

Figure 1: Current HHS Caseload and Staffing Thresholds

Division	Approximate Caseload	How Caseload is Covered Now	How Many Additional Cases Can Be Absorbed	At what threshold do we need a new employee	If adding staff, what classification	Funding Source
Behavioral Health	Substance Use Disorders (SUD): 1 Drinking Driver Program (DDP): 3 Mental Health: 8	SUD, DDP, and mental health contacts by videoconferencing, plus Psychiatric Nurse travels to the area bi-monthly to provide outreach. Four consumers receive counseling services from a contract provider in Pahrump.	Approximately twice the current caseload	If there is consistently more than five people required to attend DDP classes, may need an additional class (class enrollment limited to 12 people), requiring additional part-time Addictions Counselor	One part-time Addictions Counselor	SUD: Realignment- currently expending entire allocation so additional salary could impact County General Fund (CGF) DDP: Client fees- 100% client-funded program. MH: Realignment, Medi-Cal revenue
Social Services-Employment and Eligibility	CalWORKs: 8 County Medical Services Program: 5 Food Stamps: 17 MediCal: 14 General Assistance: 0	Occasional travel required from northern Inyo. Most applications are processed by phone, online, or by mail. Tecopa-based staff verify residency for programs, if required; collect required documentation; and do the fingerprinting, when necessary.	A small caseload increase could easily be absorbed by current staff in Bishop.	If caseload doubles, would need an additional HHS Specialist to facilitate application process.	One part-time or full-time HHS Specialist (para-professional)	CalWORKs, Food Stamps, CMSP, Medi-Cal administration: State, Federal allocations, plus realignment. General Assistance: 100% CGF.

Figure 1 (cont.): Current HHS Caseload and Staffing Thresholds

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Social Services- Adult and Children’s Services	Child Welfare (CPS): 1/quarter Adult Protective Services (APS): 1-2/quarter In-Home Supportive Services (IHSS): 12 Area Agency on Aging (AAA): avg. 85 for meals.	IHSS staff travels about once every two months for client assessments. CPS/APS responds as mandated 1-2 times/quarter. We rarely have cases in APS or CPS in southeastern Inyo, but did recently have to remove a child from a home out there and that case required travel more than once per month to facilitate visits with the parent. We utilized Tecopa-based staff to transport the parent half-way to minimize total travel time.	2 CPS and/or APS investigations per month would significantly strain the current staff.	2-4 investigations per month for CPS or APS that result in services would require a full time Social Worker in Tecopa. That worker would respond to investigations, provide appropriate services, and perform IHSS assessments. This would also require regular on-site supervision (probably a Bishop-based Social Worker Supervisor who travels regularly to Tecopa plus provides daily telephone contact).	One full time Social Worker in Tecopa plus one part-time Social Worker Supervisor in Bishop.	CPS: Realignment- currently expending entire allocation so additional salary could impact County General Fund (CGF) APS, IHSS: Not fully expended currently. Could cover PT Social Worker salary. AAA: Currently expending entire allocation so additional salary could impact County General Fund (CGF)

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Public Health	CA Children’s Services: 2-3/yr. Clinic Services: limited Women Infants & Children: avg. 1-2 cases Medical Marijuana ID Card (MMIC): 4	For clinical and immunization services: Professional staff travel to Tecopa area twice/yr. Clinic services provided by contractor in Furnace Creek. CCS: Case management provided by phone from Bishop on average once/mo./client. MMIC: Applications collected by Tecopa staff approx...4/year and processed in Bishop. WIC: quarterly contact with clients by phone or mail from Bishop.		Public Health- Not likely needed. CCS and WIC caseload would have to increase sizably to impact staffing patterns.		Public Health: realignment- additional salary could impact County General Fund (CGF) Valley Fever syndromic surveillance/investigation -if conducted by County Health Officer- could hit County General Fund CCS, WIC: State allocation and realignment- currently expending entire allocation so additional salary could impact County General Fund (CGF)

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Tecopa	Residence verification for services; Transportation to services; Prevention/education direct services (Senior meals for AAA); Collect application paperwork and coordinate contact with professional staff.	Weekly trips (mileage for round-trip) to: Charleston View (55 mi); Pahrump (85 mi); Shoshone (16 mi). Travel to Stovepipe Wells as needed for meal pick-up (184 mi. round-trip) Travel to Bishop bi-monthly (480 mi. round trip).	A very small increase, especially in Employment and Eligibility program applications, could be absorbed.	Any increase in direct service, transportation, or resident verification would require additional staff in the Tecopa office.	One part-time of full-time HHS Specialist (para-professional)	Salaries currently paid with multiple budgets- mostly realigned funds. Additional salary could impact County General Fund (CGF)