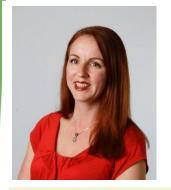
Health & Human Services Agency

	Page	Appropriation	Total
Health & Human Services Agency	35		
Behavioral Health	NA	\$44,815,564	
Public Health	NA	\$21,161,738	
Social Services	NA	\$101,515,782	
Public Guardian	NA	\$936,810	
Veterans Services	NA	\$302,639	
	TOTAL		\$168,732,533

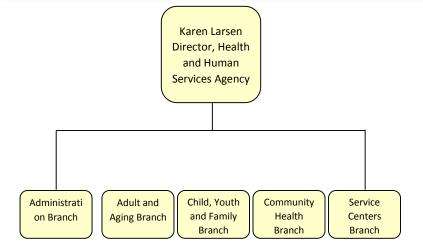


Karen Larsen Director

MISSION STATEMENT

Promote a healthy, safe, and economically stable community.

Health & Human Services Agency



Description of Major Services

The Health and Human Services Agency works to ensure the health, safety, and economic stability of children and adults, particularly individuals that are vulnerable, through the administration of almost 50 state and federally mandated programs and services as well as non-mandated programs that improve community well-being. The Agency provides services directly through internal services and indirectly through contracts with community partners.

2018-19 Summary of Budget

	Appropriation	Revenue	Net County Cost	Use of Fund Balance
BEHAVIORAL HEALTH	\$44,815,564	\$42,417,448	\$402,16 4	\$1,995,952
PUBLIC HEALTH	\$21,161,738	\$9,425,277	\$5,032,053	\$6,704,408
SOCIAL SERVICES	\$101,515,782	\$96,974,138	\$4,072,636	\$469,008
PUBLIC GUARDIAN	\$936,810	\$178,500	\$758,310	\$0
VETERANS SERVICES	\$302,639	\$49,204	\$253,435	\$0
TOTAL	\$168,732,533	\$149,044,567	\$10,518,598	\$9,169,368

SUMMARY OF HEALTH AND HUMAN SERVICES 2018-19 BUDGET

	Actuals 2015-16	Actuals 2016-17	Budget 2017-18	Requested 2018-19	Recommended 2018-19
Revenue					
Fines, Forfeitures, & Penalties Revenue from Use of Money &	\$816,332	\$814,053	\$724,969	\$622,424	\$622,424
Property	(\$22,277)	(\$13,077)	\$12,900	\$11,400	\$11,400
Realignment 1991	\$20,331,524	\$24,010,372	\$23,521,325	\$26,638,802	\$25,768,619
Realignment 2011	\$12,449,980	\$17,122,852	\$16,369,591	\$17,480,917	\$17,480,497
State Revenue	\$39,473,789	\$37,563,907	\$35,095,836	\$39,855,329	\$40,410,152
Federal Revenue	\$35,035,826	\$36,951,419	\$40,243,978	\$47,767,780	\$47,457,757
Other Intergovt Revenue	\$98,136	\$104,878	\$272,124	\$100,000	\$100,000
Charges for Services	\$6,629,772	\$8,489,869	\$17,172,643	\$13,724,150	\$13,757,039
Miscellaneous Revenues	\$501,495	\$1,044,466	\$570,274	\$117,000	\$579,000
Operating Transfers In	\$3,619,472	\$1,628,972	\$852,804	\$3,060,679	\$2,857,679
Total Revenue	\$118,934,049	\$127,717,712	\$134,836,444	\$149,378,481	\$149,044,567
Appropriation					
Salaries & Benefits	\$54,900,048	\$56,477,142	\$58,703,489	\$67,259,716	\$67,385,802
Services & Supplies	\$38,465,254	\$43,750,441	\$56,836,794	\$55,406,922	\$54,597,107
Other Charges	\$37,689,171	\$36,228,882	\$37,909,396	\$44,972,473	\$44,172,473
Capital Assets-Equipment	\$163,550	\$12,763	\$23,000	\$115,000	\$115,000
Capital Assets-Structural & Imp	\$0	\$0	\$1,000,000	\$0	\$0
Operating Transfers Out	\$1,099,781	\$1,114,730	\$600,000	\$1,246,354	\$1,598,354
Intrafund Transfers	(\$122,704)	\$324,797	\$2,416,559	\$453,844	\$815,147
Other Financing Uses	\$48,054	\$54,650	\$48,650	\$92,650	\$48,650
Total Appropriation	\$132,243,154	\$137,963,404	\$157,537,888	\$169,546,958	\$168,732,533
Use of Fund Balance					
Available	\$3,874,721	(\$260,380)	\$12,598,876	\$8,610,455	\$9,169,368
Net County Cost	\$9,434,384	\$10,506,072	\$10,102,568	\$11,558,022	\$10,518,598

Funded Staffing: 599.9 572.7 572.7 606.7 601.7 **Expenditures Revenues** Other Charges Use of Fund Balance Fines, Forfeitures, & Net County... Penalties 6% 26% Revenue from Use of 1% Operating Transfers Money & Property <1% 2% Salaries & Realignment Intrafund Benefits Miscellaneous.. 1991 Transfers 40% 15% 1% Charges for Services Other Realignment 2011 8% Financing Uses <1% Other Intergovt Revenue Operating_ <1% Transfers Out 1% Federal State Revenue 24% Revenue... Capital Assets-Equipment <1% Services & Supplies 32%

2017-18 Goals & Strategies

2017-18 Accomplishments/Status

Goal 1: Improve outcomes for clients and the community

- Increase community-based access points for outpatient specialty mental health services.
- ❖ In FY 2017-18 the Yolo community experienced an increase of 6.21% in the utilization of outpatient mental health services (according to data from July 2017 to Feb 2018, compared to FY 2016-17). The increase was primarily seen for adults age 26 and above, while youth and children age 25 and below saw a decrease in utilization. HHSA will continue efforts towards improved utilization as we implement several significant changes to the mental health crisis and access system over the next several months. These changes include the opening of a Mental Health Urgent Care (completed in February 2018), the provision of 24/7 crisis response services (expected in July 2018), and the opening of a Navigation Center (expected in July 2018).
- Develop a coordinated system for identifying and assessing people who are experiencing homelessness and prioritize entry into permanent housing and supportive services.
- Action Coalition (HPAC) to develop and adopt policies and procedures for the local homeless Coordinated Entry System, which is currently being implemented throughout Yolo County. HHSA will monitor implementation and coordinate improvements to the system as needed. HHSA also assumed facilitation of the Homeless Multi-Disciplinary Team meetings in each local jurisdiction to more effectively steer homeless individuals and families to appropriate housing and services.
- Increase the percentage of foster children and youth placed in local home-based settings.
- ❖ Early in FY 17-18, HHSA created a data system to better track the percentage of children placed in local home-based settings. HHSA subsequently discovered that children placed farther away are often older youth or those who require specialized treatment and services not available locally. While it is important for these youth to be placed close to home, developing viable solutions for some of them will be a much more complicated process. HHSA chose to direct its energy and resources to other priorities for foster children and youth this year. Nonetheless, we may return to this objective in future years when better resources and solutions exist to impact change for older children.

- Provide timely access to benefit programs for applicants in HHSA Service Centers.
- HHSA made some progress towards ensuring timely access to benefit programs in FY 2017-18 and plans to continue working on this strategy in 2018-19. Data from July 2017 to March 2018 reveals that for six of the nine months the Service Centers Branch exceeded the federally mandated target of 90% for the timely processing of public benefits applications—including Medi-Cal, CalFresh, CalWORKs, General Assistance, and Foster Care Eligibility. Months for which the targets were missed are linked to Medi-Cal Open Enrollment. During these months Medi-Cal applications to HHSA nearly double while staff levels remained unchanged. HHSA plans to implement several new tactics next year to better manage changes in application volume and will monitor progress throughout FY 2018-19.
- Implement county-wide policies to improve community health and wellness for Yolo residents.
- HHSA collaborated with local partners to advance several key policies and initiatives that will improve the health and wellness of Yolo residents, including:
 - Implementation of a ban on the sale of flavored tobacco in all unincorporated areas of Yolo County;
 - Implementation of a smoke-free policy on County properties effective January 1, 2019;
 - Working with General Services on the healthy vending initiative toward the goal of healthier food and beverage choices in County vending machines;
 - Identifying funding for the future delivery of provider training in Perinatal Mood and Anxiety Disorders;
 - Promoting the 2018 May is Mental Health Awareness Month and Traveling Blue Dot Campaign;
 - Partnering with Help me Grow Yolo County to provide early childhood developmental screening for HHSA consumers ages 0 to 5.
- Improve the quality and performance of public health services by securing national public health accreditation.

HHSA's Community Health Branch achieved National Public Health Accreditation from the Public Health Accreditation Board in November 2017. The rigorous accreditation process requires demonstration of compliance with national standards of public health department performance. HHSA is one of only 11 accredited health departments in California, and 211 in the country out of nearly 3000 health departments nationwide.

- Improve the Agency's preparedness to respond to emergencies that require the provision of mass care, public health and/or medical services.
- HHSA made progress towards improving the Agency's preparedness to respond to emergencies in FY 2017-18 and plans to continue work on this strategy in 2018-19. Staff revised the Mass Care Sheltering Plan and developed an employee training plan to be initiated with HHSA staff in 2018-19. HHSA developed a behavioral health crisis response plan to address the needs of the community and those of first responders after an emergency or disaster. HHSA also participated in a fully functional county exercise to test mass care, patient treatment, and patient disbursement during a crisis.

Goal 2: Ensure fiscal health

- Develop a 3-year financial sustainability plan for the Agency's primary funding sources (Mental Health, Substance Use Disorder, Social Services and Public Health).
- The modification of the HHSA budget and financial structure that is designed to align HHSA finance with the Branch structure of our integrated Agency is underway and will remain a priority for completion in FY 2018-19. The reorganization now supersedes the 3year financial sustainability plan as a priority.
- Develop staffing and service delivery plans for the Service Centers that operate within social services funding allocations.
- HHSA fiscal staff developed a mock social services administration claim as part of the FY 2018-19 requested budget process. The exercise assisted HHSA in determining accurate staffing to budget ratios for the Service Centers branch in 2018-19. The Agency will monitor staff time studies on a quarterly basis throughout the year to ensure that time is used according to the budget plan to maximize social services funding allocations.
- Improve management's ability to access electronic fiscal data in a timely manner.
- ❖ HHSA has developed a complete redesign of the Agency's General and Activity Ledgers, which will utilize a fiscal model aligned with the Branch and program structures of our integrated Agency. The redesign will be implemented in FY 2018-19 and will allow for accurate and timely financial data to be shared with managers on a routine basis.
- Use mental health funding more efficiently by increasing use of community-based treatment options instead of hospitalizations.
- HHSA made significant progress towards redesigning the local mental health crisis and access system, with the intention of decreasing hospitalization costs and increasing Medi-Cal revenue generation. While there has already been modest savings and increased revenue, it will take a full year of program implementation before the realization of significant savings. Increased cost avoidance and revenue generation will continue as a priority with monitoring throughout the fiscal year 2018-19.

- Diversify funding by seeking grants and other funding sources.
- HHSA successfully applied for numerous new grant opportunities that diversify local funding and expand local services for county residents, including:
 - \$2,344,729 housing grant from Partnership HealthPlan to partner with local cities and non-profits;
 - \$190,483 from the California Department of Social Services toward a Housing and Disability Advocacy Program;
 - \$100,000 in No Place Like Home Technical Assistance funding from the Department of Housing and Community Development;
 - \$295,579 in Senate Bill 82 funding from the Mental Health Services Oversight and Accountability Commission to provide mental health triage services and support to Transition Age Youth;
 - \$500,000 in Food Insecurity Nutrition Incentive funding from the United States Department of Agriculture to support the local CalFresh Bonus Bucks program;
 - \$131,489 in Emergency Child Care Bridge funding from the California Department of Social Services.

Goal 3: Strengthen integration

- Develop consistent agency wide policies and procedures.
- * HHSA developed an inventory of all policies and procedures that were adopted by the three former departments before the integration of HHSA. The inventory identifies policies and procedures in 97 different topic areas all of which need to be updated to reflect the current HHSA practices or eliminated as no longer necessary. HHSA also developed a template for policies and procedures and made significant progress in adopting updated policies and procedures in the area of mental health services. Moving forward, HHSA intends to seek feedback from employees and leadership regarding which policies and procedures should be prioritized for revision, and develop a revision schedule for 2018-19.
- Develop and provide training on core topics, including eligibility for safety net programs, trauma-informed practices, mental health first aid, social determinants of health, fiscal issues, human resources, and leadership.
- HHSA focused its training in several key areas, including:
 - Regular HHSA Manager and Supervisor meetings used to provide training on topics centered on the HHSA Strategic Plan and Performance Management System;

- Redesign of the New Employee Orientation to be a more engaging onboarding process;
- Each Branch developed training plans that addressed the core training needs of their employees.
- Increase opportunities for employee engagement and inclusion.
- HHSA offers employees multiple opportunities to engage in committees or groups that provide input on the work of our Agency and County. Employees sit on a wide range of engagement committees, including BRAVO, Change Agents, Performance Management Steering Committee, Operational Excellence, HHSA Employee Engagement, YES Team, and Employee Council. To strengthen employee satisfaction and engagement the Agency working to implement the StrengthsFinder and Languages of Appreciation at Work tools.

Goal 4: Make data informed decisions and create a culture of quality

- Implement use of a performance management system agency wide.
- ❖ HHSA has designed a Performance Management System that emphasizes performance measurement, data collection, and quality improvement. In FY 2017-18, HHSA hired a Performance Management Program Coordinator to advance our work and formed a Performance Management Steering Committee to make recommendations regarding system development. HHSA also maintained the Operational Excellence group, which meets monthly to train employees on quality improvement tools and opportunities. HHSA has spent a significant portion of the year developing Results Based Accountability measures and expects to have measures developed for approximately 50 of its programs by year-end.

Expand the use of data dashboards.

❖ HHSA has worked towards expanding the use of Insight Vision, the Agency's software for tracking performance measures. The Agency purchased 30 new user licenses for the software and provided training to analysts, data contacts, and managers on how to use the system. HHSA will be developing a plan for tracking data on all new program performance measures in the Insight Vision system in FY 2018-19.

- Advance "culture of quality" through implementation of quality improvement projects in all branches.
- HHSA sought proposals for potential quality improvement projects from staff and received four proposals. Each proposal was reviewed by members of Operational Excellence, the Performance Management Steering Committee, and HHSA Executive Leadership. Two of the proposals were selected for implementation as quality improvement projects in FY 2017-18. The projects targeted improving the HHSA mail delivery process and improving the Agency's ability to track access to behavioral health services. Both projects are in action through the work of an Operational Excellence consultant and a multi-disciplinary team of employees. The mail delivery team expects to develop recommendations before the end of the year, and the behavioral health team will continue its work into FY 2018-19.
- Pilot use of cross-branch performance measures by developing and tracking measures for all homeless and housing services in the Agency.
- Using the results based accountability model, HHSA developed comparable performance measures for all HHSA homeless programs. In FY 2018-19, HHSA homeless programs will develop and implement a plan for effectively tracking data on the identified measures.

HEALTH AND HUMAN SERVICES AGENCY GOALS & STRATEGIES for 2018-19

Goal 1: Improve Outcomes for Clients and the Community

Strategies for 2018-19

- Collaborate with at least two local jurisdictions to implement policies to improve community health and wellness for residents. (Thriving Residents, Community Health Improvement Plan Focus Area)
- Improve long-term financial self-sufficiency outcomes for General Assistance clients by strengthening care coordination between public assistance, housing, employment, and healthcare services. (Thriving Residents, Homeless Priority Area)
- Increase Medi-Cal funded services in the local substance use disorder treatment continuum of care. (Thriving Residents)
- Improve re-entry coordination for individuals with behavioral health conditions leaving custody settings. (Safe Communities, Continuum of Care Focus Area)
- Ensure timely access to assessment and services for children in Child Welfare Services. (Thriving Residents, Children's Programs Focus Area)
- Achieve breastfeeding rates at hospital discharge that rank Yolo County in the top 10 percent of local health jurisdictions in California. (Thriving Residents, Community Health Improvement Plan Focus Area)
- Shift the focus of the local CalWORKs case planning system toward client driven goals, benchmarks, and aspirations. (Thriving Residents)

Goal 2: Ensure Fiscal Health

Strategies for 2018-19

- Redesign the Agency's fiscal structure and budgets by branch. (Operational Excellence)
- Improve the Agency's ability to produce accurate and timely financial reports. (Operational Excellence)
- Oversee implementation of countywide grant procedures on all HHSA grant applications. (Operational Excellence)
- Develop an in-house system for tracking realignment revenue and expenditures Agency-wide. (Operational Excellence)

Goal 3: Strengthen Integration

Strategies for 2018-19

- Provide training and development opportunities for Agency employees. (Operational Excellence)
- Increase employee retention. (Operational Excellence)
- Develop consistent Agency-wide policies and procedures. (Operational Excellence)
- Improve the Agency's preparedness to respond to emergencies that require the provision of mass care, public health, and medical services. (Safe Communities, Emergency Management Focus Area)

Goal 4: Make Data Informed Decisions and Create a Culture of Quality

Strategies for 2018-19

- Provide timely access to benefit programs for applicants in HHSA Service Centers. (Operational Excellence)
- Strengthen the Agency's information technology resources specific to tracking behavioral health access and timeliness measures. (Operational Excellence)
- Improve capacity for conducting continuous quality improvement in Child Welfare. (Thriving Residents, Children's Programs Focus Area)
- Complete a county-wide Community Health Assessment in partnership with Yolo County hospitals and community clinics that identifies crucial health needs and issues through systematic and comprehensive data collection and analysis. (Thriving Residents, Community Health Improvement Plan Focus Area)
- Implement use of a performance management system Agency-wide. (Operational Excellence)

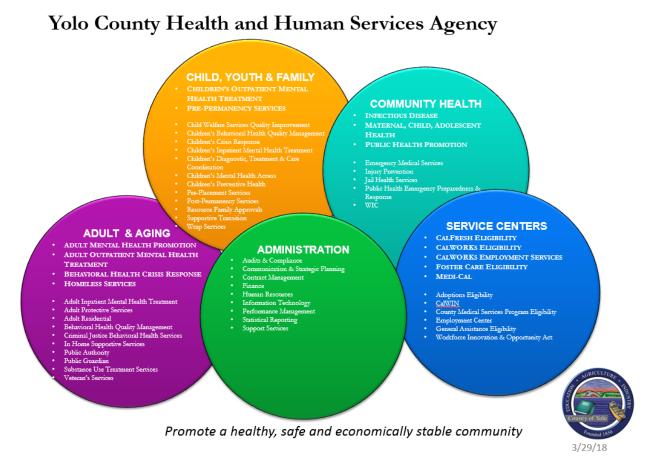
Programs:

During the Fall of 2017, HHSA began an Agency-wide effort to create an inventory of all HHSA programs. The intended purposes of this work included:

- Helping staff understand, identify, and communicate programs and services as an integrated Agency;
- Providing staff a roadmap of next-steps under Results Based Accountability (RBA) and performance measurement;
 and
- Reorganizing the Agency's financial structure to align with the integrated Agency's Branch and program structures.
 The new structure will allow staff to report accurate and timely financial information by Branch and program.

HHSA managers and supervisors worked with financial staff to develop the program inventory, which includes the fifty-three HHSA programs pictured below.

After completing the initial inventory, HHSA directors, managers and supervisors worked collaboratively to identify the programs highly aligned with the priorities identified within local strategic plans and assessment processes. These plans and processes included the County and Agency Strategic Plans, the Agency mission, the Community Health Improvement Plan, the Maternal Child and Adolescent Health Needs Assessment, the Mental Health Services Act assessment process, the Child Welfare System Improvement Plan, and the Low Income Community Action Plan. This overall process was intended to help identify the programs of focus for initial performance measurement efforts due to their close alignment with community priorities. In total, this process identified fourteen of the fifty-three (53) programs to begin work on creating Results Based Accountability program performance measures in early 2018. These 14 programs are **bolded** and CAPITALIZED in the image below.



The following Program Summary explains the program purposes of HHSA's fourteen prioritized.

HEALTH AND HUMAN SERVICES Program Summary

1 Togram Summary						
Program Title Program Purpose				Bu	dget	
Program Information	Administration	Behavioral Health	Public Health	Social Services	Public Guardian	Strategic Plan Alignment
Significant Budget Changes The 2018-19 Recommended Budget for HHSA includes 26 new positions, inc Medi-Cal and CalWORKs administration, one Adult Protective Services posit Behavioral Health and MHSA programs. Three of the new positions are to support the new Drug Medi-Cal Organized allow the County to draw federal Medi-Cal dollars for alcohol and drug trea budget also includes an increase of \$4.5 million in provider services as part Other significant adjustments include a \$2.4 million increase in IHSS mainte cost shift enacted by the State in 2017, a \$2.1 million increase in foster care caseloads, and a \$545,000 increase in overtime primarily related to Child W partially offset by a \$1.2 million reduction in direct to client services and an assistance payments.	d Deli tmen of the nance assis	very : t serve Dru e of e	Syste vices of Medical Properties of the Propert	m wa for th di-Cal cost r ments	iver, e first waiv result s due e cost	which will t time. The er. ing from the to increasing t increases are
Adult and Aging Branch						
Adult Mental Health Promotion Increase knowledge and confidence of training participants to respond to mental health challenges and suicidal ideation.		*				Thriving Residents
The Early Signs Training and Assistance Program focuses on mental illness stigma reduction and community education to intervene earlier in a mental health crisis and reduce the risk of suicide through prevention and intervention training. Training is offered in major cities throughout Yolo County with funding through the Mental Health Service Act						Safe Communities Operational Excellence

HEALTH AND HUMAN SERVICES AGENCY PROGRAMS Continued						
Adult Outpatient Mental Health Treatment Improve wellbeing, linkage to services and reduce re-hospitalization of mental health clients.	Administration	❖ Behav	Public Health	Social Se	Public G	Thriving Residents
Individual or group interventions support a decrease in functional impairments associated with mental health symptoms and support independent living and enhanced self-sufficiency. HHSA clinical staff respond to individuals who call, walk-in, or are brought by family or First Responders to County clinics in Davis, Woodland, and West Sacramento. Clinical staff also work with the community, law enforcement, and local emergency departments to decrease the level of crisis and link the individual to outpatient services. Wellness Centers in Davis, Woodland, and West Sacramento provide a safe space for developing independent living skills and engaging in socialization opportunities.	ration	Behavioral Health	ealth	Services	Guardian	Safe Communities
Behavioral Health Crisis Response Increase engagement in mental health services and reduce arrests, emergency department visits, and psychiatric admissions for individuals experiencing a mental health crisis.		*		*	Public Guard	Thriving Residents Safe Communities
First Responders' Mental Health Urgent Care (FRMHUC) provides a safe, supportive location for clients who are experiencing a crisis too acute to remain in the community, yet not acute enough to require hospitalization. The Urgent Care will improve collaboration between first responders, mental health service providers, and clients while growing the capacity of first responders to address immediate needs and divert people experiencing a mental health condition to a non-emergency location for care.					rdian	Communities
Homeless Services Increase income and permanent housing for unhoused residents of Yolo County. Homeless Services is responsible for strengthening the		*		*		Thriving Residents
infrastructure for homeless service providers within the County of Yolo. The objective is accomplished through the development of greater collaboration, increased funding in the community by identifying appropriate and innovative funding opportunities and growing the Continuum of Care. HHSA draws together various departments toward improving the outcomes of people who are unhoused in Yolo County with a variety of funding sources, including the Department of Housing and Urban Development, the Substance Abuse and Mental Health Services Administration, the State of California, Partnership Healthcare of California, and the County General Fund.						

HEALTH AND HUMAN SERVICES AGENCY PROGRA	AMS (Conti	nued			
Child, Youth and Family Branch						
en's Outpatient Mental Health Treatment we mental health and well-being, decrease functional impairments duce symptoms related to the primary diagnosis.	Administration	. Behaviora	Public Health	. Social	Public G	Thriving Residents
The program serves Yolo County residents between the ages of 0-17 (18-21 in some cases) who are Medi-Cal eligible and meet medical necessity criteria for specialty mental health services. Services include individual or group therapy and interventions that are designed to reduce mental disability and facilitate improvement or maintenance of functioning consistent with individual goals. Services are directed toward achieving the client/family goals and must be consistent with the current Client Treatment Plan.	tration	ioral Health	ealth	Social Services	Guardian	Safe Communiti
se parental protective capacity for parents so that children who home are safe and do not experience subsequent abuse or neglect is use safety for children placed in out-of-home care. Pre-Permanency Services ensure the safety, permanency, and wellbeing of children that have entered the child welfare system. Staff conduct assessments and develop behaviorally specific case plans to provide reunification services to parents when abuse or neglect has created an unsafe home environment. Reunification services and planning efforts continue to ensure each child can have a permanent safe home within the required timeframe. As staff seeks timely permanency outcomes, maintaining child safety is paramount. Services may be provided in the family home or with				*		Thriving Residents Safe Communiti

HEALTH AND HUMAN SERVICES AGENCY PROGRA	HEALTH AND HUMAN SERVICES AGENCY PROGRAMS Continued					
Community Health Branch						
Infectious Disease Ensure prompt identification, correct treatment, and control the spread of communicable diseases.	Administration	Behavioral Health	❖Public Health	Social Sei	Public Gu	Thriving Residents
The infectious disease program includes communicable disease, tuberculosis, immunization assistance, and STD prevention. These programs use surveillance, disease investigation, and prompt linkage to treatment services to ensure health for all of Yolo County.	ration	ral Health	Health	l Services	Guardian	Safe Communities
Maternal, Child and Adolescent Health Increase provider knowledge and improve health behaviors and environments to support healthy choices for mothers, adolescents, and children.			*			Thriving Residents Safe Communities
The Maternal Child and Adolescent Health program provides adolescent sexual health, childhood lead poisoning prevention, comprehensive perinatal services, fetal infant mortality review, maternal mental health services, nurse home visiting, and the sudden infant death syndrome program. These programs strive to improve health and birth outcomes for the maternal, child, and adolescent population and to reduce health disparities.						Operational Excellence
Public Health Promotion Increase knowledge and adoption of healthy behaviors and improve environments to support healthy choices.		*	*			Thriving Residents Sustainable
The public health promotion program includes oral health, active transportation, community garden, nutrition education and obesity prevention, substance use prevention, and tobacco prevention. These programs work to reduce the burden of chronic disease for all Yolo County residents.						Safe Communities

HEALTH AND HUMAN SERVICES AGENCY PROGRAMS Continued Service Centers Branch CalFresh Eligibility Thriving Behavioral Health ❖Social Services Increase enrollment of eligible residents, increase resources to purchase Residents food products and increase local economic stimulus of benefits issued. Safe The CalFresh program targets households with income below 200% **Communities** of the federal poverty level. Yolo County residents can apply for CalFresh benefits online or in-person at our Woodland, West **Operational** Sacramento, or Winters service centers. Established recipients must Excellence submit periodic reports and complete recertification annually to maintain eligibility. Benefits are 100% federally funded and issued through an electronic benefit transfer (EBT) card that can be used to purchase food items at any EBT certified retailer. Yolo County issues an average of \$2.5 million in CalFresh benefits per month and provides an economic stimulus to the local economy. **CalWORKs Eligibility Thriving** * Ensure timely and accurate CalWORKs determinations. Residents CalWORKs is California's version of Temporary Assistance for Needy Safe Families (TANF). This program issues cash benefits to households **Communities** with no income or income that is below the limit set by the state. This benefit can be used to pay for basic needs such as rent. **Operational** Benefits are state and federally funded. The CalWORKs benefit is Excellence issued through an electronic benefit transfer (EBT) card that can be used at any EBT certified retailer. Yolo County residents can apply for CalWORKs benefits online at www.MyBenefitsCalWIN.org or in-person at our Woodland, West Sacramento, or Winters Service Centers. The CalWORKs program also includes specialized funding to improve service provisions, such as: Homeless Assistance: an annual issuance that can assist with temporary and permanent housing if the customer verifies that they are homeless. Employment Services: assists customer with barriers to employment and education. **CalWORKs Employment Services Thriving** • Residents Improve family stability, self-sufficiency, and employment. CalWORKs Employment Services is composed of a variety of services Safe including Cal-Learn, childcare, differential response, family **Communities** stabilization, housing support, linkages to child welfare services, mental health support, subsidized employment and Welfare to Work.

HEALTH AND HUMAN SERVICES AGENCY PROGRA	AMS (Conti	nued			
Foster Care Eligibility Establish timely foster care payments.	Admi	Behav	Public	. Soc	Public	Thriving Residents
The Foster Care Eligibility program provides funds to minors and non-minor dependents that have been removed from the parent(s) and placed in either home-based foster care setting or a group home. Eligibility is determined using Temporary Assistance to Needy Families regulations prior to 1996. Placement may be with a relative through the Approved Relative Caretaker program. Child Welfare Services must certify all home-based foster care placements to receive funding. This certification includes background checks for the providers. Historically, the age of the minor or non-minor dependent determined the foster care rate. As of May 1st, 2018 the rate is determined based on the needs of the minor or non-minor dependent.	Administration	Behavioral Health	Public Health	❖ Social Services	c Guardian	Safe Communities
Medi-Cal Increase enrollment of eligible residents in Medi-Cal.				*		Thriving Residents
Medi-Cal is California's Medicaid program. This federally funded program provides health care for low-income individuals including families with children, seniors, persons with disabilities, children and youth in foster care, and pregnant women. The eligible applicant's annual income must be lower than 138% of the federal poverty level. In January 2014, the Affordable Care Act required						Safe Communities Operational Excellence
that all Americans enroll in health insurance or face a penalty and gave the option to states to expand Medi-Cal eligibility. California was one of 31 states to participate in the Medi-Cal expansion. HHSA staff provide application assistance, determine eligibility, and provide ongoing case management.						RBA Attached



RESULTS BASED ACCOUNTABILITY

HEALTH & HUMAN SERVICES AGENCY MEDI-CAL

Program Purpose Statement	Enroll eligible residents in Medi-Cal
PROGRAM INFORMATION	 Medi-Cal is California's Medicaid program; a federally funded program that provides health care services for low-income individuals including families with children, seniors, persons with disabilities, foster care, and pregnant women. Eligibility for Medi-Cal depends on whether the applicant's annual income is lower than 138% of the federal poverty level. The Affordable Care Act, implemented in January 2014, triggered several mandatory and voluntary policy changes that effected Medi-Cal enrollment, including: A requirement that all Americans enroll in health insurance or face a penalty, and The option to expand Medi-Cal and create a state marketplace for affordable, low cost and no-cost health insurance, including Medi-Cal. California was one of 31 states to participate in the Medi-Cal expansion, and Covered California was created as the statewide marketplace assisting eligible Californians with subsidized health benefits, comparing insurance options, and enrolling to receive coverage. In Yolo County, HHSA staff provide application assistance, eligibility determination, and case management. Community partners, YCCA, Rise, Inc., and Center for Families, provide Medi-Cal outreach and application assistance.

	PM1: HOW MUCH DID WE DO?
STAFF 1.1	Total FTEs: FTE CLASSIFICATION
1.2	# of applications received
1.3	# of individuals on Medi-Cal (monthly average)
1.4	# of Medi-Cal cases (monthly average)

	PM2: HOW WELL DID WE DO IT?
2.1	Timeliness: Monthly average compliance rate for disposing applications within the 45-day timeframe (Program mandate = 90%)

PM3: IS ANYONE BETTER OFF?		PM3: IS ANYONE BETTER OFF?
	3.1	Percent of County residents enrolled in Medi-Cal (Goal = 20%)