

CalWORKs County Self-Assessment (Cal-CSA) Report

County: Inyo

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Introduction

The goal of the CalWORKs Outcomes and Accountability Review (Cal-OAR) is to establish a local, data-driven program management system that facilitates continuous improvement of county CalWORKs programs by collecting, analyzing, and disseminating outcomes and best practices. Cal-OAR encourages intentionality in county CalWORKs program design, service delivery models, and activity structure. This provides opportunities for adults to build core capabilities critical to manage adversity, succeed in navigating a long-term career trajectory, and balance the challenges of life, family, and work. Through collaboration and partnership, counties and the State will execute a joint vision for CalWORKs outcomes of interest that propel improvement of county CalWORKs programs.

The first component of the Cal-OAR process is the CalWORKs County Self-Assessment (Cal-CSA), which organizes the performance measures into groups of related measures to support a holistic assessment of the Child Welfare Department's (CWD's) CalWORKs program.

1. Describe how the CWD approached the Cal-CSA report.

Inyo County Health and Human Services Agency (HHS) began the process of data gathering, fact-checking, and writing in May 2023. Morningstar Willis-Wagoner, Program Manager of Employment and Eligibility and Aging Programs, compiled information and wrote the Cal-County Self-Assessment. She was supported by Josh Vega, Integrated Supervising Case Worker, in validation of data and operations. HHS was not able to dedicate a team to the Cal-OAR process and the stable caseload of 30 clients per month in the Welfare-to-Work program does not allow for dedicated CalWORKs (CW)/Welfare-to-Work (WTW).

2. Methods used to gather partner and collaborator feedback.

Due to the very low client caseload in the CW/WTW staff program, internal and external partners were not engaged outside of already scheduled on-going meetings. Cal-OAR was discussed during HHS staff meetings held approximately every other week. During the compilation of the CSA Child Care Connection and Tribal TANF, quarterly meetings were convened virtually. Partners provided feedback to HHS in an informal manner within the context of the regular business discussed.

Background: Demographics

1. Describe the strengths and needs of the communities served.

Like many California counties, Inyo County housing costs have been increasing, which challenges CalWORKs families to obtain and sustain permanent affordable housing. In addition, the COVID-19 pandemic exacerbated the housing crisis for these families due to loss of stable employment. There are employment opportunities within Inyo County but due to the lack of affordable and permanent housing, vacancies persist, which impacts growth. There are several organizations within the community that offer employment services and classes to assist with obtaining employment. Lastly, due to Inyo's geographically large area, limited public transportation can also be an issue for accessing various locations.

2. How does the county demographic profile compare with CWD and statewide demographics?

Average Unemployment & Unemployment Rate: In 2019, 2020, and 2021, the Inyo County average unemployment rate of 5.9% is less than that of the statewide average of 7.5%.

Educational Attainment & Median Earnings: Educational attainment in Inyo County exceeds the statewide average for individuals 25 years of age or older for 2018, 2019, and 2020 in obtaining a high school diploma (CA 20.5<IC 29.6), completing some college (CA 21.1<IC 25), and earning an associate degree (CA 7.8<IC 16.4.) Inyo County does not exceed the statewide average in attaining a bachelor's degree (CA 21.2>16.4) during the same period.

Household Income: The average median household income in Inyo County was lower than the statewide average for 2018(CA \$31691>IC \$30660), 2019 (CA \$39733>IC \$35790), and 2020 (CA \$63194>IC \$53302.)

Poverty & Deep Poverty Rates: The poverty and deep poverty rates for Inyo County approximate the statewide average for the periods of 2015 - 2019, 2016 - 2020, and 2017 - 2021. Inyo County has two distinct geographic regions, North and South. HHS has offices located in both regions. Areas of poverty exist in both regions.

Child Poverty Rates: In 2019, 2020 and 2021, Inyo County child poverty rates were below the statewide average for all age groups.

Race and Ethnicity: Inyo County's race and ethnicity are similar to the statewide average for Hispanic and Latino and White populations. Additionally, the Asian population is 1.5%, Black is .04% which are significantly lower than the statewide average. "Other" is higher than the statewide average at 14.6%.

U.S. Housing and Urban Development (HUD) Homeless Population Estimates: In 2020, of the statewide total of 25,777 unhoused families reported, 29 resided in the Alpine, Inyo and Mono Counties Continuum of Care (CoC). In 2019, of the reported 22,501 unhoused families statewide, 16 families resided in the Alpine, Inyo and Mono CoC.

3. Describe the overall CWD demographic makeup, and how it impacts the ability of the CWD to provide services to the CalWORKs population.

Inyo County is a frontier county that is rural and geographically isolated, located between the eastern part of the Sierra Nevada Mountain range and the California/Nevada border. It is the second largest county in California in terms of land area, with 10,180 square miles, and is the tenth largest county in the nation; however, Inyo County has a sparse population of about 19,016 people.

Inyo County has a rich and prominent Indigenous culture. There are five reservations: the Bishop Paiute Reservation, the Lone Pine Paiute-Shoshone Reservation, the Big Pine Paiute Reservation, the Fort Independence Indian Reservation, and the Timbisha Shoshone Reservation. The county's roots also include pioneering, mining, railroading, ranching, and farming. Tourism is a large revenue stream for the county — hiking, fishing, rock climbing, and hunting are prominent tourist activities. The county includes the highest elevation in the contiguous United States, Mount Whitney, and the lowest elevation in North America, Bad Water Basin, in Death Valley. There are many lakes, rivers and creeks located in Inyo County. The county seat is the city of Independence, though the most populated town is Bishop, where the majority of the County's resources are based with some level of countywide outreach to outlying communities.

The level of service intensity varies depending upon geographic location, availability of private service providers, and County staff availability. Distance to services and related transportation logistics and costs to residents and agency staff limit service availability. Distance and weather conditions can pose a significant barrier to accessing services, both within the county and the surrounding area. US Highway 395 is the main north-south route, joining many of the communities the length of the county. Residents must often travel great distances, from two to five hours, to obtain services that are not available within the county but are typically found in larger metropolitan areas. To the north, the nearest large population centers are Carson City and Reno, Nevada, a three-to-four-hour drive from the northernmost communities in Inyo County. It is a five-hour drive by car to reach California cities such as Los Angeles and Sacramento from the Bishop-area. Horizon Air and SkyWest Airlines provide flights from the Mammoth Yosemite Airport, located forty miles north of Bishop, to Los Angeles, San Jose, Orange County, San Diego, and San Francisco. More flights are offered during the winter ski season, but daily flights are available to Los Angeles and the San Francisco Bay Area year-round. The Eastern Sierra Transit Authority offers bus service north to Reno, NV,

and south to Lancaster, CA, three to four times per week. From Lancaster, residents can travel by bus to Los Angeles or take shuttle service to LAX.

4. Describe any challenges or opportunities these findings present for the CWD and how this information aids in the identification of Cal-SIP strategies.

The population is scattered over rough geography subject to extreme weather — limited public transportation currently and historically has impacted access to resources. HHS regularly works on identifying means to mitigate these challenges (such as the use of technology and better coordination with service providers) and will continue to do so throughout the SIP.

5. Provide an analysis of the variation in demographics and service delivery by region, if applicable, and how the CWD may target service delivery based on this information.

Given the varied populations represented in Inyo County, HHS takes every opportunity to have bilingual staff, language line, and ASL services available at all the office locations. HHS works closely with Community Based Organizations (CBOs) in the community to offer support and resources as needed. Services are largely centered in Bishop. The other two towns in Inyo County account for most of the remainder, in addition to the reservations. There are individuals and families living in remote areas of the Sierras and foothills. Aside from the Indian reservations, demographics are evenly distributed throughout the county.

6. Identify emerging employment sectors within the county.

Emerging employment sectors in Inyo County are Trades, Transportation, Utilities, Private businesses, and local Government.

7. Are there any significant changes or trends in the demographic profile since the submission of the last Cal-CSA, and how have those changes impacted the CWD's performance measures and service delivery?

Not applicable to the 2021 - 2026 Cal-OAR cycle.

Section 1. Agency Characteristics

Part 1. Service Utilization and Access

1. Description of the CWD's overall structure, identifying where the CalWORKs program falls within that structure.

The Inyo County Department of Health and Human Services (HHS) is led by a board-appointed Agency Director and is governed by the County Board of Supervisors. The Agency consists of separate divisions which include Administrative Services, Aging and Social Services, Public Health and Prevention, Behavioral Health, Fiscal, and other Special Operations.

The Deputy Director of Aging and Social Services and the Program Manager provide oversight to the Employment and Eligibility Programs which include CalWORKs, Welfare-to-Work (WTW), CalFresh, Medi-Cal, Foster Care, Cash Assistance Program for Immigrants (CAPI), and General Assistance (GA) etc. Inyo County HHS collaborates with other Agency divisions, contracted providers, other governmental agencies, and CBOs to enhance the delivery of services to help vulnerable families achieve self-sufficiency.

2. How has the CWD operationalized CalWORKs to meet the needs of the population served?

Inyo County HHS administers all public assistance programs using a standardized approach. Any Integrated Case Worker (ICW) also known as 'case manager' is eligible to handle a CW case, and no cases are reserved. Additionally, there is no distinction in case assignment based on whether the WTW participant is voluntary or mandatory. The ICWs collaborate with contracted service providers, other Agency divisions, and other governmental and community-based organizations to deliver CW/WTW services. Unlike employing a tele-center, HHS does not have a centralized phone system for clients to contact their designated worker. If a client cannot reach their worker by phone or in person, they will be directed to the weekly case manager for assistance with their needs.

Despite the concentration of population in the city of Bishop (approximately 20% of the total county population), all parts of Inyo County are considered rural. Most economic opportunities are situated in or near Bishop. To stay connected with clients, HHS has adopted various methods such as phone and video calling. This approach benefits not only clients who may face challenges traveling to the County office but also addresses limited available office space for client meetings.

3. Description of how the organizational structure impacts CalWORKs business practices and service delivery.

HHS public benefits are administered by program generalists. The small number of clients participating in CW/WTW does not justify a specialized worker. Inyo County has determined that best practice is to assure clients that there is more than one person who can meet their needs and that all ICWs are knowledgeable in WTW. This generalist approach ensures there is no reliance on one person to be the knowledge holder of information. This approach also ensures there is no historical gap of knowledge if the knowledge holder is no longer able to share information. Because clients can be served by any ICW, there is less delay of service delivery as all workers have been trained similarly and clients may be assisted by others in the event their assigned worker is unavailable.

Our offices are co-located with various other Programs and County partners, which results in a one-stop-shop allowing clients to be assisted in any office and apply for any program. This results in a higher rate of client satisfaction, better communication, less waiting time, more effective and efficient processes, and higher engagement for both participants and caseworkers.

4. Past changes that have impacted county practice, provision of services, and performance measures (where applicable).

Prior to 2021, Inyo County had buildings located all over Bishop and clients had to travel to each location to receive their desired services. In 2021, all County offices moved to a consolidated building which houses all County staff. This has been a huge change and help for all clients.

Part 2. County Offices

Table 1: Locations

Office Name	Location (Address)	Urban or Rural	Average wait time (In Minutes)	Eligibility and WTW Services Co-located	Child Care Available On-Site	Play area for children	Diaper Bank co-located	Domestic Abuse Services On-Site	Mental Health Services On-Site	Substance Abuse Services On-Site	WIOA On-Site	Community College Representative On-Site	WTW Services Available	Other Co-located Agencies
Primary County Office	1360 N Main St., Bishop	Rural	15	Yes	No	No	Yes	No	Yes	Yes	Yes	No	Yes	Yes
Lone Pine COB	310 N Jackson St., Lone Pine	Rural	15	Yes	No	No	Yes	No	No	No	Yes	No	Yes	Yes

1. The number and locations of CalWORKs offices. Specify urban versus rural.

Inyo County has one main office located in Bishop, CA and one satellite office located in Lone Pine, CA. Inyo County is a rural community that is geographically large with a population of a little over 20,000 people. Please see Table 1: Locations.

2. For each office specify: operations, service array, and other services offered (i.e., other human service or workforce programs).

In both offices the following services are offered: Assistance with all Eligibility Programs such as CalFresh, CalWORKs, WTW, Employment Services, GA, CAPI, and Medi-Cal, etc. Please see Table 1: Locations.

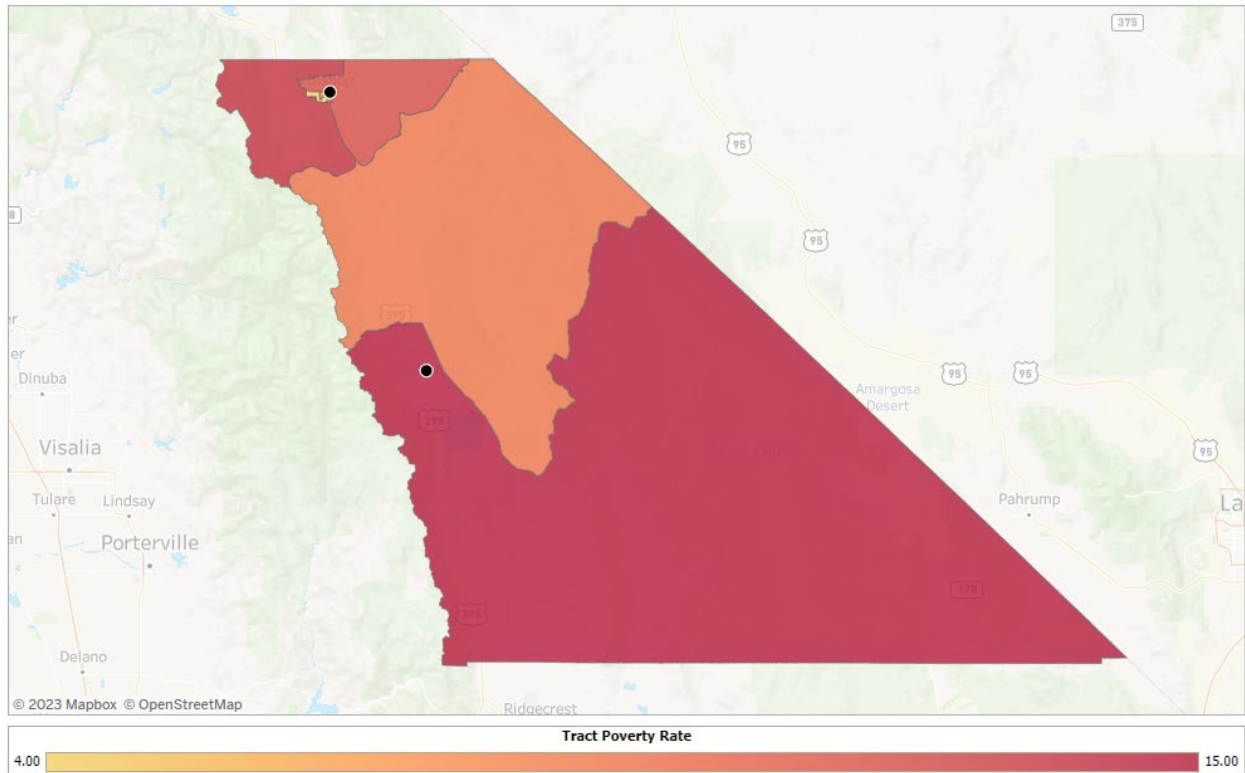
3. Discuss whether eligibility and Welfare-to-Work (WTW) services are co-located, use of call-centers.

Eligibility and WTW services are co-located at both locations. We have staff that are able to establish eligibility and also offer the Welfare-to-Work services as well. All staff are Integrated Case Workers that are required to know all programs that are offered in Employment and Eligibility. Please see Table 1: Locations.

4. Describe office location in relation to the geographic dispersion of poverty within the county.

Inyo County is split into six Tracts on the Poverty Tract Map. The overall County Poverty rate is 11% which is lower than the statewide rate of 13.2% for the first quarter of 2023. Census Tract 8 is a very large area of Inyo County with a Tract Poverty Rate of 15%. Census Tract 5 is the second largest area with a Tract Poverty Rate of 9.40%. There are four Census Tracts in the Northern area of Inyo County which include Tract 1 with a Tract Poverty Rate of 12.10% and Tract 2 with the Tract Poverty Rate of 13.80%. Tract 3 and Tract 4 are the smallest census tracts, encompassing the West Bishop area and the city of Bishop, with the Tract Poverty Rates of 4% and 7.70%, respectively. We have one office in Tract 4, and one office in the northwest part of Tract 8.

Figure 1: Map of Inyo County CalWORKs Offices and Poverty Dispersion



Part 3. Staff Functions & Workforce

Table 2: Special Units

Caseload Type	Used by County	Caseload	Available at all County Offices
Sanction Caseload Unit	No	N/A	N/A
Family Stabilization Caseload Unit	No	N/A	N/A
Domestic Abuse Caseload Unit	No	N/A	N/A
Mental Health and/or Substance Abuse Caseload Unit	No	N/A	N/A
Housing/Homeless Population Caseload Unit	No	N/A	N/A
WTW Exempt Caseload Unit	No	N/A	N/A

1. Describe how cases are assigned to workers and whether specialized caseload units exist.

Cases are assigned to workers by our front office staff from an assigned list. The workers are assigned to all categories of cases depending on the level of the Integrated Case Worker (ICW) also known as case manager. The ICW II and the ICW III handle all the cash cases. The ICW I is a training position and is not assigned the cash-based cases until the training has been completed. We do not have any specialized caseloads as listed in the Special Units Table because due to our small case numbers, we do not have the capacity or need to create special units.

2. Describe average caseload size by service component, including specialized staff (e.g., those serving domestic abuse survivors).

Please see Table 2: Special Units

3. Describe staff onboarding and ongoing training requirements.

Merit system is used for advertising vacancies and recruitment statewide. When a new employee is hired, County Personnel and Administrative Health and Human Services staff conduct a New Employee Orientation. Orientation consists of training in the following areas: Mandated Reporter; Racial Equity and Bias; Civil Rights; Confidentiality; Anti-Harassment; and COVID-19 Illness and Prevention.

Ongoing training (annual or bi-annual) for all staff includes training on the National Voting Rights Act (NVRA), Mandated Reporter, Racial Equity and Bias, Confidentiality, Security Awareness, Welfare Fraud Prevention and Detection, Anti-Harassment, and Civil Rights. Staff are onboarded using multiple training approaches such as UC Davis “bootcamps,” shadowing experienced staff, and one-on-one coaching with supervisors and case manager lead workers. Inyo County tends to take quite a bit of time to train, making sure that the new case manager feels confident with the information that is being provided to clients and with their ability to efficiently process a case.

Additionally, the administrative team provides in-service training on program updates, Cal WORKS 2.0, best practices, and specific topics such as trauma informed practices, case management, and improving participant engagement.

Inyo County has experienced difficulties recruiting staff due to the impact of the COVID-19 pandemic, along with the high cost of housing and lack of housing. We try to make every training available that we can utilize from UC Davis and have the training staff come to our area. We share the training with other counties near us such as Mono and Alpine, which are also very rural and isolated.

Part 4. Partnerships

1. How do current partnerships impact business practices and service delivery?

Like most Inyo County Departments, HHS has non-financial Memorandums of Understanding (MOUs) with public agencies (Public Health, County Office of Education), and financially contracted partnerships throughout the county. These partnerships allow HHS and community to provide support to CalWORKs/Welfare-to-Work clients in areas such as: domestic violence, substance use, mental health, job skills and readiness, English-as-a-Second Language services, learning needs evaluations, housing and homeless services, resume writing services, money management, legal services for criminal record expungement, services for Cal-Learn teens, subsidized employment, Home Visiting Program, navigation services for public assistance programs, and community college support and services. Ongoing partnerships with agencies, such as Tribal TANF (Owens Valley Career Development Center or OV CDC), Childcare Agencies (Child Care Connection), Domestic Abuse Service Providers (Wild Iris and RAVE), Community Colleges (Cerro Coso Community College), Behavioral Health, and Substance Abuse providers, are essential to helping WTW clients remove barriers to employment, accessing resources and reaching their personal and family goals.

2. Are there any pending or potential partnerships that may impact service delivery?

We are currently working on partnerships with different private businesses in our area to implement an Expanded Subsidized Employment Program.

3. What service/partnership gaps currently exist? What impact does that have on service delivery, and what strategies or long-term plans does the CWD have to address these gaps?

We are currently working on partnerships with different private businesses to implement an Expanded Subsidized Employment Program. We are also working on creating a position to be able to enhance our Subsidized Employment Program and Job Readiness classes. This position will collaborate with our community college and local businesses to offer assistance with the preparation of job skills and job navigation.

Part 5. Financial/Material Resources

1. Describe additional funding streams or material resources (i.e., funding in addition to the program allocations provided through CDSS) which support the CWD and have an impact on services provided to the CalWORKs population.

HHS sole source of funding towards CalWORKs is the Single Allocation. The Single Allocation provides all funding for Mental Health/Substance Abuse Services, Family Stabilization, Domestic Violence Services, Housing Support, and Stage 1 Childcare for the CalWORKs families.

2. How do these funding streams or material resources impact the CWD's performance measures?

HHS depends on these funding streams to supplement the services provided through WTW appropriations. The capacity of case managers to offer the needed support to clients would be negatively impacted should funding be reduced or eliminated, reducing the services, staffing, and community resources available for clients. Inyo County has a small number of community-based organizations which serve WTW clients. These organizations would be negatively impacted as many rely on blended funding to provide support and resources to CalWORKs/WTW clients and their children.

3. Describe whether and why any specific program allocations provided through CDSS (e.g., specific allocations for mental health or similar services) within the past three fiscal years were only partially used, or if CWD expenditures in an area exceeded its allocation during those years.

In the fiscal year 2019-20, CalWORKs had a total allocation of \$1,064,478, with expenditures reaching \$549,459. This resulted in an underspending of \$515,019. Despite the challenges posed by the last quarter being affected by COVID-19, CW/WTW managed to expend 52% of the allocation.

Moving to the 2020-21 fiscal year, the total allocation increased to \$1,191,786, with total expenditures at \$687,435. This led to an underspending of \$504,351, utilizing approximately 58% of the allocation.

In the most recent fiscal year, 2021-22, CalWORKs had a total allocation of \$1,025,124, and total expenditures amounted to \$554,921. This resulted in an underspending of \$470,203, with 55% of the allocation being utilized.

Here is a summary of the financial allocations by year:

Year	Allocation	Total Spent	Over/Under Amount Spent	% of Allocation Spent
2019-20	\$1,064,478	\$549,459	(\$515,019)	52%
2020-21	\$1,191,786	\$687,435	(\$504,351)	58%
2021-22	\$1,025,124	\$554,921	(\$470,203)	55%

Overall, the data highlights underspending in all three fiscal years. The impact of the COVID-19 pandemic contributed to this trend in the CalWORKs program during these periods. Notably, increased expenditures are anticipated because a new full-time employee position has been created, approved, and funded within the CalWORKs/WTW program.

Section 2. Partner and Collaborator Engagement and Feedback

Part 1. Overall Partner and Collaborator Engagement

1. Describe the process used to identify partners and collaborators.

HHS established partnerships and collaborations by leveraging existing relationships, contracts, and internal staff. Partners and collaborators were briefed on Cal-OAR and Cal-CSA, and invitations to participate were extended during meetings and verbal discussions, utilizing the information provided during presentations and regular meetings. We partner with our County agencies and our Tribal partners on individual cases and meet on a quarterly basis which helps us to know and understand what other services are available and being offered.

2. Describe how the CWD engaged partners and collaborators, including the method and frequency of engagement.

Please see Table 3: Partner Engagement.

3. Results of Partner and Collaborator engagement – a summary of feedback should be included here, with references to appropriate performance measure analysis where additional, more complete analysis is to be conducted.

On the basis of the information and feedback from the engagement with the collaborators, Inyo needs to revamp the WTW orientation/initial engagement process. The feedback is that Inyo is reviewing a lot of information which is hard for clients to digest all at once. By streamlining and/or simplifying the process Inyo may be able to assist the client to better understand what the program expectations include. HHS will continue to work with community agencies and partners and receive feedback to better serve community members.

Table 3: Partner Engagement

Partners & Collaborators	Focus Group	Newsletter	Interview	In-person meeting	Survey	Telephone
CalWORKs Staff	Monthly	N/A	Monthly	Bi-Weekly	Intermittently	Intermittently
CalWORKs Management	Monthly	N/A	Intermittently	Monthly	Intermittently	Intermittently
Current Clients	Monthly	N/A	Monthly	Monthly	Intermittently	Intermittently
Former Clients	Intermittently	N/A	Intermittently	Intermittently	Intermittently	Intermittently
Human Services Partners	Monthly	N/A	Intermittently	Intermittently	Intermittently	Intermittently
Community College Representatives	Intermittently	N/A	Intermittently	Intermittently	Intermittently	Intermittently
Tribal Organizations	Monthly	N/A	Intermittently	Intermittently	Intermittently	Intermittently
Local Workforce Development Board	Intermittently	N/A	Intermittently	Intermittently	Intermittently	Intermittently
Adult Education Providers	Intermittently	N/A	Intermittently	Intermittently	Intermittently	Intermittently
Domestic Abuse Services Providers	Intermittently	N/A	Intermittently	Intermittently	Intermittently	Intermittently
Child Care Connection	Monthly	N/A	Intermittently	Intermittently	Intermittently	Intermittently

Part 2. Client Experience

1. Client Experience at CalWORKs offices. For example, the comfort and security of the office, or the client reaction to wait time or provided amenities.

HHS received very few responses from participants to the survey provided. HHS found that it was easier to ask clients during the interview process about the office setting. Inyo County moved into a consolidated office building in July 2021. It is a much different environment than when offices were spread throughout the County. During this period, wait times were extended due to new staffing in the building. Making appointments was recommended to ensure conference room availability.

2. The reasons why, and the ways in which, families utilize the CalWORKs program.

From the survey results received and the discussions with the clients, the CalWORKs program is utilized to assist families with cash grants, supportive services such as Stage 1 Childcare, the Housing Support Program, Family Stabilization, job readiness, and other support as requested.

3. Other client outreach methods utilized, as applicable (e.g., focus groups).

Please see Table 3: Partner Engagement

Part 3. Client Satisfaction Survey

1. Summarize findings from the client satisfaction survey.

The numbers of monthly survey responses were low for HHS but, with the feedback received, the information reflected that the clients were satisfied with the quality of services provided when they submitted their first SAR 7, Initial Engagement during Orientation, Appraisal, and signed the WTW plan.

2. Discuss where the results of the survey align with measure performance results, and where they diverge.

With the small amount of information from the survey received, the Engagement Rate, OCAT Assessment, and First Activity Participation Rates support the results of the surveys. Inyo's plan is to work on improving customer engagement within the initial engagement period.

3. Describe how the survey results influence the county measure analysis.

HHS is assessing the current procedures for the CalWORKs application process along with the customer engagement piece for the WTW program. HHS will also be reviewing how to improve this process along with understanding the needs, barriers, and any other additional assistance that Inyo can provide to the client during the application process. HHS will also add the Client Satisfaction Survey to gather more information from the clients being served.

Section 3. Barrier Removal Services

Part 1. Key Data

Table 4. Barrier Removal Services Key Data

Data Element	Value
1a. Average monthly number of OCAT recommendations for domestic abuse services.	2
1b. Average monthly number of OCAT recommendations for substance abuse services.	2
1c. Average monthly number of OCAT recommendations for mental health services.	2
2a. Individuals referred for Domestic Abuse Services that have an exemption, good cause, or program waiver.	1
2b. Individuals referred for Domestic Abuse Services receiving these services through the Family Stabilization program.	0
2c. Individuals referred for Domestic Abuse Services receiving Homeless Assistance or Housing Support Program services.	1
3a. Individuals referred for Substance Abuse Services that have an exemption, good cause, or program waiver.	0
3b. Individuals referred for Substance Abuse Services receiving these services through the Family Stabilization program.	0
3c. Individuals referred for Substance Abuse Services receiving Homeless Assistance or Housing Support Program services.	0
4a. Individuals referred for Mental Health Services that have an exemption, good cause, or program waiver.	3
4b. Individuals referred for Mental Health Services receiving these services through the Family Stabilization program.	0
4c. Individuals referred for Mental Health Services receiving Homeless Assistance or Housing Support Program services.	0
5. Average monthly number of individuals that completed the Learning Needs Screening	N/A*
6. Average monthly number of referrals generated for Learning Needs Evaluation	N/A*
7. Average monthly number of individuals that waived the Learning Needs Screening	N/A*

*Not applicable during the 2021-2026 Cal-OAR cycle.

Part 2. Service Utilization and Access

1. What barrier removal services are offered to clients?

Table 5. Barrier Removal Services

Service	Offered
Mental Health	Yes
Substance Abuse	Yes
Domestic Abuse	Yes
Legal Services	Yes
Housing Support Program	Yes
Family Stabilization	Yes
Learning Needs Evaluations	Yes

2. Discuss any unmet needs and gaps in barrier removal services. Are there strategies or long-term plans to address gaps in service? Are services in neighboring counties currently leveraged where gaps exist locally?

Inyo County is assessing the current barriers to services through the process of working with recipients and stakeholders. This assessment will be reflected in the SIP. One of the primary goals of case managers is to help able-bodied unemployed and underemployed parents enter the workforce and find their path to self-sufficiency. Unfortunately, CalWORKs families often need more support outside of the services provided to the WTW participant. Inyo is working to create a number of services to assist with this process, but resources are limited because of the smaller community.

3. Discuss gaps between OCAT recommendations for services and referrals for services.

Inyo County has reviewed the gaps between the OCAT recommendations and referrals and looks forward to working on the referral process for services needed and identified in the OCAT Assessment. Gaps in OCAT recommendations for services and referrals can likely be attributed to:

- 1) The fact that OCAT recommendations for services are generated based on client responses during the Appraisal. Clients may decline services if they believe they do not need the service.
- 2) The OCAT questionnaire is mainly focused on addressing clients' needs and not addressing other family barriers or life situations that may impact participation.

Examples include child safety and well-being concerns, mental health issues, or substance abuse problems.

Part 3. Offer of Services, Barrier Identification, and Referral Process

1. When and how are barrier removal services discussed in the CalWORKs process?

Barrier removal services are discussed at intake interviews, Orientation, Appraisal, Recertification, anytime the client discloses a destabilizing crisis, as part of the non-compliance process, and when triggered by regular case contact or client disclosure. Flyers and brochures for available services are included in the Application, Appraisal, and Redetermination packets, as applicable.

Caseworkers are trained to understand the value and importance of interviewing. Caseworkers review all information available about the client and case (application, previous history with agency, verifications, etc.) and develop a list of subjects for which they would like more clarity, such as employment history, barriers to work participation, and household composition. Additionally, caseworkers understand the importance of building rapport with clients from the start and demonstrating that HHS goal is to serve the clients in ways that are most beneficial to them. At the beginning of interviews, caseworkers confirm that all information shared is confidential and essential towards properly evaluating family needs and removing barriers.

Ideally, and generally, clients respond to this approach and explain their circumstances and needs. Caseworkers observe body language and listen attentively to pick up on non-verbal communication and to ensure clients feel heard. Then, caseworkers ask clarifying questions to ensure that they are understanding correctly and rephrase what they are hearing for the client to confirm the accuracy.

2. What is the process for referring a client for barrier removal services once the barrier is identified? How does the CWD follow up to see if clients are receiving services?

Agency staff and contracted service providers are responsible for identifying any barrier removal service needs and provide referrals and linkages. When clients decline services, workers are directed to conduct frequent follow-ups during monthly contact or other regular interactions to ensure the safety and well-being of the family and children are in place and to remind clients of services available to them.

If workers suspect, or receive information that, a child's health or safety is jeopardized, they follow the internal guidelines for mandated reporters. Case managers follow up with clients during monthly and regular contact to ensure satisfaction with the service provided by agency contractors.

All grievances are channeled to appropriate program managers, program integrity, and quality assurance staff. WTW clients who are experiencing a destabilizing crisis are assessed for Family Stabilization (FS) services through a referral to our internal agency. If the participant meets the eligibility criteria for FS, the WTW case manager will advise the participant of FS services and encourage them to accept a referral and advise of the support services that can be offered.

3. Does the CWD implement a whole person care approach, which considers the full spectrum of individual and family needs?

Yes, the team implements the whole person care approach to meet the needs of the family, so they can be successful, including needs for childcare, transportation assistance, and referrals to other agencies.

4. How does the CWD package or “market” services to clients? How does the CWD help clients make informed decisions?

Table 6. Barrier Removal Services Noticing

Type	Service Availability	Good Cause/Waiver
Orientation	Yes	Yes
Appraisal	Yes	Yes
Assessment	Yes	Yes
Flyer	Yes	Yes
Posters in office	Yes	Yes
WTW Handbook	Yes	Yes
Family Stabilization	Yes	Yes

5. Explain how safety plans are used in the CWD for survivors of domestic abuse.

In Inyo County, two CBOs offer services for those experiencing domestic abuse. Safety planning is the core framework for information exchange and self-protection not only in the short term but in the future, especially where children are involved. Safety Planning services include training to use a variety of tools and strategies for avoiding abuse, e.g., how to leave domestic abuse relationships, maintaining daily tasks after leaving a dangerous relationship, using domestic violence resources, and potential risks in establishing a safety plan, etc. All participant interactions and information are highly confidential.

6. How and when are clients informed of the availability of good cause for domestic abuse (program waivers)?

All of these programs and the availability of waivers are discussed during orientation (Please see Table 6. Barrier Removal Services Noticing). Any time information about domestic abuse becomes known to the case manager, the availability of a waiver is discussed with the participant.

7. How does the CWD address mental health and/or substance abuse issues amongst children?

Case managers can make referrals for children for mental health and/or substance abuse issues that may arise during meetings with the parent/parents of the children. The case manager would refer the family to the Behavioral Health Division-Family Strengthening Team (FST) which is co-located with CWD. FST provides these services to families through the Family Stabilization and the Wellness Recovery Action Plan (WRAP) programs.

Part 4. Working with Service Providers

1. Identify and describe: Primary service providers, whether contracted or not, whether the provision of this service is impacted, location in relation to population being served, and the service level offered (out-patient, in-patient, etc.).

Currently, the only impacted service is the Housing Support Program (HSP). While there are enough staff and funds to serve all clients referred to HSP there are not enough landlords who are willing to lease to CalWORKs clients who frequently have poor credit, poor rental history, and whose income does not meet landlord requirements.

- Behavioral Health - Inyo County Division
- Adult Protective Services/Child Protective Services - Inyo County Program
- Public Health and Prevention Programs - Inyo County Division
- Community College - Within the local community and accessible to clients
- Stage 1 and Stage 2 Childcare - Within the local community and accessible to clients
- Learning Needs Services - Within the local community and accessible to clients
- Home Visiting Program - Within the local community
- Child Support - Inyo County Program
- Volunteer Services - Inyo County Program

2. Are any barrier removal service providers co-located at CWD offices? If so, describe.

- Behavioral Health Services - includes Substance Abuse Disorder services, Telehealth, counseling, and Family Stabilization Services.
- Children and Family Services - Case Management, supportive services
- Public Health/Prevention Programs - Internal clinic with access to a nurse, prevention programs, WIC, First 5, and Home Visiting Program.

3. How are other county-administered programs leveraged to serve barrier removal needs?

As a small county, agencies and staff regularly work jointly on programs and often with clients in the human service areas. Both formally through regular meetings and information sharing, and informally, relationships are created which encourage collaboration. Examples of programs and partnerships that are regularly used are In Home Supportive Services (IHSS), that is caring for ill parents or other adults or becoming a provider, etc.; Legal Aid; Housing Authority; Reduced Fee/DMV form; Inyo County Office of Education (Adult Literacy Program); WIOA; IMACA Food Bank; Child Care Connection for Stage 1 and Stage 2 Childcare; and, Owens Valley Career Development Center (Family Literacy, Vocational Education, and Tribal TANF).

4. How are community partnerships leveraged to ensure clients are connected to appropriate services?

Any community partnership recognized for delivering a service that eliminates a barrier to self-sufficiency for a participant can be utilized. The benefit of Inyo County being a small county lies in the staff's familiarity with various programs and collaborations that can aid clients.

Inyo County HHS sustains connections with local non-profit community-based organizations, Cerro Coso Community College, and a local childcare referral agency, Child Care Connection. This ongoing collaboration strengthens HHS' capacity to direct clients to the precise resources they require.

Part 5. Staff Training

1. Does the CWD have specialized staff that work with clients with significant barriers?

Inyo County HHS does not have specialized staff. They will work with the client and if the client has significant barriers that HHS is unable to address the client is referred to another program or agency that has the capacity to offer a more specialized service.

2. What types of training are provided?

University of California, Davis (UC Davis) training is provided throughout the year, and when needed, HHS works with the instructors to identify and provide specialized training for the case managers. Since COVID-19, in addition to an array of virtual training and webinars, in the past six months, UC Davis trainers have also traveled to Inyo County to provide training on new CalWORKs and WTW policy and regulations and case coaching.

3. How are CWD staff trained to talk with clients about barrier removal services?

Inyo County HHS utilizes training such as Motivational Interviewing techniques to be able to actively listen while working with clients to make sure that their needs are being met when they are coming in and asking for assistance.

4. What steps are taken to help staff manage secondary trauma/compassion fatigue?

The County has utilized Employee Engagement on a quarterly basis, which allows staff to be out of the office and enjoy something enjoyable which allows them to feel that they are valued, and to combat work fatigue. Staff have also been given an additional 30 minutes per week of personal care time that all of the employees utilize to take care of themselves.

Section 4. Initial Engagement Analysis

Part 1. Initial Engagement Analysis

1. Compare performance to data baselines and, for process measures, to target thresholds.

Not applicable to the 2021-2026 Cal-OAR cycle.

2. Identify any emerging trends in the measures. What inferences can be drawn?

Lacking data, it would be imprudent to pinpoint emerging trends in the measures. In the absence of data for analysis, there are limited inferences that can be made. It is crucial to possess data for analysis and drawing conclusions when endeavoring to identify emerging trends in measures or any other domain. Without data, conclusions would be purely speculative.

3. What factors may have contributed to the CWD performance on these measures? Consider both strengths and challenges, both internal and external to the CWD.

During the pandemic, many individuals elected to reduce their interaction with public agencies and CBOs. The WTW “good cause” exemption also made it difficult to engage clients. Clients were apprehensive about meeting in-person at offices or beginning employment activities which were in person; clients often had challenges with access to technology, e.g., the internet. CBOs were not open for participant engagement and limited childcare facilities/providers open/available for daycare services during the pandemic prevented clients from engaging in activities. Pandemic Unemployment Assistance (PUA), under the federal CARES Act, disincentivized clients from engaging in WTW activities. The end of benefits on 09/04/2021 impacted income for many families.

One of the strengths that was identified was that more online activities are offered within the community.

4. Identify unmet needs and service gaps. Describe the CWD process for tracking and addressing these needs.

Inyo County HHS currently utilizes eXemplar reports for CalWORKs Intake and WTW caseload management. With the migration to CalSAWS, case managers have not been able to use these reports until recently. Inyo County HHS will evaluate options to utilize CalSAWS and eXemplar reporting to better track timeliness of OCAT/Appraisal completion and first activity attendance.

As CalWORKs cases are approved, eligible clients are referred to WTW as appropriate within ten days, or the same day if the participant is authorized for Stage 1 Childcare. With new staff working in the CalWORKs caseload and offering WTW services, there have been some challenges with timely engagement, therefore HHS is working with UC Davis on conducting a WTW Bootcamp for Inyo, Mono, and Alpine staff that will address these challenges.

5. Identify changes or data trends since the last Cal-OAR process (not applicable during first Cal-OAR cycle). What impact does this have on service delivery and availability of services?

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 2. Demographic Analysis

1. Do disparities amongst different subpopulations exist?

The small overall population in Inyo County and the very small number of clients in some programs, including WTW, monitoring for disparity is part of normal case work. In addition, our close working relationships with tribal representatives (e.g., Tribal TANF) ensure that tribal members are informed of services and resources and have access to both services and resources. In the absence of data, it is not possible to pinpoint specific factors that might have influenced HHS' performance on the measures.

2. Are there disparities between the population being served, the services provided, and the services available in the community (either CWD provided or services available in the community)?

No disparities have been identified among the populations served, as CalWORKs, Welfare-to-Work, and Stage 1 Childcare benefits are available to all community members. The community can access benefits through multiple means, including mail-in applications, telephone calls, online requests, and in-person. However, during this review period, the number of childcare providers and services provided through some community services was reduced due to COVID restrictions and personnel turnover.

3. What effort has the CWD made to address these disparities? Explain what barriers have arisen while addressing the disparities.

Inyo County HHS and WTW case managers work diligently to disseminate information about the WTW program, WTW benefits, and make themselves and the offices welcoming and accessible. The small overall population in Inyo County and the very small number of clients in some programs, including WTW, allows staff to monitor for disparity as part of normal case work. In addition, our close working relationships with tribal representatives (e.g., Tribal TANF) ensure that tribal members are informed of services and resources and have access to both services and resources.

4. How may the results inform Cal-SIP strategies?

Not applicable.

Part 3. Outcome Analysis

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 4. System Analysis

1. Further assessment by the CWD of its service delivery system and mechanisms.

Upon CalWORKs approval, the case manager determines if the participant is required to be referred to WTW. If a referral is required, the case manager then sets an appointment to review the WTW case requirements. The case manager will call the family to introduce themselves, review the benefits of participating in WTW, and ascertain if the family has located a childcare provider (if needed). The case manager utilizes their daily eExemplar workload report to monitor initial engagement, participation, and activity completion.

Through Monthly Contacts, the case manager continues to build the relationship with the participant, offering to reschedule appointments when necessary, ensuring supportive services are provided, and making appropriate referrals to services as needed.

2. Describe the process for providing a full-time childcare authorization to client (including vouchers, payment, tracking, etc.).

Upon CalWORKs approval, clients who are referred to WTW program are provided a CCP 7 form if they indicate a need for childcare. Inyo County HHS then submits a referral to the contracted agency of Inyo County Office of Education to provide Child Care Services through Child Care Connection. The contracted agency then works with the client on finding a provider and completing all necessary paperwork.

3. How does the CWD ensure transportation needs are addressed for clients to attend Orientation and Appraisal?

Upon CalWORKs approval, clients who are referred to the WTW program are asked about transportation needs for attending any upcoming initial engagement appointments. Inyo County HHS offers mileage reimbursement, bus passes, or transportation from HHS because public transportation is limited in Inyo County. Inyo County HHS makes every effort to inform the client of what transportation assistance is available to them to be able to meet the requirements of the program.

4. General Measure Analysis

Upon the initial engagement process for the WTW program, the case manager schedules an appointment for Orientation. Before the Orientation, the case manager reviews the WTW program, program materials, the requirements of the program, and any possible exemptions that the client may need to pursue if they are unable to participate or anticipate barriers preventing them from participating. If a participant fails to attend their WTW Orientation and Appraisal, the case manager attempts to contact the participant by telephone two times, follows up with a second appointment letter, and utilizes the Monthly Contact process which includes direct contact if possible. After the phone call attempts are made and two appointment letters are sent, if the participant fails to reschedule or give good cause as to why they are unable to attend the appointment and/or participate in WTW, the case manager will initiate the non-compliance and WTW sanction process.

Throughout the OCAT Appraisal, the case manager is screening for any barrier to employment or circumstances that indicate a need for a referral to barrier removal services. During the OCAT Appraisal, the participant is also offered a Learning Needs screening which helps further identify barriers. When developing the WTW Plan, the participant and case manager discuss the identified barriers, desired barrier removal services, and activities that align with the participant's individual and family goals. The case manager also looks at possible short-term goals to be able to assist the participant with removing any barriers to their long-term goals for the program.

Upon completion of the Appraisal process the case manager reviews the information to see if a referral for services is needed to assist the participant with achieving the short- and long-term goals. The circumstances and needs of the entire family are considered in barrier removal.

Part 5. Practice Changes to Consider

1. Why are measures in this programmatic grouping being considered?

Inyo County HHS is currently in the process of reviewing the initial intake process for CalWORKs and the initial engagement for the WTW program. Inyo County HHS will be developing and streamlining the early engagement process and short- and long-term goal setting to have success in the program. They will also be utilizing and implementing the CalWORKs 2.0 methods during this process. In reviewing these items and streamlining these processes HHS expects that the Orientation Attendance Rate, OCAT Appraisal Completion, and the First Activity rates will improve, and any other necessary changes will be made as appropriate.

2. Or, why aren't measures in this programmatic grouping being considered?

N/A

3. Are there best or promising practices that can be applied? What literature, data, or other information supports the practice?

With prioritizing the development and streamlining of the early engagement process for the WTW program, HHS anticipates the clients' success rates will increase along with the program outcomes.

4. If changes have been made to improve performance in the past, what were the changes, and the associated results?

Inyo County HHS, along with community partners, offered virtual activity options allowing clients to gain job readiness skills, resume writing, education, and access to barrier removal services during the COVID-19 pandemic. Virtual Job Fairs were also offered for trade programs to inform the clients of what other types of work are available.

5. Would a Peer Review be helpful in addressing challenges in this area?

Yes.

Part 6. Partner and Collaborator Feedback

1. Partner and Collaborator feedback and results provided on the programmatic grouping of measures.

Partner and collaborator feedback identified that the WTW Orientation and Appraisal Process needed improvement because it is a lot of information and paperwork given at one time. It was suggested that Inyo streamline the process for the participant and make sure to offer any supportive services, so the participant feels confident in the initial engagement period.

2. Describe how partner and collaborator feedback results influenced the measure analysis.

The partners and collaborators had an understanding of the re-engagement period for HHS as they were also focusing on their processes of re-engagement in their programs.

3. Did partners and collaborators agree with the measures selected for targeted improvement strategies? If not, describe the different perspective(s).

Partners and collaborators agree that increasing participant engagement is key to overall program success. We will continue to work with our partners and collaborators to refine and identify strategies to improve the engagement rate through the course of the SIP.

Section 5. Ongoing Engagement Analysis

Part 1. Ongoing Engagement Analysis

1. Compare performance to data baselines and, for process measures, to target thresholds.

Not applicable to the 2021-2026 Cal-OAR cycle.

2. Identify any emerging trends in the measures. What inferences can be drawn?

Due to the small caseload of HHS, the data does not show information regarding increases or decreases for the Engagement rate, Sanction rate, and Sanction Resolution rate. With the information that HHS collected internally, they found that the sanction rate is increasing due to HHS trying to re-engage with clients after the blanket Good Cause waiver due to COVID-19. Inyo County HHS has applied the flexibility of Good Cause while also trying to re-engage clients who have not participated in over two years. Internal process has also shown that the initial engagement process needs to be streamlined and after orientation and appraisal, a WTW plan with appropriate activities needs to be reviewed and implemented.

3. What factors may have contributed to the CWD performance on these measures? Consider both strengths and challenges, both internal and external to the CWD.

Two factors that may have contributed to these measures are: difficulty engaging clients after a two-year blanket Good Cause period; and, new staff implementing the WTW program. Documentation in the CalSAWS system may not have captured the information that was being provided and/or the services which were provided to participants.

4. Identify unmet needs and service gaps. Describe the CWD process for tracking and addressing these needs.

Inyo County HHS will be working with the eXemplar reporting system to construct a report to address the tracking process to identify clients' unmet needs and service gaps.

5. Identify changes or data trends since the last Cal-OAR process (not applicable during first Cal-OAR cycle). What impact does this have on service delivery and availability of services?

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 2. Demographic Analysis

1. Do disparities amongst different subpopulations exist?

With the data that was provided for this period we are unable to determine the disparities among different subpopulations. As more data is received, this information will be analyzed.

2. Are there disparities between the population being served, the services provided, and the services available in the community (either CWD provided or services available in the community)?

No disparities were identified.

3. What effort has the CWD made to address these disparities? Explain what barriers have arisen while addressing the disparities.

No disparities based on demographics were identified.

4. How may the results inform Cal-SIP strategies?

N/A

Part 3. Outcome Analysis

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 4. System Analysis

1. Further assessment by the CWD of its service delivery system and mechanisms.

On a monthly basis, the case manager conducts a monthly check-in with the clients to request information about the clients' current activities and request paperwork to enter into the Customer Activity log to document hours. The monthly contacts are entered into the clients' journals to document the contact and if Activity hours are received that is documented into the Customer Activity page to reflect the hours that are reported on a monthly basis to E2Lite.

2. General Measure Analysis

When a case is identified that will reach the 60-month time limit within the next 12 months, the case manager reaches out to the client to advise of the 60-month time-limit and to address any supportive services needed or additional training or needs the client may have. The case manager will also make a referral if necessary to the Housing Support Program for rental assistance and other partners to obtain services.

When the case manager identifies that an exempt participant would like to voluntarily participate in activities, they will review with them the potential activities and offer any needed supportive services. When the case manager is attempting to re-engage the exempt participant, they reach out by phone and letter to let them know that the exemption is expiring, and they would at that time attempt to set up a meeting time so the participant can anticipate what the requirements will be and when they need to start engaging. The case manager utilizes monthly contacts to re-engage with sanctioned adults by phone and by mail. When the participant requests to participate in the WTW program, an appointment is made to discuss what is needed to cure the sanction, sign the Curing Sanction forms, and move forward with an Appraisal and Assessment, depending on the time frame that the participant has been sanctioned, and review next steps. Inyo County HHS has internal staff that support the Family Stabilization program and Housing Support program. When a client needs or requests these services, a referral is then provided to that division and case managers in that division move forward with necessary supports.

Part 5. Practice Changes to Consider

1. Why are measures in this programmatic grouping being considered?

Inyo County HHS will continue to work on streamlining the initial engagement process and offer materials for clients that show specifics about the program, requirements, and other supportive services that are available.

2. Or, why aren't measures in this programmatic grouping being considered?

N/A

3. Are there best or promising practices that can be applied? What literature, data, or other information supports the practice?

Inyo County HHS will be working on material for the staff and clients that is at-a-glance information, such as any program updates, hot tips, WTW requirements, and job openings in the community.

4. If changes have been made to improve performance in the past, what were the changes, and the associated results?

Historically, HHS sought to enhance performance by assigning cases to program-specific case managers with specialized knowledge. Regrettably, this approach led to service delays due to mismatches in client and worker availability. Consequently, there were delays in administering the OCAT and assigning initial activities. This practice was

promptly revised, leading to the adoption of the current case management system employed by HHS.

5. Would a Peer Review be helpful in addressing challenges in this area?

Yes, a Peer Review would be helpful in addressing challenges.

Part 6. Partner and Collaborator Feedback

1. Partner and Collaborator feedback and results provided on the programmatic grouping of measures.

Through our collaboration efforts we have received feedback from our partners and clients that they would prefer to have a more comfortable environment to meet with the case manager.

2. Describe how partner and collaborator feedback results influenced the measure analysis.

Clients and stakeholders have shared that they would prefer a more relaxed environment when entering the office building and speaking to staff throughout the building.

HHS appreciates the feedback and is currently working on the décor of the meeting rooms to make the rooms more inviting and comforting to the clients. We are also including training with all staff and other agency partners to understand Trauma Informed Care and to implement it in our daily client conversations.

3. Did partners and collaborators agree with the measures selected for targeted improvement strategies? If not, describe the different perspective.

Partners and collaborators agree that increasing participant engagement is key to overall program success. Inyo County HHS will continue to work with partners and collaborators to refine and identify strategies to improve engagement rate through the course of the SIP.

Section 6. Supportive Service Analysis

Not applicable to the 2021-2026 Cal-OAR cycle.

Section 7. Education Service Analysis

Not applicable to the 2021-2026 Cal-OAR cycle.

Section 8. Employment and Wages Analysis

Part 1. Employment and Wages Analysis

1. Compare performance to data baselines and, for process measures, to target thresholds.

Not applicable to the 2021-2026 Cal-OAR cycle.

2. Identify any emerging trends in the measures. What inferences can be drawn?

The Cal-OAR Team examined and assessed data sourced from the CDSS Cal-OAR Dashboard and the Phase 0 Performance Measure Trend Reports pertaining to the Employment Rate of Current CalWORKs Individuals (Employment Rate), Wage Progression, and Post CalWORKs Employment Rate performance indicators. From the fourth quarter of 2020 through the third quarter of 2021, the Employment Rate in Inyo County has consistently surpassed the statewide average for California. The last two quarters exhibited rates of at least 20% higher.

3. What factors may have contributed to the CWD performance on these measures? Consider both strengths and challenges, both internal and external to the CWD.

As in most California counties, the most significant factor impacting daily life during this review period was the COVID-19 Public Health Emergency (pandemic), which began in March 2020. The pandemic impacted the community as a whole in Inyo County, with businesses and community-based organizations closing or reducing what they could offer. Inyo County HHS applied blanket “Good Cause” exemptions for WTW which directly impacted the hourly participation requirement. During the pandemic, HHS was focused on determining eligibility for the influx of CalWORKs, CalFresh, and Medi-Cal applications received. Because WTW clients were given “Good Cause” exemptions, WTW and all other available staff were reassigned from that program to assist in processing public assistance applications.

4. Identify unmet needs and service gaps. Describe the CWD process for tracking and addressing these needs.

Inyo County does not have a process for evaluating current and post CalWORKs participant earnings and employment opportunities. Inyo County HHS will continue to utilize the information tracked in the CalSAWS system while the client is receiving services.

5. Identify changes or data trends since the last Cal-OAR process (not applicable during first Cal-OAR cycle). What impact does this have on service delivery and availability of services?

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 2. Demographic Analysis

1. Do disparities amongst different subpopulations exist?

Data is not available to identify disparities by language, race, gender, or AU type.

2. Are there disparities between the population being served, the services provided, and the services available in the community (either CWD provided or services available in the community)?

No disparities were identified.

3. What effort has the CWD made to address these disparities? Explain what barriers have arisen while addressing the disparities.

No disparities were identified.

4. How may the results inform Cal-SIP strategies?

N/A

Part 3. Outcome Analysis

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 4. System Analysis

1. Analysis of program practices as they relate to each programmatic grouping of measures.

Inyo County HHS is currently in the process of adding a position to support the WTW program clients. The position will assist with additional classes to prepare for employment such as resume writing, application completion, and job readiness. Inyo County HHS also plans to implement an Expanded Subsidized Employment program with employers in the community to offer more opportunities for clients to train and work in different trades that are prevalent in Inyo County.

2. Further assessment by the CWD of its service delivery system and mechanisms.

Inyo County HHS provides supportive services for up to 12 months after exiting the CalWORKs/WTW program to provide support and case management if needed and requested.

3. General Measure Analysis

Inyo County HHS' process for engaging WTW clients includes reaching out by phone or mail to connect and meet with the client. Case managers are trained to engage clients, specifically around the WTW Plan and assigning activities. Initial case planning includes completing an interview and a WTW orientation within ten business days from first contact with clients. During the initial interview, case managers are required to complete the appraisal interview, review the WTW Handbook, assess for domestic abuse, behavior/mental health issues, physical disabilities, and other barriers that may preclude clients from participating in WTW activities. As needed, case managers are required to initiate referrals for services to contracted service providers and community-based organizations. The case manager strives to give as much support to the individual that is receiving services so that they feel comfortable discussing any issues or barriers during this process. Each case is looked at individually to provide the needed individual case management for the client to feel comfortable and successful. Inyo County HHS has a combination of clients that are self-employed and have unsubsidized employment and some clients choose to accept referrals for other services.

Part 5. Practice Changes to Consider

1. Why are measures in this programmatic grouping being considered?

Inyo County HHS is planning on offering and implementing an Expanded Subsidized Employment Program with employers in the community. Inyo County HHS will be working on building relationships with private employers that offer trade programs to better serve the clients in the community.

2. Or, why aren't measures in this programmatic grouping being considered?

N/A

3. Are there best or promising practices that can be applied? What literature, data, or other information supports the practice?

Inyo County HHS focuses on training staff from a strength-based and goal-oriented perspective based on training materials and curriculum provided through CDSS and UC

Davis. These are our primary sources of information about best practice and promising practices. Our meetings with neighboring counties also are sources of promising practices.

4. If changes have been made to improve performance in the past, what were the changes, and the associated results?

N/A

5. Would a Peer Review be helpful in addressing challenges in this area?

Yes.

Part 6. Partner and Collaborator Feedback

1. Partner and Collaborator feedback and results provided on the programmatic grouping of measures.

Upon review of the Employment and Wages performance measures for this period, HHS, and their partners and collaborators agreed the impact of the COVID-19 pandemic on clients and program participation overall was as expected. Individuals lost jobs, worked fewer hours, and sometimes, entire families could not afford to continue to reside in Inyo County and moved away.

2. Describe how partner and collaborator feedback results influenced the measure analysis.

Upon assessing stakeholder feedback, performance metrics, and community impact, it was noted that outcomes remained consistent countywide, regardless of whether individuals or families received CalWORKs cash assistance.

3. Did partners and collaborators agree with the measures selected for targeted improvement strategies? If not, describe the different perspective(s).

Partners and collaborators agree that increasing participant engagement is key to overall program success. We will continue to work with our partners and collaborators to refine and identify strategies to improve engagement rate through the course of the SIP.

Section 9. Exit and Reentries

Part 1. Exits and Reentries Analysis

1. Compare performance to data baselines and, for process measures, to target thresholds.

Not applicable to the 2021-2026 Cal-OAR cycle.

2. Identify any emerging trends in the measures. What inferences can be drawn?

Inyo County HHS was unable to identify any emerging trends and measures from the data provided. Rather, HHS has been tracking information from monthly reports that show the overall numbers of exits with earnings. The information shows that we do have some exits with earnings due to more job opportunities opening in the area. During the PHE, HHS applied the WTW Good Cause waiver and a temporary pause of the CalWORKs time-on-aid time clocks. During this period of time families remained on CalWORKs without having to participate.

3. What factors may have contributed to the CWD performance on these measures? Consider both strengths and challenges, both internal and external to the CWD.

The COVID Public Health Emergency (PHE) had significant impact on the CalWORKs program, with many more individuals becoming eligible for CalWORKs due to loss of employment. Data showed that the changes in eligibility regulations during the PHE, such as blanket “good cause” and COVID waivers, influenced the performance measures. With these changes, there was little direct contact between the case managers and clients due to clients being able to continue to receive their grant without completing activities and no sanctions. During the PHE, many of the recipients didn’t feel that they needed to participate. As the pandemic continued, families eligible for CalWORKs became ineligible due to an increase in the amount of EDD unemployment benefits that were issued, resulting in families exceeding the Income Reporting Threshold (IRT). During the PHE, HHS utilized all available staff to assist in conducting interviews and processing CalWORKs, CalFresh, and Medi-Cal benefit applications.

4. Identify unmet needs and service gaps. Describe the CWD process for tracking and addressing these needs.

An identified gap is the absence of a documented procedure that establishes standardized protocols to utilize the information for recruiting and matching current Welfare-to-Work participants to local job opportunities. Inyo County HHS will work with

local employers and monitor job market trends to match job seekers with employment opportunities that will assist clients to achieve self-sufficiency.

5. Identify changes or data trends since the last Cal-OAR process (not applicable during first Cal-OAR cycle). What impact does this have on service delivery and availability of services?

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 2. Demographic Analysis

1. Do disparities amongst different subpopulations exist?

No trends were identified by gender, race, language, or AU type during this review period.

2. Are there disparities between the population being served, the services provided, and the services available in the community (either CWD provided or services available in the community)?

No disparities were identified.

3. What effort has the CWD made to address these disparities? Explain what barriers have arisen while addressing the disparities.

No disparities were identified.

4. How may the results inform Cal-SIP strategies?

N/A

Part 3. Outcome Analysis

Not applicable to the 2021-2026 Cal-OAR cycle.

Part 4. System Analysis

1. Analysis of program practices as they relate to each programmatic grouping of measures

Inyo County HHS currently offers job readiness classes, case management and referrals to local CBOs that provide employment opportunities, education, and career development. Inyo County HHS is currently looking to add a position, to offer all of these services through HHS. Inyo County HHS is also looking to implement an Expanded Subsidized Employment program working with local businesses within all of Inyo

County. The hope is that, with this additional position, services can be expanded to offer to clients during and after receiving aid.

2. Further assessment by the CWD of its service delivery system and mechanisms.

There are no additional details to add.

3. General Measure Analysis

Inyo County HHS offers post-employment retention for up to 12 months after receiving aid. The WTW case manager continues to track the supplemental services that are requested to make sure that the client is receiving the support needed to remain off aid. Inyo County HHS continues to offer mileage reimbursement, bus passes, supportive services, a childcare referral to Stage 2 offered through the Child Connection office and a referral if requested to the local community college. The case manager meets with the client to discuss the circumstances that caused loss of employment and inability to pay basic rent, with a focus on identifying those resources and supports which can help the client move towards more stable employment. Survey data is not collected. For example, for CalWORKs clients who cannot pay their rent, assistance from the Housing Support program replaces the need to apply for diversion payments and helps them better budget for essential needs and make their payments correctly and timely. Through this approach, these clients can retain all the benefits of the CalWORKs program.

Part 5. Practice Changes to Consider

1. Why are measures in this programmatic grouping being considered?

Inyo County HHS believes that improvements can be made to better inform clients of the services that will continue to be offered through post-employment retention. Inyo County HHS will continue to track the services that are being utilized to know if improvements need to be made.

2. Or, why aren't measures in this programmatic grouping being considered?

N/A

3. Are there best or promising practices that can be applied? What literature, data, or other information supports the practice?

Inyo County HHS will continue to apply the CalWORKs 2.0 practices with goal setting, coaching, relationship building, regular check-ins and reviewing the needs of the whole

family. In utilizing this approach there may potentially be a reduction in the rate of reentries after exits with earnings.

4. If changes have been made to improve performance in the past, what were the changes, and the associated results?

N/A

5. Would a Peer Review be helpful in addressing challenges in this area?

Yes.

Part 6. Partner and Collaborator Feedback

1. Partner and Collaborator feedback and results provided on the programmatic grouping of measures.

Based on the feedback from partners and collaborators, HHS has determined that expanding Post-Employment job retention services under the CalWORKs 2.0 model would likely produce a better success rate for clients.

2. Describe how partner and collaborator feedback results influenced the measure analysis.

Through the partner and collaborator discussions it was confirmed that the services offered for post-employment job retention need to be tracked to determine the need for different services. It was brought to the attention of HHS that clients were not aware of all of the services offered through post-employment job retention when discontinuing from CalWORKs/WTW program. Inyo County HHS would like to implement a different strategy to better support clients during the job retention period.

3. Did partner and collaborators agree with the measures selected for targeted improvement strategies? If not, describe the different perspective.

Inyo County HHS is working with partners and collaborators to look at how, as a group, additional support can be offered to clients during the post-employment job retention period.

Summary of Cal-CSA Findings

Part 1. General Performance Analysis

1. How do measures directly and indirectly affect other measures?

Based on case data and case work experience, the extent of the client's initial engagement is foundational to success in the WTW program, including meeting the related performance measures. The most critical time is the initial engagement period with the client. If the client does not complete the initial WTW Orientation, they do not complete the OCAT Appraisal and do not meet with the case manager to develop the requisite WTW plan. Without these steps being completed, the client is not informed of the options for participation in the program, unaware of supportive services available to them, nor the monthly reporting requirements of the program. Implementing a streamlined process for this initial engagement will impact the engagement rate for the orientation and OCAT Appraisal rate.

2. Discussion of performance measure data trends, and impact of programmatic factors on performance measures and service delivery.

The COVID-19 pandemic that began in March 2020 put standard practice on hold and compelled HHS to adapt to unanticipated conditions both internally and while serving the public. The PHE resulted in business and school closures, childcare facility reductions and closures, employee layoffs, and an increase in applications for benefits. Inyo County HHS staff were transitioned to remote work while dealing with their own family crises, personal health, and wellness concerns. The CDSS issued blanket "good cause" exemptions and WTW sanction resolution for WTW clients. Inyo County HHS did not implement any business changes other than responding to the CDSS PHE policy updates.

3. Agency, partnership, and programmatic strengths and challenges.

Inyo County HHS has many well-established relationships with the CBOs in Inyo County. This has helped support HHS case managers in accessing all the services that are available within the community. Through coordination between HHS and CBOs Inyo regularly assesses what different services are needed in the community and which services are in demand. For example, partners are in regular discussion about the dimensions of the housing needs in Inyo County, including the high cost of housing. The services most highly utilized relate to meeting the need for short term and stable housing, behavioral health, and AOD counseling and support. In contrast to the overall County workforce which experienced a high rate of turnover, HHS has not had a high turnover rate. The need to keep the morale of the staff up has been essential in preventing the turnover. It is important to always think how HHS can not only improve processes but to make sure staff feel supported during transitions.

4. Areas identified for focused improvement, initial improvement strategies, and next steps for Cal-SIP development.

Inyo County HHS has identified Initial Engagement as the area which will be the focus for the Cal-SIP. This includes timely initial engagement with WTW, completing WTW orientation, and OCAT Appraisal as soon as possible. Case managers remind clients that timely completion of these requirements is necessary to qualify for childcare support. Practice shows that improving the initial engagement with clients will positively impact the WTW engagement rate.

In recent months, HHS and CBO discussions regarding improvements and necessary services mainly focused on access to services, especially given the challenges of the pandemic PHE. HHS will prioritize closer collaboration with clients to address sanctions and encourage participation in activities, aiming to avoid non-compliance and subsequent sanctions.