### Legislative-Executive WorkFirst Poverty Reduction Oversight Task Force

2/20/2020 8:30 AM-11:30 AM

Department of Social and Health Services Office Building Two / Conference Room SL-03

1115 Washington St SE, Olympia, WA 98504

# Minutes *(for review and confirmation at next meeting, May, 2020)*

1. **Welcome and Introductions**

*Meeting convened by Senator Hans Zeiger and Dept. of Social and Health Services Secretary Cheryl Strange*

**Quorum met by task force members (or designee) in attendance as follows**:

*Sen. Jeannie Darneille, Erin Frasier, Diane Klontz, Haley Lowe, Nam Nguyen, Daisye Orr, Marie Bruin for Tim Probst, Babs Roberts, Maria Siguenza, David Stillman, Cheryl Strange and Sen. Hans Zeiger.*

**Guest Presenters & Additional attendees**:

*Sarah Garcia, Lindy Henry, Alexis Marx and Suzy Young.*

1. **Task Force Business**
   * **Confirm prior meeting minutes**
   * *At the time the minutes were reviewed we did not have a quorum. Minute’s confirmation tabled for next meeting.*
2. **Five-Year Strategic Plan Review**

*Babs Roberts, DSHS*

* *OPENING: This version includes a problem statement, background of bill, a list of taskforce members at the time of the report. It describes the development of the plan, involvement with the advisory committee’s strategic plan, and it now lists the poverty reduction workgroup members in appendix A and B.* 
  + *The body of the report is much smaller. Based on feedback from the last meeting, the strategies themselves are explained but more specific or controversial recommendations are now in appendix E as potential options rather than recommendations.*
  + *Added that there may not be unanimous agreement on the plan.*
  + *Now has more upfront on why and how the report was created.*
* *STRATEGY 1: Acknowledge, understand, and take action to undo structural racism and the effects of historical trauma in state policy, programs, and practice.*
  + *Goes over historic racisms. Includes some quotes and support as to why this is important. Points to appendix C on time line for history racism.*
* *STRATEGY 2: Make equal space for the power and influence of people and communities most affected by poverty and inequality in decision-making.* 
  + *Looking at long term change but also need some short term strategies for those in poverty now, included a quote from Steering committee.*
* *STRATEGY 3: Targeted equitable income growth and wealth-building opportunities for people with low incomes.* 
  + *Eliminate wage disparities and added data around that. Pulled recommendation from 3 bodies of work including the advisory committee. Points to a new figure in appendix F.*
  + *Strengthening literacy across entire program. Changing practices in schools away from discipline instead of marginalizing students. Affordable housing around colleges and technical schools.*
  + *Remove residency issues for refuges so we can decrease the costs of school as a Washington resident,*
  + *There is now some recommendations from the Asset Building Coalition based on recommendation from Sen Darneille.* 
    - *Cheryl shared that they recently hosted an event around financial literacy and asset building that had a lot of great information and positive energy.*
  + *Finding affordable housing is a real problem in Washington state, unstable housing makes finding a way out of poverty even more challenging.*
  + *Recommendations about changes to the tax system.*
  + *Understand the push/pull so there is a balance for employers and lower wage earning employees.*
* *STRATEGY 4: Strengthen health supports across the life span to promote the intergenerational well-being of families.* 
  + *Information included about adverse childhood experiences, now includes quotes from steering committee.*
  + *Recommendation to create a state funded health program like Massachusetts that would get healthcare under 150% FPL.*
  + *Included data link to the Maternal Well-Being of Washington State’s TANF Population report which shows data for pregnancy and children on TANF and has some unsettling negative health outcomes compared to other populations. Evidence and based practices.*
  + *Expanding home visiting programs with partnerships and referral pathways. Describes the process of collaboration with DSHS and DCYF.*
  + *Access to contraceptives, people under 20 are highest group of unplanned pregnancies.*
  + *Expand WIC programs expands healthy nutrition, there is a gap for those on SNAP that should be eligible for WIC but not receiving services.*
* *STRATEGY 5: Prioritize the urgent needs of people experiencing homelessness, violence, mental health, illness or addiction.* 
  + *Added data around homeless students and outcomes.*
  + *Drug treatment has risen, depression for teens has risen and those getting mental health counseling.* 
    - *This makes it difficult for folks to get to activities and school each day.*
  + *Data added around the number of WorkFirst folks deferred for mental health, and substance issues.* 
    - *There are challenges to access those systems.*
    - *Don’t always have providers that take apple health in their community.*
  + *It’s harder to overcome barriers when living in poverty.*
  + *Now includes information from the TC program and includes a powerful quote from TC participant about second chances.*
* *STRATEGY 6: Build an integrated human service continuum of care that addresses the holistic needs of children, adults and families.* 
  + *Low income population is overburdened trying to navigate all these systems while they are in crisis. Programs requirements don’t always align. Quote from steering committee added that it “feels like it’s a full time job”.*
  + *Colocation and integration, person centered design and culturally relevant care is a best practice and working well in other states. Holistic services including the entire family, not just the parent for participation.*
  + *Recommend a trauma informed care approach to build trust and engagement. Explained the triage system with calls, but people don’t speak “our language” and it’s now all automated and done behind the scenes.*
  + *Recommendation 6g talks about significant TANF cuts that were detrimental to many families. There are specifics around this in appendix E. Only 26 out of 100 families are accessing services, this is 50 point decline from 10 years ago.*
  + *Recommendations around the Community Services Division’s Transforming Case Management project.*
  + *Key recommendations includes the continuum of care and what do we do next. How will we know what we are doing is working, need some shared data.*
  + *Updating standard of need, this could be a system of care. Include quotes from steering committee about re-sharing their stories and the trauma that comes with that.*
  + *Off ramps to prevent folks who are to move off systems, to stay off, see more in appendix F.*
  + *People need to feel hope, this builds resiliency and looking at this emerging science into CSD programs and policy.*
  + *Recommend breaking down silos in CSD to provide services not based on programs but need and providing staff the time to do this. Needs operational support.*
* *STRATEGY 7: Decriminalize poverty and reduce reliance on the child welfare, juvenile justice, and criminal justice systems that exacerbate its intergenerational effect.*
  + *Families who living in poverty have higher ACEs, there are impacts for school, development and increased chances of being involved with programs like juvenile justice. Child welfare systems and criminal justice systems have a very large correlation. Another quote from steering committee.*
  + *Went over recommendations.*
  + *Gave additional on Legal Financial Obligations’ and how it makes it harder for those reentering the community to thrive.*
  + *Doing more upfront to get folks leaving criminal justice systems to services like medical, food and cash.*
* *STRATEGY 8: Ensure a just transition to the future of work.*
  + *Recommendations built strongly on Future of Work taskforce recommendations and studies on a newly emerging economy. There is a footnote to the report from FOW taskforce report.*
* *CONCLUSION AND NEXT STEPS: This is a 5 year plan, some recommendations may take longer but some are more important.* 
  + *Next step is to design a timeline and hierarchy, need to develop a way to measure the promising practices to gather that data and develop a scorecard to show what actions we are taking are getting desired results.*
  + *Where do we need to build systems and data share and a plan to continue to gather information and feedback from customers, community partners and sharing information back to this taskforce?*
  + *Appendix E is an example of what the scorecard could look like.*
  + *This taskforce should be continue to meeting quarterly, monitor the work being done and better alignment. Will marry the work being done where appropriate.*
* ***Discussion:***

*Questions about why some of the recommendations are the same as the 10 year Governors Poverty Reduction Workgroup with only a few words difference? Example 4e removed the word “administrative”.*

* + *This plan differs in a several different ways, this plan has a shorter timeline of 5 years and is owned by DSHS with a focus on WorkFirst topics and must be approved by the legislative taskforce.*
    - *Some items were changed based on feedback from the last Taskforce meeting.*
    - *Some items were changed based on feedback from other agencies.*
    - *Some were changed based on feedback from the report survey which was a blind survey but appeared to include feedback from legislators.*
      * *Where there was conflicting information DSHS chose wording that was a middle ground.*
    - *Some were changed or moved to the appendix as options due to the controversial nature of the recommendations.*
    - *There was some wordsmithing to include Department’s focus on plain talk.*

*There are 13 recommendations that are slightly altered in the body of the report but only 2 indicate a modified recommendation from the advisory committee. Could we add “modified” to each of the recommendations that were modified?*

* *Yes we can look at adding that these recommendations were modified, could be as simple as adding a footnote stating it was modified based on feedback from the taskforce.*
* *Suggestion to add more language to the beginning of the report outlining why the recommendations would be different.*
* *Suggestion of adding a one pager to each report explaining the differences.*

*How do we explain the differences of the two plans and how to move forward to our agencies?*

* *The 5 year plan is both broader and narrower than the 10 year plan. Narrow in that there are specifics about a 5 year horizon and must relate to WorkFirst but broader in that the recommendations don’t have to be as specific.*
* *The legislative 5 year plan is much more prescriptive and has more options vs. recommendations.*

*Is this plan narrowed to just DSHS?*

* *No, plan was expanded the focus beyond recommendations that would directly impact DSHS.*

*Is there a way to have one action planning meeting so that action plans on same recommendations align?*

* *The 10 year plan is going through a socialization process and may continue to change. The Governor will decide what happens with the 10 year plan.*
* *5 year plan is much more prescriptive and action plan will be created by this body. We will coordinate where we can but will have separate action plans.*
* *The legislative taskforce will decide to approve this plan or not. Recognized the struggle, there’s nothing that says we can’t revisit this, can adopt it today and start making changes as soon as we meet again.*
  + - *We can take more time in additional meetings on specific options.*
    - *Governor’s plan will continue to evolve as well.*

*Should the action plan for 5 year report be moved forward by DSHS policy process?*

* *DSHS can move forward with action items that are DSHS centered but some, like criminal justice system, would be out of scope for the policy process.*

*Should this plan be adopted?*

* *Recommendation to adopt this plan calling out specific language mentioned the 13 modifications and the plan to continue to work on this.*
* *No one reported any strong objections to strategies or modifications to the recommendations.*
* *There is an opportunity to change the report as we move forward.*
* *This report is overdue, was due December 1, 2019.*
* *We can approve it and ask the taskforce to note the reconciliation about which ones changed and identify these.*
* *These reports are helpful for legislatures who is the audience to do future bill and budget asks. This is a remarkable document. Feels like there is a good combination of pie in the sky, manifestation of values and concrete examples of how to move forward. It is comprehensive, thoughtful and visionary. Doesn’t want this to sit gathering dust, needs concrete tings we can start doing right now for bill development and budget asks. Also needs to include facts, experiences and be nimble to change as additional research and data comes in. Some of the legislators on this taskforce will be changing and the work needs to start now. Recommendation to approve it but hone in on what can be done in five years.*
* *Recommend going forward to start making changes but revisit 1482 next year based on experience and this product.*
* *There’s feeling that recommendations may have been censored for lack of a better word.*
* ***Adoption of report***
* *Motion from Diane Klontz to move the report forward with a cross document discussing differences and a plan to continue this conversation with the steering committee.*
* *Rep. Hans Zeiger seconded the motion.*
* *All in favor, no opposed, motion carried.*

1. **Human Centered Design Workgroup**

*Maria Bruin, ESD*

* *Four agencies started working on strategy for human centered design and continuum of care (strategy 6). Revisited the challenges that individuals accessing means tested programs face.* 
  + - *It’s impossible to ignore the voices of those who are uses our services. Excited about creating a human centered design including the voice of those accessing services.*
    - *People accessing services don’t understand silos, “They are not silos, they are fortresses purposely set up to deny access to more than one service”, this is their experience and their truth.*
* *Pioneering agencies charter will do short term and long term recommendations.* 
  + - *Creating decision packages jointly to breakdown those walls for individuals accessing services.*
    - *Need to understand what services are available from other agencies.*
    - *Shared indicators of success. Where are we starting and how to we track if this is successful.*
    - *Went over timeline and design work. Starting on joint leg requests soon.*
    - *Identified opportunities of available now and scoring looking at difficulty and opportunity. There are 25 opportunities with 10 that seem ripe.*
    - *They will learn more about human centered to make sure this is forefront of work and trying to see of what they can accomplish by June and would like to come back to share more about what they are working on.*
      * *Don’t know the walk of the client, need to find out where the handoffs take place. What do these handoffs look like?*
* *This group not limited to ESA and trying to cast a broader net. Included folks from ALTSA and DDA. DOH also just jumped right in looking at the paralleled work.* 
  + - *All of the agencies need to find out what is working for other agencies. They have feedback from steering committee and survey feedback. Maybe waiting rooms could be more comfortable, functional and meets children needs.*
    - *It's important in human centered design to have the clients drive this work.*

1. **Public Comment**

* *No public comment.*