



ALVAREZ & MARSAL (A&M) CRISIS TEAM

Project Transition Briefing

12/17/2019

ALVAREZ & MARSAL





AGENDA

- I. Key Accomplishments Summary
- II. Transition Overview
- III. Workstream Status & Additional Recommendations
 - Care Capacity
 - Communications
 - Workforce
 - Data



In accordance with the Oregon Governor's Executive Order 19-03, Alvarez & Marsal (A&M) partnered with Child Welfare (CW), the Department of Human Services (DHS), and the Child Welfare Oversight Board (CWOB) to provide specialized, targeted advisory resources and implementation support. A&M has supported DHS and CW in driving to the following outcomes:



Addressed
Service Gaps in
In-Home Supports



Improved Care
Coordination



Improved Process
to Access Public
Records



Completed
Successful Surge
Hire and Training



Centralized DHS
Communications
Function



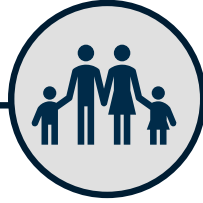
Reduced Reliance
on Out of State
Placements



Enhanced
ORCAH
Performance



Increased
Transparency in
Child Fatality
Reviews



Streamlined
Foster Care
Licensing



Prepared Effective
Transition to DHS

A&M has outlined five key areas to successfully transition implementation of select initiatives

Project Team and Governance Structure

- *Identify sub-project managers to provide targeted support to key initiatives*

Refined Initiative Implementation Goals

- *Review key initiatives to ensure alignment w/ current strategic priorities*

Updated implementation Project Plan

- *Revise project plans to reflect current timing and availability of resources*

Communication / Change Management

- *Communicate with strategic partners and stakeholders*

Strategic Project Management

- *Use PMO and reporting tools to monitor progress of select initiatives*

The Care Capacity workstream focused on improving outcomes for children and families being served by CW. The A&M team partnered with DHS and CW, with additional support from the Oregon Health Authority (OHA) to achieve the following:

- Reduced reliance on out of state placement – as of 12/16/2019 **only 31 youth remain in out of state facilities (from high of 87)**
- Identified **gaps in the continuum** of in-home supports **to be addressed by SB1 and other Legislative Investments**
- Amended procedures for CCO enrollment of children in BRS to improve access to mental health & medical care
- Created a **standardized process** to support Foster Family certification and facilitated development of ORKids module to support standardized approaches
- Facilitated **improved local collaboration** between CCO and DHS field offices

Workstream Status

WBS	Initiative	Status	Project Manager/Lead
1.1	Improve Foster Care Family Certification Processes and Systems	In Progress	Choua Vue / Melanie Parent, Katrina Husbands, Sally Vergara-Clement, Janna Owens, Alicia O'Quinn
1.2	Reduce Reliance on Out of State Placement	In Progress	Erin Anhoury / Sara Fox, Nancy Allen, Glenda Marshall
1.3	Facilitate Rapid Access of Mental Health and Substance Abuse Treatment	In Progress	Erin Anhoury / Alex Salas and Sara Fox
1.4	PRTS Stabilization and Expansion	In Progress	Erin Anhoury/Angela Leet, Nancy Allen
1.5	Explore Medicaid Funding Options for Intensive In-home Supports	✓	Angela Leet / Dana Hittle (OHA)
1.6	Improve Care Coordination	✓	Angela Leet / Katie Beck (OHA)
1.7	Support DHS Field Operations Reorganization	In Progress	Ashley Marshall

#	Opportunity for Improvement	Summary	Reel commended Post-A&M Next Steps
CC1	Improved Coordination between DHS and OHA	CW's challenges are demonstrated in lawsuits that related to Temporary Lodging and Foster Care. These lawsuits include allegations that imply service access and capacity issues across the continuum of care that includes Medicaid services, and call into question whether the current managed care structure is effective in meeting the complex needs of CW children and illuminate the critical nature of the collaboration between OHA & DHS as partners.	Create clear mechanisms for inter-agency coordination in every area where DHS and OHA should be collaborating to serve participants. Provide executive branch oversight as a means to remediate diverse agency perspectives and priorities; Consider adopting the approach used by other states, designating 2 – 3 CCO's (rather than all 15) responsible for care management of foster care children.
CC2	Stronger direction for the Foster Care Program	The Foster Care program faces challenges with project prioritization and execution. This stems from the lack of cohesion around what the program is responsible for, what goals they want to accomplish, and how they utilize resources (both financial and personnel).	Develop a strategic plan for the Foster Care Program. Establish clear roles, responsibilities, and measurable goals in line with the strategic plan.
CC3	Institute clinical reviews of youth placed out of state	CW staff have developed practices for reviewing the cases of youth placed out of state, however adding a clinical review, would add a different expert perspective. This clinical partner would also support development of the youths' return home plans.	Hire or contract with a child psychiatrist who is dedicated to supporting the Treatment Services team in reviewing cases of youth placed out of state. Engage the clinician in case management discussions and site visits, as well as development of return home plans.
CC4	Increased empaneling on PRTS providers	CW faces challenges in securing PRTS placement for youth. There are both access and capacity issues. Also, Looking Glass, is a PRTS provider that prioritizes CW placements that are funded with general funds rather than Medicaid funds. Requiring CCO's to empanel willing and qualified providers would assist in alleviating barriers to PRTS access and capacity	Establish data driven systems to monitor CW access to PRTS to ensure access and capacity. Require CCOs to empanel PRTS providers when access and capacity are inadequate. Develop clear mechanisms to use the 14-day emergency Federal Rule for retroactive authorization in cases where youth are sent to a PRTS facility for evaluation.

#	Opportunity for Improvement	Summary	Recommended Post-A&M Next Steps
CC5	Focus on providing Respite Care to guardians and caretakers	Oregon has limited options regarding Respite Care. Respite is typically a lower skill level service. Other states leverage respite through non-traditional service delivery (self-directed models) such as paying other foster families, relatives, etc. at an hourly or daily rate that is typically lower than the service rates that Oregon uses to provide Respite Care. This also enhances what typically is a relatively limited labor pool to provide a service that doesn't require specialized qualifications. Evidence-based practices stress the importance of respite care in supporting families of children with high behavioral needs.	<p>Consider whether limiting access to in-home Respite Care upon receipt of other services (Attendant Care, Personal Care) unreasonably restricts access to Respite Care and if families should be able to receive Respite Care as a standalone service as a means of relief to prevent the need for additional services.</p> <p>Develop an infrastructure for the provision of Respite Care to support families caring for a child with challenging behavioral or medical needs.</p>
CC6	Establish regular cadence for structured communication between CW Field Leadership and the CCOs	During the initial DM/CCO regional meetings, it was clear that improved partnership between CW and the CCOs would lead to improved outcomes for children and families. This increased collaboration will help these two groups partner to achieve goals around service coordination, cultural competency, and data-informed decision making.	<p>Allow districts and regions to develop programming with their CCO partners that is tailored to the needs of their community. Central Office should provide an appropriate level of support to these initiatives to ensure they are successful.</p> <p>Engage OHA in holding CCOs accountable for implementation of agreed upon solutions.</p>
CC7	Address gaps and avoid redundancies as the children's continuum of care evolves	There are several initiatives underway to improve capacity, access to and quality of services for children. While subject matter experts meet to discuss individual initiatives, there is no over-arching, master plan that maps the care continuum to identify and address gaps and redundancies.	Work with the Children's Cabinet Sub-committee and the Statewide Oversight Council to develop and manage a workplan to ensure the integration of new service development within an efficient and comprehensive system of care for children.

The Communications workstream focused on increasing oversight and transparency within DHS and Child Welfare. A&M supported the public records, centralized communications, and child fatality review teams in the following accomplishments:

- Helped establish the **centralized public records team** and reduced Public Record requests backlog of 500+ requests **to functional zero in five weeks**
- Launched [new public records request site](#) and stood up a unit that processed **over 2,800 records** in five months with **average completion in 9 business days (significantly below the statute requirement of 15)**
- Created performance metrics and **data dashboards** to report on public records numbers monthly
- Supported development of **organizational structure** for the **centralized DHS Communications Team** and documented processes to drive **more effective interactions** between the Comms Team and the Legislative Unit
- Revised Critical Incident Review Team (CIRT) process to **align with SB832 and developed** pilot structure for **Child Fatality Review and Prevention (CFRP) Team**
- **Developed a Communication Plan** to align with implementation on initiatives associated with Executive Order

Workstream Status

WBS	Initiative	Status	DHS / CW Project Manager/Lead(s)
2.1	Streamline Public Records	✓	TBD / Don Erickson
2.2	Centralize Communications Team	✓	Lisa Morawski
2.3	Enhance Transparency through Communications	✓	Lisa Morawski
2.4	CIRT Process Assessment	✓	Kathy Steiner / Tami Kane Suleiman
2.5	Improve Critical Incident Response and Prevention	In Progress	Kathy Steiner / Tami Kane Suleiman

#	Opportunity for Improvement	Summary	Recommended Post-A&M Next Steps
C1	Incorporate all Records Requests within the Centralized Unit	SEIU has asked for the Centralized Public Unit to review opportunities to incorporate additional records requests that are still being completed by the field. This would streamline the process for responding to these requests.	Determine a timeline and proper steps to identify and incorporate additional records requests.
C2	Drive coordination between DHS Communications Team and the programs	Due to the number of media requests received by the Department, there has been limited focus on proactive communications with the public. The DHS Communications Team now has staff dedicated to proactive communications, however DHS program teams will need to provide information to the Communications Team for this new position to be effective.	<p>Communicate new structure of the DHS Communications Team to leadership of all DHS programs.</p> <p>Identify a person within each program to serve as a liaison to the DHS Communications Team and establish clear processes for sharing content and information that needs to be communicated to the public.</p>
C3	Proceed with shifting the Child Fatality Review and Prevention Team to report to the CW Director's Office	Currently, the Fatality Review Team is embedded within the Child Safety program. Shifting the revamped Child Fatality Review and Prevention Team to the CW Director's Office will increase the independence of the reviews.	<p>Execute official transition to structure the Child Fatality Review and Prevention Team to report to the CW Director's Office.</p> <p>Expedite hiring of positions identified to support Child Fatality Review and Prevention team.</p>
C4	Track findings and data from Critical Incident Review Teams (CIRT) to influence child fatality prevention programming	CIRT reports include an extensive amount of information on the circumstances surrounding child fatalities. This puts CW in a position to use the information from reviews to support fatality prevention programming, as well as training for caseworkers and other field/central office employees.	Develop clear mechanisms to track fatality review factors and use the information to inform the design of prevention programming and subject matter for prevention training.

The Data workstream focused on **creating operational dashboards** and reporting processes to **inform strategic decision making** by DHS and Child Welfare leadership:

- **Designed dashboards** to track key performance metrics associated with critical CW functions
 - Out of state placements
 - Overdue assessments
 - Surge hire
 - Foster care licensing
 - Double fills tracking
 - ORCAH
- **Revamped the Governor’s Child Welfare Monthly Report** with enhanced data visualization and programmatic context
- Built tool(s) to **reduce manual data entry** and amplify collection, aggregation, and validation of various disparate data sources
- Drove a more **data centric approach** to tracking, monitoring, and reporting throughout Child Welfare
- Transitioned dashboards from Excel into **dynamic and fully automated** Power BI environment

Workstream Status

WBS	Initiative	Status	Project Manager/Lead
3.1	Create Operational Key Metrics Dashboards	In Progress	Joel Metlen/TBD
3.2	Overhaul Monthly Report	✓	Lisa Morawski/Sunny Petit
3.3	Transition Initial Dashboards to Power BI	In Progress	Iman Ahmadi/Judy Kuper
3.4	Transition Additional Dashboard to Power BI	In Progress	Iman Ahmadi/Judy Kuper
3.5	Improve culture around use of data for DHS/CW	In Progress	Joel Metlen/TBD

#	Opportunity for Improvement	Summary	Recommended Post-A&M Next Steps
D1	Identify a CW data lead	Given the disconnect between ORRAI and CW and the general lack of data fluency by program Team, there needs to be a resource who can help drive more strategic and functional use of data throughout the Agency.	Establish a new data lead position to manage all data on the CW side.
D2	Enhance Reporting Function within ORRAI	The reporting function – the ORRAI team that translates from data to program information and vice-versa - is lacking. Enhancing this function will help program more easily track and monitor critical metrics and inform decision-making.	Assess the reporting function within ORRAI to determine what are the main impediments to it achieving its stated function. Formulate a plan to fix these issues.
D3	Improve communication between Program and Data teams	There is a significant breakdown in the communication between the program teams and ORRAI. Program staff do not have anyone that they can reliably reach out to for help with every day data needs.	Create a formal structure of communication between ORRAI reporting team and CW program teams. Use this communication to have the two groups learn about each other's work, build trust, and move to a more functional relationship.
D4	Improve accuracy and timeliness of data entry	With the demands of child welfare work, field staff often face challenges with timely data entry. Additionally, the data that is entered is not always completely accurate. This creates significant downstream effects as the data that is entered into the system(s) is often incomplete and/or out-of-date.	Review policies and procedures for accountability of data entry and identify ways data entry could be made easier for the field. Hold training to explain downstream effects of not entering data in a timely fashion.
D5	Transition CW approach to data from reactive to proactive	Much of the time spent on data by both the data team and program is pulling data to put out fires (lawsuits, federal reporting, records requests).	Build out dashboarding and reporting mechanisms with the information most frequently requested.

#	Opportunity for Improvement	Summary	Recommended Post-A&M Next Steps
D6	Create an at-a-glance CW dashboard	CW does not have a mechanism for tracking and monitoring the most critical performance metrics that would allow leadership to have a quick, at-a-glance look at these measures..	Create a dashboard that captures the most critical CW metrics and allows leadership to assess how the Agency is doing at a high-level.
D7	Change culture around the perception and use of data throughout DHS/CW	Data is viewed by many within CW as inaccessible and unreliable. Changing this perception is the first step towards moving to a state in which data is used more strategically and with greater effect.	Formulate a plan for improving the accessibility and quality of data that is available to the field and show them how it can be used to help them do their jobs better not just be compliant with federal reporting regulations.

The Workforce workstream focused on surge hiring 300+ caseworkers, enhancing retention opportunities, improving field support, advancing CW training systems, as well as improving processes and outcomes at the centralized hotline. A&M partnered with DHS and CW to accomplish the following:

- Revamped the recruiting process for caseworkers in a surge hiring event that dramatically increased the number of applicants in the pipeline, securing **7,000+ applications** that led to **conditional hires of 345 positions** that was notably **more diverse** than the state's population at-large
- Reviewed existing career ladder and potential additions, including **advanced supervisor training**
- Developed new training to **address identified gaps**, including expectations and field shadowing and implemented new required **pre-service trainings for PEMC and MAPS**
- Assessed processes at the Oregon Child Abuse Hotline (ORCAH) and provided recommendations on how ORCAH can be more responsive (e.g. **shortened wait times and reduced unanswered calls**)
- Identified limitations in **performance standards for responsiveness** at the Screener and Supervisor level and built actionable reporting (i.e. **Care Card**) to identify trends / patterns of behavior

Workstream Status

WBS	Initiative	Status	DHS / CW Project Manager/Lead(s)
4.1	Surge Hire Caseworkers	✓	Wendy Gibson/Jennifer Adams
4.2	Create Opportunities to Improve Retention	In Progress	Mark Rasmussen
4.3	Improve Field Support	In Progress	Workforce Development and Training Manager, Kim Lorz, Lisa Lewis
4.4	Improve Child Welfare Training Systems	In Progress	Workforce Development and Training Manager, Kim Lorz, Lisa Lewis, Zachary Hackett
4.5	Improved Centralized Hotline Outcomes	✓	Kristen Khamnohack

#	Opportunity for Improvement	Summary	Recommended Post-A&M Next Steps
W1	Create Opportunities to Improve Retention through an Advanced Supervisor Training	There is significant lack of advanced training opportunities for supervisors. In addition, there is limited financial incentive for supervisors to gain professional development and improve clinical supervision skills. The pay differential between caseworkers and supervisors is also marginal – which is an issue when trying to recruit current caseworkers to become supervisors.	<p>Submit an RFQ for advanced supervisor training to evaluate available training options.</p> <p>Identify capabilities to offer an appropriate pay differential for supervisors who complete potential advanced supervisor training.</p>
W2	Create a Training Unit	There is currently no training unit and most training is provided by DHS or outside contractors / partners. The creation of a formal training unit will help CW retain staff by giving them the tools and support they need to be successful at their jobs. CW needs to significantly increase the quality and quantity of training to move towards national best practices.	<p>Hire a training manager and provide personnel resources to the training manager, including current and new positions.</p> <p>Begin to create new or revised trainings to fill gaps at all levels.</p>
W3	Improve in-field supports and transfer of learning	Currently, training is “one and done.” Staff do not have opportunities to apply the skills learned in training with support before conducting the activities on their own (e.g. carrying a caseload). The Surge Training Team began developing on-ramps and other systems to improve the transfer of learning from training to practice.	<p>Continue to develop systems, tools, and processes to support the transfer of learning from training to practice.</p> <p>Monitor districts to ensure staff are not taking on their roles without the appropriate support and practice.</p>
W4	Increase accountability for training and workforce development	Districts inconsistently enforce training and workforce development requirements for their staff. Additionally, central office does not hold the districts or individuals accountable when they fail to comply.	<p>Establish an accountability system at the central office and district level.</p> <p>Monitor compliance with training requirements and link to performance management.</p>

#	Opportunity for Improvement	Summary	Recommended Post-A&M Next Steps
W5	Increase automation to streamline ORCAH processes	There are a number of places where manual or duplicative processes impede the ability of screeners to efficiently process screening reports and analyze call data.	<p>Identify opportunities to improve integration of data between ORKids and OpenScape.</p> <p>Partner with ORRAI to transition OpenScape data into the data warehouse for improved data quality and consisted reporting.</p>



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