Planning and Evaluation

FY 2018 Community Impact Report

Travis County Health and Human Services

Research & Planning Division

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TRAVIS COUNTY
HEALTH and HUMAN SERVICES

PURPOSE

Who we are:

A Department of Travis County that serves the community under the guidance of the Commissioner's Court

What we do:

Address community needs through internal and external investments and services

What we strive to accomplish:

Maximize quality of life for all people in Travis County

- Protect vulnerable populations
- Invest in social and economic well-being
- Promote healthy living: physical, behavioral, and environmental
- Build a shared understanding of our community

VALUES

We value helping people.

- We provide accessible, person-centered services with respect and care.
- We work to empower people through our service to them, always honoring the strengths and differences of the individuals and families of Travis County.

We value the accountability and integrity of our staff.

- We value the diversity of our staff and the experience each of us brings to HHS.
- We honor our collective service to the public, including the careful stewardship of public funds.
- We value the quality services we provide to the community in a spirit of shared responsibility.

We value cooperation and collaboration in the community at large and within HHS.

- We are interdependent and connected.
- We treat one another with respect and value effective communication and teamwork.
- We honor our partners in the community and engage with them to more efficiently and effectively serve our clients.

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Introduction

The Travis County Commissioners Court, through the Travis County Health and Human Services Department (HHS), annually invests over $19.5 million in community-based social service programs. These Department investments align with and supplement our direct services to meet the needs of local residents. Community-based organizations are frequently geographically and culturally embedded in the communities they serve and are often best positioned to provide needed services.

Purpose of Report

The annual Community Impact Report provides an overview of HHS investments in health and human services. The *FY 2018 Community Impact Report* offers community context most pertinent to the services purchased, and details investment, programmatic, and performance information on the Department's social service contracts. This information allows policy makers, program managers, and others to better understand these investments, recognize accomplishments, identify areas for improvement, disseminate lessons learned, and highlight areas warranting further research.

Organization of Report

This report addresses nine issue areas—Access to Basic Supports, Behavioral Health, Child and Youth Development, Housing Continuum, Planning and Evaluation, Public Health, Safety Intervention Services, Supportive Services for Community Living, and Workforce Development—as well as a pilot project under Holistic Family Services. The Investment Overview summarizes information from all nine issue areas and the pilot project. Each issue area section begins with community context and then provides performance highlights. Each program is classified into the issue area most closely aligned to its goals and objectives.

Although this report provides community context for individual issue areas separately, each issue area must be considered in a broader context. Community conditions related to a single issue area may have similar or related root causes and broad-level consequences. Current economic conditions also have a global impact on the community.

This report provides detailed information about each program covered by an issue area, including an overview of program goals, services provided, eligibility criteria, and funding. Also captured are each program's performance results, compared to its contractual performance goals, and explanations of notable variance (+/- 10%) between the performance results and goals.

Notes on Methodology

Community context discussed in this report reflects the most recent information available at the time of writing. The majority of the social service contracts included in the report followed a fiscal year calendar (October 1, 2017 through September 30, 2018) unless otherwise noted. Program and performance highlights are drawn from contracts and reports provided by contracted service providers. Estimates from the American Community Survey have been tested at a 90% confidence level for reliability. In some cases, all noted, estimates were unreliable due to small sample sizes.

Considerations When Reading This Report

Performance results provide only a starting point for understanding the impact of these programs. These summary statistics are not necessarily an indication of the programs' overall performance, but rather a snapshot of their performance over a one-year period. Within these reports, service providers offer explanations for variance in performance, which provides context and meaning to summary results.

Performance results do not reflect programs' full value to and impact on the community. Therefore, it is important to keep the following considerations in mind when reviewing program performance.

Readers should use caution when comparing output and outcome results across programs, as participant characteristics can significantly influence a given program's performance goals and results. For example, performance results may be lower for programs with clients who face considerable challenges (e.g., serious mental illness or addiction issues) and have little social support.

Factors beyond the program's control may also impact the program's performance. For example, the relative scarcity or abundance of jobs in the local economy will impact client employment rates for a workforce development program, regardless of the quality of training and support provided. Without controlling for these factors, the true impact or efficacy of the program on outcomes cannot be discerned.

Readers should also use caution when examining outcome results for programs with less than 30 clients, in which the outcome of just a few clients can greatly affect the program's total outcome result. In these instances, examining percentages may be less helpful than examining raw numbers.

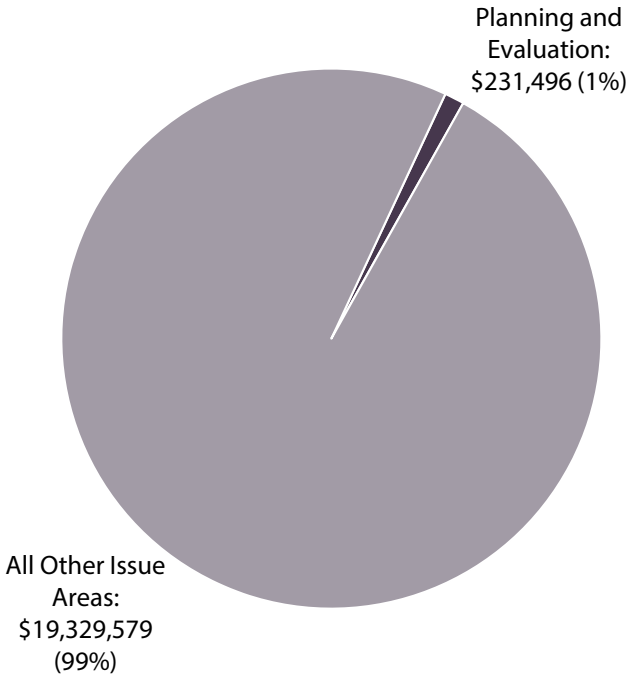
Finally, this report captures a selection of performance measures, which may not reflect the program's full impact on participants and their families, peers, and neighborhood. Performance measures may not all be equal in importance or value to the community.

Investment Overview

Goals and Services

HHS invests in programs that provide planning and evaluation services to supplement the Department's own planning and evaluation work. Programs within this issue area provide assessment, planning, and evaluation services. These services are designed to improve knowledge of community conditions and needs and improve the effectiveness and efficiency of health and human services. Services may include: community assessment, analysis, and reporting; community engagement and outreach; support to community planning processes; and evaluation, performance measurement, and related activities.

Investment in Planning and Evaluation and Other Issue Areas, FY 2018



Funding Summary

The FY 2018 Funding Amount reflects 12–month funding (October 1, 2017 through September 30, 2018) unless otherwise noted.

Agency Name	Program Name	FY 2018 Funding Amount
Children's Optimal Health	Collaboration and Spatial Analysis Information Opportunities in Conjunction with COH Board Membership	$35,000
Ending Community Homelessness Coalition, Inc.	ECHO	$50,000
Integral Care	Community Advancement Network	$68,096
Ray Marshall Center for the Study of Human Resources	Evaluation Services	$78,400

Children's Optimal Health

Collaboration and Spatial Analysis Information Opportunities in Conjunction with COH Board Membership

Program Description

The goals of the Collaboration and Spatial Analysis Information Opportunities in Conjunction with Children's Optimal Health (COH) Board Membership program include:

1. Provide data-driven maps and analyses of the status of health indicators, informing intervention in and prevention of child health risk factors. COH provides HHS leadership with information derived from studies done in subject areas related to the health and well-being of children.
2. Support Travis County with additional geo-spatial information of value to effective allocation of resources.
3. Through COH Board interaction, provide a collaborative leadership forum to share information regarding healthcare, housing, education, economic development, and social/emotional development, thus, enhancing the ability to look at a broader definition of health.
4. Provide HHS leadership with information derived from COH community interactions with multiple direct service providers in subject areas related to the health and well-being of children for the purpose of targeting resources in the most effective manner. Additionally, COH provides the County multiple opportunities to be involved with and collaborate with other action partners in Travis County.

Funding

The total HHS investment in the Collaboration and Spatial Analysis Information Opportunities in Conjunction with COH Board Membership program from October 1, 2017 through September 30, 2018 was $35,000. This investment comprised 10.3% of their total program budget.

Children's Optimal Health

Collaboration and Spatial Analysis Information Opportunities in Conjunction with COH Board Membership

Targeted Stakeholders and Participants

Children's Optimal Health provides data and information services most specifically for the benefit of Board Members, which include Seton Healthcare Family, St. David's Foundation, Central Health, Superior HealthPlan, UT/Austin, City of Austin, Travis County, and others, as well as direct program providers, program planners and community collaborations, and administrators and other staff within school districts, all of whom use this data to inform decisions around program design, resource allocation and policy changes.

Children's Optimal Health: Collaboration and Spatial Analysis

This program met or exceeded all goals. Staff explained that the number of community meetings related to Travis County was higher than projected due to large project participation, particularly the Austin ISD Victims of Crime Act (VOCA) grant establishing mental health centers in 22 public schools (see the first output). Other community meetings were related to both new and old partnerships, such as with Dell Medical School, Go Austin/Vamos Austin (GAVA), and cross-sector data management.

Staff reported that COH had a focus in the past year on time-series mapping, which involved methodological updates for previous maps (i.e. creating new maps), as well as the creation of maps based on the latest data from Travis County entities such as school districts. COH also hired a GIS mapping and analysis specialist, thus increasing the capacity for map production. These factors led to a much larger number of valid maps created than expected (see the second output).

Finally, staff noted that an attempt was made to better target their survey request to those who were potential users of COH data. Therefore, the number of returned surveys was relatively low, but also a better indication of value to actual users (see the outcome). In consideration of customer survey apathy, staff plan to ask for some feedback via interview and other means during FY 2019.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of Community Meetings with COH representation which are related to Travis County	131	75	175%
Number of valid maps including Travis County geographic area created during the period of the grant	183	50	366%
Outcomes			
Percentage of COH partners and beneficiaries indicating usefulness of COH spatial information	90% (28/31)	90% (45/50)	100%

Ending Community Homelessness Coalition, Inc.

ECHO

Program Description

ECHO is designated by the community as the unifying agency of the U.S. Housing and Urban Development (HUD) Continuum of Care (COC), and as such is a key conduit between HUD and the community on homeless programs. ECHO is responsible for planning and implementing systems to understand the extent of homelessness, to provide and manage a database that tracks housing units and services to clients, and to maintain compliance with HUD regulations such as implementing coordinated assessment and creating community priorities for homeless services.

Program goals include: support HUD's COC services and the Austin/Travis County 10 Year Plan to End Chronic Homelessness; recruit and train volunteers and coordinate the annual Point In Time (PIT) Count ensuring adequate focus outside the City of Austin; provide Homeless Management Information System (HMIS) reporting required for HUD COC funds; provide leadership, advocacy, and awareness regarding the prevention, challenges, and solutions to homelessness outside the City of Austin; and implement system change via coordinated assessment, permanent supportive housing and rapid rehousing, ensuring adequate focus outside the urban core.

Funding

The total HHS investment in the ECHO program from October 1, 2017 through September 30, 2018 was $50,000. This investment comprised 3.0% of their total program budget.

Targeted Stakeholders and Participants

As a coalition working to end homelessness, ECHO's constituency spans the continuum from homeless clients in Travis County, to individual volunteers and staff from local non-profits and government agencies, to elected officials and other policy makers.

Ending Community Homelessness Coalition, Inc.: ECHO

ECHO had mixed performance results for FY 2018. The landscape of homelessness has changed significantly over the last couple of years due to a variety of factors. The measures for FY 2018 were unsuccessful in capturing the focus of ECHO's work purchased by the County. Staff reworked the performance measures for FY 2019 to be more specific and focused on the actual work of getting services to people experiencing homelessness outside of the urban core.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of people assessed through the coordinated assessment system	3,746	1,600	234%
Number of homeless people counted in the Annual Point in Time (PIT) Count	2,147	1,600	134%
Number of Volunteers recruited to conduct the annual PIT Count	595	350	170%
Number of awareness/engagement activities outside the City of Austin within Travis County	3	6	50%
Outcomes			
Percentage of all PIT volunteers counting outside the City of Austin	11% (61/560)	21% (75/350)	51%
Percentage of people assessed through the coordinated assessment system who were outside the City of Austin	0.03% (1/3,746)	5% (80/1,600)	1%
Percentage of homeless people counted in the Annual PIT who were outside the City of Austin	1% (11/2,147)	1% (16/1,600)	51%

Integral Care

Community Advancement Network

Program Description

As a convener, connector and informer of individuals and organizations in Central Texas, the Community Advancement Network (CAN) provides a unique, cross-cutting, and collaborative forum to achieve CAN's vision and community goals: 1) We are safe, just and engaged, 2) Our basic needs are met, 3) We are healthy, and 4) We achieve our full potential. CAN's programmatic objectives are to connect efforts across issue areas, enhance awareness of issues, and promote collaboration and partnerships.

CAN's structure, services and products help individuals and organizations across issue areas, disciplines, sectors and jurisdictions to: connect efforts across issue areas by providing a forum for them to network and learn about each others' issues and work; enhance awareness of issues by compiling and sharing information on community issues, trends, needs, resources, and initiatives; and promote collaboration and partnerships by providing a forum for people and organizations to gain a common understanding of issues, and identify common interests, goals, and opportunities to collaborate and leverage resources.

Funding

The total HHS investment in the Community Advancement Network program from October 1, 2017 through September 30, 2018 was $68,096. This investment comprised 22.9% of the total program budget. HHS also funds the Main Mental Health Interlocal, Parenting In Recovery/Family Drug Treatment Court, Substance Abuse Managed Services Organization, and System of Care Managed Services Organization programs, which are described in the Behavioral Health issue area report, and the Families With Voices/ Familias Con Voces Collaborative, which is described in the Holistic Family Services issue area report.

Targeted Stakeholders and Participants

CAN convenes, connects, and informs individuals and organizations working to enhance the social, health, educational, and economic well-being of Central Texas. These individuals and organizations include elected officials, policy makers, agency executive managers, agency research and planning staff, issue area experts, community members, and service providers from the government, non-profit, private and faith-based sectors.

Integral Care: Community Advancement Network

The Community Advancement Network met or exceeded the targeted range of performance across all measures. Visits to both the CAN website and CAN Dashboard website exceeded projections (see the third and fourth outputs). Staff reported that the number of responses to this year's stakeholder survey declined from the previous year (see the second through fourth outcomes). Survey responses from the CAN Board and Community Council increased but responses from other stakeholders significantly decreased. Staff noted that September and October are busy months of CAN activity, so appeals for survey participation may have become lost in the multiple communications from CAN. Although a smaller number of responses were received, most survey participants had a favorable view of CAN.

Performance Measure	Total Program Performance Results	Total Program Performance Goals	Total Program Performance Goal Achieved
Outputs			
Number of meetings convened	69	65	106%
Number of presentations on CAN's Community Dashboard	33	30	110%
Number of visits to CAN website (duplicated)	26,235	12,500	210%
Number of visits to CAN Dashboard website (duplicated)	9,090	7,000	130%
Number of people viewing CANews (duplicated)	9,952	10,000	100%
Number of unduplicated people participating in at least one meeting convened by CAN staff	193	200	97%
Number of unduplicated people participating in at least one forum, summit, training, or retreat convened by CAN staff	214	200	107%
Outcomes			
Percentage of CAN partner organizations that participate in 70% or more of CAN Board meetings	68% (17/25)	72% (18/25)	94%
Percentage of people from the identified stakeholder groups who report that CAN promotes collaboration and partnerships	96% (70/73)	80% (100/125)	120%
Percentage of people who report that CAN's work helps them stay informed about community issues and efforts to enhance the community's well-being	83% (70/84)	80% (120/150)	104%
Percentage of people from the identified stakeholder groups who report that CAN connects efforts across issue areas, disciplines, sectors, and jurisdictions	89% (75/84)	80% (100/125)	112%

Ray Marshall Center for the Study of Human Resources

Evaluation Services

Program Description

The Ray Marshall Center for the Study of Human Resources (RMC) at The University of Texas at Austin provides evaluation services to measure the impact of local investments in workforce development. Travis County invests in a range of Workforce Development (WFD) services for residents, including GED preparation, short-term job search and skill development, and longer-term occupational training. In FY 2018, RMC prepared the second year analysis of outcomes and estimated net impacts of these WFD investments across six contracted service providers.

Research questions to be addressed annually include the following:

- How effective are County-funded workforce development services, as measured by increased eligibility for unemployment insurance (UI) benefits, increased employment and employment retention, and increased earnings?
- How do programs with different yet overlapping service regimes vary in effectiveness and why?
- What changes can be made to services/treatments to improve outcomes for participants?
- How do participant outcomes compare to those of similar individuals who did not receive County-funded workforce development services?
- How effective are the County investments in supporting adult education and literacy (AEL) and academic progress?

The outcomes evaluation focuses on four key labor market measures: average quarterly employment, average quarterly earnings of those employed, the share meeting monetary eligibility requirements for UI benefits quarterly, and the share filing a claim for UI benefits quarterly. RMC is also beginning to examine adult educational outcomes. Finally, each annual core report is accompanied by a supplemental report regarding the continuum/collaborative efforts, an examination of clusters of services by duration and intensity across all programs providing similar services, or a focus on the effects of program services on a specific sub-population/target group of interest determined by the County.

Funding

The total HHS investment in the Evaluation Services program from October 1, 2017 through September 30, 2018 was $78,400.

Ray Marshall Center for the Study of Human Resources

Evaluation Services

Targeted Stakeholders and Participants

The Ray Marshall Center for the Study of Human Resources does not provide direct social services to clients. Evaluation services are intended to inform policy makers, service providers, other research efforts, and the general public.

Performance Goals and Results

The evaluation reports on the impact of local investments in workforce development produced by the Ray Marshall Center are available at: http://raymarshallcenter.org/2006/01/01/an-evaluation-of-workforce/. Social service evaluation reports are provided directly to Travis County staff.

Appendix

2018 Federal Poverty Income Guidelines

Most HHS contracts require programs to serve participants with household incomes at or below 200% of the Federal Poverty Income Guideline (FPIG) level. Some programs have chosen to follow a more stringent threshold. The following table presents the federal poverty thresholds by household size and income.

Household Size	Income Limits by Household Size				
	50%	100%	125%	150%	200%
1 person	$6,070	$12,140	$15,175	$18,210	$24,280
2 persons	$8,230	$16,460	$20,575	$24,690	$32,920
3 persons	$10,390	$20,780	$25,975	$31,170	$41,560
4 persons	$12,550	$25,100	$31,375	$37,650	$50,200
5 persons	$14,710	$29,420	$36,775	$44,130	$58,840
6 persons	$16,870	$33,740	$42,175	$50,610	$67,480
7 persons	$19,030	$38,060	$47,575	$57,090	$76,120
8 persons	$21,190	$42,380	$52,975	$63,570	$84,760
For families/households with more than 8 persons, add $4,320 for each additional person.					

Data source: "2018 Poverty Guidelines for the 48 Contiguous States and the District of Columbia," Office of The Assistant Secretary for Planning and Evaluation, U.S. Department of Health & Human Services, January 13, 2018, https://aspe.hhs.gov/poverty-guidelines.

2018 Austin Median Family Income Guidelines

Some programs may also use Austin MFI guidelines when measuring client incomes. The following table presents the median family income limits established by the U.S. Department of Housing and Urban Development (HUD) for the Austin-Round Rock, TX Metropolitan Statistical Area (MSA).

Household Size	Income Limits by Household Size		
	Extremely Low*	Very Low (50%)	Low (80%)
1 person	$18,100	$30,100	$48,200
2 persons	$20,650	$34,400	$55,050
3 persons	$23,250	$38,700	$61,950
4 persons	$25,800	$43,000	$68,800
5 persons	$29,420	$46,450	$74,350
6 persons	$33,740	$49,900	$79,850
7 persons	$38,060	$53,350	$85,350
8 persons	$42,380	$56,800	$90,850

*The FY 2014 Consolidated Appropriations Act changed the definition of extremely low-income to be the greater of 30/50^{ths} (60%) of the Section 8 very low-income limit or the poverty guideline as established by the Department of Health and Human Services, provided that this amount is not greater than the Section 8 50% very low-income limit.

Data source: "Austin-Round Rock, TX MSA FY 2018 Income Limits Summary," U.S. Department of Housing and Urban Development, https://www.huduser.gov/portal/datasets/il/il2018/2018summary.odn.