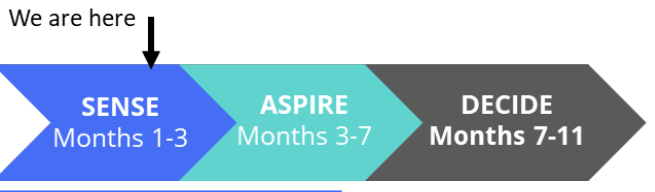


## PURPOSE AND APPROACH

Understand the current environment and identify improvement opportunities across Travis County Health and Human Services' existing business processes, technology, and client service delivery.

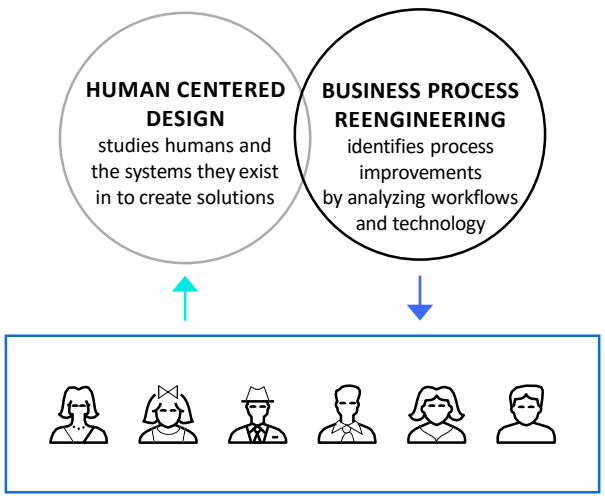


## FIELD RESEARCH

- 7 Community Observations
- 72 Interviews
- 11 Discovery Sessions

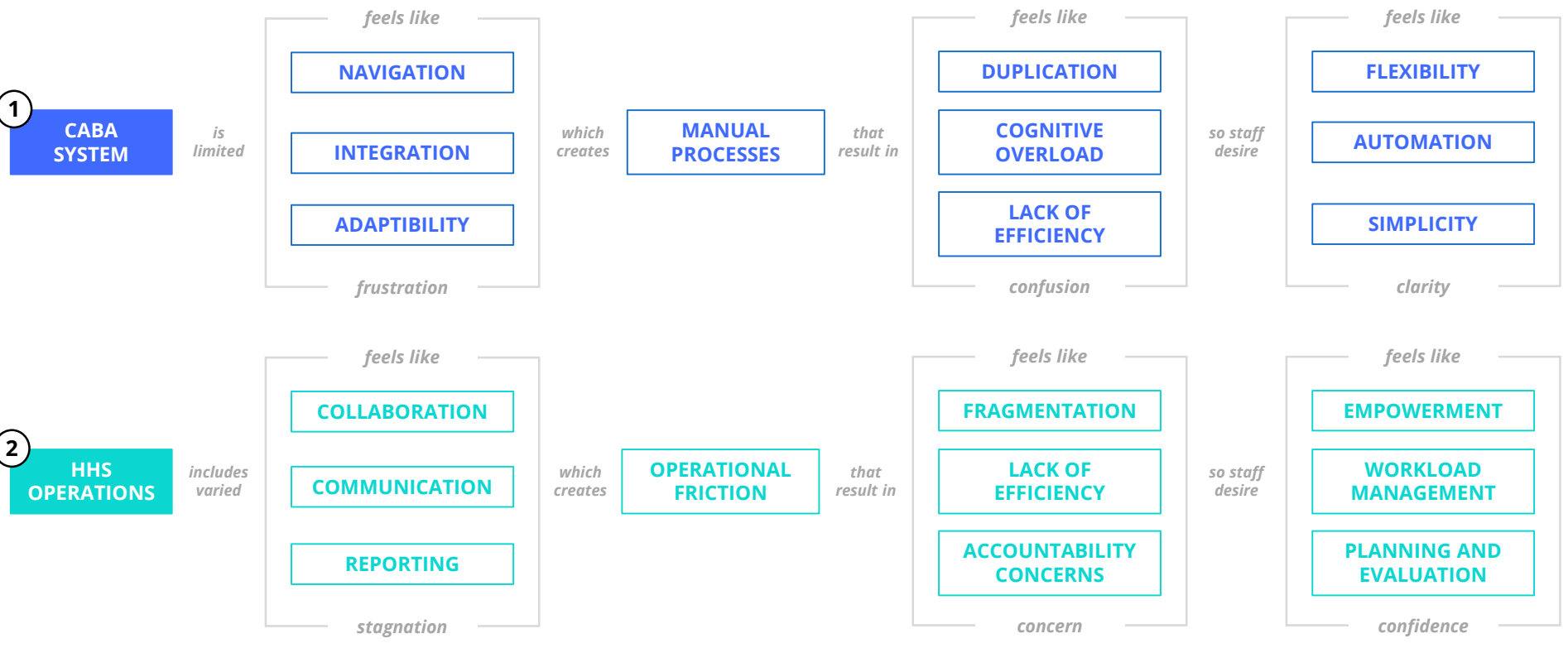
**1200+**  
DATA POINTS

**Human Centered Design** is a bottoms-up approach to systems development that starts by understanding people, their actions, decisions, and feelings. It is best suited for complex, non-linear problems like an ECMS for Travis County HHS where services and staff roles vary from program to program. Whereas traditional business process reengineering focuses on technology- and process-driven hypotheses, combining an HCD approach means prioritizing the understanding of user needs upfront and then aligning outcomes with process and technology to create effective solutions.



## THEME STORYLINE

Analyzed 1195+ data points to develop themes, patterns, and insights regarding HHS services and worker experience with CABA and other technology.



### NAVIGATION

Workers using CABA experience difficulties that include system errors, limited search capabilities, and irrelevant functions. Workers are spending valuable time scrolling line by line in case notes or using multiple web browsers to answer simple questions.

"CABA has a lot of glitches; it doesn't give me the information I want."

### INTEGRATION

Workers move from CABA to Datalinks to Excel to paper forms just to complete one application. Manual searches to external websites are required to verify eligibility. Workers feel the burden to verify the accuracy of client information in order to ensure county funds are used fairly.

"Desperation breeds falsification, and our income verification system is very weak."

### ADAPTABILITY

CABA's limited ability to adapt to the changing demands for Travis County HHS' services restricts the capacity of workers on the ground. CABA feels like a fragmented system and increases opportunities for workers to make mistakes leaving them frustrated.

"I want the system to support the work that we do without workarounds or things like Datalinks."

### MANUAL PROCESSES

HHS workers are proactive problem solvers supporting the complex service needs of clients that require attention and time. CABA's limited navigation, integration, and adaptability have produced an over-reliance on manual processes to complete even basic tasks, resulting in a frustrating and confusing worker experience.

"I have to copy photos of documents into Word and then print them."

"[using Excel workbooks] is kind of a bit much."

### DUPLICATION

Workers are tracking applications and information across spreadsheets, documents, and paper case notes to be transferred later into CABA. System errors such as auto-populate issues in Datalinks require workers to constantly double-check fields when entering client information.

"I don't like to do double work; It feels like a huge waste of staff time."

### COGNITIVE OVERLOAD

Workers are overwhelmed by balancing the needs of clients with the amount of information required to process an application from multiple vendors, policies, and client details. Workers find themselves easily distracted and making mistakes.

"They [Caseworkers] think they are finished with something and someone catches an error...it's frustrating."

### LACK OF EFFICIENCY

The limited adaptability of CABA has left workers feeling powerless to adapt to the changing needs of clients in Travis County. Quite often staff are completing additional tasks, such as calling IT when locked out of CABA or sorting duplicate information on paper.

"I feel like a documenter. 50% of my time is documenting."

"I have to touch every single piece of paper. I catch human errors."

"Clients feel like they are jumping through hoops."

## COLLABORATION

Across Community Centers there is a general feeling of collaboration when troubleshooting and knowledge-sharing in real time. Workers pick up the slack when needed, covering the front desk or gathering a food pantry package.



"We work very independently but will Skype and text each other with questions and to help handle different cases."

## COMMUNICATION

Due to the variety of services provided, workers find themselves uncertain regarding policy updates, workload management, and delays in application processing as it relates to CABA. Additionally, communication with ITS is misaligned.



"CABA changes don't always align with policy changes of FSS."

## REPORTING

Workers across the organization desire greater reporting and monitoring tools in their day-to-day. From population health metrics to workload management, all workers are eager to have better access to quality data to support improved planning.



"We are likely touching clients in multiple programs, but we don't have a way of knowing that."

## OPERATIONAL FRICTION

HHS workers are committed to the organizational mission and share a similar mindset in enabling clients towards greater self-sufficiency. However, the approach in which workers seek to achieve this mission diverge across the organization, leading to operational friction. Collaboration and communication fluctuate between Divisions, Centers, and programs, while inadequate reporting features prevent enterprise-level decision-making and strategy.



"I had to ask a lot of questions. Reading manuals wasn't enough."



"IT makes changes and does not communicate to front line staff."



"We have to put policies and procedures together ourselves."



"I feel like a mobile employee. It feels like I'm just using an office."



"It's difficult to reasonably talk about or articulate if the resources are being used appropriately."



"I want to visit other centers to learn how they set up for services."

## LACK OF EFFICIENCY

Workers feel they are operating in 'silos' across HHS and desire stronger communication and additional training opportunities to understand the system and processes. Social Workers state their communication experience varies based on location.



"I have to protect our Caseworkers' time as much as possible."

## ACCOUNTABILITY CONCERNS

Lack of robust reporting tools has created a sense of anxiety and concern across Divisions, Community Centers, and program staff. Workers don't feel equipped to plan for or report on services and resources, and they can't count on CABA to do so either.



"It's difficult to reasonably talk about or articulate if the resources are being used appropriately."



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## CENTER OBSERVATIONS

	Jonestown	Pflugerville	Palm Square	Oak Hill	Manor	Post Road	Del Valle
<b>Check-In</b>	Computer & In-person	In-person	Computer	In-person	Computer	Computer	Computer
<b>Waitlist</b>	CABA & Excel workbook	Paper files with cabinet	Check-In system	CABA & paper files	Paper files with Worker	N/A	CABA
<b>Intake Process</b>	All apps entered in CABA	Only complete apps in CABA	Only complete apps in CABA	Only complete apps in CABA	Apps mostly complete in CABA	Only complete apps in CABA	Only complete apps in CABA
<b>Most frequent clients*</b>	Adults, Homeless & Seniors	Seniors & Families	Homeless & Families	Single over 50 & Families	Families	Homeless	Families & formerly incarcerated
<b>Application Approach**</b>	Supportive	Mixed	Transaction	Supportive	Transaction	Transaction	Mixed
<b>Workload Management</b>	OSS Assigns/ Rotate emergency cases	CW pulls as needed/ Rotate emergency cases	ES Rotate Assigns/ Rotate emergency cases	CW pulls as needed/ Rotate emergency cases	OSS assigns to Lead CW/ Rotate emergency cases	ES Assigns/ CM Assigns Emergency cases	OSS Assigns by Rotation
<b>Food Pantry</b>	Staff disperse	Volunteers disperse	Volunteers disperse	Clients supervised	Staff/ volunteers disperse	Volunteers disperse	Volunteers disperse

\*Based on staff assumptions through engagement with clients.

\*\*Majority of Caseworkers stated a desire to take a supportive case management approach to engage with clients; Center client demand has led to a more transactional approach in some locations

## IN MOTION - SYNTHESIS

Having generated major themes from the field research, in motion outcomes include actualizing findings to create tools to aid HHS in gaining a deeper understanding of the worker experience and technology needs to inform future state opportunities and improvement areas.



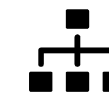
**Insights statements** help us to understand a system or situation based on evidence from real workers. We're able to empathetically determine workers' sentiments and challenges to develop real, actionable opportunities to improve a worker's experience.



**Worker journeys** help us to illustrate the processes, modes, and activities within the worker experience. They are intended to give insight into barriers faced by the workers within each process step to aid in developing design opportunities.



**Modes and Mindsets** help us understand the relationship between people and benefits in digital times. They translate the findings obtained during the field research phase to depict the potential behaviors and motivations of future workers.



**Business process maps** help us understand an organization's operations by capturing and visualizing key activities and decisions across targeted work streams. They also help identify existing pain points and challenges that inform the development of new strategies and recommendations for the future state.