

# COUNTY OF LOS ANGELES OFFICE OF CHILD PROTECTION

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EXECUTIVE DIRECTOR

March 13, 2017

To:

Supervisor Mark Ridley-Thomas, Chair

Supervisor Hilda L. Solis Supervisor Sheila Kuehl Supervisor Janice Hahn Supervisor Kathryn Barger

From:

Judge Michael Nash (Ret.)

**Executive Director** 

SECOND 90-DAY PROGRESS REPORT ON THE CONSOLIDATION OF THE DEPARTMENT OF CHILDREN AND FAMILY SERVICES' PUBLIC HEALTH NURSE PROGRAM WITHIN THE DEPARTMENT OF PUBLIC HEALTH

On September 13, 2016, the Board of Supervisors directed the Office of Child Protection (OCP), in collaboration with the Chief Executive Office (CEO), Department of Children and Family Services (DCFS), Department of Public Health (DPH), and applicable unions, to consolidate the DCFS Public Health Nurse (PHN) program within DPH. With the purpose of building a PHN program that promotes and improves child well-being, health, and safety, the Board specifically directed the OCP to:

- 1. Engage all affected stakeholders, including, but not limited to, the CEO, DCFS, DPH, and the applicable unions, in discussions relating to the plan, progress, and desired outcomes of the consolidation
- 2. Direct the CEO to identify funding should any costs related to the transition accrue, to ensure cost neutrality for DPH
- 3. Determine, using both anecdotal and evidence-based practices and research, how to most effectively utilize the PHN program for the purposes of child welfare and safety, once it is transferred to DPH
- 4. Provide progress reports every 90 days on the efforts and outcomes relating to the consolidation<sup>1</sup>

This memorandum is an update on the progress made toward consolidating the DCFS PHN program within DPH since our last report that was provided to the Board on December 13, 2016.

<sup>&</sup>lt;sup>1</sup> Item 2, Board Meeting of 9/13/2016, requested by Supervisors Hilda L. Solis and Shelia Kuehl

#### **Steering Committee**

The Inter-Agency PHN Program Consolidation Planning Group (Planning Group) includes PHNs, Supervising PHNs (SPHNs), Nurse Managers, affected Intermediate Typists Clerks (ITCs), medical directors, program directors, and fiscal and human resource staff, as well as representatives from the CEO, the OCP, and the Service Employees International Union (SEIU) 721. The Planning Group and its various subcommittees meet regularly to ensure that the July 1 consolidation timeline is maintained, and to troubleshoot any issues raised by its subcommittees (such as how to keep the DCFS policy section apprised of any PHN policy changes affecting DCFS).

#### <u>Staffing</u>

The human resources subcommittee has identified the essential documents needed from DCFS Human Resources and other staff for the smooth transition of personnel into DPH. DPH Human Resources will arrange for Live Scans for individuals transferring from DCFS, and DCFS Human Resources are holding ongoing one-on-one meetings with several ITCs to finalize transfer decisions.

A meet-and-confer with SEIU 721, DCFS, and DPH is being scheduled to discuss potential concerns—mostly about work-schedule policies—raised by SEIU members.

#### **Communications**

As mentioned in our December 2016 report, a Survey Monkey forum was made available to PHNs and SPHNs to express any concerns and questions they had regarding the consolidation of the DCFS PHN program. The most frequently asked questions from PHNs fell into six categories:

- Funding
- Workflow/policies and procedures
- Workload
- Data and IT systems
- General program management
- Human resources (i.e., program reporting structure, seniority, work schedules, vacations, transfers, and professional development)

These questions helped shape the first quarterly consolidation update meeting held for affected staff and hosted by the communication subcommittee on February 16, 2017. The purpose of the meeting included:

- Discussion of the PHN program consolidation's background and history
- Information on the Planning Group's various subcommittees and the tasks they must complete in order to meet the July 1 transfer date

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> Responses to questions received through the Survey Monkey forum and additional questions raised at the meeting (Attachment I)

More than 125 individuals attended from both DCFS and DPH, including PHNs, SPHNs, ITCs, and other key staff, as well as representatives from SEIU 721 and the OCP.

After the consolidation update meeting, the Survey Monkey forum was reopened so that staff could voice additional questions or concerns. The second quarterly consolidation update meeting is scheduled for April 20, 2017, and will address these concerns.

#### **Funding**

DPH has indicated that five new staffing positions are necessary for the consolidation of the PHN program: an Assistant Nursing Director, two Nursing Instructors, a Nurse Manager, and a Secretary II. Based on the positions and the allocation of costs between the two departments, an estimated ongoing funding need of \$652,000 was identified. To ensure the cost neutrality of the transfer, the CEO has indicated it will request that these monies be placed into the Provisional Financing Uses budget unit in the Fiscal Year (FY) 2017–18 Recommended Budget, pending further negotiations with the two departments.

DPH and DCFS will request the transfer of the DCFS PHN budget and program items during the FY 2017–18 Final Budget phase.

#### **Policy**

The workflow/policy and procedures subcommittee has conducted a review of the major policies and procedures affected by the consolidation, and are revising those policies to eliminate duplications of effort among PHNs, Children's Social Workers (CSWs), and ITCs.

#### **Best Use of PHNs**

The OCP has held multiple meetings to determine the best use of PHNs in child welfare that included PHNs, SPHNs, Nurse Managers, DCFS and DPH staff, Hub physicians, Board Deputies, attorneys from the Alternate Public Defender and Children's Law Center, medical directors, and SEIU 721. The discussions from our last two meetings focused on how CSWs and their supervisors, managers, and regional administrators utilize PHN services within their offices.

Based on these meetings, several PHN services have emerged as vitally important to addressing the needs of children and families who touch the child welfare system. The OCP will work with DCFS and DPH to see how these services can be enhanced and/or prioritized. We are also awaiting a report from the workload subcommittee to see how prioritizing these key services would affect workloads, and what other services currently provided by PHNs could be performed by other staff.

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#### Independent Evaluation of the CSW-PHN Joint Visitation Program

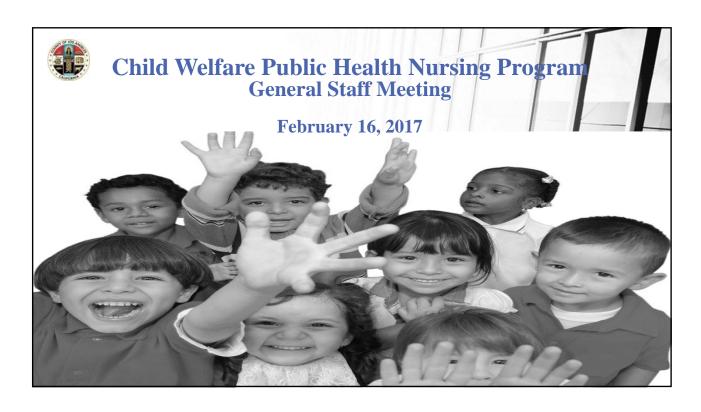
A no-cost contract with the Children's Data Network (CDN) has been executed for an evaluation of the CSW-PHN Joint Visitation program; we are working with DCFS and CDN to move this evaluation forward.

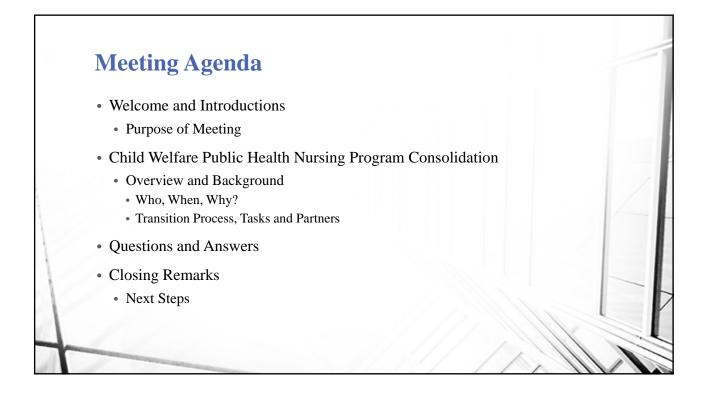
Our next update will be provided to the Board on June 13, 2017. If you have questions, please contact me at (213) 893-1152 or via e-mail at <a href="mailto:mnash@ocp.lacounty.gov">mnash@ocp.lacounty.gov</a>, or your staff may contact Karen Herberts at (213) 893-2466 or via e-mail at <a href="mailto:kherberts@ocp.lacounty.gov">kherberts@ocp.lacounty.gov</a>.

MN:CDM KMH:eih

Attachment (1)

c: Executive Office, Board of Supervisors
Chief Executive Office
Children and Family Services
County Counsel
Health Services
Mental Health
Public Health





### **Ground Rules**

- Be sensitive to the diverse cultures, organizational mission, professional training
  duties and responsibilities of partners around the table (e.g., DCFS and DPH;
  professional disciplines -social workers, public health nurses, clerical support,
  physicians, direct line staff, supervisors, managers; office-specific norms,
  procedures and protocols, etc).
- Understand each other's perspectives (goals and responsibilities).
- Maintain confidentiality of discussions discussions are to be kept confidential to ensure people are free to express their ideas and suggestions, and avoid the spread of misinformation.

### **Ground Rules**

- Don't personalize statements.
- Be polite and courteous.
- Agree to disagree.
- Cellphones are to remain silent during meetings.
- Above all else: be child-centered in our deliberations.

## Overview and Background

- Department of Children and Family Services (DCFS)
  - Public Health Nursing Program
    - Emergency Response Services (including Blue Ribbon Commission)
    - Family Maintenance
    - Medical Hubs
- Department of Public Health (DPH) Children's Medical Services (CMS)
  - Health Care Program for Children in Foster Care (HCPCFC)
- Office of Child Protection (OCP)

### Overview and Background (continued)

- Q. Who made decision to consolidate the programs?
- A. The Los Angeles County Board of Supervisors approved a motion on September 13, 2016, instructing the Executive Director of the Office of Child Protection to work with the CEO, DCFS, DPH, relevant unions and other stakeholders to consolidate DCFS' PHN program within DPH.

# Overview and Background (continued)

- Q. What is the rationale for the consolidation of the programs?
- A. To build public health nursing program that promotes and improves child well-being, health and safety.
- Q. What is the target date for consolidation?
- A. July 1, 2017

### Overview and Background (continued)

The Board also instructed OCP to:

- A. Work with affected stakeholders
- B. Work with CEO to identify funding to ensure cost-neutrality of the program transfer to DPH
- C. Determine to how to most effectively use the consolidated PHN program for purposes of child welfare and safety once it is transferred to DPH.

### **Transition Planning Partners**

- Chief Executive Office
- Department of Children and Family Services
- Department of Public Health
- Office of Child Protection
- SEIU 721

# **Transition Planning Tasks**

- · Outline scope of transition
- Develop a MOU between DCFS and DPH
- Identify human resources issues
  - Number of staff transferring
  - Transition / onboarding process
  - · Questions and concerns
  - Potential staffing gaps
- Determine funding needs and sources
- Review workflows, policies and procedures
- Develop and implement a communications plan
- Identify data and information systems needs

# **Transition Planning Process**

**Two-tiered Process** 

- Short- to Mid-term
  - Consolidation of DCFS PHN and DPH-CMS HCPCFC
- Long-Term
  - Led by the Office of Child Protection
  - Creation of a seamless system of care for addressing the health and safety needs of all children in the County's child welfare system

# **Transition Planning Process**

- Inter-Agency CWPHN Program Consolidation Workgroup
- MOU Workgroup
- Finance Workgroup
- Workflow, Policies and Procedures Workgroup
- Communications Workgroup
- Data and IT Systems Workgroup

# **Inter-Agency CWPHN Program Consolidation Workgroup**

- Purpose:
  - To guide the development and implementation of a plan to coordinate various child welfare public health nursing programs into the Child Welfare Public Health Nursing Program (CWPHN Program).
- Meetings:
  - Monthly at DCFS Headquarters (Shatto Place)
- Members:
  - Management, staff and other representatives from DCFS, DPH, OCP, CEO and SEIU

### **MOU Workgroup**

- Purpose:
  - To develop the initial draft of the Memorandum of Understanding governing the consolidation, implementation, and management of the CWPHN Program.
- Meetings:
- August 31 October 31, 2016
- Additional meetings to be scheduled: April June, 2017

### **MOU Workgroup**

- Members:
- DCFS: Laura Austin, Elizabeth Small, Deborah Stewart, Markeitha Harris, Lisa Sorensen, Maria Romero, Maria Lieras, Ed Guerrero, Elizabeth Small, Mary Whaley, Tiffany Countryman, Denise Ortiz, Sabrina Bucks, Clarissa Rennison, Nelly Lim, Sabrina Walker
- DPH: Anna Long, Alan Tomines, Angie Millan, Julia Wood, Karen Solomon, Karen Motus, Connie Moon, Sofia Lujano, Pamela Jones, Aundray Burks, George Smith, Carlos Vega-Matos,
- OCP: Karen Herberts
- SEIU: Carolyn Conter, Marisa Szeps

### **Finance Workgroup**

- Purpose:
  - To identify funding options to ensure cost neutrality of the transferred DCFS PHN program to DPH.
- Members: CEO, OCP, DCFS, DPH representatives

### Workflow, Policies and Procedures Workgroup

#### Purpose:

To review all DCFS and DPH nursing policies and procedures, as well as the roles and responsibilities outlined by the MOU Subcommittee, to create a revised / consolidated set of policies and procedures for the CWPHN Program.

### Workflow, Policies and Procedures Workgroup

#### Members:

- DCFS: La Tasha Jones, Maria Lieras, Maria Romero, Lisa Sorensen, Diem Tran, Donna Worden
- DPH: Sofia Lujano, Angie Millan, Karen Motus, Karen Solomon, Alan Tomines, Julia Wood

#### Meeting Dates:

December 14 and 27, 2017

January 11 and 25, 2017 Steering Committee: January 4th

February 1 and 8, 2017 Steering Committee: February 13th

### **Communications Workgroup**

#### Purpose:

To ensure ongoing and timely communications with DCFS and DPH staff impacted by the consolidation of CWPHN Program.

#### Members:

DCFS –Maria Lieras, Cara Rise, Maria Romero, George Smith, Lisa Sorensen, Shawn Watts

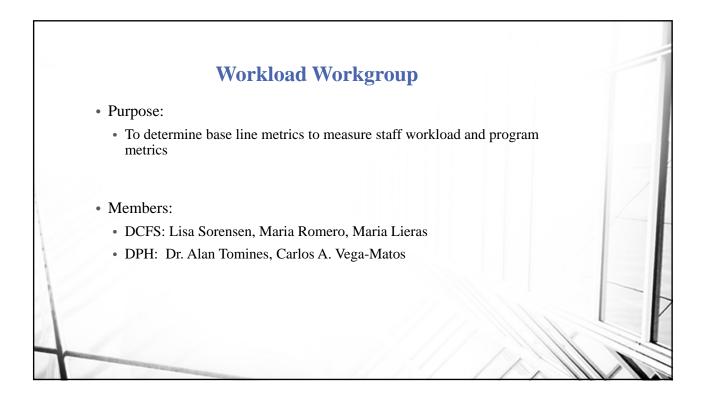
DPH – Aundray Burks, Rosemary Gramajo, Julia Woods, Carlos A. Vega- Matos, Liza Salvatti

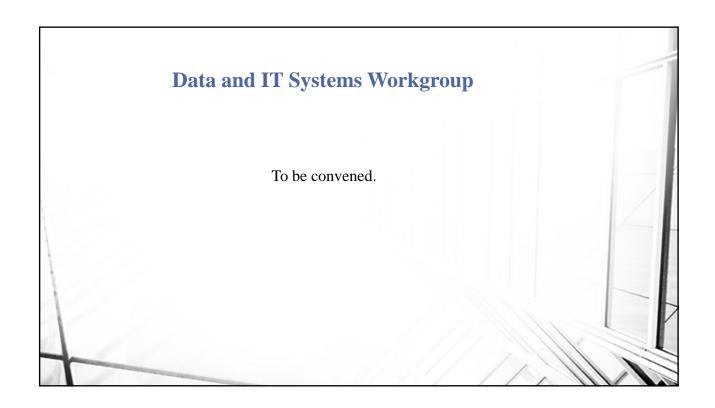
OCP - Karen Herberts

SEIU - Carolyn Conter, Marisa Szeps,

### **Communications Workgroup**

- DCFS email to staff about the Board motion
- Joint DCFS, DPH letter to CWPHN Program staff
- Regional meetings with impacted staff
- Survey monkey
- Quarterly meetings
  - 1st meeting on February 16, 2017





### **Frequently Asked Questions and Comments**

- Funding
- Workflow, Policies and Procedures
- Workload
- Data and IT Systems
- General program management and operations

- Human Resources
  - Program structure
  - Seniority
  - · Work schedules and vacations
  - · Office transfers
  - · Professional development

### **FAQCs – Structure and Operations**

- Q. Will there be major changes to the program structure and operations upon program consolidation on July 1<sup>st</sup>, 2017?
- A. No. No major changes are planned for the reporting structure or operations for the main components of the CWPHN Program:
  - Emergency Response (including Blue Ribbon Commission's CSW-Joint Visit Initiative)
  - · Family Maintenance (all range of activities within FM)
  - · Medical Hubs
  - Health Care Program for Children in Foster Care

There will be some minor changes to align with various DPH-CMS operating procedures, but no major changes in current lines of reporting, office assignments, or work schedules.

### **FAQCs - Funding**

- Q. How will the consolidated program be funded?
- A. Finance Workgroup has been established to identify ongoing funding and cost neutrality for the transfer and consolidation of the DCFS PHN program into DPH. Workgroup members include the CEO, DCFS, DPH, and OCP. Based on the workgroups conversations:
  - ER, FM, and Hub –related costs will be continued to be delivered and funded through DCFS under the Medicaid Program for 'Skilled Professional Medical Personnel (SPMP)'.

# **FAQCs - Funding**

- ii. DCFS will continue to fund the local match for the 96 positions currently carrying out ER, FM, and Hub activities.
- iii. DCFS has agreed to fund the local match monies needed for the CSW-PHN Joint Visit Initiative ordinance 20 positions for up to two years, post-consolidation.
- iv. DCFS will also fund agreed upon operating and overhead costs associated with ER, FM, and Hub program activities.
- v. Costs of the HCPCFC will continue to be funded under the State grant from the Department of Health Care Services to DPH-CMS.

## **FAQCs - Funding**

DPH has identified the need for additional items, including one Assistant Nursing Director\*, one Nurse Manager, two Nursing Instructors, one Secretary II and possibly one Research Analyst. The Finance Workgroup is working to finalize the funding source / formula for these items.

Please note that PHN members of SEIU 721 agree with and support the need for DPH's additional positions, but feel that a dedicated Nursing Director, rather than an Assistant Nursing Director, is needed for the consolidated nursing program

# **FAQCs – Human Resources Program**

- Q. What will be the new organizational structure of the program?
- A. As previously noted, DPH has requested additional items to manage the CWPHN Program and is working on the new organizational structure. DPH will announce the structure once it is approved.

### **FAQCs – Human Resources**

- Q. Will new PHN and clerical items are being requested as part of the consolidation?
- A. Requests for additional nursing and clerical items will be based on the findings and recommendations of the OCP-led process to determine the most effective use of PHNs in addressing the health, safety and well-being of the children in the child welfare system. Request for additional PHN or clerical items will take place upon conclusion of the OCP-led process.

### FAQCs - Human Resources

- Q. Will my supervisor change?
- A. No. For the moment, the DCFS PHN program transfer "as is." DPH will maintain the current supervisory structure for the first 8 to 12 months of the program consolidation. While minor changes may occur to adjust for unforeseen circumstances (e.g., staff turnover), any fundamental changes will be made once the first phase of the consolidation takes place, and based on the recommendations from the OCP assessment process

### **FAQCs – Human Resources**

- Q. Will my work location change?
- A. No, the program transfer "as is." DPH anticipates that if a change needs to be made, it will be due to an unanticipated need or circumstance.
- Q. How is seniority going to be determined?
- A. Seniority is determined by County seniority.
- Q. Will there be front-end and back-end seniority lists?
- A. No.

### **FAQCs – Human Resources**

- Q. How are requests for vacation and time-off going to be handled?
- A. Vacation requests are submitted at end of the year for the following year. Vacation is approved based on seniority. We usually have the nurses submit first and second choices. So, we try to give everyone one or the other.

For 2017, we will honor the vacation calendars already approved for both DCFS and DPH HCPCFC staff. We will have an integrated vacation calendar effective January 1, 2018.

### **FAQCs - Human Resources**

- Q. How are requests for transfer to another regional offices going to be handled?
- A. Management maintains a list of transfer requests in the order that the requests are received. Staff will submit a request for the change and once a spot is opened, management makes the decision based on order requests were received, and based on the need of the program.

For 2017, DPH will honor and maintain the transfer lists for DCFS and HCPCFC staff based on the needs of the program / regional offices.

### **FAQCs - Human Resources**

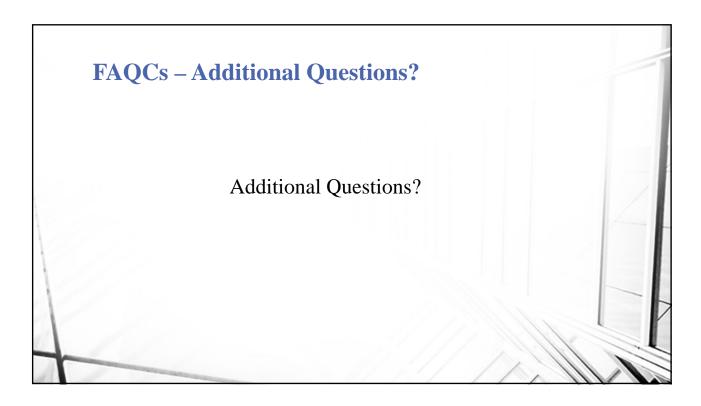
- Q. Will there be changes to my duties and responsibilities upon program consolidation?
- A. No. The duties and responsibilities of the CWPHN Program will remain as they are upon completion of the OCP assessment process, and DPH-CMS evaluation of the program operations.

### **FAQCs - Training**

- Q. How are requests for training opportunities going to be handled?
- A. On a first come basis, based on the order they are received, as well as based on the program needs and the role of staff making the request.
- Q. Do PHNs need to take personal time off to meet CEU requirements?
- A. No each nurse receives 60 hours to use for CE time within the 3 years of the MOU contract.

# **FAQCs – Work Schedules**

- Q. Will staff transferring from DCFS be able to keep their 9/80 or 4/40 schedules?
- A. DPH-CMS does not offer 4/40 schedules. However, and based on current needs of the DCFS PHN program, transferring staff will be able to keep their current schedule for up to 12 months after program consolidation. In the meantime, DPH will evaluate the needs of the program, any relevant recommendations from the OCP assessments process, and meet and confer with SEIU before making a final determination.



# **Next Steps**

- 1. Workgroups will continue to meet to finalize details
- 2. Continue to solicit input from line staff and supervisors
- 3. Provide guidance on the transfer and onboarding from DCFS to DPH
- 4. Schedule additional meetings with CWPHN Program staff
- 5. Continue working with OCP on their assessment process