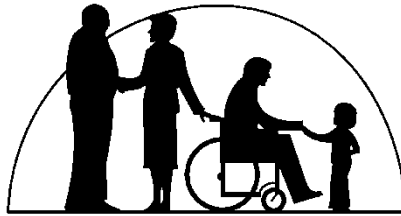


# Vulnerable Children and Adults Act (VCA)

## Service Plan



Minnesota Department of **Human Services**

### Type of Service plan

Individual county plan

Multi-county plan

County name: Mower

County names:

### Contact Information

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## Part A: Needs and Priorities

State the type of needs that the county will be addressing for vulnerable children and adults who experience dependency, abuse or neglect using VCA funds?

### *Vulnerable children*

Safety, Permanency and ongoing Well-being for children who have experienced or are at imminent risk of experiencing abuse and neglect by their parent(s) or caretakers remain the priority of our needs for vulnerable children in Mower County for 2012-2013. Specific needs are as follows:

- Maintain current staffing levels for Child Protection and Children's Mental Health Case Management.
- Short term shelter beds that provide parental respite and the child's quick stabilization for SED children. Though our local Residential provider Gerard provides short-term evaluations, these often result in continued stays.
- Stable local Child Psychiatry. (Our local Medical Center has had turnover with their Child Psychiatry staff.)
- Increase networks for families to be able to ensure the permanency of their children.
- Sustain and enhance interventions for families with children who exhibit serious emotional and behavioral disorders that affect their functioning in the home, at school or in the community.
- Identify fathers of children placed out of the home sooner, offer services and use them as a placement option if they are appropriate.
- Complete children's mental health screenings on all children eligible to identify concerns early.
- More incentives for relatives to become options for Permanency.
- Increased efficiency in court and DHS system to move children from TPR (ward of state) status to Adoption finalization status in a 6 month time period.
- Community outreach services with attendance incentives for children and teens, families, and single parents of babies.
- Explore 'Signs of Safety' as a Model of Practice for Child Protection cases.
- Funding for respite and day care.
- Encouraging Children's Therapeutic Support Service providers to increase intervention levels in the family home.
- Regular established visits of Social Workers and Case Managers for children living with both parents where maltreatment has occurred and children in out of home placement.
- Meeting response timelines by Child Protection staff.
- Increase county SW's time spent in family homes.
- Initiating relative searches immediately upon child removal in order to identify viable options and eliminate non-viable options, and determine paternity.
- Placing more emphasis on measurable objectives in client Case Plans.
- Completion of Child Well-Being tool for each identified child in SSIS workgroups.
- Enhance efforts to secure long-term transitional services to children 18-21 who are aging out of long-term foster care homes.

### ***Vulnerable adults***

Emergency and ongoing health care, housing, well-being and decision-making (Guardian/Conservator) will continue to be the priority of our needs. Mower County will continue to see an increase in eligible people due to our elderly population and the economy.

Specific needs are as follows:

- Increase options for safe, permanent housing for people with Serious Mental Illness who present with unstable behaviors.
- Effectively manage all waiver budgets assuring that the people with critical needs can be served as needed.
- Maintain quality of County Social Worker services even though we experience reduction in revenue.
- Provide adequate preventative care to eligible populations to avoid instances of crisis and costlier care.
- Lessen risk of harm to chronic substance abusers and reduce dependence on expensive Detox stays.
- Improve communication through scheduled meetings between partners in the Long Term Care system.
- Reduce the hurdles that come with referrals to the state's Central Admission's Office for mentally ill clients and the quick turn-around time for length of stays at the Community Based Health Hospitals.
- Access to affordable dental care for managed care and MA recipients.

## **Part B: Strengths and Resources**

A county has many strengths and resources to address the diverse social services needs of vulnerable children and adults. Briefly state what strengths and/or resources will be engaged (continued or implemented) to address the needs stated in Part A above?

### ***Vulnerable children***

- Quality educated and trained Social Service staff who advocate and serve the interests of their clientele.
- A committed Children's Justice Initiative Team who work to overcome differences, streamline processes and achieve compliance with timelines.
- Variety of well-established Children's Therapeutic Support Services (CTSS) providers.
- Local Mayo Clinic affiliated Medical Center with both child and adult Psychiatry.
- Strong support services within school districts.
- Local Collaborative Team utilizing County Attorney's Office, Corrections, Public Health, Social Services and School Districts that identify at-risk students and share resources and referrals.
- Growing cultural diversity with expanded interpretive resources and supports within the County and the City of Austin.
- Collaborative spirit in seeking ways to improve efficiencies and continue service levels at a time when resources are decreasing.
- Children's Mental Health Residential setting available when needed for evaluations and long-term treatment.
- Dedicated Mandated Reporters willing to keep apprised of changes in procedures and policies.

- Strong local Child Protection Team that meets weekly and cooperates and communicates well during joint investigations.
- Unified Human Services staff that work well together in servicing client needs.
- Crisis Nursery homes.
- Parents Forever – Divorce education programming required for all divorcing couples with children.
- Interagency Early Childhood Intervention (IEIC) that identifies at-risk eligible children and provides services to families.
- Seibel Center – Visitation and exchange center providing safe and supervised situations for children of Domestic Abuse and CHIPS cases.
- Visitation Center Steering committee that brings together Professionals from across spectrums to share ideas and network.
- Public Health program that provides follow-along to all mothers of newborns.
- Teen Clinic through Public Health that provides contraceptive education along with pregnancy counseling and follow-along.
- Nutritional Health program through 4H – County Extension that provides in-home support to families learning about proper nutrition for children.
- Salvation Army – Food Shelf
- ATLAS program – group that provides faith-based supports and mentoring to at-risk families.
- Mayo Clinic Child and Advocacy Center located in Rochester– provides multidisciplinary team to exam and interview suspected victims of child maltreatment. Child-focused, facility based program that improves the community collaborative response to child abuse. This will lessen the need to transport alleged victims to St. Paul for physical exams and forensic interviews.

#### *Vulnerable adults*

- Quality educated and trained Social Service staff who advocate and serve the interests of their clientele.
- Unified Human Services staff that work well together in servicing client needs.
- Collaborative spirit in seeking ways to improve efficiencies and continue service levels at a time when resources are decreasing.
- Local Mayo Clinic affiliated Medical Center with both child and adult Psychiatry.
- Mental Health funding to support employment, housing, medical and social needs to improve the lives of the Mentally Ill in our County.
- Excellent cooperation between Law Enforcement, County Attorney and VA Assessor with regards to civil commitment or guardianship petitions.
- Easy communication between Health Care Facilities and County Pre Admission Screening SW's.
- Maximization of federal and state revenue to fund the delivery of services.
- The BRIDGE program that serves our community's mentally ill population. Consumer-run and provider supported programming.
- Financial Counseling for low-income, at-risk families and disabled individuals.
- Senior Support program that provides supports, resources and referrals to elderly adults.
- Senior Services Advisory Council that provides awareness and education to the community. Topics include Wellness and Guardianship. They also provide caregiver support and train volunteers to become mentors and respite providers to the elderly still residing at home.
- Public Transportation system – AMCAT

- Continue to support the efforts of the Local NAMI Chapter and support their activities at The BRIDGE
- Mower County Council for the Handicapped.
- Mower County Senior Resource Directory

## Part C: Measures and Performances

Access the link below to review the county’s CY 2010 performance on VCA measures.

[CY 2010 Performance Summary on VCA Federal and State Measures](#)

Use the county’s performance summary to complete the table and questions below. In the table, enter the county’s performance on each of the measures and enter a “✓” if the standard was met, or an “✗” if the standard was not met in CY 2010. In the last two columns, set practical performance targets the county will work towards achieving in 2012 and 2013.

### Federal and State Measures

Measures (abbreviated)	Standard (STD)	2010 State/County Performance			Anticipated Targets	
		State	County	STD Met? (✓ or ✗)	2012	2013
1. No repeat maltreatment w/in six mths.	≥ 94.6 %	✓ 95.1%	100%	Met	100%	100%
2. Re-entered foster care w/in 12 mths.	≤ 9.9 %	✗ 24.4%	19%	X	12%	9%
3. Reunified w/in 12 mths.	≥ 75.2 %	✓ 84.5%	71.4%	X	75%	80%
4. Adopted w/in 24 mths	≥ 36.6 %	✓ 48.2%	50%	Met	55%	65%
5. Two or fewer pl. settings w/in 12 mths.	≥ 86.0 %	✓ 86.8%	88%	Met	90%	92%
6. Health examination w/in 12 mths.	≥ 63.5%	✗ 56.4%	79.5%	Met	85%	90%

≥ = Greater than or equal to; ≤ = Less than or equal to; ✓ = Standard met; ✗ = Standard not met

For each measure for which the county did not meet the standard, identify the measure below and discuss what plans are in place to improve performance on the respective measure. Include what issues/barriers/challenges are hindering the county from meeting the standard, and what may need to be changed or be done differently to achieve the stated targets (add more boxes, if needed).

Measure #2:	<p>Increase use of trial home visits in which Court supervision and Social Service custody continues in order to provide more transition planning and services to the parent(s) and child(ren).  Direct more Supervisory time to Caseload reviews for support and guidance.  Increase use of Structured decision Making tools especially the Well-being and Safety Reassessments after the child(ren) has been returned to the home.</p> <p>Time is a critical factor in most areas of a Social Workers caseload. Spending more time with families after reunification, court supervision and guardian ad litem involvement is not a luxury when new highly-involved cases come onto the workgroup assignments.</p>
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	<p>Potentially discussing increased efforts at reunification success with community providers (ARMHS, CTSS) could enhance our performance.</p> <p>Increase communication with family's support network and schools regarding reunification planning could prove beneficial for success.</p>
Measure #3:	<p>One of the side effects of limiting placements to imminent risk situations is that reunification is overshadowed by termination and permanency in the minds of the County Attorney's Office, the Guardian ad Litem and the public. Working more closely with these two entities in case planning activities and educating them on the statutes related to active efforts and least restrictive alternatives may increase their cooperation.</p> <p>Increasing SW's time spent in supervising visits directly in the parental home vs. at a neutral site may speed up the process in determining safety for reunification.</p>

### Part D: Budget

Access the link below to review the county's CY 2012 allocation. Use the county's allocation to complete the budget table below.

[Vulnerable Children and Adults Act CY 2012 Allocation](#)

Fill in the proportion (percent) of the county's VCA allocation that will be budgeted for vulnerable children and adult services for CY 2012 and beyond. Because VCA funds are directed at vulnerable children and adults, only two budget line items are listed. Subsequently, the department will apply these proportions to the most currently available allocation data. If the county changes these proportions at any time, the department should be informed by sending an email to: [paul.ramcharit@state.mn.us](mailto:paul.ramcharit@state.mn.us).

VCA budget	CY 2012 and beyond
Children services	70%
Adult services	30%
<b>Total</b>	<b>100%</b>

### Part E: Certification and Assurances

**Federal Certifications**

The federal Office of Community Services (OCS) requires the following certifications for the use of federal Social Services Block Grant (SSBG) funds (CFDA # 93.667, federal award number 0901MNSOSR, 1001MNSOSR, 0601MNSOS2). Follow the links for a complete description of each certification. Checking these boxes certifies that the county complies with these requirements for the use of SSBG funds administered through the service plan and county sub-contracting process.

- Drug Free Workplace  
[http://www.acf.hhs.gov/programs/ocs/ssbg/procedures/drug\\_free.html](http://www.acf.hhs.gov/programs/ocs/ssbg/procedures/drug_free.html)

- Environmental Tobacco Smoke  
<http://www.acf.hhs.gov/programs/ocs/ssbg/procedures/tobacoo.html>
- Lobbying  
<http://www.acf.hhs.gov/programs/ocs/ssbg/procedures/lobbying.html>
- Debarment, Suspension and Other Responsibility Matters  
<http://www.acf.hhs.gov/programs/ocs/ssbg/procedures/debarment.html>

**Public Input**

Prior to submission, did the county facilitate a process for soliciting public input for at least 30 days on the contents of the agreement?

Yes  No Was public input received/used?  Yes  No

**Assurances**

It is understood and agreed by the county board that funds granted pursuant to this service plan will be expended for the purposes outlined in Minn.Stat.§256M; that the Commissioner of the Minnesota Department of Human Services has the authority to review and monitor compliance with the service plan, and that documentation of compliance will be available for audit; and that the county shall make reasonable efforts to comply with all VCA requirements including documenting annual public input processes.

**Service Plan Certification**

Checking this box certifies that this service plan has been prepared as required and approved by the county board(s) under the provisions of [Minn. Stat. §256M](#). In the box below, state the name of the chair of the county board of commissioners or authorized designee, their mailing address and the name of the county.

Name (chair or designee)	Mailing address	County
Tim Gabrielson	Mower County Courthouse 201 1 <sup>st</sup> Ave NE Austin, MN 55912	Mower

**Date of Certification:**