SB 2206 Update: North Dakota Social Services Redesign

February 28, 2018
Today’s Agenda

• Welcome and Introductions
• Project Overview and Anticipated Outcomes
  • CFS Committee Update
  • Adults, Aging & Disability Committee Update
  • Economic Assistance Committee Update
  • Administrative Committee Update
• Q & A
• Closing
Before November 1, 2018, the department of human services shall report to the legislative management on the status of the pilot program and the development of a plan for permanent implementation of the formula established in section 50-34-04. The implementation plan must include recommendations for caseloads and outcomes for social services, designated child welfare services, and economic assistance; considerations regarding the delivery of county social services to ensure appropriate and adequate levels of service continue; options for efficiencies and aggregation; analysis of the potential reduction in social service offices, organizations, and staff due to consolidations; the feasibility and desirability of, and potential timeline for, transitioning county social service staff to the department of human services; and considerations for oversight and chain of command within social services and human services. The implementation plan must be submitted to the sixty-sixth legislative assembly as part of the department of human services budget request and identify the estimated biennial cost of the plan.
Study of County Social Services, DHS & HSC

• Focus is on service delivery to the client in the most effective and efficient way possible
• Stakeholder groups include
  • Nation
  • County
  • Region
  • State
• Must remove geographic, political and cultural boundaries to deliver smart, efficient and compassionate human services to improve SDOH, using MSI, Government reinvention, tribal and behavioral health principles
Primary Stakeholders

Clients

Taxpayers
Project vs. Process vs. Policy

**Project:** Has a beginning and end with a set goal.

**Process:** The steps to getting work done.

**Policy:** Influences how the work gets done.
APHSA Model

HUMAN SERVICES VALUE CURVE

**GENERATIVE**
Using a population-based health and well-being approach to find solutions that get at root causes and are implemented collectively with families and communities.

**INTEGRATIVE**
Working across sectors to address problems at their root through data analytics and a customized service array.

**COLLABORATIVE**
Working towards a single-door approach to link services across programs and agencies, easing access and reducing duplication.

**REGULATIVE**
Accurate and timely administration of programs to assure compliance and integrity; focus on efficiency and accountability for proper use of funds.

Influencing Factors

- New IT Systems
- Culture
- Ongoing disagreements
Children & Family Service Committee

Committee Chair: Chip Ammerman
Programs & Services

• Foster licensing and foster placement
• Family Preservation
• In-Home Services
• Child Protective Services
• Childcare Licensing
Goals

1. Rebuild the culture of how we engage with each other to deliver services to children and families.
2. Build an agency that is more agile (faster and nimbler) in how we deliver services to clients.
3. Identify and supply adequate resources.
4. Deliver consistent practices across counties.
5. Shift appropriate authority to the local level.
7. Build a foundation to address poverty.
Barriers to Success

- Caseload vs. workload standards
- Inadequate assessment tools for appropriate placements
- Workforce Development / Training
- Resources are not available in every county
- Lacking education and training across different agencies and systems that are intended to work together
- The overall CFS model is broken (punitive model)
- Resources don’t exist for prevention and early intervention
- Decision making / approval process among county, region and state
- Technology that supports the right model
- Culture
Implementation

• Regionalize Subsidized Adoptions
• Targeted State-wide Foster Recruitment Model
• Implement proven intervention/prevention programs to decrease foster placements and keep families unified (home visits, increased time in case management, increased parent aids)
• Implement a caseload formula that allows for a holistic case management approach
Adults, Aging & Disability Committee

Committee Chair: Diane Mortenson
Programs & Services

- Home & Community Based Services (HCBS)
- Adult Protective Services
- Direct Care
- Services for Developmentally Disabled
Goals

1. Reduce the number of programs and policies case managers manage.
2. Use person-centered planning for care planning and develop plans based on individual choices, priorities and needs.
3. Develop flowchart for entry into the DD system.
Barriers to Success

- Technology
- Access to data and information that would increase efficiency
- Existing model of county boundaries
- Caseload standards
- Lack of metrics for client success
Implementation

- Explore intake models for easy access regardless of county of residence
- Develop specialized teams for complex cases
- Develop caseload standards with quality metrics
- Develop a person-centered planning approach

In Process:

- Release of Information between EA + Adults to provide more efficient service to the client
- Standard form for children receiving DD services who will enroll in Medicaid
Economic Assistance Committee

Committee Chair: Vince Gillette
Programs & Services

• Medicaid Enrollment
  • Traditional
  • ACA
  • Basic Care
  • Long-Term Care
  • Sub Adopt

• SNAP
• TANF
• LIHEAP
• Daycare Assistance
• County Burial
Goals

1. Best possible service to the client.
   • Accurate and timely issuance of benefits.
   • Client has access to all of the needed services they are eligible for.
   • Staff investigates the client need to provide the right services.

2. Better access to client data to verify eligibility.
Barriers to Success

- Response time between county / DHS during case review
- Lack of resources to respond to clients in a timely manner (more prevalent in larger counties)
- Technology
- Caseload standards
- Confidentiality rules
- Existing model of county boundaries
- Training
- Process and procedure manual is difficult because no common language exists and it isn’t common sense searchable so people don’t use it
  - This leads to inconsistency in delivery
Implementation

• Unified training model that sets training standards for all eligibility workers in both technology and process/procedure
• Develop a weighted caseload formula
• Increase quality time spent with client to identify intervention strategies and increase client success
• Explore new policy/procedure manual technology
• Explore operating agreements between state agencies to share data benefiting the client
Administrative Committee

Committee Chairs: Steve Reiser and Marcie Wuitschick
Purpose

• Identify administrative barriers and processes that will improve overall service delivery
• Develop strategies for structure and budget based on each committee’s recommendations
Implementation

• County survey to identify caseload/workload and FTEs across all programs
• Develop standard hiring and performance management practices
Immediate Next Steps

• National Experts for the work teams
• Voice of the customer where appropriate
• Discussions about structure
What keeps me up at night

• Structure is going to come into play in short term
• This isn’t about counties, but about client
• Structure changes creates anxiety
• Structure changes will very likely require statutory changes
• There will likely need to be structure changes at DHS
• There will likely be unintended consequences
• This is not a one biennium project
Thank You!