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their home address. Consequently, it is difficult to contact them by either mail or telephone and unless the patient has some reason to contact the agency again on his own volition he can easily be lost.

Eligibility services at the hospital are a rather elaborate mixture of at least three distinct operations. The first two, screening and social services, are aspects of admissions procedure which will be most affected by the recommendation in the hospital study we mentioned. The third, eligibility, is the one in which the Welfare Department must inescapably continue to be involved regardless of whether the hospital's responsibility for eligibility is expanded beyond what it is now.

SCREENING PROCESS

Medical care at county hospitals is extended to everyone except non-residents of the county -- those with certain private medical coverage -- and military personnel. Most persons entering the hospital have already been issued Medi-Cal cards by virtue of previously determined linkage to categorical aid programs or hold some private insurance coverage, Medi-Cal, etc. One of the main functions that still remains, however, is the issuance of clinic cards which are basically time-limited permits for medical service. Usually they are issued from three to six months. The screening process sorts these applicants out quickly and those whose coverage is clear are sent on into the hospital for medical care with little further attention.

The medical eligibility unit at Highlands Hospital performs about 1,000 interviews per month. Verification in medical eligibility applications is the same as with any categorical aid that is on the basis of the declaration system. The basic difference between establishing eligibility for medical care as opposed to money grants is that eligibility is established without the

benefit of a home visit. There are basically three types of decisions that could be made through the screening process. A worker can:

1. deny aid;
2. issue a clinic card and determine the percent of cost which the applicant will pay in partial payment cases; or
3. determine that a person is eligible for a cash grant as well as for medical care and take the initial steps in processing an application for categorical aid and forward the application to the district office closest to the home address of the patient.

About two-thirds of the cases fall into this latter category.

SOCIAL SERVICES

Eligibility determinations are the primary responsibility of the hospital units, but Social Workers III are used to staff the unit. The stated reason for using social workers instead of eligibility technicians is that the applicants are usually interviewed in stressful circumstances and a broad knowledge of all categorical aid programs as well as Medi-Cal is required. Why it is thought that only social workers can acquire a broad knowledge of eligibility or handle tough interviews eludes the Task Force. This may or may not be true but it is costing the county a considerable amount of money to staff the hospital with social workers as opposed to eligibility technicians.

Technically, the hospital's eligibility staff are not supposed to do any therapeutic counselling or social work but in our review of the

job descriptions provided by the hospital staff we do not think that is the case. We think it is practically impossible to separate eligibility from social service under the present staffing arrangement. There is a strong social service flavor in almost everything that the staff at the hospital does. We do not know what social services should be provided but whatever they are they should not interfere with controlling the fiscal aspects of eligibility which is the primary purpose of the unit. It should also be remembered that there is a staff of MSW's employed by the hospital who are supposed to take care of the non-medical needs of the patients. Aside from the fiscal considerations there are some very good reasons for management to reassess the whole social service concept that has been built up within the hospital. There is just as much reason to separate pure eligibility from pure service in a hospital setting as there is anywhere else in the department.

Both of the supervisors we talked to at Highlands recognize that there are weaknesses in the screening process which results in people getting into the hospital without proper liability for their hospital costs established. They see a great need for being able to secure more positive identification of patients and getting better confirmation of addresses before the patients are admitted. They also noted that it takes two to six months to submit a bill to a patient after discharge. Staff at both hospitals feel isolated from higher supervision and state that they see departmental management very infrequently.

Our contact with the hospital staff convinced us that there are major differences in the way the eligibility units are regarded and used between Highlands and Fairmont Hospital. The Task Force considered this to

be a major problem too but it did not fall within the purview of this study as it relates to management at the hospital as much as it does the welfare department.

ELIGIBILITY FUNCTION

The focus of our review was here. It involved that group of people whose coverage is not cleared in the screening process and which are presumed to have eligibility for either Medi-Cal, a cash grant or both. It involves about 250 of the admitted patients per month whose eligibility must be cleared by further processing in one of the divisional offices. If the applicant appears to be eligible for Medi-Cal by linkage to one of the categorical aid programs and has not had previous contact with the agency an application is taken and forwarded to the division closest to the home address of the patient. It then becomes the responsibility of the divisional Medi-Cal unit or regular eligibility unit to verify the property, income, etc., make the required home call, and forward the completed application back to the hospital.

If the person cannot be linked to Medi-Cal his eligibility is computed by county standards and a time limited medical card is issued. The welfare department's responsibility ends when a full and definitive billing instruction is forwarded to central collections. Any application not thus cleared resides in central collections as an unbilled account. We see no way in which clearing these referrals will be improved by simply placing hospital eligibility under institutions because any cases which cannot be cleared immediately must be routed back to the welfare department for the final determination of eligibility. As simple as the procedure is it apparently breaks down through the failure of the divisional units to

process these cases and get confirmation of eligibility and billing instructions back to the hospital within the 60 day period.

What concerns us more is that it has been evident for some time that the system has not worked and no decisive, corrective action has been taken. Regardless of whether the problems are related to procedure, inter-departmental communications, or staffing at the hospital it seemed obvious to us that this is not a matter that is going to be resolved without strong intervention and follow-through from top management which has not occurred. Some aspects of the problem involved interagency considerations that no divisional chief is properly equipped to deal with considering the scope and limited nature of his authority. The procedures established by the responsible division chief to clear these medical referrals involves staff and control measures in every division of the department. Yet, the division chief is powerless to enforce compliance over a single element of the entire procedure outside of his own division.

It was not surprising to find in our review that the operating controls which are a highly important aspect of the administrative procedure vary considerably. The method of follow-up on delinquent cases for example, assumed the existence of one assignment clerk or control point which would have responsibility for following-up on all the cases within a division. These were not uniformly established.

Recognizing that this aspect of the procedure had broken down the East Oakland division chief responsible for the hospital eligibility units suggested to management a data processing application that would help with earlier notification and more effective follow-up on outstanding cases. After reviewing the problem to the limited extent we did, we had questions

ourselves about whether a data processing application would compensate for all the other weaknesses of the procedure. But the issue, again, is not whether the data processing application would or would not have worked but with the management reaction to the proposal. Our impression was that the recommendation was neither accepted or rejected but ignored.

The thrust of the two recommendations we make go to one inherent weakness which we find in the hospital procedure. None of the applications taken at the hospital can be completed there. Even if the hospital eligibility worker knows what programs the patient is eligible for, she cannot complete the application because she is unable to make the required home call, verify the existence of other dependents, income, etc. Moreover, two-thirds of the 250 cases per month which concern us have already applied for aid in one of the division offices and an open but incomplete case is in existence. The hospital worker, of course, cannot start a duplicate case so they notify the district worker that the applicant has come to the hospital and tell them to complete the application so they will know whether to bill Medi-Cal for the costs.

These cases are scattered over hundreds of regular eligibility workers who were basically trained to handle money grants. Medical cases only are handled in other special Medi-Cal units. There is not only dual eligibility to contend with but a great amount of flip-flop on cases coming off cash aid who are still entitled to receive medical care. Two full-time clerks at the hospital are used to chase down the responsible workers but the backlog of uncleared cases has not significantly decreased.

16. THE SOLUTION WE RECOMMEND IS TO CENTRALIZE ALL MEDI-CAL UNITS TOGETHER IN ONE DIVISION AND GIVE THE MEDICAL UNITS COMPLETE RESPONSIBILITY

FOR CERTIFYING BOTH CASH GRANTS AND THE MEDICAL PORTION OF THE ELIGIBILITY ON ALL CASES WHICH ORIGINATE AT THE HOSPITAL.

The reason special medical intake units exist is because when Medi-Cal was started five years ago it was a new program and it was considered necessary to administer it through special Medi-Cal only units. At the inception of Medi-Cal the main administrative problem was getting eligible people qualified, but that was accomplished a long time ago. The main problem now is accommodating the flip-flop that occurs between cash and Medi-Cal only cases. Pure medical determinations are a declining function simply because most of the people who are eligible for medical care are already on the program. The use of these Medi-Cal units must be broadened to meet an entirely different problem. Enough workers should be pulled from regular intake units or from the hospital eligibility staff to permit these hospital applications and flip-flop cases to be worked out completely by workers who fully understand both cash and Medi-Cal eligibility.

We would limit the function of the hospital eligibility staff to simply the initial screening and to responsibility for locating the pending cases within the divisions so they can be transferred to a worker who can complete the case. At the regular workload standard of 26 intake cases per month the whole hospital caseload should not require more than six or seven workers if they are free to do pure eligibility work without all the other distractions and handicaps they have by trying to do eligibility work and social services together. If some type of social services must be rendered to the patients by the eligibility staff it should be cleanly separated in such a way to avoid interfering with the eligibility process.

Consolidating these medical units in one place should also help in getting more accurate allocation of the administrative costs which are reimbursable from the State. We frankly believe that it is impossible now to accurately estimate the amount of supervisory and administrative burden to apply to Medi-Cal units when they are scattered throughout the organization. If the State tightens up on this as we believe they should the county will be in a much better position to make a full and proper claim for administrative costs.

SECTION III

OVERPAYMENTS AND CASELOAD VALIDATIONS

OVERPAYMENTS AND CASELOAD VALIDATIONS

In retrospect, one of the mistakes the Task Force staff admit to in the study was initially attempting to look at overpayments as a distinct problem. We spent perhaps two weeks counting, categorizing, and trying to analyze some 300 incidents of non-collectible and collectible overpayments. It yielded nothing that a more experienced analyst would not have understood beforehand. It is this: a high incidence of incorrect grant determinations is absolutely and predictably a consequence of weakness in the eligibility functions we have tried to identify and discuss in the subsections of the first chapter. Overpayments cannot be reduced until these functions of the eligibility process are in order and working together. To think of checking overpayments or even discussing them out of context from these very distinct individual parts of the eligibility administration is a futile and thoroughly wasted effort.

The only thing we or the department know about overpayments is the gross dollar value of those which have been found through the normal process of working the caseloads. We cannot suggest even what a proper allowance for overpayments should be. The only generality possible is that they are much higher than they would be if the whole eligibility process were working properly. For what little it means this table below shows the growth and magnitude of non-collectible and collectible overpayments.

Collectible Overpayment Trends
January, 1969 - March, 1971

<u>Month</u>	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1970 Collections</u>	<u>1971 Collections</u>
January	\$ 45,826	\$ 69,043	\$ 86,103	\$ 13,289	\$28,465
Feburary	31,434	42,520	53,716	9,766	12,566
March	28,940	66,142	132,220	10,231	18,983
April	21,342	35,422		11,804	
May	37,357	49,100		13,511	
June	32,992	33,241		14,439	
July	34,349	40,237		15,455	
August	22,662	32,843		19,256	
September	34,669	39,679		11,732	
October	30,495	77,111		17,184	
November	34,870	86,634		14,339	
December	<u>37,303</u>	<u>55,559</u>	<u> </u>	<u>11,711</u>	<u> </u>
Total	\$392,239	\$627,531	\$272,039	\$162,717	\$60,014

Non-Collectible Overpayments
November, 1970 - March, 1971

<u>Date</u>	<u>Amount</u>
November, 1970	\$53,517.00
December, 1970	\$38,745.93
January, 1971	\$52,564.23
February, 1971	\$47,860.31
March, 1971	\$67,859.41

The other things we can say about overpayments are largely academic. The staff presents the few observations we make more as enlightenment for the Task Force than anything else. The comments below have been restated in other ways throughout the entire report.

Overpayments may be categorized into four classes:

1. Those where the recipient reported correctly and promptly (non-adjustable and non-collectible);
2. Those where the recipient failed to report correctly and/or promptly (adjustable if liquid assets are available in a two-month period from date of discovery and collectible);
3. Those where the recipient willfully withheld information (always adjustable in two-month period and collectible);
4. Those where there was an administrative error (non-adjustable and non-collectible).

When the client reports promptly and correctly, and an overpayment occurs, this is usually due to unanticipated change in income or household composition. It is anticipated that with assistance planning this type of overpayment would be reduced.

When a client fails to report it immediately becomes incumbent upon the eligibility worker to make a judgment regarding whether the information was willfully withheld; or if the client tried to report and could not. With clients frequently not knowing their worker or not seeing a worker for considerable lengths of time, much can be overlooked. Discovery of overpayments correlates closely with the dates of the last renewal taken

and since agency records show many delinquent renewals, one must assume there are still many undiscovered errors. In the Family Service Division overpayments increased approximately 50% after the Division Chief started to enforce a renewal standard of 20 per month. Four conclusions seem possible on the basis of this experience:

1. At intake, recipients' reporting responsibilities must be clearly understood;
2. Recipients must be kept informed of the names of their workers and reminded of their responsibilities;
3. Workers must be trained and experienced enough to utilize information given them and also be able to communicate responsibilities to clients;
4. Renewals must be current and be made with as many face-to-face contacts with clients as possible.

When it is determined that a recipient concealed or willfully withheld information a fraudulent situation exists. Besides being adjustable and collectible, this type of case is usually referred to the Fraud Unit. However, it is also possible that even this type of deliberate concealment may be reduced if the client had more contact with the worker and if a home call was more frequent and renewals taken promptly. Without current renewals prosecution for fraud is most difficult. For some, an understanding of the importance of a sworn statement might be a deterrent, but when there is not contact on the part of the Welfare Department, the recipient is naturally more indifferent.

Administrative errors continue to make up a high portion of grants incorrectly paid. The reasons are many. However, the same reasons reappear

frequently and it seems obvious to us where action should be taken. These are the general conclusions we drew after reviewing 300 overpayments:

1. Inexperienced workers and inadequate training;
2. Inexperienced supervisors (some new supervisors are frequently less qualified than their subordinates);
3. Poor communication of changes in rules and regulations and regulations received from the State that are frequently retroactive, creating unanticipated overpayments;
4. Numerous deadlines to be met (missing one day might create an overpayment. Deadlines for offices differ);
5. Poor clerical backup ("holds" placed but not processed. Typographical and key punch errors).

Since little can be done in controlling overpayments without a vast number of other administrative changes we cannot fault the department too much for any of the procedures they have installed to control overpayments. Workers find most overpayments in the course of doing renewals or in normal, routine case reviews. Supervisors review the circumstances and make the determination on whether the payment is the result of an agency error, in which case it is non-collectible, or a client error in which case it is set up as a collectible overpayment. With collectible overpayments a notice is sent directly to Central Collections in the County Auditor's Office by the worker to set up the overpayment as a

collectible account. Division chiefs review and certify the overpayments which are determined to be non-collectible. From the data it appears that Central Collections has had more of an interest in non-collectible overpayments than the Welfare Department.

In view of the limited success that Central Collections seems to have collecting overpayments considered to be collectible, there is probably little point in reviewing the non-collectible overpayments from the standpoint of whether more of them would be collectible. There is not, however, a good review process for this and these determinations are made largely by middle management or at the supervisory level in the organization. Recently a change in Welfare Department procedure was made which will prevent non-collectible overpayments from being reported to Central Collections.

As the staff's understanding of eligibility increased our conviction about the root cause of overpayments became so strong that we were strongly tempted to ignore overpayments as a specific problem. Overpayments cannot be considered apart from the administrative process which controls eligibility and income maintenance generally. The essentials of the process as we see them was the subject matter of Section I. We deal with the subject mainly as a way of responding to one of the policy items in this year's budget concerned with the question of setting up a permanent staff to do "conventional validation" of AFDC caseloads. The support for the item was based on the argument that if management knew more precisely where its errors were occurring they would be in a better position to control overpayments, administrative errors, and other kinds of tangible mistakes in eligibility. By "conventional validation" we mean anything similar to the mandated procedure now followed in validating the adult programs. In adult

caseloads the validation workers review a regular number of cases each month checking for a specified list of defects covering 20 to 30 points of eligibility. Findings are presented in very abbreviated, statistical State controlled format that shows only the incidence of error and what kind of errors are occurring. The analysis does not show why the errors occur.

The recommendation the Task Force submits on this policy item is completely different from what we would have suggested at an early juncture of the study. 17. IT IS RECOMMENDED THAT THE COUNTY NOT IMPLEMENT A CONVENTIONAL VALIDATION PROGRAM FOR AFDC. The Task Force believes that enough is known now about the condition of the AFDC caseloads to safely make a managerial judgment that the entire caseload is in a bad condition. We see no worthwhile purpose in developing more absolute statistics on how many budget or eligibility mistakes are present before management starts taking some action on the cause of the overpayment problem. Requesting a regular validations unit for AFDC may superficially sound very enlightened but in this instance we feel it is only another mistake in management's ability to make a proper assessment of the real nature of the problem they confront and to move decisively on the basis of data they already have.

18. WHAT THE TASK FORCE RECOMMENDS AS A SUBSTITUTE IN PLACE OF A REGULAR VALIDATIONS UNIT FOR AFDC IS ABOUT A TWO OR THREE MAN TEAM OF INTERNAL AUDITORS WORKING UNDER THE ASSISTANT DIRECTOR IN CHARGE OF MANAGEMENT. Some of the work they may do may closely resemble validation reviews but the staff should be free to move throughout any part of the organization including both Social Services and Eligibility looking for weaknesses in areas that go far beyond what is examined in routine validation reviews. The work

of these internal auditors should not be as structured and as formalized as the regular validation worker. Their real purpose should be to locate problems for the sole purpose of finding solutions to them rather than simply counting problems which is our view of validations now. The justification for the three internal procedures coordinators was, also, a good description of how we thought the unit should be used.

The staff furnished the department the following results of a properly drawn validation sample we made of AFDC caseloads in cooperation with the State Department of Finance. By itself we think it furnishes sufficient data to management for them to identify a considerable number of specific problems in the AFDC caseload. As we write this report six months later it is not our impression that management has acted on any of the sample findings. The Task Force is confident that if a permanent validation unit was installed it would not show a significantly different result from our own study at this time.

Eligibility Control
Sample Results
Adult and AFDC Cash Grant and
Medically Needy Only Programs
Alameda County
August, 1970

	Adult Cash Grants	AFDC Cash Grants	Adult Medically Needy Only	AFDC Medically Needy Only
Universe (Case Action)	26,084	25,157	4,149	3,165
Sample Size	25	38	34	63
Number of Errors				
Ineligible	2	1		
Overpayments (1)	2	2	(a) 2	2
Underpayments (2)	3		2	1
Total	<u>7</u>	<u>3</u>	<u>4</u>	<u>3</u>
Percent of Errors				
Ineligible	8.0%	2.6%		
Overpayments (1)	8.0%	5.3%	5.9%	3.2%
Underpayments (2)	12.0%		5.9%	1.6%
Total	<u>28.0%</u>	<u>7.9%</u>	<u>11.8%</u>	<u>4.8%</u>
Amount of Errors				
Ineligible	\$ 145.00	\$ 148.00		
Overpayments (1)	10.00	44.00	\$ 78.00	\$ 212.00
Underpayments (2)	38.00		7.00	1,516.00
Responsibility for Errors				
Client	2			1
County	1	3	2	1
Client & County	4		2	1
Total	<u>7</u>	<u>3</u>	<u>4</u>	<u>3</u>
Percent of Responsibility				
Client	28.6%			33.3%
County	14.3%	100%	50%	33.3%
Client & County	57.1%		50%	33.3%
Type of Error				
Real & Personal Property	1			1
Living Expense	1			
Special Need Allowance	3			
Income	2	3	4	2
Other Requirements				
Total	<u>7</u>	<u>3</u>	<u>4</u>	<u>3</u>

Eligibility Control - Sample Results
(Continued)

	Adult Cash <u>Grants</u>	AFDC Cash <u>Grants</u>	Adult Medically <u>Needy Only</u>	AFDC Medically <u>Needy Only</u>
Projected Errors				
Ineligible	2,087	654		
Overpayments (1)	2,087	1,333	245	101
Underpayments (2)	3,130			51
Total	<u>7,304</u>	<u>1,987</u>	<u>245</u>	<u>152</u>
Amount of Projected Errors				
Ineligible	\$ 151,308	\$ 96,792		
Overpayments (1)	10,435	29,433	\$ 9,555	\$ 10,706
Underpayments (2)	39,657			77,316
Total	<u>\$ 201,400</u>	<u>\$ 126,225</u>	<u>\$ 9,555</u>	<u>\$ 88,022</u>
Net Overpayments	\$ 122,086	\$ 126,225	\$ 9,555	\$ (66,610)
Estimated Annual Amount of Errors				
Ineligible	\$1,815,696	\$1,161,504		
Overpayments (1)	125,220	353,196	\$114,660	\$ 128,472
Underpayments (2)	475,884	(3)		927,792
Total	<u>\$2,416,800</u>	<u>\$1,514,700</u>	<u>\$114,660</u>	<u>\$1,056,264</u>
Net Annual Overpayments	\$1,465,032	\$1,514,700	\$114,660	\$ (799,320)

- (1) Medically Needy Only Overpayments (share of cost too small).
- (2) Medically Needy Only Underpayments (share of cost too large).
- (a) Does not include one share of cost error in the amount of \$48,458.
- (3) In the interest of time and cost a figure on underpayments was not developed. A general idea of how underpayments compare with overpayments can be found from the report Review of the State System of Audit and Control of County Determinations of Eligibility for Welfare and Medi-Cal, Department of Finance, State of California, Jan. 25, 1971.

Eligibility Control
Analysis of Errors
Adult Cash Grant
Alameda County
August, 1970

	<u>Overpayment</u>			<u>Underpayment</u>			
			Client & County			Client & County	
	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Total</u>
<u>Real & Personal Property</u>							
Insurance	1		1				2
<u>Living Expense</u>							
Own Home							
Rent							
<u>Special Need Allowance</u>							
Restaurant					1		1
Telephone						1	1
Transportation						1	1
<u>Income</u>							
Social Security	1		1				2
Totals	<u>2</u>	<u>—</u>	<u>2</u>	<u>—</u>	<u>1</u>	<u>2</u>	<u>7</u>

Eligibility Control
Analysis of Errors
AFDC Cash Grants (Federal Sample)
Alameda County
August, 1970

	<u>Overpayment</u>			<u>Underpayment</u>			
			Client & County			Client & County	
	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Total</u>
<u>Income</u>							
Other Income	<u>—</u>	<u>3</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>3</u>
Totals		3					3

NOTE: Sample investigations used in this analysis were included in the federal sample for the 1969-70 fiscal year.

Eligibility Control
 Analysis of Errors
 Adult Medically Needy Only
 Alameda County
 August, 1970

	<u>Overpayments</u>			<u>Underpayments</u>			
			Client & County			Client & County	
	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Total</u>
<u>Income</u>							
Social Security		1					1
Interest-Dividends					1		1
Other						1	1
Excludable Income	<u>—</u>	<u>—</u>	<u>1</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>1</u>
Totals		1	1		1	1	4

Eligibility Control
 Analysis of Errors
 AFDC Medically Needy Only
 Alameda County
 August, 1970

	<u>Overpayments</u>			<u>Underpayments</u>			
			Client & County			Client & County	
	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Client</u>	<u>County</u>	<u>County</u>	<u>Total</u>
<u>Income</u>							
Earnings (wages, salary, commissions)	1						1
Other			1				1
<u>Real & Personal Property</u>							
Money, Savings, Investments					1		1
Totals	<u>1</u>	<u>—</u>	<u>1</u>	<u>—</u>	<u>1</u>	<u>—</u>	<u>3</u>

19. IN THE EVENT THAT ANY KIND OF ONGOING VALIDATION PROGRAM IS STARTED IN AFDC OVER OUR PREVIOUS RECOMMENDATION THE TASK FORCE ALSO RECOMMENDS THAT IT BE A MUCH MORE LIMITED ONE THAN IS CURRENTLY BEING DONE IN THE ADULT AID PROGRAMS. Twenty to 30 points of eligibility are checked in the design of the adult validation procedure. We see some factors as being infinitely more important than others. Why should any validation effort be expended on checking the accuracy of something like a laundry allowance or bus fare for medical transportation when the department knows that there are not effective controls over earned income or the children counted in the grants are not firmly tied down. Problems related to determination of basic need, number of children, income, and absent fathers are much more significant and subject to ready verification. The whole emphasis in the present validation program is completely backwards and is not centered on the big, major problems in the caseloads (see Appendix B).

The present program for validating adult cases is largely determined by federal regulation. The State Department of Finance has severely attacked the statistical methodology and the administrative use of the present validation program and suggests a number of changes which would affect local departments that we wholeheartedly support. The Federal Government has so far failed to approve the revised procedure. 20. THE COUNTY HAS THE STUDY AND IF A FEDERAL WAIVER IS OBTAINED WE RECOMMEND THE COUNTY ADOPT THE STATISTICAL SAMPLING TECHNIQUES OUTLINED BY THE STATE DEPARTMENT OF FINANCE. There were two important findings in the State study. One was that sample sizes are about twice what they have to be for reliable sampling conclusions to be drawn. Secondly, neither the state nor local departments are presently using the validation findings to any advantage

after they get them! By this assessment, validation effort in the adult program is more of a formality than a useful tool of management. We concur with both conclusions from our observations in this department and believe, along with the reasons already given, that management is not in a position to effectively utilize more validation information than they presently have. We have criticized management throughout this report for the failure of its information gathering system. In this situation we criticize management for its failure to act on information it has had at its disposal.

It troubled the Task Force to see the department trying to strengthen its validation and quality control section by adding more staff when they have been forced to do things which, in our opinion, seriously interfere with the ability of the section to perform its present responsibilities properly. We are referring to the effect of the Board of Supervisor's ordinance which made the Welfare Director personally responsible for an ongoing caseload of about 500 county employees who are also welfare recipients. As we interpret the language of the ordinance we think it gave very little choice to the Director but to bring the caseload into the validations unit where it could be supervised by the Assistant Welfare Director in Charge of Programs.

These cases are unusual in several respects. All the recipients have income and they probably know the law and regulations of welfare as well as many of the case workers. Instances are cited where recipients have actually called fiscal or data processing units to place holds or releases on their own warrants. Some have made up their own budgets and sent them to their eligibility worker. There is also a disproportionate number of appeals among this group of recipients. They are, to use one of the phrases, "welfare wise." Newspapers brought considerable attention to some of these

employee cases so it is understandable why the department and the Supervisors were particularly sensitive about them. There was some concern, too, about protecting the identity of the recipients, since many of them worked in the department. All of these factors made it important to handle the cases competently and the Task Force accepts that there were very sound reasons for consolidating these cases in one place. Getting all these cases together was, indeed, a most prudent move. We believe, however, that a fundamental mistake was made in having to relocate the cases within the validation section. This is because the responsibilities associated with managing any continuing caseload are just basically incompatible with the primary purpose of the validations section. If the main purpose was to provide competent handling of the caseload we agree that it has probably occurred, but at great expense to the department. After reviewing all the problems that seemed to be associated with handling the caseload within the validations section we think that the ordinance which caused it to be placed there was more of a nervous, political response to a public relations problem than it was a studied administrative action.

In part, the decision to place the employee cases in validations was an attempt to allow closer review by top management. That has occurred. The Assistant Director in Charge of Programs is in direct charge of the employee caseload. In addition to the close supervision he provides the eligibility staff, he must review all new additions to the caseload.

We accept the need for exceptionally capable handling of this group of cases for it is unusual in all the respects we indicate. But while accepting that the Task Force believes that placing the caseload under the direct supervision of an Assistant Director for Programs has forced one of

the most wasteful and illogical uses of top management we encountered in the study. The placement of this caseload within the office of the Program Director has diverted and demeaned the essential managerial purpose of this terribly responsible position. We cannot possibly accept the present arrangement as a proper placement of the responsibility regardless of how special the case may seem. Seeing the many crucial problems we do in the department and the kind of leadership and attention needed to meet them, it became most difficult at times to follow the orientation of management.

The Assistant Director estimates he spends about 15% of his time on employee cases. We see that portion of his time in another way. There are approximately 20 new intake cases coming into the employee caseload per month. An intake caseload for a full-time eligibility worker is only 26 cases per month. If the Assistant Director is reviewing and making final eligibility determinations on that many new cases he is, in fact, almost carrying a complete intake caseload. Even if the Director is able to do the reviews ten times faster than an eligibility technician or does them all at night he is still doing an eligibility worker's job. It is inconceivable to us that one of the four top men in the agency is being diverted from his managerial responsibilities with such an incongruous, technical task.

The Task Force believes that the employee caseload belongs, like any other group of recipients, back in one of the division offices within the mainstream of the eligibility process under the supervision of a competent Grade I Supervisor. The only special allowances we would make for it is to add an additional eligibility worker for a time in order to catch up

the backlog of renewals and to get the cases in good current condition. The fact that there are an unusually high number of appeals originating from this caseload may justify a slightly lower number of cases in the individual caseload assignment but that is the only concession we would allow.

21. ACCORDINGLY, THE TASK FORCE RECOMMENDS THAT THE EMPLOYEE/RECIPIENT CASELOAD BE TRANSFERRED BACK INTO ONE OF THE DIVISION OFFICES AND THAT THE ASSISTANT WELFARE DIRECTOR AND THE VALIDATIONS SECTION BE RELEASED FROM ANY DIRECT RESPONSIBILITY FOR EMPLOYEE CASES.

Another reason for this recommendation is that the State regulations are fairly specific in saying that an appeal action should not involve workers involved in the original eligibility determination. By moving the eligibility caseloads within the validations and appeals section it seemed to us that the department openly defied the intent of that regulation. We consider many of these kinds of State directives nonsense also but it does suggest to us that local welfare departments can be pretty cavalier about State regulation when it serves their purpose to do so. We hope the department offers the same resistance to the State in considering our recommendation on screeners. In this instance our recommendation on moving the employee/recipient caseload back to the division should be looked upon favorably by the State. Perhaps it will provide some bargaining material for negotiating agreement on screeners.

We discuss a proposal for relocation of the validations unit within a proposed Management Division under our section on the Organization Plan, later in this report.

SECTION IV
SOCIAL SERVICES

SOCIAL SERVICES

The Task Force finds itself addressing the question of the management and delivery of social services in Alameda County almost a full 10 years from the passage of the 1962 service amendments to the Social Security Act. These amendments were based on the assumption that more intensive social services delivered to welfare recipients would improve the capacity for self-support and reduce welfare rolls. This massive national effort, backed by increased federal subventions, was implemented by limiting AFDC caseloads to no more than 60 cases per social worker, requiring "social studies" on all family aid, and by providing child protective services to AFDC families.

The move to 60-to-1 caseload ratios resulted in substantially increased staffing of social workers in most county welfare departments. However, by the late 1960's it had become apparent that smaller caseloads were not having their desired effect. Five years of experience under the 1962 amendments had brought five successive years of caseload increases. It was generally felt that one of the main problems was the fact that even though workers had smaller caseloads, they were still required to spend large blocks of their time in activities only remotely related to direct delivery of services. A California legislative study in 1968, which focused on selected urban welfare departments, disclosed that 86% of the

social workers surveyed spent more than half their time in determining eligibility, and that 37% spent three-fourths of their time on eligibility determinations.¹ In addition to eligibility determination, there remained other office work to do, such as computing, revising, and writing budgets for each welfare case, controlling warrants, recording case progress, and office conferences and training sessions.

Since lower individual caseloads did not seem to have much impact on welfare program increases, a new assumption began to emerge by the late 1960's: if social workers could be relieved of most of the essentially clerical tasks associated with casework, then client-worker relationships might, at last, begin to produce some results in reducing the growth in welfare caseloads.

It should be noted that in addition to the finding that workers spent little time on services, there was recognition of other problems in the delivery of social services. The landmark study by the California Assembly Welfare Committee in 1969 concluded that services were poorly defined, were too often identified by workers as meaning individualized therapy and counseling, and were too frequently forced upon unwilling clients. The Committee report also concluded that no one was held accountable for results and that community social service resources were "fragmented, overlapping, and uncoordinated."²

¹California Welfare: A Legislative Program for Reform. A staff report to the Assembly Committee on Social Welfare, California Legislature, Sacramento, February 1969, p. 175.

²Ibid., p. 170.

The Assembly Committee examined these problems and responded to them with a series of recommendations that aroused considerable interest and testimony during the 1969 legislative session. Although many of the findings achieved support from a wide spectrum of interested groups, the only major recommendation that has so far been implemented in any way has been the separation of social services from eligibility determination functions, and the recognition of each as a distinct process, forming separate social service and "income maintenance" caseloads. Of course, it is not correct to say that the concept of "caseload separation" commenced with this 1969 welfare committee report. The recommendation actually came in the wake of a process that had already started in some California welfare departments as a result of the 1967 Social Security Amendments that gave the Secretary of Health, Education and Welfare the power to effect caseload separation and backed it with a fiscal disincentive of 50% (instead of 75%) federal matching funds for all caseloads not separated.

It is also not correct to say that caseload separation has developed quite as the committee report conceived it. Their separation concept involved a still larger proposal for jurisdictional caseload separation, with the State assuming social service caseload and the counties taking over "income maintenance" functions.

We have mentioned caseload separation here in the context of the 1969 Assembly report because the concept was prominent in the report, and it was the only recommendation in this major study of social service problems which was addressed to those problems and for which there is now

some experience. Obviously, state/county separation of social services and income maintenance has not occurred, but it has happened within California welfare departments, where it has been mandatory for AFDC since January, 1970. Clearly, caseload separation has been the most profound organizational change to occur in California welfare departments since the 1962 service amendments. We discuss the implications of separation for such matters as eligibility control, training, and departmental organization in other sections of this report. In this section, we look at social services after separation, in the hope of drawing some conclusions regarding the effect of this change upon services.

We could think of no better way of evaluating social services in this post-separation period than to ask the same research organization that contributed to the 1969 Assembly study to assist the Task Force in its review of social services. The social service study was contracted with Scientific Analysis Corporation, a San Francisco firm with considerable experience in social work evaluation. The study was designed and supervised by one of the principal members of the firm, Dorothy Miller, D.S.W. Dr. Miller's report is included as Appendix C.

The findings of Dr. Miller's study strongly suggest no essential difference in the nature of social services between the periods of combined and separated caseloads. Although Dr. Miller's analysis relies heavily upon a design that focuses on differences in the perception of service delivery between workers and client, her findings in this limited area raise serious, larger questions for the field of social service in general:

1. How can social services be described; are they mainly therapy and counseling or do they involve helping people solve specific problems related to food, clothing, shelter, education, training, employment, etc?

2. However described, what is the effect upon the lives of people who are given services by the welfare system?
3. What can be expected to happen to overall case-loads as a result of the delivery of services?
4. If services are as ambiguous as most of the research of recent years suggests, how can social workers or welfare departments be held accountable for what they do?
5. What would happen if services were eliminated from the public welfare system? Would caseloads increase? Would other community agencies fill any gaps thereby created? Should social services, after all, be a necessary adjunct to poverty services? Does a system that was originally designed to provide relief in cash or in kind create the most effective environment or conditions for offering social services?
6. Do personal, emotional troubles of the poor require public attention and expenditure any more than similar problems of middle-income people or the rich?

These questions are not original with the Task Force; they can all be found in current social work journals; in studies conducted by social work professionals; Task Force staff heard them raised during extensive interviews with Alameda County social work staff.

There is also another kind of question raised more frequently by the social work profession, particularly since caseload separation has forced closer examination of social work theory and practice. It is a question born of the professional frustration in dealing with the unyielding elements of the poverty environment; it is a question that is nurtured by ambiguous goals, increasing self-doubt about personal and professional effectiveness; it is a question that becomes increasingly insistent in a bureaucratic environment of uncertain future, shot through with morale problems.

The question is whether the proper role of the social work professional is in the manipulation of the individual client or in the manipulation of the environment in which he lives. Dean Alan Wade of the Sacramento State College School of Social Work stated the question as far back as 1965:

This brings us face to face with this question: What is social work for? Is it for the purpose of effecting individual adjustments to social conditions that cannot be changed? Or is it for the purpose of effecting planned and systematic changes in the social system itself?³

There is no reason to consider this question an exclusive concern of the social work professional. Workers in the fields of probation, public health, law enforcement, mental health, and elsewhere are also presented with this dilemma with no less frequency or sense of immediacy than the social worker. The desired direction of social change varies with professional

³Alan D. Wade, "Social Work's Triple Revolution," speech before the St. Louis chapter of the National Association of Social Workers, March 17, 1965, quoted in California Welfare: A Legislative Program for Reform, ibid., p. 182.

perspective, but the need for social change is nearly always viewed as an imperative. It seems to us that the function of the worker in the helping professions -- and in the agencies of social control -- is to address those "people problems" for which he has been trained, and that this is distinct from the personal exercise of his own citizen rights and responsibilities in promoting social change.

The Task Force is not convinced that it would care to have the social work profession divert and dilute services to people "...for the purpose of effecting planned and systematic changes in the social system," any more than it would propose a similar emphasis in, for example, law enforcement. Such large philosophical questions do occur, however, partly because of the present confusion in the social work field regarding professional identity and function. Meanwhile, as this debate is pursued, events occur in Washington and Sacramento which may lead toward the installation of yet another untested assumption about social services which may be every bit as significant as the 1962 amendments.

Without better evidence than is presently available on the nature and value of social services, the next major national legislative change may call for their virtual elimination from the welfare system; the measurement of shift in national policy from one untested assumption to another will thereby have been a full 180 degrees.

The answer to the social work dilemma lies not so much in speculation on the profession's role in society, but in careful, disciplined evaluation of the social service function within the welfare system itself. As we have suggested with respect to other procedures in the system, what is needed is

evaluation of service proposals on a pilot examination basis. While constraints of time and staff placed such an effort beyond the scope of this study, our findings demonstrate the need for such study, and we propose a number of objectives which further study should address.

One finding which forcefully demonstrates the present confusion on the delivery of services is the great range in caseload staffing patterns between counties. It suggests that in the months since the relaxation of the 60-to-1 caseload standards caseload staffing has been characterized more by casual drift, rather than conscious direction. As the table below indicates we selected five counties, more or less at random, and collected social worker staffing data and caseload data as of March, 1971 (with the exception of San Mateo County, for which we used December, 1970). The data was based on monthly caseload reports published by the State and staffing information submitted by the counties to the State on report Form WP-11. We were not able to adjust for such variable factors as caseload distribution by aid category, differences in reporting, differences in optional programs, percentages of caseload "in-service," etc. Even if this could be done we sense the results would still be startling, for we have a caseload staffing ratio ranging from 80 cases per worker in Contra Costa to 339 cases per worker in Fresno -- a differential in excess of 400%!

COMPARISON OF CASELOADS AND SOCIAL SERVICE WORKERS
SELECTED COUNTIES

	SERVICE WORKERS				SERVICE WORKER SUPERVISORS			
	Author- ized Positions	Actual Positions	Total Cases	Ratio of all cases to all Workers	Case Distribution	Author- ized Positions	Actual Positions	Ratio of Super- visors to Workers
ALAMEDA	253	248	62,760	253	OAS 23.4% Blind 1.5 Disabled 17.8 AFDC-FG 37.8 AFDC-U 6.0 Boarding Homes 2.2 Medically Needy 11.3	51	50	5.0
-97- CONTRA COSTA	401	356	28,453	80	OAS 21.2 Blind 1.2 Disabled 18.2 AFDC-FG 39.3 AFDC-U 7.3 Boarding Homes .3 Medically Needy 9.8	66	63	5.6
FRESNO	107	100	33,936	339	OAS 31.4 Blind 1.2 Disabled 17.4 AFDC-FG 32.4 AFDC-U 7.1 Boarding Homes 1.9 Medically Needy 8.6	17	17	5.8
SAN DIEGO	381	350	55,431	158	OAS 29.2 Blind 1.5 Disabled 16.2 AFDC-FG 33.4 AFDC-U 5.9 Boarding Homes 3.3 Medically Needy 10.5	61	61	5.7

Comparison of Caseloads and Social Service Workers (Cont.)

	SERVICE WORKERS				SERVICE WORKER SUPERVISORS			
	Author- ized Positions	Actual Positions	Total Cases	Ratio of all cases to all Workers	Case Distribution	Author- ized Positions	Actual Positions	Ratio of Super- visors to Workers
SAN MATEO	150	145	16,779	116	OAS 26.3% Blind 1.2 Disabled 17.8 AFDC-FG 33.7 AFDC-U 5.1 Boarding Homes 3.1 Medically Needy 12.8	29	28	5.2
SANTA CLARA	295	291	43,360	149	OAS 24.3 Blind 1.0 Disabled 15.6 AFDC-FG 37.0 AFDC-U 10.9 Boarding Homes 3.5 Medically Needy 7.7	42	42	6.9

Source: State Department of Social Welfare Monthly Reports for March, 1971 (except San Mateo, which is for December, 1970) and staffing as reported on Forms WP-11.

The basic purpose of a welfare department is the provision of financial assistance in the form of cash grants, food stamps, or aid in kind, such as medical care. Although there has always been a strong interest in delivery of social services, the involvement in income maintenance problems has prevented the concept of social services as a distinct, single resource of necessary skills from developing. Since caseload separation, this situation has become highly visible.

Because a set of objectives for services has never been developed apart from services' relationship with income maintenance, it has now become literally impossible to organize and staff for services with any assurance that the most effective pattern of services is being offered within the resources available. Without objectives against which performance can be evaluated, there can be no determination of what kind of services should be delivered by the welfare department, and where they should be allocated.

As an initial response to this problem there has existed for several months two methods of accumulating data on social services in the Alameda County Welfare Department. One of them has developed as a pilot research project out of some AFDC units at the 401 Broadway branch, which is discussed in some detail below. The other data collection system is that which has been developed and is operated out of Training Division, the Services Section of which has been fully staffed for only one year.

The method employed by Training Division has involved the development of training committees in each division (or branch office) representing the various personnel groups (social workers, eligibility technicians,

first-line supervisors, and clerks). These committees, through discussion of on-the-job problems and their perception of their own training needs, indicate to Training Division the areas which they feel should be emphasized. For social service workers, this has resulted in training offerings in money management, pregnancy counseling, black family life, working with public schools, etc. There are two general results which follow from this approach -- training becomes a reflection of what the concerns of the workers are (rather than reflecting specific needs of clients), and services tend to be defined in terms of whatever a divisional or branch office training committee determines them to be at a given point in time. The flaw in this is that our own contract study, above, dramatically demonstrates that clients and social workers perceive services quite differently. Furthermore, so long as in-service training for social services is determined at the branch office level it cannot be said that there is a departmental plan for administration of social services in Alameda County, nor that social services are truly managed on a department-wide basis. Training, after all, is one important instrument of management.

The other method for collecting data on social services is currently operating in two AFDC units at 401 Broadway. Although initially applied toward documenting delivery of emergency services, it has been extended to workers carrying continuing caseloads. The method involves the use of a measurement scale, designed on the basis of mandatory services. The scale indicates the frequency and type of service requests made of social workers, and the instances in which services have been provided successfully and in which no change has occurred. The data which have been collected in the past three months represents the first organized documentation

of what services clients are requesting. The initial results of this study will be discussed later. The measurement scale currently being used in the AFDC services project is also shown in a discussion of preliminary results of that project.

Both methods for accumulating data on services -- the one in Training Division and the one at 401 Broadway are modest, early efforts. The method employed by Training Division has, as we have indicated, serious flaws in terms of developing a relevant inventory of services and in its organizational implications. Another flaw in the two methods is their lack of connection; there has been no provision for comparison of data from either source, nor has there been any effort to see how the two inputs may be used in conjunction with each other. These findings underscore a recommendation made elsewhere in this report for a position of Assistant Director of Social Services, which will make the concept of caseload separation effective to the highest level in the organization, and concentrate in this position primary responsibility for coordinating such matters as these research and training activities which can have such a profound effect upon social service concepts in this department.

The AFDC pilot project offers a very real possibility that much of the mystery and ambiguity can be removed from the service program; social services can submit to analysis and can be managed. The first step is to determine what services of those offered are being utilized, and which services are being provided with any degree of success. The critical need for research in this area is emphasized by some of the problems encountered in the offering of mandatory services, where contradictions abound. For example, as suggested in another section of this report, why should a welfare

department continue to be involved in employment services when the state-wide policy direction is for these services to be provided by the State Department of Human Resources Development? For another example, has the mandatory service of "money management" ever been functionally defined? How is it that in the face of an increase in child protective service cases, there are only six workers in the main office to handle all referrals with a resultant backlog that forces branch office workers to provide their own protective services while waiting for referrals to be accepted? What provision has been made to teach the recognition of these and many other problems to the eligibility technicians so that they will know when to refer cases to a social worker?

These questions only emphasize that services have not been recognized as a distinct part of the Welfare Department administrative structure and that services do not, therefore, receive the time and attention that they deserve. Clearly, there is a strong need for continuing the research into services within the department, and we are convinced that such research can only lead to radical reorganization of the service delivery system. We feel that research and reorganization of services is so imperative that we place it and its objectives as the initial recommendation of this section of the report.

22. IT IS IMPERATIVE THAT FURTHER IN-DEPTH RESEARCH IN SOCIAL SERVICES BE CONDUCTED WITHIN THE ALAMEDA COUNTY WELFARE DEPARTMENT LEADING TO A REORGANIZATION OF THE SOCIAL SERVICE DELIVERY SYSTEM. THE RESEARCH AND THE REORGANIZATION SHOULD BE DIRECTED TOWARD THE FOLLOWING OBJECTIVES:

- a. THE ELIMINATION OF DUPLICATION AND THE IMPROVED
COORDINATION IN THE PROVISION OF SOCIAL SERVICES

BY PUBLIC AND PRIVATE AGENCIES IN ALAMEDA
COUNTY;

- b. THE DEVELOPMENT OF A DEPARTMENT-WIDE SYSTEM
OF ACCOUNTING FOR CLIENT REQUESTS AND SOCIAL
WORK RESPONSES;
- c. THE DEVELOPMENT OF FLEXIBILITY IN DEPLOYING
SERVICE STAFF WHERE NEEDED, AS THE NEED IS
REFLECTED BY INFORMATION FROM THE LINE;
- d. THE CLASSIFICATION OF SERVICE SKILLS BY UNITS
FOR FASTER, MORE EFFECTIVE UTILIZATION OF
STAFF;
- e. THE COMPLETION OF AN INITIAL SERVICES ASSESS-
MENT WITHIN FIVE DAYS OF APPLICATION FOR AID;
- f. THE DEVELOPMENT OF A CONTINUOUS FLOW OF
INFORMATION ABOUT COMMUNITY SOCIAL SERVICE
NEEDS AND RESOURCES;
- g. THE REVISION OF THE TRAINING PROGRAM TO MEET
THESE OBJECTIVES, TO RECOGNIZE TRAINING AS A
MANAGEMENT FUNCTION, AND AS A REFLECTION OF
AND RESPONSE TO REALISTIC CLIENT NEEDS AND
WORKER PROBLEMS.

a. Elimination of Duplication and Improved Coordination.

The call for elimination of duplication and the improved coordination and direction of social services has been stated so many times in studies of the welfare system that we are almost embarrassed to repeat the obvious. We state it once again because we sense the finding usually has

been made without the necessary subsequent, specific, recommendation to someone to take action, Therefore,

23. IT IS RECOMMENDED THAT THE BOARD OF SUPERVISORS APPOINT A COMMITTEE CHAIRED BY THE COUNTY ADMINISTRATOR AND CONSISTING OF THE DIRECTORS OF WELFARE, PUBLIC HEALTH, MENTAL HEALTH, THE CHIEF PROBATION OFFICER, SHERIFF, COUNTY SUPERINTENDENT OF SCHOOLS, AND THE HOSPITAL ADMINISTRATOR FOR THE PURPOSE OF CONDUCTING AN INVENTORY AND ASSESSMENT OF HEALTH, EDUCATIONAL, AND WELFARE SERVICE PROGRAMS PROVIDED BY THE COUNTY AND THAT THE COUNTY ADMINISTRATOR BE CHARGED WITH MAKING A REPORT TO THE BOARD BY DECEMBER 31, 1971 WITH RECOMMENDATIONS AS TO THESE SERVICES WHICH SHOULD BE CONSOLIDATED, REASSIGNED, ELIMINATED, EXPANDED, OR CONTRACTED FOR PRIVATELY.

Recommendations which originate in the recognition of the multiplicity and ineffectiveness of services generally are so drastic and near-utopian in scope that they fail to be taken seriously by agencies and legislators. While we concede the merits of the ombudsman-style "Community Service Agent" called for by the Assembly Social Welfare Committee in 1969, and the "Social Service Supermarket" approach called for by some prominent welfare reformists, we feel that these options will not be tried until the whole social service system chokes to death on its own procedures. Since massive reform is subject to delay of so many contending forces we have tried to frame recommendations in the context of "what to do until the doctor arrives."

The fact that so many jurisdictions and agencies are involved and that responsibility is so diffused should not prevent the County of Alameda from getting its own house in order. The study that we propose for county staff would involve the department head (or designated representative) of

every county agency providing social, health care, or delinquency prevention or control services. It would call for submission of data in a standardized format describing programs, caseloads, staffing, costs, source of financing, etc. It would then call for hard recommendations and Board of Supervisors' policy decisions on how local programs should be changed as outlined in the recommendations, above. We recognize that we have called for a review that does not provide for input from the many private, city, state, or federal agencies that are also providing services in Alameda County. We suggest that the formal involvement of those agencies be invited as "phase two" of this effort. The problem of assessing the county's own service programs is a formidable task in itself, and the very process of conducting the study within the county agencies will suggest a pattern for conduct of the larger study and ways in which recommendations can be translated into reality in the intergovernmental arena. In addition, there are many examples of duplication and poor coordination within county agencies. In one month in Spring, 1971, seven public or private drug treatment programs were started in the county. Two started within county departments -- Health and Probation.

The inter-agency services assessment has profound implications both for effectiveness of services and county costs. One case encountered during our social worker interviews affords a classic illustration. We shall call the client Mrs. Smith, a mother who had been receiving AFDC in another county. She came to the attention of Alameda Welfare when she arrived at the home of a great aunt in Oakland with six small children ranging in age from six months to 10 years. The great aunt, whom we shall call Mrs. Green, is over 80 years of age and was already caring for three other children of her niece. Mrs. Smith had received some treatment in the

past in the state hospital system. When Mrs. Smith arrived, she had 6¢ in cash, one small suitcase and the only clothes the children had were on their backs. All of the children showed signs of physical neglect resulting from Mrs. Smith's inability to provide proper care because of her severe emotional difficulties; the six-month-old baby weighed 8 lbs., the four-year-old girl was cross-eyed, the 10-year-old boy had a severe speech defect stemming from emotional causes. Within a week of her arrival, Mrs. Smith suffered a complete nervous breakdown and was hospitalized in Napa State Hospital, leaving her nine children in the care of Mrs. Green, who was beginning to manifest anxiety about her ability to cope with the situation. A week after her admission to Napa, during which time she saw a psychiatrist once, Mrs. Smith was released to the care of an Oakland physician. The state hospital doctor advised that she be provided a full-time housekeeper for at least 30 days with periodic continuance thereafter.

Although the conditions of this case very strongly indicated early intervention by the Protective Services Unit and Mental Health Services, the delays involved in having referrals accepted -- added to the obvious crisis conditions of the case -- made it essential that the case be handled by the worker to whom it was first assigned. The specific services provided included: 1) securing a housekeeper to help Mrs. Green care for the children; 2) securing food for 15 days until a welfare check could arrive; 3) getting clothing for the children so they could go to school; 4) sitting with Mrs. Smith for a half-day in the waiting room of the mental health clinic to make certain she got to the local doctor -- prior to her referral to Napa -- and after her hospital release, following through on a local referral to a physician; 5) assisting in enrollment of the children

in a local elementary school; 6) making arrangements for a volunteer driver to take the child with a speech defect to speech therapy; 7) contacting childrens' hospital to arrange for further care of this case; 8) referral to protective services -- and several other specific services.

This case illustrates a number of issues for social services which can be related back to our objectives for the conduct of further social service research. In the context of improved coordination it demonstrates the need for improved support from protective services, and local and state mental health agencies. It also demonstrates, in a small way, something that was more forcefully brought to our attention in review of other cases in this study -- the subtle but growing impact of the transfer of state hospital caseloads upon the local communities and upon the county mental health and welfare programs. While the concept of community mental health services is a desirable alternative to state hospital "warehouses," a shift in program also implies a shift in cost burden. The costs of providing services for the mentally ill in California have gradually shifted from an almost exclusive State burden, to the local mental health programs, where the costs are shared on a 90/10 ratio, and -- as the mental health programs have been loaded up -- to the Welfare Departments where the service costs are shared 75/25. Certainly, it is less expensive and perhaps more humane to maintain Mrs. Smith at home rather than in a state hospital. It is also cheaper and more humane to seek to stabilize the nine childrens' home life in the residence of Mrs. Green than to separate and scatter them into a variety of foster placements. It would seem, however, that the cost burden of these desirable alternatives should not bear inordinately upon the counties and upon increasingly

impacted local property tax bases. Thus, the counties have a vital stake in this shift, particularly with respect to its impact on Aid to Disabled, and it would seem advisable for counties to carefully analyze their local mental disability programs with a view to determining changes which have occurred in allocation of cost burdens. Such review might result in recommendations for stronger local mental health program efforts and a shift of some services to mentally disordered from welfare back to the mental health system where the requisite counseling skills are located and where the county cost burden is lower.

b. Development of a Department-wide System of Accounting for Social Work Requests and Responses.

Another immediate issue the department can address itself to as larger federal or state welfare solutions are awaited involves changes that would clarify social work functions and help create order where none currently exists. A formal department-wide system of accounting for client requests and social work responses is the first step in the development of a social services management system to be supervised by the proposed Assistant Director for Social Services. As mentioned, this formal, on-going, departmental analysis of social services would be closely coordinated with social service training functions in the department, which we have proposed be placed under the immediate direction of the Assistant Director of Social Services.

We have also mentioned an AFDC pilot project in analysis of social work requests and responses. Here are the initial results of that project for the first two months of operation:

INITIAL RESULTS - SERVICES MEASUREMENT
ALAMEDA COUNTY WELFARE DEPARTMENT
AFDC UNITS G27, G42
April-May, 1971

<u>Mandatory Service Category</u>	<u>Referrals</u>	<u>Services Provided</u>	<u>No Change</u>
A. PROTECTIVE SERVICES FOR CHILDREN			
1. Relocation of a family member to prevent family violence.		1	
2. Successful referral to counseling agency or medical facility.		1	
3. Successful referral to Legal Aid, JPO, or Police.		5	
4. Successful resolution without referral.		3	
TOTAL	17	10	3
B. CHILD SUPPORT SERVICES			
1. Obtain cash or income from other resources, i.e., Social Security or Absent Father.		0	
2. Client cooperated with FSD		1	
TOTAL	0	1	
C. OUT OF HOME CARE - CHILDREN (i.e., Foster care services)	0	0	
D. CHILD CARE SERVICES			
1. Obtain help from friends or relatives.		2	
2. Location of housekeeper.		0	
3. Payments for child care.		14	
4. Obtain day care.		1	
5. Referral to pre-school.		0	
TOTAL	31	17	5
E. INFORMATION AND REFERRAL SERVICES			
1. All categories (no duplication of other count).		15	
2. Service assessments.		38	
TOTAL	17	53	8

Services Measurement - Continued

<u>Mandatory Service Category</u>	<u>Referrals</u>	<u>Services Provided</u>	<u>No Change</u>
F. EMPLOYMENT AND REHABILITATION SERVICES			
1. Assisted in enrollment in training classes.		10	
2. Successful assistance in obtaining job.		4	
3. WIN/ETS.		<u>17</u>	
TOTAL	28	31	28
G. SERVICES TO STRENGTHEN INDIVIDUAL AND FAMILY LIFE			
1. Temporary shelter, i.e., relatives, good samaritan, etc.		11	
2. Intercession with landlord for extension of time before move.		3	
3. Intercession with landlord to upgrade housing.		2	
4. Intercession with landlord - work out back rent payments.		9	
5. Allowance for cost of relocation.		23	
6. Successful referral to other agencies, i.e., public housing, building and housing, sanitation.		3	
7. Finding adequate shelter - permanent.		10	
8. Reducing household composition so that present housing is adequate.		0	
9. Improving housekeeping standards.		0	
10. Having utilities continued.		6	
11. Marital, family or child development counseling or referral.		18	
12. Client assisted in coping with existing situation.		<u>30</u>	
TOTAL	139	115	41
H. MONEY MANAGEMENT			
1. Successful food referral to private agency		76	
2. Staff member picks up and delivers food to client.		9	
3. Staff member arranges and helps client pick up food (together).		5	
4. School lunches for children for month.		0	
5. Referral to private agency for meal or meals.		1	
6. Emergency special needs obtained for client.		10	
7. Emergency special needs obtained for client through referral.		3	
8. Food stamp certification.		0	
9. AIK - vendor, protective payment.		3	
10. Successful referral to other agency, i.e., Legal Aid, Wage Earner's Plan.		4	

Services Measurement - Continued

<u>Mandatory Service Category</u>	<u>Referrals</u>	<u>Services Provided</u>	<u>No Change</u>
H. MONEY MANAGEMENT (Continued)			
11. Expedite AFDC grant, Medi-cal card, or food stamps.		33	
12. Counselling in money management.		<u>1</u>	
TOTAL	119	145	37
I. HEALTH CARE SERVICES			
1. Arrange for medical appointment or treatment.		7	
2. Arrange for transportation to medical facility.		4	
3. Successful referral to public health or other facility.		6	
4. Child obtain immunizations.		0	
5. Have client take correct medication.		0	
6. Clarify physical condition.		1	
7. Explained use of Medi-cal card and prior authorization.		<u>1</u>	
TOTAL	6	19	11
J. FAMILY PLANNING SERVICES			
1. Counselling in therapeutic abortions - mandatory service.		26	
2. Acceptance of family planning.		<u>11</u>	
TOTAL	23	37	5
K. OTHER (specify)			
1. Transportation.		<u>1</u>	
TOTAL	1	1	1
GRAND TOTAL	<u>381</u>	<u>429</u>	<u>134</u>

The AFDC services measurement device is, of course, based on a format involving the provision of mandatory services. Within that format, however, services have clearly been cast in a context of specific, concrete activities. A "safety valve" was included, however, along traditional social work counselling concepts; items G-11 and G-12 have to do with marital and family counselling and assistance to clients in coping with existing situations. It might be expected that this area would be heavily loaded with service activity. However, out of 429 "successful" service actions provided in this 60-day test period, only 48, or slightly more than 10% of the services fell in this category. The vast majority of services provided were, indeed, quite specific in nature.

In the test period, 551 actual service actions were rendered. 121 of these actions were unsuccessful in resulting in any change in the clients' condition. It should be noted that judgments on the effectiveness of services were not made exclusively by workers, but by casework supervisors in individual case reviews with workers. It is also interesting to note that the 78% "success" rate of this study corresponds roughly with the 76% finding reported by social workers in the contract social service study. One essential ingredient is missing in the AFDC service project: the clients' view. We understand that further study will include this perspective, and when this is done, it should be possible to make some rough comparisons of client views between the AFDC project and the contract study.

One significant feature of the services project is the added support it brings to the concept of more specifically defined services, related more closely to the actual life problems of people in poverty circumstances. This is also supported by our case of Mrs. Smith. We

returned to our extensive notes of the interview with her worker and found that the worker's response to the many problems of her family was always a specific, supportive action and in not one instance was "counseling" or "therapy" explicitly involved as a direct service by the worker.

There are several other advantages of a department-wide accounting system for services: it brings to the surface many specific services which the department may not even be aware it is providing, both in quantity and variety; it is then possible to go behind this information and propose solutions to given service needs that successfully attack the cause out in the community; it makes possible decisions on alternative methods of handling specific service needs that may be faster, cheaper, and more responsive to the client; it helps suggest directions for service priorities and areas where services should not be provided by the welfare department or should be handled by some other public or private agency. The possibilities are limited only by the imagination of management.

c. Flexibility in Deployment of Service Staff.

24. IT IS RECOMMENDED THAT THE 60-TO-1 CASELOAD STANDARD FOR THE ASSIGNMENT OF CASES TO SERVICE WORKERS BE ABANDONED AND THAT THE DEPARTMENT MOVE TOWARD A SYSTEM OF SERVICE CASE MANAGEMENT BASED ON SEVERITY OF CASE PROBLEMS PRESENTED AND REALISTIC ESTIMATION OF WORKER PERFORMANCE. Our close research into the service functions of the Alameda County Welfare Department has served to reinforce our notions of the absurdity of the standard of assigning 60 cases to each social service worker. This standard has been relaxed as a budgeting device in California; we have not done the necessary research to be absolutely certain of the current federal view on the point. We must observe, however, that the standard is de facto not effective in

California on a departmental level; recall the wide variations in caseload ratios. The overall controlling factor, county by county, is the percentage of caseload claimed to be "in service" and this also varies considerably. It is important to recognize that the relaxation of the 60-to-1 ratio and the application of the concept of "cases in service" applies to gross staffing and gross budget considerations, and that while the end result is generally fewer social workers, it has made little difference to the working situation of the individual worker.

The social service worker in Alameda County remains responsible for 60 "active" service cases and the general expectation is that a single case will be serviced and returned to a caseload bank within 60 days of assignment, unless there are extenuating circumstances. Except for a few social service units in the department, as soon as a worker closes the service aspect of a case, he is reassigned a new one, regardless of his skills or interests, needs of the client, or intensity of the remaining 59 cases. Sixty separate sets of service problems are simply impossible to comprehend. Consider, once again, the complex case of Mrs. Smith. The worker on this case was forced to devote half or a third of her time to this one case in the first two or three weeks following assignment, and the balance of her assigned caseload was largely unattended. This system has forced conscientious (as well as non-conscientious) workers into the game of holding back on the release of completed service cases to unit supervisors. The game can be played with two alternative goals in mind: 1) the conscientious worker seeks to protect complex, multiple problem cases in his caseload needing intensive services (like Mrs. Smith) from the distractions of other cases needing attention, and 2) the lazy, incompetent worker seeks to protect himself from working harder than he absolutely has to. The

60-to-1 system of random case assignment does not discriminate between these types of workers and therefore cannot be remotely considered a performance standard. It does, however, promote game-playing in which both kinds of workers pit their wits against management to beat the system for better or worse and in which the viability of management is damaged.

The department should investigate a whole range of possibilities in developing new ways of assigning cases. Obviously, number of cases is a factor for which there are upper and lower limits. We believe the concept of "x" number of cases carried per worker would be dropped entirely and replaced with standards of case-turnover which vary according to type of aid program, chronicity and complexity of problems, and depth of worker involvement required. Using a case turnover concept (which, in itself, connotes greater action than a case "carrying" concept), it seems possible to conceive of completed case services actions ranging from eight to 12 per month in a few extremely complicated services to 60 per month in several emergency service units. It should be noted that the standard established in the emergency units in the AFDC project was 15 completed service activities per week, which is being met and which is approximately double the turnover standard for departmental AFDC caseload (i.e., 135 service actions versus 60). In any event, workload, rather than caseload should be one of the keys to the management of social services.

d. The Classification of Service Skills by Unit.

This concept is new only in terms of its present limited use. Employment services provided by the Work Incentive Program are a form of classification; the two emergency units now operating at 401 Broadway are a functional assignment of workers on the basis of skills and interests,

with the goal of helping clients with emergency problems and becoming more expert in handling crises. Functional assignments have the added advantage of making the best use of each worker's skills and eliminating the necessity of training the whole department for a social service that only a few have to perform.

Information leading to development of other functional assignments could be drawn from current and future pilot projects on services. To illustrate some possible alternatives, functional units could be built around stronger protective services for children, closer work with children, parents and schools to strengthen child educational achievement and development, and work with the special problems of the emotionally disturbed who are released by the state hospital system to their local communities.

One important advantage of functional classification of social services is that it brings into clear relief the services that are actually provided in the welfare system and almost automatically raises the question of whether a given service should be provided within that system at all. It is difficult to suggest a single social service for the welfare system that is not handled in some way by another agency. In perhaps only one area -- protective services to children and adoptions -- does welfare seem to pre-occupy the field, for historical and legislative reasons, and proposals to remove these functions from the welfare system are repeated frequently. With regard to services offered by welfare which are also provided by schools, mental health, public health, etc., it seems absolutely essential to settle the basic question of whether welfare should provide a given service, and if decided affirmatively, to determine what aspects of shared services should be provided by welfare. It could be that welfare

service functions that are shared with other agencies will come to be cast in the role of emergency, short-term, crisis intervention services, with early referral to other agencies of those cases that require long-term, specialized attention.

There is, perhaps, one functional classification that would suggest longer term involvement by welfare social services, and that is related to one of the time-honored reasons for having social services in the welfare system at all: reversal of the welfare recipients' dependency status. As suggested elsewhere in this report, one of the reasons for failure of the welfare system to achieve much impact in this area is that there has rarely been an organization of welfare caseload that would allow concentration of effort on those cases that have some chance of escaping the system. This idea, which recognizes a difference in the potential welfare future of a 21-year-old mother of one child and that of a 40-year-old mother of nine is discussed in the eligibility control section, but it is mentioned here because of the need to effect a close coordination of income maintenance and social service functions in this area. We by no means suggest that services should be exclusively directed toward those recipients that show some potential for removal from welfare, and that the problems of our theoretical family of nine children be ignored. We are saying that these are two different kinds of cases that should not be assigned to the same workers, and that the development of special service units to handle cases of those recipients only marginally involved in the system would probably be more effective than the present system of random assignment in promoting financial independence.

e. Completion of an Initial Services Assessment within Five Days of Application for Aid.

Current Federal law requires a social service assessment of all AFDC applicants. At present, social service assessments in the Alameda County Welfare Department occur weeks after a family has made application for aid. It would seem extremely important to intervene in AFDC cases before the situation which generated the original application becomes more severe. Once again, our actual case of Mrs. Smith demonstrates that a delay beyond the point of her going to the state hospital would have likely resulted in the break-up and foster home placement of her nine children, serious effects on the physical condition of Mrs. Green, more serious emotional consequences for Mrs. Smith, etc. Effective delivery of social services that mean something to the client and to the agency demand that assessments be accomplished within five days of application.

f. A Continuous Flow of Information about Community Social Service Needs and Resources.

An integral part of an effective social service system is the development of information on service resources available in the community and in other agencies, and the communication of this information to service workers in the department. To be of any use, the information must be current and therefore requires continual updating. Good resource information is not only timely, it implies evaluation of resources by following-up after referrals are made and by going out to the community to monitor results firsthand. Resource development and information is extremely important not only in terms of identifying services which will directly assist clients, but in terms of the coordinated management of all such resources in the community.

Recognizing resource development and information as a specialized function can be an important factor in the early identification of social service needs and the elimination of services that may be ineffective or duplicated. Illustrative of the need for an activity such as this is the fact that virtually every service worker or unit in the department has developed a closely guarded, personal list of resources to be tapped in a given type of service situation.

Tacet recognition of the importance of resource development and information on a departmental basis is the position of Community Resources Coordinator. We say "tacet" because the position, which has been in the department for approximately five years, does not seem to have developed as a result of a specific departmental proposal which was made in response to a formal recognition of need. The origin of the position dates to the administration of the last Welfare Director, and no present member of management is closely familiar with the early history of the position. On this point a staff review and report of the position made in September, 1970, stated that "...there is no written material available outlining the nature of this position as originally conceived." This staff report indicated, however, that the incumbent of the position viewed her duties as originally created to involve liaison between the department and the community, coordination of all community resources to avoid duplication, to assist in establishment of new services to welfare clients where needs appear, interpretation of welfare policy to the community, and the continuous updating of a community resources handbook for use by social workers.

It was the finding of departmental staff that the incumbent of the position expends about 60% of her time in developing and coordinating a

volunteer program in the department which, at the time of the report, numbered approximately 85 people in volunteer service to the department. The report also indicated that the position devoted eight hours per month to teaching two casework classes, and considerable time in direction of the Speaker's Bureau for the department, which handles presentations to various community groups and organizations. The position carries a variety of other special assignments and committee memberships.

The September, 1970 staff report concluded that the duties and responsibilities assigned to the incumbent of the position today are different from those assigned when the position was originally conceived; that the volunteer program -- the position's major assignment -- either does not exist or is carried out by lower position classifications in other counties, and that positions similar to the original conception of the Alameda position are assigned a high level of responsibility, though paid on a scale similar to the Alameda position. The recommendations of the staff study were:

It seems to be that the duties originally assigned ... as a Community Resources Coordinator are extremely important ones and some of them are no longer being performed by anyone in the Alameda County Welfare Department, except as may occasionally happen by chance when a social worker is dealing with a particular outside agency. I think it is most important for the agency to have an official representative to act as liaison with community resources, to prevent duplication of services, and to identify needs for new kinds of services.

I would suggest that these duties and responsibilities be reassigned ... and that she be released of any teaching responsibilities. In addition, I would recommend that she be given some assistance, perhaps of a clerical nature.

These changes would result in an increased level of responsibility ... more commensurate with her salary and the minimum qualifications for her position. It would also result in increased effectiveness on the part of the Alameda County Welfare Department.⁴

It seems to us a rather serious reflection on the management of the Alameda County Welfare Department that a function of such significance in the department should operate virtually unevaluated for such a period of time and, in fact, back to a former departmental director. There should at least have been an annual review of the function in connection with preparation of the budget request. We must observe that the extent of evaluation given the position in September, 1970, was quite thorough, but the matter appears to have advanced no farther in the nine months since the staff review and the time of writing this report.

We would also observe that the "continuous updating" of the Community Resource Manual means that it is revised once annually on the basis of a written questionnaire, which is neither timely, nor does it suggest evaluation of community resources in the field.

Finally, the position does not appear to be under the supervision of any departmental management position, although the last departmental organization chart (5/9/69) shows the Community Resources Coordinator under the Chief of Training Division. The incumbent coordinator indicates that she reports to the Chief Assistant Director. In addition to the proposals regarding resource coordination made in September, 1970,

⁴Memo from Departmental Personnel Director to Chief Assistant Director, September 10, 1970.

25. IT IS RECOMMENDED THAT THE DEPARTMENT UPDATE ITS COMMUNITY RESOURCES MANUAL ON A CONTINUOUS BASIS THAT UTILIZES RESOURCE INFORMATION AND EVALUATION FROM BRANCH OFFICE WORKERS WHICH IS IN TURN BASED ON FIELD OBSERVATIONS AND FOLLOW-THROUGH ON REFERRALS, AND THAT THIS ACTIVITY SHOULD BE SUPERVISED BY THE COMMUNITY SERVICES COORDINATOR;

26. IT IS RECOMMENDED THAT THE DEPARTMENT ASSIGN THE DIRECTION OF THE COMMUNITY RESOURCES COORDINATOR TO THE PROPOSED ASSISTANT DIRECTOR FOR SOCIAL SERVICES;

27. IF THE DEPARTMENT DOES NOT ACT AFFIRMATIVELY ON THE BASIS OF ITS OWN ANALYSIS OF THE COMMUNITY RESOURCES FUNCTION AND ON THE BASIS OF THE ABOVE PROPOSALS, IT IS RECOMMENDED THAT THE POSITION, AS NOW CONSTITUTED, BE ABOLISHED.

INTERIM CONCLUSIONS ON SOCIAL SERVICES

The Task Force staff is painfully aware that aside from specific recommendations for abandonment of the 60-to-1 caseload ratio and revision of the departmental resources development function, we have responded to the social services question with a recommendation for further study. We recognize that most recent studies of services deal more with their pathology than their potential, and this is true of our own contract study. It does not help to remind ourselves that we had hoped to avoid this very thing in this study; we were actually bold enough to expect that we could offer more specific direction for future social services than we have been able to. That we were not able to do this -- even with help -- is partly because services were an entire study in themselves, caught up in the midst of many other departmental problems which also demanded attention.

Be that as it may, we cannot have spent the months of this study as close as we have to social services and social workers without achieving some interim conclusions at the very least. After all, even the further study we have called for must start with some premises. Here is what we conclude at this point:

1. Social Services do have an important role to perform within the welfare system. They are a very necessary adjunct to provision of financial assistance, in cash or in kind, which is the basic reason people in poverty circumstances come to a welfare department. However, from all indications of our study, services urgently require sharper definition and clearer statement of objectives. We see the results of such efforts as a limitation in the range and quantity of social services that the welfare system is either expected to provide or claimed to provide. We see as other possibilities of this effort a more efficient use of non-social service personnel within the system in meeting some client needs, and a reduction of duplicative efforts between welfare social services and those of other agencies through a better client-referral system.

2. The social services that can be most effectively provided from within a welfare department are primarily short-term, crisis-oriented, specific services that assist recipients in overcoming an immediate, concrete problem. There is a limited need to provide some services of a longer-term, comprehensive nature, but only in terms of doing so until the case can be effectively referred out to other agencies. One of the goals of this type of social service activity should specifically be to concurrently work toward referral out. There is also a need for further study in this caseload area to attempt an estimate of how extensive the "multi-problem" social service workload is, and the kinds

of skills it demands of workers in the welfare system.

3. It is essential and possible to move toward classification of service problems not only in terms of types of problems encountered, but the kinds of staff specialization required to meet them. It seems also possible to develop, as the department is doing right now in the AFDC pilot project, a system of weighted workload standards which can in turn be used for staffing on the basis of type and complexity of problems and time required to work on them. Without clearer indication of social benefits to be gained from social services, it is virtually impossible to make sound judgments on the most effective expenditure of public funds in meeting the needs of social services which should be provided by the welfare system. The criteria for making those budget judgments must be based on continuing analysis of the frequency of demand and delivery of specific services, the effectiveness of change, and the cost benefits of alternative methods of delivering services.

4. Separation of Social Services and Income Maintenance will still require close coordination. Caseload separation is clearly the basic specialization of function in the welfare system; it recognizes that difficult skills are required to provide service and income functions efficiently. However, the effectiveness of both functions in meeting organizational goals will require close coordination. One example would be the classification of caseloads which would permit more effective work with those recipients that are only marginally involved in the system.

SECTION V

TRAINING

TRAINING

Considering the special training problems presented by the separation of AFDC in January, 1970 the Task Force makes a very critical assessment about the use of the department's training division. The training program for the eligibility workers is poorly suited to its task of training the 600 people which now completely control the fiscal side of welfare. The Committee finds, that in terms of the training division's staffing, its direction, and budget, it is still heavily oriented toward social services at a time when it clearly should have set goals related to meeting the special problems of eligibility. The unfortunate effect has been to graduate into permanent positions hundreds of eligibility workers who do not have the necessary training or the technical understanding of their highly complex jobs to function adequately, efficiently or confidently.

With the initial problems associated with mass hirings of new eligibility technicians over, the emphasis must be shifted to upgrading the training of the existing staff and culling out many of those who have found their way into the organization during a crisis situation. To do this successfully, radically different training formats will have to be devised. It will also necessitate a measure of cooperation and understanding between the Board of Supervisors, Civil Service, the County Executive and the department in repairing a situation whose implications goes far beyond the welfare agency. The Civil Service Commission must understand, for example, that most of the three hundred eligibility workers hired last year received permanent status without the benefit of any evaluation of their performance. We believe many of them can be salvaged, by better training, creating a better

supervisory class and by establishing performance standards. Many, however, cannot and this must be recognized by the Civil Service Commission and appeal bodies in reviewing dismissal proceedings.

The Committee presents this section with the firm conviction that the reliability of the whole Income Maintenance program as well as the administrative control of it relates more directly to the ability and proficiency of the eligibility worker than any other single factor.

The summary conclusion of the Task Force is that the training component of the department must be strengthened significantly, with primary emphasis on the eligibility side of the organization. Other specific recommendations relate largely to getting more effective use of the training staff, and achieving better control and coordination of their efforts.

The balance of our discussion is organized around these three findings:

1. The priorities set by the Training Division are still heavily slanted toward the social services when the most critical and immediate needs are in eligibility and income maintenance.
2. The Training Division is not attached to the organizational structure in a manner that allows it to receive proper direction for either its social services or its eligibility training programs.
3. The training plans have been inadequate in terms of their content, concept, duration and delivery.

1. Training Priorities. The training division consists of two six member units with clerical backup, each supervised by a Grade II

Supervisor. The social services team is in charge of the ongoing and supplementary training of about 300 social workers. The second unit is concerned with the induction, training, and in-service training of about 350 new eligibility technicians in AFDC in 1970 and for upgrading training of approximately 300 others in the adult categories. In addition, it is responsible for the training of about 100 eligibility supervisors. It seemed to the Committee that the simple differences in numbers of employees involved would have been reason enough to make some shifts between the two sets of staff in the Training Division as an adjustment to the consequences of separation.

The disparity in staffing seems even greater considering the fact that most social workers were not new recruits, some had prior experience, and all were college graduates. Most of the social workers had also received at least six months of training and there has not been any significant change in mandated social service programs in 10 years.

The eligibility technicians and their supervisors in AFDC, in contrast, were new and totally inexperienced. The budget clerks and clerical personnel who had any prior knowledge of the grant process had, for the most part, already been used up in the adult categories which had separated earlier. The problem in eligibility was aggravated further because the budget clerks who had controlled the budgetary aspects of eligibility had been eliminated in the separation plan. The training had to provide, then, for teaching each new eligibility technician not only the incomprehensible law and regulations covering eligibility but the intricacies of two budgetary systems covering check holds, grant changes, etc. by which the system controls its money. Management faced, in every sense of the word, an enormous training

problem that was and still is proportionately much greater on one side of the organization than it was the other.

Management must have been aware of some serious problems occurring in the performance of the eligibility technicians almost as soon as separation started. Administrative errors were increasing, renewals were falling behind and the ratio of denials to applications received was falling off. While not the only clue, the Committee thinks the application and denial ratio, which shows the number of persons getting into the system in relation to the number who apply, was one indication of what was happening.

Percent of Total Applications which are Denied in AFDC
Source: ABD 237

<u>AFDC - 1970</u>	<u>Applications</u>	<u>Denials</u>	<u>Percent</u>
January	1363	226	16.58
February	1143	305	26.68
March	1859	389	20.93
April	1561	435	27.87
May	1943	471	24.24
June	2166	657	30.33
July	2325	447	19.20
August	2504	728	29.10
September	2679	730	27.20
October	2151	832	38.70
November	1965	779	39.60
December	1824	912	50.00
<u>AFDC - 1971</u>			
January	1896	611	32.20
February	1658	909	54.80
March	1694	823	48.60
April	1450	839	57.90

Something was obviously wrong and most of it, in the Committee's view, strongly indicated that the new eligibility technicians were not meeting the demanding requirements of their jobs.

Aside from the questions we raise about the priorities, organization, and design of the training programs themselves the department had requested additional training positions last year which were not approved.

When one considers the cost between adding a few training positions and the financial effect of holding the denial rate a few percentage points higher one can legitimately ask what administrative checks there are anywhere in the county.

What the data means, we think, is as the workers' experience increased so did the denial rate.

This data does not show it but in March and April there was the first downward trend in AFDC caseload in 16 months. We do not think it a coincidence that it corresponds to a high rate of denials in those months. Through experience, the eligibility workers are, for the first time, starting to get some control over their caseloads. This is most encouraging, but the Committee is still of the opinion that the department is still operating with virtually an untrained corps of eligibility workers. We also believe the improvement of the worker is more a consequence of time and on-the-job experience than the training program of the department.

28. OUR FIRST RECOMMENDATION IS THAT REGARDLESS OF THE BUDGET LIMITS OR NUMBER OF PERSONNEL APPROPRIATED FOR TRAINING, MUCH GREATER PRIORITY SHOULD BE PLACED ON THE TRAINING OF ELIGIBILITY TECHNICIANS. IT IS STILL THE GREATEST TRAINING NEED OF THE DEPARTMENT. WE RECOMMEND THAT FULLY THREE-FOURTHS OF THE TOTAL TRAINING BUDGET BE ALLOCATED TO TRAINING ELIGIBILITY WORKERS.

29. UNLESS NEW POSITIONS ARE ADDED TO AUGMENT THE ELIGIBILITY TECHNICIAN TRAINING SECTION WE RECOMMEND THEY BE TRANSFERRED FROM THE

SOCIAL SERVICES UNIT. In recommending that we are aware that there are unmet training needs in social services which this would seriously affect. We support the recommendation on the reasoning that until the social services training needs are better identified and more agency-wide training is conducted for social services it is safer to reduce training in the social services branch of the department. We see it as strictly a matter of priority.

30. WE THEREFORE RECOMMEND SUSPENDING TRAINING PLANS FOR SOCIAL SERVICES EXCEPT FOR NEEDS CAPABLE OF BEING JUSTIFIED ON AN AGENCY-WIDE BASIS APPROVED BY THE WELFARE DIRECTOR AND TO MEET THE MINIMUM STATE REQUIREMENTS.

31. WE FURTHER RECOMMEND THIS REMAIN THE POLICY OF THE AGENCY UNTIL THERE IS A DEFINITE INDICATION THAT THE PROFICIENCY OF THE ELIGIBILITY WORKER HAS IMPROVED, MEASURED BY SUCH FACTORS AS THE CLEARANCE OF PENDING APPLICATIONS, NUMBER OF OVERDUE RENEWALS AND SIGNIFICANT DROPS IN OVERPAYMENTS AND ADMINISTRATIVE ERRORS.

We make this series of recommendations aware that the social service specialists may not be qualified to move over into eligibility training. On that problem we can only suggest management transfer them to places in the organization where they can be used and replace them with others carefully selected for their knowledge of eligibility.

The Task Force faults management severely for its failure to shift priorities in the Training Division much earlier. The Committee considers it an example of organizational rigidity and believes it says something quite unfavorable about management's ability and inventiveness in responding to serious, identifiable problems quickly.

In addition to the questions we raise about priorities, the staff believes the Training Division has also suffered from the line of authority

it follows to top management; weak direction, internal dissension, and supervisory problems. We turn to those issues as the next part of our discussion.

2. Organization and Supervision. The staff is inclined to see training as basically a staff function to the two main service branches of Social Services and Income Maintenance rather than a line function which is implied by training's present location in the departmental structure. Above all, training should be fixed to the organization structure in a way which facilitates it being able to respond quickly and decisively to problems as they are discovered in the line organization.

Presently the Training Division reports to the Chief Assistant Welfare Director who is not directly responsible for any aspect of either Social Services or Income Maintenance.¹ While it is true that by virtue of the authority he holds, the Chief Assistant Welfare Director is in a position to impose or change training in any way he wishes on either service branch, but that is not the factor we considered important in locating training in the formal organizational structure.

The main problem, we think, is the handicap the Chief Assistant Director has in being able to see training problems as they manifest themselves from the day-to-day activities of the operating division. It is one thing to have a problem described in a memo and quite another to be living with the problem and to have responsibility for it. Our view is that if the Assistant Welfare Director in Charge of Programs is accountable for programs

¹This statement may be subject to some qualification due to some recent changes in the responsibilities which the Chief Assistant Director has assumed for programs since this chapter was written. Our understanding of the formal organization is that it still operates about as we describe it.

he must be able to direct the training of the personnel who administer those programs for him. Compounding the problem is the fact that there is not a management information system in existence which systematically and clearly points out training problems to anybody. The problem is aggravated further by the physical isolation of the entire Training Division in a separate downtown building.

It is our impression that in designing and delivering their training plans the Training Division works in closer conjunction with the division chiefs than they do the Assistant Director. Seeing, for instance, the very limited amount of agency-wide training for social workers, suggested to us that training is pretty much what division chiefs wish to accept rather than what the Chief Assistant Welfare Director decides should be offered as an overall department need.

Specific training for crisis intervention and in techniques for dealing with hostile clients has been offered, but the basic training issues for social services relate to a much more fundamental issue. It is whether the department is going to gear its whole social services program to short-term or long-term care. A firm decision on this question is what will really determine the character and content of social services. After that decision is made training techniques can be taught with some assurance that they are hooked up to the basic program concept the department has enunciated.

To be sure, division chiefs should have heavy input in the determination of what training is offered but final decision on which needs will be met should be made at a much higher place in the organization than it seems to be now. We believe it should be by the two persons directly charged and accountable for Social Services or Income Maintenance.

32. ACCORDINGLY, WE ARE RECOMMENDING THAT THE STATUS OF THE TRAINING DIVISION BE ABOLISHED AS A UNIFIED DIVISION UNDER A DIVISION CHIEF AND THAT IT BE BROKEN INTO TWO SECTIONS, EACH DIRECTED BY A GRADE II SUPERVISOR. ONE SUPERVISOR WILL REPORT TO A NEW ASSISTANT DIRECTOR IN CHARGE OF INCOME MAINTENANCE AND THE OTHER WILL BE ACCOUNTABLE TO A NEW POSITION OF ASSISTANT DIRECTOR IN CHARGE OF SOCIAL SERVICES.

We regard the Chief Assistant Welfare Director as being, ideally, an administrative backup on policy and administrative matters to the Welfare Director. Diverting his time and attention by having to directly supervise other line or staff functions of any kind interferes greatly with what we regard as his primary use in the organization.

33. WE RECOMMEND THAT THE POSITION OF DIVISION CHIEF IN CHARGE OF TRAINING BE ABOLISHED. The type, content and nature of the supervision needed between eligibility technicians and social workers is so thoroughly different since separation that we think it is a mistake to run them in conjunction with each other.

Our recommendation concerning the elimination of the Division Chief is made realizing that by State regulation training of social workers must be supervised by a person holding a Master's Degree in Social Work. The person holding the title of Assistant Director for Social Services will probably have that degree. The Grade II Supervisor over social service training is also a M.S.W. so we think there is an easy way to meet the technicality of this requirement.

34. THE STATE, AT ONE TIME, MIGHT HAVE ALSO PREFERRED TO SEE AN M.S.W. MANAGE THE TRAINING OF ELIGIBILITY WORKERS ALSO. WE DO NOT THINK THAT IS THE CASE NOW AND RECOMMEND IT BE AVOIDED AT ALL COSTS. A THEME WE TRY

TO EMPHASIZE OVER AND OVER AGAIN IN THIS REPORT IS THAT ELIGIBILITY AND SOCIAL SERVICES ARE VASTLY DIFFERENT FUNCTIONS, CALLING FOR DIFFERENT TRAINING AND SKILLS.

In the Committee's judgment the priorities that have existed in the Training Division represent, to a considerable extent, the social work orientation of the Division Chief. That is not a criticism, but a simple statement about what the Division Chief for Training and the Chief Assistant Welfare Director considers important as a priority.

We can only allude to it, but the worst supervisory situation we found in the division could be traced, we thought, to what professional qualifications were necessary to manage a training program. In the long run, any service has to be evaluated in terms of its failures and success. We have tried to do that as objectively as possible and made our recommendations accordingly.

Management must, however, recognize in all its personnel transactions that many of the concepts that have traditionally guided employee selection in welfare are not suitable for staffing a fiscal or purely administrative operation. The importance of an M.S.W. degree is a delicate and difficult problem to even discuss, but it is, nevertheless, a very real and important concern in welfare management today.

It was evident to us that management has attempted to staff the Training Division with experienced and capable people. For the most part we thought they were interested, qualified, and an innovative group. The one classroom session we visited was conducted with enthusiasm and seemed to be organized well.

We also observed the staff to be frustrated and discouraged by lack of direction, a sense of isolation and indecisiveness in top management. The eligibility training specialists all seemed concerned that their use in the organization was essentially limited to the orientation classes and that they are not able to serve a broader, more specialized and far-reaching use in the organization. Some complained that they were not being used in between training classes because of poor scheduling and advance planning between the Training Division and the line divisions. We were limited in how far we could go in following work schedules but our interviews with the training staff made us think that there are good reasons to question the use of the training specialists between classes since the mass hiring of eligibility workers stopped earlier this year.

Holding the position we do on the importance of eligibility training in comparison with the training given to social workers we were especially interested in the supervision and the direction that the eligibility specialists received. In general, we can only say that the immediate supervision of the eligibility training unit is as vague and uninvolved as any supervisory relationships we had a chance to review in the course of the study. As we saw it, the primary responsibility of the Grade II Supervisor over the eligibility specialists was in giving an orientation class to new employees on Monday mornings. It is totally inconsistent with the purpose and level of the position. Our overall impression was that the eligibility training specialists are mainly self-directed and the Grade II Supervisor over the unit is largely a wasted position. In saying this we are aware that there are some delicate and difficult matters to deal with in correcting problems which have been present for some time. Some of them might be

alleviated somewhat by the recommendation we make in breaking the Division into two sections. In any event, it is a problem that we believe must be solved as a prerequisite to straightening out management's line of authority to this important training unit.

In contrast, we thought the immediate supervision over the social services unit was very good, but the social services unit also suffers from the same lack of direction and indecisiveness from top management about the content and coordination of the training plans it wants to implement. In summary, both units are working without the benefit of well-defined training objectives. Sound training objectives are almost impossible to develop until the basic question we just mentioned about long-term or short-term services is answered.

The staff is acutely conscious that the four-week classes they have been conducting are hopelessly inadequate. They want to do more specialized training in areas where they happen to have a particular competence. There is much potential within the Training Division and with the right leadership and support of the administration many beneficial changes can occur. The broad outline of the training format we suggest in Section III incorporates many of their views.

3. The Training Plan. The present training plan consists basically of four weeks of classroom instruction after which the new trainee is assigned directly to a full caseload in a division. Since the department's original separation plan was built around the integration of intake and ongoing cases the instruction had to cover all aspects of both budgeting procedure and eligibility. Furthermore, it was never possible to train the employee for

the special eligibility considerations that applied to a particular aid program.

About the only thing we can say in favor of the classroom training plan is, with the staff available, it was an efficient way to process a large number of people. But processing is not necessarily training. A training plan has to be judged by whether it prepares the employee to do his job. Training must continue until that is demonstrated. By that criteria the Training Division's program for eligibility workers is a dismal failure. 85% of the employees we surveyed in a 10% sample of the eligibility workers said they were unprepared to handle the caseloads they were given after training.

35. WITH THE PRESSURE AND PROBLEMS ASSOCIATED WITH MASS HIRINGS COMPLETED THE COMMITTEE'S GENERAL RECOMMENDATION IS TO SHIFT EMPHASIS IN TRAINING FROM THE CLASSROOM TO ON-THE-JOB TRAINING. The department's training proposal for 1971-72 also recognized a necessity of more on-the-job training but still included one month of classroom instruction as a specific in the curriculum. 36. THE COMMITTEE DIFFERS ON THIS LATTER POINT AND RECOMMENDS INSTEAD THAT THE INITIAL CLASSROOM ORIENTATION BE REDUCED TO ONE WEEK OR JUST ENOUGH TO MEET STATE REQUIREMENTS. If any more classroom training is needed it should be interspersed with the on-the-job training.

We believe that the classroom training should be reoriented around the idea that it is primarily a screening and evaluation process as opposed to a training period. The main purpose we see for classroom training is in teaching those aspects of training that apply to all employees. We think that represents a very limited number of training items. Beyond that, we see the classroom part of the instruction as being a screening device.

It should concentrate on trying to identify slow learners as well as those with special aptitudes. There are general tests that show native comprehensive ability, facility with a number concepts, etc. that are not being used now. 37. THE COMMITTEE RECOMMENDS THAT THESE TESTING METHODS BE USED AS A PART OF THE INITIAL EVALUATION AND INDUCTION PROCESS.

Secondly, the orientation period should try to make a determination on whether the employee should be used in intake or on a continuing caseload assignment and in which aid program. Someone, for example, who cannot run an adding machine or shows no facility for arithmetic should not be assigned to an intake function that involves a great deal of budget computation. Likewise, the quicker persons should go to AFDC, rather than to Blind or OAS where the pace is different and the programs are simpler. With the great differences between the aid categories we think a great deal is lost in trying to train all new employees for the provisions of all aid categories when they are only going to work in one.

The central concept of the training plan should be to bring the worker into contact as soon as possible with a working situation that approximates his actual job responsibilities. We would give the new employee a limited caseload of perhaps 15 to 20 actual cases within the aid category he will be assigned as soon as the screening and orientation period is over. We believe that the new employee should remain under the supervision of the training specialist for as long as the training period lasts. As the trainee's ability increases his practice caseload should be increasing accordingly until he is working at full capacity. We do not think that division chiefs should have the responsibility as they now do for completing the training process.

Likewise, it is unfair to leave the full responsibility for evaluating and culling employees to the division chiefs after they are placed in a working status. What is obviously needed is some kind of grading system. There is none now. 38. WE RECOMMEND, THEREFORE, THAT SOME KIND OF GRADING SYSTEM BE DEvised BY WHICH NEW EMPLOYEES CAN BE PROGRESSIVELY EVALUATED AS THEY MOVE THROUGH THE TRAINING PERIOD. There are some very objective factors which can be used such as administrative errors and mistakes in budget computation, condition of cases, etc. The opportunity to assess new employees objectively is made more difficult, however, due to the fact that there are no agency-wide standards of the same type for permanent employees.

Some of the inherent weaknesses in the present training programs may have been mitigated to some extent had the trainees entered the organization under experienced, first line supervisors. This was not the case. The major share of trained supervisors had been used in staffing the adult programs and in the very first sections of AFDC which were separated in January of 1970.

The length of experience of the first line supervisors in most of the AFDC units is not markedly different from the workers they supervised. In one section of eligibility units we looked at the average time of an employee in a supervisory position was about 25 weeks compared to about 23 weeks of experience for the worker.

It is true that workers look to their first line supervisors for augmenting their training but the supervisors are not equipped to do this. Moreover, the department's training program has afforded little opportunity for training supervisors. 78% of the workers answering our questionnaire

estimated that they have received less than five hours training since they assumed their position. About half of the workers said their supervisors had been unable to help them with the problems they had encountered on the job. 70% of the workers we surveyed said they had learned their job in two ways: making mistakes and secondly, help from more experienced employees. The department's formal training program had been the least helpful of all.

In short, even properly trained eligibility technicians must be backed up by much stronger first line supervision. 39. THE COMMITTEE RECOMMENDS THAT AT LEAST 35% OF THIS YEAR'S TRAINING BUDGET BE DEVOTED TO INTENSIFIED TRAINING WORK WITH THE GRADE I SUPERVISORS. We believe the most efficient method of getting the most training to the most employees in the shortest time is through the first line supervisors. The Committee makes its recommendation feeling that this important level of supervision has also been created in a set of very unusual circumstances that have, themselves, not been recognized in the department's training plans. Grade I Eligibility Supervisors are employees who, generally speaking, were budget clerks or clerical supervisors prior to separation but who are in no respect properly trained for supervisory responsibility. As a consequence, the unit clerks who are very important to eligibility work are mostly new people. Practically no formal training has been given to them so far. We consider the clerical positions as another strategic area for more training that we did not find incorporated into any of the Training Division's written plans.

Structuring of the training program should reflect to a far greater extent than it does specialized eligibility problems that are exposed through validations and fraud referrals. This information is not being coordinated with training. We are satisfied that enough is known

about particular weaknesses in the eligibility and budgeting process to set up correctional, intensified training programs in specific areas now.

As the department looks ahead to upgrading its existing eligibility staff it should be guided by the knowledge of these special problems. Present data from validations shows high error rates in Special Need Determinations and Personal Property Determinations, to mention two examples.

Our survey of eligibility workers asked this question:

- j. List in order of their importance the important areas of your actual job duties that were not covered in the formal training that you have received.

1. _____
2. _____
3. _____
4. _____
5. _____

Answers covered a wide range of training deficiencies. We think we see a pattern to the responses but after spending some time trying to summarize them we decided that more understanding could be taken from a broad listing of the answers themselves. When we show more than one problem in the same grouping it is for the purpose of showing the proportion of that response as the workers rank them in importance.

RESPONSES TO
ELIGIBILITY TECHNICIAN QUESTIONNAIRE

The following question was asked in a questionnaire sent to the eligibility technicians and below we have listed the response according to how they ranked the area in which they considered it the most important. "List in order of their importance the important areas of your actual job duties that were not covered in the formal training that you have received."

1. Budgeting
Documentation
Forms and their uses
Time spent doing forms
Use of forms
Food Stamps
Documentation
Food Stamps
Budgeting
Budgeting
Interviewing
Handling irate clients and/or landlords
Budgeting
Knowledge of laws
Budgeting
Documentation
Coping with pressure of mass changes & high workload
Human relations
Procedure for various tax clearances
Overpayments
Applicant job priorities
2. Interviewing
Documentation
What is federally eligible
Clerical procedure
Special needs
Medi-Cal instruction
Payroll & computer forms
Knowledge of laws & regulations
Use of forms
Use of forms
Interviewing
Organization of caseload
Mixed aid households
Renewals
Budgeting
Job requirements re: eligibility vs. service
3. 10-16 Procedure
Overpayments
Functions re: WIN & other training programs
Special shelter funds
Unit procedures
Use of forms
Client/worker relationship
Documentation
Budgeting
Posting
Laws & regulations
Clearance in categorical aids for Medi-Cal
Priorities not stressed
Overpayments
4. Filing systems
Budgeting
Home call techniques
Laws & regulations
Documentation
Preparing IBM cards
Budgeting
Deadlines re: transfers in & out of county
Renewals not covered
5. Documentation
Definition of duties for clerk & worker
Placement of forms in case folder
Explanation of computer systems
Sources for income clearances
(S.S., V.A., Civil Service)
Self-defense (verbally & physically)

The options and alternatives in the training proposals presented to management this year by the Training Division were basically variations on the length of the training period. The Committee is of the opinion that the Training Division has no idea of what constitutes an adequate training period besides the obvious one that a longer-term of training is better than a short one.

We wondered how the division could formalize a specific term of training until it has had some experience with conducting an entirely different training program. An average time period can be set after some experience but until then we think the only guiding principle should be to keep the new employee in a training status until able to handle a full caseload as judged by some objective measures of performance.

The time an employee has to spend in training may vary considerably depending on the background and aptitude of the trainee as well as the content and degree of specialization in the training offered.

The last training proposal we reviewed after writing this section indicates that the department has settled on a three-month training plan. We noticed, however, that it still retains a full month of initial work in the classroom and two-fifths of the time thereafter is spent in classroom training. That would be about 40 working days in the classroom and 26 working days with on-the-job training. Feeling as we do about the value of classroom training in comparison with on-the-job experience, which this plan is supposed to emphasize, we still think there is a disproportionate amount of classroom work. After reviewing the plan we were not persuaded to change our recommendation for a one-week limitation on classroom study.

The plan did not speak to the possibility of separating the classes into special groups arranged around the different aid categories or by intake or ongoing which we thought might be done as a way of narrowing the scope and reducing the cost of training. The Task Force does not see the need for providing the same generalized training to everyone when it is known that workers will have different assignments in different aid programs.

Without mentioning the specific criteria it would use, the plan we reviewed did recognize the need to formally evaluate trainees during the training period. We were pleased to see the idea of an evaluative component mentioned and suggest that the Training Division can be as specific about how it will evaluate as it has with some of the other elements of their training proposal.

After saying all we have about the importance of having a properly trained corps of eligibility workers the Task Force is compelled to comment briefly on the downgrading of the eligibility training instructors by the County Personnel Department. These teaching positions were downgraded on the reasoning that since separation the eligibility instructors only teach budgeting procedure and eligibility aspects of welfare whereas before separation they also taught social services case work and techniques. By the same logic it would be appropriate to downgrade the social services instructor, but some state regulations apparently override local classification decisions in this area. We are not so sure what is involved in teaching case work techniques, but after nine months in this agency we are very positive about what eligibility determination and budget computation is and why it has to be taught very thoroughly if the county has any hope of maintaining a fiscally responsible welfare department.

After reviewing the correspondence between the Personnel Department and the Welfare Department related to this classification dispute, we think that the importance of eligibility may have somehow escaped the classification analysts. There are about six positions involved in this classification consideration. At the most it involves a few hundred dollars a month in salaries. In contrast the eligibility instructors are instrumental in teaching all aspects of an eligibility process which controls \$130 million of cash aid.

Mixed up in this classification issue, again, is a lot of petty nonsense about whether an MSW degree is needed, the relative importance of subject matter taught in eligibility and social services what state regulations require for the position and whether two years of college or four years are needed. What makes the whole debate seem ludicrous is that, with possibly one exception, there is not one classification specification in the department which is acknowledged as accurately reflecting satisfactory job requirements for any position. Even after our lengthy excursion into the Welfare Department we cannot confidently suggest what kind of specification we would write for these six critical teaching positions. All we know is that they should be the best people the department can find. The Personnel Department spent one and one-half days in the department to reach their decision on this matter. We suggest that the County Administrator and the Civil Service Commission who review this action should be very cautious in accepting the Personnel Analyst's recommendation.

Our position is that regardless of what the training specialists taught before separation the subject matter they are teaching now is the heart of this organization. In comparison to social work techniques it must be considered as being the more important. Holding a good teaching staff together

depends, obviously, on many things other than a class specification, such as selection, discipline, leadership, etc., but to the extent that it is a factor at all the Task Force believes it would be far safer to take risks in other questionable areas of classification of which we found many.

40. THE TASK FORCE RECOMMENDS THE RECENT RECLASSIFICATION ORDER BE RESCINDED AND THE POSITIONS RESTORED TO THEIR FORMER LEVEL IN LIGHT OF THEIR IMPORTANCE TO THE AGENCY.

SECTION VI
FRAUD CONTROL

FRAUD CONTROL

The Special Investigations Units that exist somewhere in most welfare departments are charged with an investigative function as definite as that of the bunko squad in the local police department. The publicly held view of the unit's activity, we are sure, is to find and prosecute fraud in welfare as a means of deterring it. It is the Task Force's finding that the ability of the Special Investigations Unit to conduct forceful and efficient investigations is so constrained by philosophy, law, and procedural restrictions that it absolutely precludes the possibility of serving as an effective deterrent to fraud either before or after it occurs. As an investigative body, it is hard to imagine anything similar in other governmental agencies which run an investigative service to police their administrative operations.

Our brief review of the Special Investigative Unit forces us once again to reiterate this general finding: It is futile to try to control fraud by anything done after it occurs. The incidence of fraud can be most effectively minimized by reinstating strong initial eligibility investigations, increasing the frequency of client contact to the greatest extent possible and doing better initial and continuing verification and documentation of client information. In short, the way to prevent fraud is by doing the sort of eligibility work we try to describe in the preceding chapters of this report.

The Special Investigations Unit of the department is charged with at least two other mandated responsibilities besides investigating alleged fraud cases for purposes of criminal prosecution. Neither of them has much to do with the prosecution of fraud. The prosecutions that result from

the investigations are actually byproducts of an investigative process primarily set up to determine the precise amount of the dollar loss in fraud or overpayment cases. About half of the 20 member staff, which is called Special Eligibility Review, is concerned with these accounting determinations.

It may be evident from the first hour of investigation on a case that the statute of limitations has expired or because the eligibility worker did not make a renewal on time that it would be pointless to press criminal charges or to try effecting a recovery of the loss. Yet, the investigator is required to complete a whole investigation anyway and to fix the exact amount of the loss, because this figures into certain adjustments the state and federal government make in their total grant contributions to welfare departments.

The second principal reason the cases come to the Special Eligibility Review is to determine what effects the recipient's action may have on their current eligibility. In most cases the eligibility worker makes this determination. The Special Eligibility Review unit only deals with a very small percentage of the total number of overpayment cases where probable fraud is indicated. The basic decision to be made in any overpayment case is whether the recipient's action will sustain an attempt to recover part of the loss by reduction of the recipient's grant before the 60-day adjustment period runs out. The law requires that before any adjustment reduction or termination of the recipient's grant can be made the recipient must be notified. The recipient can also appeal any such change, so evidence must be found to support a termina-

tion or a reduction in the recipient's grant. The cases which the Special Eligibility Review unit receives involve some question about a point of eligibility which the regular worker cannot respond without some investigation into the case which she cannot do herself.

The table on the following page is our attempt to present the investigative outcome of the 686 referrals which were handled by the Special Eligibility Review team and the fraud unit last year.

The 207 cases in Column C of the table are not necessarily cases in which clients did not do something fraudulent. Most probably they did, but the case does not warrant further investigation for fraud because of something else about the condition of the case. In most instances, the cases were ones in which renewals were long overdue, the statute of limitations had run out, or some technical administrative error was found which would jeopardize the prosecution of the cases if they were prepared for court. The Special Eligibility Review investigator returns them to the worker with a ruling on whether to continue aid or to effect an adjustment in the grant to recover part of the loss.

The 372 cases referred to the six-member fraud detail are the outgrowth of the investigations performed for these other two purposes by the six special eligibility review investigators. These are cases where there appears to be reasonable cause to believe the fraudulent act was committed and these are then passed over to the fraud detail for more intensive investigation. At this point, emphasis is switched from determining the probability of fraud to developing factual evidence to support a criminal charge.

FLOW CHART ON CASE DISPOSITIONS BY SIU AND DISTRICT ATTORNEY'S OFFICE

	(a) SER's Rec'd 1970	(b) Total Compl. SER	(c) Ret'd to Wkr.	(d) Referral Fraud Unit	(e) Informal Referrals	(f) Formal Referrals	(g) Total to DA	(h) Ret'd No Action	(i) Cit'n Hearing	(j) Acgt'd	(k) Dis- missed	(l) Conv.	(m) Dis- posed
Jan.	65	48	18	30	4	7	11	7	0	0	0	3	10
Feb.	57	55	24	31	11	9	20	3	2	0	0	2	7
Mar.	76	63	19	44	12	9	21	13	0	0	3	9	25
Apr.	55	47	20	27	15	8	23	15	2	0	0	0	15
May	52	44	15	29	12	16	28	8	1	0	0	1	10
June	32	47	16	31	17	3	20	23	1	0	2	0	26
July	65	53	25	28	21	9	30	16	1	0	2	0	19
Aug.	58	42	18	24	17	8	25	7	3	0	1	0	11
Sept.	52	48	15	33	9	11	20	16	4	0	1	8	29
Oct.	32	46	14	32	6	13	19	1	3	0	1	2	7
Nov.	62	38	12	26	21	13	34	17	3	0	0	1	21
Dec.	80	48	11	37	9	15	24	6	3	0	3	5	17
Total	<u>686</u>	<u>579</u>	<u>207</u>	<u>372</u>	<u>154</u>	<u>121</u>	<u>275</u>	<u>132</u>	<u>23</u>	<u>0</u>	<u>13</u>	<u>31</u>	<u>197</u>
Ave/Mo	57.2	48.3	17.3	31.0	12.8	10.1	22.9	11.0	1.9	0	1.08	2.5	16.4

KEY

(a) Special Eligibility Review (requests for investigation) received primarily from the Eligibility workers.

(b) = (c) + (d)

(c) Returned to Worker after investigation indicates there is insufficient evidence to sustain a finding of probable fraud

(d) Cases found to be probably fraudulent and referred to the Fraud Investigation Section of SIU.

(e) + (f) = (g)

Columns (h) through (m) refer to dispositions made by the District Attorney.

(i) Citation Hearing

(j) Acquitted

(l) Convicted

Further investigation shakes out another 154 cases shown as informal referrals turned over to the District Attorney. These are cases in which sufficient evidence is not secured, the statute of limitations has run out, or some other legal barrier to prosecution is found. The 121 formal referrals that still remain are given to the District Attorney with full investigations completed. From the standpoint of the fraud investigators these are all prosecutable cases and which, as far as the investigators know, have no legal barrier to prosecution. The District Attorney reviews these, issues a citation if he feels it is warranted and assigns the case to one of his trial deputies.

The balance of the table shows the results of both the informal and formal referrals which the welfare investigators turn over to the District Attorney. A high percentage of even the formal referrals which are supposed to have no legal barrier to prosecution expire in the District Attorney's office due to the statute of limitations running out before they are prosecuted.

There are no standards to go by and we have no comparative data from other counties, but it is the Task Force's judgment the 31 convictions are not an impressive record out of 579 cases investigated. It is true that the 13 cases dismissed and the 23 cases cited in for hearing have gone far enough to scare the recipient, so there are some intangible benefits to these proceedings as well. Whether the whole process justifies the cost is a difficult question to answer.

All this only leads to the question of why the conviction rate is as low as it is. We have already alluded to the fact that a great part of the investigative process takes place for the purpose of fixing the exact amount of loss in each case when it is really irrelevant to prosecuting fraud. The amount of loss is not even mentioned in the charge which is issued against the recipient. Its main purpose is in determining whether the violation is a misdemeanor or a felony. That has not had much relevance either until lately because of all violations being limited to misdemeanors. That is still the case in all the adult categories. A pending change in the law will alter that in AFDC so that losses of over \$200 can be prosecuted as a felony. The statute of limitations will also be lengthened.

It is the opinion of the Task Force that the accounting determination in fraud investigations is a very uneconomic aspect of SIU's investigative responsibility. There are no statistics on the size of individual losses, but we estimate from the general run of overpayments reported that the losses in 80% of the cases are probably less than \$200. Allowing about three days for the nonfraud aspects of the 579 cases investigated in 1970, we estimate that investigative costs of SER alone average something more than \$300 per case. Recoveries are probably less than 10% of the discovered losses. It is hard to justify spending a lot of time accounting for the losses beyond what is needed to charge and prosecute for the violation. Even the determination on continuing eligibility has very little to do with the size of the loss. 41 INSOFAR AS IT IS NECESSARY TO DO ACCOUNTING INVESTIGATION FOR PURPOSES OF WORKING

OUT ADJUSTMENTS IN STATE AND FEDERAL SUBVENTIONS WE RECOMMEND THAT THE DEPARTMENT BE ALLOWED TO AVERAGE THE LOSSES IN FRAUD CASES.

One of the primary advantages in reducing the time now spent on these accounting aspects of the cases is that it will allow the SER investigators to work their cases on a more current basis. Without at least two more SER investigators the unit cannot keep abreast of the incoming referrals. The SER investigators are receiving now about 10 more cases per month than they investigate. Without explaining all the reasons for it, we are confident that working cases quickly is one of the critical factors to successful investigation outcomes.

By delaying action on a case for three months, witnesses will be lost, memories cloud up and even the facts which caused the referral will change. It also seriously affects the time and effort needed to accomplish the same kind and quality of investigation. Instead of the investigator being able to interview three or four prime witnesses, they may have to interview ten people to find out where the prime witnesses have gone. The unit has contended with this handicap for a long time.

Yet, when one considers the final outcome of the cases which are investigated, it seems rather pointless to us to investigate more cases only to have them returned or bogged down in the final phase of the prosecution process.

It is the feeling of the Task Force that the decision to prosecute, dismiss or merely warn a charged offender is a rather subjective trial or legal determination. AFDC mothers cannot be very exciting cases to prosecute and the family and other heartbreaking human conditions in

most of the cases we reviewed makes anyone wonder how practical it is to put a mother in jail when three or four children will have to be placed in foster homes at county expense. Still, we believe these facets of the case are just as important elements in the decision to prosecute as the quality of the investigations and the evidence collected. It is a terrible moral and economic dilemma, but we do think it is deceptive and improper to set up an expensive investigative process which implies the intent to carry out a hard brand of justice and then frustrate it by imposing impossible administrative barriers. Furthermore, these decisions are ones that can only be made by the trial attorney, who is in the best position to understand the attitudes of the courts and weigh the quality of the evidence collected. We accept them as important subjective judgments but suggest that they can be made at an earlier stage of the investigation as a way of avoiding the continuation of an investigation in which some overriding factor is going to make the case unprosecutable regardless of what the investigation substantiates.

42. ACCORDINGLY, WE RECOMMEND THAT A TRIAL ATTORNEY BE APPOINTED FROM THE DISTRICT ATTORNEY'S STAFF WHO WILL MEET REGULARLY TO REVIEW CASES ON WHICH THE FIRST SER PHASE OF THE INVESTIGATION HAS BEEN COMPLETED TO MAKE A DECISION ON WHETHER THERE ARE FACTORS INVOLVED IN THE CASE WHICH ARE LIKELY TO INTERFERE WITH A FORMAL PROSECUTION. We believe enough is known about the case by the time the SER phase of the investigation is done to make an informal but final judgment on the prospect of success before it is turned over to the fraud section for the intensive and expensive

investigative workup which is necessary for a court proceeding. No one person should be completely responsible for making this kind of decision so we suggest that a review committee be created which will include the trial attorney, the Assistant Director of Management, SIU and the unit or section chief in whose caseload the case was found.

Without any qualification, the biggest barrier to conducting effective or economical investigations are the constraints placed on the investigators by the general policy and procedures under which they operate. Actually, the same policy and procedures control the kind of investigation that can be done for all aspects of intake and ongoing eligibility. Here is the pertinent regulatory section taken directly from the State Manual of Policy and Procedures (underlining ours):

.3 Methods of Investigation

- .31 The exploration of facts relating to eligibility of the applicant is a joint responsibility of the applicant and the county. Documents and other forms of information in the applicant's possession or readily available to him are to be considered before the evaluation is extended to other sources. To the extent that such evidence appears to be reasonably reliable, complete, and consistent, it shall be accepted as establishing eligibility.
- .32 Other sources of information are to be sought only when the applicant does not have information and other evidence to support his application, or when such information and evidence as he is able to give is contradictory or inconclusive. In such case, the investigation is to be directed toward obtaining the most readily available reliable evidence for determining eligibility and need.
- .33 The applicant or recipient shall to the extent he is able, assume responsibility for obtaining such additional information and evidence as is needed in the investigation process. However, when he is unable to assume this responsibility in full or in part, the county shall take the initiative in obtaining the information and evidence.
- .34 All such further investigation, including any necessary contacts with collateral sources, shall be undertaken only with the full knowledge of, and agreement by, the applicant and only following full explanation to the applicant of the information desired, why it is needed, and how it will be used.

When needed in such further investigation, and as evidence of the applicant's consent thereto, a specific consent form, signed by the applicant and, if necessary, by his spouse (by both parents in AFDC when this is possible) shall be obtained for each such contact. The consent form should cover the purpose of the specific contact as well as the individual or agency to be consulted. Form 228, Applicant's Authorization for Release of Information, may be used for this purpose. A signed consent form is not required when public records are used.

35. If the applicant is reluctant or unwilling to help resolve inconsistencies or questions concerning his eligibility or to have the county pursue the investigation on his behalf, his reasons are to be considered carefully with him. Such consideration will help assure mutual understanding of the facts and why further investigation is needed. If he persists in refusing to resolve inconsistencies or to cooperate within his ability in establishing his own eligibility, the application shall be denied or the grant terminated.

The reader can make his own judgments, but it is the view of the Task Force that it is simply not possible to conduct an effective investigative operation under such constraints in a welfare department or anyplace else.

The idea of having an investigative function inside a welfare agency has always been an ideological sore point. One of the MSWs in the department raised some very formal questions about the legality of conducting fraud investigations in conjunction with the work done in reviewing a case for questions of current eligibility. The protest the MSW raised is one of the main reasons for organizing the special investigations unit into two separate sections. As we explained, one is concerned with considerations of present eligibility and financial loss and the other section with fraud. To our minds, this organization doesn't make much sense because it causes a great deal of duplicated effort, but it is perhaps the neatest way around a technicality surrounding the incompatibility of two different investigative functions. Ideally, we would think that an investigation

would be started and continued to a conclusion by the same investigator as is done in most law enforcement agencies.

43. THE GENERAL RECOMMENDATION WE MAKE ON INVESTIGATIVE POLICY IS THAT IT MUST BE CHANGED TO DISTINGUISH BETWEEN WHAT KIND OF INVESTIGATION CAN BE CONDUCTED AFTER THE PROBABILITY OF FRAUD HAS BEEN ESTABLISHED AND THE KIND OF INVESTIGATION THAT CAN BE DONE BEFORE THE PROBABILITY OF FRAUD IS ESTABLISHED.

It is ridiculous to expect cooperation from the client in securing useful evidence after they know their case is under investigation. It is about as reasonable as expecting someone to testify against himself. Yet this is the kind of logic that pervades the whole investigation procedure written for local welfare departments. Clearly, there are some practical and legitimate reasons for loosening investigative restrictions after the probability of fraud is evident.

44. THE TASK FORCE RECOMMENDS AMENDING FINANCIAL CODE SECTION 1917 TO ALLOW BANKS AND LENDING INSTITUTIONS TO RELEASE INFORMATION RELATIVE TO ASSETS AND ACCOUNTS TO WELFARE INVESTIGATORS AS THEY ARE REQUIRED TO DO FOR ALL OTHER LAW ENFORCEMENT AGENCIES. Welfare investigators need this information but are forced to get it through personal contacts in other police agencies.

The same is true for DMV and CI&I clearances which the welfare investigator cannot secure directly. The current restrictions are meaningless anyway because the welfare investigators process their requests through informal channels but it is certainly not a practice conducive to efficient investigations.

Another problem section of the law that must be heavily relied upon to secure interjurisdictional cooperation in fraud investigations is Section 11478 of the Welfare and Institutions Code. We are sure that it was written with the intent of requiring all state and local agencies to cooperate in supplying information to welfare departments in investigating actions for both absent fathers and fraud. The language is construed by many agencies, however, to mean that cooperation is only required in collecting contributions from absent fathers and not in fraud investigations. The fact that the problem exists only illustrates, we think, how much ideological resistance there still is to fraud investigations inside welfare departments.

45. THE TASK FORCE RECOMMENDS THAT THE LANGUAGE IN SECTION 11478 OF THE WELFARE AND INSTITUTIONS CODE BE FURTHER CLARIFIED TO REMOVE ANY AMBIGUITY ABOUT INTERAGENCY COOPERATION IN FRAUD CASES. It doesn't matter to us how it is done, but the department investigators suggest the section be divided into two parts with identical requirements applied to both fraud and absent fathers.

This problem of bureaucratic cooperation was represented to us as a major obstacle in securing information, which is very often vital to a fraud investigation. Our cursory review of the State's data bank in the Central Registry operated by the Department of Justice makes us think that it does work differently for absent parent enforcement than it does for fraud. As an example, the coordinator running the Central Registry demonstrated to us how quickly the Registry can supply information on whether an applicant is receiving UI benefits. It was done in a matter of minutes.

In contrast, the process the investigators claim they follow in getting information on unemployment insurance in a fraud investigation

takes weeks. A request for information about unemployment insurance goes from STU, to the Welfare Director, to the State Department of Social Welfare, and finally to the Director of HRD. If the request is acknowledged, it has to go back through the same channels. All this bureaucratic runaround is required to answer a request which could be supplied immediately from the local unemployment office in Oakland.

The problems related to getting copies of Social Security checks from the federal government is even worse. The investigator usually knows that a person is receiving unreported Social Security income, but for the purposes of preparing trial evidence, photostatic copies of the checks are needed, and it takes from six to nine months to get them. Our analysis of 486 collectible overpayments in March showed that approximately 20% of the overpayments had occurred because the recipient had failed to report Social Security income. There may not be a direct correlation with fraud, but it does point, we think, to a special problem area which the department is helpless to do very much about.

If this Welfare Department's problems are representative at all, the Task Force thinks that there are some very good reasons for facilitating access for information in Social Security and HRD, particularly. The county has made a commendable attempt to tie Social Security numbers down in the initial eligibility process. Social Security numbers have also been cross-referenced on the computer to other case identification data.

In proportion to the size of the caseloads, we found about as many overpayments occur in the adult categories as we found in the AFDC. Yet, the number of fraud referrals from the adult caseloads is very low. For the month of July, 25 cases were referred from AFDC, 2 from GA, 2 from

all the adult categories and 2 from food stamps. The other months we looked at were not significantly different.

In asking why, we find that a felony fraud cannot occur in the adult categories. All violations are limited to misdemeanors. Even the recovery of an overpayment has to be processed as a civil procedure rather than as a criminal action. As a practical matter it seems almost pointless to try prosecuting fraud in the adult categories. Making a moralistic distinction for the OAS recipients is quite easy to understand, but in view of the liberalized qualifications for eligibility in ATD for psychological impairment we see the law providing immunity to an area that is potentially very susceptible to abuse.

The Task Force found no valid reasons for supervising the Special Investigations Unit in the Family Services Division. Our recommendation on this is contained in the section of the report dealing with the organization plan.

SECTION VII

SECURING SUPPORT FROM ABSENT PARENTS

SECURING SUPPORT FROM ABSENT PARENTS

The major public assistance program in California is, of course, AFDC, in which one of the chief eligibility requirements is a child's deprivation of at least one parent. Even though both parents are obligated to support the child under the law, it is usually the male parent who is the object of child support enforcement activities. Excluding the 15% of absent fathers in the AFDC caseload who are incapacitated or dead, there were, as of January, 1971, about 230,000 AFDC-connected fathers who were absent because of divorce, separation, desertion, imprisonment, or because they had never married the mother of the AFDC child.¹ With regard to the illegitimacy factor, 37% of the statewide AFDC-FG caseload in 1969 were never married to the mother of the AFDC child.²

Child support payments are significant; there was an estimated \$36,500,000 collected statewide from only 15% of all absent fathers in 1969-70.³

¹ In making these descriptive comments, heavy reliance is placed on background information provided in The Final Report of the Task Force on Absent Parent Child Support, State of California, State Department of Social Welfare, January, 1971.

² Ibid., p.9.

³ Ibid., p.12.

These funds primarily served to offset welfare grants and resulted in savings in county, state, and federal costs. It should also be noted that a very narrow margin generally separates welfare from non-welfare mothers who receive child support payments. Regular receipt of child support by nonwelfare, working, mothers is often the major factor in preventing another AFDC case from being opened.

The major state study referred to in footnote (1) made some interesting observations on characteristics of welfare and nonwelfare absent fathers, which were in turn based upon about 600 questionnaires sent to several counties. Included among these observations were the following:

Both the welfare and nonwelfare absent fathers would more likely live in the county where their family resides...

The nonwelfare father is more likely to have remarried.

The welfare father is more likely than the nonwelfare father to still be married to the mother of the children...

With respect to the time lapse since the last payment of child support, nonwelfare fathers were rather evenly distributed across the several time categories. Welfare fathers were more likely to have never made a child support contribution...⁴

⁴ Ibid., pp. 10-11.

Enforcement of child support statutes and regulations is, of course, a county responsibility. The state's recent study found a wide variation among counties, not only in organization and procedures, but in results in terms of percentage of parents contributing, average payments per contributing parent and absent parent, etc. Since the state so heavily qualifies its own report on intercounty performance in child support payments, and our own inquiry brings the state's figures into question, we cannot present a measure of Alameda's performance in this area as compared to other counties. However, the findings of the state report, as well as some of its 40 recommendations, do have considerable relevance to the county, and it is recommended reading to those interested.

As one example, the fact that only about 15% of the absent fathers are contributing child support suggests that this is an area where some dramatic gains might be achieved. For another example, the finding that most absent fathers still live in the county where the family resides suggests that better ways need to be found to improve the local enforcement effort. For another item, the fact that 37% of the absent fathers in the AFDC-FG caseload were never married to the mother of the AFDC child emphasizes the strong need for quicker, more positive procedures for establishing paternity as a means of securing child support in these cases.

There are few operations in all county government which are more complex, contradictory and duplicative than those concerned with securing child support from absent parents. Three departments are directly involved -- Welfare, the Family Support Division (FSD) of the District Attorney's Office, and Probation. Also involved, of course, are the

courts, the Board of Supervisors, and the Central Collections Unit of the Auditor's Office. But the day-to-day responsibility of enforcing statutes, regulations, or court orders rests with the first three offices. The major "caseload" of absent parents resides in the Alameda District Attorney's office, where there are 28,500 absent parent cases, of which approximately 5,000 are making contributions. There are in addition 700-800 cases involving absent parent contributions which are directly supervised by the Welfare Department. In addition, there are approximately 400 welfare-connected absent fathers who have violated nonsupport provisions of the Penal Code who are on formal probation and are directly supervised by the Probation Department.

How do so many agencies get involved? A brief journey through the procedure may be helpful. It should be noted that the procedure which we are about to describe is in the process of being changed as a result of a joint study by Welfare and the District Attorney that was filed with and accepted by the Board of Supervisors in April, 1971. Let us assume we are presented with an application for AFDC in which the mother knows the address of the absent father and he does not deny paternity nor is he unwilling to support the child. The eligibility worker is then required to contact the father and establish a support agreement. The contact is made by a form letter. If there is no answer within a week, a second letter is sent by certified mail indicating that aid has been requested for his child(ren) and informing him of his legal responsibilities for support. He is asked to complete a form, showing his current contributions, his income, and his expenses. He is also advised that failure to

cooperate involves referral to the District Attorney's office. After 10 more days, the case is referred to the Family Support Division.

If, however, the absent parent is responsive and completes all forms, and if he lives in town, he is asked to come to the office for interview and to develop a support plan. Here again, he is required to present verification of expenses and earnings. If the man is out of town, the process is handled by mail, but in any event he must agree to support based on a contribution scale. If he refuses to contribute according to scale, he is also referred to the Family Support Division. (Until April, 1971, Welfare and FSD operated on the basis of different contribution scales; the absent father who found his case referred to FSD generally experienced greater leniency in allowance for expenses than if it had remained a welfare matter. The Welfare Department and the District Attorney should, however, be credited with a major breakthrough here, because the Board of Supervisors, on their joint recommendation, adopted on April 27, 1971 a uniform contribution scale for child support).

Let us assume, nevertheless, that the absent father has met all of the Welfare Department's requirements related to his contribution and has signed the support agreement. At this point he is given the option of sending support directly to the mother or to the county, although it is ACWD policy to have the support sent to the county. The father then sends his support payments to Central Collections who sends duplicate receipts to the father and the absent parent control desk in the Welfare Department. The control desk posts a ledger card, and forwards the duplicate receipt to the caseworker. If a payment becomes delinquent, the control desk also

notifies the worker. When this happens, the absent father runs the risk once again of referral to FSD.

Without belaboring the finer points of procedure, Welfare has been involved in securing absent parent child support until voluntary compliance was no longer possible, after which the case was referred to the Family Support Division of the District Attorney's office. In such cases, if FSD was also unsuccessful in obtaining support, the father was (if he could be found) brought into court on a complaint charging violation of Penal Code Section 270, as a result of which he may have been placed on formal probation which then involved the Probation Department.

The procedure we have reviewed here is - as we write this - in the process of substantial revision. We have discussed the old procedures in order to explain the significance of the revisions that have been adopted by the Board of Supervisors on joint recommendation of Welfare and the District Attorney. We discuss the revisions here because they may have some application in other counties, and also because in light of some of the admittedly harsh judgments elsewhere in this report, the department and the county deserve explicit acknowledgement for specific improvements that have been undertaken.

In addition to the change already mentioned regarding a uniform schedule of payments, the county has adopted the following revisions in absent parent child support procedures:

1. Each AFDC application involving an absent parent will be referred immediately to Family Support Division. This is being supported at the state level with appropriate changes in the Welfare