Sonoma County Economic Assistance Service Center: Fostering Teamwork and Accountability with a Unit Caseload Structure

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EXECUTIVE SUMMARY

In October 2009, Contra Costa County's General Assistance Intake program underwent a major redesign. The intake processes were streamlined in response to an increased demand for more accessible services. While the intake processes have been adjusted in accordance with the influx of new applicants, the ongoing General Assistance case management model has remained the same. As human services delivery is changing throughout our nation, especially with the implementation of the Affordable Care Act and horizontal integration, it is critical that the ongoing case management team of Contra Costa County is able to adapt to and accommodate these changes. This case study provides an overview of how Sonoma County has prepared for and addressed the challenges faced with increasing caseloads and demands for service. The Sonoma County Economic Assistance Service Center has developed a service model that utilizes a unit-based caseload system. This model encourages teamwork and accountability while improving customer satisfaction and enhanced service delivery. This case study also examines how Contra Costa County may benefit from implementing a unit-based caseload structure for ongoing General Assistance caseload management aimed at improving customer service, productivity, and staff morale.

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Introduction

Historically, human services clients receiving public assistance would be assigned to a specific caseworker who would manage their case, participate in any necessary face-to-face interactions, and update the case record with any changes in the household. The caseworker/client relationship would continue throughout the duration of the case.

Dramatic increases in caseload numbers, which can be attributed to both increased poverty rates along with long-term unemployment or underemployment, has prompted many counties to evaluate and reassess their workload management processes. In recent years, many California counties have moved away from case-based workload management and embraced various task-based management models. This shift in workload management has allowed counties to more effectively manage the increased demand for services while also maintaining equitable workload distribution amongst staff.

While Contra Costa County has moved into task-based caseload management for its ongoing Medi-Cal and CalFRESH cases, the General Assistance program continues to utilize a case-based workload for ongoing case management. Sonoma County's Economic Assistance Service Center utilizes a unit-based Centralized Service Center Model, which was observed in order to determine if workload management of ongoing General Assistance cases would benefit from a shift toward this model.

Sonoma County Economic Assistance Service Center

Sonoma County moved from a case-based workload and launched its Economic Assistance Service Center (EASC) in March 2008 with a total of 21,000 cases and 42 full-time eligibility workers. The service center model that was initially utilized was based on a model that included both case maintenance and telephone eligibility workers (EW), with staff assigned to either answer incoming calls or to process case maintenance tasks.

Between March 2008 and October 2012, the caseload at EASC increased by over 60 percent, while staffing levels increased by only 5 full-time eligibility workers (see *Table 1*).

TABLE 1						
	Total Cases	Specialized Cases	Total Cases	FTE (EWI/EWII)		
March 2008	21,000	N/A	21,000	42		
October 2010	30,142	<1,937>*	28,205	42		
October 2011	32,759	<1,991>*	30,768	42		
October 2012	33,940	<2,211>**	31,729	47		

Total cases include all programs within a case at EASCandincludeMedi-Cal,CMSP,andCalFRESH. *Specialized cases for 2010 and 1011 include IHSS **Specialized cases for 2012 include IHSS and DDSD

With the influx of additional cases, both case maintenance workloads and the volume of telephone calls dramatically increased. In order to better serve the needs of the community, to improve staff morale and foster teamwork, and in preparation for health care reform, a new Centralized Service Center Model was implemented in 2012 that created a unitbased caseload structure.

In this model, all eligibility staff were cross trained in both telephone service and case management functions. The total caseload was equitably distributed amongst the units based on type of case, with each unit responsible for approximately 5,288 cases. Each unit then became responsible for all of the tasks associated with its assigned cases. Each eligibility worker was also assigned phone service hours to ensure quality customer service and reduced wait times for callers.

Sonoma County developed this new Centralized Service Center model based on recommendations from its efficiency workgroup. Workgroup participants included line staff, lead workers, supervisors, and management, as well as union representatives. In addition to the efficiency workgroup, Sonoma County utilized staff surveys as well as site visits to various counties in order to develop its model.

Implementation of the EASC Centralized Service Center Model has had a positive impact on both customer service and employee satisfaction in Sonoma County. In addition to increased efficiency, staff morale has improved significantly. By creating a unit-based caseload, EASC fostered an environment with an emphasis on teamwork. Employees became more accountable to one another and to their unit as a whole. Staff developed a sense of ownership that is evident in their pride in their performance. Supervisory staff found that they have a much more manageable scope of control. The new model increases their ability to measure productivity as well as track individual and group performance. Supervisors became responsible to task assignments within their unit, allowing for equitable workload balancing within the team while also giving the unit the ability to structure task assignment based on individual strengths or unit priorities. Client satisfaction also improved with this new structure. In addition to reduced wait times for telephone service, customers also experienced the sense of ownership and familiarity staff have developed with their cases.

The Centralized Service Center Model implemented at EASC in response to increased service demands has succeeded in addressing both customer service and workload management concerns while improving morale and fostering a strong sense of teamwork.

Contra Costa County General Assistance Program

OVERVIEW OF CURRENT PROGRAM STRUCTURE

The General Assistance (GA) Program in Contra Costa County is serviced by three GA units located in district offices in East, West, and Central county. Intake staff in each of the three GA units process new applications through face-to-face interviews with GA applicants. Upon approval, ongoing GA cases are transferred to a case-carrying worker in either the Central or West county office.

Ongoing case management for the GA program in Contra Costa County utilizes a case-based workload management model. There are currently 6 ongoing case workers staffed in the GA units; two in West and four in Central county; however, vacancies or extended absences often lead to reduced staffing levels. The GA caseload averages between 1,300-1,400 cases countywide (see *Table 2*). Each month, the caseloads are balanced amongst existing staff in an attempt to more equitably distribute the workload. This often results in bulk transfers of cases between staff in different offices. Uncovered caseloads are managed by either caseload disbursement, round robin of casework assignments, or voluntary overtime depending on the duration and type of vacancy.

T A B L E 2 CCC GA Caseload					
	Total Cases	FTE			
October 2013	1,478	5.6			
November 2013	1,419	4.8			
December 2013	1,432	4.8			
January 2014	1,318	3.8			
February 2014	1,265	3.8			
March 2014	1,341	3.8			
April 2014	1,472	3.8			

While monthly caseload balancing is utilized in an attempt to equitably distribute the workload, a worker with a higher classification may have fewer tasks to complete monthly, based on the types of cases in their workload. For example, an EW II will have 20% fewer cases than an EW Specialist, but will have significantly more renewals and quarterly status reports due in that month (see *Table 3*). GA supervisory staff often find it very challenging to consistently measure performance and productivity as a result of continuously shifting caseload assignments.

While GA program regulations mandate a minimal number of face-to-face contacts, many GA clients often drop in to the district office to meet with a caseworker face-to-face to address their needs. The current structure requires intake staff to participate in the ongoing case management process for clients needing face-to-face interaction. This is due to the lack of ongoing case maintenance staff in the East county office, and often leads to extended wait times for customers needing assistance.

Recommendations and Action Steps

The current workload management model utilized for the GA program in Contra Costa County poses several challenges that impact productivity, morale, and customer service. With 6 ongoing caseworkers stationed in two units, an environment of us vs. them has emerged. It is recommended that Contra Costa County consider creating a GA case maintenance team that utilizes a unit-based caseload structure with ongoing caseworkers stationed at each of the three district offices. This will allow clients to meet with an ongoing caseworker in any office without waiting for an intake worker to be available, reducing customer wait times and lobby traffic. In order to provide quality telephone services to clients, all GA case management workers would be assigned telephone hours, ensuring that clients will be able to speak with an eligibility worker that can address their needs at any time during regular business hours. Supervisory staff would experience much more control in workload balancing, and also be able to more accurately measure productivity and performance by utilizing task management reports. This model will encourage teamwork, as each member of

TABLE 3 Cases vs. Tasks						
	% of FTE	April 2014 Total Cases	April 2014 RRR's Due	April 2014 GA QR7's Due		
EW II	0.8	260	11	102		
EW Specialist A	1.0	325	6	92		
EW Specialist B	1.0	327	3	116		
EW Specialist C	1.0	325	8	112		

the case maintenance team will play an important role in servicing all ongoing GA clients.

Fiscal Impacts

The GA program in Contra Costa County is 100% county funded. As a result, it is critical that the fiscal impacts of any proposed redesign of the program are explored in depth. The fiscal impacts to implement this model are minimal. Contra Costa County can utilize its existing technology in order to transition to a task based GA program. Currently, Contra Costa County is utilizing the Northwoods Compass program for its document management system. The tasks module in Northwoods Compass is being utilized by the Medi-Cal Service Center to assign and track tasks. Systems analysts have already developed reports for the Medi-Cal Service Center that can be utilized to track productivity and performance. While the out of pocket cost to the county is negligible, the return on investment is dramatic with an increase in staff morale, improved customer service, and the ability to better monitor performance that will reduce casework errors and potential overpayments.

Proposed Action Steps

In order to successfully implement any significant change in an organization, proper planning and buy-in from affected staff is critical. The following proposed action steps will help ensure successful implementation:

- Open communication with staff through all steps of development and implementation. Ensure that communication flows freely through all levels of staff and management.
- Involve affected staff and labor representation in workgroups formed to develop and implement the new plan.

- Ensure that questions or concerns are addressed as the project progresses.
- Identify the various tasks associated with ongoing case management in the GA program. Utilize IT reports as well as staff surveys to ensure that client and non-client triggered tasks are captured. All tasks should be weighted based on the amount of time needed to complete tasks.

Conclusion

By restructuring the workload management processes in the GA program, it will be possible to create an environment that fosters teamwork amongst staff and supervisors. It will also allow Contra Costa County to provide its clients with higher quality and more efficient customer service as it supports the indigent population and assists them as they move toward independence and self-sufficiency.

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