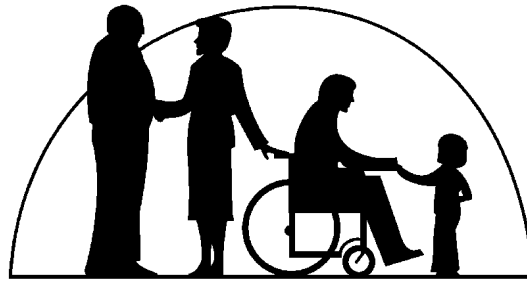


2010-11 County MFIP/CCSA Biennial Service Agreement

Minnesota Family Investment Program and Children and Community Services Act

January 1, 2010, to December 31, 2011



Minnesota Department of **Human Services**

Type of Service Agreement

Individual county submitting a:

Multi-county partnership submitting a:

Combined MFIP/CCSA Agreement
 MFIP-only agreement
 CCSA-only agreement

Combined MFIP/CCSA Agreement
 MFIP-only agreement
 CCSA-only agreement

County Name: **Traverse County**

County Names: **Rhonda Antrim**

County MFIP/CCSA Biennial Service Agreement

January 1, 2010, to December 31, 2011

CONTACT

Contact Information:

Contact person:	Rhonda Antrim
Title:	Director
Address:	PO Box 46
Telephone:	320-563-8255
E-mail address:	Rhonda.antrim@co.traverse.mn.us
Date:	09/15/2009

* * *

Complete all applicable questions in the following sections. Provide brief but informative responses to the required questions. Information from responses will be shared with staff and other counties. Please ensure that responses are edited before submission to the department.

* * *

Section I: Minnesota Family Investment Program (MFIP)

A. Statement of Needs

1. Describe the more persistent needs of participants that your county continues to address with MFIP funds. Discuss any unique needs of the MFIP and DWP participants, including participants in the Family Stabilization Services (FSS) track.

Several issues in Traverse County continue to challenge the needs of MFIP, DWP and FSS participants. Most notably, these issues include lack of transportation and childcare, and access to medical specialists. There are only 2 licensed daycare providers in Browns Valley. The companies that do have job openings are for 2nd and 3rd shifts and are at times no day care providers are open. Poverty and unemployment also remain issues in the county. Traverse County has seen unemployment rates jump to 9.1% last year.

Additional issues faced by this population in the County include low academic skills, limited job seeking skills and poor work histories. Many in this population lack the resources and skills necessary to obtain economic stability and self-sufficiency. They lack basic work skills such as reliability, problem solving, positive attitude, accepting criticism, initiative, teamwork, and interpersonal interaction. Many also lack job specific skills or have been unable to balance work and family. In addition, a portion of this population has additional issues that require more intensive services. These include chemical dependency, mental health, learning disabilities, literacy, and family violence.

Seasonal employment, a lack of a transportation infrastructure, rising transportation costs, and low wages remain issues for MFIP/DWP/FSS participants in Traverse County. Supportive services such as gas vouchers or vehicle repairs will remain high priorities to promote employability and retention success. Paid work experience, on-the-job training, job readiness and job seeking skills and supports are also high priority. Job skills training and prevocational training are high priorities to assist participants in gaining skills, knowledge and abilities for employment. This becomes increasingly important as the number of job seekers continues to increase for each job opening.

2. For each of the categories listed below, specify what proportion of the MFIP, DWP and FSS participant caseloads will likely need these services in the 2010-11 biennium. A participant could be included in more than one category.

Needs/Services	Caseloads		
	MFIP	DWP	FSS
Chemical/Substance	70%	50%	50%

Child Care	90%	90%	90%
Education	85%	65%	80%
Employment	90%	90%	90%
Housing	10%	8%	10%
Language	5%	3%	2%
Mental Health	30%	30%	75%
Support Services	90%	90%	90%
Transportation	90%	90%	90%
Other (state):	%	%	%
Other (state):	%	%	%

3. If you have additional comments regarding the needs of MFIP, DWP and FSS participants, use the space provided below.

B. Strengths and Resources to Address Needs

1. Describe the strengths and resources available in your county to address the needs/services listed in Section I, Part A, Question 2 above.

The County will continue to utilize the services provided by Rural Minnesota CEP (RMCEP). RMCEP has the expertise, strategies and contacts to address the needs of MFIP/DWP families in Traverse County. The focus of RMCEP services is to move individuals into employment that will ensure they meet participation requirements and increase income.

RMCEP provides:

- 1). DWP, FSS and MFIP services according to state regulations and procedures
- 2). Information to the county on client progress.
- 3). Trained staff to provide quality MFIP, DWP and FSS programs.

The provision of supportive services such as transportation costs, childcare assistance and work-related clothing to support low-income participants in their quest for employment remain key to removing barriers. Additionally, RMCEP continues to focus on Job Readiness Education, which allowed many participants to obtain their GED or receive other adult basic education, as well as support ESL activities. By using activities such as On-the-Job Training, Community/Volunteer work and Supported Work, many participants are able to increase their job skills. Activities in Career Planning, Job Search and Prevocational Skills Building are utilized to assist participants in employment exploration and employment attainment. Many participants also receive social services to assist them in addressing and overcoming barriers to employment. Vocational training is provided for participants to gain specific occupational skills, which enhance their employability.

Traverse County has contracted with RMCEP to utilize MFIP Supported Work Funds to augment the work training activity with significant progress. In addition, MFIP Innovative Funds have been used to address some of the transportation issues for participants. RMCEP staff will be participating in the Motivational Interviewing Training sponsored by DHS. A long-standing history of strong communication between the county financial supervisor and RMCEP enhances the quality of services provided to participants.

2. For the more persistent needs of participants described in Section I, Part A, Question 1 above, describe the supports that may be needed to help resolve these persistent needs. Include actions/steps your county may be taking to prepare participants given current economic conditions.

Strategies taken to better prepare participants and resolve persistent needs include participation in FSS case management and try-out work, a focus on the use of Supported Work to attach individuals to the workforce; using short-term training to enhance skills; and close monitoring of working participants to ensure successful work habits. Additionally, a strong network of support service agencies collaborate together to provide supports needed. For example, the offering of social services, employment and training activities, other wrap-around services (such as referrals for chemical dependency issues), case management and counseling, and conducting interventions to address barriers offer a holistic approach to support participants toward self-sufficiency efforts. The Employability Measure Training provides an additional method of identifying server barriers earlier in the case management process.

3. How is your county working with the Workforce Centers, Community Action Partnerships, etc. to access data, funding and services available in the federal stimulus package?

Employment and training is co-located at the Workforce Center. The County contracts with the Workforce Center (RMCEP) to leverage other program resources including ARRA funds and other Workforce Center partners and services. Examples include the referral of participants to the Community Action Agency ARRA weatherization resources or the RMCEP ARRA Youth and Adult programs.

4. Family Stabilization Services

a. Contact information

Name of FSS staff contact:	Karen Burr
Contact phone:	320-762-7800

b. Service model

Describe, in detail, the service model used by the county to provide FSS services, including how and by whom: (1) eligibility is determined and (2) cases are managed.

FSS is provided by utilizing an individualized case management service model. Eligibility is determined by the county financial worker, often in coordination with the RMCEP job counselor.

FSS services include the following activities:

- Assessment resulting in Employment Plan
- Assist client with reasonable accommodations
- Multi-disciplinary teams to work with clients
- Identify and access a range of services designed to reduce barriers
- Utilize Employment and Training services to help people move toward self-sufficiency.

Services provided to individuals meeting FSS criteria include:

1. Assess individuals' physical and/or mental abilities.
2. Gather results of assessments to determine individual's ability to perform work.
3. Assist with determination of need for reasonable accommodations.
4. Provide personal case management.
5. Set up multi-discipline teams to work with clients.
6. Assist clients in developing Employment Plans.
7. Promote activities that coordinate a range of services, including volunteer work, education, mental health, etc.
8. Use Employment and Training Services to help people move from system dependency to self-sufficiency when possible.
9. Closely monitor participant's progress at job shadowing, paid work

- experience, volunteer or unsubsidized work sites.
- Maintain close working relationship with County Financial Workers.

Additional Services Provided For New Immigrants:

- Meet and develop a FSS plan. (arranging for interpreter services if necessary).
- Refer clients to English As Second Language (ESL) or Functional Work Literacy (FWL) classes if necessary.
- Review progress to determine if FSS is still appropriate.

c. Challenges

During the current biennium, what has been the greatest challenge faced in serving FSS participants? What steps has the county taken to address this challenge?

There is little progress due to many factors, including the transportation issues. Clients are not willing to relocate for training, or are not training-ready. Determining eligibility in the social security system is a long process. We are looking at more FSS sanctions for those who do not follow-through.

5. Provider Information

List the name, address, contact person, phone number and programs administered for all current employment services (ES) providers in your county. Check the respective box if MFIP ES, DWP ES or FSS services are provided. *(Insert more rows if needed)*

Name and address	Contact person	Phone	Service provided?		
			MFIP ES	DWP ES	FSS
RMCEP 303 22 nd Ave W Suite 107 Alexandria, MN 56308	Karen Burr	320-762-7800	X	X	X

C. Outcomes and Measures

Three-year MFIP Self-support Index (S-SI)

Measure: Percent of MFIP/DWP cases off cash assistance or working 30 or more hours per week three years after a baseline quarter.

Review the statistics provided below for your county’s performance on the S-SI beginning April 2008 and ending March 2009.

- [Performance Data on the S-SI \[April 2008-March 2009\]](#)

1. Counties “within” or “above” their expected range of performance

If your county is ‘within’ or ‘above’ the expected range of performance on the annualized Self-support Index [April 2008-March 2009], provide a concise analysis of your county’s

performance during this one-year period. Include an assessment of how well current strategies are working to improve your county’s current performance on this measure and discuss any new strategies your county will implement in the 2010-11 biennium. Using the data provided, enter in the response box below whether your county is ‘above’ or ‘within’ the expected range, your county’s annualized performance percentage, and targets your county hopes to achieve by the end of each year of the biennium.

Analysis/assessment of current strategies/identification of new strategies:			
Supported Work and the Job Search System have been strong strategies and resources that have contributed to exceeding the expected range of performance for the S-SI measure. The services of RMCEP are designed to enhance the earning and employment potential of participants. If individuals can become engaged in work activities early, their likelihood for success increases. Staff look for Supported Work sites for participants with barriers that inhibit or prevent them from job searching. While on Supported Work, soft skills and work ethics are addressed by staff and resources are identified and/or provided to assist with daycare, transportation and other work issues. In addition, RMCEP address basic education, licensure and mental health issues early on during the process and continues to monitor and assist progress with these areas.			
In the Job Search System, individuals learn the skills necessary to find employment. This enhances their ability to find new jobs if necessary. Paid and unpaid employment allows participants to become accustomed to work and learn basic job skills. On-the-job training is available for new jobs and to upgrade skills. As participants increase their skills, pay and job security improves. Participants also enhance their employability and promotability by working toward a diploma or GED. RMCEP provides information on basic job retention issues such as teamwork, employer expectations, balancing work and family, problem solving, communication, time management, and how to get promoted.			
All of these strategies, with the emphasis on work training, have been successful strategies as evidenced by the positive outcomes in the SSI measurement.			
From the Apr. 08-Mar. 09 annualized data, check if your county is ‘above’ or ‘within’ its expected range and the percentage performance	<input type="checkbox"/>	Above	87%
	<input checked="" type="checkbox"/>	Within	
Enter annualized targets your county hopes to achieve for the periods:	Apr. 09–Mar. 10		88%
	Apr. 10–Mar. 11		88%

2. Counties below the expected range of performance

If your county is ‘below’ the expected range of performance on the annualized three-year S-SI, your county will not receive the 2.5 percent performance bonus unless it submits a Performance Improvement Plan (PIP) that is approved by the department. If your county is planning to submit a PIP, access the link below for instructions on how to complete and submit the PIP. The PIP covers the two-year period 2010-11.

- [Performance Improvement Plan for the S-SI \[2010-11\]](#)

TANF Work Participation Rate (WPR)

Measure: Percent of countable work eligible individuals who successfully meet the work requirements. The TANF work participation rate target is 50 percent less the caseload reduction credit (CRC) for the previous year. The CRC is calculated to be 10.6 percent for both 2010 and 2011; therefore, the adjusted TANF work participation rate target is set at 39.4 percent for CYs 2010 and 2011.

Review the statistics provided below for your county's performance on the WPR beginning April 2008 and ending March 2009.

- [Performance Data on the WPR \[April 2008-March 2009\]](#)

1. Counties with a Work Participation Rate of 39.4 percent or more, or a 5 percent increase from the previous year

If your county meets or exceeds 39.4 percent on the annualized Work Participation Rate target, or had a five percentage point increase from the year before (Apr. 07–Mar. 08), provide a concise analysis of your county's performance during Apr. 08–Mar. 09, and include an assessment of how well current practices are working to improve your county's current performance. Include any new strategies your county will implement in the 2010-11 biennium. At the bottom of the response box enter current annualized performance and anticipated targets your county will work to achieve each year of the 2010-11 biennium.

Analysis/evaluation of current strategies/identification of new strategies: The FSS program, Supported Work activity and close monitoring have been key contributing factors leading to an 11.1% increase from last year (07-08). There are very few clients included in the denominator for the WPR in Traverse County.		
Enter your county's annualized Work Participation Rate target for Apr. 08 – Mar. 09		48.6%
Enter annualized targets your county hopes to achieve for the periods:	Apr. 09–Mar. 10	49%
	Apr. 10–Mar. 11	50%

2. Counties with a TANF Work Participation Rate below 39.4 percent that did not achieve a five percentage point improvement from the previous year:

If your county performance is below 39.4 percent on the annualized TANF Work Participation Rate for Apr. 08 – Mar. 09, and did not achieve a five percentage point increase from the previous year (Apr. 07 – Mar. 08), your county will not receive the 2.5 percent performance bonus unless it submits a performance improvement plan that is approved by the department. If your county is planning to submit a PIP, access the link below for instructions on how to complete and submit the PIP. The PIP covers the two-year period 2010-11.

- [Performance Improvement Plan for the WPR \[2010-11\]](#)

Promoting Equity in MFIP Outcomes

Performance data of subgroups on the S-SI and WPR over the four alternate quarters covering Jul. 2007 to Mar. 2009 (Jul.-Sep. 2007, Jan.-Mar. 2008, Jul.-Sep. 2008 and Jan.-

Mar. 2008), are provided below. Performance gaps were calculated when a county subgroup performance was five percentage points or more below the performance of whites. [Only county and subgroup caseloads of 30 or more were used for this measure] Click on the link below to review a summary of subgroup performance data for S-SI and WPR within your county (note: there are two sheets in the Excel file):

- Two-year Performance Trend of Racial/Ethnic and Immigrant Sub-groups (Available at the end of July.)

[Two-year Performance Trend of Racial/Ethnic and Immigrant Sub-groups](#)

Counties with a performance gap in one or more subgroups

If your county has one or more subgroups with a performance gap in both the last quarter (Jan.-Mar. 2009) and the average of the four quarters, list the subgroup(s), provide the required data in the table and respond to the questions that follow for each of the subgroup(s) listed.

1. Self-support Index

Racial/ethnic subgroup	S-SI for whites	S-SI for subgroup	Percentage difference (gap)	Number of participants needed to eliminate gap
N/A				
Explain why the performance gap exists for each subgroup above:				
What existing and new strategies will your county use to eliminate or reduce the performance gaps?				
What action steps will your county take to implement strategies in the next biennium?				

2. TANF Work Participation Rate

Racial/ethnic subgroup	WPR for whites	WPR for subgroup	Percentage difference (gap)	Number of participants needed to eliminate gap
N/A				
Explain why the performance gap exists for each subgroup above:				
What existing and new strategies will your county use to eliminate or reduce the performance gaps?				
What action steps will your county take to implement strategies in the next biennium?				

Section II: Children and Community Services Act (CCSA)

A. Statement of Needs

1. For each of the program areas listed below, what needs and priorities will be addressed during the 2010-11 biennium?

Children’s mental health:

Outpatient psychologist and psychiatric care
Respite
Case Management
Funding assistance to the “Connections” after school program in Wheaton to maintain the program.
Counselor provided in the Browns Valley and Wheaton Schools
Collaboration with Stevens, Grant, Pope and Douglas County to implement the children crisis program throughout our region.
Implementation of the Signs of Safety
Development of a kinship program

Child safety:

Foster care recruitment
Foster care retention, local training
Active participation with a child protection team (law enforcement, local clinic, mental health providers, probation, schools of Wheaton and Browns Valley, domestic abuse advocate, early childhood providers, social services)
Child protection awareness campaign: 1) Bullying: In general, sexting and texting, face book and 1) Mental health: Depression, substance abuse, suicide
Funding assistance to the “Connections” after school program in Wheaton to maintain the program.
Presentation of the Red Flag Green Flag program in the Wheaton and Browns Valley schools
Counselor provided in the Browns Valley and Wheaton Schools
Chemical dependency assessments and treatment
Implementation of the Signs of Safety
Development of a kinship program

Child permanency:

Recruitment of concurrent foster care providers

Active participation with the child protection team (law enforcement, local clinic, mental health providers, probation, schools of Wheaton and Browns Valley, domestic abuse advocate, early childhood providers, social services)
Funding assistance to the “Connections” after school program in Wheaton to maintain the program.
Implementation of the Signs of Safety
Development of a kinship program

Child well-being:

Dental clinics in Wheaton and Browns Valley for low income children
Active participation with the child protection team (law enforcement, local clinic, mental health providers, probation, schools of Wheaton and Browns Valley, domestic abuse advocate, early childhood providers, social services)
Counselor provided in the Browns Valley and Wheaton Schools
Funding assistance to the “Connections” after school program in Wheaton to maintain the program.
Implementation of the Signs of Safety
Development of a kinship program

2. For adults with developmental disabilities and other vulnerable populations, what needs will your county be addressing in the 2010-11 biennium?

Development of a kinship program
Recruitment of persons to fill the open positions providers in our county have.

B. Strengths and Resources to Address CCSA Needs

1. Based on the strengths and resources available to your county in the 2010-11 biennium, discuss its position to adequately address the needs narrated in Part A?

I believe Traverse County is prepared to meet the needs identified above, of our residents and clients. Although we were unallotted 25% of this grant for this coming year and 33% the year following, we do have a healthy fund balance and were spared the reduction in our county aide funding because of our population size. We are also exploring areas of collaboration in many areas, with our county partners. We have a committed staff , committed school systems, committed law enforcement personnel, local clinic and mental health providers to meeting the needs of our residents, students, clients. This may require more collaboration between our agencies but we are motivated

to do so.

2. What strategies will your county use to maximize resources to address the needs discussed in Part A in the 2010-11 biennium?

Grant applications

Collaborations with other counties. Traverse recently agreed to hire a new social worker and share time with Grant County as needed. Grant County, in turn, has assisted with back up in the area of child protection, forensic interviews and supervision, for example. We are also forming a joint powers board arrangement with Stevens, Traverse, Grant, Pope and Douglas Counties in the area of adult mental health. We have implemented a 5- county pre-petition screening team, ACT team, moving towards a 5- county intensive community rehabilitation services project, among a few of the services that are shared.

We are part of County Based Purchasing Prime West and provide regional training opportunities for staff through them. With specialized case management of CCM, SNBC, TCM, counties with smaller numbers of cases can delegate our larger counties to manage these.

Hired a new social worker to develop a kinship program for children with adult mentors and eventually build that into mentors for aging adults and disabled. The use of informal supports will be critical as our resources diminish.

C. CCSA Outcomes and Measures

Keeping children safe and improving their well-being is the overall goal for CCSA. In 2005, the department began issuing annual performance reports on CCSA measures starting with CY 2004 data. As noted in the instructions, the department is now transitioning to new and revised federal measures. Currently, a variety of strategies are being used to transition counties to these measures and to understand and monitor ongoing performance. This includes the addition of revised outcome measures in the Charting and Analysis tool in SSIS, developing a dashboard tool, integrating new measures into CFSRs, and adopting comparable measures into CCSA. As such, the “CCSA Annual Performance Report: CY 2008 Data” will transition counties to the revised federal measures. Follow the link below to access the CCSA Annual Performance Report.

- CCSA Annual Performance Report: CY 2008 Data (Available at the end of July.)

1. County Performance

For each of the federal measures in the table below, enter your county’s 2008 performance (from the data provided), state if your county performance is above or below the standard and anticipated targets for each year of the 2010-11 biennium.

For each of the state measures, enter your county’s 2008 performance, state if your county performance is above or below the standard and enter anticipated targets for each year of the 2010-11 biennium.

Federal Measures

Measures (abbreviated)	Standard	State/county Performance			Anticipated targets	
		State	County	Above/ Below	2010	2011
1. No repeat maltreatment within six months	94.6 % ↑	94.9%	100%		100%	100%
2. Re-entered foster care within 12 months	9.9 % ↓	26.1%	16.7%		0%	0%
3. Reunified within 12 months	75.2 % ↑	86.1%	100%		100%	100%
4. Adopted within 24 months	36.6 % ↑	50.3%	na%		100%	100%
5. Two or fewer placement settings	86.0 % ↑	86.1%	100%		100%	100%

A **blue** font indicates that state performance exceeds the federal standard for that measure. **Red** means the state performance is below.

State Measures

Measures (abbreviated)	Standard	State/county Performance			Anticipated targets	
		State	County	Above/ Below	2010	2011
6. No repeat maltreatment within 12 months	100% ↑	91.5%	100%	%	100%	100%
7. Showed improved mental health *	**	40.7%	na%	%	100%	100%
8. Received health exam within one year	63.2% ↑	55.7%	60%	%	100%	100%
9. Received mental health screening	**	43.6%	66.7%	%	100%	100%

* Only counties for whom CASII data are available are required to respond to question 2 below on this measure. The remaining counties can enter N/A in the box above. ** For state Measures 6 and 8, standards were set at the 75th percentile using county 2008 performance data. For Measures 7 and 9, the following standards were established by the department's Children's Mental Health division. **Improved Mental Health** [55% for CY 2008, 60% for CY 2009, 65% for 2010, 70% for 2011] and **Mental Health Screening** [50% for CY 2008, 60% for CY 2009, 70% for 2010, 80% for 2011]. Use these standards when establishing anticipated targets above.

2. Counties not meeting the federal or state standards for CY 2008

For any measure for which your county is not meeting the federal standard or state standard for CY 2008, enter the measure number and briefly discuss strategies that will be continued, changed or done differently to ensure it improves, reaches or exceeds the targets set for 2010 and 2011. If a Minnesota Child and Family Service Review was recently conducted in your county and it is currently working under a program improvement plan for that measure, reference the PIP, and briefly describe the strategies. (One response box is provided below; copy and paste as needed).

Measure #: 1	Re-entered foster care within 12 months
Steps to improve performance: Utilize the child protection team, recommendations from mental health facilities, and signs of safety in assessing needs, appropriate placements, strengths and goals. In this particular case, our numbers are small, thus not statistically significant. I think we have strong practices already in doing the steps above. We attempt to engage families through family assessment or children's mental health and find we have better success rates. The	

one child out of six that re-entered within 12 months was placed in a mental health facility voluntarily by the parent and subsequently withdrawn after he ran away. The treatment was necessary and the court then officially placed the child back into the same facility. We still believe it is better to allow the parent to engage in this process first, before moving to more county/judicially controlled options.

3. All Counties (optional)

The department encourages the sharing of good practices and approaches that are working well across the state. If your county has identified one or more practices that are indicating positive outcomes for children in a particular measure, identify the measure number below and briefly summarize the practice/approach. *(One response box is provided below; copy and paste as needed).*

Measure #:	
Approaches and steps that are leading to positive outcomes:	

4. Performance by racial/ethnic subgroups

CCSA 2008 data by racial/ethnic subgroups (using Bureau of Census categories) are provided for three measures: re-entry into foster care, reunification with family, and two or fewer placement settings.

Counties with racial/ethnic subgroups having 10 or more individuals in a numerator were examined to determine if a performance gap of five percentage points or more exist when comparing subgroup performance from that of whites. Access the link below and review the data provided for the three measures. [Note: three spreadsheets—one for each measure—are included in this excel document]

- [CCSA Performance Data by Racial/Ethnic Subgroups for CY 2008](#)

If your county has a racial/ethnic subgroup with a performance rate that is five percentage points or more below the rate for whites on any measure (shaded cell), briefly described what issues may have led to these differences in outcomes, and steps that will be taken to improve the outcome for each subgroup for the 2010-11 biennium.

n/a

Section III: Integrating Services for Child Welfare and MFIP Families

In the past several years, a number of Minnesota counties have worked towards integrating services for families who are in need of a variety of services, such as financial assistance and child welfare. Some have also integrated their child support and public health departments. Many counties report that clients with multiple needs drive the need to coordinate and integrate service delivery. While counties are at different levels of coordination and integration, some responded that such efforts lead to a continuum of seamless service access for families, improved communication, and better coordination across program staff.

The department would like to share with counties and tribes efforts and strategies counties are using to coordinate and integrate services. Respond to the following questions regarding the type and level of service coordination and integration at your county. These responses will supplement responses from the 2008-09 service agreement to get a clearer picture of county service delivery systems.

County Size Small Medium Large

Type of coordination/integration

	Coordinated	Integrated
Referrals	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Joint case planning	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Joint staff meetings	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Communication between financial and social worker	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Interdivisional teams	<input type="checkbox"/>	<input type="checkbox"/>
Interdivisional services	<input type="checkbox"/>	<input type="checkbox"/>
Central intake	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If your county has already integrated services and departments, or working toward integration, check the boxes below that describe the characteristics of your county's integrated services. *Mark all that apply and use the space provided to briefly explain or comment, if needed.*

1. Departments/services integrated

<input checked="" type="checkbox"/> Financial/food assistance	<input checked="" type="checkbox"/> Child welfare	<input checked="" type="checkbox"/> Child support
<input checked="" type="checkbox"/> Employment/training	<input checked="" type="checkbox"/> Public health	<input checked="" type="checkbox"/> Chemical dependency
<input checked="" type="checkbox"/> Mental health	<input type="checkbox"/> Rehabilitation	<input checked="" type="checkbox"/> Adult supports
<input checked="" type="checkbox"/> Housing assistance	<input checked="" type="checkbox"/> Domestic violence	<input checked="" type="checkbox"/> Child care
<input type="checkbox"/> Community corrections	<input checked="" type="checkbox"/> Public transit	<input checked="" type="checkbox"/> Energy assistance

Explanation/comments:

2. Location

- Same building Different locations

Describe how location of different departments/services impacts service coordination/ integration efforts:

3. Data sharing

- Same data system across multiple departments/services making data sharing easier
- Different data systems are making data sharing difficult
- Current data system is adequate to address the multiple needs of clients
- Current data system is inadequate to address the multiple needs of clients

Other data-related issues/comments:

4. Limitations/constraints

- Short staff/workload Assets and resources More reactive than proactive
- Data privacy

Other limitations/constraints or comments:
 Given we are a small county each staff member carries a variety of caseloads. This makes specialization difficult. It does assist with integration of services, intake, planning, funding, on-going case management, etc.

5. Strengths and Benefits

Check the boxes below that describe your service coordination and integration experience in working with families: *[For each box checked, briefly explain in the text box provided]*

- Holistic model of care adds to the potential for success for families
- Early identification and intervention leads to better results for families
- Integrated approach to service delivery benefits both county and clients
- Excellent interdivisional relationships/communication
- Staff commitment and knowledge of financial and social services
- Other (state below)

Describe other benefits/impact your coordination/integration efforts are having on service delivery and clients:
 Being a part of Prime West County Based Purchasing is an asset. Expectations and outcomes are held to a higher standard and lend themselves to higher quality case management, communication between public health and social services, identifying resources that best fit the client, etc.

6. Counties with Indian Reservations

If your county has an American Indian Reservation, explain the level of service coordination with the tribes, and how these efforts are leading to equitable service delivery to American Indian residents:

n/a- We have a neighboring reservation in South Dakota. We have a satellite office in Browns Valley and work well with the tribe in SD. We have a tribal liaison that shares programming and resources for clients both from the tribe and other area agencies.

Section IV: Public Input

Counties must specify that the public was informed and input was sought for the use of funds as required by laws provided through this agreement.

1. From the list below, select how the public was informed in development of the service agreement:

<input type="checkbox"/>	Public hearing
<input checked="" type="checkbox"/>	Newspapers
<input checked="" type="checkbox"/>	Community meetings
<input type="checkbox"/>	Radio announcements
<input checked="" type="checkbox"/>	County Web site
<input checked="" type="checkbox"/>	Others (specify): emails to local partners

2. Prior to submitting the service agreement to the Minnesota Department of Human Services, did your county allow at least 30 days for soliciting of comments from the public on the content of the agreement?

<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	No

3. Describe the public input received and how it impacted your county’s planning process or the service agreement by selecting one of the following two options:

<input checked="" type="checkbox"/>	Public input was received (<i>continue with the questions below</i>)
<input type="checkbox"/>	Did not impact the planning process/service agreement
<input checked="" type="checkbox"/>	Did impact the planning process/service agreement, particularly the:
<input checked="" type="checkbox"/>	Needs Statement section
<input checked="" type="checkbox"/>	Strategies and Outcomes section
<input type="checkbox"/>	Budget section
<input type="checkbox"/>	Other (specify):
Briefly describe the changes made to the service agreement: (1) Additional resources to the Connections after school program in Wheaton. (2) A new child protection awareness campaign that will utilize the child protection team and the schools and newspaper in educating and preventing common issues that affect our youth. (3) Continued counseling in the Browns Valley and Wheaton area schools (4) Additional social worker to develop kinship program and awareness campaign.	
<input type="checkbox"/>	No public input was received

Section V: County Budget

In the budget table below, indicate county name, amount, and percentage for each item listed with the specific MFIP or CCSA Consolidated Fund for CYs 2010-11. Also note:

- Total percent must equal 100.
- MFIP administration is capped at 7.5 percent unless your county is applying for an administrative cap waiver. To apply for the administrative cap waiver, respond to the questions following this budget page
- If “other” is used, please specify.

COUNTY: Traverse					
2010 MFIP	Budgeted Amount	Percent	2010 CCSA	Budgeted Amount	Percent
Employment services (DWP)	\$5724	10%	Children’s mental health	\$31272.25	25%
Employment services (MFIP)	\$20606	36%	Child and family services	\$62544.50	50%
Emergency services ¹	\$10303	18%	Adult services	\$31272.25	25%
Administration (RMCEP)	\$3434	6%	Other 1:	\$	%
Income maintenance administration	17172\$	30%	Other 2:	\$	%
Other 1:	\$	%	Other 3:	\$	%
Other 2:	\$	%	Other 4:	\$	%
2010 MFIP budget	\$57239	100%	2010 CCSA budget	\$125089	100%
2011 MFIP	Budgeted Amount	Percent	2011 CCSA	Budgeted Amount	Percent
Employment services (DWP)	\$5724	10%	Children’s mental health	\$29083.19	25%
Employment services (MFIP)	\$20606	36%	Child and family services	\$58166.39	50%
Emergency services ¹	\$10303	18%	Adult services	\$29083.19	25%
Administration (RMCE)	\$3434	6%	Other 1:	\$	%
Income maintenance administration	\$17172	30%	Other 2:	\$	%
Other 1:	\$	%	Other 3:	\$	%
Other 2:	\$	%	Other 4:	\$	%
2011 MFIP budget	\$57239	100 %	2011 CCSA budget	\$116332.7	100%

¹ If dollars are budgeted for emergency services, ensure that the department has a copy of the county’s most current emergency services policies. A copy of your county’s emergency services policies can be e-mailed as an attachment to: mayjoua.ly@state.mn.us. Notify the department of any changes to emergency services policies during the 2010-11 biennium.

Administrative Cap Waiver

Is your county requesting a waiver of the MFIP administrative cap for the 2010-11 biennium?

- Yes If yes, provide a concise response to the following three questions.
- No If no, skip this section.

1. Describe the budget change (include any staff changes)

2. What new activities or services will be provided?

3. Describe the targeted population and number of people expected to be served?

Emergency Services in Counties with American Indian Reservations

Briefly describe how your county consulted with the tribes on the county emergency services and policies governing all residents of the county.

Section VI: Assurances

It is understood and agreed by the county board that any funds granted pursuant to this service agreement will be expended for the purposes outlined in Minnesota Statutes, section 256J and 256M. It is understood and agreed by the county board that the commissioner of the Minnesota Department of Human Services has the authority to review and monitor compliance with the service agreement and that documentation of compliance will be available for audit.

The counties shall make reasonable efforts to comply with all Children and Community Services Act requirements, including efforts to identify and apply for available state and federal funding for services within the limits of available funding.

Acceptance and use of state and federal funds through the MFIP Consolidated Fund means the county agrees to operate the MFIP program in accordance with state law and guidance from the Minnesota Department of Human Services.

Contingency Planning

As required under the Child and Family Services Improvement Act of 2006 and under state guidance, counties and subcontractors should have a contingency plan in place to address specific federal criteria on how programs funded through Title IV-B, part 2, and Title IV-E would respond to a natural or man-made disaster. The federal criteria of the county and subcontractor's disaster preparedness plan would include the following:

- Identify, locate, and continue availability of services for children under state care or supervision who are displaced or adversely affected by a disaster;
- Respond, as appropriate, to new child welfare cases in areas adversely affected by a disaster, and provide services in those cases;
- Remain in communication with caseworkers and other essential child welfare personnel who are displaced because of a disaster;
- Preserve essential program records; and coordinate services and share information with other states.

Instructions and other details on the development of this plan were published in [Bulletin #07-68-10, titled "Child Welfare Disaster Preparedness Plans"](#) dated July 19, 2007. For questions or clarification, contact Jean Thompson at (651) 431-3856m or e-mail: jean.thompson@state.mn.us.

Section VII: Certification for Submission

- Checking this box certifies that this 2010-11 MFIP/CCSA Biennial Service Agreement has been prepared as required and approved by the county board(s) under the provisions of Minnesota Statutes, section 256M (Children and Community Services Act) and 256J (Minnesota Family Investment Program).

Chair, county board of commissioners or authorized designee

(state the name of the chair or designee, their mailing address and the name of the county)

Name (chair or designee)	Mailing Address	County
Gerald Kaus	PO Box 807, 702 8th St North, Wheaton, MN 56296	Traverse

Date of Submission

Date:	09/15/2009
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