# Santa Clara County's CalWORKs Behavioral Health Screening

## Норе Намву

## **EXECUTIVE SUMMARY**

This case study shows how Santa Clara County has taken a proactive approach in providing Cal-WORKs clients with behavioral health services by screening them during orientation for substance abuse, mental health and domestic violence issues. The screenings are completed by a provider with Health Alliance. CalWORKs Community Health Alliance which is a partnership between Santa Clara County Social Services Agency (SSA) and Santa Clara Valley Health and Hospital Systems' Department of Alcohol and Drugs (DADS) and Department of Mental Health.

Due to flexibility given to counties by the legislature during fiscal year 2012, Santa Clara Social Services Agency moved \$1.7 million from the Health

Alliance to other CalWORKs activities. In order to bridge service gaps to clients, the Department of Mental Health recommended moving Health Alliance contracts from the DADS to the Mental Health Department. Screening at the Welfare to Work orientations continued and they were able to maintain treatment capacity by the Mental Health Department funding Healthy Alliance outpatient programs with unexpended Mental Health Services Act/Prevention and Early Intervention funds and Medi-Cal revenue.

The purpose of this study was to gain insight into how county departments partner with each other to engage clients in behavioral health services so that they can become self-sufficient.

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#### Introduction

Sonoma County is continually looking for new strategies to improve client engagement in Welfare to Work (WTW) services in an effort to improve its CalWORKs work participation rate (WPR). Mental health, substance abuse and domestic violence issues interfere with clients ability to participate as required by the Deficit Reduction Act of 2005 (DRA). The DRA brought stringent federal work participation requirements, defined work activities, developed rules on how to document, track and verify hours of participation. As a result of DRA, a renewed focus on the CalWORKs program being a "work first" model occurred. California's 2011/2012 budget crisis brought huge CalWORKs program changes that:

- Reduced aided CalWORKs adults' 60-month time clock to 48 months.
- Reduced the earned-income disregard, causing families to come off of aid quicker.
- Cut cash assistance 8% reducing grants to approximately the same level as they were in 1987.
- Reduced funding for CalWORKs employment services and child care.

These cuts make it even more difficult for counties to engage clients who face mental health, substance abuse and domestic violence issues and allow them the time it takes to work through barriers. This study shows how partnerships between agencies and the community can work together to provide quality services to assist clients in overcoming barriers so they can become employed and self-sufficient.

## **History**

The CalWORKs Community Health Alliance is a partnership between Santa Clara County Social Services Agency (SSA) and Santa Clara Valley Health and Hospital Systems' Department of Alcohol and Drugs (DADS) and Department of Mental Health. Health Alliance provides individualized counseling and other services to assist clients in overcoming substance abuse, mental health and domestic violence problems which prevent them from obtaining and retaining employment and self-sufficiency. The Cal-WORKs Employment Services (CWES) Intake office first piloted upfront Behavioral Health Screening to clients attending a WTW Orientation in the summer of 2008, based on a model developed by San Diego County. Fiscal year 2012 is the third year in which the screenings continue at the main CWES site on Senter Road, as well as the North and South county sites. Screening is offered in English, Spanish and Vietnamese.

## **Model Design**

All mandatory and voluntary wtw clients are required to attend an orientation and appraisal to review program requirements and services available. The first part of the orientation is a presentation given by CWES staff members who review an intake packet and the wtw Rights and Responsibilities along with explaining program requirements and activities available. The second part of the orientation is comprised of 5-10 minute presentations conducted by:

- Health Alliance
- Social Work Services
- Employment Connections

The presentations explain the services offered. All the presentations, including the first part of the orientation given by CWES staff, are engaging and provide clients with enough information to make an educated decision on whether or not the service would be helpful and to explain what an Employment Counselor would cover in the follow up interactive face-to-face appraisal interview. Clients are asking and answering questions throughout the orientation. Towards the end of the presentation clients are called out of the room for the Health Alliance screening.

Health Alliance service providers conduct individual screenings to identify alcohol, drug abuse, mental health and domestic violence issues. The goal is to highlight any barriers at the start of the client's enrollment in order to encourage clients to take the necessary steps to help them succeed and become self-sufficient. Providers use a brief client questionnaire as the screening tool which asks questions regarding emotional well-being, personal and physical safety, drug and alcohol use, and gambling issues. The tool is a guide for providers to use during a 5-10 minute screening. A few cases may take longer if domestic abuse or acute emotional distress presents itself. Clients who have mental health and/or substance abuse issues and want counseling are given an intake appointment with the provider agency of their choice. Clients with urgent issues, such as domestic violence or suicidal thoughts, are offered same or next day intake appointments and/or referrals to the Social Work Unit.

Health Alliance screenings are proving successful with approximately 96% of the clients at orientation (as of May 2011) being seen. Approximately 22% of the clients are being referred for a behavioral health intake appointment. February 2012 data shows 98% of clients screened and 24% referred for an intake appointment.

## **Partnership in Action**

Health Alliance provides individualized counseling and other services to support self-sufficiency by looking at a client's well-being, relationship issues,

mental health issues, family stress, trauma and abuse, psychosocial functioning and substance abuse issues. Services include outpatient services, transitional housing, residential treatment for women with children and psychiatric services. Referrals to Healthy Alliance providers can happen at any time if clients request it, even if they decline services during their orientation screening. Education and training site staff, community-based partners and other agencies working with clients may directly refer out to Healthy Alliance for services. Providers are able to communicate with the SSA Employment Counselor if the client signs a release of information. Clients may integrate their Health Alliance activities into their WTW plan if they have given the Employment Counselor permission to coordinate participation with the Healthy Alliance provider. Verification of attendance is sent monthly to the CWES Employment Counselor by the provider. Clients are allowed to continue receiving treatment with providers even if permission is not given to communicate with their Employment Counselor as long as they remain eligible for WTW services. Clients who are no longer eligible for services may be transitioned to a non-Health Alliance provider.

Healthy Alliance providers are located at various co-location sites throughout the county which allows clients to have easy access to services. Besides being located at county CalWORKs Employment Services offices, they are also located at adult education sites and community colleges.

## **Partnerships Bridging Budgeting Gaps**

The state budget for fiscal year 2012 gave counties the option of using CalWORKs Mental Health services money in other areas of the WTW program. Santa Clara Social Services Agency moved \$1.7 million from the Health Alliance to other CalWORKs activities. In order to bridge the potential service gaps to clients, the Department of Mental Health recommended moving Health Alliance contracts from the Department of Alcohol and Drug Services (DADS) to the Mental Health Department. They were able to maintain treatment capacity by the Mental Health

Department funding Healthy Alliance outpatient programs with unexpended Mental Health Services Act/Prevention and Early Intervention funds and Medi-cal revenue. Health Alliance service providers who did not have experience billing Medi-Cal had to learn how to bill the county's Short-Doyle/Medi-Cal Program. Providers proved to be dedicated to the system as they learned how the new billing worked as it is much more complicated than billing CalWORKs. Due to the dedicated staff and providers, client services were not disrupted which included the screenings done at the WTW Orientation. Under the new billing system Health Alliance providers do not get reimbursed for time spent at the orientation. However, they remain committed to bringing clients in for behavioral health services to address issues that prevent them from self-sufficiency.

## **Client Satisfaction**

According to the Annual Report for the CalWORKs Health Alliance (FY 2011) clients are highly satisfied with services received:

- 70% of the ongoing active client population (as of May 2011) completed and turned in surveys.
- 96% of the client surveys state they are getting the counseling services they need.
- 82% of surveyed clients say the services positively impact their WTW participation.
- 89% of surveyed clients responded that they were able to conveniently access counseling services.
- 98% responded positively that they feel comfortable with their counselor.

## **Conclusions**

What does this mean for Sonoma County? The SonomaWORKS wtw orientation is included in the eligibility orientation. Clients attending may be new to SonomaWORKS/CalWORKs or they are being scheduled to come into the wtw program because an exemption ended. The reason behind combining the orientation with eligibility is that clients are generally scheduled into their first activity within 1-2 weeks of being approved for CalWORKs since they were appraised for wtw during their

initial interview. Orientation presenters are enthusiastic about the WTW program and what it has to offer. Clients leave the orientation ready to participate which in turns motivates them to turn in needed paperwork to approve cash assistance. The downside is that some clients are in crisis and are worried about getting their cash assistance started and are not paying attention to the WTW portion of the orientation.

SonomaWORKS Employment & Training Counselors (ETC) refer and schedule clients to mental health and/or substance abuse services when it is determined there is a barrier to the client finding and retaining employment and ultimately becoming self-sufficient. ETCs are assigned as the WTW worker when the client is scheduled into job search or when they come in for an assessment. Behavioral health providers are onsite at the SonomaWORKS office. At this time, there are 1.75 full-time mental health staff, 1.75 full-time substance abuse staff and a .10 psychiatrist position on site. Another 1.35 fulltime position is being added for mental health services in the upcoming months which will includes a .25 Spanish-speaking mental health provider. SonomaWORKS does not consistently have a Spanish-speaking behavioral health provider onsite as it depends on availability. Recommendations that a client may need services can come from any Sonoma-WORKS staff or partners; however, the decision to make a referral for actual services comes from the ETC. Substance abuse clients are referred for services to other partner agencies depending on the client need and funding available. Mental health counseling and possible medication needs are handled by the onsite providers.

Due to the difference in service models it is not currently recommended that Sonoma County implement the behavioral health screening at this time. However, the following is recommended:

There should be a pilot run of a separate wTw orientation for clients, or combining it with the current Success Workshop. Success Workshop prepares clients for upcoming activities by helping them develop goals, learn about career exploration, and develop strategies on working

through daily barriers that may hinder participation. Clients who attend Success Workshops are highly satisfied; however, since clients are not mandated to attend the show rate is low. Combining it with orientation would ensure attendance as it would become mandatory. During orientation bring in a behavioral health provider and the domestic abuse advocate explaining the services available. A job search employee should also attend who can engage clients in their upcoming job search activities and inform them on what to expect, with a clear message being sent that employment is the focus of the program. One of the many impressive aspects with Santa Clara's orientation is the use of a Job Club presenter who can engage the audience on how to prepare and interview for a job.

- Once a new orientation is in place, Santa Clara's behavioral health model should be piloted since identifying barriers to employment and selfsufficiency upfront is becoming more and more critical as regulations change, decreasing the client's time on assistance. This pilot should result in little to no fiscal impact to the budget.
- There should be an update of the MOU for Mental Health and Alcohol and Drug Services through the Department of Health requesting that a Spanish-speaking provider be available for appointments year round. If there is no one available to be onsite at SonomaWORKS, it is suggested that they contract with a provider in the community to assist clients offsite. Currently when there is no Spanish-speaking provider available onsite, and the ETC has to translate during a meeting with a provider to get the client help. Adjustments may need to be made in the budget provided by Department of Health.
- Sonoma County should share the innovative budgeting solution of billing Medi-Cal for Cal-WORKs mental health counseling that is occurring in Santa Clara County. A SonomaWORKS provider's time could be freed up if clients who need long-term counseling are referred to an outside agency even while they are receiving

CalWORKs wTw services. Providers would then be available for orientation presentations, behavioral health screenings and to teach additional workshops as needed.

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#### Resources

County of Santa Clara FY 2012 Final Budget http://www.sccgov.org/sites/scc/countygovernment/Documents/County\_Budget\_FY\_2012\_Final\_Budget.pdf

Annual Report for the CalWORKs Health Alliance Fiscal Year 2011 http://www.sccgov.org/keyboard/attachments/Committee%20
Agenda/2011/November%209,%202011/
203364684/TMPKeyboard203707964.pdf

Santa Clara County Social Service Agency Employment Services Annual Report 2011—Received in Welcome Packet from Denise Boland & staff

Health Alliance Behavior Health Screening Report through 2/2012 – Received from Joel Robinson, Health Care Analyst II, CalWORKs Health Alliance

- ssa CalWORKs Employment Services Policy Handbook – 41 Health Alliance section
- CDSS ACL II-29 http://www.dss.cahwnet.gov/ lettersnotices/entres/getinfo/acl/2011/11-29.pdf
- CDSS ACL 12-16 http://www.dss.cahwnet.gov/ lettersnotices/entres/getinfo/acl/2012/12-16.pdf
- CalWORKs Policy and Practice Brief Number 1:
  April 2002—http://www.cimh.org/downloads/
  CalWORKSNo1.pdf