Launching a Family-Centered, Neighborhood-Based Human Services System

Katherine L. Armstrong DPH

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Launching a Family-Centered, Neighborhood-Based Human Services System: Lessons from Working the Hallways and Street Corners

Katherine L. Armstrong, DPH

SUMMARY. The author describes Contra Costa County's efforts to implement Healthy Families 2000, the County's vision of neighborhood-based, family-centered, comprehensive integrated services in two of the county's unincorporated areas, North Richmond and Bay Point. Contra Costa County is one of six bay area counties, northeast of San Francisco. It has nearly 800,000 residents and is home to some of the wealthiest communities in the state as well as some of the poorest neighborhoods. This article provides a systematic review of the process and a discussion of the operating practices and principles guiding Contra Costa's significant effort to change its service delivery approach, anticipating that this experience might be helpful to others as they develop a neighborhood-based human services partnership with community leaders and residents. *[Article copies available for a fee from The Haworth Document Delivery Service: 1-800-342-9678. E-mail address: getinfo@haworth.com]*

Katherine L. Armstrong is Executive Director, Zellerback Family Fund, 120 Montgomery Street, Suite 2125, San Francisco, CA 94104.

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THE PROCESS OF ORGANIZATIONAL
AND COMMUNITY CHANGE

Nearly five years ago, Contra Costa County began its long journey toward the development of neighborhood-based, family-centered services when its Board of Supervisors and the Youth Services Board (YSB), a policy making body made up of the Directors of Social Service, Probation, Health, Community Services, and the County Executive, Superintendent County of Schools, Juvenile Court Judge and children's advocates, made a commitment to translating the county's successful Inter-Agency Family Preservation Program into system-wide change. The county's access with Family Preservation taught a number of valuable lessons. Through an inter-agency commitment to families it had prevented out-of-home placements, reduced foster care costs, and helped improve the family life of participants. The county now had tangible evidence that concentrating on the entire family, engaging families as active partners, and assisting families within the context of the community resulted in better functioning families and cost savings. Just as significant as these improvements, the county had learned that Social Services, Health Services, Probation, and Community Services could work together successfully when presented with a common goal, a unified structure for delivering services, and a mandated reporting of results.

Much of the success of this undertaking can be attributed to the fact that both the Board of Supervisors and the Youth Services Board were committed to creating a human services system that was community-based, family-centered, comprehensive, and involved inter-agency collaboration. All involved were committed to improving the well-being of the county's children and their families and preventing the costly family crises which now absorbed most of the county's resources and attention.

A consultant was hired for a three-year period to assist the YSB realize this goal of strengthening families. During the next three-and-a-half years the consultant:

- drafted the vision statement and strategic plan, obtained feedback, made necessary improvements, and communicated the vision to every significant group in the county;
- staffed and directed the work of the YSB and its newly created inter-agency managerial planning body, the Service Integration Management Team (SIMT), in carrying out the day-to-day work of designing and implementing community-based service integration;
- completed the analysis needed to select the key neighborhoods for development;

- engaged and motivated neighborhood residents, leaders, and community agencies in the two communities selected for piloting the new system of services;
- participated in extensive negotiations with unions, agency staff, and community-based organizations;
- helped develop the programmatic and physical infrastructure for relocating inter-agency, integrated services into the neighborhoods;
- consulted on the development of a proposal to become an AB-1741 service integration pilot county, the state's fast track for state waivers; and
- assisted with training and staff development issues.

Developing a Vision and Strategic Plan

The YSB faced the daunting challenge of determining how to decentralize county-wide services into a neighborhood-based service delivery system while confined within a rigid web of state and Federal regulations and categorical funding. In addition, YSB members were preoccupied with making severe budget cuts. In this environment, it was important to carve out a change process that allowed for risk-taking, and gave staff time to learn from mistakes, but also imposed as little disruption as possible on the entire human service system.

The first step was to create a unified vision, agree on a set of operating principles and draft a strategic plan. This process took a year and entailed intensive communication and collaboration with staff at many levels within each of the County Departments of Social Services, Health, Probation, Community Services, and the Juvenile Court, the schools, community groups, and children's advocates.

YSB members soon agreed that the development of neighborhood-based, family-centered, integrated services should be targeted to those communities with the highest number of residents living in poverty, and to neighborhoods in which there lived a significant number of clients known to three or more departments or receiving at least four different services. Members decided to pilot this new approach in the identified high risk neighborhoods that also had community leaders receptive and willing to form partnerships with the county.

The process for targeting communities included a data match of the client files from Social Services, Health Services and Probation. Through a geographical mapping of the data match findings, the YSB identified nine neighborhoods where service utilization was greatest, where there lived a large number of families using four or more services of the departments of Social Services (Child Welfare and Income Maintenance) Health,

and Probation. High on the list of the nine eligible communities were the
county's unincorporated areas of North Richmond and Bay Point/West
Pittsburgh. The population characteristics of these unincorporated areas
reflected many high risk factors (for example, 50% of residents have not
graduated from high school, 34% are unemployed, a high number of chil-
dren are in kinship foster care, the immunization rate is lower than average,
and the infant mortality and morbidity rates are higher than average).

Fortuitously, at the same time the Board of Supervisors and the YSB
were completing the strategic plan and finishing up the analysis of the
county's service utilization, both North Richmond and Bay Point commu-
nity members were beginning to organize. Leaders from these communi-
ties had recently approached the Board of Supervisors demanding changes
in the way all services (including police, transportation, and employment)
were delivered to their residents. This new pressure on the board to dra-
matically change the way services were provided to these two neighbor-
hoods influenced the YSB to choose North Richmond and Bay Point for
its first two pilot service integration centers.

Learning About the Neighborhoods and Engaging Residents

One of the key operating principles guiding the service integration effort
was a commitment to design the neighborhood services system to meet the
needs of families and residents. This required an extensive needs assess-
ment of the communities and establishing new opportunities to hear from
clients and residents about what they needed and wanted. The vehicle
chosen for this endeavor was to join with the local schools to apply for a
California State Department Healthy Start planning grant. The Healthy
Start Program, begun in 1991, provides funding to schools with a large
percentage of students living in poverty to work partnership with parents,
county, city and community based organizations to improve the health and
educational performance of their students. With funding obtained via
Healthy Start, both North Richmond and Bay Point conducted focus
groups, interviews, and town meetings, and completed a resource mapping
of the available services, programs, and strengths in the community. The
Healthy Start planning process brought many people to the table for the
first time and started the dialogue among parents, community-based orga-
nizations, schools, and county services about community needs.

During the next year, as the Healthy Start planning effort was under
way, North Richmond residents successfully advocated for the creation of
a local governance structure, the Municipal Advisory Council (MAC), that
reported directly to the Board of Supervisors. Community leaders now had
a means to advocate for more access to and accountability from the Board

about how county services were delivered in their neighborhood. The North Richmond MAC developed its own strategic plan, incorporating the results from the Healthy Start needs assessment as well as findings from their systematic review of county-delivered services in the community. The North Richmond MAC leadership worked closely with the consultant and county staff guiding the process of county service integration for the North Richmond community. With support from the Zellerbach Family Fund, the MAC was able to fund their own priority projects and hire local people to deliver the programs. In the Bay Point community, a MAC had been authorized during the previous year and a MAC council member was involved with the Healthy Start needs assessment planning process and service integration planning and implementation.

YSB's motivation to improve local access to services and the new grassroots pressure placed on the Board of Supervisors created the needed tension and catalyst to spark dialogue ensured that the system changes were responsive to clients and families who lived in the neighborhoods. The consultant helped establish a mutually supportive and interactive process that allowed community building efforts to proceed independently, but in relationship to the extensive, internal department-level planning required before any services could actually move from central offices to the neighborhood or shift from categorical services to a family-centered and holistic approach.

Negotiating with Staff

Preparing staff for work in the new neighborhood-based, family-centered, service integration teams had two stages. The first stage involved staff selection and training, including:

- deciding what programs and staff, in what combinations, would be located in the neighborhoods;
- developing new job descriptions and determining how staff would be supervised and managed;
- drafting a training curriculum;
- gaining union support; and
- recruiting and selecting staff.

The second stage began immediately after all staff members had been selected, trained and located in the neighborhood centers. This stage required a reassessment and modification of everything that had been decided and begun during the first stage. A range of unanticipated conflicts emerged when staff were transferred from categorical programs, with no

history of working together, into new teams responsible for serving the same clients and community.

Language was a huge problem. Workers used similar words, but the same word often had completely different meanings to the social worker, the eligibility worker, the public health nurse, the probation officer and the substance abuse counselor. It took some time together before the team members realized that they were all using different definitions, and even longer to develop common language and definitions of "family-centered, community-based, comprehensive, inter-agency case management," "community involvement," and "partnerships."

Personnel had difficulty respecting each other's work. Tension ran high between disciplines as they struggled with each other in forming a common approach to clients and their needs. Categorical rules and regulations continued to obstruct team relations and cause daily frustration. Departments found it challenging to cope with members of their own staff who were now functioning very differently from their mainstream workers. Turf issues among service providers remained at the heart of every discussion.

Contra Costa County staff struggled with the notion of self-managed teams because the traditional top-down supervision and control did not fit the demand for flexibility in a decentralized service system. However, the concept of a self-managed team was very troublesome for practically everyone—unions, managers, and staff—and continues to evolve as a new form of practice with more experience and training. The county engaged in extensive union negotiation for at least six months before the teams were recruited and selected, and union negotiations continue to be a key aspect of the implementation process. Union members participate in the SIMT and are among the staff operating in the two neighborhood centers. Five different unions were involved in negotiations about every operational issue and assignment of work tasks. Individual unions had concerns which dealt primarily with their own membership; thus, complying with one union's request sometimes placed management in conflict with another union. Management's responsibility was to help everyone reach some consensus before operations could proceed. Many of the initial discussions revolved around issues of safety, workload, and people working outside of existing job classifications. Together, labor and management worked through the design of the management information system, site selection and renovation, site configuration, job descriptions, confidentiality, training, staff development, and how the self-managed team concept would work.

The multitude of day-to-day frustrations quickly became serious obstacles to changing service delivery, raising many reasons to question the

whole concept of neighborhood-based service integration. Commitment had to be constantly articulated and communicated by the Board of Supervisors, the YSB, and the County Administrator to all participants to keep everyone on track and moving through these difficulties. This was a top-down change process, but many at every level wanted the same changes. Throughout the entire process, participants continued to struggle with a simple fact: while most of us are in favor of making improvements, few like to make changes in their own world; almost all of us prefer that someone else do the changing.

Negotiating with the State

At the same time the SIMT was working through the operational issues, a study was completed which documented a list of state and federal waivers needed to blend categorical funding streams and redirect staff time from paperwork into prevention activities. This in-depth analysis of departmental operations documented how clients moved through the programs, from intake through exit, noting non-productive activities and requirements imposed on the departments. The county applied for and obtained AB-1741 status, which allowed five county pilots to receive waivers needed to support service integration.

Negotiating with Community Representatives

There were two key aspects to team members' work with communities. One involved establishing new kinds of relationships with the center's new clients, those who receive direct services from the team members. The other aspect required establishing a positive working relationship between the team and the community as a whole. This meant working with the MACs and with the Healthy Start Program as well as other community groups and representatives. This was a new experience for staff and involved considerable on the job learning and experimentation.

Staff were able to establish new positive relationships with their clients more easily than developing a community-wide perspective necessary to build constructive neighborhood relationships. All client participation in the neighborhood centers was voluntary. Team members had to go door-to-door and persuade clients to transfer their cases from the central office to the neighborhood center. This dramatically changed the relationship between workers and clients and set the stage for the kind of individualized attention clients are now receiving. Because workers had to persuade their clients to join the center, staff members felt very responsible for

adapting services to better meet client needs, and they assertively advocated with department management to change rigid policies and procedures that affect client services.

While the county engaged in restructuring, re-configuring and dealing with internal issues, the neighborhood representatives were becoming more organized and began advocating for specific service priorities: jobs, increased public safety, and increased after school recreation. There was ongoing tension between what the community viewed as its primary needs and what the county could actually provide under existing categorical funding until the waivers were approved.

The teams continue to learn how to work with neighborhood leadership. Turf struggles exist in the neighborhoods and it is not always clear who is speaking for whom. It is not uncommon to find significant disagreements among neighborhood groups about what is best for the community. Staff have found that the best methods for adapting to community work involve patience, perseverance and relationship-building.

PRACTICE PRINCIPLES FOR MANAGING ORGANIZATIONAL AND COMMUNITY CHANGE

The management principles that impact leaders in the process of change center on four broad tasks—making a personal commitment, re-defining ourselves and our roles, planning for implementation, and moving from planning to action.

Making a Personal Commitment

Implementing a new vision of human services is time-consuming, tedious, and hard work, but not impossible. It requires a personal investment in converting the existing set of mandated department activities into a transforming vision. There usually is broad consensus about the merit of a family centered, neighborhood-based strategy. However, if one lacks passion and the necessary energy, it is impossible to move through the overwhelming inertia that exists in the public sector or to cope with the multiple roadblocks and barriers faced at every turn. Directors of Departments of Social Services interested in promoting family-centered, neighborhood human services should consider the following soul-searching questions:

- Does the vision of a family-centered, neighborhood human service system truly reflect our own vision of the ideal?

- Do we really believe that this vision, if implemented, will make the difference in the lives of our clients, workers and the community?
- Is this a good time to handle the increased responsibilities associated with the needed changes?
- Are we prepared to deal with the inertia, ingrained practices and the resistance we will uncover as we try to change ourselves and our department's practice?
- Are we willing to devote the necessary attention to managing change while handling the ongoing pressures imposed on us by the state or county?
- Are we willing to invest the effort to learn new habits and competencies related to:

  - re-engineering techniques and entrepreneurial approaches;
  - communications, public relations, public education;
  - organizational development processes;
  - motivating and engaging clients as partners;
  - identifying and working with strengths; supporting self sufficiency and responsibility;
  - worker self management/decentralized decision making and community governance?

Individuals usually come to the point of implementing a vision because they are "called" and are compelled to do whatever is required to make it happen. For example, one director became committed to such a vision after a soul searching and an "up close look" at the daily operation of his department. His beliefs about how staff and clients should be treated were so different from the way they were being treated that he had to change the department or give up his career.

Redefining Ourselves and Our Roles

A second major decision involves determining how we personally will participate in day-to-day change efforts and how involved we will be in overseeing the efforts required to transform our departments. For example, will we be out front, highly visible and attached to this effort? Or, will we delegate this responsibility to a high level person who can handle the day to day planning, communicating, and implementing and provide the support necessary for success?

Most directors of social service departments are so busy that they have few opportunities to observe how their departments are working, how workers' needs are changing, and how clients are treated. Most directors

work under incredible pressures and spend much of their time on budgetary crises, smoothing relations with the Board of Supervisors, and coping with state and federal officials. Middle managers and their supervisors handle day-to-day operations. Even middle managers are not always clear about how their clients move from intake to termination and what services look like from the clients' perspectives.

It is essential that directors find ways to understand more fully how their organization functions, what must be changed, and how it would function if it were truly a client-centered, community-based, integrated system of support for families. This does not mean that the director needs to micro-manage the operation, but time must be spent on understanding what is going on before identifying strategic opportunities for improving service delivery. In Contra Costa County it made a big difference that two of the County Supervisors and the County Administrator were 100% invested in this endeavor and knew the details of what was going on.

Planning for Implementation

After struggling with the issues of assessing one's commitment and re-defining one's role, one can turn to the hard work of planning and preparing for the implementation requirements. The actual work of implementing the vision is akin to flying a plane while making design improvements, knitting a sweater while wearing it, or renovating a house while living in it. In order to get started, Contra Costa County found it worked best to create a neighborhood-based system of service integration within and parallel to the existing county operations. In this way a "micro world" could be created for learning and testing how to do this work. This approach is less risky than throwing the entire department into upheaval; however, one must be comfortable with operating in two different and sometimes conflicting worlds at the same time. Also, one must be vigilant that this experiment is not just another project with no tie to real policy. Everything learned must be connected to improving services county-wide or else stakeholders will lose faith.

Staff must be found within the department that can work on two interdependent efforts—that of building a new infrastructure to support neighborhood services and that of community organizing and mobilizing. An individual who is very good at action planning and program and systems design, who knows the county services and how these fragmented services must be restructured, is not always the best person to work in a community involving community residents and clients in neighborhood improvement. But, the two efforts are mutually supportive and must operate with common agreement about priorities and expected results.

There are four sets of tasks that must be addressed in this planning stage. These include: (1) developing the programmatic frameworks and infrastructure for supporting community-based work; (2) determining how to obtain active community participation and partnership; (3) creating staff "buy-in" and ensuring staff success; and (4) building intra- and inter-organization collaboration. The elements of each are noted as follows:

Program Infrastructure

- Adopting prevention-oriented service models;
- Creating a unified, coherent management information system;
- Obtaining county, state and federal waivers;
- Building a management structure for operating decentralized teams;
- Developing community-focused budgets, which reflect blended funding sources.

Community Development

- "Unlearning" the past and building trust;
- Supporting the creation of neighborhood leadership;
- Clarifying community priorities;
- Creating a local governance structure;
- Bolstering self-help and mutual assistance;
- Employing neighborhood residents;
- Directing funds to community-identified priorities.

Staff Development

- Building trust and developing vision;
- Facilitating consensus on vision and values;
- Ensuring appropriate skills and competencies.

Collaboration

- Creating partnerships between county departments;
- Forging links with local businesses, funders, civic organizations and community-based organizations.

The successful accomplishment of these tasks requires certain organizational and leadership qualities. The organization must be a "learning organization" that uses data and information to correct operations. It must be organized to learn by doing, utilizing information from the manage-

ment information system to improve day-to-day practice. In addition, the organization must replace protecting the department's image with a willingness to take risks and learn from mistakes, and it must ensure that everyone involved feels responsible for success and shares a comparable personal vision. Organizational leadership qualities that are required include "walking the talk," an ability to make and communicate decisions that are consistent with the vision. The leader must function as a cheerleader and rewarder, creating and providing incentives, as an educator, motivator, sales person and mobilizer. He or she must practice persistence, perseverance, and patience, be willing to "make it up as you go," and correct mistakes with little rancor. Most importantly, the leader must clearly and constantly communicate successes, lessons, and implications of changes as they occur.

Moving from Planning to Action

The action steps which must be undertaken to transform an existing system into a family-centered neighborhood human service system can be overwhelming. However, success can occur if all those involved work together with a well-organized action plan. Multiple activities and tasks can be carried out simultaneously and within common time frames if all agree on the operational plan for dividing up the tasks and responsibilities. For example, in Contra Costa County, the entire process from beginning to test-pilot stage took three-and-a-half years by taking small steps, one day at a time, which produced significant progress.

Figure 1 outlines elements of the four action areas that needed to come together to ensure project success. Each of these areas involved a number of specific action steps that kept the project moving forward to create an effective systems-level change. All were interactive and moved forward with overlapping time frames.

Establishing the vision involved educating and informing as well as listening and soliciting feedback at many levels within the County and the community. Participants needed to be allowed and assisted to articulate their reservations as well as their enthusiasm in order to develop and affirm their ongoing support. Developing the program infrastructure encompassed the "nuts and bolts" of program planning, while creating the community action plan and building the collaborative teams involved the promotion of strong and effective working relationships between individuals and organizations. The community action plan process required facilitating mutually-supportive working relationships between the neighborhood governance structure, schools, agencies and residents. The collaborative team building process focused on effective working relationships between

Figure 1. Project Action Steps

Establishing a Shared Vision and Agreeing on Desired Outcomes
- Obtain commitment from the Board of Supervisors, County Administrator, other department heads and school administrators;
- Educate management and staff about the strategic plan and common vision;
- Involve all relevant advisory boards, community coalitions, schools and community-based organizations;
- Assess the current operating processes for serving clients and identify elements that are inconsistent with a neighborhood-based, family-centered approach;
- Work with the state to eliminate regulations and finance systems that impede the new strategic direction.

Developing Program Infrastructure
- Select neighborhoods based upon defensible criteria;
- Assess needs and share information sharing about the new partnership;
- Develop a process for instituting local governance;
- Identify and recruit local leaders;
- Investigate funding streams;
- Develop management information systems, budgets, and management structures;
- Develop client consent and participation forms and procedures;
- Select staff;
- Begin joint training and staff development;
- Place the county service teams into the neighborhood.

Creating a Community Action Plan
- Facilitate the development of mutually-supportive working relationships between the neighborhood governance structure, schools, agencies, and residents;
- Monitor interactions to ensure movement toward a common set of program objectives and outcomes;
- Engage partners in developing the program infrastructure;
- Assist partners in developing a common community plan that specifies outcomes to be achieved, performance expectations, a monitoring process, and each partner's roles and responsibilities for achieving success.

Building Collaborative Teams
- Monitoring relationship building;
- Providing mediation and problem solving support "on-call";
- Resolving client-specific problems;
- Involving participants in training activities in the community;
- Promoting neighborhood opportunities to celebrate progress, life-cycle events, and holidays for children.

neighborhood center staff and clients and community members. A final step involved the selection of a neutral party to evaluate the efforts and communicating with all parties to improve the quality of life in the neighborhood.

These steps are only highlights of a complex process of systems change. Much of the change process involves exploring uncharted territory. Once a vision is developed and key leaders adapt it as part of their own personal quest, the journey begins; however, it has no predictable end point. Much of the progress made and speed of the change process will depend upon the process used to bring people together, the personalities of key individuals, success in focusing participants' energies on joint, positive action, and, of course, seizing unusual opportunities as they present themselves. If leaders have a great deal of energy, are passionate about this work, have good partners, and are patient and persistent, it can be done. Staff reported that working in the neighborhood Family Resource Center is the most difficult work they have ever done, but it is also the most meaningful. Over and over again staff report such comments as, "This is the first time in 16 years I actually enjoy coming to work everyday." Workers believe they are making a difference in the lives of their clients. Clients reported that they are shocked by the difference in the way they are treated. Many for the first time are served in a helpful, respectful manner.

THE CONSULTANT'S ROLE IN FACILITATING CHANGE

There are many different definitions of what a consultant is and what a consultant does. To some, a consultant is an expert who helps people clarify their intentions, helps design a process for achieving the organization's goals, and coaches everyone through an implementation process.

Each consultant also brings a value system and, in this case, a commitment to neighborhood-based, family-centered, inter-agency service integration. This involves promoting community participation in all aspects of neighborhood life and insuring that resources are distributed consistent with the needs and wants of the neighborhood.

The consultant's role changes over time in response to the presenting needs and requirements of the job. There were three phases of the work in Contra Costa County:

* The start up phase or the visioning process;
* The implementation planning and designing of a new system;
* Beginning operation of the pilot.

During the first phase, the consultant was responsible for drafting the vision, the set of operating principles and the strategic plan. The consultant was charged with gaining commitment and "buy in" from multiple agencies, levels in the organizations, communities, and decision makers. This was a full time job of motivating, communicating and listening to many different groups. During this stage, all of the disparate interests had to be brought into some form of agreement about the future. The consultant along with the YSB was identified with the effort, but it was the consultant's responsibility to keep everyone moving forward together.

Once the Board of Supervisors passed a Board Order in December 1992 mandating community-based, family-centered, inter-agency service integration teams to be located in the two neighborhoods of North Richmond and Bay Point, the Service Integration Management Team (SIMT) was created. As a result, the neighborhoods became associated with a larger group of concerned people, representing the departments and programs.

The consultant was the technical expert to the SIMT and helped guide the implementation planning process, structuring the work committees, overseeing the participation of all departments in making decisions, communicating with various county departments and coordinating with parallel projects related to neighborhood services. It was the consultant's responsibility to be well-informed about all of the possible methods for structuring service integration and to know and understand the "state of the art" information about the myriad of infrastructure issues that had to be dealt with (for example, financing, management information systems, self-managed teams, and evaluation) and tracked through written records of the plan, time lines, accomplishments and agreements. The consultant was a cheerleader that kept the process moving forward, serving as an activist in the community-building process and responsible for much of the day to day work of assisting the Healthy Start planning efforts, developing the North Richmond MAC, and creating communication channels between the community and the SIMT.

With the launch of the neighborhood family service centers, the County appointed a high level manager responsible for the operation and management of the neighborhood pilots. The consultant became more of an observer to the operation and shifted to a liaison role between the county and outside parties (foundations and state agency representatives), making the necessary connections to resources and expertise that could facilitate the full operation of the neighborhood centers. Specifically, the consultant conducted a technical review of all programs to determine which state and federal waivers were required to support service integration. This was done in collaboration with the County Administrator's analyst who was

completing a full scale review of the existing financing mechanism and making recommendations for actions needed to maximize existing funding sources and waivers required to blend categorical funds to support the service integration efforts.

During all three steps the consultant was the person who reminded everyone about the shared vision, since everyone had many other priorities throughout the change process. The consultant maintained the county's memory on this entire enterprise and ensured communication links to the many different people who needed to be included.

The greatest challenge was coping with the slow pace of the change process. This was the consultant's only assignment, and she wanted everything to happen now. Her preferred pace was impossible for department management staff who had many competing demands on their time and energy. Allowing others a more relaxed pace, while maintaining the forward motion of the project was an ongoing balancing act.

In reviewing this experience, it seems that the consultant may have two major advantages over the appointment of an internal department manager when helping the county plan and implement neighborhood service integration. A consultant has the freedom and opportunity to speak his or her "own opinion about the truth of the circumstances" to upper management, the Board of Supervisors and the children's advocates without fear of reprisal. The consultant holds a neutral position with respect to any department or particular discipline; he/she is not required to promote the interest or defend the reputation of one department over another.

In a bureaucracy, middle managers, supervisors, and front line workers often find it difficult to say exactly what they think to upper management. Usually there are limited opportunities for their opinions to be heard and included in upper management discussions and when there is a chance to speak one's views, many worry about the repercussions of speaking up or being overly candid. Staff from different departments often reflect different organizational cultures and "ways of doing things." Even when they find it difficult to rationalize the decisions of their superiors, they are often expected or personally believe that they should present their department's "best possible face."

In contrast, the consultant's job is to present as truthfully as possible an impartial view of the circumstances and a thorough analysis of the options for action. At times, during this particular project, the consultant's opinions about what should be done in negotiations with the unions, departments and community were ignored. She walked a fine line between pushing a position that was vital to the success of the effort and accepting that others may actually better understand what is best for the program.

She learned from her mistakes as to which decisions required more persuasion and which circumstances needed an accepting, open attitude. This is a luxury which a consultant can indulge more easily than a civil servant.

The consultant is often alone when presenting an unpopular view. When staff see that upper management's response to unpleasant facts is constructive, then agency staff become more actively involved by seeing how safe it is to advocate for change.

A second advantage of hiring a consultant is that the county can hire one person who has the skills and experience required to work with both public agencies and neighborhood advisory groups. While most departments have staff who could perform in either arena, they are more than likely functioning in job classifications and current assignments which make them invisible or inaccessible to upper management. Many eligibility workers are community leaders in their neighborhoods. Many front line supervisors have learned how to get different agencies to work together when serving the same client. However, it is uncommon for a public agency to search through the bureaucracy and find these people and reassign them to a team to work inside and outside the organization. Most social services departments do not function with the kind of flexibility needed to maximize the talents and abilities of employees, regardless of classification and formal education.

CONCLUSIONS

In Contra Costa County, the process of integrating services has caused some very dramatic changes in thinking and in practice. At the beginning of the change process, no one knew how it would end up or how it would look, and no one really knew exactly how to manage the process. The project was successful because participants learned to share a strong, sustained commitment to the vision of community-based, family-centered, inter-agency service integration over an extended period of time. This commitment led to shared planning, shared operations, and mutually supportive communication. Changing the system required the following critical elements:

- Commitment and leadership from the top levels of county government were needed to keep the process on track. Commitment and leadership from the community were necessary to keep the system changes responsive to the neighborhood's needs and to mobilize local participation and ownership.
- At least one person, in this case an outside consultant, was needed to keep an eye on the larger picture, bridge gaps and keep the dialogue

open, thereby keeping everyone working together toward a shared goal.

- New ways of thinking about government, communities, workers, purposes, and service provision were needed, along with a thorough understanding of the technical information available on systems change and systems improvements.
- Participants in the process recognized the need to celebrate small changes as precursors to a larger change.