

## DHS Strategic Plan

**TREND: Public Awareness**

**Trend Statement: Complexity of Department requires ongoing communication with stakeholders**

**Strategic Initiative: Communication and Public Relations**

**Goal Statement: The Department of Human Services will educate various audiences and gather stakeholder input on the Department's efforts and desired outcomes.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Schedule statewide DHS Employee meetings for communication of strategic plan.	DHS Cabinet	Annual		Annual employee meetings summarized and utilized for department planning.
Convene regional stakeholder meetings each biennium prior to budget planning	DHS Cabinet	Fall/Winter 2007/08		Stakeholder meeting input documented and placed on DHS website.
Distribute news releases to stakeholders and the media.	Heather S.			
Develop system to inform staff of high level department achievements.	Heather S.			
Prepare Biennial Report	Heather S.			
Fact sheets for programs	Heather S			
Develop and disseminate program and policy fact sheet.	JoAnne	12/06		A program and policy fact sheet is developed and distributed at least twice a year.
CFS will hold a minimum of three CFSRs, which include case reviews, stakeholder meetings, and a post-CFSR on stakeholder comments.	Paul R.	Ongoing		<ul style="list-style-type: none"> <li>- A final report of the CFSR is completed within 30 days of the review.</li> <li>- A followup Post-CFSR is held within 90 days.</li> <li>- A plan to address stakeholder</li> </ul>

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
				comments is completed within 30 days.
As necessary, the Legal Advisory Unit will participate in training stakeholders on new Department initiatives.	Melissa H.			
Legal Advisory Unit will hold focus-group meetings with stakeholders before beginning the formal rulemaking process in order to negotiate rulemaking as appropriate.	Melissa H.			
Child Support to collect information of large collections and provide the information to all child support staff, all clerks of court, the Governor's office, and select legislators by sending "Big Bucks" emails. Continue to include the impact on families and the state.	Mike S.	On-going	N/A	<b>Outcome:</b> Keep key partner/stakeholders informed. <b>Documentation:</b> Keep e-copies of all "Big Bucks" emails

Person(s) Responsible

: Tove Mandigo

Date: \_\_\_\_\_

**TREND: Human Resource Development**

**Trend Statement: A more competitive, external environment is requiring a flexible, dynamic, competent Department work force.**

**Strategic Initiative: Human Resource Development**

**Goal Statement: To ensure that the Department of Human Services is prepared for external influences and retirements.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Succession Planning	Dean Mattern	December 2007		Succession plan document
Specialized Training needs	Dean Mattern	July 2007	\$10,000	Department wide management training program.
Competitive Salary and Benefits	Dean Mattern	On going		<ol style="list-style-type: none"> <li>1. Monitor current environment.</li> <li>2. Research as requested.</li> <li>3. Develop policy &amp; incentives to facilitate recruitment &amp; retention.</li> </ol>
Analysis of Staffing levels	Dean Mattern	As requested		Study document and recommendations.
Develop a proposal for clinical laddering to improve retention	HSC Directors	October 2007		Proposal submitted to HR and DHS Cabinet
Design a leadership development program to strengthen departmental succession planning	Nancy M.	July 2007		Program designed and approved by DHS Cabinet
Develop departmental plan to assure staff and services demonstrate cultural competency	DHS Cabinet			Program designed and approved by DHS Cabinet for implementation

Person(s) Responsible: Brenda Weisz

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement:** Public, Lawmakers, and other funders expect a demonstrated return on investment creating a need for increased data and reporting.

**Strategic Initiative:** Self Sufficiency for Clients

**Goal Statement:** The Department of Human Services will ensure formal continuous quality improvement initiatives.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Technical Assistance requested and received from CSAT. Dept work group implemented and data linking plan developed and implemented. Use data linking technology with internal databases.	Mariah Tenamoc		To be determined	Utilize Data linking technology for outcome reporting.
HSCs implement accountable care direct time targets to enhance service capacity	Nancy M./HSC Directors			
CFS will work with the University of Chicago to analyze child welfare data trends.	Paul			CFS uses longitudinal child welfare data to measure and report on trends.
CFS will provide input regarding the development of a comprehensive child welfare data system.	Paul	September 1, 2006_		CFS has developed an analysis based on the cabinet's recommendation.
CFS will monitor North Dakota's performance against national child welfare standards.	Paul	Annually		CFS has analyzed compliance with National Standards on CFSRs, AFCARS, NCANDS and IV-E.

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement:** Public, lawmakers, and other funders expect a demonstrated return on investment creating a need for increased data and reporting.

**Strategic Initiative: Self Sufficiency for Clients**

**Goal Statement:** The Department of Human Services will increase the implementation of evidence-based practices

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Provide staff training in Matrix Model	Don Wright.	April-August 2006	\$30,000	Initial MATRIX training held 4/27 & 4/28
Implement Matrix treatment in each HSC	Nancy M.	July – December 2006		HSC programs include at least one Matrix treatment group in each HSC. 6 of 8 implemented by 10/2006.
Provide staff training in Recovery Model	Lauren Sauer	May 2006 and ongoing		Mental Health Clinical Forum planned May 16 – 18 with theme of MI recovery. Training teams meet with each extended care at each HSC
CFS will continue to explore training needs of therapists around evidence-based trauma treatment.	Paul	July 1, 2008		Therapists in the HSCs utilize trauma focused cognitive behavioral therapy with child welfare clients.
CFS will continue to analyze and explore child welfare evidence-based practices, for applicability to child welfare programs in North Dakota.	Paul	Annually		Evidence-based practices for child welfare have been identified and catalogued.
Integrated Dual Disorder Treatment (IDDT) pilot at SEHSC implemented, outcomes collected, considered for further implementation	JoAnne Hoesel Jeff Stenseth Mariah T.	7-2007	\$50,000	IDDT training in Ohio in May SEHSC implements IDDT 2006 Research Team develops and tracks outcomes and produces reports.

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement: Public, Lawmakers, and other funders expect a demonstrated return on investment creating a need for increased data and reporting.**

**Strategic Initiative: Self Sufficiency for Clients**

**Goal Statement: The Department of Human Services will increase its research capacity.**

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Organize DHS research team for improved effectiveness across department programs	JoAnne H.			
Develop data-linking technology to enhance program research	JoAnne H.			
Technical Assistance requested and received from CSAT. Dept work group implemented and data linking plan developed and implemented. Use data linking technology with internal databases.	Mariah Tenamoc	Through 06/07	To Be Determined	Utilize master patient index and data linking technology for research efforts.

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement:** Public, lawmakers, and other funders expect a demonstrated return on investment creating a need for increased data and reporting

**Strategic Initiative:** Self Sufficiency for Clients

**Goal Statement:** The Department of Human Services will see an increase in work participation rates in TANF.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Implement "Diversion Assistance" for qualified households.	TANF program staff	Applications received after August 1, 2006	Existing (Approximately \$300,000 budgeted for system maintenance will be used to accomplish necessary system programming)	Increase work participation rate by 10% or more
Relieve Kinship Caregivers from TANF assistance requirements by transferring necessary TANF funding to Social Service Block Grant, and using SSBG to fund Kinship Care.	TANF program staff	October 1, 2007	Existing	Improves work participation rate by removing Kinship Care cases from the rate calculation.
Develop measurement of number of TANF households who discontinue receiving benefits and do not return to the program for a specified period.	TANF Program staff	July 1, 2006	Existing	Provides a measurement of achievement of self-sufficiency superior to the work participation rate.

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Use Findet to measure quarterly earnings of former TANF recipients for specified time after leaving TANF.	TANF program staff	Quarterly after leaving TANF	Existing	Provides a measurement of achievement of self-sufficiency superior to the work participation rate.
Use former TANF high performance bonus methodology to measure quarterly use of Child Care Assistance by former TANF recipients for specified time after leaving TANF	TANF program staff	Quarterly after leaving TANF	Existing	Provides a measurement of achievement of self-sufficiency superior to the work participation rate.
Collaborate in development of statewide TANF projects with county and Job Service staff	HSC Directors	June 2007		HSC staff from 8 regions will participate in TANF projects

Person(s) Responsible: Tove Mandigo

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement:** Public, lawmakers and other funders expect a demonstrated return on investment creating a need for increased data and reporting.

**Strategic Initiative: Self Sufficiency for Clients**

**Goal Statement:** The Department of Human Services will increase the overall collections of child support.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Enter into agreements with the counties for the centralization of services in the areas of asset seizure and outgoing interstate. Support the implementation of the centralization.	Mike S.	07/01/06	Improvement account	<p><b>Outcome:</b> Asset seizure project – Increased collection of arrears and increased efficiency. Outgoing interstate project – Increased efficiency.</p> <p>Increased collection of arrears will assist us in reaching the program goal of increasing our performance on the arrears collection federal performance measure by 2% each year.</p> <p>Increased efficiency will assist us in reaching the program goal of increasing out performance on the cost effectiveness federal performance measure by 50 cents each year.</p> <p><b>Documentation:</b> OCSE-157 statistics will be used.</p>
Identify, in cooperation with the counties, additional areas for the specialization or centralization of services.	Mike S.	01/01/07	Improvement account	<p><b>Outcome and Documentation:</b> TBD – Depends on which areas are identified.</p>

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
In accordance with the Deficit Reduction Act of 2005, expand the use of the federal income tax refund intercept program to collect past-due child support on behalf of children who are not minors.	Mike S.	10/01/07	Programming costs for FACSES	<b>Outcome:</b> Increase in collection of arrears. This will assist us in reaching the program goal of increasing our performance on the arrears collection federal performance measure by 2% each year. <b>Documentation:</b> OCSE-157 statistics will be used.
In accordance with the Deficit Reduction act of 2005, submit noncustodial parents who owe over \$2,500 (decreased from \$5,000) for the passport denial program.	Mike S.	10/01/06	\$0 cost	<b>Outcome:</b> Increased collection of arrears. This will assist us in reaching the program goal of increasing our performance on the arrears collection federal performance measure by 2% each year. (Based on federal estimates, ND expects about 1,650 additional noncustodial parents will meet the threshold. Unknown how many of these will apply for passports.) <b>Documentation:</b> OCSE-157 statistics will be used.
When available through the Federal Parent Locator Service (FPLS), opt to receive information on matches conducted at the federal level (in accordance with the Federal Parent Locator Service), with insurers concerning insurance claims, settlement, awards and payments.	Mike S.	Upon availability	Unknown	<b>Outcome:</b> Increased collection of arrears. This will assist us in reaching the program goal of increasing our performance on the arrears collection federal performance measure by 2% each year. <b>Documentation:</b> OCSE-157 statistics will be used.

Person(s) Responsible: Tove Mandigo

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement:** Public, lawmakers and other funders expect a demonstrated return on investment creating a need for increased data and reporting.

**Strategic Initiative: Self Sufficiency for Clients**

**Goal Statement:** The DHS will increase the collection of medical support for children in the child support program.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Perform clean-up of medical support on FACSES and, after clean-up, consider whether the National Medical Support Notice should be issued (retroactively).	Mike S.	TBD	Unknown	<p><b>Outcome:</b> There will soon be a medical support federal performance measure. This action step will assist us in ensuring positive, accurate reporting under that measure. We plan to look to the program's performance on this measure, when implemented, to determine outcomes and goals.</p> <p><b>Documentation:</b> OCSE-175 statistics will be used.</p>
Identify and implement remedies to promote parental responsibility in the area of providing medical support, in any form ordered. Remedies include continued insurance matching with the Public Consulting Group (PCG); considering changes to the child support guidelines during the 2006 review to address situations in which noncustodial parent is not providing health insurance coverage; and collection, through judgment, of unreimbursed medical expenses.	Mike S.	TBD	Unknown	<p><b>Outcome:</b> There will soon be a medical support federal performance measure. This action step will assist us improving performance in the medical support area. We plan to look to the program's performance on this measure, when implemented, to determine outcomes and goals.</p> <p><b>Documentation:</b> OCSE-157 statistics will be used.</p>

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Implement the Deficit Reduction Act of 2005 medical support provisions which include establishing a medical support provision against either parent and, at state option, enforcing the medical support provision enforcing the medical support against custodial parents (in addition to noncustodial parents).	Mike S.	TBD	Unknown	<p><b>Outcome:</b> There will soon be a medical support federal performance measure. This action step will assist us improving performance in the medical support area. We plan to look to the program's performance on this measure, when implemented, to determine outcomes and goals.</p> <p><b>Documentation:</b> OCSE-157 statistics will be used.</p>

Person(s) Responsible: Tove Mandigo

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement: Public, lawmakers, and other funders expect a demonstrated return on investment creating a need for increased data and reporting.**

**Strategic Initiative: Efficiency in day to day operations**

**Goal Statement: Each division and department within the Department of Human Services needs to develop plans and procedures to streamline paper work and process.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
DHS and County SS to improve efficiency of SPOC/CCWIPS documentation	Nancy M. & task force	December 2006	Potential IS costs	Decreased time demands for required documentation. Work group completed with modified requirements; budget request includes front-end system.
Identify documentation and scheduling efficiencies in ROAP	Nancy M. & ROAP team	Ongoing		Decreased time demands for required documentation. AOD work group addressing documentation; electronic scheduling package purchased fall 2006.

Person(s) Responsible: Nancy McKenzie

Date: \_\_\_\_\_

**TREND: Accountability for Results**

**Trend Statement: Public, Lawmakers, and other funders expect a demonstrated return on investment creating a need for increased data and reporting.**

**Strategic Initiative: Modernize the Medicaid Program**

**Goal Statement: Modify Medicaid program to meet the needs of the changing recipient population within expected funding reductions**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Prioritize primary service coverage areas	Maggie A.	2009		Initial meeting held in September 2006. Quarterly meetings will be held.
Amend state Medicaid plan to include rehab option	Maggie A.	January 2007		PRTF SPA was approved 7-1-2006; Continued discussion with RCCFs, PATH, HSC to facilitate transition.
Analyze potential additional changes to state plan, to enhance funding for the service continuum	Maggie A.	2009		Initial meeting held September 2006. Quarterly meetings will be held.
Legal Advisory Unit will continue to participate in the Deficit Reduction Act workgroup and draft bills or rules as necessary to ensure efficient implementation of the Act.	Melissa H.	For 2007 Session		Bills have been drafted for State False Claims Act, TPL changes, LTC Insurance changes, and Annuity changes.

Person(s) Responsible: Maggie Anderson

Date: Last updated 11-1-06

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: Treatment Services**

**Goal Statement: Department of Human Services to increase service capacity for drug and alcohol services**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Advocate for recommended changes to ND Board of Addiction Counselor Examiners	Carol Olson JoAnne H. Nancy M.	April 2006		
Identify DHS staff to pursue LAC training/licensure	Dean Mattern	December 2006		List of staff interested in pursuing LAC training.
Develop training proposal for departmental development of LACs	Dean Mattern	2007-09 budget proposal	\$50,000	10 students committed to LAC training.
Optional Adjustment Request for residential treatment services for person dependent upon substances.	JoAnne H. Nancy M.	07-09 budget proposal	\$750,000	New treatment option available for state citizens needing residential level of care.

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: Treatment Services**

**Goal Statement: DHS will assess statewide need for provision of in-home treatment**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
In response to stakeholder comments, CFS will increase the provision of Intensive In-Home services by developing an OAR for services for reunification, and prevention of removal, of children and families.	Paul R.	July 1, 2006		OAR is developed to increase capacity for Intensive In-Home services.
CFS and Medical Services will explore writing a national grant to address services to prevent residential placements and the service needs.	Paul R.	December 2006		Pursued grant funding to increase community-based services for children.
CFS will assess post-placement service needs of kinship and adoptive parents.	Paul R.	July 2007		Post-placement needs have been assessed.
CFS will assess the needs and resources required for providing a mentoring program for foster parents to mentor biological parents.	Paul R.	July 2007		A white paper is developed which outlines the key elements of a mentoring program.
CFS will assist in writing a national "Healthy Families" grant within the State of North Dakota.	Paul R.	July 1, 2006		A grant proposal is submitted.

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Service System Capacity**

**Trend Statement:** Increased community needs and institutional occupancy

**Strategic Initiative:** Treatment Services

**Goal Statement:** Determine the appropriate ratios of DD and SMI case managers to clients of the DHS.

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Research current statewide caseloads and requirements	Nancy McKenzie	September 2006		Report to DHS Cabinet regarding HSC caseloads/definition. Monitor ongoing via HSC Director reviews and Division reporting.
Identify potential resource needs/shifts	Nancy McKenzie	December 2006		HSC Directors identify options to improve case management coverage. Reviewed by HSC Directors as positions vacate/change. OAR's added to '07-09 budget proposal.

Person(s) Responsible: Nancy McKenzie

Date: \_\_\_\_\_

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: Treatment Services**

**Goal Statement: The Department of Human Services to develop and implement strategies for the recruitment and retention of medical providers, including psychiatrists, nurse practitioners, and clinical nurse specialists.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Determine optimal staffing levels for institutions and community	Alex S. Nancy M.			
Identify any needed changes to job roles, compensation, etc. based on market	Dean Mattern	As needed		Provide research on issues related to recruitment and retention.
Identify potential models of service delivery (shared staff, telemedicine, etc.)	Nancy M. /HSC Directors	September 2007		Define any pilot projects in new methods of service delivery.

Person(s) Responsible: Brenda Weisz

Date: \_\_\_\_\_

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: Treatment Services**

**Goal Statement: The Department of Human Services to develop and implement strategies for the recruitment and retention of psychologists.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Determine optimal staffing level for institutions and community	Alex S. Nancy M.			
Identify any needed changes to job roles, compensation, etc. based on market	Dean Mattern	As needed		Provide research on issues related to recruitment and retention as it relates to market conditions.
Further develop DHS programs as approved psychology residence sites (APA, APPIC)	Nancy M./HSC Directors	Ongoing		Develop additional psychology residency programs to enhance recruitment
Determine potential new models of service delivery (shared staff, telemedicine, etc.)	Nancy M./HSC Directors	September 2007		Define any pilot projects in new methods of service delivery

Person(s) Responsible: Brenda Weisz

Date: \_\_\_\_\_

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional capacity**

**Strategic Initiative: Treatment Services**

**Goal Statement: Determine the Department of Human Services role in outpatient sex offender treatment services**

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Issue RFP for community treatment of high-risk sex offenders	JoAnne H.			
Develop staff training plan to meet specialized service needs including both offenders and victims.	Alex S. Nancy M. JoAnne H.			
Legal Advisory Unit will provide research and will draft bills, as necessary, to assist in managing these services.	Melissa H.			

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Service System Capacity****Trend Statement: Increased community needs and institutional capacity****Strategic Initiative: Treatment Services****Goal Statement: Manage the growth of inpatient sex offender treatment services at the State Hospital**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Expand to a third sex offender ward in the GM Building by 7/1/06.	Alex S. and Kerry W.	4/1/06 – 6/30/07		Third unit opened on 8/21/06.
Implement safety, security, risk assessment, and program changes as recommended by FMEA and Root Cause Analysis.	Alex S. and Kerry W.	7/1/06 – 7/1/07	\$1,669,883 – (architect estimate)	Approval received from OMB, Governor’s Office and DHS Executive Director to proceed with bids for security/safety upgrades.
Report to interim committee and legislature on recommendations to manage growth of the inpatient program.	Alex S.	5/31/06 – 4/30/07		Reported to interim BCHS on 5/31/06
CFS will proceed with the RFP process to fund an adolescent sex offender residential treatment program in the state	Paul R.	October 2006		The successful applicant is serving adolescent sex offenders in a residential treatment program in an in-state treatment facility.
Legal Advisory Unit will provide research and will draft bills, as necessary, to assist in managing these services.	Melissa H.			The Governor’s office is drafting legislation for changes to the civil commitment program.

Person(s) Responsible: Alex C. SchweitzerDate: Last updated 12/6/06.

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: DOCR and DHS Collaboration**

**Goal Statement: The Department of Human Services to determine which services will be provided to the criminal justice system.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Meet with the DOCR representatives to update plan for provision of services for the Tompkins Program and the JRCC from State Hospital staff, programs and services.	Alex S. and Ken S.	4/1/06 – 7/1/06		Budget request for TRCC and JRCC developed for 07-09.
Support development of regional drug courts through interagency collaboration	Nancy M. /HSC Directors	July '07- June '09		Implementation of drug court treatment services expanded; OAR included in budget proposal.
Prepare specific budget for 07-09 to reflect stated need from DOCR and data from DHS indicating involvement in correction system. Meet with DOCR for ongoing discussion involving target numbers.	JoAnne H., Alex S., Nancy M.			AOD & Mental Health services to community Probation & Parole clients are provided as possible; OAR completed for budget proposal based on DOCR service request.
Convene DHS/DOCR work group for service planning/problem-solving.	Nancy M. Alex S., JoAnne H.	December 2006 – ongoing		Establish prioritization of services; define responsible providers, screening mechanisms and referral protocol

Person(s) Responsible: Alex Schweitzer, Nancy McKenzie, JoAnne Hoesel

Date: Last Updated 12/6/06.

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: Housing and Residential – DD**

**Goal Statement: The transition of appropriate DD individuals from the Developmental Center to the community.**

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
See attached transition task force report and recommended action steps.	Alex S. Yvonne S. and DC task force	2005 - 2011		1. Report to the interim BCHS on 5/31/06 – endorsed plan. 2. Developed community transition budget request for 07-09. (OAR)

Person(s) Responsible: Alex Schweitzer

Date: Last Updated – 12/6/06

**Report to the Interim Budget Committee on Human Services**  
**House Bill 1012 – Section 16 – Plan to Transfer Appropriate Developmental Center**  
**Residents to Communities – Report to the Legislative Council**  
**May 31<sup>st</sup>, 2006**

Summary:

The Department of Human Services convened a task force of stakeholders in 2005 to prepare a plan in response to the mandate from House Bill 1012 – Section 16, to transfer appropriate Developmental Center residents to communities. The Superintendent of the Developmental Center chairs the task force and task force members include Department of Human Services staff, providers, advocates and a family member.

The current developmental disabilities population at the two institutions is 137 individuals, with 131 individuals residing at the Developmental Center and 6 at the State Hospital. In order to effectively transition these individuals to the community we need to build community capacity. These resources need to be in place to meet the current and projected needs of individuals in the community. The following are the recommended action steps developed by the Developmental Center Transition Task Force to accomplish the task of transitioning people to the community.

Recommended Action Steps:

- 1) Every individual with developmental disabilities residing at the Developmental Center and State Hospital will have a placement plan developed in order to place them in an **appropriate** community placement.
- 2) To accomplish this goal there is a need for community capacity building with the following elements in place;
  - a) A statewide crisis prevention and response system that is based on a “zero reject” model.
  - b) Increased need for crisis intervention services, to include;
    - Crisis Beds.
    - Out-of-Home Crisis Residential Services.
    - In-Home Technical Assistance.
    - Follow-Along Services after Out-of-Home Crisis Residential Services placement.

**Page Two: Transition to Community Plan**

- Training for community professional and direct care staff.
- c) Increase capability and capacity for the community to serve the young adults with developmental disabilities who are aging out of settings such as residential treatment centers, foster homes, the Anne Carlsen Center, and the juvenile justice system. As evidenced by the fact that 40% of the admissions to the Developmental Center in the past three years have been age 25 and under, a number of these young people present challenges that exceed the community's ability to serve.
- d) Increased need for consultation;
- Behavioral plan consultation and oversight
  - Consultation for individuals with sexual health issues.
  - Psychiatric and psychological consultation and services.
- 3) Changes in funding and staffing, to include;
- a) Review and amend where appropriate administrative rules that are a disincentive for Independent Supported Living Arrangement placements.
- b) Increase funding for ISLA placements, including increased administrative reimbursement for existing and new ISLA placements.
- c) Recruitment and retention of staff, particularly for direct service staff positions, since it is difficult to compete with other service industries as well as the retail sector.
- Salary funding increases to get ahead of turnover.
  - Funding for appropriate staff enhancements to serve increased medical and behavioral needs.
- 4) The transition goal for July 1, 2007 is for a maximum population of 127 individuals residing at the Center.
- Use the residential decision profile for determining who would be appropriate for community placement.

### Page Three: Transition to Community Plan

- Utilize the statewide referral system and Developmental Center crisis response team to assure management of individuals in community settings.
- 5) The transition goal for July 1, 2009 is for a maximum population of 97 individuals residing at the Center.
  - 6) The transition goal for July 1, 2011 is for a maximum of 67 individuals residing at the Center.
  - 7) Develop a transition budget as an OAR for inclusion in the Department of Human Services 07 - 09-budget request, to cover the costs of transitioning people from the Developmental Center to the community and for enhanced community supports.
  - 8) Determine the long-term future of the Developmental Center service system including clinical, healthcare, and residential/vocational components.

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional capacity**

**Strategic Initiative: Housing and Residential – Foster Homes**

**Goal Statement: DHS will expand the number of foster homes in ND**

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
CFS will expand the number of foster homes by decreasing the need for foster care through relative search and Family Group Decision Making.	Paul R.	Dec 2006		The number of children going into Kinship Care is increased, thus reducing the number of children in family foster care.
Explore establishment of Memorandums of Agreements with border states to increase capacity for relative placement options	Paul R.	July 2007		The number of children placed with relatives in border states is increased, thus reducing the number of children in family foster care.

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: Housing and Residential programming and services for chronic adult populations.**

**Goal Statement: Develop a plan to provide services and housing for individuals with mental illness or chemical dependency needing structured living either in the community or at the State Hospital.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Develop two (2) residential facilities in the community for State Hospital patients	Alex Schweitzer	2/02 – 8/06		Contract negotiations with Progress to open a 15-bed facility in Jamestown by 5-1-07. Open Door in Valley City expanded by 6 beds fall 2006.
Develop a nursing facility unit for low/moderate sex offenders on the campus of the State Hospital	Alex Schweitzer	07 – 09 budget		Review with SH, LTCA and Aging Services indicates no need for special unit at this time – Action step completed.
Identify need for other residential services (crisis beds, etc.) in each region	Nancy M. /HSC Directors	07-09 budget		Budget proposal reflects additional residential needs through OARs.
Transition individuals with mental illness from other facilities to basic care facilities as appropriate.	Alex Schweitzer			One assisted living facility identified as wanting to license as basic care and provide these services. (Tuftes Manor in GF).
Pilot (2) residential programs as partnership with Long-Term Care and Human Service Centers.	Nancy M.			OAR submitted in budget proposal.

Person(s) Responsible: Alex Schweitzer, Nancy McKenzie, and JoAnne Hoesel

Date: Last updated 12/6/06

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional occupancy**

**Strategic Initiative: Service Delivery for Long Term Care Continuum**

**Goal Statement: The Department of Human Services develop a plan to balance long term care services.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Shelly Peterson to locate nursing facilities willing to serve ventilator dependent patients and provide this information to Maggie Anderson	Maggie Anderson	2/06-4/06		Continue to work with NDLTCA when issues occur. In discussion with Carol, decided it would be the role of NDLTCA to come forward to legislature if funding changes were needed.
Apply for grant opportunities to implement recommendations of the Real Choice Systems Change grant.	Maggie Anderson	4/06 – 4/07	May be matching funds	<p>Improved access and choice of continuum of care services for older individuals and people with disabilities.</p> <p>11-1-06 Submitted application for MFP Demonstration.</p> <p>10-2006 Submitted application for Medicaid Transformation Grant – Two of the areas for which funding has been requested include:</p> <ul style="list-style-type: none"> <li>• Beyond Our Doors</li> <li>• Telemonitoring</li> </ul> <p>6-15-06 Submitted application for RCSC Grant in September 2006. We were notified that we were not funded.</p>

Person(s) Responsible: Maggie Anderson

Date: Last updated 11-1-06

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional capacity**

**Strategic Initiative: Service Delivery for Long Term Care Continuum**

**Goal Statement: The Department of Human Services to develop a plan leading toward compliance with the Olmstead Decision**

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Legal Advisory Unit will continue to participate in the Olmstead Plan workgroup and draft the plan.	Melissa H.			

Person(s) Responsible: Tove Mandigo

Date: \_\_\_\_\_

**TREND: Service System Capacity**

**Trend Statement: Increased community needs and institutional capacity**

**Strategic Initiative: Mental Health Promotion and Substance Abuse Prevention**

**Goal Statement: The Department of Human Services to enhance and increase mental health promotion and substance abuse prevention efforts.**

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME and DOCUMENTATION
Develop funding formula for Governor’s portion of Safe and Drug Free School Grant dollars	Char Olson			Funding formula developed and applied.
Apply for Strategic Prevention Framework State Incentive Grant (SPF-SIG)	JoAnne H.	May 2006		Grant Submitted
Develop and implement formal information dissemination plan for mental health & substance abuse information	JoAnne H.	12/06		
Aging Mental Health initiative with NDSU trains natural caregivers and family members in mental illness signs and symptoms and process to access to services.	Lauren Sauer	Through 06/07		Trainings occur, media awareness campaign occurs, and an increased number of natural caregivers are aware of signs of mental health needs and how to access services.

Person(s) Responsible: JoAnne Hoesel

Date: \_\_\_\_\_

**TREND: Access to Services**

**Trend Statement: Urban/rural shift and demographic changes results in service delivery challenges**

**Strategic Initiative: Urban/Rural shift of services**

**Goal Statement: The Department of Human Services to study the needs of rural communities and develop a service provision system.**

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Transportation Services: HSCs develop a plan for voucher system for rural clients	Nancy M. /HSC Directors	July 2007		Proposal developed and submitted to DHS Cabinet
HSCs identify technology options for expanded use of telemedicine	Nancy M. /HSC Directors	October 2007		Pilot program proposals developed and submitted to DHS Cabinet.

Person(s) Responsible: Nancy McKenzie

Date: \_\_\_\_\_

**TREND: Access to Services**

**Trend Statement: Urban/Rural shift and demographic changes results in service delivery challenges**

**Strategic Initiative: Urban/Rural shift of services**

**Goal Statement: The DHS allocates fiscal and human resources to the areas most challenged by demographic changes.**

<b>ACTION STEPS:</b>	<b>PERSON(S) RESPONSIBLE</b>	<b>TIME LINE</b>	<b>BUDGET REQUIREMENT</b>	<b>OUTCOME and DOCUMENTATION</b>
Provide HR support to identified strategies.	Dean Mattern	As needed		Human Resources data is provided for resource assessment and decision-making
Identify possible resource shifts between HSCs as needs arise	Nancy M. /HSC Directors	Ongoing	Existing	SFN30 position transfer requests reflect resource shifts
Aging Mental Health initiative with NDSU trains natural caregivers and family members in mental illness symptoms and processes to access services.	Lauren Sauer	Through 06/07		Trainings and media awareness occur, an increased number of natural caregivers are aware of signs of mental health needs and how to access services. Training began October 2006.

Person(s) Responsible: Nancy McKenzie

Date: \_\_\_\_\_