

COVID-19 Reflection: A Look at San Francisco's Human Services Agency

EVELYN REYES

EXECUTIVE SUMMARY

As COVID-19 continues to wreak havoc in communities all across America, local governments will continue to grapple with the massive disruptions experienced in their communities. Though the future is still uncertain, lessons and opportunities for change have already emerged. San Francisco's Human Services Agency has executed an effective response to the COVID-19 pandemic. Moving forward, however, will require thoughtful reflection on the challenges and opportunities ahead. This

reflection piece aims to offer a window into that ongoing discussion by examining issues around racial equity, budgetary constraints, and telework challenges. Opportunities for racial equity solutions, restructure and redesign of current service delivery models, and leadership solutions are also discussed. Local governments everywhere have the opportunity to achieve a large-scale transformation during this period of turmoil.

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Introduction

Unraveling a common understanding of socio-economic prosperity, the official declaration of a state of emergency signaled acceptance that the COVID-19 pandemic one had hoped to only read about in international news was in our community, and, with it, unimaginable disruption. San Francisco, one of the first California counties to declare a state of emergency, quickly emerged as a leader in strategizing a successful response to the pandemic. Mayor London Breed's early decisions on social distancing and shelter-in-place orders were first viewed as overly aggressive, but quickly proved key to what is decidedly seen as a successful response. Mayor Breed's courageous leadership trickled down to the departmental executive level of San Francisco's local government structure. Actions to restrict in-person access to individuals without alternate means of communication and the swift move to a remote operations model are both examples of the level of responsiveness seen in San Francisco's leadership. These adaptations, which stemmed from an unshakable commitment to serve San Franciscans while keeping them safe, allowed the county's Human Services Agency (HSA) to respond to new and existing needs for emergency and essential services effectively. While the months that have followed have been plagued with uncertainty and countless challenges, San Francisco County's HSA and many other local government agencies throughout the Bay Area have stepped up and proven to be the lifeline keeping our most vulnerable individuals and communities afloat.

What follows in this report is a reflection on the COVID-19 pandemic from a unique position that is

close enough to the frontlines to witness the impacts of the global pandemic on ground operations, with the benefit of access to a high-level view. This reflection piece aims to unpack some of the big challenges county governments face as the threat of the pandemic evolves and to identify opportunities that can help HSA emerge as a more effective and innovative organization.

The Impact of COVID-19

All throughout the United States, communities of color continue to bear the brunt of today's pandemic, with disproportionate infection and mortality rates. The Bay Area region is no exception to this trend. The Latinx community accounts for approximately 15% of the population in San Francisco but more than 50% of confirmed COVID-19 cases. Although no single factor alone is responsible for the alarming racial disparities seen everywhere in the U.S., it is clear that decades of both explicit and implicit systemic biases have greatly contributed to the social crisis unmasked by COVID-19. To move forward with "race-neutral" policies is to perpetuate the systemic flaws that have resulted in socio-economic and health disparities experienced by racial minorities. Local government organizations have the opportunity and the responsibility to change institutions and structures and to promote and pursue policies that advance social equity. The challenge of operationalizing racial equity is no small task, but we cannot afford to be passive about this pervasive problem.

HSA became a member of the Government Alliance on Race and Equity (GARE) in 2018. The agency has since developed a well-thought-out

framework that builds on principles of racial equity and seeks to improve hiring practices, advancement opportunities, and organizational culture. HSA is committed to continue this work through the new Office of Diversity, Equity, Inclusion, and Belonging (DEIB). The challenge for HSA is to continue its investments in racial equity solutions while speeding up the pace and expanding the scope of this work to be inclusive of current service delivery models. This endeavor must be done in a way that creates space for meaningful and deep engagement at all staffing levels. As line staff deal with increased service demands, the agency will have to pursue creative solutions to provide platforms for staff to engage in educational opportunities, discussions, planning, and implementation of racial equity solutions. This process will empower staff to become active agents in the operationalization of racial equity and will ultimately translate into long-lasting changes to our institutions and structures. The challenge is to dive deep and go beyond the surface.

In the long list of challenges from today's growing pandemic, shrinking budgets and growing demands for social services rank among the top. Although California's June 14.9% unemployment rates saw a reduction from April's historic numbers, state and local government jobs continued to experience losses over the month of June (-95,800). This trend is unlikely to change as local governments across the state implement hiring freezes to prepare for what has the potential to be a multi-year recession. The economy is likely to experience upward and downward swings until the virus threat is under control. State and local governments will likely deal with the economic impact of this recession for a few years. In part, this prediction is due to the current instability of county and state revenue sources that support critical services. As federal stimulus unemployment benefits and other relief measures dwindle, a reduction in spending power will further destabilize state and local economies.

California's final 2020-21 budget fortunately did not include the deep cuts originally proposed to social services in the Governor's May revise.

However, it should be noted that the budget remains dependent on approximately \$14 billion in federal COVID-19 response funds. The budget includes trigger mechanisms put in place in the event that federal funds do not materialize. Although these triggers are not centered on cuts to HSA's biggest programs, an unsustainable deficit will eventually trickle down to the local level. Programs and services that rely on county funding may be the first to experience the impact of the current recession. The reality of today is that there is as much uncertainty on the impact of COVID-19 on the fiscal health of local economies as much as there is uncertainty on its impact on the physical health of our communities. HSA and other local government agencies across California face the challenge of maintaining the current workforce, while being ready to meet and sustain the steady increase in demands for social services. Much like the private sector, local governments will have to rely on innovation to overcome today's economic challenges.

Innovative telecommuting solutions are responsible for allowing HSA to effectively address the first two phases of the pandemic: readiness and response. The move to remote operations for HSA almost seemed rehearsed, as hundreds of employees went home and within two short weeks were ready to serve San Franciscans during a period of crisis and uncertainty. HSA's telework move will undoubtedly be praised for years to come; however, the transition has not been free of challenges. As issues emerged in the early pandemic days, staff at all levels quickly identified and implemented creative solutions to solve the many technical challenges that arose due to non-existent telework business processes and a lack of office equipment. Although solutions to technical issues are now mostly under control, complex issues like the ones described below persist and threaten the long-term success of telework.

HSA employees continued their work from their homes and put their own fears and anxieties aside to serve the community, despite countless disruptions and uncertainty caused by the pandemic. As the sense of immediate crisis subsides, employees

everywhere have begun to feel the pandemic's toll on their mental health. Many are left feeling overextended and stressed, as uncertainty continues to linger. Organizations must make investments in the mental health of their employees, as business needs cannot be met by an overly stressed workforce. Outside of pandemic stressors, research shows that though telecommuting has positive impacts on productivity, reduced absenteeism, and increased retention, the downside is that employees may experience professional isolation and decreased opportunities for advancement. The challenge, then, is keeping staff engaged and connected to the mission and core values of the agency, while creating solid virtual visibility platforms that help staff feel secure, connected, and empowered. The solutions to these complex challenges may be costly. However, telecommuting will continue to play a significant role in the operations of most organizations.

HSA's coordinated response efforts to the COVID-19 pandemic have aimed to be relevant and responsive to the diverse needs of San Franciscans. As we move forward, it is crucial that we do not settle into a reactive pattern and instead help move our community toward renewal and recovery. To achieve this, San Francisco County's HSA will need to cultivate opportunities for innovation. Below are some recommendations based on this short reflection.

Solutions for Diving Deeper into Racial Equity

- *Promote engagement through education.* To transform our organization successfully, we must seek meaningful engagement from staff at all levels. We have to acknowledge that all individuals have biases, and we must discuss these biases' cumulative impact on how we serve and interact with the public. One way of doing this analysis is by providing opportunities for ongoing, mandatory all-staff training on issues and solutions of racial equity, as well as issues of implicit bias.
- *Examine the service delivery model through a racial equity lens.* One way to achieve this goal is by undertaking data mining efforts to

understand how different racial groups access county services and whether denial or discontinuance of services impacts certain groups more than others. This research should help lead any strategic efforts for advancing racial equity. An example of data mining for the purpose of racial equity is analysis of lobby visits by race/ethnicity. If one group is found to be more reliant on in-person services, the department would want to readjust its benefits provision strategy so that ongoing lobby closures do not disproportionately affect certain race groups. The same type of analysis can be conducted with work and reporting requirements. The bottom line is the critical importance of diving deeper and readjusting how services are delivered based on the constraints and needs of individual racial groups.

Solutions for Greater Efficiency through Restructure and Service Redesign

- *Enhance the Call Service Center customer experience.* As shelter-in-place orders and social distance protocols continue to be enforced, counties will have to rely on online and telephonic systems as ways to interact with and deliver services to clients. This forced shift poses a great opportunity for organizations to assess and improve their telephonic customer service models. A good starting point for HSA would be to implement customer experience surveys, to be made available and accessible to all callers. Customer feedback can be a great tool in redesigning a service model that best meets the needs of San Franciscans. Additionally, HSA should conduct in-depth analysis on client phone activity/interaction, with a focus on identifying unnecessary call volume that stems from unresolved issues. Research indicates that the best way to lower phone volume is to serve each customer completely from the first contact. As service demands increase and early pandemic response resources shrink, it is crucial to actively seek ways to reduce unnecessary workload. The

“one and done” model can help provide a better experience for customers and has great potential for creating greater efficiency for staff.

- ***Develop a telecommuting/mobile service model.*** Telework technology has proven crucial in ensuring business continuity during the pandemic. In addition to the job stability it offers, as well as other benefits identified in the sections above, telecommuting could potentially be a powerful tool as organizations deal with ongoing fiscal constraints. The pandemic presents an opportunity for local governments to move away from outdated models where clients have to seek services in one location and where all staff are housed onsite. Adopting a long-term telecommuting model could potentially bring significant savings in both office space and utilities expenditures. The benefits of telecommuting can also be maximized by adopting a mobile service delivery model, where instead of waiting for clients to come to an office, service providers go to them. This shift can be done in partnership with the robust network of community-based organizations (CBOs) in San Francisco County. HSA can identify where services are needed with the use of heat maps and deploy staff accordingly. This proactive model of service delivery has the potential of reducing churn which can also translate into administrative cost savings.
- ***Engage the “Universal Worker” model.*** Prior to the pandemic, movement towards a “universal worker” model was well underway at HSA. The “universal worker model” is a client-centered approach that removes barriers to important benefits by serving clients in a more holistic way. In addition to enhancing accessibility to crucial services, this model allows counties to tap into a more diverse funding stream and reduces administrative costs by eliminating duplication of efforts. It should come as no surprise that the pandemic has put these plans on a temporary hiatus, as the investments needed for a change of this magnitude can be multi-year and very costly.

In light of these constraints, HSA should opt for a gradual transition and should leverage existing processes as a way to move forward during what is likely to be a period of economic downturn. Tapping into existing frameworks that combine intake activities and expanding those processes to be inclusive of case maintenance functions can offer increased efficiency and elimination of duplicate workload without the cost of a massive overhaul. In a time of economic turmoil, seeking and implementing more efficient delivery models is the best way to continue to serve all clients while also protecting the labor force.

- ***Center the “Relational Leader” as a key player.*** Now more than ever, there is a need to grow and nurture leaders at all levels throughout the organization. As telecommuting continues to be the framework for service delivery, there is less need for authoritative leadership styles that focus on monitoring daily activities instead of outcomes. In a telecommuting world where the need for connection and visibility is inherent, the relational leader emerges as the glue keeping the organization together. Through an open communication style, a relational leader creates a sense of connection and security and works to advance the organization’s mission and goals through team-focused efforts. A relational leader integrates the needs of the business with the needs of the workforce while encouraging innovation. While there are advantages to various leadership styles, in times of high stress and uncertainty, the relational leadership model has the qualities to help HSA emerge as a united, efficient, and innovative organization. HSA should promote relational leadership educational opportunities and virtual reflection forums to help equip all supervisors with management and leadership techniques that are relevant to today’s challenges.

There is no doubt that the COVID-19 pandemic has caused vast disruption in all communities. However,

this crisis also brings a myriad of opportunities that can help the department better meet the needs of all San Franciscans. As I conclude this reflection, I feel hopeful and confident that HSA will continue to innovate, strategize, and advocate for San Francisco's most vulnerable community members. Renewal and recovery are on the horizon, and I look forward to being part of the efforts that help bring restoration to our communities.

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