

Pursuing Person-Centric Human Services Delivery: Insights from Clarence Carter, Director, District of Columbia Department of Human Services

Over the last six months, we've had an opportunity to speak with many public servants who are pursuing innovative approaches to achieving their missions and serving their citizens. In this edition of Insights, we focus on human service delivery and offer insights from Clarence Carter, Director of the District of Columbia Department of Human Services, on his efforts to put those in need at the center. Carter is a vocal proponent of person-centered human service delivery. It is about putting people first and foremost at every point in the planning, implementation, and evaluation of service delivery. This is an approach in which individuals are viewed as whole persons.

Would you give us an overview of the mission, history, and evolution of D.C.'s Department of Human Services?

— Clarence Carter —

The D.C. Department of Human Services has gone through a metamorphosis over the past 10 years. It actually was one of the old mega agencies, [one of the] human services agencies that used to comprise the Department of Youth and Rehabilitative Services. The Department of Human Services principally focuses on income support for economically and socially challenged people, homelessness, and those programs which support fragile populations. We now have a \$400 million annual operating budget and just a little short of 900 employees.

What do you see as the top challenges you face as director of D.C.'s Department of Human Services?

— Clarence Carter —

One challenge is managing multiple priorities. There are many different programs and initiatives the agency manages. [We're] also trying to change—fundamentally change—a system while continuing to administer it, and this is probably the biggest challenge. We're trying to set a very different trajectory for the programs and the initiatives, but we're not allowed to shut down and open up six months later. We have



to continue to provide benefits, goods, and services. Also, in this economic climate, staying in front of the homelessness issue has been a real challenge.

What are the key characteristics in your mind of an effective human services leader?

— Clarence Carter —

One is the ability to know a little about a lot. There are many different programs and initiatives we're currently working on. There are many different moving parts, and you have to keep those parts moving all at once. I think the ability to make the complex simple [is key] because many of these programs that we operate have pretty complex rules. Yet, the public needs to understand how they work. You really do need to be able to take complex programs and explain them and operate them in a simple way.

You have worked in the federal government, state government, and now in local government. Given your perspective, what's the main difference? To what extent does each level of government require a different style of leadership in order to be effective?

— Clarence Carter —

The one difference from the federal level to the state and local level is that at the federal level you don't administer programs. You really create policy and the rules. The real action happens at the state and local level. At the state and local level, you have to be much more of a hands-on administrator, somebody who is able to make the [system] operate, as opposed to thinking about a policy construct or a set of rules for how it would operate.

You are an outspoken advocate for reforming the way human services are delivered. You've pursued a first-person approach to human services delivery. What are the major problems with the way services are delivered today? Would you elaborate on this person-based, client-centric approach?

— Clarence Carter —

The problem that I am laying out is not only a District of Columbia problem. It is literally a problem that exists across the country. The construct of the existing human services system is one that is an aggregation of individual categorical programs that were all meant to address some aspect of the human condition. Whether it is public assistance, housing, healthcare, literacy, or nutrition supports, we've developed a program to address every aspect of the human condition. We think of them euphemistically as the social safety net. Quite frankly, it's very much a misnomer; [these programs] are not knitted together at all. It is an aggregation of individual programs that don't work together to provide a comprehensive approach to enhancing the human condition. These [program] silos are the first problem.

The second problem is that the system we administer is what we call program-centric. I will give you an example. I was the administrator of the food stamp program for the country, now known as the Supplemental Nutrition Assistance Program (SNAP). It is a principle nutrition safety net for the country. It is about ensuring that there is economic assistance for low-income individuals and families so they do not starve. The three [elements] we measure for the effectiveness of the food stamp program are: did we get the benefit to the individual or family who was entitled to receive it; did we get it to them in the amount that they were entitled to receive; and did we get it to them on time? Now, you

will notice that I didn't say anything about whether or not anybody was hungry. We measure the effectiveness based on goals which are only related to the program. I argue that we should [first] be focusing on human well-being, and not what's important in the program.

The third problem in the existing construct is that the system was not built around an exit strategy. It was built really around a maintenance strategy. As long as you meet the criterion to receive a particular benefit, good, or service, and there are resources to provide that service, you will receive it. My argument is that our system should focus on trying to move as many people through the system as quickly as possible. We don't want the members of our society to be in a position where they have to come to government for their basic subsistence. It's a construct that's not about growing human capacity, but is about administering an aggregation of programs that really maintain human dysfunction.

In a person-first or person-centric system, we should understand the [present] circumstances of an individual or a family, and bring together a set of benefits, goods, and services that are dedicated to growing that individual or family beyond the need for public assistance. Quite frankly, our effectiveness should be judged on the degree to which we accomplish those objectives, on the degree to which we enhance the human condition, and not simply on providing units of service for people who are in need. It is a fundamentally different construct. We think if we focus on the individual, and grow the capacity of that individual to be as self-sufficient as possible, we can strengthen not only that individual or that family, but our society as well.

Welfare reform of the 1990s introduced a new model of reciprocal obligations and time limits for benefits eligibility, which was a departure from the classic entitlement model. Should the Temporary Assistance for Needy Families, or TANF, type of model be adopted more broadly for programs like SNAP?

— Clarence Carter —

I absolutely think that what we attempted to accomplish with the design of the Temporary Assistance for Needy Families program needs to expand to the rest of human services. We get uncomfortable when we talk about time limits, but from my perspective, time limits allow us to have a sense of urgency. It is a very important tenet of what the social safety net should look like. The other thing that's most important is the notion of mutual responsibility. We cannot as a society make anyone walk their life's journey. We have to create the enabling conditions, but the members of society who need

this help have to meet society halfway. We need a construct based on mutual responsibility.

The District is looking to redesign the work, training, and education portions of TANF. Would you elaborate on this effort? What are the key design elements for this prospective new program?

— Clarence Carter —

The tenets of welfare reform, when it was designed and enacted some 13 years ago, were to require work for benefits, and to make the issuing of benefits time-limited, to

provide a 60-month lifetime cap on those benefits. The District did not want to have its vulnerable families fall off that 60-month cliff, so it created a local program that made those time limits have no impact. In the zeal to be compassionate, a system was created that provided no incentive to move through the [system]. Many of our TANF families just continue to receive benefits.

Our redesign efforts are about trying to move families through the [system]. The first thing that we will do in our redesign is to do an intensive assessment of the families, to understand their strengths and challenges. Then, we will

Department of Human Services



Mission

The Department of Human Services (DHS) coordinates and provides a range of services that collectively create the enabling conditions for economic and socially challenged residents of the District of Columbia to enhance their quality of life and achieve greater degrees of self-sufficiency.

Income Maintenance Administration (IMA)

IMA determines eligibility for benefits under the Temporary Cash Assistance for Needy Families (TANF), Medical Assistance, Supplemental Nutrition Assistance Program (SNAP) (formerly Food Stamps), Child Care Subsidy, Burial Assistance, Emergency Rental Assistance, Interim Disability Assistance, and Refugee Cash Assistance programs. In addition, IMA's Food Stamp Employment and Training Program (FSET) provides employment and training services to able-bodied adults without dependents who receive food stamps. IMA also performs monitoring, quality control, and reporting functions required by federal law and court orders.

Family Services Administration (FSA)

FSA provides protection, intervention, and social services to meet the needs of vulnerable adults and families to help reduce risk and promote self-sufficiency.

FSA administers the following social service programs and grants:



Adult Protective Services, American Recovery and Reinvestment Act—Stimulus Funds



Community Services Block Grant, D.C. Fatherhood Initiative, Emergency Shelter



Family Violence Prevention Service Grants, Homelessness Prevention and Rapid Re-housing Program, Homeless Services, Hypothermia Program, Office of Refugee Resettlement



Permanent Supportive Housing Program, Shelter Monitoring and Quality Assurance



Social Services Block Grant, Strong Families, Teen Parent Assessment Project



Temporary Shelter, Transitional Shelter, and Veterans Administration Supportive Housing Program

build an individual service plan. It's about moving that family beyond. We enter into mutual agreement with that family to move them into a [better, more self-sufficient condition] using the TANF support. Our assessment and individual service plan are a key component. Through this assessment, we will be able to assign the eligible individuals to an appropriate work or training program that meets what's important to them. This shouldn't be just about getting someone into a dead-end or no-value job. It should be about building someone's skill sets and getting them into a job opportunity that can help them grow. By having the tailored assessment, by having an individual service plan, by moving them to training and to job opportunities specifically tailored to them, we believe that we will be able to move families through an episode into greater degrees of self-sufficiency.

The most important component of moving people to self-sufficiency is intentionality. With [self-sufficiency] being your objective, you will then figure out how to achieve that objective. And quite frankly, it's been my argument that this really hasn't been the intention of the system. If we can agree that it is our intention to move that individual or family beyond, that will allow us to figure out how to reconfigure our system, test our system, and measure our system on achieving that objective.

According to the National Coalition for Homeless Veterans, veterans returning from active duty often face an array of problems during transition from military to civilian life, which places them at risk of homelessness. Would you elaborate on the programs in place to assist homeless veterans in the District and how you work with the U.S. Department of Veterans Affairs?

— Clarence Carter —

This is another one of the signature successes of the District's Homeless Services initiative. We were approached by D.C.'s Veterans Administration Medical Center (VAMC) a little over a year ago. They understood that we had real success in our permanent supportive housing and identifying our homeless population. They asked us to turn over the homeless veterans we had identified, so they could provide them with VA services.

In response, we asked for their assistance in housing our homeless veterans. We agreed to partner [with VA], and to take the veterans we identified and move them through our Permanent Supportive Housing Initiative. We created the first agreement of its kind in the U.S., between the VA and the District government, to house 105 veterans. We are looking to enhance that partnership with the VA. In fact, the Senate



U.S. Secretary of Veterans Affairs Eric Shinseki greets volunteer Victor Metta (R) during the Winterhaven Homeless Veterans Stand Down at the VA Medical Center in Washington, D.C., January 23, 2010. The annual event brings together community agencies to provide services such as health screenings, housing and employment counseling, and psychosocial services to eligible homeless veterans.

Appropriations Committee came to visit this spring to look at how this was working. In a recently released report, the committee highlighted the initiative between the District and the VA as a significant best practice for how to address the issue of veteran homelessness. We've had some real success, and we're looking forward to solidifying this partnership and actually helping other jurisdictions create similar partnerships to address veteran homelessness.

What have been the effects of the current economic downturn on your programs and clients? How are you dealing with higher applications and increasing caseloads while facing significant budget reductions?

— Clarence Carter —

We've seen a 51 percent increase in homeless families over the course of the last 18 months. We've also had about an 8 percent increase in our Temporary Assistance for Needy Families caseload, about a 20 percent increase in our food stamp case load, and about a 13 percent increase in our Medicaid caseload. All across the board there has been a significant increase in applications. It has been a real challenge in a very resource-constrained time. We've done some pretty creative things. When I began, we had seven service centers. We were spending about \$30 million annually in bricks and mortar. Quite frankly, a building never fed anybody, so we've reconfigured our service center mix,

getting out of leases, [and focusing on] not reducing our programs and services. Over the last three years, we've had to reduce our budget. There has been a significant increase in utilization of these programs over the course of this period of time. For the most part, we were able to be creative and put the resources into serving people—without impacting our programs.

To what extent have any of the programs in your portfolio leveraged American Recovery and Reinvestment Act (ARRA) funds? How are you tracking and reporting on some of the transparency and accountability requirements associated with that money?

— Clarence Carter —

The Homelessness Prevention and Rapid Re-Housing Program (HPRP) received \$7.5 million available to the District that allowed us to divert some families and individuals from homelessness and help house some people. In addition to HPRP, there was an augment to the Temporary Assistance for Needy Families Program. Our annual TANF grants are about \$92 million. We were able to earn an additional \$46 million through the Recovery Act. We think that by the end of this year we will have drawn down a full \$46 million that would not have been available to us without the Recovery Act.

The mayor has created a centralized reporting process for all ARRA expenditures, so we are required to report every dime we expend. The District aggressively reports each dollar spent and what was done with those dollars.

How do you see technology as being able to enhance the service delivery and to improve client outcomes and help move people to self-sufficiency more effectively?

— Clarence Carter —

Because of the construct of our existing system—the aggregation of individual programs and agencies—it is not easy to pull all of [our resources] together. Technology actually allows us to do that. The evolution of technology, through things like middleware, has allowed us to connect to systems so that instead of us ripping and replacing numbers of systems, we can link them together. I can find a customer among all of those systems simply by linking them together. It's a huge benefit to us.



What are some of the major opportunities and challenges you see your agency facing in the future? How do you envision it addressing those challenges?

— Clarence Carter —

I think the major challenge is twofold. It is first convincing the policymakers that the construct of our system of human services is broken. It does not serve socially and economically challenged people in the best way possible; the construct must change. The second difficulty is reconstructing a system that does so. Those are the two biggest challenges facing us today. There is a sense that our human services system fails because there's not enough money or because there's not enough will. I think we don't achieve objectives because we have a failed construct. I think the greatest challenge is explaining that and getting the groundswell that would allow for the massive change that has to take place. ■

To learn more about the District of Columbia Department of Human Services, go to www.dhs.dc.gov/dhs/site/default.asp



To hear *The Business of Government Hour's* interview with Clarence Carter, go to the Center's website at www.businessofgovernment.org.



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