Commissioner Shapiro unveils a new model for Montco human services delivery

Norristown, PA (October 25, 2012) – Josh Shapiro, chairman of the Montgomery County Commissioners, today outlined a new structure for the delivery of the county’s human services that will go into effect in 2013.

In a speech to more than 200 persons attending the North Penn Community Health Foundation forum, Shapiro described a revamping of the current system from a discipline-focused system to a constituent-focused system. The new structure would utilize regional offices to bring services closer to constituents, and those offices would be staffed by “navicates” who would help those constituents navigate the system and would advocate for them.

Shapiro’s speech outlining the new system follows:

Josh Shapiro Speech to North Penn Community Health Foundation
October 25, 2012

When Leslie Richards, Bruce Castor and I took office in January, we were immediately faced with a $10 million budget deficit, a crumbling county infrastructure including roads, bridges, parking garages, and buildings, and a county staff whose morale had sunk to an all-time low.

We have systematically, but aggressively, tackled all those problems, and while we have a long way to go—and our 2013 budget will contain significant and painful cuts, we are making significant progress.

While we continue to battle these highly visible problems, our broader mission and our vision when we took office was to make Montgomery County’s government more open and transparent and more responsive to the residents of county.

We will fix our budget problems, and we will repair the crumbing concrete and make county residents proud again of their county government.
But, we will not consider our administration a success unless we succeed in making sure Montgomery County’s business is conducted in an open and transparent manner with the highest degree of integrity, and we will not be satisfied unless we fulfill our promise to make the delivery of services as efficient and as seamless as it can be.

We have taken significant steps along those lines. Many of them are internal structural changes, and are not readily apparent to our constituents, but will produce external results and provide a more streamlined and efficient county government.

One of our highest priorities and one that we are heavily invested in is improving the way Montgomery County delivers social services and making it easier for our residents to access those services.

The reason I chose public service is to be in a position to help people, and there are few levels of government that can do that more directly than county government.

I am sure you all know that at least half of our annual county budget is devoted to social services. As everyone in this room knows, the county provides scores of preventive, early intervention, and supportive services to county residents.

In the last year alone we served over 165,000 persons and helped them deal with serious crises in their lives. We have nearly 600 talented and dedicated human services staff in our eight departments, who work hard every day delivering those services, but we all know the process can be improved—and it will be.

When one of our constituents needs help, many times from multiple county offices, they are confused and overwhelmed by the bureaucracy, and these feelings are layered over the distress they are already feeling from whatever situation they are dealing with.

Here is one example of a man with multiple problems, and how our current system ultimately succeeded in reaching a happy ending:

*Leo is a 50-yearold man who was referred to Aging and Adult Services at the time of the death of his brother, who was also his primary care giver. Leo is a disabled adult. At the age of 3 he sustained a traumatic brain injury when he was hit by a car. A few years later, he fell off of the back of a truck and suffered a concussion. He was hospitalized as an adolescent at Northwestern where he had a very bad experience. Since that time he has refused any other hospitalizations or psychotropic medication. His*
mother cared and managed all of his needs until her death in 2009. Leo has arthritis in his knees, stomach problems and suffers from anxiety.

The home in which Leo lived had been in his mother’s name and had to be sold to pay off outstanding bills. His sister-in-law was assisting with his finances. He handles his own activities of daily living and is able to do shopping. He is well known in his community by his neighbors and they watch out for him. His primary need was for affordable housing.

Through our Behavioral Health and Community Housing departments, we were able to assist with rental money to secure a one bedroom apartment. Behavioral Health’s TBRA program assisted with subsidizing his monthly rent until he was able to receive a housing voucher through the Housing Authority.

Our staff worked closely with Behavioral Health, Housing and Community Development, and the Housing Authority to find the apartment and have the apartment inspected. Through the rental assistance program Leo was able to remain in the community and to live safely and independently.

There are many stories like Leo’s and our professionals work outside the lines on many occasions to make stories like Leo’s happen.

But, too many times they are constricted by a system that has institutionalized a stovepipe approach to the delivery of these services. This causes the person in need to have to complicate their situation with making multiple phone calls or trips to county offices, most of which are in Norristown where they have to find a parking place and the office they are seeking. If the person is without a vehicle, they are at the mercy of a public transportation system that may be non-existent in their part of the county.

This system many times causes services to be delayed simply because of the cumbersome nature of the system our professionals work in and our constituents have to deal with.

We are going to fix this for Leo and the thousands of others like him who depend on us.

This is what human services delivery in Montgomery County will look like beginning in 2013.

We will shift from a discipline-focused system to a constituent-focused system.
Our new model will provide much easier access to human services; ensure cross-departmental collaboration and synergies; embrace innovation and technology to deliver services more quickly, locally, and effectively; deliver exceptional value and service; and, most importantly, will result in better outcomes for those Montgomery County residents most in need.

There are two very important elements to our vision. The first is a geographically decentralized model that will provide easy, local access to services, which will allow our residents to receive the counseling, information, and services closer to their homes without the need to travel to Norristown.

While we are geographically decentralizing our services, we will be centralizing the point of service for our residents. The linchpin of this centralization of services will be what we are calling Navicates—employees who will now act as a navigator and advocate for county residents in need.

Each of our regional offices will have Navicates that would help our residents navigate our system of human services and act as their advocate throughout the process. This takes the onus off of the individual to figure out who to call and where to seek help. They would simply sit down with a Navicate, discuss their problems, challenges, and needs and let the Navicate lead the way and advocate for the resident.

This will take a lot of work, but we are committed to changing a system that no longer is as responsive as it should be. This change will be budgeted in 2013 and will not add a burden to county taxpayers.

The key to making this happen is our human services professionals. Montgomery County is blessed to have such a dedicated, caring group of individuals—many of whom are here today. They will make this happen and when it is completed they will be freed of the constraints of the old system, and their talents and dedication will be on full display.

The leaders of this transformational process are an incredibly talented group of professionals, who are a part of our Human Services Cabinet. This subcommittee that is putting this new system in place includes Elizabeth Adeyi of Montgomery County Child Care Information Services, Eric Goldstein of the Montgomery County Department of Behavioral Development and Developmental Disabilities, Joanne Kline of the Montgomery County Office of Aging and Adult Services, Laurie O’Connor of the Montgomery County Office of Children and Youth, and Kathy Phifer of the Montgomery County Office of Housing and Community Development.
The ultimate success of our new system will depend, however, on everyone in this room—municipal leaders, non-profit agencies, community partners, contractors, or any other arm of our important social network.

The success of this new system will depend on our ability to utilize our public-public and public-private relationships to their fullest, and to continue to share information, which will lead to creating more synergy to empower our collaboration.

At its core, the success of what we are trying to do here in Montgomery County is based on our grassroots efforts, the sharing of information and expertise, and ultimately working together to improve the lives of those most at risk in Montgomery County.

I want to thank Russell Johnson and the North Penn Community Health Foundation for their leadership and for giving me the opportunity to speak today, and thanks to all of you for coming out today. You are proof that our most vulnerable and troubled brothers and sisters will be served in the best possible way, and my promise to you is that Montgomery County will not only be a full partner in those efforts, but an enthusiastic and ground-breaking leader.