

AMENDED IN SENATE JUNE 20, 2011

AMENDED IN SENATE MAY 11, 2011

AMENDED IN SENATE MARCH 22, 2011

SENATE BILL

No. 893

Introduced by Senator Wolk

February 18, 2011

An act to add Chapter 7 (commencing with Section 8300) to Division 8 of the Welfare and Institutions Code, relating to governmental efficiency, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

SB 893, as amended, Wolk. Health and Human Services System Improvement and Accountability Act of 2011.

Existing law establishes the California Health and Human Services Agency within state government, which oversees various health and human services programs, including mental health, substance abuse treatment, rehabilitation, developmental programs, public health, child support, *adult protective services*, and *child welfare* programs for the aging, health care, children's programs, and other programs.

This bill, the Health and Human Services System Improvement and Accountability Act of 2011, would require the agency to establish, by December 1, 2013, the California Health and Human Services Review System in order to periodically review *the specified* health and human services programs administered by the state and local agencies, as specified. The bill would require the agency convene *a an advisory* workgroup to design and draft a work plan to ~~implement~~ *guide the agency in implementing* the system. The bill would require the agency to report specified information to the Legislature. The bill would require

the Secretary of California Health and Human Services to establish an information sharing plan to enable the exchange of information among state and local agencies to support the implementation of the California Health and Human Services Review System.

This bill would declare that it is to take effect immediately as an urgency statute.

Vote: $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes.

State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the
2 following:

3 (a) The State of California has struggled to deliver high-quality,
4 effective, and efficient services through its health and human
5 services programs.

6 (b) Despite incremental legislative efforts and laudable pilot
7 projects in a range of areas, publicly funded programs are not
8 systematically evaluated, performance and outcomes are not
9 routinely documented, and successful programs are not consistently
10 replicated.

11 (c) Lack of information on performance, the cost-effectiveness
12 of programs, best practices, and evidence-based approaches
13 undermines opportunities to improve programs, enhance prevention
14 and early intervention, and ensure the best use of limited resources.

15 (d) Barriers to information sharing prevent efforts to leverage
16 existing data to guide programmatic and fiscal decisions, recognize
17 opportunities to integrate services and improve outcomes, and
18 communicate information on performance to policymakers and
19 the public.

20 (e) Inadequate attention to accomplishments, challenges,
21 performance, and outcomes undermines statewide accountability
22 and limits public understanding of and support for California's
23 health and human services programs.

24 (f) The state has made notable progress in some areas, including
25 the development of an outcomes and accountability review system
26 for the child welfare system, the adoption of select health outcome
27 measures, and the identification of a limited number of performance
28 measures for specific mental health and substance abuse treatment
29 programs.

1 (g) Research indicates a relationship between inadequate access
2 to effective health and human services programs and increased
3 public sector costs for preventable hospitalizations, unemployment,
4 homelessness, and incarceration. Conversely, effective health and
5 human services programs, sufficiently focused on prevention, early
6 intervention, and effective practices, can reduce school failure,
7 improve employment opportunities, prevent suicide, and support
8 the ability of adults and families to achieve and sustain
9 self-reliance, and thus reduce public sector costs.

10 (h) Accordingly, in order to provide greater accountability for
11 health and human-service *services* outcomes, to encourage the
12 statewide leadership necessary to identify and replicate best
13 practices, to ensure that the unique and critical needs of children
14 and families are met, and to be consistent with the California’s
15 efforts with the child welfare system, it is the intent of the
16 Legislature to enact the Health and Human Services System
17 Improvement and Accountability Act of 2011.

18 SEC. 2. Chapter 7 (commencing with Section 8300) is added
19 to Division 8 of the Welfare and Institutions Code, to read:

20
21 CHAPTER 7. CALIFORNIA HEALTH AND HUMAN SERVICES
22 REVIEW SYSTEM
23

24 8300. (a) This chapter shall be known, and may be cited, as
25 the Health and Human Services System Improvement and
26 Accountability Act of 2011.

27 (b) For purposes of this chapter, the following definitions apply:

28 (1) “Agency” means the California Health and Human Services
29 Agency.

30 (2) “Secretary” means the Secretary of California Health and
31 Human Services.

32 (3) “Workgroup” means the workgroup established pursuant to
33 Section 8302.

34 8301. (a) The agency shall establish, by December 1, 2013,
35 the California Health and Human Services Review System in order
36 to periodically review the health and human-service *services*
37 programs administered by the state and local agencies *subject to*
38 *Realignment 2011*. These reviews shall include, ~~but not be limited~~
39 ~~to,~~ mental health, substance-abuse treatment, rehabilitation,
40 developmental programs, public health, child support, programs

1 ~~for the aging, health care, children's programs, and other abuse,~~
2 ~~adult protective services, and child welfare~~ programs established
3 under state law or funded by the state that are under the jurisdiction
4 of the agency, including, but not limited to, programs that are
5 provided by, or substantially provided by, local agencies, including
6 cities, counties, cities and counties, joint powers agencies, regional
7 agencies, or nonprofit entities under contract with local agencies.

8 (b) Health and human ~~service~~ *services* reviews shall maximize
9 compliance with federal regulations for the receipt of money from
10 federal sources and shall ensure compliance with state plan
11 requirements where established in response to state and federal
12 law.

13 (c) Reviews shall recognize and be coordinated with federal
14 requirements for reviews, performance improvement plans, and
15 outcome and performance reporting to reduce the duplication of
16 reporting requirements and improve coordination with federal
17 agencies working to improve the performance of public programs,
18 including, but not limited to, reporting requirements linked to the
19 federal Accountable Government Initiative and the Government
20 Performance and Results Act Modernization Act of 2010.

21 (d) In keeping with the intent of this chapter, reviews shall
22 recognize existing review and performance accountability policies
23 and practices and, to the extent feasible and practical as determined
24 by the agency, shall be coordinated with and consistent with those
25 policies and practices.

26 (e) In designing the system, the agency shall emphasize the
27 collection and reporting of information that provides meaningful
28 information to the public on investments in health and human
29 services programs, outputs delivered through health and human
30 ~~service~~ *services* programs, and outcomes achieved through those
31 programs.

32 8302. (a) By June 1, 2012, the agency shall convene ~~a~~ *an*
33 *advisory* workgroup that shall design and draft a work plan ~~to~~
34 ~~implement to guide the agency in implementing~~ the system, as
35 authorized by this chapter.

36 (b) The membership for the workgroup shall include the
37 following:

38 (1) Representatives of the departments under the jurisdiction of
39 the agency, as determined by the secretary.

1 (2) Representatives of other entities within state government,
2 including, ~~but not limited to~~, the Judicial Council, the Mental
3 Health Services Oversight and Accountability Commission, the
4 State Department of Education, the Department of Justice, the
5 Little Hoover Commission, the First 5 California Commission,
6 the State Council on Developmental Disabilities, the California
7 Commission on Aging, the State Independent Living Council, ~~and~~
8 *or* other entities as determined by the secretary.

9 (3) Representatives of cities, counties, city and counties, regional
10 entities, schools, special districts, or other local agencies that
11 deliver services or administer programs under the authority of
12 departments under the jurisdiction of the agency, including, ~~but~~
13 ~~not limited to~~, the California State Association of Counties, the
14 County Mental Health Directors Association, *the County Alcohol*
15 *and Drug Program Administration Association of California*, the
16 County Welfare Directors Association of California, *the California*
17 *Association of Area Agencies on Aging*, the Chief Probation
18 Officers of California, and other entities, as determined by the
19 secretary.

20 (4) Representatives of one or more tribal entities that directly
21 provide health and human services to California's tribal population,
22 including organizations that are formally sanctioned by California
23 tribes, and ensuring representation from entities that provide
24 services to tribal communities in predominantly rural areas and
25 entities that provide services to tribal communities in
26 predominantly urban areas.

27 (5) Representatives of organizations that provide advocacy on
28 behalf of children, youth, adults, older adults, and their families.

29 (6) Representatives of organizations or experts working to
30 address racial and ethnic disparities in access to health and human
31 services or the outcomes achieved through those programs.

32 (7) Researchers and other experts in areas associated with public
33 sector accountability, including experts in the areas of data,
34 indicators, performance measures, results-based accountability,
35 outcome reporting, and community indicators.

36 (c) The secretary shall determine how best to organize the
37 workgroup, including establishing subgroups, where appropriate,
38 to meet the goals of this chapter.

39 (d) At a minimum, in establishing the work plan, the workgroup
40 shall consider the outcomes to be monitored; performance measures

1 and indicators to be used; minimum thresholds for each indicator
2 or measure; strategies to report disparities by geographic and
3 demographic indicators; timelines for implementation; the process
4 for implementation among affected local agencies; the role of
5 peer-to-peer technical assistance and support; review cycles; the
6 uniform processes, procedures, and review instruments to be used;
7 the role of public reporting; planning for performance improvement
8 and any funding or staffing increases; and statutory changes needed
9 to implement the requirements of this chapter. The agency shall
10 broadly consider collaboration with relevant entities to allow the
11 adequate exchange of information and coordination of efforts to
12 improve health and human services outcomes for Californians.

13 (e) The outcomes established by the workgroup, as referenced
14 in subdivision (d) shall include, but not be limited to, measures of
15 employment, education, housing and homelessness, health, safety,
16 and criminal justice involvement, and related information that is
17 useful for communicating to the public and policymakers the
18 quality, effectiveness, and value of health and human services.

19 8303. The agency shall report on—*it's its* progress in
20 implementing the California Health and Human Services Review
21 System, including, but not limited to, the timelines for
22 implementation, the process to be used, and funding or staffing
23 increases needed at the state or local level to implement the
24 requirements of this chapter, to the budget and appropriate policy
25 committees of the Legislature annually for three fiscal years,
26 beginning with the 2013–14 fiscal year and ending with the
27 2016–17 fiscal year.

28 8304. (a) Consistent with the intent of this chapter, the agency
29 shall establish mechanisms to identify and promote the replication
30 of best practices in the delivery of health and human services under
31 the jurisdiction of the agency. Those mechanisms shall include all
32 of the following:

33 (1) Identification of goals and objectives of efforts to promote
34 best practices, including the major functions of the agency,
35 departments, local agencies, and other entities involved in
36 identifying and promoting the use of best practices in the
37 administration and delivery of health and human services programs
38 *as referenced in subdivision (a) of Section 8301.*

39 (2) A management strategy that supports the ability of the
40 agency, and the departments that make up the agency, to identify

1 and promote the use of best practices, including strategic planning;
2 identification of operational processes and procedures; and the
3 role of technology, information, evaluations, data sharing, and
4 other resources and strategies necessary to achieve the goals and
5 objectives established pursuant to paragraph (1).

6 (3) A fiscal strategy, including budget proposals, to staff and
7 support the ability of the agency and the departments that make
8 up the agency to evaluate existing practices, document best
9 practices in use around the state and elsewhere, and provide
10 technical assistance, outreach, education, and support to promote
11 the replication of best practices and achieve the goals and
12 objectives established pursuant to paragraph (1).

13 (4) A staffing plan to ensure that the agency and the departments
14 that make up the agency have sufficient staff, with the necessary
15 skill sets, knowledge, and training to achieve the goals and
16 objectives established pursuant to paragraph (1).

17 (5) Identification of those factors external to the agency and the
18 departments that make up the agency that are beyond their control
19 that could significantly affect the achievement of the goals and
20 objectives established pursuant to paragraph (1), and proposals to
21 reduce or mitigate those factors where appropriate.

22 (b) The agency shall report to the budget and appropriate
23 legislative policy committees of the Legislature annually for three
24 fiscal years, beginning with the 2013–14 fiscal year and ending
25 with the 2016–17 fiscal year, on the agency’s progress in
26 identifying and promoting the replication of best practices in the
27 delivery of health and human services under the jurisdiction of the
28 agency, *as referenced in subdivision (a) of Section 8301*, including
29 information on investments made to achieve these goals, the
30 accomplishments to date, and barriers to making additional
31 progress.

32 8305. (a) To support the implementation of the California
33 Health and Human Services Review System and the identification
34 and replication of best practices, as specified under this chapter,
35 the secretary shall establish an information sharing plan that
36 accomplishes all of the following:

37 (1) Enables the exchange of information among state agencies,
38 among local agencies, and between state and local agencies as
39 necessary for tracking costs, conducting research on best practices,
40 and improving the efficiency and effectiveness of public services,

1 including prioritizing access to prevention and early intervention
2 services.

3 (2) Provides state and local agencies and the public with
4 information on the costs and effectiveness of publicly supported
5 health and human services programs in California.

6 (3) Permits the Legislature and the public to monitor the
7 outcomes accomplished for the individuals receiving services,
8 including disparities by geography and demographic factors, as
9 established pursuant to this chapter.

10 (4) Establishes a memorandum of understanding, or one or more
11 related mechanisms, that permit the sharing of information between
12 the agency, and the departments that make up the agency, and the
13 California Research Bureau that enable the bureau to conduct
14 research on data held by the agency or the departments that make
15 up the agency, including data otherwise deemed confidential,
16 without reducing the privacy protections in place to protect
17 personal and confidential information.

18 (b) To develop the information sharing plan, the secretary shall
19 consult with state and local officials, clients and consumers who
20 receive government services, service providers, researchers, privacy
21 experts, the public, and others, as determined by the secretary.

22 (c) By January 30, 2013, the agency shall transmit the
23 information sharing plan to the Legislature, including any
24 recommendations for statutory, regulatory, or other reforms that
25 are needed to achieve the goals of that plan.

26 (d) The information sharing plan shall include provisions to
27 protect the privacy of individuals.

28 SEC. 3. This act is an urgency statute necessary for the
29 immediate preservation of the public peace, health, or safety within
30 the meaning of Article IV of the Constitution and shall go into
31 immediate effect. The facts constituting the necessity are:

32 The state is facing historic fiscal challenges that undermine the
33 safety net system on which many Californians rely to meet their
34 basic health and safety needs. The state must put in place a system
35 for determining which programs are effective, and for promoting
36 the use of evidence-based practices to ensure that California is
37 making the best use of available resources. In order to preserve
38 the programs that are most effective in providing needed services,
39 it is necessary that this bill take effect immediately.

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2 **CORRECTIONS:**
3 **Text—Page 4.**
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