

San Benito County Health & Human Services Agency

CHDP/CCS/HCPFC

FY 2015-2016

Program Narrative

Agency Description

The **Child Health and Disability Prevention (CHDP)** Program and **California Children's Services (CCS)** Program, are located in the Public Health Division's main office at 439 Fourth Street, Hollister, California. The San Benito County Health & Human Services Agency (HHSA) Administration, Social Services Division and Child Welfare Program are located at 1111 San Felipe Road, Hollister. The Probation Department is located at 400 Monterey Street in Hollister and is adjacent to the Public Health Division main office. The Probation Department is a separate agency from Health & Human Services. The **Health Care Program for Children in Foster Care (HCPFC)** Public Health Nurse (PHN) located at 439 4th Street, Hollister travels to the 1111 San Felipe Road site or 400 Monterey Street site to satisfy work and administrative duties as required by Social Services Division and Child Welfare Program and Probation Department MOUs, respectively.

Supervision and Leadership

The Director of HHSA, James Rydingsword, MPA, is the Director of Health and Human Services to include the Public Health Division and Anju Goel MD, MPH, is the Health Officer and Medical Director. The Director of Nursing/Public Health Administrator (DON/PHA), Lynn Mello, RN, PHN, supervises the Medical Therapy Unit and a 1.0 FTE Public Health Nurse (PHN) is assigned to the CMS Administrator position and program to cover three positions, CCS Administration, CHDP Deputy

Director and HCPCFC PHN. (See budget FTE breakdown). The 1.0 PHN position was vacant from September of 2014 until May of 2015, was filled for approximately 3 months and then was vacated again in July 2015. Recruitment for a PHN to refill that position is currently in progress (and difficult to fill due to locality, shortage of PHNs and surrounding county pay scale competition). The DON/PHA, Lynn Mello is providing a minimal level of CMS program responsibilities to the programs.

Staffing

The CHDP budgeted staff positions include 1.0 FTE Health Assistant (HA), .55 FTE of Office Assistant and .57 FTE PHN. The CCS program budgeted staff positions include 0.30 FTE of PHN services, 1.0 FTE Eligibility Workers and a .25 FTE Office Assistant for Clerical Support. (The MTU support staff .25 FTE Office Assistant who also helps as a parent liaison to clients. Currently, there is one (1) staff 0.5 FTE Physical Therapist, one (1) contract OT and one (1) contract PT to provide direct client MTU services). The HCPCFC program budgeted staff positions include 0.13 FTE PHN only.

Integration of Programs

Normally, a PHN administers all CMS programs; CHDP, CCS, and HCPCFC programs. The PHN reviews all PM 160s and CCS referrals, for accuracy of assessment, documentation, and appropriate intervention. The PHN with support from the HA ensures qualified individuals' families receive pertinent information regarding CHDP/CCS/Foster Care and on occasion, Lead Poisoning Prevention, and is available to answer questions regarding the various programs. CHDP case follow-up is accomplished with assistance from the HA who has language and cultural skills that facilitate scheduling and transportation of monolingual Spanish clients. The HA also informs CHDP parents of resources and services and determines if the

clients have accessed those resources. The CMS Administrator/PHN conducts quarterly meetings with the CMS staff regarding program updates and regularly checks in with staff regarding issues that arise. The Health Officer attends the CMS meetings on an as-needed basis. The CMS Administrator/PHN meets with Social Services Child Welfare Program or with Probation quarterly and collaborates with Child Welfare social workers ensure continuity of care for foster care children (HCPFC). The CMS Administrator conducts trainings with CHDP providers in the community, publishes a quarterly newsletter and does site visits as requested and required. All CMS staff members are committed to the Medical Home and Family Centered Care concept in client education and resource development.

Due to the CMS Administrator/PHN vacancy during this reporting period, the CHDP program has conducted no site reviews and has provided minimal assistance with billing, provider consultations and oversight. The Medi-Cal Managed Care (MMC) provider, Anthem Blue Cross, has been successful in recruitment efforts, CHDP oversight and billing from the managed care role, assisting MMC providers meet CHDP requirements and following CHDP guidelines. A local CHDP data base coordinated by an office assistant is used to track PM16Os and to follow-up with providers and families.

Communication between our Social Services Department (Human Services Agency) and Public Health Services continues to improve however, due to the CMS Administrator/PHN vacancy, a back-log of client information to be entered into the Health Education Passports of foster children has occurred. The San Benito County Probation Department updates the Health Education Passport on their youth on a weekly to biweekly basis.

Vaccine for Children (VFC) vaccine distribution and use amongst CHDP providers has been re-organized and clarified through improved communications instituted by our immunization coordinator (PHN). PM 160 forms, are being received by to the local CHDP program in a more timely and routine manner. Public Health Services has been conducting a continuous recruitment in attempts to fill the position of CMS Administrator since July of 2015.

Incumbent List - California Children's Services

For FY 2013-14, complete the table below for all personnel listed in the CCS budgets. Use **the same** job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed in the last fiscal year. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City: San Benito				Fiscal Year: 2015-16	
Job Title	Incumbent Name	FTE % on CCS Admin Budget	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)	
Administrative Services Specialist	Maria Barrientos	50%	no	no	
Eligibility Worker	Mariana Methlouthi	100%	no	no	
Office Assistant	Silvia Mora	25%	no	no	
Public Health Nurse	Vacant	30%	no	no	

Incumbent List - Child Health and Disability Prevention Program

For FY 2013-2014, complete the table below for all personnel listed in the CHDP budgets. Use the same job titles for both the budget and the incumbent list. Total percent for an individual incumbent should not be over 100 percent.

Specify whether job duty statements or civil service classification statements have been revised or changed in the last fiscal year. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

[illegible]

Incumbent List - Health Care Program for Children in Foster Care

For FY 2013-2014, complete the table below for all personnel listed in the HCPCFC and CHDP Foster Care Administrative (County/City) budgets. Use the same job titles for both the budget and the incumbent list. Total percent for an individual incumbent should not be over 100 percent.

Specify whether job duty statements or civil service classification statements have been revised or changed in the last fiscal year. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

[illegible]

State of California - Health and Human Services Agency - Department of Health Care Services - Children's Medical Services

Memoranda of Understanding/Interagency Agreement List

List all current Memoranda of Understanding (MOU) and/or Interagency Agreements (IAA) in California Children's Services, Child Health and Disability Prevention Program, and Health Care Program for Children in Foster Care. Specify whether the MOU or IAA has changed. Submit only those MOU and IAA that are new, have been renewed, or have been revised. For audit purposes, counties and cities should maintain current MOU and IAA on file.

County/City: San Benito

Fiscal Year: 2015-16

Title or Name of MOU/IAA	Is this a MOU or an IAA?	Effective Dates From/To	Date Last Reviewed by County/ City	Name of Person Responsible for this MOU/IAA?	Did this MOU/IAA Change? (Yes or No)
S. Benito Co. Behavioral Health	MOU	FY 2014-17	2014	Lynn Mello	No
San Benito Co. HHSA & Probation	MOU	FY 2015-17	2015	Lynn Mello	No
Santa Clara County Head Start	MOU	FY 2015-17 (renewal in progress)	2015	Lynn Mello	No
SELPA	IAA	FY 2015-17 (renewal in progress)	2015	Lynn Mello	No
WIC	MOU	FY 2015-17	2015	Lynn Mello	No

CHDP Administrative Budget Summary
No County/City Match
Fiscal Year 2015-2016

County/City Name: **SAN BENITO COUNTY**

Column	1	2	3	4	5
Category/Line Item	Total Budget (2 + 3)	Total CHDP Budget	Total Medi-Cal Budget (4 + 5)	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
I. Total Personnel Expenses	\$171,343	\$338	\$171,005	\$54,455	\$116,550
II. Total Operating Expenses	\$9,550		\$9,550	\$250	\$9,300
III. Total Capital Expenses	\$0		\$0		\$0
IV. Total Indirect Expenses	\$25,650		\$25,650		\$25,650
V. Total Other Expenses	\$0		\$0		\$0
Budget Grand Total	\$206,543	\$338	\$206,205	\$54,705	\$151,500

Column	1	2	3	4	5
Source of Funds	Total Funds	Total CHDP Budget	Total Medi-Cal Budget	Enhanced State/Federal	Nonenhanced State/Federal
State General Funds	\$338	\$338			
Medi-Cal Funds:	\$206,205		\$206,205		
State Funds	\$89,426		\$89,426	\$13,676	\$75,750
Federal Funds (Title XIX)	\$116,778		\$116,778	\$41,028	\$75,750

[Signature]
 Prepared By (Signature)

11/5/2015 831-636-4180

leichhorn@cosb.us

Date Prepared

Phone Number

Email Address

11/05/15

831-637-5367

lmello@cosb.us

[Signature]
 CHDP Director or Deputy Director
 (Signature)

Date

Phone Number

Email Address

CCS CASELOAD		Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS -			
Total Cases of Open (Active) Straight CCS Children		66	15.57%
OTLIP -			
Total Cases of Open (Active) OTLIP Children		63	14.86%
MEDI-CAL -			
Total Cases of Open (Active) Medi-Cal (non-OTLIP) Children		295	69.58%
TOTAL CCS CASELOAD		424	100%

CCS Administrative Budget Summary

Fiscal Year:

2015-16

County:

SAN BENITO

Category/Line Item	Col 1 = Col 2+3+4		Straight CCS County/State (50/50)	OTLIP Optional Targeted Low Income Children's Program (OTLIP) County/State/Fed (17,517,565)	Medi-Cal (non-OTLIP) (Column 4 = Columns 5 + 6)	
	1	2			4	5
I. Total Personnel Expense	163,679	25,478		24,320	113,801	0
II. Total Operating Expense	6,100	950		907	4,245	0
III. Total Capital Expense	0	0		0	0	0
IV. Total Indirect Expense	40,920	6,370		6,080	28,470	28,470
V. Total Other Expense	0	0		0	0	0
Budget Grand Total	210,699	32,798		31,307	146,596	0

Source of Funds	Col 1 = Col 2+3+4		Straight CCS County/State (50/50)	OTLIP Optional Targeted Low Income Children's Program (OTLIP) County/State/Fed (17,517,565)	Medi-Cal (non-OTLIP) (Column 4 = Columns 5 + 6)	
	1	2			4	5
Straight CCS						
State	16,399	16,399				
County	16,399	16,399				
OTLIP						
State	5,479			5,479		
County	5,479			5,479		
Federal (Title XXI)	20,349			20,349		
Medi-Cal						
State	73,298				73,298	0
Federal (Title XIX)	73,298				73,298	0

Louise A LaCorte

Prepared By (Signature)

Prepared By (Printed Name)

11/05/15 Lynn Mello

CCS Administrator (Signature)

CCS Administrator (Printed Name)

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HCPFC Administrative Budget Summary Fiscal Year 2015-2016

County/City Name: San Benito County

Category/Line Item	Column 1 Total Budget (2 + 3)	Column 2 Enhanced State/Federal (25/75)	Column 3 Nonenhanced State/Federal (50/50)
I. Total Personnel Expenses	\$14,548	\$3,637	\$10,911
II. Total Operating Expenses	\$2,400	\$600	\$1,800
III. Total Capital Expenses			
IV. Total Indirect Expenses	\$3,637		\$3,637
V. Total Other Expenses			
Budget Grand Total	\$20,585	\$4,237	\$16,348

Source of Funds	Column 1 Total Funds	Column 2 Enhanced State/Federal (25/75)	Column 3 Nonenhanced State/Federal (50/50)
State Funds	\$9,232	\$1,059	\$8,173
Federal Funds (Title XIX)	\$11,352	\$3,178	\$8,174
Budget Grand Total	\$20,584		

[Signature]
Prepared By (Signature)

Date Prepared 11/05/15

11/5/2015

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Email Address

[Signature]
CHDP Director or Deputy Director
(Signature)

Date

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Phone Number

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Email Address

**State Required Annual Program Data
For
County Medical Therapy Programs**

Fiscal Year 2015/2014

TO BE COMPLETED BY COUNTY CCS PROGRAM

County San Benito

Date 05/26/2015

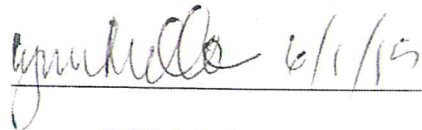
- 1) Total No. of MTUs in County 1 2) Total No. of MTU-Satellites in County 0
3) Total No. of Children on MTP Caseload 41 4) Total No. of Children with IEPs 21
5) Prescribed Hours Per Week of Physical Therapy 16.0 Occupational Therapy 12.0
6) State Allocated FTE PT Positions Currently Filled .5 OT Positions 1.0
7) State Allocated FTE PT Positions Currently Vacant 0 OT Positions 1.0
8) Date of last State Caseload Review 1/1/ unknown

Please attach the following to this form:

- A) A list of all MTUs and their corresponding satellites in the county. Include address and phone number for each.
B) Copy of most current caseload review letter from the State.



Chief Therapist/Unit Supervisor

 6/1/15

CCS Administrator

CALIFORNIA CHILDREN SERVICES (CCS) PROGRAM

FISCAL YEAR 2015-2016

CCS DIAGNOSTIC, TREATMENT, AND VENDORED THERAPY; OPTIONAL TARGETED LOW-INCOME CHILDREN'S PROGRAM; CCS DENTAL; AND/OR MTP THERAPY

CERTIFICATION OF COUNTY APPROPRIATION

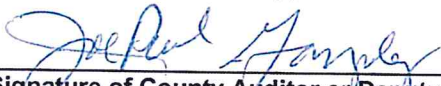
County Name: San Benito

Fiscal Year 2015- 2016 CCS County Appropriation

	<u>County Funds Only</u>
❖ CCS Diagnostic, Treatment, and <u>Vendored Therapy</u>	22,578
❖ Optional Low-Income Children Program (formerly Healthy Families) (Includes Diagnostic, Treatment, and <u>Vendored Therapy</u>)	1,000
❖ CCS Dental	44,102
❖ MTP Therapy (<u>DOES NOT include Vendored Therapy</u>) **	0
❖ Total Appropriation of County Only Funds FY 2015-2016	67,670

** The State will match on a dollar-for-dollar basis the amount of county funds allocated by a county for funding the county's MTP, exclusive of vendored therapy, up to the level of the county's capped State MTP allocation for the fiscal year.

I hereby certify that the amount(s) of funds identified above have been appropriated as the County's share of the CCS Program Diagnostic, Treatment, and Vendored Therapy; Optional Targeted Low-Income Children's Program; CCS Dental; and/or MTP Therapy costs for the CCS Program in Fiscal Year 2015-2016.



Signature of County Auditor or Deputy Director
Joe Paul Gonzalez

PRINTED NAME OF SIGNER
Clerk, Auditor, Recorder

TITLE OF SIGNER
HHSA, Public Health Dept

ORGANIZATION NAME

8-27-15

DATE
1111 San Felipe, Rd. Ste. 103

ADDRESS
Hollister, CA 95023

CITY, STATE AND ZIP CODE
831-636-4180

TELEPHONE NUMBER (Including Area Code)

Please mail completed form with original signature to:

Department of Health Care Services
Systems of Care Division
Program Operations Branch/Fiscal Unit
ATTN: Margaret Gross **MS 8104**
P.O. Box 997413
Sacramento, CA 95899-7413

Revised 6/1/2015