# THE NAPA COUNTY HUB: A NEW STANDARD FOR COORDINATION AND SERVICE DELIVERY IN THE HUMAN SERVICES

**Natasha Paddock**

**EXECUTIVE SUMMARY**

Napa County Health and Human Services Agency (HHSA) embarked upon a complex collaboration, known as the Hub. The collaboration, across multiple divisions in its agency, in conjunction with community partners, was targeted at one goal: to effectively and efficiently serve low-income, vulnerable individuals with unmet service needs.  In an era of accountability and insufficient resources, human services departments can no longer afford to isolate operational activities from the general agency goals.  The Contra Costa County Employment and Human Services Department (EHSD) has had longstanding interest in Whole Person Care, Collective Impact, and Integration concepts as seen through the development of its Service Integration Team sites (SIT). With existing infrastructure to support a progressive model like the Hub, recommendations for implementation include an integrated approach to human services whereby an agency no longer reacts to social problems, but rather anticipates social problems and promotes and supports prevention as a means of assisting individuals reach self-sufficiency.

> **Commented [KB1]:** What's the "T" for? Service Integration TEAM Sites, or something? Otherwise, shouldn't it be SIS? ☺

Natasha Paddock, EHSD Division Manager, Contra Costa County HAS

# THE NAPA COUNTY HUB: A NEW STANDARD FOR COORDINATION AND SERVICE DELIVERY IN THE HUMAN SERVICES

**Natasha Paddock**

**Introduction**

The mission of human services is to promote a practice that involves concurrently addressing social problems that impact the whole person, at all levels of manifestation, with the intention of promoting self-sufficiency. In the wake of the 2008 recession, and the impending reality of ambivalent budgets, resource pooling and integration seem likely solutions to forge ahead against the future unknowns. In an era of accountability and insufficient resources, human services departments can no longer afford to isolate operational activities from the general agency goals.

The concept of Collective Impact hinges on the principles that human services organizations strive to maintain—*having a common agenda, shared measurement systems, mutually reinforcing activities, continuous communication, and backbone support organizations*—all essential factors toward creating an all-inclusive service delivery model. Vulnerable, low-income populations frequently endure gaps in service needs and are subsequently further exposed to social and economic problems, like unemployment, lack of food, and homelessness, which can challenge their ability to reach self-sufficiency. Consequently, individuals who have the greatest health and social service needs are often left to navigate systems that are comprised of varying policies, procedures, programmatic goals and financial regulations. Incorporating Collective Impact and a Whole Person Care approach is what makes Napa County's Hub a model for comprehensive service delivery.

**The Napa County Hub**

A multidisciplinary service unit known as the Hub is co-located on the HHSA main campus and provides service coordination at a single point of entry. Piloted in June 2014, the goal of the Hub staff is to connect individuals, with a warm hand-off, to internal and external resources based on identified needs. The unit is staffed with (1) a supervisor to oversee the day-to-day operations, (2) a Licensed Clinical Social Worker for mental health and substance use assessments, and (3) Community Resource Aides who are agency and community resource experts. The Hub staff analyzes referrals and coordinates services from within the agency's six divisions in partnership with key community agencies who share common customers. Referrals are assessed for two or more non-urgent service needs in addition to the needs presented for the initial visit. The team works in unison, seeing customers on site at the Hub office in addition to working dedicated days out in the community where many of the HHSA customers frequent services. The Hub's approach embodies the Whole Person Care concept and supports programs by providing a variation of services to counteract stresses, link individuals to appropriate resources, and offer desirable assistance.

**Benefits of the Hub Integration Model**

As with the configuration of most county agencies, individual divisions address customers' immediate, stated needs (Medi-Cal, CalFresh, Child Welfare, etc.), but often overlook additional needs that may be present due to constraints of business requirements structured by program regulations. The Hub's method of service delivery increases the likelihood that confounding, critical needs of customers will be identified and met.

Key considerations for human services enhancements using this model include:

*Quality Customer Service*

- Institutionalization of internal supports into the agency infrastructure that allow for community needs to be met more flexibly and adaptively.

- Opportunities to explore an integrated referral database that captures information for the purpose of making informed decisions (programming, budget expenditures, and staffing).

*Comprehensive Program and Policy Planning*

- Interpretation of policy with thoughtful consideration for service collaboration.

- Comprehensive recommendations for implementing policies at the micro, mezzo, and macro levels.

*Cost Savings*

- Economically efficient resource sharing.

- Enhanced service quality around assisting the whole person rather than compartmentalizing larger problems.

- Funding resources with potential for fund leveraging and increased service capacity.

**Hub Success**

Preliminary data collected from a self-assessment by HHSA in 2013 illustrates the social need for instituting a model that addresses service gaps.

- Nearly 62% of customers identified at least three service needs.

- Nearly 45% of customers identified at least four service needs.

Data collected between the periods of June 30, 2014 through July 15, 2015 indicates the growing demand of services offered by the Hub.

- 609 individuals were referred to the Hub during this period

- 421 customers were seen at the Hub office

- 188 customers were seen in the community (home visits or residential centers, shelters, etc.).

**Hub Challenges**

*Collaboration*

The Hub's primary source of funding stems from health care programs. This produces a sense of uncertainty as to the identity of the unit and where its focus should lie (health or human services).

*Data Collection*

The Hub has identified limitations with a sophisticated method of data tracking and monitoring making it difficult to outline keen areas of strengths and potential for growth with the services offered.

**Implications for Contra Costa County**

Efforts to integrate services have been hindered by the belief that these efforts require large-scale reorganization of departments. This is not necessarily the case as county agencies demonstrate remnants of internal integration through their current initiatives. The cost to establish the Hub at Napa County HHSA was approximately $254,000, a cost that could be significantly reduced in Contra Costa County's EHSD due to already having existing staff and buildings in place.

Contra Costa County Employment and Human Services Department (EHSD) has had a longstanding effort toward integration through the development of its Service Integration Team sites (SIT). The SIT sites embody Whole Person Care and Collective Impact theories, but have been limited by a sound plan and solid foundation for implementation and lasting success. The SIT model was successfully executed in 1994 and operated until the 2008 recession. It was then forced to make unforeseen reductions in staffing that ultimately impacted furtherance of the model and its potential. Recently, a taskforce spearheaded by the EHSD Executive Team has been instituted to restore the SIT sites to their intended capacity. The primary focus of the team has been to establish an infrastructure by which the SIT model can sustain its intended purpose and survive future organizational and economic challenges.

Considering this information, short-term and long-term recommendations are as follows:

*Short-Term (3-6 months)*

- Adopt the Hub model and begin making discussions about the service goals and objectives that EHSD wants to measure through service delivery.

- Assign the SIT sites as a sub-division of the Policy and Planning Division to establish data and tracking measures to assist with clear and concise goal setting.

- Partner with Fiscal to research funding opportunities from upcoming initiatives on Whole Person Care and Integration that could contribute to the financial health and stability of the SIT sites.

- Recruit staff to establish a pilot unit dedicated to using existing classifications.

*Long-Term (12-18 months)*

- Identify opportunities to partner with Health Services to maximize potential resources and garner a greater public stake in the model.

**Commented [KB2]:** What's the "T" for? Service Integration TEAM Sites, or something? Otherwise, shouldn't it be SIS? ☺

**Commented [KB3]:** One of your recommendations should be about sustainability (financial insulation so that client services will not suffer in the event of major economic hardships to the county). In a recession is when clients need services the most.

**Commented [KB4]:** LOL...funny, I just said that, huh!

**Commented [KB5]:** The financial *health*???

**Commented [KB6]:** Back to my first point regarding this section...this line could simply be your bullet (if you stayed with the "bullet" theme).

- Establish a universal referral and release database that enables responsible information sharing and provides a sophisticated measurement of outcomes of service delivery.

- Long-term space planning in Central Contra Costa County for co-location of services.

**Conclusion**

Health Care Reform has brought about initiatives fueled by Medicaid funding streams that enable county departments to expand upon federal priorities like Whole Person Care, Collective Impact and Integration that can support the development of a Hub model. Incorporating the Hub model into EHSD's SIT sites is an integrative approach to human services whereby we no longer react to social problems but instead anticipate potential social problems and promote prevention. At its best, this approach uses existing infrastructure, simplifies existing processes, enhances service outcomes, provides a more secure, role-based access to information, delivers improvements in access and efficiencies, and provides better analytics. The recommendations provided exemplify a shift in service dynamics from intervention-based remedies to developing programs that are long-lasting and incorporate plans across the lifespan of social services.

**Acknowledgements**

Vargas.  The time and care spent with me to explain the inter-workings of the Hub were invaluable. You all are an amazing team doing invaluable work. Thank you!

**References**

Galeana**,** M. & Vargas, M.  (2016, February 24). Hub Community

Resource Aides, Napa County Health and Human Services.

Kania, J. & Kramer, M. (2011). Collective Impact. *Stanford Social*

*Innovation Review*, *9,* 1-10.

Lewis, J. A., Packard, T. R., & Lewis, M. D. *Management of*

*Human Services Programs, 4th Edition*. (2007). Chicago: Thomson Brooks/Cole.

O'Malley, S. (2016, February 24). Hub Supervisor, Napa County

Health and Human Services.

Payne, C. (2016, February 24). Hub Licensed Clinical Social

Worker, Napa County Health and Human Services.

Travis, P., Bennett, S., Haines, A.A., Pang, T., Bhutta, Z. Hyder,

A. Pielemeier, N. R., Mills, A., & Evans, T. (2004). Overcoming health-systems constraints to

Achieve the Millennium Development Goals. *Department of Health System Policies, 364*, 900-

906.

Zins, C. (2015). Defining human services. *Journal of Sociology*

*and Social Welfare, 28,* 3-28.