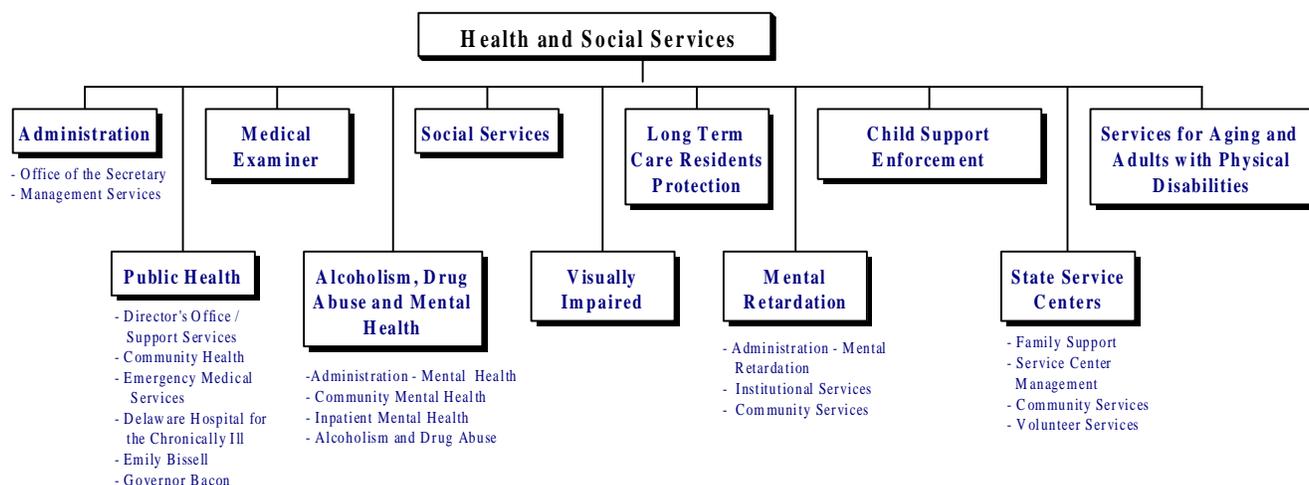


DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00



MISSION

The Department of Health and Social Services 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.

- 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 family support to increase the earning potential of single parents: day care, medical benefits, employability training and vocational training.

- Provide community-based care to ensure an appropriate continuum of services and avoid restrictive and costly institutionalization.

- Expand community services for persons with mental retardation and strengthen family support services.
- Expand community mental health and substance abuse services.
- Provide 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

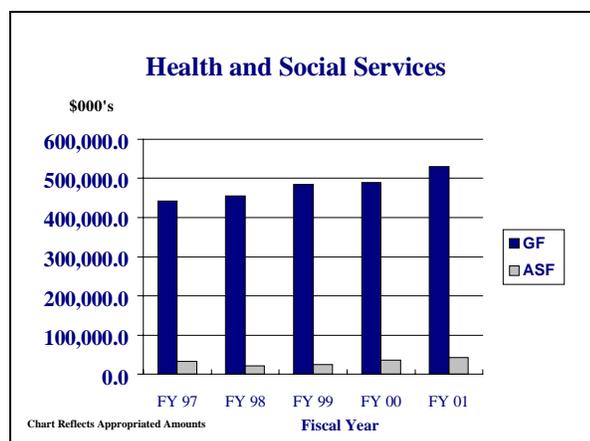
- Ensure the quality of care, safety, and security of individuals in long term care facilities, residential programs and day services.
- Provide emergency and transitional shelters and support to homeless individuals and families.
- Serve children and their families by providing a safe environment for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

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

Efficiency in Government

- Promote a customer-focused approach to service delivery through services integration and implementation of “No Wrong Door” philosophy.
- 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.
- Provide leadership in the Administrative Unit to develop division level expertise in technology applications.
- Identify areas where automation will improve productivity.



BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	484,885.5	489,801.4	530,548.8
ASF	25,166.9	36,605.6	42,198.7
TOTAL	510,052.4	526,407.0	572,747.5

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	3,826.3	3,873.7	3,875.1
ASF	96.8	105.8	107.8
NSF	819.9	843.0	861.1
TOTAL	4,743.0	4,822.5	4,844.0

FY 2001 BUDGET HIGHLIGHTS

OPERATING BUDGET:

- ◆ Recommend enhancement of \$200.0 and one-time funding of \$300.0 in the Budget Office Contingency for Electronic Benefits Transfer (EBT).
- ◆ Recommend enhancement of \$100.0 for teenage pregnancy prevention through a long-term

comprehensive program including academic support, career development and counseling.

- ◆ Recommend enhancement of \$184.5 for resident medications at the state nursing home facilities.
- ◆ Recommend inflation adjustment of \$561.0 for provider contract increases and enhancement of \$225.0 for medications in the Division of Alcoholism, Drug Abuse and Mental Health.
- ◆ Recommend inflation adjustment of \$27,200.0 for Medicaid Other Than State Institutions (OTSI) inflation.
- ◆ Recommend one-time funding in the Budget Office’s Development Fund for the Medicaid Management Information System (MMIS).
- ◆ Recommend inflation adjustment of \$100.0 for the Renal Disease Program.
- ◆ Recommend enhancements of \$77.3 and 1.4 FTEs for pick-up of the Independent Living Services Grant and \$25.0 for braille textbooks within the Division of Visually Impaired.
- ◆ Recommend one-time funding in the Budget Office’s Development Fund for the Delaware Automated Child Support Enforcement System (DACSES).
- ◆ Recommend enhancement of \$1,809.0 for community residential and day program placements in Mental Retardation. Also recommend enhancement of \$300.0 for vocational and day habilitation services for approximately 35 graduates of special school programs; inflation adjustment of \$609.6 for provider contract increases and enhancement of \$250.0 for development and implementation of a plan to increase the transition of residents of Stockley Center into the community.
- ◆ Recommend enhancement of \$80.0 for an additional family visitation center in the Division of State Service Centers. Also recommend enhancement of \$40.0 for increased payments to the Food Bank of Delaware and inflation adjustment of \$42.4 for emergency and transitional shelter inflation.
- ◆ Recommend inflation adjustment of \$593.2 for provider contract increases in the Division of Aging and Adults with Physical Disabilities.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

CAPITAL BUDGET:

- ◆ Recommend \$1,500.0 to support department facility maintenance and restoration.
- ◆ Recommend \$600.0 to supplement the Minor Capital Improvement and Equipment Program.
- ◆ Recommend \$350.0 for the Campus Renewal program.

ADMINISTRATION

35-01-00

MISSION

The mission of the Administration Unit is to provide leadership and policy direction for the Department of Health and Social Services and to ensure that the department is well managed in its delivery of services to clients. In addition, the unit exists to promote coordinated responses among divisions and between departments and to provide 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 and the identification of revenue generating possibilities.
- Provide centralized administrative functions in human resources, payroll, management of State and federal funds, procurement, accounting and Information Resource Management (IRM).
- Direct certain specialized functions that have been assigned to the Administration Unit including community-based long-term care services, infants and toddlers with disabilities, health planning, evaluation, housing, and federally mandated quality control for welfare programs and welfare fraud investigation.

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. 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 Administration Unit to assure that expectations for their implementation are realized. This entails providing assistance to operating divisions to

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

facilitate administrative procedures; coordinating the activities of the various players in joint projects; communicating regularly with constituents to keep them informed.

The department must also 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 assure that linkages are made and implications are well understood. It is also important that community awareness be developed around issues and topics that affect the department.

With an organization of approximately 5000 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 ongoing requirements to enhance staff performance. The physical plant associated with the department is equally large. The responsibility for seeing that it functions well for the clients who are served there and the employees who work there is difficult to manage.

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; quality monitored and contracts managed. Automation and technological support are critical to achieving and maintaining this balance. The department has successfully proceeded with systems development through the investment of one-time funding and the reclassification of existing staff.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	14,449.7	12,251.5	12,526.6
ASF	1,902.9	2,127.0	2,296.1
TOTAL	16,352.6	14,378.5	14,822.7

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	154.7	154.7	154.7
ASF	36.1	37.1	37.1
NSF	55.7	55.7	55.7
TOTAL	246.5	247.5	247.5

OFFICE OF THE SECRETARY

35-01-10

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.

PERFORMANCE MEASURES

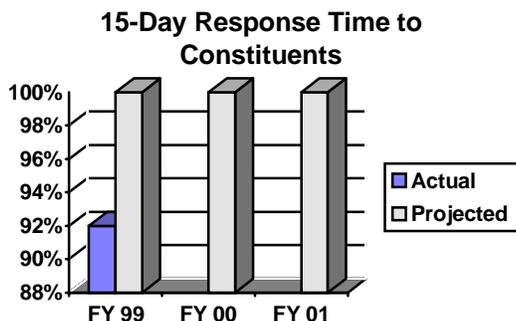
Customer Service Response Time: The ability to remain responsive to a diverse constituent base is crucial to addressing their needs and concerns. Measuring written response time is an important way of ensuring that the department remains responsive to its internal and external customers.

The Office of the Secretary has established a response time of 15 days as a benchmark. This response time is measured from the receipt of the request to the date that the response to that request is mailed. Performance for this fiscal year, to date - an average response time of 15.3 days - demonstrates the department is very close to meeting the established standard.

In an effort to further enhance responsiveness to its constituent base, a group, consisting of the constituent relations contact staff in each of the divisions, is convening to establish and implement uniform performance standards for constituent responses. These measures will address not only the timeliness of responses, but also the quality.

In Fiscal Year 2001 the department will strive to meet, if not exceed, the expectation of a 15-day response time. Through the implementation of performance standards, it will also ensure the quality and responsiveness of constituent communications.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00



MANAGEMENT SERVICES
35-01-20

ACTIVITIES

- Audit and Recovery Management Services
- Budget and program analysis
- Capital programs management
- Contract management
- Fiscal management
- Health planning and resources management
- Human resources management
- Information resources management
- Program development, coordination and evaluation
- Quality control

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
Percent of Customer Satisfaction with DMS Services	N/A	*See Note	TBD based on survey results

* Note: In Fiscal Year 2000, a customer satisfaction survey will be conducted to establish a baseline for this performance measure

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.

- Provide Treatment Access Centers (TASC) with urinalysis for the presence of drugs.

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.

- Implement new DNA capabilities and 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.

Accomplishments

During FY 1999 the Office of the Chief Medical Examiner:

- Investigated more than 2,200 deaths statewide.
- Analyzed more than 3,600 controlled substances cases with more than 25,000 exhibits.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

- Performed nearly 25,000 urine drug screens.
- Obtained certification of the DNA laboratory from the National Forensic Science Technology Center.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	2,887.0	3,267.9	3,292.7
ASF	0.5	45.0	45.7
TOTAL	2,887.5	3,312.9	3,338.4

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	36.0	37.0	37.0
ASF	1.0	1.0	1.0
NSF	--	--	--
TOTAL	37.0	38.0	38.0

MEDICAL EXAMINER

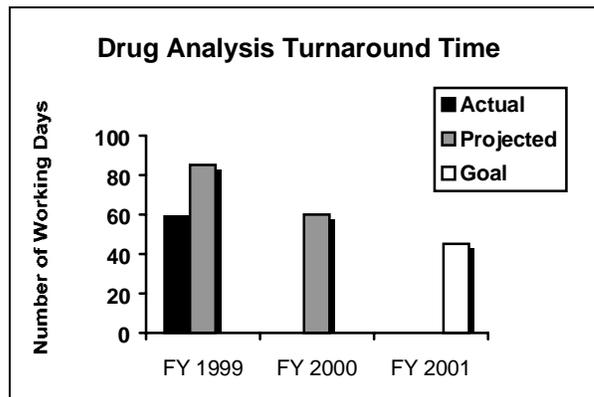
35-04-01

ACTIVITIES

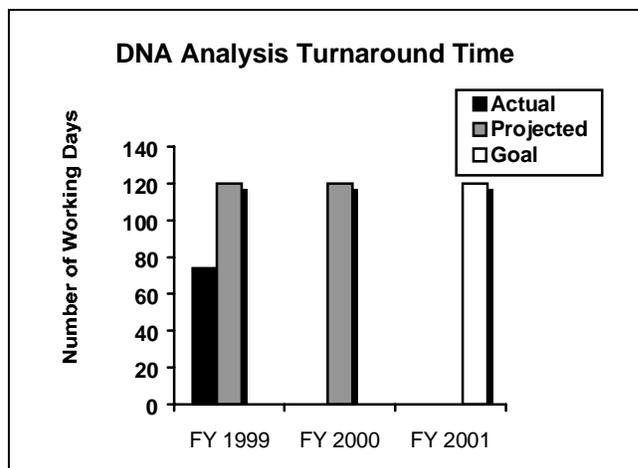
- Conduct medicolegal investigation of all sudden, accidental or suspicious deaths.
- Perform post-mortem examinations.
- Identify human remains.
- Analyze post-mortem toxicology samples.
- Perform scientific analysis of drug evidence.
- Provide transportation of drug evidence and urine samples from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

PERFORMANCE MEASURES

Drug analysis turnaround time is the time period from receipt of drug evidence by the laboratory until analysis is completed and a final report generated. The performance goal is a drug analysis turnaround time average of 45 working days.



DNA Analysis Turnaround Time is the time period from receipt of DNA evidence by the laboratory until analysis is completed and a final report generated. The performance goal is a DNA analysis turnaround time average of 120 working days versus the FBI's 365 days.



DEPARTMENT OF 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 enhance the health of the people of Delaware by:

- Addressing issues that affect the health of Delawareans;
- Keeping track of the State's health;
- Promoting positive lifestyles;
- Responding to critical health issues and disasters; and
- Promoting availability of health services.

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 the health problems in Delaware.
- Enhance assessment capacity for health status and health system analysis.
- Collaborate and develop partnerships with other state and private community-based agencies to address the health needs of Delawareans.

Protect Vulnerable Populations

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

BACKGROUND AND ACCOMPLISHMENTS

The Division of Public Health (DPH) is the health organization of the Department of Health and Social Services. DPH as an organization has changed over the past several years. It has evolved from an organization that mainly provided direct health care services to residents of the State and that 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.

Its mission has meant that DPH has placed renewed emphasis on the core functions of public health: assessment, assurance and policy development. DPH collects and analyzes various health data, and 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 and 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.

The Division of 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, offering family planning services to high-risk individuals and adolescent pregnancy prevention. Collaborations with other organizations has lead to improved and expanded health services for adolescents through school-based health centers and for vulnerable populations such as those diagnosed with HIV disease or AIDS.

The Division of Public Health 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 our citizens.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

Accomplishments

- School-based health centers continue their growth and expansion. Twenty-seven centers will be open and operating by the end of Fiscal Year 2000. The number of visits and student contacts to these wellness centers continues to increase as well.
- The state's immunization completion rates have increased in the last five years by 60 percent. Four out of five two-year olds in Delaware have been fully immunized against diphtheria, tetanus, whooping cough, polio and measles according to the National Immunization Survey conducted by the Centers for Disease Control and Prevention.
- Delaware's female breast cancer mortality rates are beginning to decrease after remaining level for many years and breast cancer incidence rates, after increasing for many years, have leveled off. There is evidence that cancer rates in general are decreasing in Delaware. In 1997, the average annual five-year age adjusted mortality rate has decreased for the third consecutive year.
- Enrollment in the Home Visiting Program continues to increase from 78 percent of eligible families in Fiscal Year 1998 to 85 percent in Fiscal Year 1999. Enrollment of teens in 1999 continues to be 83 percent, the same as 1998. Data from Fiscal Year 1999 indicates that 1689 referrals were made for continuing in-home parent education and support.
- Collaboration with community-based organizations, including the Delaware Perinatal Board, other state and private agencies has lead to a reduction of infant mortality in Delaware. The rate has dropped to 7.9 per 1000 live births (1992--1996 five-year averages).
- DPH has begun the administration of a State Drinking Water Revolving Fund loan program to assist with the funding of infrastructure improvements to public water systems throughout the State.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	71,897.9	68,354.6	71,400.9
ASF	2,592.4	4,499.1	4,914.4
TOTAL	74,490.3	72,853.7	76,315.3

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	1,329.0	1,350.5	1,350.5
ASF	33.3	39.3	41.3
NSF	191.5	188.0	205.5
TOTAL	1,553.8	1,577.8	1,597.3

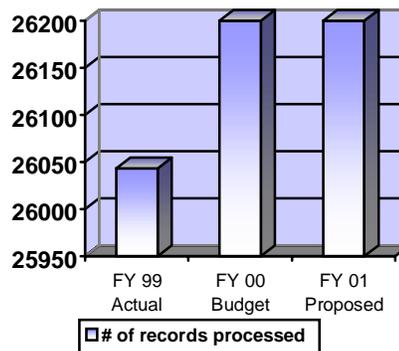
DIRECTOR'S OFFICE/SUPPORT SERVICES 35-05-10

ACTIVITIES

- Planning and evaluation
- Program coordination
- Contract development and management
- Grant coordination
- Coordination of public information
- Minority health
- Establishing management framework
- Fiscal management
- Revenue development and management
- Capital improvement
- Management information systems
- System automation
- Collecting and cataloging vital statistics

PERFORMANCE MEASURES

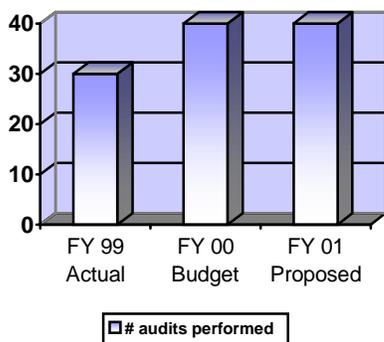
Number Of Vital Records Processed



DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

Number Of Contract Audits Performed



COMMUNITY HEALTH

35-05-20

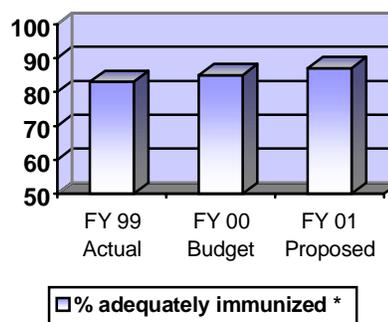
ACTIVITIES

- Maternal/Child Health Services, which include: family planning; services to children with special health care needs including Child Development Watch; enhanced care for high-risk pregnant women; prenatal care and well-child preventive health services for the uninsured including dental services and school-based health centers.
- Prevention and disease control initiatives for cancer, tobacco, diabetes and mental retardation; community health promotion; adolescent health services; child lead poisoning prevention.
- Communicable disease services, including sexually transmitted diseases prevention and treatment; AIDS prevention, testing and counseling; tuberculosis prevention and treatment; rabies control and prevention; and immunization services.
- Epidemiology and surveillance of health problems and trends.
- Assessment of the health risks of environmental hazards.
- Licensing and certification of hospitals, non-residential health facilities and managed care organizations.
- Administer the fluoridation of municipal water supplies initiative.
- Investigation of the use of narcotics and dangerous drugs.
- Laboratory testing and analysis.
- Hazard analysis, assessment, inspection and monitoring of food establishments.
- Inspections and monitoring of public drinking water systems.

- Accreditation and certification of firms and individuals that provide lead-based paint abatement training or services.
- Development of more effective primary and rural health care systems.

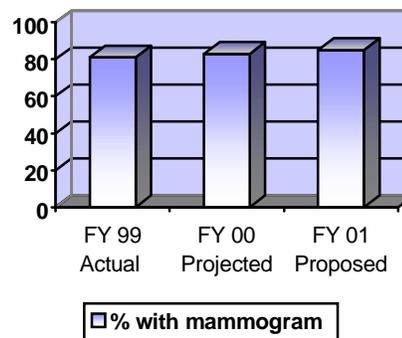
PERFORMANCE MEASURES

Percent Of Children Adequately Immunized

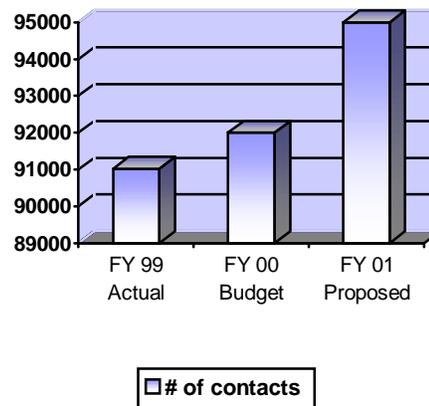


* 4 DPT, 3 polio, 1 measles; National Immunization Survey, Centers for Disease Control and Prevention

Women 50 & Older Receiving Mammogram

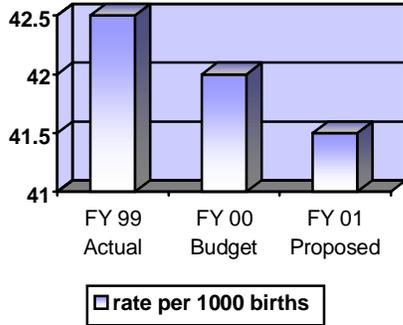


Number Of Students Having Contact With School-Based Health Center Activities

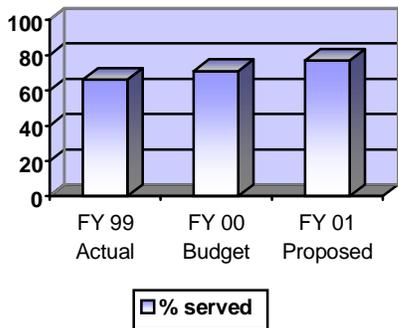


DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

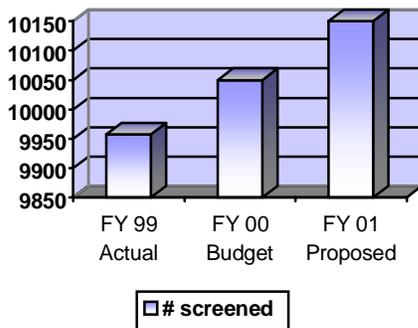
**Rate Of Births Among Teenage Girls
15-17 Years Of Age**



**Percent Of Delawareans Served By Fluoridated
Water**



**Number Of New Children < 6 Years Of Age Tested
For Lead Poisoning**



EMERGENCY MEDICAL SERVICES
35-05-30

ACTIVITIES

- Certify Delaware paramedics. Conduct reciprocity process for already trained paramedics coming to the state.
- Coordinate, monitor and evaluate the statewide paramedic program along with the advisory board and the counties.
- Coordinate EMS activities across the state. Collect and coordinate data from all EMS provider agencies. Support Fire Prevention Commission EMS activities.
- Coordinate Statewide Trauma System.
- Coordinate the initial training and recertification training for EMS personnel in the state. Serve as the National Registry of Emergency Medical Technicians (EMTs) representative for Delaware. Contract for the two-year paramedic training program through Delaware Technical and Community College. Provide continuing education for National Registry EMTs and Emergency Medical Dispatchers.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% paramedic responses less than 8 minutes, 59 seconds (national standard for paramedic response)	--	70	70

**DELAWARE HOSPITAL FOR THE
CHRONICALLY ILL**
35-05-40

ACTIVITIES

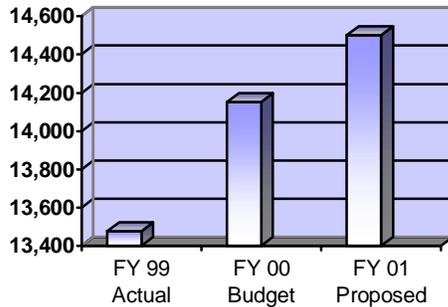
- Operate 300-bed nursing facility, comprised of 79 skilled and 221 intermediate beds.
- Provide immediate admission on an emergency basis for individuals referred from Adult Protective Services.
- Operate an integrated continuous quality improvement program.
- Operate a 25-bed secure care unit for cognitively impaired residents at high-risk for wandering.
- Operate an adult day care center to allow residents to stay in their homes.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

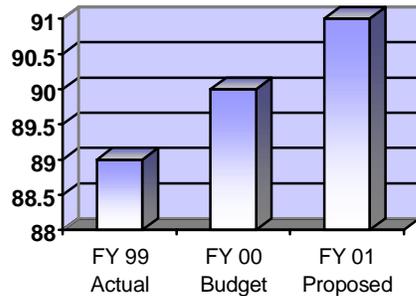
35-00-00

- 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 management.

Number Of Volunteer Hours



Percent Satisfactory Or Above Rating On Family/Resident Satisfaction Survey



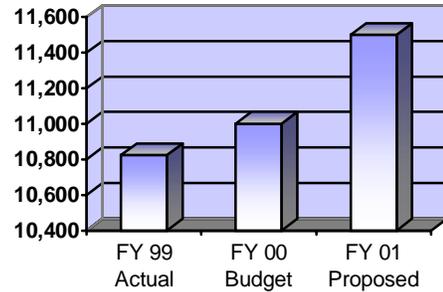
EMILY BISSELL

35-05-50

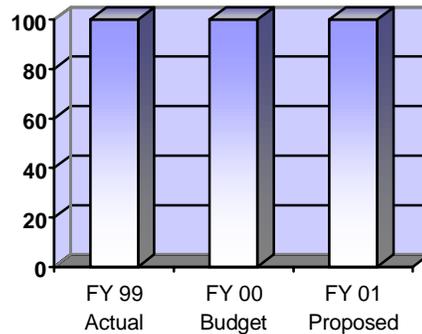
ACTIVITIES

- Operate a 82-bed nursing facility, comprised of 67 skilled and 15 intermediate beds.
- Provide immediate admission on an emergency basis for individuals referred from Adult Protective Services.
- Operate an integrated continuous quality improvement program.
- Provide Nurse Aide Certification Training Program.
- Provide computer network support services to all campus occupants.
- Provide support to community-based Long-Term Care Services.

Number Of Volunteer Hours



Percent Satisfactory Or Above Rating On Family/Resident Satisfaction Survey



GOVERNOR BACON

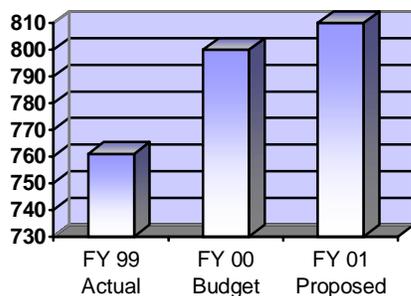
35-05-60

ACTIVITIES

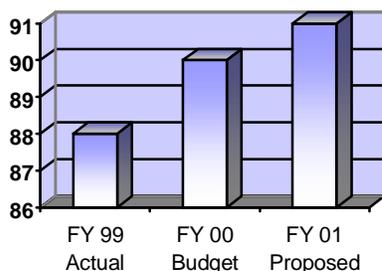
- Operate a 88-bed intermediate care nursing facility.
- Provide immediate admission on an emergency basis for individuals referred from Adult Protective Services.
- Operate an integrated program for quality assurance and continuous quality improvement programs.
- Operate automated system for interdisciplinary care planning and documentation, timekeeping, accounts receivable, patient census tracking and inventory management.
- Maintain utilities and infrastructure for other state and contractor agencies that operate on the campus.
- Provide Nurse Aide Certification Training Program.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

Number Of Volunteer Hours



Percent Satisfactory Or Above Rating On Family/Resident Satisfaction Survey



ALCOHOLISM, DRUG 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

- Establish and maintain a comprehensive, statewide, community alcohol, drug abuse and mental health system for adults by providing treatment, rehabilitation, community support, counseling, residential, crisis stabilization and detoxification services.
- Develop a system to provide behavioral health services under a managed long term care plan.
- Enhance the capability of all programs and providers to meet the changing and complex treatment needs of clients and consumers.
- Implement a uniform, automated, integrated management information system to enhance service planning, program evaluation and service system management.

BACKGROUND AND ACCOMPLISHMENTS

The impact of serious mental illness, alcoholism, drug abuse and problem gambling has led the division to enhance and improve services and increase coordination of policy and program development with other agencies. This focus is critical for the division to develop and coordinate services to meet the needs of persons with these problems.

Since Fiscal Year 1989, the division's goal has been to enhance community tenure and reduce rates of hospitalization for adults with psychiatric disabilities. The division has reduced the admission rate and long-term census by expanding the availability of community-based services, including housing and initiating a hospital-based psycho-social rehabilitation program model.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

The division is continuing to increase the availability of new generation psychotropic medications. These medications allow adults with psychiatric disabilities to reside in the community, thus reducing the need for long-term hospitalization. Medications also decrease symptoms and increase the level of functioning for people in the community, as well as those in inpatient settings.

The division's State Plan for Community Mental Health Services for Adults with Serious Mental Illness continues to promote the expansion of the statewide Community Support Program (CSP), by enhancing the availability of community-based services for adults with serious mental illness. The prevalence rate for adults with psychiatric disabilities is 5,364, based on the Delaware 1999 census data for individuals 18 years and older (578,066). The division estimates that 75 percent (4,023) are in immediate need of publicly funded community support services.

As of June 1999, the Delaware Psychiatric Center census was 338. There were 1,236 admissions in Fiscal Year 1999, which represents a 16 percent increase over Fiscal Year 1998. The Center provides psychiatric evaluation, diagnosis and treatment, including clinical, medical, dental, vocational and occupational services to adults who are in need of acute, general psychiatric, geriatric, intermediate care facility/skilled nursing facility-institution for mental disease (ICF/SNF-IMD) and forensic mental health services.

The division estimates that, as of 1999, about 51,065 adult Delawareans are current alcohol/drug abusers or are dependent on alcohol or illicit drugs. The demand for treatment is estimated to be 10,300, with the need for publicly funded treatment to be 7,700. In Fiscal Year 1999, there were an estimated 7,283 admissions to the division's treatment programs and detoxification units.

The division provides a statewide, comprehensive system of alcoholism and drug abuse treatment services for adults, age 18 years and older. Services include: outpatient treatment services, including counseling, methadone maintenance, intensive outpatient treatment, case management and outreach services; continuous treatment team services for persons disabled by alcoholism and drug addiction; ambulatory and residential detoxification; residential treatment and recovery services; and adult prevention and early intervention services.

The division has developed specialized services for sub-groups of persons disabled by alcoholism and drug addiction. These services include continuous treatment teams and specialized treatment for the homeless, substance abusing pregnant women, women with dependent children, injection drug users and persons with a history of chronic relapse.

There is a need to increase intensive community-based treatment services, including residential services, to meet the complex treatment needs of adults with psychiatric disabilities and adults disabled by substance abuse. There is an increase in the number of persons with multiple diagnoses who are seeking treatment. These are individuals with serious mental health problems with the co-occurrence of alcohol/drug addiction; persons with physical disabilities or general health problems; persons who are unemployed and/or homeless; and persons who are involved with the criminal justice system. Multiple drug resistant tuberculosis, HIV/AIDS and sexually transmitted diseases are continuing to appear among substance abusing populations. The division is committed to developing programs and working with other health and social service agencies to address the growing numbers of persons with multiple needs.

With funds raised by the Video Lottery Act, the division continues to provide services for prevention, education and treatment for problem gamblers and their family members.

In Fiscal Year 2000, the division will continue development and move to the implementation phase of a system to provide behavioral health services under a managed long term care plan. These are services for persons who have severe and persistent mental illness and/or substance dependence disorder. Primary objectives of the behavioral health program are to:

- Promote the use of community based services for the eligible population, regardless of the individual's insurance coverage.
- Decrease reliance on inpatient treatment and custodial care at the Delaware Psychiatric Center.
- Promote consumer/client choice and preference in the way in which services are delivered.
- Promote efficiency in the delivery of community based behavioral health care services.
- Develop capacity in the provider system to deliver integrated treatment of mental illness and substance dependence.
- Ensure the quality of services and appropriateness of service utilization.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

In order to successfully implement managed long-term care, the division will need to make changes to both its service delivery system and administrative structure.

Over the last nine years, the division has redesigned and enhanced its Management Information System (MIS). Enhancements include: implementing a single client census system for both mental health and substance abuse treatment programs using a single client identifier; establishing an automated system to obtain information on shared consumers; creating routine and ad hoc reports; and designing a set of performance indicators. A consumer satisfaction survey has been developed and piloted. In addition, outcome instruments have been developed and are being piloted. Increasingly, information is automated, aggregated and stored in the division's database to make access to data fast, easy and convenient.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	60,717.8	62,292.0	65,775.0
ASF	651.0	6,764.4	6,767.3
TOTAL	61,368.8	69,056.4	72,542.3

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	908.9	906.9	906.9
ASF	4.0	4.0	4.0
NSF	16.8	18.8	18.8
TOTAL	929.7	929.7	929.7

ADMINISTRATION - MENTAL HEALTH 35-06-10

ACTIVITIES

- Planning, program development and evaluation.
- Budget preparation and administration; federal grants management; fiscal management; financial documents processing (accounts payable); contract management; and community support services administration.
- Coordination and provision of training for the division and its contractors.
- Alcohol and drug abuse program licensing and monitoring; mental health program monitoring; community support program services certification and auditing; Screening and Evaluation Team coordination; patient rights/department Policy Memorandum (PM) 46 monitoring; and DUI problem liaison.

- Management information systems development and maintenance.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% licenses and certifications processed within 2 months	43	75	80

COMMUNITY MENTAL HEALTH 35-06-20

ACTIVITIES

- Adult prevention and intervention services - consultation and education to individuals, families, the public and other agencies.
- Emergency services - 24 hours per day, seven days per week telephone counseling, face-to-face and mobile interventions for crisis evaluation, intervention, management and referral; and 24-hour community-based crisis care as an alternative to hospitalization.
- Adult community counseling services - psychiatric assessment, diagnosis and evaluation; psychotropic medication management; individual and group psychotherapy; and clinical case management.
- Community support services for adults with psychiatric disabilities - psychosocial rehabilitation services, residential services, continuous treatment teams; clinic-based services; and support case management services.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% consumers with schizophrenia receiving new anti-psychotic medication	25	27	29
% consumers in community support programs who are employed	29	30	31
% consumers with serious mental illness receiving subsidies for safe and decent housing	30	31	32

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

INPATIENT MENTAL HEALTH
35-06-30

ACTIVITIES

- Psychiatric evaluation, diagnosis and treatment - clinical, medical, dental, vocational and occupational services.
- Psychiatric rehabilitation program - increase patient skills to live and function more independently in the environment of their choice; aid patients in discharge readiness and enhance their ability to successfully adjust to community living.
- Research and education - psychiatric residency training program and medical student program.
- Support services to the Delaware Psychiatric Center and over ten other state agencies - laundry, dietary, pharmacy, maintenance, housekeeping and security.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% patients with schizophrenia receiving new anti-psychotic medication	65	70	75
# admissions per 100,000 adult population	218	236	257

ALCOHOLISM AND DRUG ABUSE
35-06-40

ACTIVITIES

- Adult prevention and intervention services - community intervention, information, education and referral programs.
- Adult outpatient treatment programs - community counseling (providing diagnostic and treatment services), methadone maintenance, intensive outpatient, case management and outreach services.
- Adult community support and intensive case management programs - intensive, non-residential treatment, rehabilitation and support services through continuous treatment teams for persons disabled by alcoholism or drug dependence.
- Adult detoxification and residential services - ambulatory and residential detoxification; residential treatment and rehabilitation; and halfway houses (transitional residential care after discharge from residential treatment).

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% detoxification clients who receive one or more other treatment services	36	37	38
% clients w/improved employment status from admission to discharge	7	8	9

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

SOCIAL SERVICES

35-07-00

MISSION

The mission of the Division 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

Promote health and well being by strengthening maternal and child health

- Expand Medicaid coverage for pregnant women and children at higher poverty levels.
- Continue outreach for the Children's Health Insurance Program (CHIP).
- Expand "Smart Start" extended services to more high-risk pregnant teens.
- Support expansion of medical and dental services for poor children.
- Work with managed care companies, Public Health, Federally Qualified Health Centers (FQHC's) and the State Child Mental Health Agency to improve coordination in the provision and delivery of primary health care services for children and adolescents.
- Fully implement the State's childhood immunization program.

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

- Implement the TANF 3-Year Workfare program statewide for all applicants effective January 2000.
- Provide transitional services under the statewide TANF program to support client success in statewide TANF/Workfare activities.
- Adjust the Employment and Training program design based on continuous monitoring, community input, agency reorganization, and State and national welfare reform mandates.
- Help reduce teen pregnancy and support young parent families.

- Achieve Federal and State mandates for TANF work participation rates for welfare clients.
- In partnership with the Department of Labor, the Delaware Economic Development Office, the Department of Transportation and contracted service providers, place welfare clients in employment or work activity and provide support for long-term employment retention.
- Enhance the employment and training tracking and reporting system.
- Increase and maintain child care provider fees at 75 percent of the market rate.
- Ensure access for parents requiring infant care and other hard to find care through community partnerships and quality improvements.
- Implement a grant diversion program.
- Monitor the family responsibility contract for TANF clients and continuously improve it to achieve maximum results.
- Evaluate the results of State and Federal welfare reform to ensure programmatic compliance and the achievement of expected outcomes.

Protect vulnerable populations by enhancing collaborative partnerships for support services such as transportation, mental health for families and for the elderly and the disabled

- Develop and implement managed care programs and other Delaware and national health care reforms.
- Improve transportation services to ensure clients can get to health care providers.
- Develop initiatives supporting DHSS community based and institutional based long-term care plans.
- Provide extended Medicaid transition coverage for former TANF recipients who go to work.
- Phase in Nursing Home and Home and Community Based Services (HCBS) for elderly and disabled up to 300 percent of SSI standard.
- Work with state adult and child mental health agencies to provide services outside the managed care service package.
- Provide pharmacy coverage for low income uninsured individuals by implementing the Pharmacy Assistance for the Elderly and Disabled program.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

Manage resources efficiently with emphasis on information resource management, Medicaid cost containment and maximizing economy and efficiency in DSS programs

- Develop plans to manage DSS programs with reduced federal funding.
- Maximize federal funding through "cost recovery" projects.
- Improve DSS administration, program management, operations and customer service through organizational redesign that focuses on a client-centered approach.
- Continue to improve Medicaid State, accident and third party recoveries.
- Replace the information system and support development of an EBT (Electronic Benefit Transfer) system and other automation projects.
- Ensure efficient delivery of services to clients by developing and enhancing automated systems including the long-term care system, the Employment and Training system and the child care system.
- Reallocate existing staff/program resources to best achieve organizational mission.
- Insure diversified recruitment and hiring.
- Ensure that only eligible persons receive benefits and benefits are in correct amounts.

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 approximately 85,000 Delawareans each month. The four major program areas are:

- Employment and training.
- Child day care.
- Medical assistance (includes Medicaid, the Delaware Healthy Children Program, Renal Disease Program, the Legal Non-Citizen Program and a new Pharmacy Assistance for the Elderly and Disabled Program).
- Financial assistance (TANF, Emergency Assistance, General Assistance and Food Stamps).

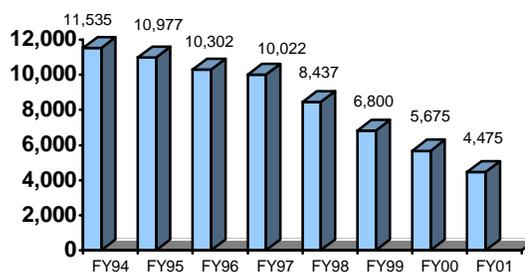
The division achieves its goals by:

- Increasing client self-sufficiency and independence through the TANF welfare reform program.
- Improving access to health care for the elderly, disabled, and low-income families.
- Strengthening maternal and child health.
- Efficiently managing resources.

Some of the division's major accomplishments include:

- In October 1995, the Divisions of Social Services (DSS) and Child Support Enforcement (DCSE) along with the Department of Labor and the Delaware Economic Development Office embarked on a welfare reform plan. The "Delaware's A Better Chance Welfare Reform Program" became the State's TANF program in August 1996 when the national welfare law was passed.
- Since the implementation of "Delaware's A Better Chance Welfare Reform Program" in October 1995, there have been 2,030 full-time job placements and 1,240 part-time job placements. The average hourly wage at full-time placement is \$6.34 and \$5.78 at part-time placement. The minimum national hourly wage is \$5.25.
- Due to the success of welfare reform and a strong economy, the number of families receiving cash assistance has declined steadily over the past several years. This trend is expected to continue in the foreseeable future.

Decline in TANF Cash Assistance Program



The number of children receiving subsidized childcare has grown from 1,528 in 1987 to 10,200 in Fiscal Year 1999. A major program expansion is planned for Fiscal Year 2000. The family income eligibility limit is being increased from 155 percent to 200 percent of the poverty level. The number of children covered by the program is expected to increase to over 14,000 by Fiscal Year 2001.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

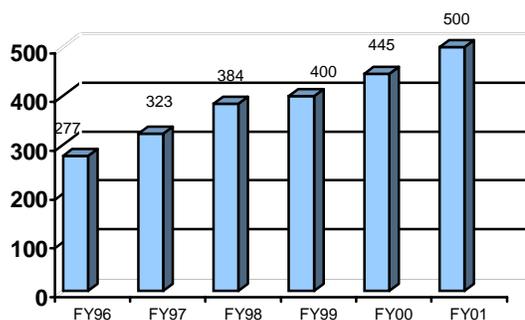
Child Care Program Growth



- In the past year the Division of Social Services has continued its expanded Medicaid services to the nonpublic assistance low-income population. In 1998, the State provided Medicaid coverage to 22,201 pregnant women and children to age 19 who are not on welfare. This group has increased 19.5 percent over 1997.
- The Medicaid program submitted a waiver to the Health Care Financing Administration (HCFA) to establish a managed care system and expand Medicaid coverage to all uninsured adults with incomes under the Federal poverty level. The federal waiver was approved and the program started in January 1996. The program increases access to good primary care and helps to contain the growth in Medicaid spending by placing the majority of clients into a managed care system. At the end of Fiscal Year 1999, 70,000 clients (about 80 percent of all Medicaid clients) were enrolled in managed care.
- The DSS Medicaid program initiated a program with hospitals in all three counties to reduce long-term care application time for hospitalized patients. Medicaid trained hospital staff on long-term care applications so staff was able to secure needed verifications for applicants thoroughly and quickly. Applicants can now be discharged from hospitals to nursing homes very quickly, which results in care in a more appropriate setting and at a lesser cost.
- DSS/Medicaid assumed the operation of the Chronic Renal Disease Program on July 1, 1993. This is a State-funded program which serves clients who suffer from end-stage renal disease or who have had a kidney transplant. Steps taken to date to improve the program and make it more "user friendly" include: assignment of an RN Case Manager to coordinate services and perform redeterminations, referrals to

other services that will benefit clients, securing prescription drugs from a mail order house and having them delivered directly to client homes, securing a much needed food supplement at the wholesale rate from the manufacturer, and automation of billing. Although the number of people who need program services has increased steadily, there is no waiting list and all clients are being served.

Growth in Chronic Renal Program



- In January 1999, DSS began a new program to expand health insurance coverage to children in low income families. The Delaware Healthy Children Program uses both federal and State funds to provide services through a managed care program. Children are eligible if the family income is above the Medicaid eligibility limit up to 200 percent of the poverty level. Families must pay a small monthly premium of \$10, \$15 or \$25 depending on family income. Estimates are that 13,000 children may be eligible for this program. As of August 1999, about 1,950 children were participating in the program.
- Division of Social Services is a partner in a coalition, *Covering Kids Program* funded by Robert Wood Johnson Foundation to promote creative outreach and simplified enrollment activities to assure low income uninsured children have access to health insurance. Through a three-year \$900,000 grant, Division of Social Services, Division of Public Health and community organizations have agreed to find and enroll 10,000 children into Medicaid or the Delaware Healthy Children Program. Two pilots will operate in the State to find and engage the families. A media campaign is planned. The activities will be monitored for success.
- In Fiscal Year 1999, the Medicaid program has continued its efforts at cost management and has been successful in recovering \$11.2 million in numerous areas including:

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

- Surveillance and Utilization Review Recoveries
- Third Party Liability Recoveries
- Pharmaceutical Labelers Rebate

- Over the past several years, DSS Medicaid staff has worked closely with the Budget Office, the Department of Education and the Department of Services for Children Youth and Families to identify State funded services that could qualify for federal matching funds. Through these "cost recovery" projects, in Fiscal Year 1999, almost \$13 million in federal Medicaid matching funds was received by the State.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	253,946.1	260,483.3	287,936.6
ASF	16,257.7	17,966.5	22,788.9
TOTAL	270,203.8	278,449.8	310,725.5

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	283.2	282.6	282.6
ASF	2.0	2.0	2.0
NSF	314.7	314.3	314.3
TOTAL	599.9	598.9	598.9

SOCIAL SERVICES

35-07-01

ACTIVITIES

- Provide employment and training services, financial assistance and health care coverage to eligible families and individuals.
- Link families with other necessary services.
- Develop supportive collaborations and partnerships.
- Administer support services including child day care and transportation.
- Manage budget, fiscal, facilities and contracting activities.
- Manage automated systems.
- Train, develop and coach staff.
- Create a climate that respects individuals and welcomes their differences.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% TANF clients who are working	24.4	20	20
% Medicaid clients with access to good primary care	80	80	90
% of eligible children enrolled in the Delaware Healthy Children Program	16	49	86

VISUALLY IMPAIRED

35-08-00

MISSION

To facilitate the independence of individuals with severe visual impairments throughout their lifetimes by providing a continuum of services, including:

- 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

- To promote health and well being, the Division for the Visually Impaired (DVI) reduces or eliminates all barriers to lifelong personal independence produced by the sensory disability of vision loss.
- To foster self-sufficiency, DVI develops employment and job skills training programs for persons who are blind and visually impaired.
- To protect vulnerable populations, DVI focuses outreach efforts in under served communities.

BACKGROUND AND ACCOMPLISHMENTS

Approximately 3,000 persons have been identified throughout the state, who are legally blind or severely visually impaired. 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 is organized into three primary service programs, which include Education, Vocational Rehabilitation and Independent Living. Additionally, there are two direct employment units: Delaware Industries for the Blind and the Business Enterprise Program. And, there are support services such as the Materials Center, Volunteer Services, Orientation and Mobility, Low Vision Services, Training Center services, Fiscal Operations, and Information Systems Support.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

Due to the nature of the disability that the consumers have, DVI staff provides the majority of services in the most appropriate and effective environment. It is vital that staff continue to be able to provide services to clients.

About 200 children with visual impairments and their families are currently receiving services from DVI. These services which include itinerant education and counseling services to children, are provided throughout the State in their school environment.

Independent Living Services for persons with visual impairments were provided to 1,224 persons during this past year. Instructions on daily living skills, communication devices, low vision aids and evaluations were made during 1,777 home visits to consumers. Over 79 percent of these individuals served were age 55+ and 55 percent had one or more additional disabilities besides vision loss.

Last year Vocational Rehabilitation services were provided to 199 Delawareans, 18 of which were receiving post-employment services. Twenty-one consumers were successfully placed in employment; of which 19 were in competitive positions within an integrated setting, earning minimum wage or above; one in a sheltered placement and one in a homemaker setting.

For Fiscal Year 1999, the Low Vision program served 374 consumers statewide. To date, Orientation and Mobility (O&M) services were provided to 135 consumers Statewide.

DVI has 80 active volunteers working as Braillists, narrators, readers, office assistants, and 12 inmates providing Braille services through the "Men with a Message" prison Braille program. These individuals helped to generate 36,547 pages of Braille, 74 audio tapes, and 29,117 large print pages during FY 1999. Currently ten inmates are certified Braillists through the Library of Congress in Literary Braille, and two others are in training for certification. Of the ten certified, one is also certified in Nemeth Code (Mathematical Braille) and another individual is in training.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	2,135.5	2,380.4	2,593.0
ASF	876.7	1,206.8	1,208.4
TOTAL	3,012.2	3,587.2	3,801.4

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	32.4	34.4	35.8
ASF	3.0	3.0	3.0
NSF	31.6	31.6	30.2
TOTAL	67.0	69.0	69.0

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, as well as through the provision of textbooks and instructional materials in appropriate medium.
- Provide an Independent Living Services program to persons of all ages in the areas of adaptive training, low-tech adaptive equipment, as well as counseling which promotes personal independence and emotional adjustment.
- Provide Vocational Rehabilitation and Supported Employment programs, which provide community-based services focusing on the individual placement model to persons aged 14 and older designed to facilitate employment commensurate with life goals, skills, and abilities.
- Provide a Business Enterprise Program affording competitive and supportive employment opportunities in various positions within the food service industry, as well as in management of food service locations.
- Provide an industry and workshop program (Delaware Industries for the Blind) that allows for the development of employment skills, for competitive, supportive and/or sheltered career opportunities.
- Provide support services such as low vision services; Orientation & Mobility; training center services; peer and support group counseling programs; materials center; and outreach and public information.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% of successful vocational rehabilitation job placements in jobs with competitive wages or salaries.	90	94	94
% of students achieving 85% or better on annual grade-level skills and behaviors included on the Michigan Outcome Performance Measures assessment.	65	75	75

**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 individuals receiving long-term care services and to ensure facilities' compliance with applicable state and federal law and regulation designed to protect the rights of these residents.

KEY OBJECTIVES

- Enforce State statutes and regulations regarding the quality of care and quality of life of individuals receiving long-term care services as well as promulgate regulations to implement these laws.
- License and certify long-term care facilities and conduct annual, complaint-driven and surprise inspections to determine compliance with federal and state statutes and regulations.
- Serve as centralized location to which all complaints regarding long term care may be directed and which evaluates complaints for appropriate referral.
- Receive and investigate complaints of alleged crimes such as abuse, neglect, and financial exploitation.
- Monitor criminal background check process of applicants for long term care jobs and advise facilities of results disqualifying applicant(s) from employment.
- Monitor and analyze trends related to problems with quality of care and propose public policy changes to address identified problems.

BACKGROUND AND ACCOMPLISHMENTS

Delaware's 139th General Assembly created the Division of Long Term Care and Residents Protection to promote the quality of life for individuals receiving long-term care services and ensure these residents are safe and secure -- free from abuse, neglect and financial exploitation.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

To achieve these goals the division has

- A Licensing and Certification Unit, that ensures compliance of facilities with state and federal statues and regulations regarding care and resident rights; and
- A Investigations/Quality Assurance Unit, that enforces the state criminal background check and drug testing requirements for employment in long term care facilities and conducts investigations into alleged crimes against long term care residents. These units became operational in March 1999. Since, each has made significant contributions to resident protection.

Their accomplishments include:

- Closely monitoring eight poor performing facilities and through enforcement actions achieving facility compliance and improved quality of care for residents.
- Issuing and renewing state licenses to 26 Nursing Homes; seven Assisted Living facilities; four Group Homes for the Mentally Ill; 41 Neighborhood Homes for the Mentally Retarded; and 68 Rest Family Care Homes.
- Conducting 23 compliance surveys of nursing homes for federal re-certification.
- Participating in the development of the CNA Training bill to increase and improve training of long term care givers.
- Establishing the Incident Referral Center, a centralized location within DHSS to which all complaints regarding long term care may be directed and which evaluates complaints for investigation and/or referral.
- Designing and implementing a database into which all long term care complaints and incidents are entered. The database serves as the foundation of a case management system – designed by the Unit – in which cases are evaluated, prioritized, assigned and followed to completion.
- Finally, since January 1999, one in 20 applicants for long term care jobs were determined to have disqualifying criminal histories and were barred by the Division from long term care employment. Investigations/Quality Assurance Unit also informed facilities in this time of over 1,000 applicants with non-disqualifying histories.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	680.0	2,538.4	2,738.7
ASF	--	--	--
TOTAL	680.0	2,538.4	2,738.7

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	14.5	43.6	43.6
ASF	--	--	--
NSF	1.5	20.4	20.4
TOTAL	16.0	64.0	64.0

LONG TERM CARE RESIDENTS PROTECTION
35-09-01

ACTIVITIES

- Operate and administer the Long Term Care Incident Referral Center (IRC);
- License long-term care facilities to operate in Delaware;
- Regulate compliance with federal regulations and standards for certification of long term care facilities;
- Respond to complaints regarding care and/or violations of residents rights;
- Conduct surprise inspections including night and weekend visits;
- Educate long term care providers regarding pre-licensure requirements;
- Maintain Certified Nursing Assistant (CNA) Registry;
- Maintain and administer Adult Abuse Registry;
- Investigate complaints of alleged abuse, neglect, and financial exploitation of long term care residents; and
- Ensure compliance with criminal background check and drug testing law and monitor both.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget*	FY 2001 Gov. Rec.
% "immediate risk" complaints responded to within 24 hours	N/A	100	100
% of persons conditionally hired in facilities who are later found to have a disqualifying criminal history will be released from employment.*	N/A	N/A	100
% nursing facilities that had surprise inspection in addition to licensure/certification survey**	N/A	13.6	25

* Based on 30% sample of facilities

** Since March 1, 1999

CHILD SUPPORT ENFORCEMENT
35-10-00

MISSION

To support family independence through the provision of child support enforcement services with particular emphasis upon stringent enforcement techniques, fast and efficient case processing, effective legal representation and prompt distribution of child support payments.

KEY OBJECTIVES

Fostering self-sufficiency

- Increase the rate of paternity established by two percent per year 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 two percent per year by providing a wide array of expedited procedures for the efficient administration of child support enforcement actions related to ordering genetic testing, issuing subpoenas, imposing penalties for non-compliance and gaining access to relevant records.
- Increase the percentage of current child support collected by two percent per year by increasing efforts in two areas. One area includes establishing and refining the initiation and transfer of wage attachments on child support (IV-D) cases. The second area includes reducing welfare dependency by continuing to increase child support collections on TANF (formerly AFDC) cases.
- Increase the percentage of cases paying IV-D child support arrears by one percent per year by increasing efforts in two areas. One area includes refining the Delaware Parents Seek Work program that mandates employment requirements for non-custodial parents who owe past-due child support as well as imposing immediate sanctions for failure to comply with court ordered participation. The second area involves developing and implementing a data match process with financial institutions and other public/private entities for the purpose of locating non-custodial parents and seizing the financial accounts of delinquent child support obligors.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

BACKGROUND AND ACCOMPLISHMENTS

The Child Support Enforcement Program was developed in 1975 to shift the fiscal responsibility for the support of children from the government to those morally and legally obligated.

The mandates of the Personal Responsibility and Work Opportunity Act (PRWORA) of 1996 required many changes in the operation of the child support program. In addition, the elimination of the Aid to Families with Dependent Children (AFDC) program put more emphasis on the child support program and its relation to the new Temporary Assistance for Needy Families (TANF). TANF replaces the AFDC program and is operated under a waiver in Delaware under "Delaware's A Better Chance Welfare Reform Program".

When PRWORA is fully implemented, the state should realize increases in state revenue. This will help to reduce client dependency on the TANF and "Delaware's A Better Chance Welfare Reform Program".

Child support collection is an integral part of any policy to reduce poverty, strengthen families, and prevent welfare dependency, and the Family Support Act mandated all states to have a stronger child support enforcement program. It imposed time and performance standards as well as new requirements on state child support agencies for increasing paternity establishment and enhancing enforcement measures to maximize collections.

Under the federal Child Support Performance and Incentive Act of 1998, child support incentives provided by the federal Office of Child Support Enforcement have been significantly revised effective October 1, 1999. To meet the challenges from child support programs of the other states that are competing for a limited annual pool of federal incentive funding, DCSE will continue to seek ways to increase performance.

Accomplishments

DCSE has continued to take extensive advantage of new technology. The expanded use of computers by individuals, the private sector, and government have provided opportunities for better service to a growing number of clients on a cost effective basis.

In State Fiscal Year 1999, the division collected \$63,236,449 in child support payments, with \$5,850,595 returned to reimburse the State and federal government for benefits provided to children through the Temporary Assistance to Needy Families and Foster Care programs. This represents approximately nine percent of the total

child support collections. The remaining 91 percent of child support collections were distributed to custodial parents caring for dependent children from mostly single parent households. Child support collections have increased by an average of 13 percent annually since 1985.

Automated Wage Withholding: Wage withholding is the most successful means available to ensure regular, dependable payments of child support. After a successful pilot in Kent County, the Delaware Automated Child Support Enforcement System enhancements to automatically generate a wage withholding notice were implemented statewide on January 29, 1999. The wage withholding notices instruct the employer, if appropriate, to enroll the child(ren) on health insurance coverage available to the non-custodial parent.

Voluntary Paternity Establishment: This program, which was developed in conjunction with Delaware hospitals, allows parents to acknowledge paternity at the time a child is born. Since program implementation began in January 1995, a total of 5,460 voluntary paternity acknowledgments have been received and processed through July 1999, which represents an average of 108 acknowledgments a month. DCSE continues to explore new avenues for outreach of paternity acknowledgement services. This program is an important factor in helping Delaware achieve the federal goal of a 90 percent paternity establishment rate.

New Hire Reporting: PRWORA requires each state to implement a New Hire Reporting Program. With the passage of Delaware's Senate Bill No. 162, employers are required to submit the following information to DCSE: employee name, employee social security number, and employee address, employer name, employer address, and the employer's federal employer identification number.

Since October 1, 1997, Delaware has submitted 734,018 reports to the national Directory of New Hires. In July, 1999 alone 9,082 reports were processed by DCSE. This number will continue to grow as more and more employers comply with this new requirement.

License Suspension and Denial: DCSE has been granted the authority, required by PRWORA and enacted under House Bill No. 496 and Senate Bill No. 162, to authorize Delaware's state licensing agencies to suspend or deny the drivers, occupational/business, professional, and recreational licenses of delinquent non-custodial parents and Family Court fugitives.

This enforcement initiative is designed to encourage those non-custodial parents who are self-employed and

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

those who have avoided automated wage withholding to pay their past due child support and remain current with their support payments.

DCSE is presently suspending driver's licenses on a manual basis, pending completion of programming to enable electronic interfaces between the various licensing agencies. Out of 205 cases reviewed, 124 non-custodial parents had their drivers' licenses suspended as of August 11, 1999; 52 more are pending. We anticipate that the electronic interface will be in place by November 1999.

Financial Institution Data Matches: Under PRWORA, all states are required to enter into agreements with all financial institutions doing business within their state. The purpose of these agreements is to develop and operate a data match system which: (1) identifies the assets of delinquent non-custodial parents held in financial institutions, (2) imposes liens and levies on those accounts, and (3) undertakes the seizure of these assets. Delaware enacted Senate Bill No. 162 (effective July 1997) to comply with this federal mandate

Parents Seek Work: In response to PRWORA mandates, DCSE, in cooperation with the Department of Labor and the Division of Social Services, has initiated a Parent Seek Work Program (PSW). PRWORA gives states the authority to issue orders against delinquent non-custodial parents (NCPs) of children receiving benefits under the TANF Program.

Under the PSW Program, Family Court orders the NCP to participate in PSW and sign a Contract of Mutual Responsibility. The NCP utilizes Department of Labor services for the purposes of work attachment. In addition, PSW mandates participation in work readiness activities, supervised job search, and employment support services. These orders may be issued through the appropriate court or by administrative process and to ensure compliance with a child support payment plan or participation in appropriate work activities.

Since November 1998, 80 non-custodial parents have been enrolled in PSW. Twenty-three have secured employment; 31 have been returned to OCSE as non-compliant.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	2,162.4	2,523.5	2,622.3
ASF	893.2	1,296.2	1,326.3
TOTAL	3,055.6	3,819.7	3,948.6

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	46.9	47.3	47.3
ASF	17.4	17.4	17.4
NSF	126.2	125.3	125.3
TOTAL	190.5	190.0	190.0

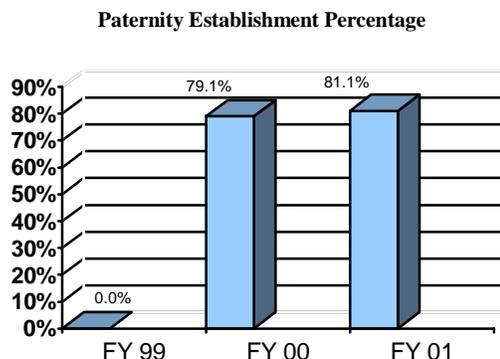
CHILD SUPPORT ENFORCEMENT

35-10-01

ACTIVITIES

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

Increase The Rate Of Paternity By 2 Percentage Points Per Year.



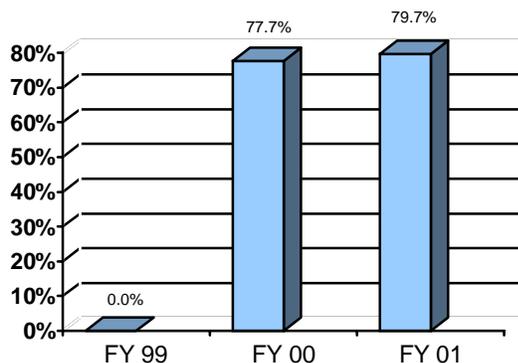
Note: In Fiscal Year 97 the national average for paternity establishment was 64 percent, while Delaware's rate was 73.3 percent. *Data not available until end of October.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

Increase The Percentage Of Child Support Orders Established By 2 Percentage Points Per Year.

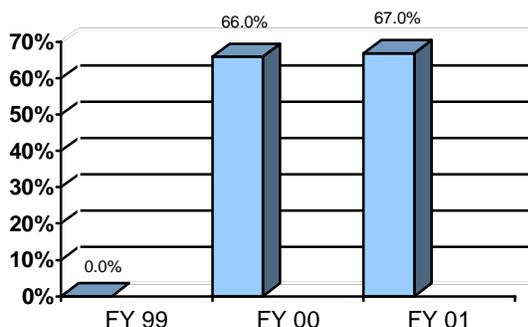
Percentage of Cases with Established Child Support Orders



Note: In Fiscal Year 97, the national average for percentage of cases with established child support orders was 58 percent, while Delaware's rate was 74.0 percent. *Data not available until end of October.

Increase The Percentage Of Current Child Support Collected By 2 Percentage Points Per Year.

Percentage of Current Support Collected



Note: In Fiscal Year 97, the national average for current support collected was 54 percent, while Delaware's rate was 60.3 percent. *Data not available until end of October.

MENTAL RETARDATION

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 primary goal of the division's programs is to maximize individual development through:

- quality services;
- flexibility of service options;
- meeting critical needs; and
- supporting consumer choice.

KEY OBJECTIVES

- Increase capacity in the division's community-based programs in order to meet the critical needs of individuals with developmental disabilities and their families.
- Maintain quality services at the Stockley Center, in the areas of residential, day, medical and therapy services.
- Expand family support services to adequately and effectively support families who have a family member(s) with a developmental disability living at home.
- Continue to improve the division's quality management systems to ensure comprehensive program monitoring and oversight to prevent problems and assure individual concerns are addressed quickly.
- Analyze and improve the quality of the division's customer service orientation through improving services for the division's consumers, increasing management support of the division's staff and building community partnerships with other public and private agencies. This includes restructuring the division in order to ensure services are consumer driven and based on individual needs.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

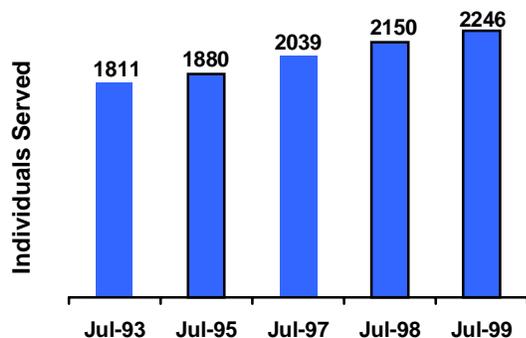
35-00-00

- Revise the division's management plan to ensure a service delivery system that is responsive to changing community needs.

BACKGROUND AND ACCOMPLISHMENTS

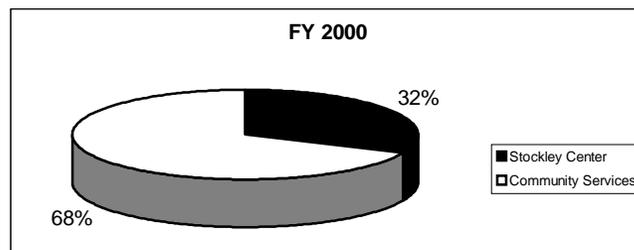
The Division of Mental Retardation is responsible for providing comprehensive support services to individuals with mental retardation/developmental disabilities. The goals of the division's service delivery system include maximizing individual development, supporting individual choice, community integration and protecting consumers' health and safety needs. Although the level and intensity of services can change over time, they are generally needed and provided throughout a person's lifetime. This severely impacts program capacity and the division's ability to meet growing community needs. Services vary in the level of intensity and restrictiveness. Services include facility-based care at the Stockley Center; community residential programs such as foster homes, group homes and supported living. In addition, the division provides vocational related services including supported employment and day habilitation as well as case management and other professional supports; an early childhood intervention program and family support services. Major service trends include:

- **Increased Capacity** - A primary issue of the division is the necessity to increase the capacity of its community-based programs to meet growing community needs. Requests for services have increased significantly in recent years, which strains the agency's ability to maintain quality services for current consumers while attempting to serve additional people and families.



- **Least restrictive setting** - The division strives to provide services that are flexible, supportive of choice and provided in environments that are as least restrictive as possible while protecting and safeguarding consumers' health and safety needs.

Thus, the division continues to reduce the population of the Stockley Center and shift resources and individuals receiving services to less restrictive and more flexible community-based residential living options.



- **Growing Specialized Needs** - 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 growing number of residents with skilled care needs. This trend will continue as the population ages.
 - A growth in the Special Populations Program serving individuals with challenging behaviors, autism and prader willi syndrome.
 - A growing number of individuals who are involved with the criminal justice system.

Significant accomplishments have been made in the following areas:

- Development and implementation of a consumer-driven service planning process.
- Conversion of 13 ICF/MR homes into smaller neighborhood homes.
- Restructuring and expansion of the division's quality assurance and program monitoring activities to ensure services meet standards and personal choice.
- Restructuring of the division's fiscal operations to ensure administrative oversight of budget development, contracts, revenue collections, agency expenditures and Management Information Systems.
- Development and continuing expansion of the division's partnership with the University of Delaware. The partnership encompasses a comprehensive training and staff development

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

program for all levels of staff working in DMR programs throughout Delaware.

- Development and continuing expansion of the division's partnership with the Association for the Rights of Citizens with Mental Retardation (Arc/DE) which has led to the establishment of a non-profit housing trust.
- Expansion of family support services, which continues to provide families with respite, case management and other professional support services.
- Completion of the first phase of the Self Determination Project, which is designed to help individuals receiving services develop skills that will enable them to become effective self advocates.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	55,142.8	58,178.9	62,927.9
ASF	663.6	1,084.0	1,084.4
TOTAL	55,806.4	59,262.9	64,012.3

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	864.8	863.8	863.8
ASF	--	1.0	1.0
NSF	3.0	3.0	3.0
TOTAL	867.8	867.8	867.8

ADMINISTRATION - MENTAL RETARDATION

35-11-10

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

ACTIVITIES

Agency Management and Administration

- Oversight of agency direction including setting standards and the development of long-range strategic plans.
- Develop, maintain and ensure implementation of division policies and procedures.
- Personnel management.

- Management of the division's fiscal operations.
- Administration of benefit programs for individuals in residential programs to include management of the Home and Community-based Medicaid Waiver Program.
- Management and oversight of the division's quality assurance programs.
- Monitoring of agency's performance measures.
- Administration of the division's training and continuing education programs provided to employees.

Early Intervention/Prevention Program

- Developmental assessments for children at risk of developmental delay and service coordination for children and their families in conjunction with Child Development Watch.
- Consultation to other agencies and private physicians on children who have or who may develop disabilities.

Intake Eligibility Program

- Maintenance of a centralized statewide eligibility process.
- Ensure 90 percent of all new applicants are processed within 90 days.
- Generate reports to identify placement needs by criticality.
- Maintain a centralized tracking system of individuals in need of additional support services.

Service Integration

- Participate in the DHSS "No Wrong Door" Initiative.
- Ensure the automated screening and holistic assessment for all referrals.
- Ensure that all applicable service recipients are referred for appropriate DHSS services.

OBRA-87 Program/PASSAR

- Ensure Level II assessments are processed in compliance with federal mandates.
- Develop alternative placements for inappropriately placed nursing home residents and new nursing home applicants.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% of consumer/family satisfaction with services provided.	79	90	90

INSTITUTIONAL SERVICES
35-11-20

ACTIVITIES

Stockley Center supports and empowers individuals with mental retardation and developmental disabilities to make choices, affirm and exercise their rights and live successfully in the community.

- Operate a 263-bed ICF/MR facility composed of 28 skilled-care level beds and 235 intermediate-care level beds.
- Comply with ICF/MR regulations and CARF accreditation.
- Operate an integrated quality assurance program to ensure regulatory compliance.
- Ensure the development of a person-centered service delivery system.
- 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

Out-Placement

Residential service activities support out-placement of Stockley Center residents to community living arrangements:

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
# of Stockley Center residents placed in community-based residential services	2	5	2

COMMUNITY SERVICES
35-11-30

ACTIVITIES

Community Services operates an array of services in community-based settings for individuals with mental retardation/developmental disabilities to support the division's mission. Services include:

- Residential services that are person-centered and provide support for individuals living in community-based settings (e.g., neighborhood homes, apartments, foster homes). Individual supports include direct supervision, case management, medical care (e.g., dental, podiatry), and other related services that promote personal choice and independence.
- Employment, vocational and personal/social adjustment services that are designed to help individuals develop and/or maintain work and personal living skills. These services are offered in a variety of settings, which include private businesses, sheltered workshops and day-service centers.
- Family support services that help families caring for a family member with a disability to keep that family member at home. These services include respite care, case management, environmental modification assistance, therapy referrals, health and medical care coordination.
- Adult Special Populations services that are designed to provide the intensive and specialized types of supports needed for individuals who present atypically challenging behaviors, have autism, or a related developmental disability. Services include community-based residential, employment/vocational and other related health and professional services.
- 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.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

PERFORMANCE MEASURES

Adult Special Populations Program

Adult Special Populations Program services provide residential, day program, employment, professional and ancillary service options for individuals with challenging behaviors, autism and related disabilities:

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
# additional community-based residential placements	3	6	7
# additional day service placements	6	6	10

PERFORMANCE MEASURES

Day Services

Day services provide employment, vocational, and personal adjustment options for graduates of special school programs:

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
# special school graduates placed	37	29	50

STATE SERVICE CENTERS
35-12-00

MISSION

To alleviate crisis, improve the standard of living, develop self-sufficiency, provide volunteer and community service opportunities, address the causes and conditions of poverty and provide universal access to information and referral for all Delawareans.

KEY OBJECTIVES

- Improve access to and delivery of public and private health and human services in Delaware.
- Provide services and leverage resources to impact the causes and conditions of poverty.
- Recruit, refer and recognize volunteers who give service to others.
- Improve the safety and cleanliness of all state Service Centers.

BACKGROUND AND ACCOMPLISHMENTS

The Division of State Service Centers (DSSC) continues to lead the implementation of DHSS' "No Wrong Door" (NWD) quality service initiative. NWD is a client-friendly, citizen-focused approach to human services at the point of entry in the service centers and other community-based locations.

Implementation has been phased, with Kent and Sussex counties completed and New Castle County scheduled for completion in December 1999.

Williams State Service Center and the Office of Community Services are partnering with the Department of Public Safety for a Strong Communities' initiative in six communities in Kent County.

The division continues working hand in hand with the community to provide help to Delawareans through crises alleviation services, volunteer programs and community service projects. The division continues working to deliver core programs that strengthen citizens' ability to get the help that they need when they need it.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

Client contacts to State Service Centers in SFY 1999 exceeded 529,000. The bulk of visits were to the Divisions of Social Services and Public Health. Client visits for the division were as follows: clients picking up prescriptions from DSSC's partnership with Nemours Pharmaceutical Assistance Program totaled 34,898, the Community Resource and Assistance Program served 9,471 and the Emergency Assistance Program served 7,177 clients. State Service Centers provided information and referral (I&R) to 241,580 callers.

The Visitation Centers served 192 families by providing 851 monitored exchanges, 606 supervised visitations and 1,263 group visitations, a 31 percent increase over the previous year. The division opened another Visitation Center at the Northeast State Service Center. State Emergency Housing Funds provided 21 shelter agencies with resources to assist a total of 3,652 homeless individuals, a 4.4 percent decline from the 3,840 that were served in 1998.

The Fuel Assistance Program provided fuel assistance to 9,716 households of low-income individuals below 150 percent of poverty; the average benefit was \$205. The weatherization program weatherized 407 homes. Through the First State Community Action Agency, case management services were provided to 1,280 families of which 683 are new cases.

The State Office of Volunteerism hosted the Fourth Governor's Youth Service Awards and honored over 475 students for outstanding community service at a statewide ceremony in Dover. The Governor's Volunteer Awards honored 34 individuals. Over 2,800 people attended the events celebrating mentors with General Colin Powell. Over 3,000 volunteers participated in over 100 projects on Delaware's annual Make a Difference Day.

The division continues its lead role in coordinating the Governor's Mentoring Initiative, through "First State Mentor Corps," a higher education AmeriCorps Program and the State Employees Care Program.

Over 7,000 persons were served by Adopt-A-Family during the holiday season, a 17 percent increase. Adopt-A-Family expanded to Sussex County and is now fully operational statewide.

The Retired Senior Volunteer Program (RSVP) in New Castle and Sussex counties served 2,257 seniors who contributed more than 376,737 hours. An RSVP volunteer committee, New Castle County's "Wilmington Triad", produced five programs to educate seniors about crime prevention. These were aired over cable television. The Statewide Foster Grandparent

Program enrolled 241 seniors who volunteered 243,469 hours.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	8,707.0	9,394.8	9,793.0
ASF	1,164.5	1,355.6	1,506.2
TOTAL	9,871.5	10,750.4	11,299.2

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	91.1	98.1	98.1
ASF	--	1.0	1.0
NSF	36.5	36.5	38.5
TOTAL	127.6	135.6	137.6

FAMILY SUPPORT

35-12-10

ACTIVITIES

- Coordinate and monitor "No Wrong Door" statewide within the State Service Centers and each division within DHSS.
- Implement a common intake and holistic assessment to achieve quality service through "No Wrong Door."
- Increase accessibility and delivery of services through technology and training.
- Foster partnerships with non-profit and other state agencies to improve accessibility to programs for vulnerable Delawareans.
- Provide one-stop shopping and integrated services and programs to clients who visit State Service Centers. This includes:
 - Access management - client needs are identified and "matched" with service providers. Clients are actively involved in making choices, as to appropriate programs to meet their families needs.
 - Human services management - provides support for the service network through outreach, problem solving, record keeping and service coordination.
 - Service provision - provide direct support offered by the division. Specific programs and services offered are Crisis Alleviation, Information and Referral; Emergency Assistance Services; Nemours Pharmaceutical Assistance Program; Child Restraint Car Seat Loaner Program; Emergency Food and Shelter Program; Directory of Human Services for Delaware.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

- Monitor services using demographic data, client satisfaction surveys and other reliable instruments to measure effectiveness of access and service management initiatives.
- 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.
- Provide emergency assistance to alleviate crises for individuals and families on public assistance and/or Medicaid.
- Provide community resource and assistance to individuals and families to alleviate crises.
- Implement Adopt-A-Family Program Statewide.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% clients referred to multiple services on first visit	20	40	75
% DSSC clients who receive crisis alleviation services within 48 hours of first visit	80	95	100

SERVICE CENTER MANAGEMENT

35-12-20

ACTIVITIES

- Facility operations provide day-to-day oversight and management of 14 centers, including their physical environment and coordination with current or prospective tenant agencies.
- Focus on space planning and space allocation with the goal of providing a collocated service mix appropriate to each center's demographic profile.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% clients satisfied with DSSC facilities	57	85	87
% tenants satisfied with DSSC facilities	68	68	72

COMMUNITY SERVICES

35-12-30

ACTIVITIES

- Facilitate community development and outreach for the Family Services Cabinet Council's Strong Communities' initiative.
- Administer the Community Service Block Grant (CSBG); state funds for Emergency/Transitional Housing Site Operations; Emergency Housing Assistance Fund (EHAF); state Funds for Community Food Programs; federal Community Food and Nutrition Program (CFNP); Fuel Assistance Program (FAP); Weatherization Assistance Program (WAP); and Summer Cooling Program (CAP).
- Provide emergency and transitional shelters and support services to homeless individuals and families through contractual agreements with 21 non-profit organizations.
- Perform program planning, monitoring and evaluation.
- Provide financial assistance with electric bills and air conditioners to low income elderly households and individuals younger than 60 years of age with health problems aggravated by extreme heat and humidity, through the Cooling Assistance Program (CAP).
- Provide resources and staff support to the Governor's Council on Hispanic Affairs to fulfill their mission as defined by Executive Order.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
% case management clients who attained employment and housing in case plans	38	40	42
% persons/families sheltered in transitional housing who depart for more stable housing	21	23	25

VOLUNTEER SERVICES

35-12-40

ACTIVITIES

- Coordinate mentoring in the schools and develop recruitment and training program for mentors through State Employees Care Program, the Delaware Mentoring Council and division-operated programs.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

- Enable state agencies to better meet their objectives through volunteer programs.
- Recruit, refer and place volunteers for over 500 non-profit and state agencies.
- Provide technical assistance, training, public relations and volunteer recognition.
- Assist private corporations and state agencies with employee volunteer programs.
- Reduce dependence and enhance well being of persons over 60 through the Foster Grandparent Program (FGP) and over 55 through the Retired Senior Volunteer Programs.
- Recognize the contributions of volunteer youth and adults in annual events.
- Administer the AmeriCorps National Service Program.

PERFORMANCE MEASURES

	FY 1999 Actual	FY 2000 Budget	FY 2001 Gov. Rec.
# of Foster Grandparents in schools and head start programs.	52	62	102
% increase in number of volunteers placed with programs, agencies and projects (Volunteer Link)	21	35	30

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

MISSION

The mission of 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

- Maintain and expand programs which foster independence among persons with disabilities, such as Attendant Services, targeted to persons who work or are attending training; and the Adult Life Skills Program, which provides the opportunity for persons with disabilities to develop skills to live in environments less restrictive and costly than nursing homes.
- Offset inflation and continue to maintain service levels 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 and personal care.

Protecting Vulnerable Populations

- Continue to develop service options for persons with traumatic brain injury.
- Participate in the development of managed care programs to serve adults in need of long term care services.

BACKGROUND AND ACCOMPLISHMENTS

The Division of Services for Aging and Adults with Physical Disabilities, formerly the Division of Aging,

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

35-00-00

has been in existence for over 30 years. In July 1994, the division's mission was further 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 include the Older Americans Act, the Social Services Block Grant, the Medicaid Waiver for Elderly and Disabled, and General Funds. Additionally, the division manages research and demonstration grants from various sources as they become available.

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

One of the most significant factors impacting the demand for services is the growth of the older population in the State. Delaware, like other states, has experienced a tremendous increase in the older population over the past two decades. Projections indicate that the older population will continue to grow faster than the general population through the next two decades. Although data on the number of persons with physical disabilities is less readily available, the Department of Health and Social Services has estimated that this group numbers approximately 16,000 in Delaware.

A second factor that has impacted the availability of services is the increase in program costs. Staff salaries among providers have increased drastically over the past few years due to new federal and state mandates and competition for employees caused by Delaware's low unemployment rate.

A third factor that has had an impact on service availability is the level of federal funding. Federal funding levels for services have not kept pace with inflation and have not provided for expansion of services.

Despite these funding pressures, the Division of Services for Aging and Adults with Physical Disabilities has been successful over the past several years in developing new initiatives to assist its client populations.

In addition to becoming the focal point for persons with physical disabilities, the division has taken on the responsibility of addressing the service needs of persons with traumatic brain injury. The division, through its Brain Injury Steering Committee, created an action plan

to develop services for persons with traumatic brain injury. The division is developing a Medicaid Waiver for Brain Injury.

During the past several years, the division has expanded the mission of its Joining Generations program to become a resource for grandparents raising grandchildren and for other relative caregivers. A pilot support group for relative caregivers is now statewide. Legislation allowing informal caregivers to register children for school and to approve medical treatment was enacted.

The division carried out health promotion initiatives including depression support groups, an older women's health campaign which focused on breast cancer, depression, osteoporosis, and heart disease, a gambling awareness program and participation in numerous health fairs.

BUDGET

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	12,157.5	8,136.1	8,942.1
ASF	163.2	261.0	261.0
TOTAL	12,320.7	8,397.1	9,203.1

POSITIONS

	FY 1999 ACTUAL	FY 2000 BUDGET	FY 2001 GOV. REC.
GF	64.8	54.8	54.8
ASF	--	--	--
NSF	42.4	49.4	49.4
TOTAL	107.2	104.2	104.2

SERVICES FOR AGING AND ADULTS WITH PHYSICAL DISABILITIES 35-14-01

ACTIVITIES

- Administer service contracts.
- Operate the Adult Protective Services, Community Services and Long Term Care Ombudsman Programs.
- 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.

DEPARTMENT OF HEALTH AND SOCIAL SERVICES
35-00-00

- Support and advocate grandparents and relatives raising others' children through its Joining Generations Family Circles Program.
- Plan and conduct special events focusing on older adults and adults with physical disabilities.
- 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.

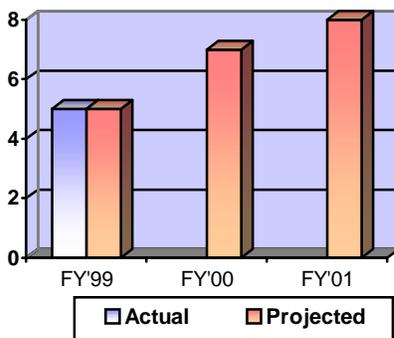
PERFORMANCE MEASURES

Decrease the period of time between the availability of Medicaid Waiver slots and placement of eligible individuals in those slots.

The Medicaid Waiver for the Elderly and Disabled is a major resource to the division in providing community-based services to consumers. It is a cost-effective alternative for persons who are financially and medically eligible for the Medicaid Nursing Home Program, providing supportive services to allow the individual to safely remain at home. The faster individuals can be served by the Waiver the less likely they will become institutionalized.

To increase the number and variety of health education programs carried out by the division or in which the division is a partner.

Health Education Programs



The Division seeks to maintain and improve the health and physical well-being of the populations it serves through a variety of programs and initiatives.

Average Waiting Period

