

### WorkFirst Oversight Legislative-Executive Taskforce

October 22, 2012 1:30PM to 4:30PM

Senate Conference Rooms ABC J.A. Cherberg Building Olympia, WA

#### AGENDA

Time	Agenda Item	Presenter(s)				
1:30	Welcome/Introductions	Senator Debbie Regala DSHS Secretary Robin Arnold-Williams				
1:40	TANF/WorkFirst Assessment	Tom Berry, Program Manager, CSD, ESA, DSHS				
2:10	Suspension Re-Engagement Data/ Update on February 2011 TANF Time Limit Cohort	Aurea Figueroa, Lead Program Manager, CSD, ESA, DSHS David Mancuso, Chief of Program, Research & Evaluation, DSHS				
2:40	Child Care Caseload Update	Lynne Shanafelt, Child Care Administrator, DEL				
2:45	<ul> <li>Educational Changes</li> <li>Impact of GED Cost Increases</li> <li>Impact of Pell Grant Eligibility Changes</li> <li>How do we increase the number of TANF clients who obtain HS Diploma/GET</li> <li>LET DISCUSSION ITEM (20 Minutes)</li> </ul>	Rick Krauss, Policy Associate, Workforce Education, SBCTC				
3:05	Break					
3:15	1115 Waiver LET DISCUSSION ITEM (20 Minutes)	David Stillman, CSD, ESA, DSHS				

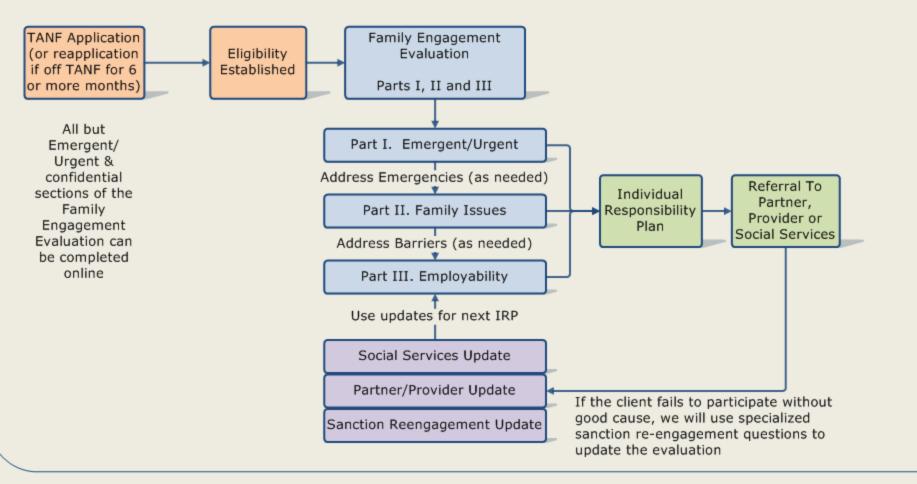
## WorkFirst Assessment Redesign:

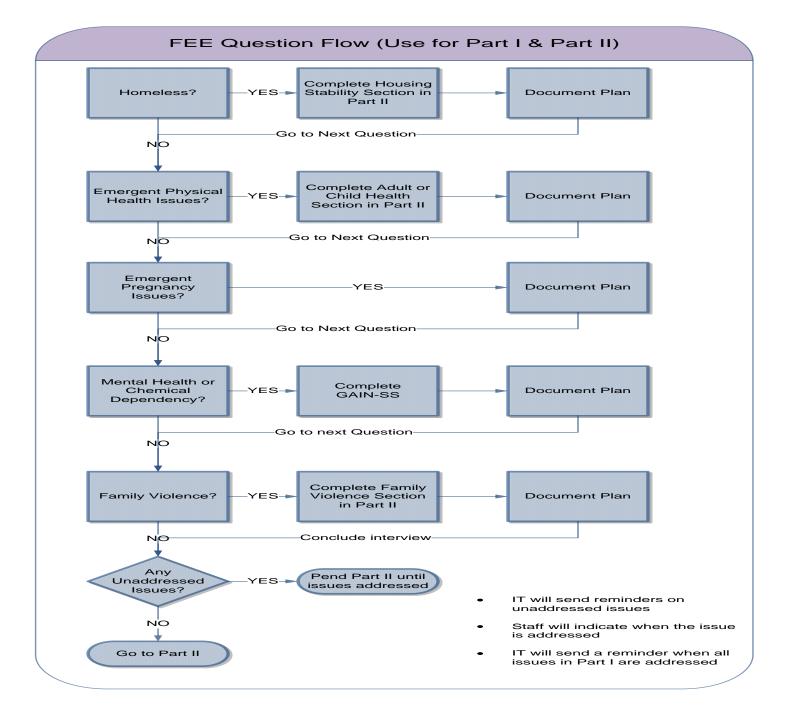
October 2012 update

# WF Assessment Redesign

- Client flow
- Question flow
- Urgent/emergent needs
- Assessment topics
- Staff focus group results
- Client and staff survey results
- Next steps

#### Family Engagement Evaluation: Client Flow Chart





- D. MENTAL HEALTH/ CHEMICAL DEPENDENCY ISSUES
  - 1. DURING THE PAST MONTH HAVE YOU FELT DOWN OR DEPRESSED?
    - a. No (GO TO NEXT QUESTION)
    - b. YES (GO TO NEXT QUESTION)
  - 2. DURING THE PAST MONTH HAVE YOU FELT LIKE HURTING YOURSELF OR OTHERS?
    - a. No (GO TO NEXT QUESTION)
    - b. YES (GO TO NEXT QUESTION)
  - 3. DO YOU WANT IMMEDIATE HELP WITH A DRUG OR ALCOHOL PROBLEM?
    - a. No (GO TO NEXT QUESTION)
    - b. YES
- i. COMPLETE GAIN-SS IN PART II IF THERE IS A YES TO QUESTIONS D1, D2 OR D3
- ii. DOCUMENT HOW YOU WILL ADDRESS THIS URGENT/EMERGENT ISSUE BEFORE YOU GO TO THE NEXT QUESTION
- **iii.** CHECK THIS BOX WHEN THE ISSUE IS ADDRESSED

	Part One: Emergent/Urgent	Part Two: General Information & Family Structure	Part Three: Employability	Part Four: Sanction Re- engagement		
Strengths & Supports		<ul> <li>Strengths</li> <li>Support Systems</li> <li>Care giving (including child care)</li> <li>Children's Education</li> <li>Financial Education</li> </ul>	<ul> <li>Current Work</li> <li>Work History/Educational History</li> <li>Vocational Assessment</li> <li>Learning Strengths</li> <li>Transportation</li> </ul>	<ul> <li>Readiness to Participate</li> </ul>		
Issues	<ul> <li>Pregnancy/Physica I Health</li> <li>Family Violence</li> <li>Mental Health/Chemical Dependency</li> <li>Homelessness</li> </ul>	<ul> <li>Adult/Child Health</li> <li>Family Violence</li> <li>Mental Health/Substance Abuse</li> <li>Housing Stability</li> <li>Child Welfare</li> </ul>	<ul> <li>Employment Barriers</li> <li>Reasons for not working</li> <li>Legal Issues</li> <li>Learning Challenges</li> </ul>	<ul> <li>Obstacles to participation</li> <li>Challenges to self- sufficiency</li> </ul>		
Goals	Action Plan	Personal/Family Goals	Employment/Educational Goals	WF Plan to Achieve Self- sufficiency		

# Staff Focus Groups

- Supported flexibility to initially focus on crisis & significant barriers
- Supported whole-family & strength-based approach
- Discussed operational issues (such as automation, handoffs & reciprocal information sharing)
- Discussed how we address new issues (such as child not doing well in school)
- Discussed how we might adapt for special populations (such as approaching time limit)

# Client/Staff Surveys

- 1. Support for & interest in the online option
- 2. Support for trigger & follow up questions
- 3. Support for resolving crisis first
- 4. Least support for pending education/employment questions until significant barriers addressed
- 5. Support for using different questions for sanction re-engagement
- 6. Most support for doing one evaluation with updates

# Next Steps

- Review & approval of overall design
- Implementation Team (winter 2012)
  - Finalize Questions
  - Information Flow and Handoffs
  - Automation
- Pilot (targeted for summer 2013)
  - User Testing
  - Coordinate with other key initiatives, such as PRISM

## Key Characteristics of Parents in Temporary Suspension in June 2012

- In June 2012, **12,207 parents** were in temporary suspension status
- More likely to be female (92%) and in a one-parent family (79%)
- Majority of parents were white (57%)
- More than half (55%) were under age 24
- 48% had a child under age one
- About 36% had less than a high school degree or GED
- About 9% had a limited English proficiency
- About 59% had been on TANF for two years or less
- The highest numbers lived in these three counties: King (19%), Pierce (15.1%) and Spokane (11.1%)

## **Participation Suspension Analysis**

As of July 2012:

- 986 of the 12,207 parents in suspension exited TANF
- 3,009 parents were exempt, deferred, sanctioned, began the re-engagement process, or participated in activities:
  - 121 parents requested and were approved for an infant exemption
  - 561 parents were exempted (43) or deferred (518) from participation
  - 59 parents were sanctioned
- Parents who participated in WorkFirst were involved in one or more of the following activities:
  - Work activities (674)
  - Job search (620)
  - Education (864)

## July 2012 Participation Suspension Re-engagement Data

941 of the 12,207 adults in suspension were contacted in July for reengagement:

- 49 of these parents exited TANF
- 892 parents were exempted, deferred, sanctioned or participated in activities:
  - 63 parents requested and were approved for an infant exemption
  - 242 parents were determined to be exempt (44) or deferred (198) from participation
  - 25 parents were sanctioned
- Parents who participated were involved in one or more of the following activities:
  - Work activities (69)
  - Job search (144)
  - Education (95)

## February Time Limit Review

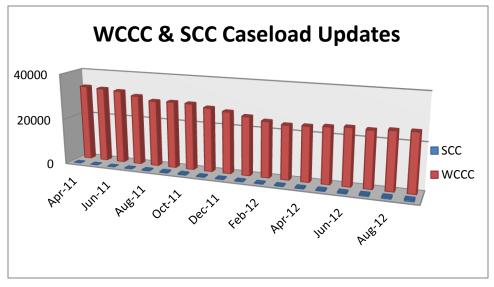
The Department conducted a follow up evaluation of the families and children who left TANF due to time limits in February 2011. By June 2012:

- 89% of adults & children continued to receive food assistance
- 89% of children continued to receive medical assistance; 69% of adults continued to receive medical assistance
- Receipt of subsidized housing remained relatively constant at 40% for children and 35% for adults
- Homelessness rose from approximately 5% to 7% for children & from 7% to just under 11% for adults (consistent with a similar rise in the ongoing TANF population)
- Out of home placements for child welfare rose from 0.7% to 1.7%



## **DEL Updates**

## Child Care Subsidy Programs Caseload



WCCC	33035	32570	32058	30467	28845	29044	28952	27764	26759	25419	24117	23294	23565	24081	24542	24204	24839	25090
SCC	0	0	0	97	280	393	437	304	288	262	253	276	334	443	547	663	689	721
Date	4/11	5/11	6/11	7/11	8/11	9/11	10/11	11/11	12/11	1/12	2/12	3/12	4/12	5/12	6/12	7/12	8/12	9/12



## **DEL Updates**

Child Care Subsidy Eligibility Study

## Portable Background Checks

## Statewide Wide Expansion of Early Achievers

### **Increased Costs for Providing Education and Training**

There are three areas of significant cost increases that were included in the Fiscal Year 2014-15 DSHS Funding Proposal that covered:

GED test fee increase from \$75 to \$150 in October 2012

• Total for all partners of \$169,000 each Fiscal Year

Impact on tuition costs due to loss of Pell eligibility for I-BEST students

- Fiscal Year 2014: \$1,640,000
- Fiscal Year 2015: \$1,933,000

**Tuition Increases** 

• A total of \$499,000 each Fiscal Year



### Increasing the number who obtain HS/GED

- A significant portion of the temporary suspension population lack HS/GED or have previous participation in vocational training
- Research demonstrates that vocational training completion results in higher rates of initial employment, job retention, earnings, wage progression
- Appropriate parents who lack HS/GED or vocational training should be referred to their local SBCTC provider for an educational assessment and development of their education and training plan
- SBCTC providers have the potential capacity to serve the expected increase in students but face fiscal challenges as the increased costs of providing education and training are not funded in the current year



# Break Time 5 Minutes

• We have lots more to share...so hurry back!



### 1115 Waiver Parameters

#### Waivers that may be approved

HHS Secretary will only consider approving waivers that make changes intended to lead to more effective means of meeting the work goals of TANF.

- a. Accelerate job placement applications must demonstrate a measurable increase in the # of TANF clients who find and hold down jobs.
- b. Job Placement Increase Goals proposals must commit to move at least 20% more people from welfare to work compared to the state's past performance.

#### Waiver Applications that will not be approved

- a. Prohibitions in Section 408 (e.g., time limits)
- b. Applications that reduce access to assistance or employment for needy families.
- c. Applications that use TANF funds to provide assistance to families subject to TANF prohibitions.
- d. Applications that would reduce equitable access to Indians.



## 1115 Waiver Considerations

### Location

Waivers may be conducted in limited areas or statewide.

### **Evaluation Plans**

Applications must contain a federallyapproved evaluation plan. Generally, this will include random assignment to test and control groups in order to compare project outcomes to existing requirements. This is a preferred ACF methodology.

### **Performance Measures**

Applications must identify interim performance targets that will be used to hold states accountable for improving outcomes for families.

- a. Demonstrated Progress states must demonstrate clear progress toward their employment goal no later than one year after the program takes effect.
- b. Waiver Termination failure to achieve the goal will result in termination of the waiver.

### Duration

Applications must specify the length of time the project is expected to last. Usually this is three years but can last up to five years.

### Budget

Applications must include a budget that includes costs of program evaluations. TANF and state MOE can be used to pay for the costs of evaluations. (No additional funding is available for a project.)

### **Public Input**

Applications must include opportunities for public input into the waiver. (HHS will issue further guidance on this topic.)

### **HHS & OMB Conditions**

All waivers are subject to HHS and OMB approval. Terms and conditions may include additional requirements such as site visits before implementation.

## 1115 Waiver Planning Progress Update

- A workgroup of members of the advocacy community met on October 9, 2012 to solicit ideas and suggestions for possible TANF waiver approaches. A few preliminary ideas for consideration include:
  - Allowing certain necessary activities (Intensive ESL, HS/GED completion) to meet the full time participation
    requirements for a specified duration
  - Changing limitations on Vocational Education (from 12 months to 24 months; eliminating the 30% enrollment cap)
  - Intensive ESL that counts
  - High School/GED allowed full time or in conjunction with Vocational Education
  - Waiving the 4 week job readiness/job search limitation and separating Chemical Dependency and Mental Health from this category
- Workgroup members will poll working clients to see what WORKED in helping them find employment to see if we can identify possible strategies from their experience and Department staff committed to gathering some additional data for consideration
- The group plans to meet again in November 2012

## Increase in Child Poverty Rate

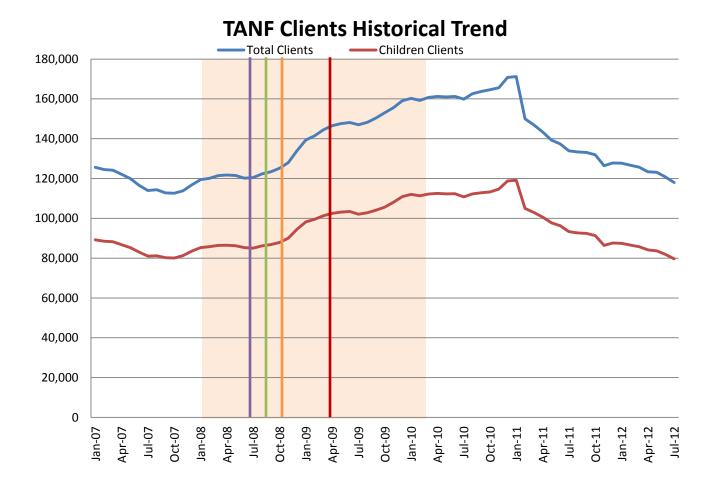
- ACF issued a letter to the Governor June 27, 2012 indicating that they have determined the child poverty increased by at least 5% in 19 states between 2008 and 2009 (including WA)
- Process Defined in Law:
  - States may submit independent estimates within 45 days
  - Within 90 days the state must submit an assessment of impact of TANF on increase in child poverty (unless HHS accepts an independent estimate that shows less than a 5% increase)
  - States will be notified whether the TANF program needs to submit a corrective compliance plan
- Washington is awaiting further guidance from the Department of Health and Human Services
- Governor Gregoire submitted a letter to ACF on August 9, 2012

## Initial Assessment Data

The Department initiated a comprehensive assessment of the state's TANF program & recent economic impacts as a result of the Great Recession.

- 1. During the Great Recession Washington's unemployment rate and # of children living in poverty increased:
  - Unemployment increased from 4.6% in January 2008 to 10.2% in December 2009
  - The # of children living in poverty increased by 13.5% from 2008 to 2009
- 2. Washington's TANF program and other safety net programs experienced changes:
  - The number of children receiving TANF increased by 18.7%
  - In 2008, 40.2% of children living in poverty received TANF. This increased to 41.3% in 2009.
  - The TANF All-Family caseload increased by 28.8% from January 2008 to December 2009.
  - TANF assistance spending increased by 23% from 2008 to 2009. TANF payment standards were increased by 3% in 2008.
  - The average # of Washington children receiving SNAP benefits increased by over 36% from 2008 to 2009.
  - Washington qualified as a "needy state" under the Contingency Fund rules for 2008 and 2009.

# **TANF Clients—Historical Trend**



## Poverty Estimates for Children Under 18 in WA

Children Under 18	2008	2009	2010	% Change 2008-2009	% Change 2009-2010					
American Community Survey (ACS)										
Poverty Rate	14.3%	16.2%	18.2%	13.5%	12.2%					
# in Poverty	217,002	250,830	284,045	15.6%	13.2%					
Small Income and Poverty Estimates (SAIPE)										
Poverty Rate	14.3%	16.2%	18.2%	13.3%	12.3%					
# in Poverty	217,241	249,767	283,993	15.0%	13.7%					

Data Notes: Poverty status is determined for all people except institutionalized people, people in military group quarters, people in college dormitories, and unrelated individuals under 15 years old. The Census Bureau uses dollar thresholds that vary by family size and number of children to determine who is in poverty. If a family's total income is less than the appropriate threshold, then that family and every individual in it are considered to be in poverty. The same logic applies to people living alone. The poverty thresholds are revised annually to account for inflation. The thresholds are the same for all parts of the U.S.; they are not adjusted for regional, state, or local variations in the cost of living.

Sources: U.S. Census Bureau, American Community Survey (1-Year Estimates for 2008, 2009, and 2010); Small Area Income and Poverty Estimates Program (Years 2008, 2009, 2010)

## **Public Comment**

# 20 Minutes





# Legislative-Executive Task Force— Next Steps Discussion

- Follow up action items
- Goals and priorities for future meetings
- Next meeting agenda topics
- Next meeting date



# Thank You!