

DHS Strategic Plan

TREND: Access to Services

Strategic Initiative: To assure access to services for vulnerable people as evidenced by providing service options to allow individuals the choice to live in the least restrictive environment.

Division: Aging Services

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
<p>To provide Older American Act (OAA) outreach services through Options Counselors/Outreach workers in coordination with the development of Aging and Disability Resource Centers (ADRC's) funded through the Regional HSC's.</p> <p>Plan <i>Step 1:</i> In 2011 (beginning January 1st) include options counseling requirements as a part of outreach activities at North Central Human Service Center (Region 2). Coordinate with the ADRC pilot in Region 7. <i>Step 2:</i> In 2012 expand options counseling/outreach to Regions 1 and 8 through HSC's. Coordinate with the ADRC pilot in Region 7. <i>Step 3:</i> In 2013 expand options counseling/outreach to Regions 3, 4, 5 and 6 through the HSC's.</p>	<p>Aging Services Division.</p> <p>Supervision provided by the RASPA's with Lead Options Counselor responsibilities assigned to the Family Caregiver Coordinator at the HSC's who will supervise the Options Counselors/Outreach Workers in the field.</p>	<p>1/1/11 - 2013</p>	<p>ADRC options counseling/outreach would then be available statewide funded by Title III-B of the OAA.</p> <p>Options Counselors/Outreach Workers will be reimbursed per unit of service provided based on current QSP rate. Workers will be paid from the time he/she leaves the office/home base until return; there is no reimbursement for mileage.</p>	<ol style="list-style-type: none"> 1. Will create a coordinated system of information and access at the community level for all persons seeking long term support to minimize confusion, enhance individual choice, and support informed decision making. 2. Will provide cost effective, efficient delivery of services that meet standards. 3. Will implement ADRC options counseling/outreach statewide utilizing existing resources. 4. Will provide increased coordination between the outreach services, family caregiver support services, and the ADRC's

DHS Strategic Plan

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
<p>Data entry and coordination of referral assigned to Lead Options Counselor at the HSC's.</p> <p>Existing contractors could enter into Provider Agreements to provide options counseling/outreach.</p> <p>Aging Services Division will provide statewide training to include agencies and organizations in the network to promote collaboration and consistency of service delivery.</p>				<p>5. Will free up a portion of operating funds for the OAA Family Caregiver Support Program which could be used to provide additional respite care services.</p> <p>6. We anticipate this will provide additional employment in local communities.</p>
<p>Increase capacity number of adult foster care homes</p> <ol style="list-style-type: none"> 1. Ongoing joint meetings of representatives from Aging Services, Medical Services, MA/SA and DD to identify barriers to recruitment and retention of adult family foster care providers. 2. Reschedule public forums. 3. Development and printing of an adult family foster care brochure regarding individual rights for both a resident of foster care and a provider of foster care.+ 	<p>JoAnne Hoesel, Maggie Anderson, Aging, & Medical Services</p>	<p>2009-2011</p>	<p>Provide additional SPED, Expanded SPED and HCBS waiver funding to increase the rates of payment for the provision of AFFC.</p> <p>Cost of brochures = 5,000 @.75 each = \$3,750.</p>	<p>An e-mail poll of county social service case managers was conducted in December of 2009 to identify counties in need of AFFC providers. The following counties were identified as needing AFFC services: Cavalier, Williams, Grand Forks, Pierce, Stark and Dunn. These identified counties would be targeted first with recruitment efforts.</p>

DHS Strategic Plan

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
Adding Medication Management services to all HCBS to assist people to remain in their homes <ul style="list-style-type: none"> • QSPs • Home Helpers 	Maggie Anderson, Andy McLean, HCBS staff	With preparation of 2011-2013 Budget and 2011 Legislative approval	OAR	
Pilot a DHS and LTC/ND Healthcare Association collaboration for rural health/behavioral health services project (crisis beds, “hold beds, longer-term specialized units for SMI) <ol style="list-style-type: none"> 1. DHS Cabinet to determine priority areas of the state to meet gaps. 2. LTCA would then approach specific facilities about potential project(s). 3. NDHA to determine any role for hospitals. 4. Need for additional behavior analyst resources for LTC Facilities. 5. NDHA to discuss potential interest with CAH’s. 	Nancy McKenzie, Maggie Anderson, Andy McLean	2009-2011	OAR <ol style="list-style-type: none"> 1. Mark Anderson to develop cost scenarios after priority needs identified. 2. Need to determine rate for specialized programs/resource. 	<ol style="list-style-type: none"> 1. Conference call with Shelly Peterson, NDLTCA, and Tim Blasl, NDHA, February 8th, to discuss potential interest in a collaborative pilot project. 2. Access/capacity workgroup discussed rural needs and potential partnerships (3/16). 3. HSC Directors working with staff to prioritize residential needs. 4. Several LTC facilities are interested in the project – they have excess capacity.

DHS Strategic Plan

TREND: Access to Services

Strategic Initiative: To assure access to services for vulnerable people as evidenced by providing service options to allow individuals the choice to live in the least restrictive environment.

Division: Children and Family Services

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
Develop a mobile CPS assessment model	Lead: Tara Muhlhauser & Marlys Baker-CFS	2009-2011	\$5,000?	Plan is still in development using existing resources and MOU's.
Review next steps in Refugee Program	Lead: Dean Sturn & Tara Muhlhauser	5/1/10 – 9/30/10	Brenda Weisz doing fiscal analysis. Budget impact will include administrative cost shifts as determined by fiscal.	Program transfer planned for May 1, 2010 (with full fiscal transfer on Sept. 30, 2010). MOU is signed and letter is in final draft to the federal officials-planned to go out from CFS June 7.

DHS Strategic Plan

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
<p>Explore increasing family group decision making and kinship care.</p> <p>(Startup costs for Burleigh/Morton and Cass Counties)</p> <p>Expansion of Services to three different areas over a two year period;</p> <p>Maintaining Cass/Burleigh</p> <p>Expansion to Grand Forks County</p> <p>Expansion to Stark County</p> <p>Expansion to Ward County</p>	<p>Lead: Tara Muhlhauser & Diana Weber -CFS</p>	<p>6/1/10</p> <p>2011- 2013</p>	<p>OAR</p> <p>\$100,000 for 14 months ?</p> <p>Budget Proposal =</p> <p>\$190,000?</p> <p>\$60,000 for 18 months?</p> <p>\$45,000 for 18 months?</p> <p>\$35,000 for 18 months?</p>	
<p>Statewide Review Team to develop a behavioral case management component for child welfare</p>	<p>Lead: Tara Muhlhauser – CFS, Lisa Bjergaard- DJS & SRT Members</p>	<p>2009-2011</p>	<p>OAR?</p>	<p>Planning underway to assure authority is available, exploring joint powers agreements/county MOU's, and determining the level of need.</p> <p>Meetings are scheduled with the Counties.</p>

DHS Strategic Plan

TREND: Quality

Strategic Initiative: To assure quality as evidenced by expanded use of technology, data collection, program monitoring, and implementation of evidenced-based practices.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
<p>To study the pros/cons of applying for a mental health waiver</p> <ol style="list-style-type: none"> 1. Draft level of care for mental health services. 2. Request research of CFR's from Legal Unit. 3. Maggie/JoAnne/Cabinet review final draft of level of care. 4. Consult with CMS on level of care description. 5. Seek final decision on which waiver or amendment to write. 6. Seek input from field on consumers who need this waiver and services they need. 7. Determine which services to include in the waiver/amendment. 8. Analyze data on consumers. 9. Work with fiscal to prepare budget. 10. Seek approval to move forward from JoAnne/Maggie/Cabinet for legislative work. 11. Prepare for legislature. 	<p>JoAnne Hoesel, Karen Tescher, Tess Frohlich, Jake Reuter, Maria Gokim, Lynn Derman, Lauren Sauer, Dawn Pearson, Wendy LaMontagne & Susan Wagner</p>	<p>4/1/10 – 12-31-11</p>	<p>Consider impact of health care reform legislation.</p>	<ol style="list-style-type: none"> 1. Compare 1915c and 1915i – completed. 2. TA Call with experts about questions on the 1915i – completed. 3. Review level of care criteria – completed.

DHS Strategic Plan

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
12. Assemble team to write the waiver/amendment – pending legislative approval. 13. Draft administrative code for mental health waiver and addition of level of care for mental health services to existing code. 14. Draft policy. 15. Write waiver. 16. Submit waiver.				
Continuation of the program to pay for the establishment of guardianships (petitioning costs) for individuals ineligible for DD guardianship services. 1. A pilot program to provide an annual payment of \$500 to guardians of those wards for which a guardianship was established using the Guardianship Establishment Fund. 2. Reprint the Guardianship Handbook. 3. Changes need to the North Dakota Century Code to reflect the activities of the DHS in guardianships and funding.	Aging Services Aging Services Linda Wright as primary & Lauren Sauer as backup	2011-2013	OAR \$105,275 (See budget document)	

DHS Strategic Plan

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
Human Service Centers will pursue potential grant funding to establish a stronger EMR capability with partner providers. 1. IT setting up meeting to include Nancy, Jenny, Kris Buchmeier and Sheldon Wolf monthly. 2. Heather/LuWanna will be requested to explore grant options. 3. Cabinet to be informed of options and progress.	Nancy McKenzie & Brenda Weisz	Ongoing	To be determined	1. Meeting with Pam Anderson to discuss process and relevant stakeholders to involve was held on January 22, 2010. 2. HIPAA/HITECH meeting held on March 30, 2010.
Clinical and Medical Services delivered by tele-behavioral health when needed and when possible.	Andy McLean	2011-2013	Grant application?	Initial analysis completed and report written by Doug Boknecht and Dr. McLean.
Monitor and report on service delivery and service outcomes through quality assurance processes, case file reviews and data analysis and trends.	JoAnne Hoesel	2011-2013		Quarterly reports developed, analyzed and reported to Cabinet.

DHS Strategic Plan

TREND: Access to Health Services

Strategic Initiative: To assure access to health services for vulnerable people as evidenced by providing service options to allow individuals the choice to live in the least restrictive environment

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
Explore options for DHS to develop a dental outreach service	Maggie Anderson & Executive Office	4-1-10 – 7-1-11	Yes	
Work with DOT and other partners to improve non-emergent medical transportation	Maggie Anderson	7-1-11	Yes	Task Force is developing a plan for a statewide system – led by the DOT.

DHS Strategic Plan

TREND: Access to Services – Capacity in Mental Health Services

Strategic Initiative: To assure access to services for vulnerable people as evidenced by providing service options to allow individuals the choice to live in the least restrictive environment.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
Develop a Public/Private Collaborative for services to people with mental illness.	System Capacity/Access Workgroup – Nancy McKenzie Case Management Workgroup – JoAnne Hoesel Inpatient Care Funding – Alex Schweitzer	Ongoing	OAR	
Increase inpatient bed capacity at NDSH <ul style="list-style-type: none"> • Study the possibility of contracting adolescent services to a private provider 	Alex Schweitzer	7-1-10 – 9-1-10	Medicaid funding for contract. Adult beds covered with current resources	Prairie St. John’s and Stadter Center have expressed interest in pursuing. If a private provider assumes this inpatient program, the SH will have 18 additional adult beds. A few safety net beds would be maintained at DC (DD adolescents) and NDSH for non-DD adolescents.

DHS Strategic Plan

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
Expanding the continuum of services for sex offenders	Alex Schweitzer & Kerry Wicks	7-1-10	Current SH resources	Four sex offenders from the LaHaug building have moved to the secure services building, two sex offenders have moved to TL Housing and two more are awaiting TL placement. Explore contract with private nursing home for housing sex offenders.
16 bed Gero-psych contract with long term care facility	Alex Schweitzer, Maggie Anderson, & Brenda Weisz	2011-2013	OAR	
Develop a plan to meet the residential and crisis residential capacity statewide 1. HSC Directors to work with staff on details of residential needs. 2. Access/capacity workgroup identifying priority needs. 3. Workgroup to further analyze data to identify needs. 4. HSC Directors in conjunction with business managers to prepare cost estimates with requested residential expansions. 5. Cabinet review priorities at budget meetings.	Nancy McKenzie, JoAnne Hoesel, Andy McLean & HSC Directors	2011-2013 6/10 5/7/10 6/10 By budget deadline Budget meetings	OAR	1. HSC Directors assigned to submit plans for residential budget requests. 2. Meeting with MHSAS staff to discuss other data needs and info to be gathered held on 2/2/10. 3. Meeting with MHSAS staff on 3/29/10 to develop consensus on priority residential needs statewide
Transition of DD Individuals from the NDDC to home and community based settings 1. Propose to transition 15 adult individuals to the community during timeline to reach a goal of 100 adults in house on 7/1/11.	Alex Schweitzer & TTF members	5/1/10 – 7/1/11	Within the NDDC Budget	113 adults reside at the NDDC as of 6/7/10.

DHS Strategic Plan

TREND: Efficiency

Strategic Initiative: To assure ongoing efficiency as evidenced by the efficient management of the Department’s appropriated funds for services and programs.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	OUTCOME ACHIEVED
Require outcome measures in all contracts with providers	DHS Divisions	Contract renewal date	Contracted Amount	
To assure efficiency by using data to continuously evaluate programs and practices to best serve consumer needs.	DHS Divisions	Biennial Period	Part of divisional budgets	
Ongoing development and management of public and private provider service agreements for vulnerable citizens.	Senior Management	09 - 11	Per contract	
Biennial state stakeholders meetings to be conducted by the Department of Human Services Cabinet.	DHS Cabinet	October and November 2011		

DHS Strategic Plan

TREND: Workforce Development

Strategic Initiative: To assure quality, efficient, and effective workforce as evidenced by staff development opportunities and succession planning made available by the Department and other entities.

ACTION STEPS:	PERSON(S) RESPONSIBLE	TIME LINE	BUDGET REQUIREMENT	Outcome and Documentation
Make available annual leadership classes for the employees of the Department of Human Services	Marcie Wuitschick, Mary Beth Wilson & Leadership Committee	2010		
Conduct generational training for DHS employees.	DHS Human Resources Division	2010		
Require that all new employees participate in a DHS new employee orientation process that provides an overview of the DHS	DHS Human Resources Division	2010		