

Leading by Results

VIEWPOINT 2

“This issue provides first quarter (July – September) performance data about six benchmarks. . . . Not surprisingly, the data reveals both positive achievements and room for progress.”

WELL-BEING OF CHILDREN AND FAMILIES 3

“Every year approximately 25,000 young people nationally leave foster care at age 18 without a connection to a caring adult. Many of these teens also have minimal education and few job skills.”

QUALITY OF LIFE FOR OLDER ADULTS 4

“Recently, DSS changed the goal and benchmarks for services to older adults and adults with disabilities....The Department believes the proposed change will allow for more encompassing and relevant benchmarks as the population ages.”

ECONOMIC STABILITY 5

“Last year, FCDSS met its child support collection goal of \$20 million. Our new goal of \$21.6 million, set by the State of North Carolina, will prove challenging.”

DSS MEASURABLE BENCHMARKS OF PERFORMANCE 6 –7

Examine data for the first quarter of FY 07-08 (July-September) for DSS benchmarks.

BUILDING EFFECTIVE PARTNERSHIPS 8

“CenterPoint Human Services is the Local Management Entity charged with overseeing public Mental Health, Developmental Disabilities and Substance Abuse Services in Forsyth, Stokes and Davie Counties....Demand for services continues to increase in Forsyth County, partially due to population growth.”

ACCOUNTABLE FOR PUBLIC RESOURCES 9

“Public Assistance Programs such as Medicaid, Food Assistance and Nutrition Programs, and Work First Cash Assistance are a critical part of the social safety net for low-income children, families and older adults and adults with disabilitiesFraud can happen in any of these programs, but the reality is that the incidence is very small.”

WHAT'S NEW AT THE DEPARTMENT OF SOCIAL SERVICES 10

“Known throughout the Piedmont community both as a broadcaster and public servant, Dave Plyler joined the Board of Social Services in September.”

AN ADVOCATE'S POINT OF VIEW: AN INTERVIEW WITH THE DIRECTOR OF THE MENTAL HEALTH ASSOCIATION 11

“Mental illness affects one in five men, women and children. The greatest barrier for those with mental illness is the *stigma* associated with mental illness.”



“Published to enhance the community’s knowledge of issues affecting children, families, older adults and the disabled in Forsyth County.”

ViewPoint

Leading by Results



Joe Raymond,
Director
**Department of
Social Services**

Welcome to the Fall edition of **Leading By Results**. DSS remains on a journey to measure performance and determine what reasonable actions can be taken to improve performance, when necessary.

This issue provides first quarter (July – September) performance data about six benchmarks. We are still trying to determine how to report this data in a way that is readable. In future issues, performance data will be shared about other benchmarks. Not surprisingly, the data reveals both positive achievements and room for progress. The point of tracking performance is to use the data to develop strategies to improve, which we are doing.

In our last issue, we devoted significant attention to the Medicaid Program and its financing. Since then, the NC Legislature “solved” the problem by choosing to pick up the county cost of Medicaid, to be phased in over three years. However, they accomplished this by taking Article 44 sales tax revenues from counties. The legislature gave counties the option of increasing their revenues by voting to take a ¼ cent sales tax increase or instituting a .4% land transfer tax.

This quarter’s publication focuses on benchmarks and issues from our five strategic goals. We are changing our second goal relating to older adults and adults with disabilities and have added a few new benchmarks to this goal. Benchmarks addressed in this issue focus on:

- Outcomes being experienced by youth making the transition from foster care to young adulthood;
- New benchmarks relating to Adult Services;
- Child support enforcement collections and the percentage of

child support cases under court order;

- Access to mental health services; and
- DSS work on consumer and provider fraud.

Special thanks go to Ms. Betty Taylor, CEO of Centerpoint who addresses the issue of access to mental health services. Thanks also go to Mr. Andy Hagler, Executive Director of the Forsyth County Mental Health Association, who is the subject of an interview about the same issue.

For the third year in a row, Forsyth County DSS won a best practices award at the annual North Carolina Social Services Institute. This year’s award went to our RAPP Program. RAPP is an acronym for Relatives as Parents Program. This program provides supportive services for relatives (grandparents, siblings, etc.) who become primary caregivers for minor children (the program served over 200 children last year). Several DSS staff are involved in this program and it is gratifying to see their innovative and successful efforts recognized.

It is also my pleasure to report that Forsyth County DSS again dramatically increased its employee contributions to the annual United Way Fund Drive. While numbers are not yet final, our 2007 contribution will total over \$23,000, almost a \$6,000 increase from 2006. This increase comes on top of our 2006 total of \$17,452 which more than doubled our 2005 amount of \$8,656, a 166% increase over 2 years! DSS staff made these contributions knowing the importance of this funding to the children, families, individuals, and older adults who benefit from the services provided by agencies who receive this funding.

Finally, it is my pleasure to announce the addition of two new DSS Board members, Mr. Mike Wells, Sr. and Mr. David Plyler. Both gentlemen joined the DSS Board over the summer. Congratulations also go Ms. Florence Corpening and Mrs. Claudette Weston, who were elected Chair and Vice Chair of the DSS Board, respectively.

Thanks for reading **Leading By Results!**

Publisher-Editor-in Chief
Joe Raymond, Director

Editor
Kay Albright, Human Services
Planner

DSS Contributors

Dawn Perdue, Social Worker
Gail Stewart, Social Worker
Susan Thompson, Supervisor
Diane Wimmer, Division
Director

Forsyth County Board of Social Services

Florence Corpening, Chair
Claudette Weston, Vice Chair
Walter Marshall
Dave Plyler
Michael Wells

Mission: Forsyth County
DSS will serve and protect
vulnerable children and adults;
strengthen and preserve
families; and enhance
economic stability while
encouraging personal
responsibility.

**“Serving Our Community with
Competency, Compassion, and
Commitment”**

Please direct all
correspondence regarding this
publication to
Kay Albright,
Forsyth County Department of
Social Services,
741 N. Highland Ave.,
Winston-Salem, NC 27101
336-703-3403
albrigkf@forsyth.cc

Goal I Improve the Safety, Quality of Life, and Well-Being of Children and Families

Every year approximately 25,000 young people nationally leave foster care at age 18 without a connection to a caring adult. Forsyth County DSS provides foster care services to more than 300 children and youth each year. Due to the limited number of family foster homes for teens in Forsyth County, many young people have lived in residential care settings instead of with a family. Seventeen young people aged out of foster care in Forsyth County last year. Many of these teens have minimal education, few job skills, and a lack of independent living skills. These youth face great challenges in their transition to adulthood and there are potential high costs to communities if these young people do not succeed.

Benchmark Spotlight On *The annual percentage of foster youth who are in care at age 18 and who are employed or enrolled in post-secondary education from the ages of 18-23.*

What do we know about older youth leaving foster care?

National data paints a depressing picture. The MacArthur Foundation Research Network characterizes older youth leaving foster care as being more likely to have mental health problems, more likely to be involved in crime, more frequently homeless, more likely to become unwed parents prior to age 21, less likely to be employed, less likely to have lasting relationships with caring adults, and more socially isolated than their peers who have not been in foster care.

Forsyth County DSS is just beginning to collect data about young people aging out of foster care. Right now we are serving thirty-two 17 year olds who could be leaving foster care this year.

In the spring of 2007, our agency had 9 young people in foster care who were eligible to graduate from high school. Eight of these received their diplomas and all eight are enrolled in college this fall.

What works to better prepare these young people for adulthood?

Like any young person, young adults leaving foster care need life-long adult connections whether through family or mentor-relationships. These connections provide necessary support and guidance to learn how to build successful personal and professional relationships. Additional education and job skills are required for employment and practical training in independent living skills are needed by these youth.

Federal and state funds are provided to help young people gain the skills and experience necessary for successful transition to adulthood. Private groups such as the Annie E. Casey Foundation have begun partnering with community agencies. In addition to focusing on ensuring that youth leaving foster care have committed, supportive adults to count on, these programs are usually focused on providing education/vocational training, employment, housing, and health care. The Jim Casey Youth Opportunities Initiative has developed “The Opportunity Passport” which is an asset development tool for youth in care. The Passport has a personal debit account for short-term expenses, a matched individual development account for long-term asset building, and “door openers” for educational/vocational opportunities.

Forsyth County DSS has a growing LINKS Program dedicated to helping adolescents in foster care prepare for adult living by increasing their self-sufficiency. These services are available to all youth in foster care between ages 13-21, with after-care services for young people who have ever been in foster care and those who have aged out of foster care between ages 18-21. Program participants and their care-giver complete an objective assessment of their strengths and needs and develop a plan to address these needs. They build a transitional living plan and in the six months prior to their 18th birthday, they participate in a transitional living staffing. For youth wishing to remain in foster care placements while attending school, they have the opportunity to sign a Contractual Agreement for Residential Support which allows DSS to continue to pay for their placement in licensed foster care. LINKS services focus on

seven outcomes:

- Having sufficient economic resources to meet daily needs;
- Having safe, stable housing;
- Achieving academic/vocational goals, avoiding illegal, high-risk behaviors;
- Postponing parenthood;
- Having access to physical and mental health services; and
- Having a sense of connectedness to persons and community.

What more may our community do to help foster youth transition to adulthood?

National statistics support the need for all young people entering the adult world to have a life-long caring connection with at least one adult--someone to be there to offer encouragement, to celebrate successes, and to comfort through disappointments.

The Forsyth County DSS’s LINKS Program is serving more youth than ever, but more community support is required. We need committed adults willing to enter these relationships with these young adults as mentors and we need employers willing to train and take a chance on youth from the foster care system. In the future we are going to try to build strong collaboration between the community and schools to encourage these young people to stay in school. We need accessible mental health care for young people whose employment/educational status may not provide such services. But most importantly, increased awareness is needed to enhance opportunities for caring adults in our community to help these young people walk the bridge to adulthood.

For more information about how to help, call the LINKS Program at 336-703-3668

“...Young adults leaving the foster care system need life-long adult connections whether through family or mentor-relationships.”

Goal II DSS Makes Changes to Goals/Benchmarks for Older Adults and Adults with Disabilities

The Baby Boom Generation will have a significant impact on future resources as people age in their homes and communities. The number of Americans over age 65 is expected to reach 71.5 million by 2030. Most adults intend to remain in their own homes and communities.

The concept of living in the least restrictive, most appropriate setting encompasses the right to choose where to live and the ability to maintain quality of life. Age or disability should not limit of the options for where older and disabled adults live, if they can live there safely. Even individuals who know their home is not the best choice have a right to remain there if they are competent. It is up to communities to ensure that resources are available to meet the needs and to prepare the community for these changes.

Recently, DSS changed the goal and benchmarks for services to older adults and adults with disabilities.

The new goal is: ***Older Adults and adults with disabilities will be safe and healthy and live in the least restrictive most appropriate setting.***

Why is DSS changing the goal for what it wants to achieve for older adults and adults with disabilities?

The proposed change will allow for more encompassing and relevant benchmarks as the population ages. The change will allow DSS and the community to think about how to minimize the provision of inappropriate and often expensive care. "Aging in place" allows consumers to make their own choices about their care and helps the community to focus on meeting the needs of this growing segment of the population.

What measurable benchmarks has DSS selected to support this goal and how do they relate to the goal?

- Annual % of older and disabled adults who request In-Home Aide Assistance and receive it will increase from 72.5% to 79%.
- Annual number of older and disabled adults who receive Special Assistance In-Home Services will increase 16% (from 41 to 49).
- Annual number of older and disabled adults of who receive Enhanced Personal Care in Assisted Living Facilities will increase 5% (from 122 to 128).
- Annual number of older and disabled adults who receive Adult Day Care/ Adult Day Health will increase 5% (from 28 to 30).
- Annual % of older and disabled adults assisted living facility complaints will decrease 9% (from 72 to 65).
- Annual % of Adult Medicaid applicants whose applications are completed within the 45 day (MAA) or 90 day (MAD) standard will increase from 93% to 95%.
- Annual % of older and disabled adults who are not found to be repeat victims of abuse, neglect or exploitation will increase 1% (from 99% to 100%).
- Annual % of older and disabled adults who are not abused, neglected or exploited while living in licensed care facilities will increase 1% (from 99% to 100%).

This new goal encompasses health, safety, and living in the least restrictive most appropriate environments. The benchmarks selected reflect all aspects of the goal.

Do we have data to tell us how we are doing?

Data is being accessed for each benchmark. Baseline data, targets and timeframes will

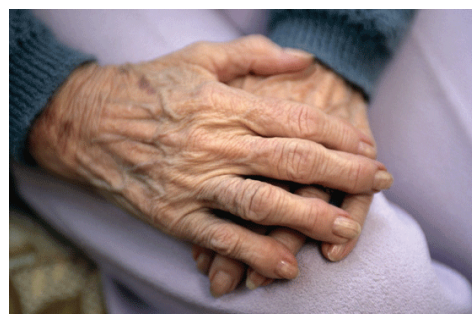
be set by the next issue of ***Leading By Results.***

What might our community do to support this goal?

The Forsyth County community will play a critical role in support of older adults and adults with disabilities in the coming years. The community must insist that issues facing around aging and disabilities are interjected into all planning processes. Specifically, the community can:

- Support the Forsyth Aging Services Planning Committee and the 15 agencies that work to assure resources for this growing population;
- Seek accessible and creative housing solutions both for those who want to age at home and for those who need additional care in facilities;
- Urge better transportation options to ensure that the elderly and disabled can meet their daily needs and stay connected to the community at large; and
- Support increased funding for services to this population as their numbers and needs increase.

American's are more aware than ever of the changing demographics of our population. We want to make our community a leader in offering resources to older adults and adults with disabilities.



Goal III Enhance the Economic Stability of Individuals and Families

The Child Support Enforcement (CSE) Program mission is “to consistently collect as much child support money as possible for the benefit of North Carolina’s children.” Therefore, collection and distribution of child support payments are the primary objectives of child support services. In North Carolina, CSE services are available to anyone who wants or needs help in collecting child support through a network of state and locally run offices.

Benchmark Spotlight On: (1) *The Child Support Enforcement Program will meet its annual collection target of \$21,599,579 by 6/30/08 and (2) the annual percentage of Child Support cases with court orders will increase from 79% to 90.1%.*

Why are these benchmarks important?

Last year, FCDSS met its collection goal of \$20 million. Our new goal of \$21.6 million, set by the State of North Carolina, will prove challenging. But, if successful, it means even more children will benefit from child support collection.

We hope to increase the percentage of cases under court order so that these cases will net additional collections, obviously contributing to our total collection goal.

What does our data show?

At the end of the first quarter, we collected \$4,971,542 or 23% of the total goal of \$21.6 million. At this rate, we will fall short by approximately \$1.7 million of our goal. However, collections typically increase during the months of January through April as a result of child support interceptions through the tax system. We anticipate that the increase during these months will boost the amount collected, allowing the target

to be reached.

First quarter data also revealed that 79% of cases were under court orders, or 11.1% less than the annual goal of 90.1%. An additional 1,618 number of orders are needed to meet the goal.

What needs to be improved?

Establishing a child support order is no guarantee that the non-custodial parent will pay the support as ordered.

Several enforcement tools to obtain payment as ordered are used. These tools include income withholding from benefit programs such as unemployment insurance benefits, social security benefits, Worker’s Compensation, and Veteran’s disability benefits, need to be continued to ensure that everything is being done to collect as much support as possible.

One change that recently went into effect is the establishment of two special court sessions, maybe quarterly, with Chief District Court Judge, William B. Reingold. These are in addition to regular court days twice a week. Judge Reingold hears cases during the special court sessions. The addition of these court sessions netted \$46,000 during the two days.

A new law effective October 1, 2007 is anticipated to make a big difference in collection amounts. This law will allow CSE to intercept Federal Income Tax Refunds for payment to arrears on cases where the children are over 18. Federal tax refunds are used to repay past due child support only. State tax refunds will pay the current month’s child support payment, if it has not yet been made, and then will be applied to past due support.

Summary

“Welfare Reform” completely changed Public Assistance from an entitlement

program to a temporary financial assistance program with opportunities for recipient to become self-supporting. Child support became more crucial to families that could no longer stay on welfare for extended periods of time. Forsyth County’s Child Support Enforcement strives to work with all involved parties to provide information, reach solutions to problems and take appropriate actions. Ensuring that children receive financial support from parents is the CSE goal.



“..Collection and distribution of child support payments are the primary objectives of child support services.”

FCDSS Benchmarks

All targets are intended to be achieved by 6/30/08

Goal I: Improve the safety, well-being and quality of life of children and families.

	Benchmark	Results to date (July-Sept.)	Data Story
1.1	Increase % of children who achieve permanence within one year through reunification, guardianship, or adoption from 38% to 50%	12.5%	Dramatic improvement needed. DSS, Guardian Ad Litem, and courts working to improve this data
1.2	Increase % of children who leave foster care from X% to Y%	Data being obtained	N/A
1.3	Increase % of maltreated children who are not repeat victims (within 6 mos.) of substantiated maltreatment from 95% to 96%	100%	Excellent news, continued attention required
1.4	Increase % of children who are adopted within one year of having a permanent plan of adoption from 45% to 50%	Data due in Jan.	N/A
1.5	Percent of children whose placement is not disrupted will be 100%	Data due in Jan.	N/A
1.6	Percent of children in foster or facility care who have not been maltreated by a foster parent or facility staff will be 100%.	Data due in July, 08	N/A
1.7	Percent of foster youth who are in care at age 18 and who are employed or enrolled in post-secondary education from the age of 18-23 (data not available)	Data due in July, 08	N/A

Goal II: Older adults and adults with disabilities will be safe and healthy and live in the least restrictive, most appropriate setting.

2.1	Increase % who request In-Home Aide Assistance and receive it from 72.5% to 79%	63.6%	Program negatively affected by 3 vacancies, thus have been unable to serve waiting list
2.2	Increase number who receive Special Assistance In-Home Services 16% (from 41 to 49)	40	Attrition caused open slots, new assessments being completed
2.3	Increase number of who receive Enhanced Personal Care in Assisted Living Facilities 5% (from 122 to 128)	119	Attrition caused open slot, target being reached
2.4	Increase the number who receive Adult Day Care/Adult Day Health 7% (from 28 to 30)	32	Target exceeded
2.5	Decrease the number of assisted living facility complaints 9% (from 72 to 65)	24	Received large number of complaints during first quarter, working to address causes
2.6	Increase the % of Adult Medicaid applicants whose applications are completed within the 45 day (MAA) or 90 day (MAD) standard from 93% to 95%	95.7%	Excellent performance
2.7	Increase the % who are not found to be repeat victims of abuse, neglect, or exploitation 1% (from 99% to 100%)	Data due in Jan.	N/A
2.8	Increase the percent who are not abused, neglected or exploited while living in licensed care facilities 1% (from 99% to 100%)	Data due in Jan.	N/A

Goal III: Enhance the economic stability of individuals and families

	Benchmark	Results to Date	Data Story
3.1	Increase the Child Support Enforcement collection rate from 61.4% to 73.2%	59.8%	Aggressive improvement plan in place
3.2	Increase the % of Child Support cases with court orders from 79% to 90.1%	79%	Below target, expect improvement plan to have positive effect.
3.3	The Child Support Enforcement Program will meet its total collections goal of \$21,599,570	\$4,971,542 collected this qtr.	Appears likely we will reach this target
3.4	Increase the percent of Child and Family Medicaid and NC Health Choice applicants who applications are completed within 45 days from 90% to 91%	92.7%	Excellent first quarter performance, but staff turnover causing new challenges
3.5	Increase the Work First Participation Rate from 37% to 50%	State unable to provide data	N/A
3.6	The total number of Work First participants who obtain employment will be 400	State unable to provide data	N/A
3.7	Increase the % of Work First participants who obtain employment at a living wage of \$8.50 per hour or higher from 3% to 10%	First quarter data not available	Benchmark not actively being worked on at this time
3.8	The % of Work First participants that obtain a GED/High School diploma or vocational certificate (no data, target yet to be set)	Data due in Jan.	N/A
3.9	The % of individuals potentially eligible for Food and Nutritional services who receive them will be 60% or better	Due in July, 08	N/A

Goal IV: Increase public understanding of relevant social issues and build effective community partnerships

4.1	The % of children potentially eligible for the child care subsidy and receive it	Data not available, no targets have been set. Targets for these benchmarks will be set by Forsyth Futures.	
4.2	The % of residents who have access to private health insurance or publicly funded health care		
4.3	The % of children and adults in need of mental health services who have access to timely services		
4.4	The % of 9 th graders who start the 9 th grade and complete high school		
4.5	The % of child abuse and child neglect		
4.6	The % older and adults with disabilities who are not abused, neglected or exploited will increase from X% to Y%		
4.7	The annual % of maltreated children who are not repeat victims of substantiated maltreatment will increase from 71.8% to 75% by 6/30/08	TBD	N/A

Goal V: Be publicly accountable for efficient use of resources and timely delivery of services

5.1	The employee departure rate will decrease from 10.2% to 7.5% or less	6.1%	Unexpected rate being analyzed, solutions under review
5.2	The number of 18 "core" DSS programs not in program improvement status will decrease from 3 to 0	Due in July, 08	Only two programs in Program Improvement status currently
5.3	The % of customers who report that they were treated with respect will be maintained at 90% or higher	85%	Close to target, methodology and process being changed
5.4	The amount of dollars recovered through program integrity efforts will be \$75,000 or more	\$4,468	N/A

Goal IV Increase Public Understanding of Relevant Social Issues and Build Effective Community Partnerships

By Betty Taylor
CEO/Area Director
CenterPoint Human Services

CenterPoint Human Services is the Local Management Entity charged with overseeing public Mental Health, Developmental Disabilities and Substance Abuse Services in Forsyth, Stokes and Davie Counties. During the last fiscal year ending June 30, 2007, our two largest providers alone served more than 8,623 individuals from our tri-county catchment area. This total does not capture the number served by the other 64 providers offering approximately 118 service sites.

CenterPoint works with law enforcement, justice and school systems, hospitals, housing authorities, governmental officials, and various community-based collaboratives and organizations. CenterPoint is also responsible for assessing providers' adherence to service guidelines which are mandated by the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services, including Medicaid.

Benchmark Spotlight On: *The annual percent of children and adults in need of mental health services who have access to timely services.*

To improve the service system, CenterPoint created two crucial strategic plans. Our Local Business Plan outlines goals to achieve during the next three years. Our Crisis Services Plan outlines strategic goals for a continuum of crisis services. Both of these plans can be viewed and downloaded at www.cphs.org.

CenterPoint also serves as a portal for consumers to find out about the service system and to choose a provider. Our toll-free ACCESS line, 1-888-581-9988 provides screening, triage and referral for those seeking new services.

Where are the greatest needs for mental health services for adults and children in Forsyth County?

In FY 2006 – 2007, the greatest service need for adults and children in Forsyth County fell within the Mental Health diagnosis. Overall, both males and females are affected by mental illnesses equally. The entire consumer population served by CenterPoint in FY 06 –07 can be split into 53 percent male, 47 percent female.

Of the total people served in Forsyth County, 72 percent were adults, while 28 percent were children. The vast majority of people who received services within CenterPoint's catchment area were 21-years to 50-years-old. Approximately 60 percent of people who received services were Caucasian, while around 35 percent were African-American. The remaining small percentages fell within the ethnic populations of Hispanic, American Indian, and Asian.

In Forsyth County, a few of the major diagnoses treated among the adult population were Schizophrenia and Bi-Polar Disorder. The main diagnoses treated among children and adolescents were Attention Deficit Hyperactivity Disorder, Oppositional Defiant Disorder and Conduct Disorder. Indications of substance abuse is prevalent throughout both the adult and child populations however, substance abuse is typically the one diagnosis that is not treated as needed or indicated.

Demand for services continues to increase in Forsyth County, partially due to population growth. While there are enough mental health providers generally, many are at maximum capacity as new consumers continue to enter the system.

What needs to be improved to provide better access to mental health services in Forsyth County?

CenterPoint is taking steps to better promote its ACCESS line through a newly created ACCESS logo, marketing materials and advertisement placements. The recently added TTY line for the deaf or hard of hearing who wish to utilize ACCESS services furthers our goal to reach all people. We have also established a "Warm Line" with a local agency to provide additional consumer follow up services. In addition, CenterPoint has established a pharmacy program that offers certain medications to indigent persons in need free-of-charge.

The main cog in the wheel of providing quality services is to actually listen to the needs of our community. By continuing to call upon that voice through community collaboratives and our Consumer and Family Advisory Committee, which is open to consumers and their family members, CenterPoint is constantly morphing to address the ever-changing needs of Forsyth County and beyond.

While a stigma against those who receive mental health services is still prevalent, recent efforts to treat people in their own community through offering local and personal supports has made a difference in the general perception. An example of this change can be seen in Supported Employment. While CenterPoint is just beginning to promote this program, nationwide employers are beginning to see the positives in offering those with mental health diagnoses the opportunity to work as a means to help their businesses and individual wellness and recovery.

Only through working together as partners in addressing community problems can we hope to succeed. CenterPoint is proud to call DSS one of those partners working closely with us.



Goal V Be Publicly Accountable for Efficient Use of Resources and Timely Delivery of Services

Public Assistance Programs such as Medicaid, Food Nutrition and Assistance Programs (formerly Food Stamps) and Work First Cash Assistance are a critical part of the social safety net for low-income children, families and older adults and adults with disabilities. These programs are highly regulated, “means tested” services, meaning that recipients must meet very specific income and other criteria to receive assistance. While the overwhelming majority of people provide honest information about their family composition and income in order to receive benefits, a few do not. Since these programs are paid for with taxpayer dollars, the public has every right to expect that DSS vigorously pursue individuals who obtain services through fraudulent or dishonest methods.

Benchmark Spotlight On: *The annual amount of dollars recovered through program integrity efforts will be \$75,000.*

What is intentional program fraud?

Intentional program fraud occurs when a program recipient or applicant intentionally fails to provide accurate, required information as part of the program application process.

Why does intentional fraud occur so infrequently?

Fraud can happen in any of these programs. But the reality is that the incidence is very small. While a spectacular case of fraud may make a nice headline (like any “white collar case” or a case of individual or corporate tax evasion), the historical myth that cheating is widespread is just that, a myth.

When it does occur, there is a good chance it will be discovered because DSS rigorously confirms applicant information through numerous information technologies and applicant

verification requirements (i.e., social security information, employer records, workman’s compensation information, child support information, employment security information, tax information, etc.). DSS is also required by law to verify citizenship for Medicaid, Food Nutrition and Work First cash assistance. Only United States citizens are eligible for these services. This means that the odds are very small that an individual who is in the United States “illegally” will be able to receive the public assistance services.

For example, the Medicaid Program is a \$300 million a year program in Forsyth County. DSS pursues approximately 48 fraud cases a year. These 48 cases represent an incredibly small percentage of the 40,000 Medicaid recipients in Forsyth County. These 48 cases accounted for approximately \$136,000 in program benefits. On a national basis the largest dollar amount of intentional Medicaid fraud is a result of medical provider fraud due to intentional over billing of Medicaid.

Last year, FCDSS pursued 141 cases of Food Nutrition Program fraud. These 141 cases (out of more than 13,000 total FNS cases) accounted for approximately \$338,000.

What are unintentional overpayments?

Unintentional overpayments are situations that results in a recipient accidentally receiving benefits to which they are not legally entitled. Local DSS’s also pursue collection of unintentional overpayment of Medicaid, Food Stamps, and Work First cash assistance. An applicant may forget to provide information on a change in their status such as a marriage, change in employment, or change in household composition that may result in an overpayment. Sometimes, program complexity causes confusion. In some cases, the overpayment is due to agency error. Perhaps information was provided by a customer but not entered into the computer.

How does FCDSS collect intentional fraud and unintentional overpayments?

Each intentional fraud case and unintentional overpayment must be investigated and attempts are made to recoup the funds either through a voluntary repayment plan, garnishing wages, intercepting of tax refunds, or an individual may be referred to criminal court.

Last year (FY 06-07), the total collected was \$18, 013. The Department’s goal for this year is to collect \$75,000 by June 30, 2008. To date, for all three programs, the Department has collected just over \$42,000.

How might program integrity collections be increased?

In prior years, DSS had a unit dedicated to program integrity, but the unit was disbanded due to a mandatory reduction-in-force. Currently, the agency has two staff positions that handle fraud and over payments. This staff takes calls about suspected fraud, investigates these allegations, contacts recipients to seek repayment, and prepares large cases for legal prosecution. To increase collections, the Department is considering:

- Increasing the number of staff dedicated to program integrity;
- Improving legal support to get fraud cases to court faster; and
- Using small claims court for overpayments of \$4,000 or more if a recipient refuses to pay back funds owed DSS.

“While a spectacular case of fraud may make a nice headline ...the historical myth that cheating is widespread is just that, a myth.”

What's New at the Department of Social Services



Dave Plyler Joins DSS Board:

Known throughout the Piedmont community both as a broadcaster and public servant, Dave Plyler joined the Board of Social

Services in September, 2007. He is an executive with Truth Broadcasting, Inc. dba WTRU serving Greensboro and Winston-Salem, NC. He attended Guilford College and is a graduate of Winston-Salem State University. Mr. Plyler serves on numerous boards and community groups. He recently completed 12 years of service as a Forsyth County Commissioner.

New Way to Receive Child Support:

NCKIDSCard is a new way to receive child support payments that begins in October in Forsyth County. Child Support recipients will automatically receive this new debit card unless they chose the direct deposit option. The NCKIDSCard may be used at any retailer where VISA cards are accepted. Some fees may apply but instructions on how to minimize fees is provided when the card is issued. NCKIDSCard will provide faster, easier, and safer access to child support payments to thousands of families who depend upon child support.

LINKS Kick-Off: On September 6, the Family and Children's Division held an orientation to the LINKS program for youth in foster care and their care givers. LINKS is a program for youth ages 13-21 in foster care to help them prepare for adulthood. One of the most important services is the access to post-secondary education that LINKS can provide for older youth who complete high school. The orientation was to let the youth and their care givers know about the services

available. About 125 youth and their care givers attended the session.

This year the NC General Assembly made free tuition available to any youth in foster care to any post-secondary institution in the NC system. Medicaid has also been extended to youth, regardless of income, until they reach age 21. Other services are available to help youth gain employment, stable housing and learn to manage their money as they become young adults. Most importantly, the LINKS program wants to ensure that all youth have an ongoing connection to an adult who can be there for them as they leave foster care.

Employment Resource Lab a

Success: The Work First Employment Program received second year funding from the NC Division of Social Services for the Employment Resource Lab. The Lab works with Work First applicants



Cynthia Sullivan and Linda Henderson, Coordinators

using the Internet and other job search tools to try to find individuals a job before they go on cash assistance. Between March and August 2007 the Lab staff served 260 individuals who applied for Work First Cash Assistance and got 85 of them jobs. The Resource Lab is a partnership with the Employment Security Commission who provides the staff for the Lab.

Community Partnership in Action:

DSS is always interested in supporting future social workers and is actively engaged in working with local universities to provide opportunities for

field placements. Through a partnership with the BSW social work program at A & T State University and UNC-Greensboro, DSS regularly helps hone the skills and knowledge of would-be social workers. This semester, the Adult Division is pleased to have two undergraduates from NC A & T State



Front: L. to R. Alisha Allmond, A & T State University; Shelia Moore, Adult Placement Supervisor, DSS. Back: L. to R. Tina Burns, In-Home Services Supervisor, DSS; Myeshia Regan, A & T State University

University working with Adult Placement and In-Home Services.

DSS Program Wins Award: the Relatives as Parents Program (RAPP) won a "Best Practice" Award from the NC Social Service Institute in October. The program was established in 2003 to serve grandparents and other relative caregivers who have stepped up to the challenge of caring for children in their families who have no one else to care for them. The RAPP program provides support groups and information on services to these relatives. These relatives are parenting children from their extended families because their biological parents are incarcerated, deceased, battle addictions or have mental health concerns that prohibit them from providing the basic needs for their children. To learn how you can help, call RAPP Coordinator, Krista Kindley at 703-3677.



An Advocate's Point of View: Interview with the Director of the Mental Health Association of Forsyth County



Andy Hagler, Director
Mental Health Association of Forsyth County

What is the Triad Mental Health Association and what services does it provide in our Community?

The Mental Health Association in Forsyth County is a non-profit, non-governmental agency that promotes mental health for all persons in our community through advocacy, outreach, and education and support services. The Association works for improved services for children and adults with mental health needs.

Current services: (a) six sponsored support groups, (b) representative payee services, (c) hospital outreach program, (d) client and systems advocacy, (e) mental health information, referral services and (f) primary care physicians' outreach. For more information, access our website: www.triadmentalhealth.org.

What has been the experience of those who use the mental health system in Forsyth County with NC's mental health reform for adults and children?

Mental illness affects one in five men, women and children. The greatest barrier for those with mental illness is the *stigma* associated with mental illness. Contrary to myth, persons with mental illness are oftentimes the victim of crime, rather

than the perpetrator. Despite the high prevalence of mental illness, most do not receive treatment.

Accessing and retaining mental health services is fragmented, confusing. While I want to point out that these consequences are *unintended* due to the passage of the Mental Health Reform Act of 2001, the results have caused persons with severe mental illness – compounded with co-occurring substance abuse – to fall between the cracks in terms of accessing services to the former public mental health care system, in my opinion. The referral system has become much more cumbersome and this has led to confusion of how and where to access services – even within the mental health field.

A gap in continuity of care is another unintended consequence. For example, more and more patients who are discharged from psychiatric inpatient units from local community hospitals or from state-funded psychiatric hospitals are transported, via law enforcement, to homeless shelters as part of their after-care. The question remains: “Are these persons receiving the mental health care that they need or are these individuals falling through the cracks?”

What are the greatest needs for services for children and their families?

We need more child psychiatrists in Forsyth County and in the State, especially more child psychiatrists who will accept Medicaid. This has been my “battle cry” for many years. There is a critical shortage and mal-distribution of child psychiatrists in North Carolina. This is a fact that needs to be addressed soon.

Are their particular disparities in the provision of mental health service in our community of which

we may not be aware?

Persons who are uninsured have the most difficult hurdle to overcome in terms of accessing mental health services. We know that there are tens of thousands of persons in Forsyth County who are uninsured. Currently, if someone wants to access mental health services and if they are uninsured and are not referred from a hospital, these persons will be placed on a waiting list. This is an issue that needs to be resolved immediately.

What needs to be improved in the way children and adults access services here in our County?

First, we need to work together to resolve these and other issues on community-wide consensus building and community problem solving. This is the first and most important step.

Second, we have a wealth of resources here in the community to partner such as our medical school and our local colleges and universities. If we pool the talents of our local resources and stakeholders, we have the ability to overcome the problem of accessing mental health services for all persons – rich and poor alike.

Third, develop relationships with our County Commission and General Assembly to ensure adequate funding for basic mental health services for all in Forsyth County. Everyone needs to speak up and speak out. As voters, as taxpayers --- we all need to actively advocate.

“The Mental Health Association in Forsyth County is a non-profit, non-governmental agency that promotes mental health for all persons in our community through advocacy, outreach, and education and support services.”

"In the Next Issue"

*In the Fall issue of **Leading by Results**, the Department of Social Services will report on specific benchmarks associated with each goal. The newsletter will also include an interview on a topic of interest related to these benchmarks.*



Department of Social Services
741 N. Highland Ave.
Winston-Salem, NC 27101

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
Winston-Salem, NC
Permit No. 714