

**SAN BENITO COUNTY**

**CalWORKs County Plan Addendum**

**Submitted to California Department of Social Services  
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**I hereby certify that the County Board of Supervisors was briefed regarding the contents of this Plan addendum prior to submittal.**

  
\_\_\_\_\_  
**County Welfare Director's  
Signature**

**Kathryn Flores**  
\_\_\_\_\_  
**Printed Name**

**December 19, 2006**  
\_\_\_\_\_  
**Briefing Date**

# San Benito County CalWORKs Plan Addendum

## 1) County Goals

### A. General description of how the county will meet the goals of W&I Code 10540

San Benito County endorses the principle that all applicants and participants will be afforded equal opportunities to achieve self-sufficiency, irrespective of their race, national origin, gender or primary language. As soon as an applicant is approved for aid, they are referred immediately to the next available Job Search Workshop which includes Assessment Testing.

In order to help reduce child poverty in our state, and avoid the utilization of county GA funds, San Benito County is committed to meeting and exceeding all Federal and State participation rates. We will aggressively pursue training and employment opportunities for our community through all avenues available to us. We will work closely with the providers of job training to ensure that their services match the needs of the region's employer. We will provide intensive case management to participants with the goal of developing a confident, trained workforce ready to meet the needs of employers. We will refer pregnant and/or parenting teens and participants with children less than 5 years of age to the Family Resource Center that was developed in part with CalWORKs incentive funds. We will encourage the formation and maintenance of two parent families by expounding on the advantages of marriage such as legal, medical and family benefits that are recognized by the State of California. Religious, cultural and family traditions may also play a role in a decision to be married. Marriage provides a foundation for mutual respect, fidelity and support between husband and wife.

Emmaus House, which was established by the faith community, city, and donations of the general community, recently opened and is now available to battered wives and families. We are working with the families in the areas of child care, transportation, counseling and other supportive services to reduce the impacts of domestic violence for these families.

## 2) Participation Improvement

### B. Providing up-front engagement activities

**Description of policy(ies) or strategy(ies) that will result in program improvement (identify whether this is a new policy/strategy, a current policy/strategy that will continue to be promoted, or an expansion of, or revision to, current policy/strategy).**

The procedure for assignment to the Job Search Workshop & Assessment has been revised effective November 1, 2006, to enroll participants sooner. Once a participant has completed the intake interview process, found to be eligible for CalWORKs, completed orientation and based on their appraisal, they would be required to participate in the Welfare-to-Work Program, the participant, if appropriate, will be enrolled in the Job Search Workshop within 2 weeks. By the 5<sup>th</sup> week from completing the Job Search Workshop, the participant shall be brought in by their case manager to complete their Welfare-to-Work Plan. For those participants who have already been approved and moved onto a continuing case manager, the case manager will begin using the new procedure to enroll participants in the Job Search Workshop along with the current face-to-face appraisal they may have already set up.

## **What are the anticipated effects and percentages of families affected monthly?**

This is expected to primarily impact the CalWORKs intake caseload in the beginning. Currently the CalWORKs intake caseload averages 60 applications per month. Approximately 5% of these are denied, another 10% are not required to participate in the Welfare-to-Work program due to their status (SSI, Non-Needy payee, Drug Felon, Undocumented alien, etc...). The remaining 85% would be referred to the Job Search Workshop as soon as approved.

## **How will success be determined (quantitative and qualitative assessment of effects)?**

We expect these changes to increase the Work Participation Rate by an estimated 15% the first year and increase by 10% of the caseload for each year following. Due to early detection by sooner engagement, we expect a 25% increase in being able to identify barriers and exemptions.

## **C. Achieving full engagement by individuals who are required to participate, and who are partially participating, not participating, or are between activities**

### **Description of policy(ies) or strategy(ies) that will result in program improvement (identify whether this is a new policy/strategy, a current policy/strategy that will continue to be promoted, or an expansion of, or revision to, current policy/strategy).**

We have specialized caseloads to cover the different needs of participants. The sanctioned participants are handled by a single case manager. This case manager keeps in constant contact with these participants and also attends Multi-Disciplinary Task meetings with other agencies to develop strategies on engaging the participant. Each case manager for all required participants is involved with each of the services as needed for their participant. Case managers do pre-scheduled home visits, job site visits when feasible and telephone contact with their participants. Up-to-date information is input into the Welfare-to-Work system for each participant enrolled in the program for better tracking of where the participant is in their Welfare-to-Work plan and what areas may need more one-on-one contact between participant and case manager. This process is our current procedure with no planned changes.

## **What are the anticipated effects and percentage of families affected monthly?**

Case managers are currently putting into practice all resources known to them to engage the participants who have been approved for aid. IE: Following the current regulations of the W&I Code 10540, doing referrals for services as needed, pre-scheduled home visits, worksite visits when feasible, etc. Currently about 25% of all required participants of the Welfare-to-Work Program are not participating. This breaks down to about 10% of the participants being between activities, 12% are not fully participating (such as working under the 32/35 hour requirement) and those who have not been engaged due to our policy change and 3% of our participants are sanctioned. We anticipate to engage 100% of the mandatory participants through the early engagement process. We currently have seen within a 1 month period after the revision and implementation of our policy to the early engagement process, an increase of 50% participation in the Job Search Workshop.

## **How will success be determined (quantitative and qualitative assessment of effects)?**

Comparison of Welfare-to-Work statistical reports for engagement of clients will be reviewed on a month-to-month, quarterly and yearly basis. If after reports are reviewed we see any need for change due to the revision of our plan, we will go back to redesign our policy and strategies.

## **D. Providing activities to encourage participations and to prevent families from going into sanction status**

**Description of policy(ies) or strategy(ies) that will result in program improvement (identify whether this is a new policy/strategy, a current policy/strategy that will continue to be promoted, or an expansion of, or revision to, current policy/strategy).**

Our current policy follows all the steps that regulations have required since the beginning of Welfare-to-Work. Except for early engagement by the intake case manager, we have no anticipated impact of change in our policy and procedures for Welfare-to-Work. We currently specialize our caseloads to meet the needs of the participant. We work as closely as possible with the participant to ensure they are getting the best possible plan based on their circumstances and abilities. Pre-scheduled home visits are conducted by case managers to determine any other barriers that may be keeping a participant from participating. This keeps them from being sanctioned unnecessarily due to any misunderstandings they may have of the program and their requirements of participation. We meet with other agencies and community services to formulate strategies to engage or keep engaged current participants who may be struggling due to personal problems such as Substance Abuse, Mental Health, or Domestic Violence.

**What are the anticipated effects and percentage of families affected monthly?**

We expect to positively affect 10% of the sanctioned caseload and the high risk participants from being sanctioned by using the current strategies we have in place and the revision to our policy as outlined in this addendum.

**How will success be determined (quantitative and qualitative assessment of effects)?**

Comparison of Welfare-to-Work statistical reports for engagement of participants will be reviewed on a month-to-month, quarterly and yearly basis. If after reports are reviewed we see any need for change due to the revision of our plan, we will go back to redesign our policy and strategies.

## **E. Reengaging noncompliant or sanctioned individuals**

**Description of policy(ies) or strategy(ies) that will result in program improvement (identify whether this is a new policy/strategy, a current policy/strategy that will continue to be promoted, or an expansion of, or revision to, current policy/strategy).**

For those participants who have already been placed in non-compliance and have been sanctioned, we assign them to a specialized caseload. The case manager for this caseload keeps in constant contact with these participants to get them re-engaged. The case manager does pre-scheduled home visits, phone calls, gets information for other services that may be available to participants for any barriers they may have that is causing them to be non-compliant and refers them, if appropriate to Behavioral Health on a monthly basis if they are not already attending. For those participants that are categorized as being sanctioned for over 90 days and/or refusing to cooperate, we have also added a referral to Child Protective Services once the case has been discussed at the monthly MDT meeting and determined appropriate to be referred, to find out if there is some other reason a participant may not be participating that they are not disclosing to their current case manager.

## **What are the anticipated effects and percentage of families affected monthly?**

Under our current policy and procedures as described in the above paragraph, we are currently seeing a 10% decrease in sanctioned participants. It is our expectation to continue to decrease sanctioned participants by at least 10% of the caseload. We expect to continue to see a minimum of 10% decrease in sanctioned participants by reengaging the noncompliant/sanctioned participants and therefore increasing the Work Participation Rate.

### **How will success be determined (quantitative and qualitative assessment of effects)?**

Comparison of Welfare-to-Work statistical reports for engagement of participants will be reviewed on a month-to-month, quarterly and yearly basis. If after reports are reviewed we see any need for change due to the revision of our plan, we will go back to redesign our policy and strategies.

## **F. Other activities designed to increase the county's federal WPR?**

We will continue to strive to engage participants in core activities as we are currently doing. There are no current plans to change procedures unless we see a need after comparing statistical reports.

**G. Please provide a description of how the county will collaborate with local agencies, including, but not limited to, local workforce investment boards, community colleges, universities, adult schools and regional occupational centers/programs that provide activities that meet federal work participation requirements and provide participants with skills that will help them achieve long-term self-sufficiency. For each individual agency, responses should include elements such as how information is shared or will be shared, ongoing or planned contracts, ongoing meetings established, etc.**

**Description of policy(ies) or strategy(ies) that will result in program improvement (identify whether this is a new policy/strategy, a current policy/strategy that will continue to be promoted, or an expansion of, or revision to, current policy/strategy).**

The county has been working with the local community services to better serve our clientele from the beginning of the Welfare-to-Work Program. We are physically co-located with multiple key services necessary to achieve success, including the following agencies:

Go Kids, Inc., the local child care and referral agency. We share information regarding family composition, income and current child care provider. This ensures the smooth transition from Stage I child care to the Stage II and Stage III child care. We meet with Go Kids, Inc. when needed to keep updated on new child care laws.

Behavioral Health (Mental Health, Substance Abuse). We have a Memorandum of Understanding signed between the agencies. We share information on family composition, suspected barriers and any services needed. They in return verify participation in services and if they see a need for exemption due to Mental Health or Substance Abuse issues.

Community Services and Workforce Development (WIA, Community Action). The One-Stop Program was developed by multiple public sectors to help clients with school and training opportunities and is run primarily by the CSWD, a subsidiary of Health & Human Services Agency, and is housed in our Employment Development Department office. Participants are referred along with information regarding income, current job search and assessment testing, and supportive services that will be covered by Welfare-to-Work. CSWD is also

the local community referral agency. They help with housing, PG&E, food and other services to persons in the community who meet the low income guidelines regardless of whether they are receiving welfare benefits or not.

Employment Development Department. Participants are referred to EDD for job opportunities that may be available in the surrounding areas. The One-Stop Program is housed in the EDD office. The participants also have access to computers to be able to connect with the CalJOBS system. The Department of Rehabilitation and the Career & Work Development send a representative every Thursday afternoon to assist persons who may have Learning Disability Needs. We refer our participants to the Department of Rehabilitation when they score high on the Learning Disability Screening.

Economic Development Corporation and Small Business Bureau. We refer those participants who are interested in opening their own small business to the corporation for assistance.

Family Resource Center (Adolescent Family Life Program, New Beginnings, New Parents, pre-scheduled home visits for children under 5 program). FRC is a subsidiary of the Health & Human Services Agency. We share information on family composition, services needed, possible barriers and health concerns. They work primarily with pregnant and parenting teens who are not CalLearn eligible, families with children under 5 and new parents who are interested in parenting workshops. They also have a health nurse who keeps in contact with participants who may have health problems for the children.

Manpower, a local temporary employment agency. We refer participants for employment services. We verify to them that participants are eligible as low income and what supportive services are available to the participant through Welfare-to-Work. Upon occasion, Manpower has conducted a short introduction to their programs in the Job Search Workshop and what services are available through their agency.

We have monthly meetings with many of the agencies and quarterly meetings with others.

In 2001 we formed a Multi-Disciplinary Task (MDT) committee. The agencies involved include Behavioral Health, Child Protective Services, Community Services & Workforce Development, Family Resource Center, local high schools, Department of Rehab, Community Solutions and other guest agencies with whom we may have participants in common. We have a Memorandum of Understanding with Community Services & Workforce Development (a division of Health & Human Services Agency) for the On-The-Job program and other training programs we may refer participants to them for.

We meet monthly with the local community college, with whom we have a Memorandum of Understanding, to discuss common participants, their participation progress and the goals to keep the participant from failing. Many of our participants who have scored high on the Learning Disability Screening have enrolled and had their Learning Disability Testing done through the college. This has led to a reduction of duplicate services and misunderstandings of the Welfare-to-Work program. As a result of these meetings, there is better communication for programs available through the CalWORKs Program on campus. This has led to more work study slots for our participants. We are able to coordinate the client's Welfare-to-Work Plan with their Vocational Education Program to better meet the participant's needs.

We meet monthly with Community Services & Workforce Development for updates to programs and the One-Stop Partnership for updates to new programs or funding available.

We meet quarterly with Local Child Support Agency, with whom we have a Memorandum of Understanding, which has generated better communication between the agencies and as a result, has enhanced participant cooperation with the Local Child Support Agency. Hence, this has resulted in a reduction of child support non-cooperation penalties.

Through the collaboration with the various agencies we have been able to better track on-going participant participation, see where the participant may be falling short in the expectations of their current Welfare-to-Work Plan and to develop the skills and education that will lead to self-sufficiency. This has led to more participation, discovery of barriers and a general feeling of accomplishment for all involved, that participant's needs are being met. Our expectation is to continue the improved communication between agencies and to maintain the status quo.

### **What are the anticipated effects and percentage of families affected monthly?**

We expect the collaboration of the various agencies to continue to provide good services to the participants on a monthly basis to help them obtain self-sufficiency. The communication we have established between various agencies has allowed us to quickly act on problems that have arisen and together provide solutions to the barrier within the month or less. Through the early engagement of participants and our collaboration with these other agencies, we expect to serve at least 10% more participants monthly.

### **How will success be determined (quantitative and qualitative assessment of effects)?**

Comparison of Welfare-to-Work statistical reports for engagement of participants will be reviewed on a month-to-month, quarterly and yearly basis. If after reports are reviewed we see any need for change due to the revision of our plan, we will go back to redesign our policy and strategies.

## **3) Plan to measure quarterly progress**

### **H. Plan to measure quarterly progress**

#### **Measure of quarterly progress:**

On a quarterly basis a report will be generated for workshop attendance and completion of the program due to the revised up-front engagement policy that went into effect November 1, 2006. This will measure the extent of progress or non-progress of our revised procedures.

Comparison of Welfare-to-Work statistical reports for engagement of participants will be reviewed on a month-to-month, quarterly and yearly basis. If after reports are reviewed we see any need for change due to the revision of our plan, we will go back to redesign our policy and strategies.

#### **Projected impact on county's federal WPR:**

Barring any unforeseen economic or natural disasters, this should allow us after 1 year to project for the following 2 years. At this time we are projecting a 15% increase in the Work Participation Rate for the first year and 10% increases in the following 2 years.

## 4) Funding

<b>Program Component</b>	<b>Fiscal Year 2005-06 Actual Expenditures</b>	<b>Fiscal Year 2006-07 Budgeted Amount</b>	<b>Description of how additional funding provided in Fiscal Year 2006-07 will be used *</b>
<b>CalWORKs Eligibility</b>	<b>\$553,836.00</b>	<b>\$682,503.00</b>	
Administration			
WTW Employment Services	\$600,034.00	\$800,461.00	Serving more participants through early engagement
CalWORKs Child Care	\$601,629.00	\$630,783.00	serving more participants through early engagement
Cal-Learn	\$ 24,379.00	\$ 36,696.00	Serving more participants through early engagement.
CalWORKs Funded Mental Health Services	\$ 66,872.00	\$ 82,504.00	Serving more participants through early engagement
CalWORKs Funded Substance Abuse Services	\$ 62,446.00	\$ 67,572.00	Serving more participants through early engagement.
Other			
Other			

\* Funding for Mental Health Services and Substance Abuse is from the State Allocation  
 Funding for the rest of the Program Components is from the State Allocation, Performance Incentives, Realignment, and County General Funds