Social Service Redesign Update
Interim Human Services Committee
September 11, 2018
**AGENCY OVERVIEW & CULTURE**

The mission of DHS is to provide quality, efficient, and effective human services, which improve the lives of people

<table>
<thead>
<tr>
<th>Mission</th>
<th>Principles</th>
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<tbody>
<tr>
<td><strong>Quality services</strong></td>
<td>▪ Services and care should be provided <strong>as close to home as possible</strong> to</td>
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|                              | – Maximize each person’s independence and autonomy  
|                              | – Preserve the dignity of all individuals  
|                              | – Respect constitutional and civil rights  
|                              | ▪ Services should be **provided consistently across service areas** to promote equity of access and citizen-focus of delivery  
| **Efficient services**       | ▪ Services should be administered to **optimize** for a given cost **the number served** at a service **level aligned to need**                                                                                  |
|                              | ▪ Funding in DHS should **maximize ROI for the most vulnerable** through prevention, early intervention and safety net services, not support economic development goals                                                   |
|                              | ▪ Cost-effectiveness should be considered holistically, acknowledging **potential unintended consequences** and **alignment between state and federal priorities**                                             |
| **Effective services**       | ▪ Services should help vulnerable North Dakotans of all ages maintain or enhance quality of life by  
|                              | – Supporting **access to the social determinants of health**: economic stability, housing, education, food, community, and health care  
|                              | – **Mitigating threats** to quality of life such as lack of financial resources, emotional crises, disabling conditions, or inability to protect oneself                                                   |
To improve lives, DHS enables access to social determinants of health when community resources are insufficient.

- **Social determinants of health** are all necessary and mutually reinforcing in securing the well-being of an individual or family: they are only as strong as the weakest link.

- **Community resources** shape and enable access to the social determinants (e.g., schools provide access to education, employment provides access to economic stability).

- **Investing in community resources** can in many cases prevent individuals from needing to access DHS safety net services to obtain the social determinants of health.
Child Protective Services Assessment Pilot
Admin rule states that CPS assessment are required be closed in 62 days. Over the last 12 months, only 48% of cases statewide have been closed within 62 days. Only 85% in 181 days.

- Why? Identified a list of constraints:
  - Staffing with a multidisciplinary team maybe only once a week and in some counties, once a month
  - Instead of subordinating to the child and family, we subordinate to technology and paperwork
  - We don’t focus on quality or timeliness
  - Why? Not bad people just bad processes and policy

Spent 3 weeks conducting an intense sprint to build the new CPS Assessment process to pilot in Badlands and Southeast ND from September 17 - January 14 with the goal to scale statewide after Jan. 14

Trained all pilot participants on Sept. 10 and 13
Child Protective Service Assessment Pilot Projected Outcomes

- Targets: 50% of assessments closed in 25 days / 75% in 35 days / 95% in 62 days
- Eliminated Multidisciplinary team
- Created a Family Assessment Instrument that assess four major factors vs. 21 factors - we've subordinated the technology to align with this
- Sharing common intake, common CPS workers and common CPS supervisors within both regions
- Built a CPS supervisor ratio of 1:6, without hiring anyone new - to do this, we eliminated county boundaries and shared resources - not financially possible if we had to hire CPS supervisors for every six employees at county level
- Will be able to report outcomes beginning of upcoming Legislative session
Draft Organizational Governance
Scenarios for organizational governance

Scenario 1: Continue with status quo

Scenario 2: Restructure DHS supervision of county operations

Scenario 3: Aggregate social services governance at “zone” level

Scenario 4: Shift delivery to state-run system
Scenarios for organizational governance

Scenario 1: Continue with status quo

- Department of Human Services
  - Field Director
  - HSC Director
  - Regional HSC Reps
  - County Director

Scenario 2: Restructure DHS supervision of county operations

- Department of Human Services
  - SS Ops Leadership
  - County Director

Scenario 3: Aggregate social services governance at “zone” level

- Department of Human Services
  - SS Ops Leadership
  - County Commission
  - Zone Board
  - Zone Director

Scenario 4: Shift delivery to state-run system

- Department of Human Services
  - SS Ops Leadership
  - Zone Director(s)
Scenarios for funding

### Social Services

- Various child & family services: 19,617,650
- Targeted case management: 5,676,305
- Adult services: 5,216,593
- Child care licensing: 2,093,158
- Food stamps, Medical, TANF: 22,559,690
- LIHEAP: 1,579,126

### Eligibility

- Foster care assistance: 831,119
- Child care assistance: 750,604
- General assistance: 197,391
- Adoption assistance: 54,542

### Other

- Direct Charges: 3,690,196
- Other activities, non 119-allowable: 336,815
- IV-D Legal (Child Support): 120,939

### Indirect

- Support and supervision personnel: 10,898,893
- Other 119-related indirects: 3,462,752
- Value of space + CWCA: 2,559,848

### Total

79,555,531

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**Brief description of key scenarios:**

- **FS.1** = Continue with formula or adjusted version thereof
- **FS.2** = State retainment of specialized functions
- **FS.3** = State retainment of specialized functions and eligibility functions
- **FS.4** = State retainment of specialized functions and adult services functions
- **FS.5** = State retained specialized, eligibility, and adult services functions
- **FS.6** = State retainment of funds for all functions

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1. For costs linked to cost pools on the 119 (all functions in “Social Services” and “Eligibility” categories), the associated costs are estimated by multiplying the relevant cost pool by the RMTS hits distribution within that cost pool.
2. Costs for other activities are estimated by extrapolating the estimated SFY18 costs based on SFY13-16 costs and multiplying twice by 1 plus an inflation factor of 3%.
3. Support and supervision personnel costs are backed out of the 119 Indirects cost category by adding up the estimated fully loaded salaries (estimated with state benefit packages) for county employees with director or admin-related job classifications.
4. Applying the same methodology for accounting for total costs to the SFY15 119 cost reports and non-allowable cost reports yields a total cost estimate of ~72m, just under formula estimate.
5. “Hybrid distribution” here refers to a funding split where a proportion of the funds would be retained by the state depending on the distribution of requirements for the given function.

Source: SFN 119 Costs for SFY18; Non-119 allowable cost reports from SFY13-16; Random Moments Time Study (RMTS) hits from July 17 – May 18 (11 mo. period); County provided salary data from February 18.