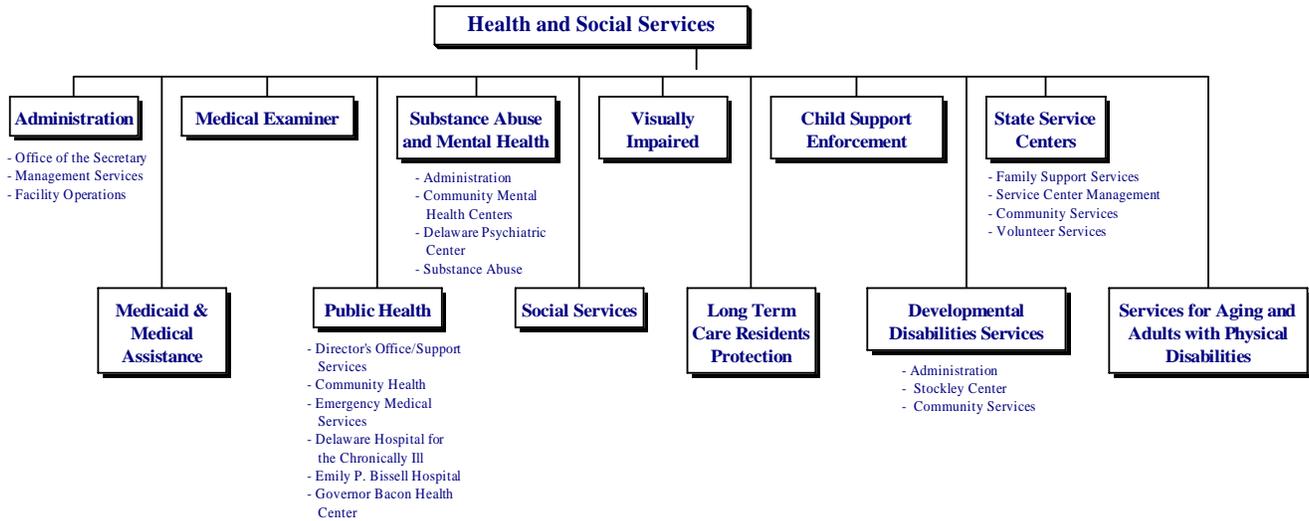


# HEALTH AND SOCIAL SERVICES

## 35-00-00



### MISSION

The Department of Health and Social Services (DHSS) plays a major role in meeting the basic needs of Delaware families and individuals. This is recognized by the department's mission "to improve the quality of life for Delaware's citizens by promoting health and well-being, fostering self-sufficiency and protecting vulnerable populations".

### KEY OBJECTIVES

#### Promote Health and Well-Being

- Increase access to mental and physical health care and promote preventive behaviors that can improve health status.
  - Extend managed care models of service delivery to provide more and better services with cost controls.
  - Continue to advance a public health agenda to reduce the incidence of preventable conditions by promoting healthy lifestyles through health education, wellness and risk reduction programs.
  - Implement strategies to enhance prevention and intervention efforts for high-risk minority populations.
  - Continue to strengthen maternal, adolescent and child health care.

#### Foster Self-Sufficiency

- Reduce dependency among welfare recipients and those at risk for welfare dependency.

- Provide family support to increase the earning potential of single parents: day care, medical benefits, employability training and vocational training.
- Implement targeted strategies to make work pay, promote mutual responsibility and encourage families to stay together.
- Enhance child support enforcement efforts to maintain prompt processing while responding to increasing numbers.

- Provide community-based care to ensure an appropriate continuum of services and avoid restrictive and costly institutionalization whenever possible.
  - Continue expansion of community services for persons with developmental disabilities and enhance family support services.
  - Continue expansion of community mental health and substance abuse services.
  - Continue expansion of community-based supports, such as homemaker services and adult day care, to allow the elderly and adults with physical disabilities to remain in their homes.

#### Protect Vulnerable Populations

- Ensure the quality of care, safety and security of individuals in long-term care facilities, residential programs and day services.
- Provide emergency and transitional shelters and support to homeless individuals and families.
- Serve children and their families by providing a safe environment for supervised visitation.

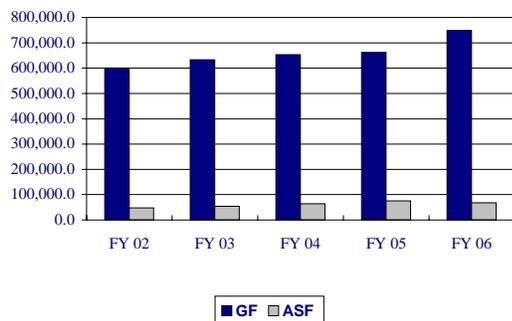
# HEALTH AND SOCIAL SERVICES

## 35-00-00

### Efficiency in Government

- Promote a customer-focused approach to service delivery through services integration.
- Ensure the department maximizes the fiscal, human systems and physical resources available in order to provide the best possible service to clients in the most efficient manner.
- Promote accountability and enhance management training opportunities for department leadership.

**Five-Year Appropriation History**



### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	707,350.5	748,082.8	839,626.5
ASF	60,156.6	67,747.1	71,603.5
<b>TOTAL</b>	<b>767,507.1</b>	<b>815,829.9</b>	<b>911,230.0</b>

### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	3,730.7	3,734.0	3,736.5
ASF	129.0	132.6	135.6
NSF	884.2	900.5	903.0
<b>TOTAL</b>	<b>4,743.9</b>	<b>4,767.1</b>	<b>4,775.1</b>

## FY 2007 BUDGET HIGHLIGHTS

### OPERATING BUDGET:

- ◆ The Governor recommends \$12,525.0 (all funds) to cover the loss of Federal Fiscal Relief funding in Public Health and provide funding for a comprehensive list of cancer treatment initiatives as covered in the Cancer Council Recommendations.
- ◆ Recommend \$2,000.0 for Infant Mortality Task Force Recommendations. This funding will include creating the Center for Excellence in Maternal and Child Health and Epidemiology in Public Health and

implementing comprehensive case management services to pregnant women and their infants.

- ◆ Recommend \$59,354.0 for the Medicaid program to cover increasing health care costs and a client base that is projected to reach over 146,000 persons during Fiscal Year 2007. Client growth is also the basis for a \$736.5 recommendation for the Delaware Healthy Children Program in Medicaid and Medical Assistance.
- ◆ Recommend \$2,657.1 in Child Care for anticipated program growth in Social Services. Also recommended is \$1,166.7 to annualize the Child Care rate increases from Fiscal Year 2006.
- ◆ Recommend \$2,829.5 to fund additional special population placements, community residential placements and special school graduates in Developmental Disabilities Services. Also recommended is \$400.0 for a new group home for individuals with special behaviors.
- ◆ Recommend \$1,300.0 for the increasing costs of medications and \$564.4 for Community Continuum of Care Program placements in Substance Abuse and Mental Health.
- ◆ Recommend \$1,240.3 to annualize the Developmental Disabilities Services Medicaid waiver placements from Fiscal Year 2006 in Medicaid and Medical Assistance.
- ◆ Recommend \$1,022.2 to annualize community residential and vocational placements from Fiscal Year 2006 in Developmental Disabilities Services.

### CAPITAL BUDGET:

- ◆ Recommend \$2,000.0 for the Maintenance and Restoration Program. This funding will be used to maintain 167 buildings in their current condition and provide for necessary repairs and any additional unanticipated needs.
- ◆ Recommend \$3,000.0 for the Minor Capital Improvement and Equipment program to prevent deterioration of buildings and grounds and to continue to eliminate the department's backlog of deferred maintenance.
- ◆ Recommend \$5,598.2 for Critical Deferred Maintenance at the Delaware Psychiatric Hospital for electrical, plumbing and roofing repairs to the hospital infrastructure.

# HEALTH AND SOCIAL SERVICES

35-00-00

- ◆ Recommend \$19,825.5 for the completion of a new, 82,745 square foot Stockley Medical Center with a capacity of 45 beds.

## ADMINISTRATION

35-01-00

### MISSION

The mission of the Administrative unit is to provide leadership and policy direction for the Department of Health and Social Services to ensure the department is well managed in its delivery of services to clients. In addition, the unit exists to promote coordinated intra- and inter-departmental responses, providing a flexible resource to support the management needs of operating divisions.

### KEY OBJECTIVES

- Provide leadership in the development of public policies and in the advancement of responsive management practices.
- Provide technical assistance and support to operating divisions in the form of training, standard setting, budget and program analysis, planning and evaluation.
- Provide centralized administrative functions in accounting, human resources, payroll, contracts and procurement, management of state and federal funds, technology and facility operations.

### BACKGROUND AND ACCOMPLISHMENTS

The scope of the department's clients and its mission in serving them involves complicated social conditions. The organization must be in a position to respond to the present situation, using its resources creatively to solve problems. With on-going fiscal pressures, it is imperative that the organization continuously rethink how it can meet its objectives. This will entail communicating expectations, encouraging risk-taking and rewarding efforts that have achieved their purpose.

Several major efforts have been launched that require leadership from the Administrative unit to ensure that expectations for their implementation are realized. This may entail providing assistance to operating divisions to facilitate administrative procedures, coordinating the activities of the various participants in joint projects and communicating regularly with constituents to keep them informed.

# HEALTH AND SOCIAL SERVICES

## 35-00-00

Past accomplishments include:

- Upgrade of the network infrastructure which included replacing voice and data cabling at 16 DHSS locations;
- Implementation of the Avaya Telephone System, making the platform operational at seven DHSS locations and supporting approximately 2,400 staff;
- Completion of a Rapid Application Development project for the Office of Radiation which provided tracking of information on X-ray machine registrations and radiation technician/technologist certifications;
- Creation of a web-based application to handle the scheduling of appointments for administering flu vaccines to over 7,500 Delawareans; and
- Migration of the Interactive Voice Response Unit for the Division of Child Support Enforcement from an unsupported platform to the centralized DHSS platform including Spanish language scripts to better serve Spanish speaking clients.

The department must be alert to emerging topics to help shape how policy decisions are framed and understood. With the diverse constituency and the breadth of programs for which it is responsible, few social problems surface that do not have an impact on some facet of the department's work. It is important for the department to be a leader, spokesperson and active participant to ensure that linkages are made and implications are understood. It is also important that community awareness be developed around issues and topics that affect the department.

With an organization of approximately 5,000 people, the department faces the challenge of meeting the needs of an increasingly diverse workforce. Concurrently, greater demands are being felt to increase the accessibility and responsiveness of the service delivery system. A flexible work environment is needed to meet the needs of clients, while supporting employees and their families. In addition, training, professional development and management support are on-going requirements to enhance staff performance.

Just as these resources demand attention, so do the programs they serve: there is a volume of client and program data to be collected and analyzed; dollars spent must be accounted for; and quality must be monitored and contracts managed. Automation and technological support are critical to achieving and maintaining this balance. The department continues to proceed with systems development through the investment of one-time funding, reallocations and the reclassification of existing staff.

### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	30,270.2	31,483.0	33,182.0
ASF	3,251.5	3,852.1	3,852.1
<b>TOTAL</b>	<b>33,521.7</b>	<b>35,335.1</b>	<b>37,034.1</b>

### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	424.5	445.2	447.2
ASF	35.0	36.6	36.6
NSF	53.7	66.9	66.9
<b>TOTAL</b>	<b>513.2</b>	<b>548.7</b>	<b>550.7</b>

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### *OFFICE OF THE SECRETARY*

#### *35-01-10*

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#### ACTIVITIES

- Manage the department; provide leadership for human services delivery.
- Ensure coordination between agencies within the department.
- Maintain responsive and positive relationships with constituents, advisory councils and other citizen groups.
- Ensure effective coordination with the Governor's Office and other cabinet agencies.
- Manage the department's public information function.
- Ensure timely and appropriate responses to all directives, laws, judicial decisions, inquiries and policies.

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### *MANAGEMENT SERVICES*

#### *35-01-20*

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#### ACTIVITIES

- Conduct audit and recovery services relating to violations of all persons, vendors or service providers who commit acts of fraud in public welfare programs administered by the department.
- Coordinate preparation of the department's budget request and strategic plan.
- Monitor billing and collection and track revenue of all DHSS units providing health care services.

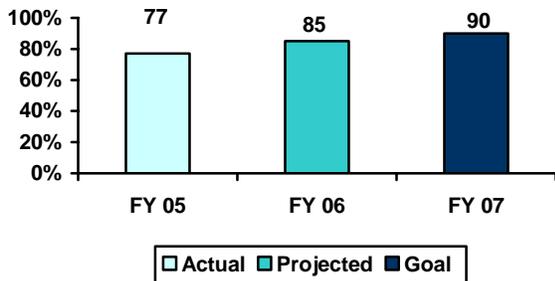
# HEALTH AND SOCIAL SERVICES

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- Manage the bidding, requisition and purchase order processes, as well as perform contract negotiations and development.
- Determine the eligibility for and accuracy of the benefits received by clients for Food Stamps and Medicaid.
- Conduct evaluations of DHSS programs.
- Process and track financial documents.
- Handle the financial reporting for Federal Grant Award processing.
- Maintain payroll records and update employee funding as appropriate for payment of employees.
- Conduct training, respond to employee requests, process applications for employment and provide guidance on merit rules.
- Provide automated mainframe and client/server applications support functions.
- Formulate, recommend and implement technology strategies critical to the department's twelve divisions.

## PERFORMANCE MEASURES

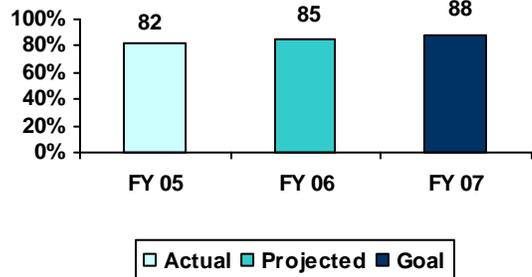
Families Receiving Multi-disciplinary Evaluations within 45 Days\*



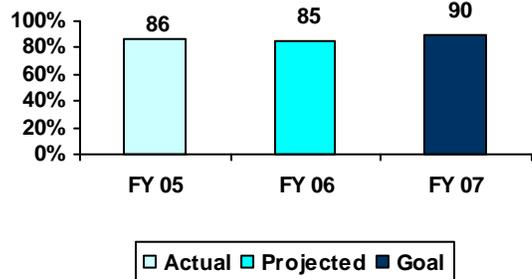
\* Data are based on cases selected for annual monitoring.

## PERFORMANCE MEASURES

Requests for Service Responded to within the Same Day



Preventive Maintenance Activities Completed per Schedule



## FACILITY OPERATIONS

35-01-30

### ACTIVITIES

- Track work orders and prioritize requests for service.
- Maintain a comprehensive preventive maintenance program.
- Manage equipment inventory.
- Identify, prioritize and manage deferred maintenance and Minor Capital Improvement (MCI) programs on a department-wide basis.
- Complete maintenance and restoration projects addressing critical maintenance, operational, code and licensing issues.

# HEALTH AND SOCIAL SERVICES

35-00-00

## MEDICAID & MEDICAL ASSISTANCE 35-02-01

### MISSION

The mission of the Division of Medicaid & Medical Assistance (DMMA) is to maximize the well-being and quality of life for eligible low-income individuals and other vulnerable segments of the population through the provision of overall leadership and direction in administering responsive, effective and efficient health care benefits.

### KEY OBJECTIVES

**Promote a comprehensive system of health care by balancing client needs, operational requirements and available resources.**

- Foster a health care delivery system that is predicated on preventive care to assure best possible health outcomes for eligible populations.
- Take action to ensure access and a health care safety net for children and adults with special needs, uninsured and under-insured individuals and other disadvantaged groups.
- Promote maternal and child health through a comprehensive benefit package.
- Enhance the quality of care through utilization review, disease management and case management.
- Foster the medical home concept by ensuring that beneficiaries have broad choices for their source of health care.
- Contain health care costs through integrated delivery without compromising quality.
- Actively implement initiatives to achieve performance measures.
- Develop initiatives that support DHSS community-based and institutional-based long-term care plans.

**Maintain an adequate network of health care providers.**

- Develop and enhance collaborative partnerships to provide enabling services that support health care delivery.
- Work with other governmental agencies, provider networks, beneficiaries and other stakeholders to ensure that health care financing and delivery is

managed well, coordinated, assures sufficient access and is a seamless delivery network.

- Continue to provide and coordinate non-emergency transportation services for medically needy appointments through a broker.
- Develop partnerships to support community-based and waiver programs.
- Continue to provide pharmacy benefits to eligible low-income individuals.

**Manage program growth through the effective use of resources with emphasis on information resource management, cost containment and strategies for economic efficiency.**

- Continue to maximize federal funding through cost recovery initiatives.
- Tailor customer service to meet the needs of various stakeholders.
- Foster client self-sufficiency and independence through education regarding appropriate use of medical benefits.
- Enhance cost-sharing through beneficiary participation, effective coordination of benefits, cost avoidance and Medicaid estate, accident and third party recoveries.
- Ensure the functionality of all automated systems and support the development of systems which enhance data analysis.
- Strategically manage data collection and analysis to enhance evidence-based decision making.
- Ensure diversified recruitment and retention of staff whose value-added contributions fit the mission of DMMA.
- Ensure that only eligible individuals receive health care benefits and providers are compliant.
- Adapt and adopt features of commercial managed care in implementing health care reforms.
- Enhance technical systems to provide information about policy changes to clients and providers.

### BACKGROUND AND ACCOMPLISHMENTS

DMMA administers a broad range of health care programs for Delaware's low-income individuals and families. These programs are funded by both the state and the federal governments and provide health benefits

# HEALTH AND SOCIAL SERVICES

35-00-00

to over 145,000 (1 out of every 6) Delaware residents each month. The major programs include:

- **Medicaid (Title XIX):** Serves low-income adults and children and provides a comprehensive package of services, ranging from primary care physician and pharmacy to long-term care nursing facility services;
- **Delaware Healthy Children Program (Title XXI):** Provides health insurance coverage to uninsured children under the age of 19 with family incomes between 101-200 percent of the Federal Poverty Level;
- **Delaware Prescription Assistance Program (DPAP):** Established by the Legislature in 1999 to annually provide up to \$2,500 per person of prescription benefits to qualified Delaware residents who are either over 65 years old or are below 65 with disabilities;
- **Chronic Renal Disease Program (CRDP):** Established by the Legislature in 1970 to assist Delaware residents diagnosed with end-stage renal disease; and
- **Non-Qualified Non-Citizen Health Care Program (NQNCP):** Established by the Legislature in 1998 to provide health care benefits for legally residing non-citizens who are not eligible for Medicaid benefits because of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996.

DMMA achieves its goals by:

- Improving access to health care for the elderly, disabled and low-income individuals;
- Strengthening maternal and child health based on shared values;
- Educating those we serve to lead healthy, independent, dignified and productive lives while stressing the importance of understanding and addressing the connection between community values and health status;
- Empowering beneficiaries in primary and preventive health care advocacy by supporting culturally competent service delivery and informed choices; and
- Efficient and effective management of the state's resources through good stewardship.

The Division of Medicaid and Medical Assistance implemented several initiatives related to its pharmacy services in order to improve quality of care and contain

costs. It eliminated duplicate therapies and required prior authorization of drugs where less expensive products would be equally effective.

DMMA has over 80 percent of its Medicaid eligibles and 100 percent of Delaware Healthy Children Program enrollees in a managed care plan. The majority of those individuals are managed by Delaware Physician Care Incorporated which specializes in the management of low-income populations.

## FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	--	412,051.6	473,037.2
ASF	--	27,862.3	27,258.3
<b>TOTAL</b>	<b>--</b>	<b>439,913.9</b>	<b>500,295.5</b>

## POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	--	74.3	73.1
ASF	--	--	--
NSF	--	101.8	100.9
<b>TOTAL</b>	<b>--</b>	<b>176.1</b>	<b>174.0</b>

## MEDICAID AND MEDICAL ASSISTANCE 35-02-01

### ACTIVITIES

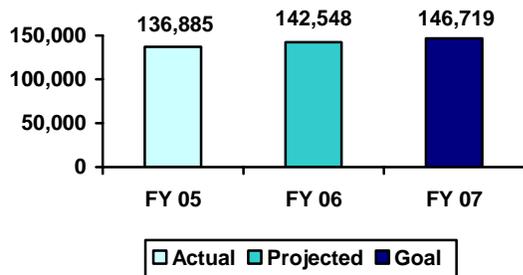
- Develop strategies to educate Medicaid clients regarding the importance of utilizing available medical services, particularly for prevention efforts.
- Modify automated systems and support as necessary to increase efficient operation of programs and services.
- Administer the Diamond State Health Plan (managed care) services.
- Provide health benefits to eligible individuals.
- Link families with other necessary services.
- Develop supportive collaborations and partnerships.
- Administer support and enabling services such as transportation.
- Manage budget, projects, facilities and contracting activities.
- Develop an organizational culture that respects individuals and recognizes that diversity is strength.

# HEALTH AND SOCIAL SERVICES

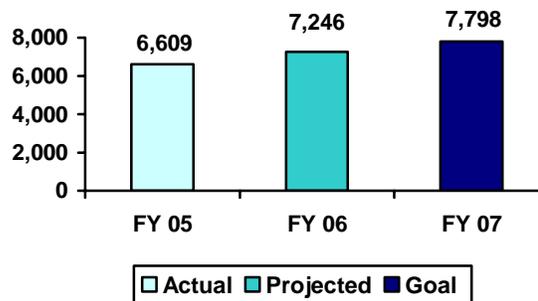
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### PERFORMANCE MEASURES

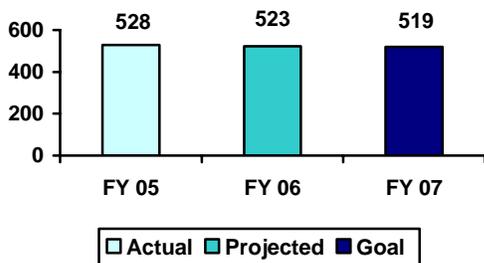
**Delaware Medicaid Program: Average Monthly Eligibles**



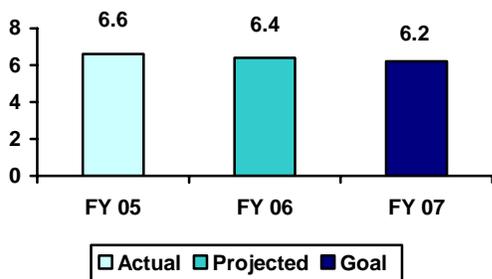
**Delaware Prescription Assistance Program: Average Monthly Eligibles**



**Delaware Chronic Renal Disease Program: Average Monthly Eligibles**



**Number of Days from Receipt of Clean Claim to Issuance of Medicaid Payment**



# HEALTH AND SOCIAL SERVICES

## 35-00-00

### MEDICAL EXAMINER

#### 35-04-00

#### MISSION

To promote the sound administration of justice through the investigation of sudden, accidental or suspicious deaths and the documentation and presentation of reliable qualitative and quantitative scientific analysis of chemical and biological evidence samples.

#### KEY OBJECTIVES

##### Promote Health and Well-Being

- Support law enforcement agencies in the state through the scientific analysis of drug evidence.

##### Protect Vulnerable Populations

- Investigate the essential facts surrounding sudden, accidental or suspicious deaths.
- Establish the cause and manner of death within reasonable medical certainty for all investigated deaths.
- Determine the positive identity of unidentified human remains.
- Maintain the state's DNA database.

#### BACKGROUND AND ACCOMPLISHMENTS

The Office of the Chief Medical Examiner was established in 1970 when the constitutionally-mandated system of county coroners, deputy coroners and coroner's physicians was abolished. It exists to investigate all sudden, accidental or suspicious deaths that occur in Delaware.

During Fiscal Year 2005, the Office of the Chief Medical Examiner:

- Investigated 3,391 deaths statewide;
- Examined more than 2,384 controlled substances cases totaling 9,611 exhibits;
- Received 87 DNA cases;
- Analyzed 706 DUI cases; and
- Performed toxicology analysis on 760 postmortem cases.

#### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	3,626.0	3,667.5	4,074.1
ASF	--	--	170.0
<b>TOTAL</b>	<b>3,626.0</b>	<b>3,667.5</b>	<b>4,244.1</b>

#### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	38.0	41.0	43.0
ASF	1.0	--	--
NSF	--	--	--
<b>TOTAL</b>	<b>39.0</b>	<b>41.0</b>	<b>43.0</b>

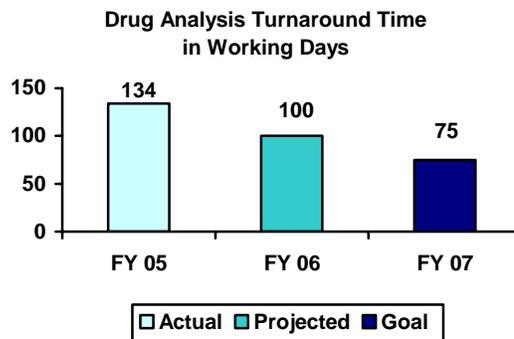
### MEDICAL EXAMINER

#### 35-04-01

#### ACTIVITIES

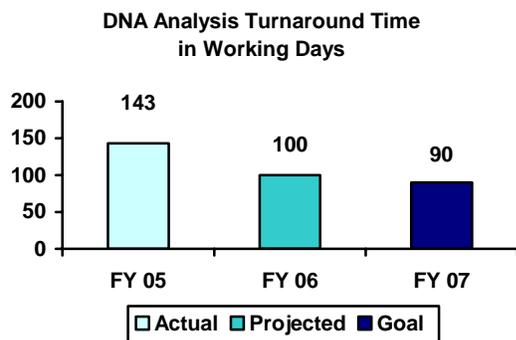
- Conduct medicolegal investigation of all sudden, accidental or suspicious deaths.
- Perform post-mortem examinations.
- Identify human remains.
- Analyze post-mortem toxicology samples.
- Perform scientific analysis of drug evidence.
- Provide transportation of drug and biological evidence to the Forensic Sciences Laboratory.
- Analyze urine and blood samples for the presence of drugs and alcohol.
- Analyze biological evidence for the presence of DNA.
- Maintain a convicted felons DNA database.
- Analyze arson evidence for the State Fire Marshal.
- Provide court testimony by pathologists, other forensic scientists and medicolegal investigators.

#### PERFORMANCE MEASURES



# HEALTH AND SOCIAL SERVICES

35-00-00



## PUBLIC HEALTH

35-05-00

### MISSION

The mission of the Division of Public Health (DPH) is to protect and improve the health of the people of Delaware by:

- Developing policies that address issues affecting the health of Delawareans;
- Monitoring the health status of the state's citizens through the collection and interpretation of data;
- Developing plans to improve health status and working collaboratively with various communities and agencies to affect positive health change;
- Providing health education and health promotion activities to increase awareness and improvement of personal well-being;
- Responding efficiently and effectively to critical health-related events; and
- Assuring the availability of health care when community resources are not otherwise available.

### KEY OBJECTIVES

The Division of Public Health supports the department's mission through focusing on key objectives that address several components of the DHSS mission.

#### Promote Health and Well-Being

- Provide leadership to communities and various state and private agencies to foster collaborative efforts to positively impact public health.
- Enhance the quality of public health services provided to Delawareans.
- Promote prevention strategies to address health problems in Delaware.
- Collaborate and develop partnerships with other state and private community-based agencies to address the health needs of Delawareans.

#### Protect Vulnerable Populations

- Protect Delawareans from threats of emerging pathogens (e.g., bioterrorism and influenza pandemics).
- Address environmental health issues related to public health.

# HEALTH AND SOCIAL SERVICES

35-00-00

- Provide nursing home services to those unable to afford them.
- Provide core public health services to special populations.

## BACKGROUND AND ACCOMPLISHMENTS

DPH has evolved from an organization that mainly provided direct health care services to residents of the state and enforced various health regulations, to an agency that works collaboratively with communities and other organizations to protect and enhance the health of Delaware's citizens.

DPH has placed renewed emphasis on the core functions of public health: assessment, assurance and policy development. DPH collects and analyzes various health data, provides disease investigations and critical public health laboratory testing to ensure the public's health is safeguarded. Assurance efforts include environmental health monitoring, public information, health education and collaborating with communities and various state and local organizations to assure access to health care services for Delawareans. The division has expanded its leadership efforts to work directly with communities to identify health problems, provide data regarding these problems and assist communities with developing strategies to address their health concerns. Policies that are promulgated to protect citizens' health involve the input of many individuals and organizations. This process ensures that these policies are appropriate and effective to address areas of public health concern.

Public Health continues to provide direct services in critical public health areas. DPH offers a wide range of services that include targeting highly contagious diseases and offering family planning services to high-risk individuals. Collaboration with other organizations has lead to improved and expanded health services for cancer patients, adolescents through school-based health centers and vulnerable populations such as those diagnosed with HIV disease or AIDS.

The division continues to examine the core public health functions and the activities that are necessary to ensure that Delawareans live full and healthy lives in a healthy environment. A continued focus on assessment, assurance and policy development, as well as providing personal health services to special populations or populations at risk will help the state realize improvement in the health of its citizens.

### Accomplishments

- Twenty-eight school-based health centers are open and operating with the latest addition of Caesar

Rodney. The number of visits and student contacts to these wellness centers continue to increase.

- Assisted with the funding of infrastructure improvements to public water systems throughout the state.
- Developed and implemented an electronic disease reporting system to respond more rapidly to communicable disease outbreaks, including bioterrorism.
- Provided inspections and on-going monitoring of public drinking water systems.
- Planned and implemented prevention and disease control initiatives for cancer, tobacco, diabetes, community health promotion and child lead poisoning prevention.
- Enhanced maternal/child healthcare for high-risk pregnant women, prenatal care and well-child preventive health services for the uninsured including dental services.

## FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	82,111.1	75,472.8	87,626.1
ASF	17,782.5	21,898.1	25,869.6
<b>TOTAL</b>	<b>99,893.6</b>	<b>97,370.9</b>	<b>113,495.7</b>

## POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	1,228.1	1,225.1	1,222.1
ASF	53.8	57.8	60.8
NSF	246.2	249.2	250.2
<b>TOTAL</b>	<b>1,528.1</b>	<b>1,532.1</b>	<b>1,533.1</b>

## DIRECTOR'S OFFICE/SUPPORT SERVICES 35-05-10

### ACTIVITIES

- Implement electronic birth module for vital records to enhance public access to birth certificates.
- Develop, review, monitor and evaluate the division's contracts.
- Review and coordinate all federal and foundations grants.
- Provide fiscal management.
- Procure and manage the revenue: state, special funds and federal grants.
- Oversee all capital improvement projects and leaseholds.

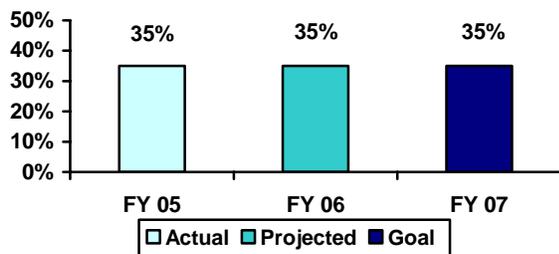
# HEALTH AND SOCIAL SERVICES

35-00-00

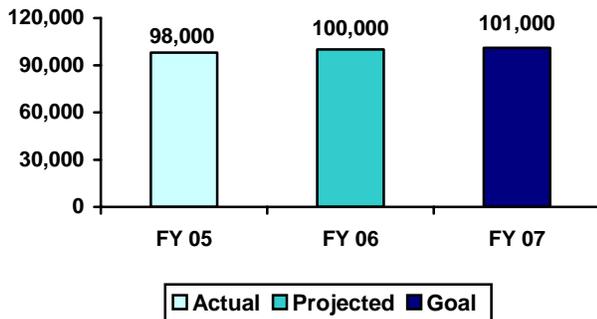
- Coordinate all management information systems utilized by the division's diverse programs.
- Coordinate system automation projects, both internally and externally.
- Provide and promote core public health skills training to employees.
- Charged with collecting and cataloging vital statistics for the residents of the State.

## PERFORMANCE MEASURES

Total Contracts Audited



Number of Vital Records Processed\*



\* Includes birth, death, fetal death, marriage and divorce records.

- Provide environmental health consultative services to other state agencies and the public, on exposures and health risks, on a routine basis and during emergencies.
- Work in close cooperation with the Department of Natural Resources and Environmental Control, Department of Agriculture and other agencies that monitor contaminants in various environmental media.
- Develop a data reporting and tracking program for private well water analysis conducted by all water testing laboratories.
- Issue loans to public water supplies for infrastructure improvement via the Drinking Water State Revolving Fund.
- Conduct routine testing of public water supplies in accordance with state regulations and the Safe Drinking Water Act.
- Increase public awareness about childhood lead poisoning.
- Provide lead screening of children at high risk of lead poisoning in a timely manner.
- Provide high quality service and assistance to families of children with elevated blood lead levels, including evaluation, education and medical referrals.
- Promote early entry and continued use of quality prenatal care with a full array of enabling and psychosocial services.
- Partner with community and professional organizations to promote culturally competent health services through assessing cultural competence and measuring client satisfaction.
- Provide contraceptive counseling and access to family planning services to reduce unwanted, mistimed and closely spaced pregnancies, especially among high-risk populations.
- Identify pregnant women and mothers at risk for poor birth outcomes early and provide appropriate screening, counseling, education and access to health care.

## COMMUNITY HEALTH

35-05-20

### ACTIVITIES

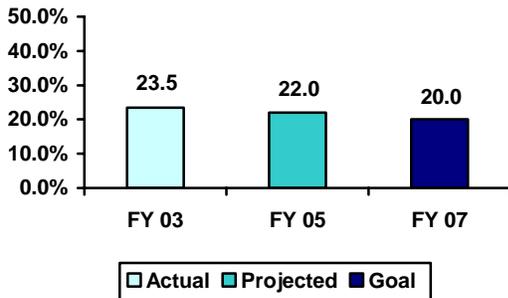
- Develop and deliver targeted educational programs and messages to the general public and populations at increased risk for developing cancer and chronic diseases.
- Support the Advisory Council on Cancer Incidence and Mortality in their implementation of the comprehensive cancer control plan for Delaware.
- Develop a plan to expand the existing Breast and Cervical Cancer Early Detection Program (Screening for Life) into a comprehensive state cancer program.

# HEALTH AND SOCIAL SERVICES

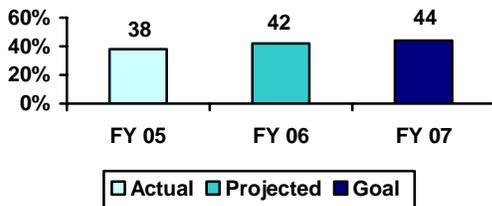
## 35-00-00

### PERFORMANCE MEASURES

**Prevalence of Tobacco Use by Delaware High School Students**

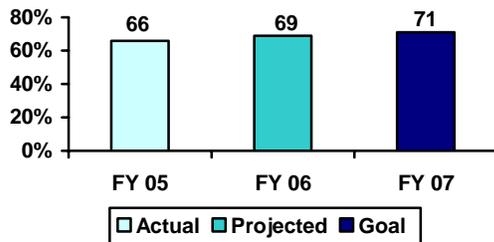


**Colorectal Cancers Detected at Local Stage\***



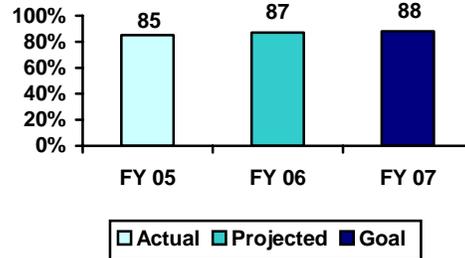
\* Local stage is defined as a cancer this is confined to the place where it started & has not spread to other parts of the body.

**Breast Cancers Diagnosed At Local Stage\***



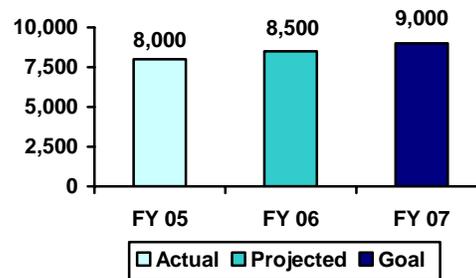
\* Local stage is defined as a cancer this is confined to the place where it started & has not spread to other parts of the body.

**Children Adequately Immunized\***

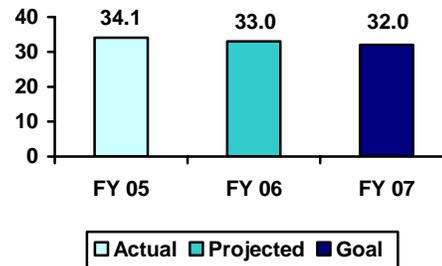


\*Requires 4DPT, 3 polio, 1 measles; National Immunization Survey, Centers for Disease Control and Prevention.

**Number of Medicaid Clients Seen in DPH Dental Clinics (Unduplicated Clients)**



**Rate of Birth Among Teenage Girls 15-17 Years of Age (rate per 1,000 births)**



### EMERGENCY MEDICAL SERVICES

35-05-30

#### ACTIVITIES

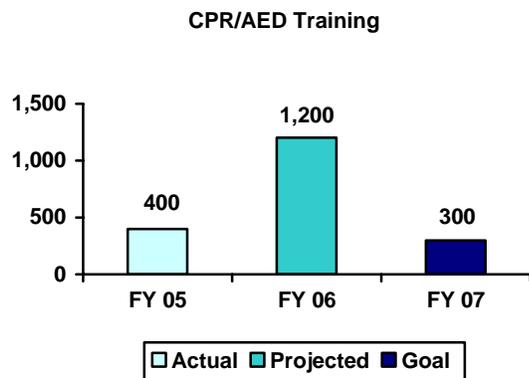
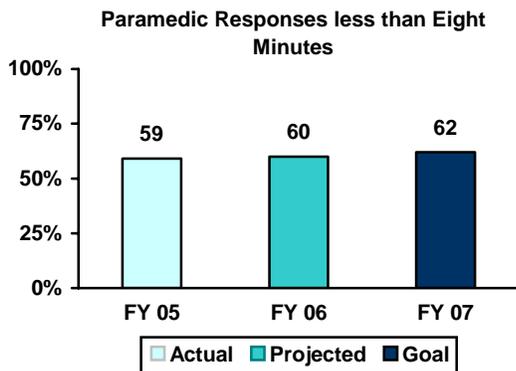
- Standardize and continuously improve capacity to collect Emergency Medical Services (EMS) data and accurately measure response times.
- Support paramedic agency initiatives to streamline deployment strategies.

# HEALTH AND SOCIAL SERVICES

35-00-00

- Deploy an improved statewide EMS data collection system that interfaces on a real-time basis with Computer Aided Dispatch and Global Positioning Data.
- Participate in community events to increase public awareness of the Chain of Survival (Early access to 911 - Early Defibrillation - Early Advanced Life Support Care (ALS) - Early Hospital Intervention) Program.
- Partner with the first responder system (police, fire, EMS, safety teams, school nurses, etc.) to assist with CPR/AED awareness and training initiatives to improve the time to defibrillation.
- Assist agencies that have received AEDs to replace electrodes and batteries.
- Offer train-the-trainer programs in CPR/AED to participating agencies, which will in turn offer at least two community CPR/AED classes to the general public.

## PERFORMANCE MEASURES



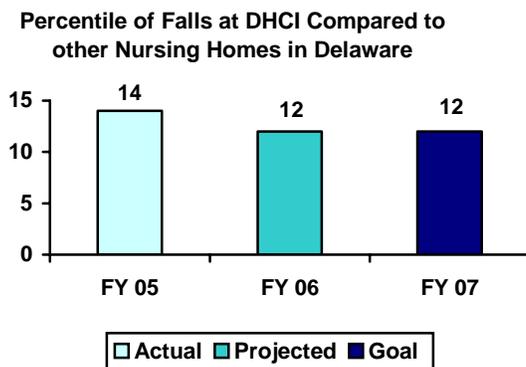
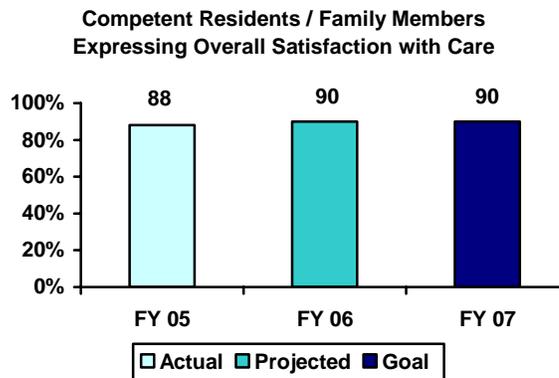
## *DELAWARE HOSPITAL FOR THE CHRONICALLY ILL*

35-05-40

### ACTIVITIES

- Operate a 300-bed nursing facility, comprised of 76 skilled and 224 intermediate beds.
- Provide immediate admission on an emergency basis for individuals referred from Adult Protective Services.
- Operate an integrated continuous quality improvement program.
- Operate a 25-bed secure care unit for cognitively impaired residents at high-risk for wandering.
- Operate an adult day care center to allow residents to stay in their homes.
- Operate a Central Intake unit for the Division of Public Health Long Term Care (LTC) facilities.
- Provide financial management for resident trust funds and revenue managements.

## PERFORMANCE MEASURES



# HEALTH AND SOCIAL SERVICES

## 35-00-00

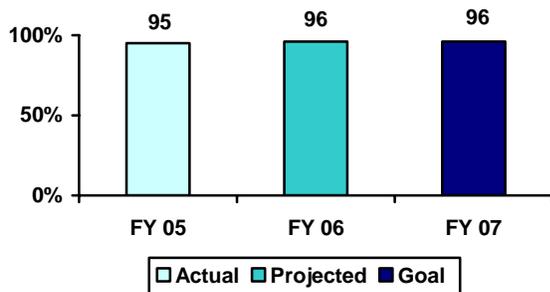
**EMILY BISSELL**  
35-05-50

### ACTIVITIES

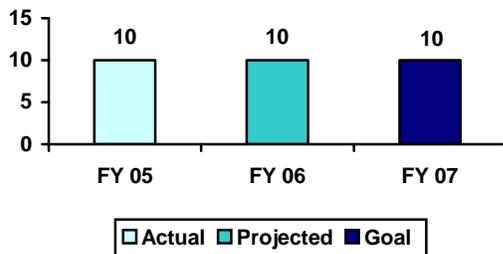
- Operate an 82-bed nursing facility; all of the beds are skilled.
- Provide immediate admission on an emergency basis for individuals referred from Adult Protective Services.
- Operate an integrated continuous quality improvement program.
- Provide Nurses Aide Certification Training Program.
- Provide support to community-based Long Term Care services.

### PERFORMANCE MEASURES

**Competent Residents / Family Members Expressing Overall Satisfaction with Care**



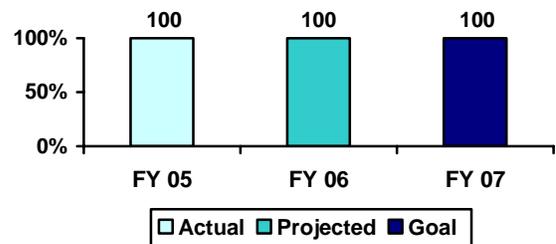
**Percentile of Falls at EPBH Compared to other Nursing Homes In Delaware**



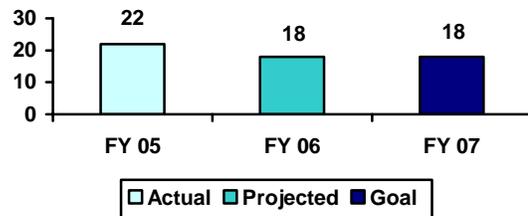
- Provide immediate admission on an emergency basis for individuals referred from Adult Protective Services.
- Operate an integrated, continuous quality improvement program.
- Operate an automated system for interdisciplinary care planning and documentation, timekeeping accounts receivable, patient census tracking and inventory management.
- Maintain utilities and infrastructure for other state agencies and contractors that operate on campus.
- Provide Nurses Aide Certification Training Program.

### PERFORMANCE MEASURES

**Competent Residents / Family Members Expressing Overall Satisfaction with Care**



**Percentile of Falls at GBHC Compared to other Nursing Homes in Delaware**



**GOVERNOR BACON HEALTH CENTER**  
35-05-60

### ACTIVITIES

- Operate an 88-bed nursing facility.

# HEALTH AND SOCIAL SERVICES

35-00-00

## SUBSTANCE ABUSE AND MENTAL HEALTH 35-06-00

### MISSION

To improve the quality of life for adults having mental illness, alcoholism, drug addiction or gambling addiction by promoting their health and well-being, fostering their self-sufficiency and protecting those who are at-risk.

### KEY OBJECTIVES

- Provide an integrated and coordinated continuum of community-based substance abuse and mental health care that promotes recovery, wellness and self-sufficiency, through prevention, early intervention and treatment.
- Implement a service delivery system that is informed by research and based on best practice guidelines and principles.
- Ensure access to services for those consumers and clients in need of publicly funded support, through an improved process of determining eligibility, referring to an appropriate level of care based on need and transferring to different levels of care.
- Provide specialized and culturally competent treatment, intervention and prevention services to special populations and traditionally underserved groups. This includes: young adults, older adults, persons involved in the criminal justice system, substance abusing pregnant women, women with dependent children, and racial and ethnic minorities.
- Facilitate consumers and clients in attaining recovery and community integration as reflected by community tenure, attainment of employment, access to housing and/or residential stability, and healthy personal relationships.
- Reduce the over-utilization of the Delaware Psychiatric Center and designated facilities for involuntary commitment.
- Strengthen inter-departmental and inter-agency collaboration in order to provide more comprehensive and integrated community-based health and behavioral health care for adults.

### BACKGROUND AND ACCOMPLISHMENTS

As noted in Healthy Delaware 2010, disparities in behavioral health services (i.e., mental health and substance abuse treatment) have a devastating impact on vulnerable at-risk populations and those in need of treatment services. The goal of the division is to reduce the incidence and prevalence of mental disorders; substance abuse disorders; pathological gambling; ensure that behavioral health services are consumer and family driven; and facilitate recovery and community integration. The division's programs are designed to reduce hospitalization, improve health and wellness, and build resilience and coping skills.

In the last five years the division has developed a number of strategies and programs to reduce the census at the Delaware Psychiatric Center. Admissions continue to be redirected to community psychiatric hospitals. The continuum now contains 21 24-hour supervised residential programs developed to meet the needs of consumers who need long-term care and would otherwise be in the Psychiatric Center.

The Crisis and Psychiatric Emergency Services (C.A.P.E.S.) program is a collaborative effort between Christiana Care's Health Services Department of Psychiatry and the division. The program is located at Christiana Care's Wilmington Hospital Emergency Department. It operates 24-hours a day, 7 days a week, and provides psychiatric and substance abuse assessments. By having a separate unit within the Emergency Department, clients can be held longer to assess the appropriate level of care. This additional time helps to reduce the number of clients sent to area hospitals on mental health commitments.

Last year, the four Community Mental Health clinics instituted Front Door teams to provide immediate access to mental health assessment and evaluation. This has eliminated waiting lists at the clinics and facilitated appropriate referral and treatment for those individuals needing behavioral health interventions.

The Front Door teams assure rapid access to mental health care, triage to determine the needs of the individual, and assistance in obtaining referral to social and medical services. In addition, the Front Door teams provide short-term therapeutic interventions and targeted psychiatric services. Finally, the Front Door teams provide access to services to individuals in psychiatric crisis and next day services to individuals discharged from psychiatric in-patient facilities.

Services for persons with substance abuse disorders are an integral component of the division's continuum of care. An extensive body of research shows that with

# HEALTH AND SOCIAL SERVICES

**35-00-00**

treatment, primary drug use decreases by nearly half. In addition, reported alcohol and drug-related medical visits decline by more than 50 percent, criminal activity by as much as 80 percent and financial self-sufficiency improves (e.g., employment increases, and welfare receipt and homelessness declines).

The division continues to use performance based contracting with its comprehensive substance abuse outpatient treatment providers. By connecting performance to payment amount, this approach rewards results. The client performance components rewarded under the contracts are: engagement, active participation and graduation.

The division was also selected by the Center for Substance Abuse Treatment and the Robert Wood Johnson Foundation to participate in the Network for the Improvement of Addictions Treatment. Outpatient treatment programs are using this project to improve access to and retention in treatment.

This year, the division has focused on ensuring that the outpatient substance abuse and mental health clinics have the capacity to assess and evaluate those individuals who present with a co-occurring substance abuse and mental health disorder. Approximately 35 to 40 percent of those seeking public services need to receive treatment that addresses both disorders concurrently.

### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	74,743.1	77,277.8	82,300.1
ASF	1,369.5	4,243.1	4,489.7
<b>TOTAL</b>	<b>76,112.6</b>	<b>81,520.9</b>	<b>86,789.8</b>

### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	785.4	781.4	780.4
ASF	8.0	7.0	7.0
NSF	4.8	4.8	8.8
<b>TOTAL</b>	<b>798.2</b>	<b>793.2</b>	<b>796.2</b>

## ADMINISTRATION

**35-06-10**

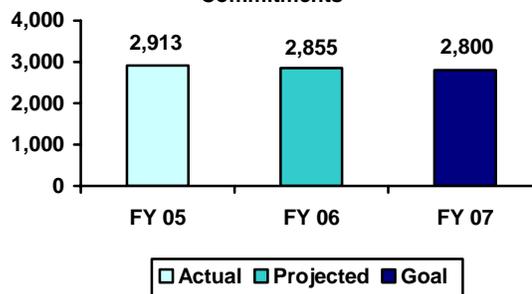
### ACTIVITIES

- Plan, develop and evaluate programs.
- Prepare and administer budgets and federal grants.
- Manage fiscal and contract services.
- Coordinate and provide training for the division and its contractors.

- License alcohol and drug abuse programs and certify community service programs.
- Monitor programs and patient rights.
- Develop an automated clinical care system.
- Manage eligibility and enrollment services for clients/consumers in need of behavioral health treatment services to ensure placement in the appropriate level of care.
- Enhance the role of the division's Medical Director position to include oversight of community-based psychiatric care.
- Ensure service coordination among service systems, specifically the Department of Correction and Department of Services for Children, Youth and Their Families.

### PERFORMANCE MEASURE

**Involuntary Inpatient Psychiatric Commitments\***



*\*Involuntary inpatient psychiatric commitments serve as a broad measure of successfully serving persons in the community as opposed to a psychiatric hospital*

## COMMUNITY MENTAL HEALTH

**35-06-20**

### ACTIVITIES

- Provide mental health treatment, community counseling and support services.
- Continue to make available new medications for persons with mental illness.
- Provide supported housing services that promote independent living and community integration.
- Restructure the Community Mental Health clinics to improve access and quality of care.
- Work with Vocational Rehabilitation to provide supported employment services that assist clients in securing and maintaining meaningful and appropriate employment.

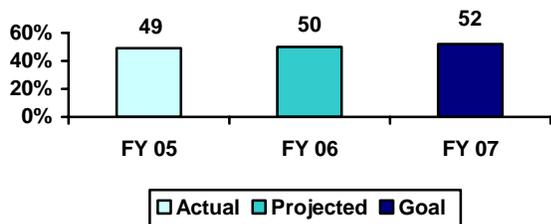
# HEALTH AND SOCIAL SERVICES

## 35-00-00

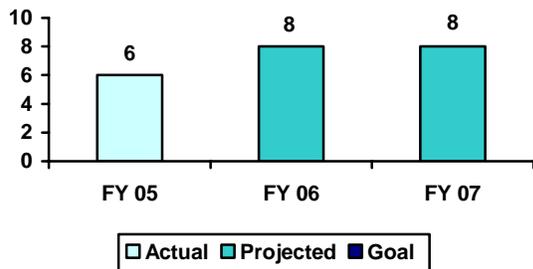
- Deploy mobile crisis intervention staff to improve effectiveness in working with hospital emergency rooms and the police on mental health commitments.

### PERFORMANCE MEASURES

Consumers in Community Support Programs Available for Work who are Employed



Number of Supervised Apartments




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### DELAWARE PSYCHIATRIC CENTER

#### 35-06-30

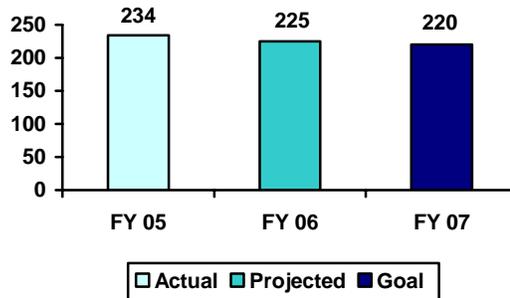
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### ACTIVITIES

- Provide psychiatric evaluation, diagnosis and treatment.
- Continue to develop nurse recruitment and retention initiatives to ensure adequate staff at the Delaware Psychiatric Center.

### PERFORMANCE MEASURE

Average Daily DPC Census




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### SUBSTANCE ABUSE

#### 35-06-40

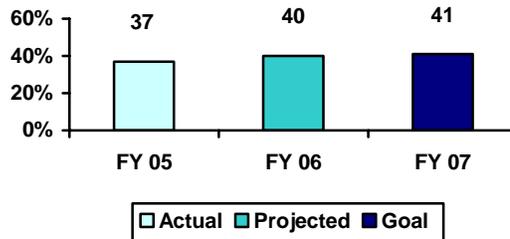
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### ACTIVITIES

- Provide substance abuse treatment and prevention services.
- Refer and treat persons with co-occurring mental illness and substance abuse disorders.
- Provide assessment and case management services for clients sentenced by the drug court.

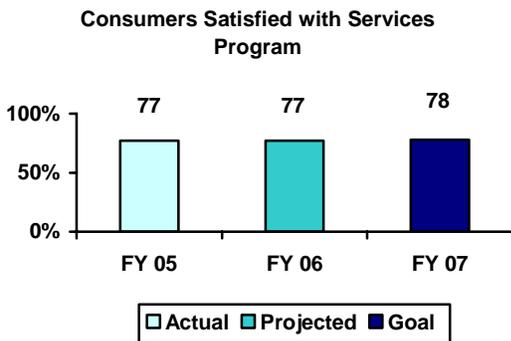
### PERFORMANCE MEASURES

Detoxification Clients who Received One or More Other Treatment Services



# HEALTH AND SOCIAL SERVICES

35-00-00



## SOCIAL SERVICES

35-07-00

### MISSION

The mission of Social Services is to protect vulnerable populations and provide an integrated system of opportunities, services and income supports that enable low-income individuals and families to develop self-sufficiency and achieve and maintain independence.

### KEY OBJECTIVES

**Foster self-sufficiency and independence through service delivery improvements in Delaware's welfare initiatives.**

- In partnership with the Department of Labor, Delaware Economic Development Office, Department of Transportation and contracted service providers, place welfare clients in employment or work activities and provide support for long-term employment retention.
- Achieve federal and state mandates for the Temporary Assistance for Needy Families Program (TANF) work participation rates for welfare clients.
- Ensure access for parents requiring infant care and other hard to find child care through community partnerships and quality improvements.
- Where feasible, develop policies and structures that support the Early Success Report.
- Evaluate the results of the TANF Program to ensure programmatic compliance and the achievement of expected outcomes.

**Manage resources efficiently with emphasis on information resource management, service quality, cost containment and maximizing economic efficiency in Social Services programs.**

- Continue to improve division administration, program management, operations and customer service to maximize both efficiency and service quality.
- Reallocate existing staff/program resources to best achieve organizational mission.
- Ensure diversified recruitment practices.
- Ensure that only eligible persons receive benefits and benefits are in correct amounts.

# HEALTH AND SOCIAL SERVICES

## 35-00-00

### BACKGROUND AND ACCOMPLISHMENTS

Social Services administers a broad range of programs for Delaware's low-income families and individuals. These programs are regulated and funded by both the state and the federal governments and are provided to over 60,000 Delawareans each month. The major program areas are:

- Subsidized child day care which enables low-income parents to become and remain employed and to empower them on their journey to stabilization;
- Financial Assistance including Temporary Assistance for Needy Families, Emergency Assistance, General Assistance, Refugee Assistance and Food Stamps; and
- Eligibility for poverty related Medicaid categories, as well as, the Delaware Healthy Children Program.

The division achieves its goals by:

- Increasing client financial independence through community partnerships;
- Strengthening families and encouraging personal responsibility; and
- Identifying gaps and overlaps in service delivery; taking appropriate steps to manage resources efficiently.

Some of the major accomplishments include:

- Decrease in the TANF average monthly caseload by 1.2 percent from Fiscal Year 2004 to Fiscal Year 2005;
- Management of the increasing Food Stamp and Medicaid caseload volume through resource management which includes increased automation, as well as, improved program management and staff performance; and
- Increase in the number of children receiving subsidized child care from 1,528 in Fiscal Year 1987 to 13,926 in Fiscal Year 2005.

### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	423,230.5	50,679.7	55,053.6
ASF	32,957.7	2,515.5	2,515.5
<b>TOTAL</b>	<b>456,188.2</b>	<b>53,195.2</b>	<b>57,569.1</b>

### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	278.7	200.2	201.4
ASF	--	--	--
NSF	312.3	207.3	208.2
<b>TOTAL</b>	<b>591.0</b>	<b>407.5</b>	<b>409.6</b>

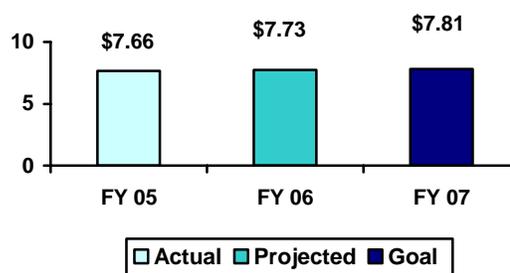
### SOCIAL SERVICES 35-07-01

### ACTIVITIES

- Act as a catalyst in fostering the independence, self-sufficiency and empowerment of vulnerable segments of the population.
- Perform independent, external review of quality, outcomes, timeliness of, and access to services.
- Enforce compliance with program rules and regulations through utilization and financial review of provider operations.
- Assure appropriate utilization of benefits by safeguarding against fraudulent and inappropriate use of services.
- Partner with community organizations to provide services to needy families and individuals.
- Create awareness of the scope of the division's programs within the community and linking families with necessary services.
- Administer enabling services such as child day care and transportation.
- Manage budgeting, fiscal, facilities and contracting activities to achieve efficiency.
- Manage automated and data management systems.
- Collect and organize data to analyze program trends and outcomes.

### PERFORMANCE MEASURES

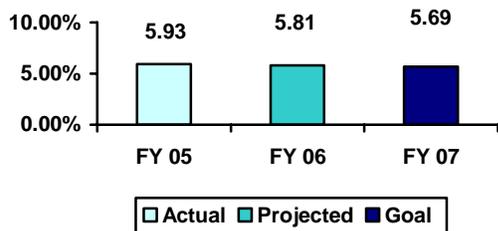
**Temporary Assistance for Needy Families:  
Average Hourly Wage for Job Placements\***



# HEALTH AND SOCIAL SERVICES

## 35-00-00

Delaware's Food Stamp Error Rate



## VISUALLY IMPAIRED

### 35-08-00

#### MISSION

To work in partnership with Delawareans who are blind and visually impaired empowering them to be self-sufficient.

Services provided include:

- Early diagnosis and intervention.
- Education in the least restrictive environment.
- Family and individual counseling.
- Independent living skills, training and equipment.
- Vocational training and related job placement.
- Employment opportunities.
- Advocacy.
- Low vision evaluation and enhancement.

#### KEY OBJECTIVES

- Promote health and well being, by reducing or eliminating all barriers to lifelong personal independence produced by the sensory disability of vision loss.
- Foster self-sufficiency, by developing and administering employment and job related skill training programs for persons who are blind or visually impaired.
- Protect vulnerable populations, by focusing outreach efforts in underserved communities.

#### BACKGROUND AND ACCOMPLISHMENTS

Approximately 3,000 persons who are legally blind or severely visually impaired have been identified throughout the state. Services are developed and provided to three major groups of consumers:

- Educational age (0-21)
- Primary employment age (21-65)
- Older Delawareans (66+)

The Division for the Visually Impaired (DVI) is organized into three primary service programs: Educational Services, Vocational Rehabilitation and Independent Living. Additionally, there are two direct

# HEALTH AND SOCIAL SERVICES

35-00-00

employment units: Delaware Industries for the Blind and the Business Enterprise Program. Finally, there are support services such as the Materials Center, Volunteer Services, Orientation and Mobility Services, Low Vision Services, Training Center Services, Fiscal Operations and Information Systems Support.

The goal of DVI is to provide instruction in the least restrictive environment. Due to the nature of the disability, DVI staff provides the majority of services in the most appropriate and effective environment, such as the home, work or school.

During Fiscal Year 2005, 186 children with visual impairments and their families received quality services from the Education Services unit. These services, which include itinerant instruction and counseling services to children and their families, were provided in their home or school classroom.

Independent Living Services for persons with visual impairments were provided to 1,051 persons during Fiscal Year 2005. Over 78 percent of the individuals served were aged 55 or older, a decrease from 82 percent during the previous year. Over 48 percent of the 55 and older population served had macular degeneration. In addition, the majority of the 1,051 served were consumers who referred themselves, had at least a high school education, lived alone in their own residence and had experienced their vision loss over ten years. Areas of instruction included: daily living skills, communication devices, and low vision aids and evaluations.

Last year, Vocational Rehabilitation services were provided to 132 Delawareans. Of these individuals, nine consumers were successfully placed in employment; all in competitive positions within an integrated setting, earning minimum wage or above including employer provided benefits.

In the area of support service programs, the Low Vision program served 220 consumers last year. Orientation and Mobility services were provided to 154 consumers. This was virtually the same number of consumers served in the prior year.

DVI has 80 active volunteers working as Brailleists, narrators, readers and office assistants. In addition, 13 inmates provide Brailleing and large print services through the Men with a Message prison Brailleing program. The volunteers and prisoners helped to generate 47,829 pages of Braille, 255 audiotapes and 34,578 large print pages during Fiscal Year 2005. Currently 12 inmates are certified Brailleists through the Library of Congress in Literary Braille. Of the 12 inmates providing Braille services, two are certified in Nemeth Code (Mathematical Braille) and two others are

in training for Nemeth Code certification. Additionally, one inmate is certified as a Nemeth proof reader, one is a Literary Braille proof reader and one has completed training to transcribe Spanish into Braille.

The Business Enterprise Program (BEP) has continued to work on adjusting business practices to meet the demands of their customer base. The average earnings by vendors were \$35,475 in Federal Fiscal Year 2004, compared to \$30,446 per operator in Federal Fiscal Year 2003. The BEP has also worked on and completed a training curriculum to be used for in-state training for visually impaired and blind Delawareans in food service management.

In Fiscal Year 2005, the Delaware Industries for the Blind (DIB) established a new training program and a new marketing program to prepare interested individuals for positions within DIB. These efforts will expand the potential for in-house skilled laborers. DIB received an Excellent Suppliers Award from the U.S. Department of Agriculture.

## FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	2,651.2	2,920.4	3,122.2
ASF	455.9	1,161.2	1,161.2
<b>TOTAL</b>	<b>3,107.1</b>	<b>4,081.6</b>	<b>4,283.4</b>

## POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	40.4	40.4	40.4
ASF	3.0	3.0	3.0
NSF	26.6	26.6	26.6
<b>TOTAL</b>	<b>70.0</b>	<b>70.0</b>	<b>70.0</b>

## VISUALLY IMPAIRED SERVICES 35-08-01

### ACTIVITIES

- Provide an education program designed to minimize the effects of a visual disability on the academic achievements of students through the efforts of itinerant teachers and child counselors and the provision of textbooks and instructional materials in appropriate medium.
- Provide support to individuals age 14 and older to assist in the transition from an educational environment to one of employment.

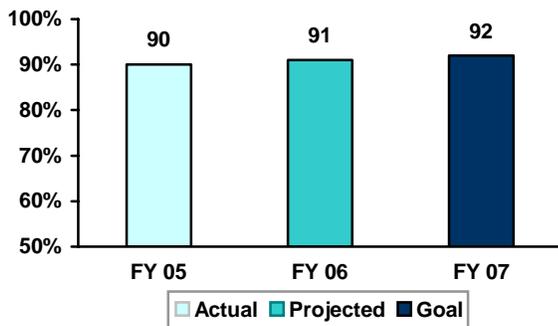
# HEALTH AND SOCIAL SERVICES

## 35-00-00

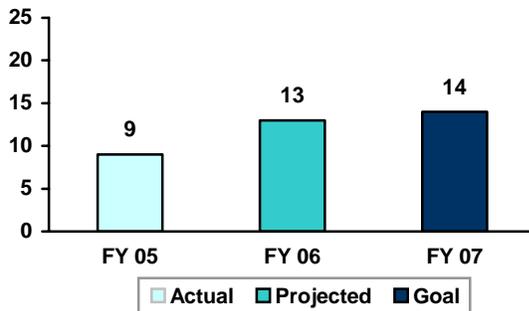
- Supply Independent Living Services to persons of all ages in the areas of adaptive training, low-tech adaptive equipment, as well as counseling.
- Provide Vocational Rehabilitation and Supported Employment programs, which offer community-based services focusing on the individual placement model.
- Facilitate a Business Enterprise Program with various positions the food service industry, management of food service locations and vending operations.
- Administer an industry employment program (Delaware Industries for the Blind) that allows for the development of employment skills and opportunities for competitive, supportive and short or long term agency employment.

### PERFORMANCE MEASURES

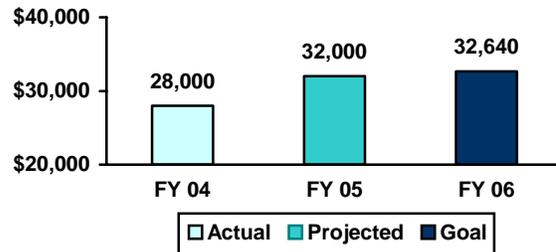
**Independent Living Services  
Percent of Goals Achieved**



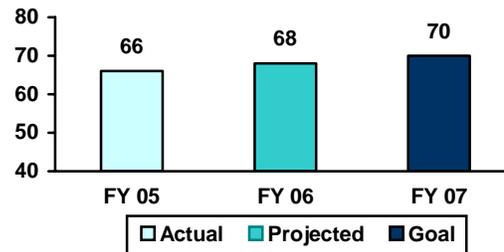
**Number of Successful Job Placements in a  
Competitive Setting**



**Business Enterprise Program  
Average Vendor Earnings**



**Division for the Visually Impaired  
Number of Blind/Visually Impaired Employees**



# HEALTH AND SOCIAL SERVICES

35-00-00

## LONG TERM CARE RESIDENTS PROTECTION 35-09-00

### MISSION

The mission of the Division of Long Term Care Residents Protection is to promote the quality of care, safety and security of people living in long term care facilities and to ensure facilities' compliance with applicable state and federal laws and regulations designed to protect these residents.

### KEY OBJECTIVES

- Decrease the average number of days to complete abuse, neglect and financial exploitation investigations.
- Maintain the number of days in completing state and federal criminal background checks.
- Increase the number of off-hour, unannounced inspections in nursing facilities.
- Increase the number of training sessions conducted for providers.

### BACKGROUND AND ACCOMPLISHMENTS

Long Term Care Residents Protection promotes quality of life for people living in long term care facilities and ensures that these residents are safe, secure and free from abuse, neglect and financial exploitation. This is accomplished by monitoring compliance with state and federal laws and regulations. The division also certifies long term care facilities for Medicare and Medicaid in Delaware.

The Incident Referral Center (IRC) exists as part of the intake section for receiving complaints and inquiries from long term care consumers and their families, providers and the general public. This intake unit also has a hotline number for reporting abuse, neglect or financial exploitation. An investigative unit member is on-call nights, weekends and holidays to assess potentially life threatening situations.

The Incident Referral Center received 20,581 contacts during Fiscal Year 2005. The contacts have been analyzed and referred to the appropriate location for resolution.

The in-house Adult Abuse Registry allows the investigations section to process inquiries within a 24-

hour turnaround time. During Fiscal Year 2005, there were 21,704 inquiries processed. Currently, there are 270 people on the Adult Abuse Registry.

Criminal background checks are required for employees in nursing facilities and other licensed facilities. During Fiscal Year 2005, a total of 4,185 new applicants were fingerprinted for state and federal criminal background checks. Of those, 26 percent had a criminal history. One percent of the total nursing home job applicant pool had a serious disqualifying criminal conviction.

### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	2,434.6	3,058.8	3,138.4
ASF	--	--	--
<b>TOTAL</b>	<b>2,434.6</b>	<b>3,058.8</b>	<b>3,138.4</b>

### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	42.1	41.1	41.1
ASF	--	--	--
NSF	19.9	19.9	19.9
<b>TOTAL</b>	<b>62.0</b>	<b>61.0</b>	<b>61.0</b>

## LONG TERM CARE RESIDENTS PROTECTION 35-09-01

### ACTIVITIES

- License facilities and services annually and conduct a variety of unannounced inspections, including complaint-driven and off-hours inspections, to determine compliance with federal and state laws and regulations.
- Receive and investigate complaints of abuse, neglect, mistreatment, financial exploitation and other concerns that may adversely affect residents' health, safety, welfare or rights.
- Provide for systematic and timely notification, coordinated investigation, and referral of substantiated abuse, neglect, mistreatment and financial exploitation complaints to the appropriate law enforcement agencies and the Attorney General's Office.
- Manage the Adult Abuse Registry and Certified Nursing Assistant Registry as established by the Delaware Code and federal regulations.
- Administer appeal processes as provided in state and federal law.

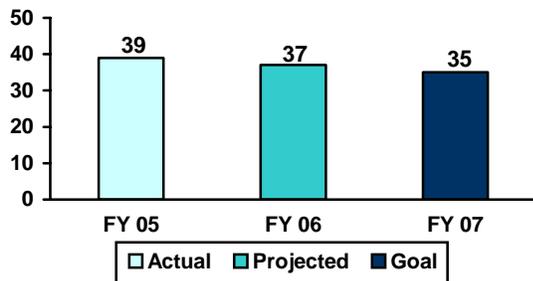
# HEALTH AND SOCIAL SERVICES

## 35-00-00

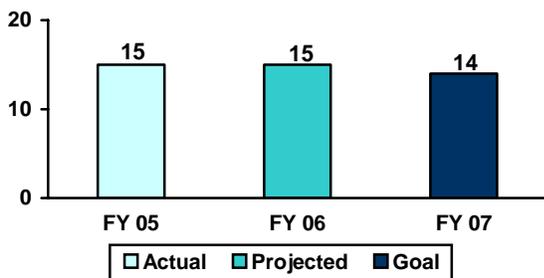
- Ensure compliance with the Criminal Background Check/Mandatory Drug Testing law.
- Provide training for division staff, providers of long term care services, other agencies, residents, and families on applicable statutes.
- Provide educational workshops that include innovative approaches to promoting residents' quality of care and life.
- Work with other agencies to promote and advocate for residents' rights.
- Meet with individuals receiving long term care services and their families in conjunction with licensure and enforcement activities.
- Update consumer information materials on an on-going and as needed basis, through a variety of printed and electronic means, including the division's website.
- Publicize a 24-hour, statewide toll-free hotline to receive reports of abuse and neglect complaints.

### PERFORMANCE MEASURES

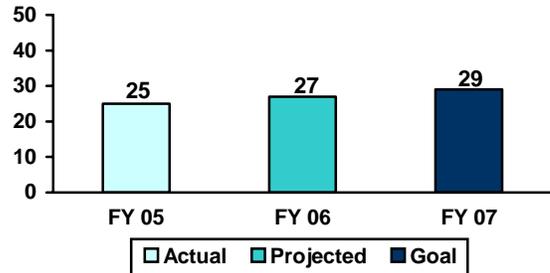
**Average Number of Days to Complete an Investigation**



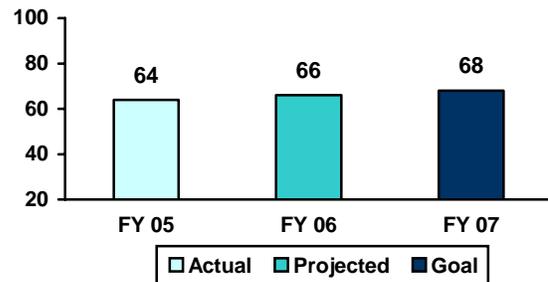
**Average Number of Days to Complete a Background Check**



**Number of Off-Hour, Unannounced Inspections**



**Training Sessions Conducted for Providers**



# HEALTH AND SOCIAL SERVICES

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## CHILD SUPPORT ENFORCEMENT

35-10-00

### MISSION

To promote family independence by reducing dependency of single parent households through the collection of monetary child support payments and medical support from non-custodial parents. This mission is achieved through the effective use of paternity establishment programs, aggressive location of absent parents, expedient case processing and enforcement techniques, efficient collection and the prompt distribution of child support payments.

### KEY OBJECTIVES

- Increase the rate of paternity established for children born out-of-wedlock by continuing to provide the intensive casework necessary to assure client cooperation in establishing paternity and obtaining court orders.
- Increase the percentage of child support orders established by providing a wide array of expedited procedures applicable to the efficient administration of child support actions. These include ordering and completing genetic testing, obtaining vital information from DSS clients required to use our services, imposing penalties for non-compliance and gaining access to relevant records.
- Increase the percentage of current child support collected by expanding efforts in three areas: further enhancing the initiation and transfer of wage withholding attachments on child support IV-D cases, devoting additional time and resources to non-custodial parent locate activities and expanding use of specialized enforcement tools (License Suspension, Child Support Lien Network).
- Increase the percentage of cases paying child support arrears. This objective can be accomplished by expanding the agency's License Suspension program by: reducing the minimum amount in arrears a non-custodial parent must owe in order to have one or more licenses suspended, enhancing the Financial Institution Data Match program and other special projects during the year.

### BACKGROUND AND ACCOMPLISHMENTS

The Child Support Enforcement Program was developed in 1975 to shift the fiscal responsibility for the support of children from government to those morally and legally obligated. Child support collections are an integral part of any policy to reduce poverty, strengthen families and prevent welfare dependency.

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 mandated many changes in the operation of child support programs. In addition, the elimination of the Aid to Families with Dependent Children (AFDC) program placed added emphasis on the child support enforcement program and its close relationship to the Temporary Assistance for Needy Families (TANF) program that replaced it.

Under the federal Child Support Performance and Incentive Act of 1998, the basis for performance measures established by the federal Office of Child Support Enforcement (OCSE) was significantly revised during a three-year phase-in period that ended on September 30, 2002. To meet the challenges from child support enforcement programs of the other states that are competing for a limited annual pool of federal incentive income funding, DCSE must maintain a concerted effort to improve its overall performance efficiency and effectiveness.

- **Child Support Collections:** During Fiscal Year 2005, DCSE collected \$89,637,747 in child support payments, which represents a \$2,622,896 (three percent) increase over the amount collected during Fiscal Year 2004. Out of its Fiscal Year 2004 collections, DCSE returned \$5,606,963 to reimburse the state and federal governments for benefits provided to children through TANF and Foster Care programs. This represents seven percent of Fiscal Year 2005 collections by DCSE. The remaining 93 percent of Fiscal Year 2005 child support collections were distributed to custodial parents caring for dependent children, mostly from single parent households.
- **DB2 Conversion of Delaware Automated Child Support Enforcement System (DACSES):** In February 2005, DCSE entered into a contract for \$2,785,082 (66 percent federal funding) with Northrop Grumman to perform a DB2 conversion of the DACSES. This represents the first step in replacing the nearly obsolete DACSES that was implemented in 1987. This project is on schedule and should be completed in March 2006. The next step will be to retain a contractor to perform a

# HEALTH AND SOCIAL SERVICES

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federally mandated feasibility study and new cost-benefit analysis of DACSES.

- **Customer Service Initiatives:** The division's Voice Response Unit (VRU) enables custodial and non-custodial parents to call the agency 24 hours a day and promptly receive current information on items such as the date and amount the last child support check on their account was issued, the current balance of their account, etc. The VRU handled 1,603,155 phone calls during Fiscal Year 2005, for an average of 4,392 calls each calendar day. Also, the Automated Assistance Line/Voice Response Unit now has a full Spanish version available to clients.
- **Automated Wage Withholding:** Wage withholding is the most successful method available to ensure regular, dependable payments of child support by non-custodial parents. Enhancements to the child support enforcement computer system to automatically generate wage withholding notices were implemented statewide in 1999. On a pilot basis during Fiscal Year 2003, DCSE began directly issuing wage withholding notices on its downstate cases. In Fiscal Year 2004, DCSE began directly issuing wage withholding statewide. During the four year period ending August 31, 2005, a total of 182,301 wage withholding notices were issued on behalf of DCSE clients to non-custodial parents.
- **Voluntary Acknowledgement of Paternity Program:** This program, developed in conjunction with Delaware hospitals, allows parents to acknowledge paternity at the time their child is born. During Fiscal Year 2005, DCSE processed 2,008 voluntary acknowledgements of paternity, plus 503 more during the first two months of Fiscal Year 2006. Since program implementation began in January 1995, a total of 16,973 voluntary paternity acknowledgments have been obtained and processed on DCSE cases through August 2005.
- **New Hire Reporting:** New hire reporting requires all Delaware employers to promptly submit to DCSE, within 20 days of hire, the name, home address and social security number of all of its new employees. This is a mandatory nationwide program so DCSE also benefits from New Hire Reports filed in other states. Since October 1, 1997, DCSE has received and filed 2,334,105 new employee reports to the national Directory of New Hires. New Hire Reporting is a very effective tool to efficiently locate delinquent non-custodial parents who change jobs frequently.

- **License Suspension and Denial:** The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) mandated that all child support enforcement agencies enter into agreements with other state licensing agencies to suspend or deny the driver's, occupational/business, professional and recreational licenses of seriously delinquent non-custodial parents and Family Court fugitives. This enforcement program is designed to encourage non-custodial parents who have avoided automated wage withholding or have simply not paid their court ordered support to pay past due child support and to remain up to date on their current support obligations.

DCSE performs automated matching to suspend licenses through the divisions of Motor Vehicles, Revenue and Professional Regulation. However, since Senate Bill 9 was enacted on February 21, 2003, the division has received a number of lump sum payments from delinquent non-custodial parents in order to prevent the loss of their recreational licenses. Through August 31, 2005, a total of 16,672 licenses have been noticed for suspension in Delaware on non-custodial parents who are seriously behind on their child support payments.

- **Financial Institution Data Matches (FIDM):** Under PRWORA, every state child support enforcement agency was required to enter into data match agreements with all financial institutions doing business in their state. Financial institutions also have the option to join the multi-state FIDM program operated by the federal Office of Child Support Enforcement. The purpose of these agreements has been to develop and operate a data match system which: identifies the assets of seriously delinquent non-custodial parents held in financial institutions, imposes liens and levies on those accounts and undertakes the seizure of these assets.

<b>FUNDING</b>			
	<b>FY 2005</b>	<b>FY 2006</b>	<b>FY 2007</b>
	<b>ACTUAL</b>	<b>BUDGET</b>	<b>GOV. REC.</b>
GF	2,578.7	2,927.2	3,150.0
ASF	1,703.7	1,868.2	1,905.2
<b>TOTAL</b>	<b>4,282.4</b>	<b>4,795.4</b>	<b>5,055.2</b>

# HEALTH AND SOCIAL SERVICES

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### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	46.0	46.0	46.0
ASF	27.2	27.2	27.2
NSF	140.8	140.8	140.8
<b>TOTAL</b>	<b>214.0</b>	<b>214.0</b>	<b>214.0</b>

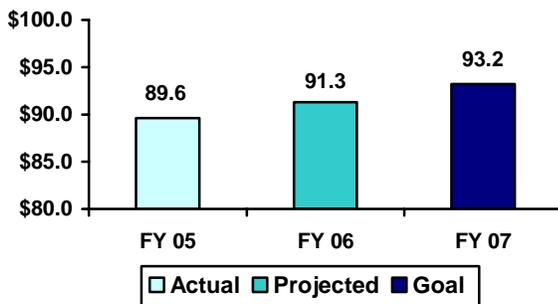
### CHILD SUPPORT ENFORCEMENT 35-10-01

#### ACTIVITIES

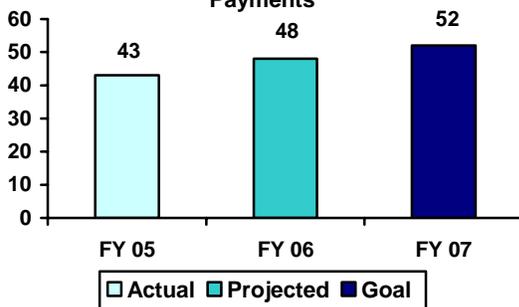
- Establish paternity.
- Locate non-custodial parents.
- Establish, modify and enforce child support orders.
- Collect and distribute child support.
- Cooperate with other states in child support related activities.

#### PERFORMANCE MEASURES

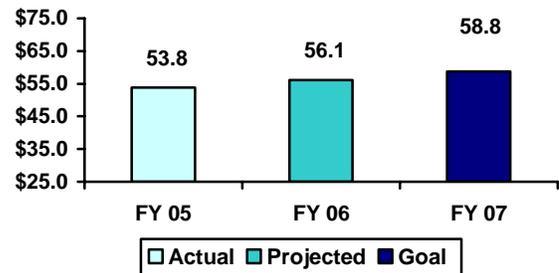
**Total Child Support Collections  
(millions)**



**Number of States and Territories with  
which DCSE Processes Electronic  
Payments**



**Amount of Current IV-D Child Support  
Due, Collected and Distributed (millions)**



# HEALTH AND SOCIAL SERVICES

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## DEVELOPMENTAL DISABILITIES SERVICES 35-11-00

### MISSION

To provide services and supports to individuals with mental retardation/developmental disabilities and their families, which enable them to make informed choices that lead to an improved quality of life and meaningful participation in their communities.

The division's primary function is to provide leadership in the establishment, delivery and monitoring of programs and services that meet the needs of the individuals and families it serves.

### KEY OBJECTIVES

- Expand community-based service delivery system; provide education/information to consumers and families; increase easy access to information on division programs; and initiate self-determination best practices.
- Improve and evaluate newly implemented rate-setting structure and reimbursement system; on-going use of funds that is cost effective using general and federal revenue to support the greatest number of people in community settings.
- Stabilize the provider workforce through improved recruitment and retention strategies and reducing turnover and vacancies.
- Implement person-centered planning and support for individuals residing in community settings; increase access to assistive technology; and increase the division's information technology capacity and use.
- Increase involvement of stakeholders by expanding regular public information meetings, educational forums and the division's web-based information.
- Revise the quality assurance system to reflect and measure compliance with person-centered planning and support, self-determination practices, and meaningful outcomes for people served through division programs.

### BACKGROUND AND ACCOMPLISHMENTS

The Division of Developmental Disabilities Services (DDDS) provides support and services to individuals with mental retardation and other related developmental

disabilities and their families. The division is transforming its service delivery model and paradigm from a facility-centered, fixed and defined program based service system to a consumer-centered and community-based flexible system of supports and services. The redesign of the service delivery system is based on the principles of self-determination, person-centered services and consumer control and choice, utilizing an individual based budgeting and funding system. The six major focus areas of activities represent how the division is redefining the service delivery paradigm.

- **Service Delivery:** The principles of self-determination and consumer control and direction of services has been incorporated into all of the division's activities and services. The vast majority of consumers now live in the community in homes, apartments and small group residences as opposed to institutional facilities. Many consumers live with their families in their own homes. The division has also increased the provider agency network of residential and day providers within its system that fosters more choices and options for individuals receiving services.
- **Fiscal Resources Development and Allocation:** The division has implemented fiscal and budgeting practices that are consumer-centered and that maximize the efficient use of state and federal funds. The division has developed a new residential and day services rate setting system that is based on the assessment of individual consumer support needs rather than on provider agency contract negotiations.
- **Workforce Capacity:** The division has on-going activities to assure that there is sufficient and well-qualified staff in both the state operated and private provider operated programs. The division carefully realigns and reallocates positions within the organization to support the expanding Community Services infrastructure needs on a continuing basis. Consolidation of programs and services at Stockley Center is on-going to assure that resource utilization is maximized as the census is reduced through community placements. The division is a partner with the University of Delaware, Center for Disabilities Studies in a university grant to look at models that promote the recruitment and retention of direct care staff.
- **Service System Infrastructure:** Over 315 consumers have moved into community-based living arrangements since Fiscal Year 2001. The division has strengthened its Community Services infrastructure to support the shift in service delivery from an institutional facility-based system to a

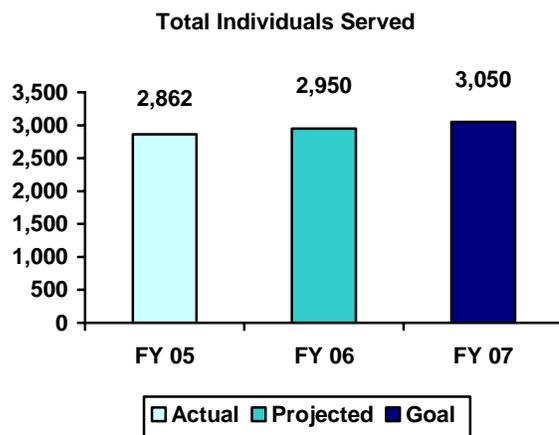
# HEALTH AND SOCIAL SERVICES

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community-based consumer directed system of supports and services. Each individual living in the community now has an essential lifestyle plan that is consumer-centered and based on each person's support needs and desires. The division has expanded the use of Assistive Technology (AT) that supports consumers' ability to live in the community and be more independent through a federal grant to increase access to services, a division system for screenings and referrals, incorporation of AT funding in its Residential Waiver, and the development of a Low Interest Loan program. The division is studying more flexible options in housing, including a partnership with the Arc of Delaware and its Homes for Life, use of HUD vouchers, Universal Design Housing, etc. In addition, the population of the Stockley Center has been reduced by 49 percent since Fiscal Year 2001 with consumers moving to community-based living arrangements. Plans are being developed to restructure the Stockley Center into a multipurpose regional evaluation and resource center in southern Delaware to support the needs of consumers living in the community. A residential living unit and respite program for medically fragile consumers will be components of this regional center.

- **Stakeholder Collaboration:** The division has developed a collaborative partnership with its stakeholders and has developed a newsletter to inform consumers, families and interested stakeholders regarding the division's services and activities. A new website has been developed that is more user friendly and includes reports, downloadable division forms and links for consumers and families. The division also participates in the National Core Indicators project that annually surveys consumers and families regarding satisfaction with services that helps us determine if services are meeting consumer and families' needs.
- **Quality Enhancement:** The division has been realigning its quality assurance and consumer improvement activities to reflect the changing paradigm of community-based services and consumer directed supports. In October 2004, the division obtained a three-year grant from the Center for Medicare and Medicaid Services (CMS) to develop a Consumer Centered Quality Assurance (QA) and Quality Improvement (QI) in Home and Community-Based Services quality assurance protocol. The project is utilizing the CMS Quality Framework to design a consumer centered QA/QI system built around consumer choice and

satisfaction. The division contracted with the Center for Outcome Analysis to evaluate the outcomes of consumers who moved from the Stockley Center to the community. The findings showed that the community placements resulted in positive life changes and no negative health or behavioral consequences. Certification and Licensing Regulations have been revised in conjunction with the changes in the structure of the service delivery system.



The division is serving an increasing number of people with specialized needs who require more expensive support services. This includes:

- A growing number of people with significant medical care issues throughout the division, especially at Stockley Center, as evidenced by the increased number of residents with skilled-care needs;
- A growth in the special populations program serving individuals with challenging behaviors, autism and Prader Willi syndrome; and
- An aging population that presents support needs which are very similar to individuals who have Alzheimer's disease or dementia.

Significant accomplishments have been made in the following areas:

- Conclusion of work with the Division of Long-Term Care Residents Protection (DLTCRP) to consolidate two separate sets of rules for the operation of neighborhood homes into one set of formal licensing regulations;
- Participation in and completion of phase three of the Core Indicator Project (CIP), the goal of which is to establish individual state and national service-

# HEALTH AND SOCIAL SERVICES

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performance baselines for use in the development of service improvement plans;

- Creation of a formal incident management system to enhance the division's client protection policies and procedures, including an improved ability to track risk factors and address trends more effectively;
- Establishment of a new rate-setting methodology that will support day and residential service payments based on standardized assessments of individual support needs, as well as impart fair and equitable reimbursement rates to contract providers;
- Completion of revenue enhancement measures to maximize federal funds including reimbursement for transportation costs, implementation of patient pay collections and shifting other contractual services utilizing 100 percent state general funds to capture federal matching resources;
- Award of \$351.0 grant from the U.S. Department of Health and Human Services for enhancement of the division's QA systems that lead to quality improvement of home and community-based services; and
- Continued expansion of the division's training and staff development partnership with the University of Delaware's Center for Disabilities Studies.

## FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	60,095.8	68,022.6	74,370.2
ASF	1,546.2	2,658.9	2,658.9
<b>TOTAL</b>	<b>61,642.0</b>	<b>70,681.5</b>	<b>77,029.1</b>

## POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	676.6	673.6	673.6
ASF	1.0	1.0	1.0
NSF	3.0	3.0	3.0
<b>TOTAL</b>	<b>680.6</b>	<b>677.6</b>	<b>677.6</b>

## ADMINISTRATION

35-11-10

In order to ensure optimal services for persons with mental retardation/developmental disabilities, the focus of Administration is on planning, directing development and providing the overall management of statewide services.

## ACTIVITIES

### Financial and Business Operations

- Manage fiscal operations to include: budget development and administration, contract monitoring and maximization of federal revenues to support division programs and services, as well as ensuring cost-effective service delivery.
- Administer benefit programs for individuals in residential programs to include management of the Home and Community-Based Medicaid Waiver Program.
- Manage the division's information systems and technology advancement necessary for efficient operations.

### Professional Services

- Monitor and evaluate progress in the implementation of the division's five-year strategic plan.
- Provide psycho-forensic consultation for special cases.
- Oversee the operations of the division's intake unit.
- Write and manage grants.

### Training and Professional Development

- Develop and deliver a wide array of Mental Retardation/Developmental Disabilities related training programs.
- Coordinate and support employee participation in personal, professional and technical development courses and seminars.
- Facilitate an improved training/communication plan with consumers, families, employees, providers and advocates focusing on self-directed services.

### Quality Assurance

- Continuously monitor the status of Developmental Disabilities Services programs to assess compliance with applicable laws, regulations and policies.
- Provide on-going regulatory oversight of health and safety activities and systems at Stockley Center and throughout Community Services.
- Conduct annual certification reviews of community-based day and residential programs, including assisting the DLTCRP in the licensing of the division's neighborhood homes.
- Conduct routine surveys to assess consumer, family, staff and other stakeholder satisfaction with programs and services.
- Participate in the National Core Indicators project as a means of addressing the quality improvement of programs and services.

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## Early Intervention Program

- Evaluate the developmental status of infants to identify children with special needs at the earliest age possible.
- Develop individualized service plans that meet the needs of special-needs infants and their families.
- Provide intervention training and support to the families of infants with special needs.
- Facilitate the coordination of services for infants with special needs and their families.

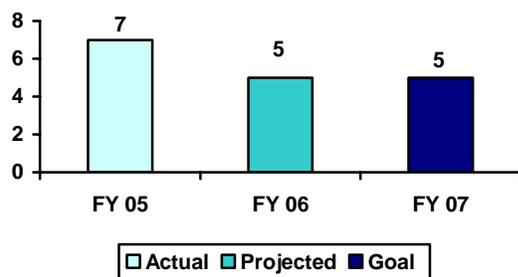
## STOCKLEY CENTER 35-11-20

### ACTIVITIES

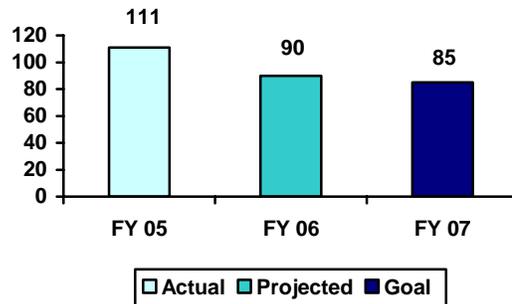
- Operate a 130-bed ICF/MR facility composed of 33 skilled-care level beds and 97 intermediate-care level beds.
- Operate a 16-bed assisted living unit for individuals with Alzheimer's disease or dementia.
- Comply with ICF/MR regulations.
- Operate an integrated quality assurance program to ensure regulatory compliance.
- Ensure the development of a person-centered service delivery system, which provides for individual choice of residential living options.
- Provide comprehensive health services to include medical, dental, nursing, psychological and other ancillary services.
- Provide work and personal/social adjustment services.
- Maintain an environment that safeguards the health and safety of residents.
- Maintain the infrastructures and utilities necessary for campus services.

### PERFORMANCE MEASURES

Number of Living Units



Stockley Center Census



## COMMUNITY SERVICES 35-11-30

### ACTIVITIES

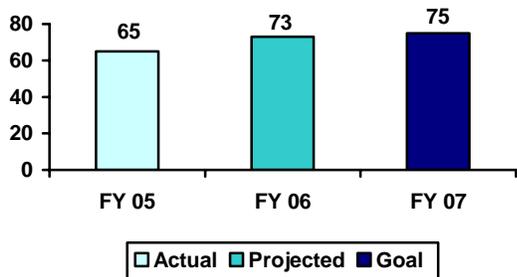
- Residential services that are person-centered and provide support for individuals living in community-based settings.
- Employment, vocational and personal/social adjustment services to help individuals develop and/or maintain work and personal living skills.
- Family support services for families caring for a family member with a disability to keep the individual at home.
- Adult special populations services to provide the intensive and specialized types of supports needed for individuals who present atypically challenging behaviors, have autism or a related developmental disability.
- Assistive technology services that provide individuals with assessments and adaptive equipment that serve to improve their quality of life. Assistive technology includes: equipment such as wheelchairs, walkers, special switches and knobs, computer programs, communication devices and environmental modifications which are designed to maximize each person's level of independence.

# HEALTH AND SOCIAL SERVICES

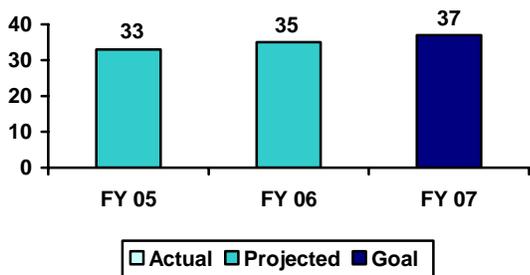
## 35-00-00

### PERFORMANCE MEASURES

#### Community Placements



#### Number of Certified Providers



### STATE SERVICE CENTERS

#### 35-12-00

#### MISSION

To provide convenient access to human services, assist vulnerable populations, support communities and promote volunteer and service opportunities.

#### KEY OBJECTIVES

- Target and provide services and resources to those individuals and families in greatest need.
- Effectively use public and private resources to mitigate the causes and conditions of poverty in Delaware.
- Effectively promote high quality service to the State Office of Volunteerism's customers through communication, information-sharing, the identification and creation of volunteer opportunities, and customer satisfaction feedback.
- Increase access to information regarding services via effective communication networks and increased technological capacity.

#### BACKGROUND AND ACCOMPLISHMENTS

The Division of State Service Centers provides direct client services to low-income and vulnerable populations, administers state and federal funds to assist low-income persons and households, and coordinates volunteer activities throughout the state. The division is structured as four units: Family Support Services, which provides programs and services that serve as a safety net for individuals and families in crisis or in need of supportive services; State Office of Volunteerism, which administers volunteer activities and programs for all ages; Office of Community Services, which administers statewide and federal programs for low-income persons; and Division Management unit, which includes the Office of the Director and fiscal operations.

During Fiscal Year 2005, the division's accomplishments included:

- **Emergency Assistance:** Emergency assistance for rent, utilities and emergency shelter was provided to 17,294 clients under the Community Resource and Assistance Program. An additional 9,870 clients were served through the use of Emergency Assistance Services funds, and 422 clients received

## HEALTH AND SOCIAL SERVICES

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assistance through the Needy Family Fund. The Kinship Care Program assisted 84 caregiver households;

- **Information and Referral:** The Delaware Helpline received over 400,000 calls for information, of which, 77,188 were referred to State Service Center staff for more in-depth information and referral;
- **Family Visitation:** Visitation centers provide safe, neutral settings where children can maintain or re-establish a relationship with a non-custodial parent. The visitation centers served 386 families by providing 2,520 monitored exchanges, 864 supervised individual visitations and 1,668 group visitations;
- **Adopt-A-Family:** During the holiday season 3,648 individuals were served by Adopt-A-Family. In addition, 1,580 students were assisted with school supplies;
- **Home Energy Assistance:** The Fuel Assistance Program served 12,950 low-income households below 200 percent of poverty. The Crisis Assistance Program helped 3,249 households with crisis benefits. The Summer Cooling Assistance Program helped 1,026 households with electric bills and 190 households received room-sized air conditioners. The Weatherization Assistance Program supported the installation of energy efficiency improvements in the homes of 455 low-income families statewide. The Utility Fund, established in Fiscal Year 2000 to assist low-income individuals and families with the high cost of utility bills, served 3,435 households and 40 furnaces were replaced in low-income homes under the Weatherization Assistance Program;
- **Shelter Services:** State Emergency Housing Funds supported contracts with 13 emergency and transitional shelter agencies with approximately 750 beds and assisted 3,454 homeless individuals. Of those who received shelter services, 398 households successfully departed to permanent housing. Due to the insufficient availability of affordable housing, however, low-income individuals/families will continue to need the services that are being rendered by the statewide network of emergency and transitional housing agencies. Consequently, successful departures to permanent housing will continue on a declining trend, resulting in households remaining in transitional housing for longer periods of time;
- **Community Services Block Grant (CSBG):** The CSBG funded a range of anti-poverty services, including comprehensive case management, in

which eight non-profits partnered to work with 1,084 residents of transitional or subsidized housing. At the community level, seven Sussex County civic groups and four Kent County civic groups continued to develop and/or implement action plans for improvement of their low-income communities with the assistance of CSBG supported community action staff;

- **Food and Nutrition Program:** Sixty-nine non-profit agencies reporting to the Food Bank of Delaware distributed food 44,192 times to households through food closets and mobile pantry programs. State Service Center sites provided emergency food 3,803 times to households;
- **Senior Volunteer Programs:** The Retired Senior Volunteer Program (RSVP) provides opportunities for people age 55 and older to apply their life experience to meeting community needs. The volunteers are recruited to help serve in the areas of health and human services, education, environment and public safety. In New Castle and Sussex counties, 2,126 seniors contributed more than 324,951 hours of volunteer service at non-profit and governmental agencies. The statewide Foster Grandparent Program placed 287 seniors, including 19 males. Foster grandparents worked with a total of 1,632 children, and completed a total of 248,371 service hours;
- **AmeriCorps:** Offered 126 members the opportunity to give back to their community through enhancing Delaware state park services, educating teens to prevent pregnancy, mentoring, serving in after school programs and intergenerational programming. AmeriCorps members contributed 82,493 hours of service;
- **Volunteer Events:** Nearly 200 volunteers, volunteer coordinators and service providers attended the Delaware Conference on Volunteerism. The Governor's Youth Volunteer Service Awards ceremony was attended by 500 people; and
- **Volunteer Resource Center:** The Delaware Volunteer Resource Center served Delawareans through direct volunteer referrals, contacts to agencies via the VolunteerWay website, webpage hits, outreach contacts, technical assistance to agencies, and training sessions for volunteer coordinators. Ninety-nine students received an elective school credit through the Delaware Volunteer Credit Program .

# HEALTH AND SOCIAL SERVICES

## 35-00-00

### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	9,861.1	10,080.7	10,047.1
ASF	127.3	585.6	585.6
<b>TOTAL</b>	<b>9,988.4</b>	<b>10,666.3</b>	<b>10,632.7</b>

### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	108.6	104.6	106.1
ASF	--	--	--
NSF	25.0	25.0	23.5
<b>TOTAL</b>	<b>133.6</b>	<b>129.6</b>	<b>129.6</b>

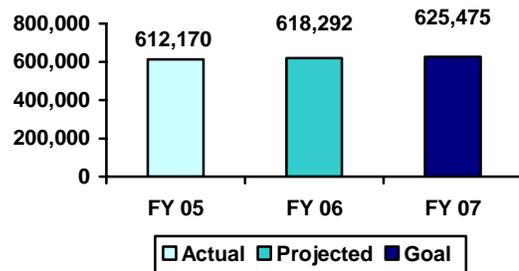
### *FAMILY SUPPORT* 35-12-10

#### ACTIVITIES

- Provide one-stop service access for clients through the management of 14 state service centers.
- Partner with other state and non-profit agencies to improve accessibility to programs for vulnerable Delawareans.
- Provide direct support services including: Emergency Assistance Services, Community Resource Assistance Services, Needy Family and Utility Funds, Information and Referral, Child Restraint Car Seat Loaner Program, Emergency Food and Shelter Program, Adopt-A-Family and Family Visitation.
- Monitor client satisfaction and service use through surveys and other reliable instruments to measure accessibility to services, client satisfaction and appropriateness of service mix.
- Provide a safe and secure environment for children to develop or maintain a positive relationship with their non-custodial parent through visitation centers housed in state service centers.

### PERFORMANCE MEASURE

Client Visits to State Service Centers



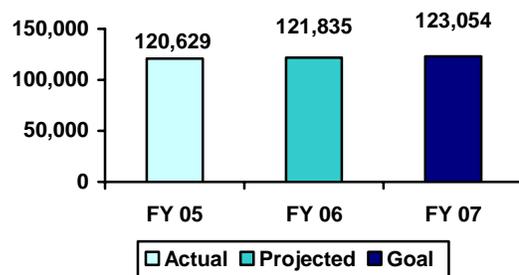
### *SERVICE CENTER MANAGEMENT* 35-12-20

#### ACTIVITIES

- Provide oversight, training, planning and evaluation.
- Provide fiscal management and financial monitoring.
- Provide technical support to improve service delivery through the use of automated information systems and telecommunications equipment.

### PERFORMANCE MEASURE

Clients Served by Division Services



### *COMMUNITY SERVICES* 35-12-30

#### ACTIVITIES

- Administer the CSBG; state funds for Emergency/Transitional Housing Site Operations; Emergency Housing Assistance Fund; state funds for Community Food Programs; federal Community Food and Nutrition Program; Fuel Assistance

# HEALTH AND SOCIAL SERVICES

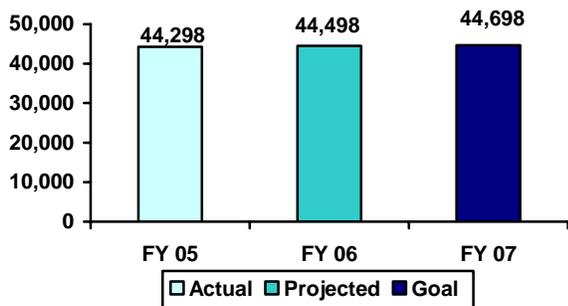
## 35-00-00

Program; Weatherization Assistance Program; and Summer Cooling Assistance Program.

- Facilitate community development outreach in collaboration with the First State Community Action Agency.
- Perform program planning, monitoring and evaluation.
- Administer \$50,000 in state funds to support the mission and activities of the Governor's Advisory Council on Hispanic Affairs.
- Serve as an Advisory Council member to the Neighborhood Assistance Act Tax Credit Program.
- Manage a contract with the City of Harrington to support the operations and activities of the Community and Youth Center.

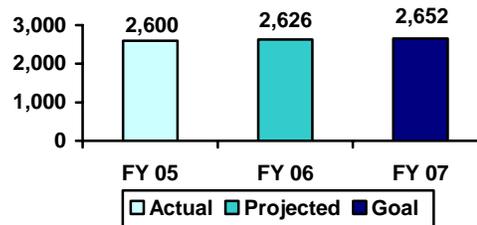
### PERFORMANCE MEASURE

**Number of Times Households Accessed  
Emergency Food at State Service Center and  
Community-Based Food Distribution Sites**

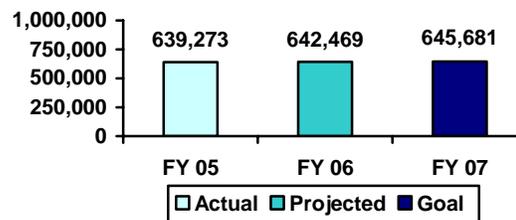


### PERFORMANCE MEASURES

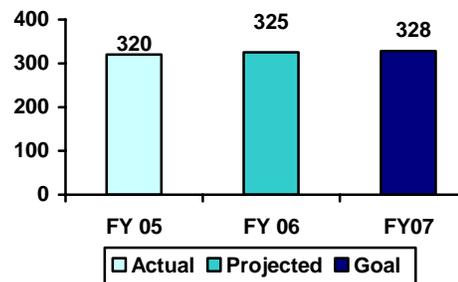
**Volunteers in the State Office of  
Volunteerism Programs**



**Volunteer Hours Provided through the  
State Office of Volunteerism Programs**



**Active Foster Grandparents**




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## ***VOLUNTEER SERVICES***

### ***35-12-40***

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### ACTIVITIES

- Administer the AmeriCorps National Service Program; AmeriCorps\*VISTA program, Volunteer Resource Center; Foster Grandparents Program; and Retired Senior Volunteer Program.
- Help state and non-profit agencies to better meet their objectives by implementing volunteer programs through technical assistance, training, public relations and assistance with volunteer recognition programs.
- Recognize the contributions of volunteer youth and adults in annual events.

# HEALTH AND SOCIAL SERVICES

35-00-00

## SERVICES FOR AGING AND ADULTS WITH PHYSICAL DISABILITIES 35-14-00

### MISSION

The mission for the Division of Services for Aging and Adults with Physical Disabilities is to improve or maintain the quality of life for residents of Delaware who are at least 18 years of age with physical disabilities or who are elderly.

### KEY OBJECTIVES

#### Promote Health and Well-Being

- Collaborate and develop partnerships with other state and community-based agencies to develop campaigns and wellness programs for older persons and persons with physical disabilities.

#### Foster Self-Sufficiency

- Address service needs in the key home and community-based programs, including: adult day care, adult foster care, home delivered meals, housekeeping, respite, nutrition, legal services, Hispanic outreach, attendant services and assistive technology.

#### Protecting Vulnerable Populations

- Address the service needs of low-income older persons and adults with physical disabilities who are at greatest risk of institutionalization.

### BACKGROUND AND ACCOMPLISHMENTS

The Division of Services for Aging and Adults with Physical Disabilities (DSAAPD), formerly the Division of Aging, has been in existence for forty years. In July 1994, the division's mission was expanded to include the provision of services for adults with physical disabilities. This change created a more efficient service delivery system with a single point of entry for both adults with physical disabilities and older persons.

Current funding sources for the division include: Older Americans Act, Social Services Block Grant, Medicaid Waivers for the Elderly and Disabled, Assisted Living and Tobacco Settlement. Additionally, the division manages research and demonstration grants from various sources as they become available.

Several factors continue to influence the demand for programs and services and the availability of resources to meet the needs of the division's client populations. Three of the most important factors include population changes, increased service costs and funding limitations.

Despite these funding pressures, the division has succeeded in developing new initiatives to assist its client populations. The division has developed the Passport to Independence program as the result of a three-year systems change grant. The purpose of the program is to facilitate the transition from nursing homes for residents who opt to live in less restrictive, community-based settings. The project is being carried out in cooperation with various agencies throughout the State.

The division has been successful in obtaining a grant from the Administration on Aging for a Memory Loss Screening Demonstration project. The project is being run in conjunction with the Alzheimer's Association Delaware Valley Chapter.

Additionally, the division has received a grant from the Administration on Aging to participate in a three-year Performance Outcomes Measurement project. Through this project, Delaware will assist in the development of protocols to assess the impact of aging service programs.

In May 2005, the division sponsored the Governor's Conference on Aging, a statewide event held once every ten years. The conference, held as a precursor to the White House Conference on Aging, focused on developing recommendations for preparing for the aging of the baby boom generation.

Finally, the division has developed and disseminated many new publications to provide information and support to Delawareans on a range of topics. The very popular Guide to Services for Older Delawareans and Guide to Services for Persons with Disabilities in Delaware were recently revised and published in English and Spanish. Thousands of copies have been disseminated throughout the state. The division has also recently published the guidebooks *How to Select Long Term Care* and *Delaware's Legal Handbook for Grandparents and Other Relatives Raising Children*.

### FUNDING

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	15,748.5	10,440.7	10,525.5
ASF	961.0	1,102.1	1,137.4
<b>TOTAL</b>	<b>16,709.5</b>	<b>11,542.8</b>	<b>11,662.9</b>

# HEALTH AND SOCIAL SERVICES

## 35-00-00

### POSITIONS

	FY 2005 ACTUAL	FY 2006 BUDGET	FY 2007 GOV. REC.
GF	62.3	61.1	62.1
ASF	--	--	--
NSF	51.9	55.2	54.2
<b>TOTAL</b>	<b>114.2</b>	<b>116.3</b>	<b>116.3</b>

### *SERVICES FOR AGING AND ADULTS WITH PHYSICAL DISABILITIES*

#### *35-14-01*

### ACTIVITIES

- Administer contracts for key home and community-based services for older persons and adults with physical disabilities statewide.
- Operate various programs including Adult Protective Services; Community Services; Long-Term Care Ombudsman; Medicare Fraud Alert; Money Management; Joining Generations; CARE Delaware; and Passport to Independence.
- Advocate on behalf of older persons and adults with physical disabilities to create a broader awareness of their needs.
- Develop and implement a variety of wellness and health promotion programs.
- Operate the Eldercare Resource Center to provide information about caregiving to Delaware employers/employees.
- Analyze data, perform needs assessments and develop and evaluate new services for older persons, adults with physical disabilities and their families.
- Provide training to agency staff and staff in the aging and disabilities network on an ongoing basis on a range of topics related to the provision of services to older persons and adults with physical disabilities.
- Develop public-private and public-public partnerships to increase services and avoid duplication of effort.
- Plan and conduct special events focusing on older persons and adults with physical disabilities.
- Conduct various types of outreach efforts to inform the public about available services and programs.
- Provide information and assistance services by phone and e-mail on a wide range of aging- and disability-related issues.

### PERFORMANCE MEASURE

Persons Served by Caregiver Respite Program

