sup>. The Agency’s intent in developing the plan was to build on its current strengths, integrate services, and work with community partners to bring positive change to children and youth.

Adopted by the Board of Supervisors in 1998, *Reaching for New Heights* is the result of a cross-program strategic planning effort that brought together representatives from diverse County programs. The plan establishes goals and investment strategies for the next five years to enhance outcomes for children and their families. It provides a framework to:

- ↳ focus priorities for more than 53 Agency and County programs serving children and youth;
- ↳ commit to investment strategies for children and youth;
- ↳ respond to community feedback that services should be provided in a manner that is less confusing for the customer;
- ↳ facilitate program coordination toward common strategic goals and objectives; and
- ↳ increase prevention and early intervention efforts for children and youth.

The Strategic Plan is the cornerstone of a \$15 million first-year strategic investment for children and families. The \$6.7 million in Project Synergy cost savings was reinvested into prevention efforts supported by the strategic plan, including: expansion of an effective Infant Mortality Review program, overhaul of the foster care and dependency systems, immunizations for preschoolers, after-school programs, and community-based Home Visiting programs.

The Strategic Plan is consistent with the “No Wrong Door” business model and the commitment to integrated, neighborhood-based service delivery. The investment strategies build on new opportunities presented by welfare reform, federal devolution, and new federal funding for child health insurance.

### **MONITORING SYSTEM FOR CHILD AND FAMILY HEALTH AND WELL-BEING**

In 1997, the Board of Supervisors directed the development of a report card/monitoring tool to monitor the health and well-being of children and families in San Diego County over time. Welfare reform, the County’s movement to managed care for physical and mental health, and the restructuring of the Health and Human Services Agency were the impetus for a report card system. Health and Human Services Agency staff worked with public and private partners, including leaders from community-based organizations and child-serving agencies, to identify recognized population-based measures for a report card that were relevant, available from existing data sources, valid, and reliable. In 1998, the Board of Supervisors approved selected health and well-being measures<sup>4</sup>, thereby implementing a report card system to:

- create a timely and systematic method for monitoring, assessing and reporting the health and well-being of children and families for the entire community;
- promote discussion among the different levels of the community to encourage strong partnerships to solve problems; and
- monitor potential effects of policy changes, and respond accordingly.

The first report card is currently being finalized for publication. It will establish and report baseline data for family economic security, physical and emotional safety, physical and mental health (including tobacco, alcohol and drug use), education, and access to services such as immunizations, health care coverage, and child care.

### **COMMUNITY GOVERNANCE AND DECISION MAKING**

Tangible gains in outcome measures which reflect “stronger families and communities” can only be achieved if families, local government, and the private sector are mutually committed to the task. A pioneer in system change, the County of San Diego formed a county-wide, community-based collaborative in 1988 to promote family and community well-being through prevention and early intervention services. The initial collaborative, known as *New Beginnings*, has evolved and now includes County Executives from all organizations serving children, various cities, school districts, housing commissions, community college districts, universities, hospitals, community based organizations, and parents. *New Beginnings* was the genesis of a strategy to engage communities, families, and agencies in improving the lives of families and children in San Diego through promoting self-sufficiency and community capacity to resolve the many difficult issues facing families. Since its inception, *New Beginnings* has been seeking new solutions to the challenges facing our communities’ children, youth, and families.

In September 1991, *New Beginnings* established a multi-service demonstration center at a local elementary school to provide integrated prevention and early intervention services to families in the school service area. Since then, *New Beginnings* has expanded beyond the original demonstration center to other regions in the county. The *New Beginnings* initiative has been recognized nationally for its efforts, and served as a model for the development of the California Youth Pilot Project<sup>5</sup> (established by Assembly Bill 1741 of California State statutes in 1993), and Healthy Start, California's program of start-up funding for school-linked services.

The County of San Diego was one of five California counties to be selected to participate in the AB 1741 California Youth Pilot Project through a Request for Proposals (RFP) process in December 1994. Key to the County's selection for the State project was its evidence of successful interagency collaboration, a strategic plan to integrate services, and active participation of local education agencies.

The County role in the project is to test innovative strategies for improving outcomes for children and families. The State, in turn, provides support for County efforts to de-categorize and integrate service delivery systems to improve the lives of children and families. As a State initiative, the California Youth Pilot Project began with a clear focus on fiscal solutions, such as blended funding; however, it also provides technical support to counties to re-engineer internal service organizations and to develop multi-disciplinary solutions for local services integration.

The County of San Diego selected seven of its most advanced level of collaborative communities for participation in the AB 1741 California Youth Pilot Project. The diversity of the county is represented by each of the seven selected communities, and each center is unique to its neighborhood in both the scope and funding of services. Each community collaborative is governed by parents, residents and provider councils, and service models are reflective of a community-based needs assessment. All of the collaboratives are linked to either schools or other local access points, and are able to involve community families in strategy development with relatively little involvement of County staff and administrators. San Diego's AB 1741 Strategic Plan<sup>6</sup> has the flexibility to add communities as changes in the County's service delivery system take place.

In San Diego County, a variety of community-based collaboratives exist which could be "groomed" to strengthen the leadership roles of communities and families. There are several community-based health collaboratives in late planning and early implementation phases, including Title V, Healthy Start, and Grossmont Health District coalitions. Moreover, a range of existing community economic development and revitalization efforts is underway in several mid-city communities included in a federally designated Empowerment Zone/Enterprise Community (EZ/EC). Also, there are several community development organizations, such as the San Diego Organizing Project, the Consensus Organizing Institute, and the Eureka Foundation fellows program, that are working to increase community capacity-building.

### **Proposed BOOST FOR KIDS Partnership**

Although the concepts of enhanced community leadership and community capacity-building in health and human services are not new, implementation of community-based service delivery models on a sustained, expanded scale is relatively untested. In California there is much to share and learn from AB 1741 California Youth Pilot Projects. Additionally, the promising work that has been done

through “California Healthy Cities,” where community collaboratives have successfully marshaled resources to address pressing local health needs, can be expanded.

### **STATE/COUNTY PARTNERSHIP**

AB 1741 California Youth Pilot Project participation has established and demonstrated a partnership between the State of California and the County of San Diego. It is through this existing partnership that San Diego proposes to form a performance partnership with the federal government to implement a “Boost for Kids” Initiative. A letter of support<sup>7</sup> expresses the State’s interest in entering the partnership.

Selection as a “Boost for Kids” performance partnership will provide the State and the County the opportunity to involve the federal government in ongoing efforts to:

- ↳ manage results for children;
- ↳ streamline administration;
- ↳ reduce barriers (to the extent allowed by current law) to better provide needed services and supports to children;
- ↳ maximize the use of resources for services for children; and
- ↳ share lessons with other communities.

### **LEGISLATIVE AUTHORITY**

Assembly Bill 1741, which established the California Youth Pilot Project, creates a Youth Pilot Program Fund in the State Treasury. The fund provides the fiscal mechanism to:

- ↳ distribute State and federal monies to a county for the purpose of providing local jurisdictions greater flexibility to administer funds and streamline administration, and
- ↳ reinvest dollars saved in administration to improve outcomes for children.

The fund is the *only* statutory authority that currently exists to allow the State of California to waive law or regulations to “cut red tape” for the purpose of increasing flexibility in using federal program dollars. By virtue of its existing AB 1741 California Youth Pilot Project status, out of California’s 58 counties, the County of San Diego is one of *only* five counties with the legal authority to expand the State partnership to include the federal government.

### **INFRASTRUCTURE**

Assembly Bill 1741 statutorily requires participating counties to establish a child and family interagency coordinating council to plan, implement, monitor, and evaluate its youth pilot program. In the County of San Diego, the Commission on Children, Youth and Families is the planning, oversight and implementation body for the seven AB 1741 collaborative-driven pilot programs. The Commission is established by County ordinance and has the legal authority to blend various categorical funds and implement creative and new approaches to provide integrated, comprehensive services to low-income, high-risk, multi-problem youth and their families. Commission membership reflects the ethnic, cultural, and economic diversity of San Diego County.

The Commission oversees the entire pilot for the County, and recommends policy subject to the approval of the Board of Supervisors. In addition, each of the seven local project sites has governing councils that participate in community-based planning, and oversee direct operations. This multi-

tiered governance structure maximizes local community participation, and permits vital leadership training for parents and community residents.

AB 1741 also required a Strategic Plan. The AB 1741 Strategic Plan, the result of a collaborative process between the Commission and the community, was approved by both the Board of Supervisors and the State of California. It includes a five-year vision<sup>8</sup> for integrated services, prevention, family-centered services, home-based programs, collaboration, and community involvement. It also outlines the County's Youth Policy<sup>9</sup>, and establishes outcomes, including indicators of:

- ↳ increased health status of family members,
- ↳ school readiness,
- ↳ more families building on their strengths to become full partners in their children's learning,
- ↳ more families actively participating in a welcoming and accessible service system,
- ↳ better participation in the life of the community,
- ↳ improved economic well being, and
- ↳ improved community safety.

The plan establishes a regional mission and framework for diverse communities, cultures, and institutions to use for collaboration. Although seven communities were originally selected for AB 1741 program participation because of their long-standing community collaboratives, as mentioned previously, the plan has the flexibility to add communities.

### **AREAS OF INTEREST**

The Health and Human Services Agency's six regions each host existing collaboratives that can be hubs to networks of community providers that will link to each region's Family Resource Centers. "Boost for Kids" offers the opportunity to cut red tape to use these linkages more effectively to assist families, with multiple service needs, and in diverse communities, to smoothly access the various County and non-County service resources. "Boost for Kids" participation will enable a continuum of care, while eliminating overlapping case management roles.

"Boost for Kids" offers the County and each of the six geographic regions the technical assistance and the opportunity to:

- ↳ support the "No Wrong Door" service delivery model, which includes integrated information, assessment and referral, and the development of multi-disciplinary solutions for local services integration;
- ↳ enhance and refine the County's Report Card monitoring system to gather high quality, pertinent, regional data and statistics for the purpose of supporting County and community partners to meet performance goals and outcomes;
- ↳ continue to improve service efficiency and effectiveness through managed competition efforts, a process of allowing the public and private sectors to compete for the provision of service to achieve performance outcomes;
- ↳ target eligibility determinations for re-engineering, including the enabling of "Express Lane" eligibility, an approach for expediting the outreach and enrollment of large groups of families and children into government programs by streamlining the application process for children already connected to public programs and entities;

- ↳ develop strategies to reinvest administrative savings into frontline efforts that measurably improve the well-being of children; and
- ↳ expand AB 1741 regionally, beyond the original seven collaboratives.

## Areas of Focus

“Boost for Kids” allows participating local jurisdictions to pool administrative savings from federal discretionary grant programs to create local “Boost for Kids Investment Funds” to turn dollars saved in administration into improved outcomes for children, to the extent allowed under current law. California State statute, as established by AB 1741, allows the flexible use of funds for the following services for children and families:

- ↳ adoption
- ↳ child abuse prevention
- ↳ child welfare services
- ↳ delinquency prevention
- ↳ drug and alcohol services
- ↳ eligibility
- ↳ employment and training
- ↳ foster care
- ↳ juvenile facilities
- ↳ mental health
- ↳ probation
- ↳ housing
- ↳ youth development.

In partnership with the State and the federal government, the County of San Diego is prepared to initiate the research necessary to identify federal discretionary grant dollars that are consistent with California statutes and investment strategies to create a local “Boost for Kids Investment Fund.”

## Conclusion

The County of San Diego has a demonstrated interest in shifting government resources away from:



*people touching paper  
toward  
people touching families.*



The County Board of Supervisors and the Chief Administrative Officer have clearly established their commitment to the development and implementation of cost-effective prevention and early intervention strategies that achieve administrative savings. The County of San Diego is ready to build on and share its experience in delivering government services “cheaper, better, faster.” To this end, the County seeks a federal, State, and local partnership and the opportunity to continue to identify and reduce barriers to service access, strengthen its results-oriented approach to service

delivery, and improve the quality and delivery of health and human services to some of the regions' most vulnerable members.

Finally, in a performance partnership, the County expects to explore options to *push the envelope of innovation and creativity* further to enhance family-centered services. Locally, it is our ideal to:

Simplify Eligibility Determinations

Simplify and consolidate eligibility processes, to the extent possible, to eliminate duplication, achieve administrative efficiencies/savings, and reinvest savings into services for families. Treat families as partners on the road to self-sufficiency. Reduce fragmentation and confusion for customers of service.

Decategorize Funds

Eliminate categorical funding and the paper work required to account for programmatic funds. Give counties greater flexibility to blend and spend dollars.

Buy Outcomes, Not Widgets

Give communities local control over the resources they use. Allow local discretion to purchase outcomes, not process.

Information Sharing

Reduce federal barriers for information sharing to facilitate the information, assessment and referral component of the "No Wrong Door" service model, and gain increased access to federal data and geographic information to strengthen strategies for collecting and analyzing outcome data.

"Boost for Kids" has the promise of meaningful systemic change. It is the opportunity to use existing dollars and resources more effectively, and to further the process of federal devolution. It is also the opportunity for San Diego to build on previous success with reform efforts and to reinvest administrative and overhead savings into frontline prevention services such as in-home caregivers, developmental assessments, violence and injury prevention, and homeless outreach, to mention a few.

The County of San Diego welcomes the opportunity to be a dynamic partner in a "Boost for Kids" Performance Partnership.

## REFERENCES

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- <sup>1</sup> KPMG Peat Marwick LLP (KPMG), Proposed Agency Business Model Report (Final: January 6, 1998), Attachment A.
  - <sup>2</sup> KPMG Peat Marwick LLP (KPMG), No Wrong Door: A New Model for the County of San Diego Health and Human Services Agency (February 1998), Attachment B.
  - <sup>3</sup> County of San Diego Board of Supervisors, Reaching for New Heights: A Strategic Plan for Children and Youth (May 1998), Attachment C.
  - <sup>4</sup> County of San Diego Board of Supervisors, Report Card for Children and Families (Item 28, Adopted June 16, 1998), Attachment D.
  - <sup>5</sup> California Welfare and Institutions Code, Section 18987 – 18987.5, AB 1741 (Bates): Youth Pilot Program (Chaptered October 11, 1993), Attachment E.
  - <sup>6</sup> County of San Diego Board of Supervisors, AB 1741 Strategic Plan, (Item 8, Adopted November 29, 1994), Attachment F.
  - <sup>7</sup> Office of the Secretary, State of California Health and Human Services Agency, *Letter of Support* (March 9, 1999), Attachment G.
  - <sup>8</sup> County of San Diego Board of Supervisors, AB 1741 Strategic Plan (Item 8, Adopted November 29, 1994), Attachment F.
  - <sup>9</sup> Ibid., page 6.

