

DIRECTOR
Steven A. Clifton
Phone: (719) 275-2318
Fax: (719) 275-5206

FREMONT COUNTY
Department of Human Services
172 Justice Center Road
Canon City, Colorado 81212

COUNTY BOARD
Tim Payne Dist. 1
Debbie Bell Dist. 2
Dwayne McFall Dist. 3

FREMONT COUNTY BOARD OF SOCIAL SERVICES MEETING
to be held at the
FREMONT COUNTY ADMINISTRATION BUILDING
615 Macon, Conference Room # 208
Canon City, CO 81212
June 27, 2017 2:00 p.m.

- I. Roll Call
- II. Approval of Minutes of May 30, 2017
- III. Approval of the Agenda
- IV. Consent Agenda
 - A. Warrant Log & EBT Transaction Log Listings
 - B. Canceled Warrants, Current & Prior Period
 - C. Monthly Expense
 - D. Accounts Receivable Write-Offs
- V. Approval of Financial & Caseload Reports
- VI. Director's Report
- VII. Old Business
 - A.
- VIII. New Business
 - A. *SPY 17-18 NE WAIVER Mon*
 - B.

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May 30, 2017
2017 MEETING # 5

The Fremont County Board of Social Services (BOSS) met in Regular Session on Tuesday, April 25, 2017, in Conference Room 208 at the Fremont County Administration Building, 615 Macon, Canon City, Colorado. Chairman Payne called the meeting to order at 2:00 p.m. Those present included:

Tim Payne	Chairman	Present
Dwayne McFall	Chairman Pro Tem	Present
Debbie Bell	Treasurer	Present

Also present: Brenda Jackson, Fremont County Attorney, Sunny Bryant, Fremont County Manager, Steve Clifton, Director, Stacie Kwitek-Russell, DHS and Linda Smith, DHS *and Kim Gondale*

MINUTES: Board Member Bell moved, duly seconded by Board Member McFall to accept the minutes of the April 25, 2017 meeting as presented. Upon vote: Board Member Bell, aye; Board Member McFall, aye; Board Member Payne, aye. The motion carried.

AGENDA: Board Member McFall moved, duly seconded by Board Member Bell, to approve the agenda for the May 30, 2017 meeting with no additions or deletions. Upon vote: Board Member McFall, aye; Board Member Bell, aye; Board Member Payne, aye. The motion carried.

CONSENT AGENDA: Board Member Bell moved, duly seconded by Board Member McFall, to approve the Consent Agenda:

1. Warrant Log and Electronic Benefit Transaction Listings
2. Canceled Warrants, Current and Prior Period
3. Monthly Expense
4. Account Receivable Write-off

Upon vote: Board Member Bell, aye; Board Member McFall, aye; Board Member Payne, aye. The motion carried.

FINANCIAL/CASELOAD REPORT: Following review and discussion of the financial reports, Board Member McFall moved, duly seconded by Board Member Bell, to accept the April financial and caseload reports. Upon vote: Board Member McFall, aye; Board Member Bell, aye; Board Member Payne, aye. The motion carried.

DIRECTOR'S REPORT: Steve Clifton provided a written report for the Board detailing his monthly activities, as well as responded to questions. Items discussed included:

- Meeting with City Council, community and Southern Peaks included request for notification system for runaways, doubling time for Police Department availability, and keeping neighbors and others informed
- Mentoring Program contracted through Boys and Girls Club
- Career Education Meeting for this summer at CCHS to include social work as a career path as well as vocational pathways
- Executive Director Meeting held Thursday, May 18 went well and was well attended by staff and community providers
- Leadership Program completed for year, was well received and current attendees requested the program be offered annually
- Reviewed information provided by the State on potential impacts of the proposed American Health Care Act on Colorado's Medicaid program and recipients

Board Member Bell moved, duly seconded by Board Member McFall, to accept the April Director's report. Upon vote: Board Member Bell, aye; Board Member McFall, aye; Board Member Payne, aye. The motion carried.

C-STAT RECOGNITION: Information shared with BOSS regarding recognition of Fremont County for C-State Distinguished Performance by exceeding the goal on 16 of 21 measures.

The meeting adjourned at 2:25 p.m.



Chairman, Fremont County Board of Social Services

06/27/2017

Date



Secretary

05/30/2017

Date

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Department of Human Services
172 Justice Center Road
Cañon City, Colorado 81212

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NET EXPENSES AND AUTHORIZATIONS

May

Administration	40,228.22	
Old Age Pension	56,516.59	
Temporary Aid to Needy Families	89,937.00	
Aid to the Needy Disabled	33,321.83	
Child Care	56,516.59	
LEAP Basic	8,462.54	
LEAP CIP	0.00	
Foster Care Placements	110,820.12	
Food Assistance	826,420.00	
Medicaid Transportation	9,228.90	
General Assistance	0.00	
Core Services/Family Preservation	22,885.69	
Employment First - Warrants	0.00	
Employment First - EBT	0.00	
Medical Exams	0.00	
Workfare Incentives	0.00	
Alive/E Program	1,503.72	
Total Expenses		\$ 1,255,841.20

sent to Finance Office 6/14/17

PERCENT FOR MONTH: 41.67

MAY 2017

EXPENSES

	BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	YEAR TO DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
Regular Administration	1,448,658.00	114,875.44	557,919.74	38.51%	94,390.28	457,735.49	100,184.25	190,773.00	52.51%				
Program Administrations	5,779,992.00	496,288.84	2,030,869.38	35.14%	454,360.29	1,795,547.27	235,322.11	666,462.00	35.31%				
Total Administration	7,228,650.00	611,164.28	2,588,789.12	35.81%	548,750.57	2,253,282.76	335,506.36	857,235.00	39.14%				
PROGRAMS:													
Aid to the Blind	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%	0	0	0	0
Aid to the Needy Disabled	65,000.00	4,016.11	26,902.74	41.39%	0.00	0.00	26,902.74	65,000.00	41.39%	153	158	5	158
Chafee (ALIVE/E) Program	9,000.00	1,503.72	4,145.32	46.06%	1,503.72	4,145.32	0.00	0.00	0.00%				
Child Care	85,529.00	7,227.42	35,937.09	42.02%	0.00	0.00	35,937.09	85,529.00	42.02%	117	120	3	111
Child Welfare Foster Care Program	414,522.00	27,693.17	149,756.19	36.13%	0.00	0.00	149,756.19	414,522.00	36.13%	174	180	6	177
Core Services	9,000.00	148.89	3,546.99	39.41%	148.89	3,899.74	(352.75)	0.00	0.00%	159	160	1	156
Employment First Program	0.00	(141.80)	(666.21)	0.00%	0.00	0.00	-666.21	0.00	0.00%				
General Assistance	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Low Income Energy Assistance Program	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Medicaid Transportation	90,000.00	9,228.90	36,234.69	40.26%	9,228.90	36,234.69	0.00	0.00	0.00%	73	87	14	77
Old Age Pension	1,300.00	98.75	498.10	38.32%	0.00	0.00	498.10	1,300.00	38.32%	258	261	3	263
State Sponsored Meetings	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Temporary Assistance to Needy Families	433,981.00	19,237.61	84,995.49	19.59%	0.00	0.00	84,995.49	433,981.00	19.59%	247	261	14	262
Misc. Programs & Expense	712,697.00	49,364.40	192,940.32	27.07%	54,836.79	250,992.93	(58,052.61)	835.00	-6952.41%				
Contingency	0.00	0.00	0.00	0.00%	12,882.97	74,339.95	(74,339.95)	(190,000.00)	39.13%				
TOTAL:	9,049,679.00	729,541.45	3,123,079.84	34.51%	627,351.84	2,622,895.39	500,184.45	1,668,402.00	29.98%	3324	3,390	66	3353
FOOD STAMPS	0.00	826,420.00	4,070,953.00		826,420.00	4,070,953.00	0.00	0.00					
TOTAL:	9,049,679.00	1,555,961.45	7,194,032.84		1,453,771.84	6,693,848.39	500,184.45	1,668,402.00		3324	3,390	66	3353
COUNTY SHARE RECEIVED	RECEIVED IN MONTH	RECEIVED YTD	COUNTY BUDGET	PERCENT RECEIVED									
Current Property Tax	90,640.11	853,920.11	1,168,154.00	73.10%	Total State Diversion Payments for Month								
Other Local Tax	14,754.94	75,103.55	170,592.00	44.03%	Total County Diversion Payments for Month								
Countywide Cost Allocation	0.00	37,943.81	167,770.00	22.62%									
Other Cty Rev., Holcim Rebate	0.00	0.00	0.00	0.00%									
Other Rev., Misc.-incl. TANF Work Partic.	0.00	0.00	0.00	0.00%									
Prior Year Revenue	0.00	0.00	0.00	0.00%									
County Contingency	12,882.97	74,339.95	0.00	0.00%									
Other Fin., Rtn of Cnty Share (TANF)	6,399.66	32,969.88	80,000.00	41.21%									
TOTAL COUNTY REVENUES RECEIVED	124,677.68	1,074,277.30	1,586,516.00	67.71%									
			sum of tax, cost alloc & other rev										
			fund balance										
			1,668,402.00										

PERCENT FOR MONTH: 41.67

MAY 2017

EXPENSES

	BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
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REGULAR ADMINISTRATION

PERSONAL SERVICES:

Salaries	1,470,798.00	117,332.69	562,976.97	38.28%									
Social Security	112,516.00	8,437.14	40,979.93	36.42%									
Retirement	44,124.00	3,269.30	15,512.48	35.16%									
Health & Life Insurance	233,931.00	21,681.16	98,375.70	42.05%									
Unemployment	4,412.00	352.00	1,688.91	38.28%									
Worker's Comp.	10,974.00	0.00	0.00	0.00%									
ADP Contract	3,000.00	0.00	0.00	0.00%									
Attorney	6,200.00	524.20	2,655.70	42.83%									
Psychological Exams	0.00	0.00	0.00	0.00%									
Travel, Meals, Registration	8,500.00	426.82	3,408.00	40.09%									

Indirect Cost Removal	(650,847.00)	(47,047.92)	(229,905.88)	35.32%									
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TOTAL PERSONAL SERVICES

	1,243,608.00	104,975.39	495,691.81	39.86%	87,115.93	411,275.24	84416.57	163,720.00	51.56%				
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OPERATING:

Advertising	500.00	(9.00)	663.13	132.63%									
Books/Subscriptions	1,500.00	0.00	672.08	44.81%									
Cost Allocation	8,000.00	0.00	0.00	0.00%									
Dues/Memberships	2,500.00	0.00	425.00	17.00%									
EBT Costs	16,800.00	807.11	4,035.55	24.02%									
Emp Mkt Analysis/Destruction of Record	7,500.00	0.00	345.00	4.60%									
Equip. Maintenance	23,112.00	568.91	2,748.26	11.89%									
Equip. Rental	8,838.00	854.73	3,852.05	43.59%									
Office Supplies/Expense	32,400.00	1,555.18	10,878.52	33.58%									
Photography	0.00	0.00	0.00	0.00%									
Postage	6,500.00	355.46	1,698.59	26.13%									
Printing & Forms	300.00	390.00	920.00	306.67%									
Telephone	13,500.00	895.17	4,482.42	33.20%									
Expert Witness & Fingerprinting	0.00	79.00	158.00	0.00%									
Interpreter	0.00	0.00	0.00	0.00%									
Capital Outlay, Equipment	0.00	0.00	0.00	0.00%									
Sub-Total Operating:	121,450.00	5,496.56	30,878.60	25.42%	3,751.56	21,360.79	9497.81	12,005.00	79.12%				

BUILDING:

Space/Utilities	0.00	0.00	0.00	0.00%									
Building Repair	0.00	0.00	0.00	0.00%									
Custodial Services	0.00	0.00	0.00	0.00%									
Maintenance, Building	3,600.00	0.00	998.88	27.75%									
Maintenance, Grounds	0.00	0.00	0.00	0.00%									
Utilities	80,000.00	4,403.49	30,350.45	37.94%									
Sub-Total Building:	83,600.00	4,403.49	31,349.33	37.50%	3,522.79	25,079.46	6269.87	15,048.00	41.67%				

TOTAL OPERATING

	205,050.00	9,900.05	62,227.93	30.35%	7,274.35	46460.25	15767.68	27,053.00	58.28%				
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TOTAL REGULAR ADMIN.

	1,448,658.00	114,875.44	557,919.74	38.51%	94,390.28	457735.49	100184.25	190,773.00	52.51%				
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PERCENT FOR MONTH: 41.67

2017

MAY

EXPENSES

BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	YEAR TO DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
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PROGRAM ADMINISTRATIONS

Adult Protective Services Admin

Salaries	7,730.47	38,439.22	28.01%									
Attorney	0.00	6,832.90	80.39%									
Social Security	580.18	2,894.49	27.57%									
Retirement	230.30	1,141.03	27.72%									
Health & Life Insurance	807.47	3,807.02	14.74%									
Unemployment	412.00	115.26	27.98%									
Workers Comp	1,707.00	0.00	0.00%									
Travel	6,700.00	2,550.84	38.07%									
Space/Utilities	800.00	397.00	49.63%									
Operating	3,500.00	551.26	15.75%									
Client Service Funds	13,000.00	450.30	3.46%									
Indirect Costs	34,104.00	12,652.14	37.10%									
Total APS Admin.	12,883.53	69,831.46	28.34%	10,146.82	55,865.16	13966.30	49,281.00	28.34%				

CHAFEE (Alive!) Administration

Salaries	4,386.59	21,621.33	41.28%									
Attorney	0.00	0.00	0.00%									
Social Security	4,007.00	1,510.33	37.69%									
Retirement	1,554.00	648.62	41.74%									
Health & Life Insurance	9,581.00	3,908.77	40.80%									
Unemployment	155.00	64.85	41.84%									
Worker's Comp	1,036.00	0.00	0.00%									
Travel	3,000.00	188.98	21.72%									
Space/Utilities	350.00	142.64	40.75%									
Operating	1,000.00	12.03	1.20%									
Contract Services	0.00	0.00	0.00%									
Indirect Costs	0.00	0.00	0.00%									
Total Chafee Admin.	5,822.69	28,560.25	39.09%	5,822.69	28,560.25	0.00	0.00	0.00%				

Child Care Administration

Salaries	2,921.29	14,301.76	29.90%									
Attorney	0.00	0.00	0.00%									
Social Security	3,659.00	920.92	25.17%									
Retirement	1,435.00	87.64	29.90%									
Health & Life Insurance	9,771.00	5,825.67	59.62%									
Unemployment	144.00	42.93	29.81%									
Worker's Comp	295.00	0.00	0.00%									
Travel	250.00	0.00	0.00%									
Space/Utilities	210.00	166.70	79.38%									
Operating	2,300.00	453.59	19.72%									
Contract Services	0.00	0.00	0.00%									
Indirect Costs	39,246.00	12,468.65	31.77%									
Total Child Care Admin.	6,736.31	34,609.27	32.92%	6,736.31	34,609.27	0.00	0.00	0.00%				

EXPENSES	BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	YEAR TO DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
Child Support Enforcement Admin.													
Salaries	395,476.00	29,066.48	149,468.53	37.79%									
Attorney	20,000.00	0.00	2,232.00	11.16%									
Social Security	30,254.00	2,077.32	10,694.88	35.35%									
Retirement	11,864.00	872.75	4,442.85	37.45%									
Health & Life Insurance	77,813.00	6,941.95	35,277.24	45.34%									
Unemployment	1,186.00	87.68	450.27	37.97%									
Worker's Comp	2,108.00	0.00	0.00	0.00%									
Travel	1,600.00	1.23	1,181.41	73.84%									
Space/Utilities	1,850.00	0.00	1,603.45	86.67%									
Operating	27,100.00	1,699.97	8,716.09	32.16%									
Blood Tests	3,500.00	228.00	874.00	24.97%									
Indirect Cost	0.00	0.00	0.00	0.00%									
Total CSE and Incentives	572,751.00	40,975.38	214,940.72	37.53%	35,437.84	166,062.22	48878.50	104,380.00	46.83%				
Child Welfare 80/20 Admin.													
Salaries	761,776.00	41,192.57	212,062.86	27.84%									
Attorney	275,000.00	17,382.44	97,805.88	35.57%									
Social Security	58,276.00	3,171.04	15,968.30	27.40%									
Retirement	22,568.00	721.48	3,908.00	17.32%									
Health & Life Insurance	174,439.00	7,884.75	38,783.19	22.23%									
Unemployment	2,257.00	125.65	659.84	29.24%									
Worker's Comp	11,144.00	0.00	0.00	0.00%									
Travel	34,000.00	3,315.80	14,706.44	43.25%									
Space/Utilities	4,700.00	0.00	4,476.96	95.25%									
Operating	35,000.00	4,720.55	20,070.65	57.34%									
Contract Services	5,000.00	0.00	0.00	0.00%									
Indirect Costs	414,524.00	31,846.86	150,447.34	36.29%									
HB 1414-Salaries	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
IV-E Special Revenue													
Total Child Welfare 80/20	1,798,684.00	110,361.14	558,889.46	31.07%	86,288.91	447,111.49	111777.97	359,737.00	31.07%				
Child Welfare 100% (ACLU) Admin.													
Salaries	505,558.00	22,155.59	103,562.20	20.48%									
Attorney	0.00	0.00	0.00	0.00%									
Social Security	38,675.00	1,603.75	7,565.28	19.56%									
Retirement	14,942.00	586.37	2,717.77	18.19%									
Health & Life Insurance	107,835.00	4,455.09	19,962.97	18.51%									
Unemployment	1,494.00	66.44	310.55	20.79%									
Worker's Comp	7,319.00	0.00	0.00	0.00%									
Travel	14,000.00	488.75	1,741.84	12.44%									
Space/Utilities	0.00	0.00	0.00	0.00%									
Operating	500.00	62.40	311.88	62.38%									
Contract Services	0.00	13,311.11	73,779.51	0.00%									
Indirect Costs	5,337.00	423.18	1,763.77	33.05%									
Total Child Welfare 100% (ACLU)	695,660.00	43,152.68	211,715.77	30.43%	43,152.68	211,715.77	0.00	0.00	0.00%				

	BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	YEAR TO DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
Core Services Admin													
Salaries	676,097.00	39,583.09	206,721.85	30.58%									
Attorney	0.00	0.00	0.00	0.00%									
Social Security	51,722.00	2,855.94	14,981.00	28.88%									
Retirement	19,971.00	1,022.71	5,372.55	26.90%									
Health & Life Insurance	122,809.00	7,749.82	39,630.01	32.27%									
Unemployment	1,997.00	118.74	622.08	31.15%									
Worker's Comp	10,853.00	0.00	0.00	0.00%									
Travel	17,000.00	2,281.56	8,130.06	47.82%									
Space/Utilities	0.00	0.00	0.00	0.00%									
Operating	12,000.00	1,683.73	7,477.20	62.31%									
Contract Services	17,000.00	0.00	2,312.36	13.60%									
Indirect Costs	0.00	0.00	0.00	0.00%									
Total Core Services / FPP	929,449.00	55,295.59	285,257.11	30.69%	50,229.80	258,638.12	26618.99	71,835.00	37.06%				
Employment First Admin.													
Salaries	0.00	0.00	0.00	0.00%									
Attorney	0.00	0.00	0.00	0.00%									
Social Security	0.00	0.00	0.00	0.00%									
Retirement	0.00	0.00	0.00	0.00%									
Health & Life Insurance	0.00	0.00	0.00	0.00%									
Unemployment	0.00	0.00	0.00	0.00%									
Worker's Comp	0.00	0.00	0.00	0.00%									
Travel	0.00	0.00	0.00	0.00%									
Space/Utilities	0.00	0.00	0.00	0.00%									
Operating	0.00	0.00	0.00	0.00%									
Contract Services	0.00	0.00	0.00	0.00%									
Indirect Costs	0.00	0.00	0.00	0.00%									
Total Employment First	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Food Assistance Fraud Administration													
Salaries	32,838.00	2,300.63	11,145.63	33.94%									
Attorney	0.00	0.00	0.00	0.00%									
Social Security	2,512.00	170.29	828.04	32.96%									
Retirement	985.00	69.04	334.39	33.95%									
Health & Life Insurance	5,418.00	412.29	1,966.40	36.29%									
Unemployment	99.00	6.90	33.45	33.79%									
Worker's Comp	372.00	0.00	0.00	0.00%									
Travel	400.00	104.31	527.93	131.98%									
Space/Utilities	0.00	0.00	0.00	0.00%									
Operating	750.00	20.11	59.76	7.97%									
Contract Services	0.00	0.00	0.00	0.00%									
Indirect Costs	0.00	0.00	0.00	0.00%									
Total Fraud	43,374.00	3,083.57	14,895.60	34.34%	2,466.86	11,916.47	2979.13	8,675.00	34.34%				

PERCENT FOR MONTH: 41.67

2017

MAY

EXPENSES

	BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
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HB-1451 Collaborative Mgmt

Salaries	35,816.00	2,137.95	8,879.80	24.79%									
Attorney	0.00	0.00	0.00	0.00%									
Social Security	2,740.00	151.95	631.07	23.03%									
Retirement	1,074.00	64.14	266.40	24.80%									
Health & Life Insurance	11,116.00	663.16	2,755.73	24.79%									
Unemployment	107.00	6.41	26.65	24.91%									
Worker's Comp	716.00	0.00	0.00	0.00%									
Travel	1,200.00	156.52	485.74	40.48%									
Space/Utilities	0.00	0.00	0.00	0.00%									
Operating	2,665.00	325.00	327.00	12.27%									
Contract Services	3,000.00	0.00	3,401.43	113.38%									
Family Assistance & Mini Grants	26,000.00	3,681.30	6,528.95	25.11%									
Total HB-1451 Collaborative Mgmt	84,434.00	7,186.43	23,302.77	27.60%	7,186.43	23,302.77	0.00	0.00	0.00%				

LEAP Admin & Outreach

Salaries	51,793.00	1,144.65	13,143.35	25.38%									
Attorney	0.00	0.00	0.00	0.00%									
Social Security	3,962.00	86.45	912.91	23.04%									
Retirement	1,554.00	10.76	44.19	2.84%									
Health & Life Insurance	363.00	56.48	5,311.94	1463.34%									
Unemployment	155.00	3.44	39.43	25.44%									
Worker's Comp	584.00	0.00	0.00	0.00%									
Travel	500.00	0.00	17.50	3.50%									
Space/Utilities	556.00	0.00	333.41	59.97%									
Operating	4,500.00	38.78	918.05	20.40%									
Contract Services	0.00	0.00	0.00	0.00%									
Indirect Costs	5,727.00	321.34	1,767.81	30.87%									
Total LEAP Admin. / Outreach	69,694.00	1,661.90	22,488.59	32.27%	1,661.90	22,488.59	0.00	0.00	0.00%				

Options for Long Term Care Admin.

Salaries	343,948.00	26,809.99	133,965.01	38.95%									
Attorney	0.00	0.00	0.00	0.00%									
Social Security	26,312.00	1,946.35	9,696.26	36.85%									
Retirement	10,318.00	804.27	4,018.84	38.95%									
Health & Life Insurance	81,590.00	5,708.65	29,288.05	35.90%									
Unemployment	1,032.00	80.41	401.84	38.94%									
Worker's Comp	5,209.00	0.00	0.00	0.00%									
Travel	6,800.00	747.15	2,771.02	40.75%									
Space/Utilities	1,425.00	0.00	1,280.36	89.85%									
Operating	11,000.00	120,889.74	126,978.53	1154.35%									
Contract Services	0.00	0.00	0.00	0.00%									
Indirect Costs	0.00	0.00	0.00	0.00%									
Total OLTCA Admin.	487,634.00	156,988.56	308,399.91	63.24%	156,988.56	308,399.91	0.00	0.00	0.00%				

PERCENT FOR MONTH: 41.67

Parental Fees Administration

BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	YEAR TO DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
21,731.00	0.00	0.00	0.00%									
Attorney	0.00	0.00	0.00%									
Social Security	1,662.00	0.00	0.00%									
Retirement	652.00	0.00	0.00%									
Health & Life Insurance	20.00	0.00	0.00%									
Unemployment	65.00	0.00	0.00%									
Worker's Comp	87.00	0.00	0.00%									
Travel	350.00	0.00	0.00%									
Space/Utilities	100.00	0.00	0.00%									
Operating	36,250.00	24.64	0.07%									
Grant Matches	30,786.00	10,604.74	34.45%									
Contract Services	0.00	3,132.00	0.00%									
CW Kwik Stop	0.00	0.00	0.00%									
Total Parental Fees Admin.	2,720.56	13,761.38	15.01%	2720.56	13,761.38	0.00	0.00	0.00%				

Promoting Safe & Stable Families Grant

Salaries	3,667.09	15,335.32	49.78%									
Attorney	0.00	0.00	0.00%									
Social Security	2,357.00	659.19	27.97%									
Retirement	898.00	27.16	4.35%									
Health & Life Insurance	7,244.00	1,787.44	24.67%									
Unemployment	90.00	258.18	286.87%									
Worker's Comp	599.00	0.00	0.00%									
Travel	5,800.00	340.50	11.90%									
Space/Utilities	0.00	0.00	0.00%									
Operating	0.00	0.00	0.00%									
Contract Services	0.00	0.00	0.00%									
Indirect Costs	0.00	0.00	0.00%									
Total PSSF Grant	4,968.70	18,769.09	39.27%	4,968.70	18,769.09	0.00	0.00	0.00%				

TANF Administration

Salaries	23,462.69	115,941.39	46.02%									
Attorney	0.00	0.00	0.00%									
Social Security	19,274.00	8,327.96	43.21%									
Retirement	7,559.00	3,478.18	46.01%									
Health & Life Insurance	47,034.00	22,124.85	47.04%									
Unemployment	756.00	347.91	46.02%									
Worker's Comp	1,947.00	174.00	8.94%									
Travel	1,000.00	720.24	72.02%									
Space/Utilities	830.00	0.00	0.00%									
Operating	6,300.00	8,098.34	128.55%									
Contract Services	81,375.00	15,428.96	18.96%									
Indirect Costs	116,176.00	50,806.17	43.73%									
Total TANF Admin.	44,651.80	225,448.00	42.20%	38,552.23	194,346.78	31101.22	72,554.00	42.87%				

TOTAL PROGRAM ADMINISTRATIONS

5,779,992.00	496,288.84	2,030,869.38	35.14%	454,360.29	1,795,547.27	235,322.11	686,462.00	35.31%				
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	BUDGET	NET MONTHLY EXPENSE	YEAR TO DATE EXPENSE	% OF BUDGET SPENT	EARNED REVENUE	YEAR TO DATE EARNED REVENUE	COUNTY SHARE OF EXPENSE	COUNTY BUDGET	% COUNTY BUDGET SPENT	LAST MONTH CASELOAD	THIS MONTH CASELOAD	CHANGE FROM PRIOR MO	AVERAGE MONTHLY CASELOAD
MISCELLANEOUS PROGRAMS AND EXPENSE													
Medical Exams	500.00	0.00	0.00	0.00%	0.00	0.00	0.00	100.00	0.00%				
Case Services/Protective	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Grant Exp.-Adoption/Retention	1,500.00	0.00	1,292.01	86.13%	0.00	1,292.01	0.00	0.00	0.00%				
Grant Exp.-CCR	134,022.00	14,478.25	61,097.79	45.59%	14,478.25	61,097.79	0.00	0.00	0.00%				
Grant Exp.-FIOG don	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Grant Exp.-Casey	0.00	(405.00)	425.00	0.00%	(405.00)	425.00	0.00	0.00	0.00%				
Grant Exp.-Child Welfare don	2,500.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Grant Exp.-Child Welfare Hotline	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Grant Exp.-CWV Mobility	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Grant Exp.-Infant Toddler Quality	20,000.00	1,941.50	8,925.50	44.63%	1,941.50	8,925.50	0.00	0.00	0.00%				
Grant Exp. - IV-E Waiver	450,750.00	29,836.71	146,409.01	32.48%	29,836.71	146,409.01	0.00	0.00	0.00%				
Grant Exp.- Pathways	37,050.00	2,523.22	14,669.73	39.59%	2,523.22	14,669.73	0.00	0.00	0.00%				
Grant Exp.- WSS	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Grant Exp.- Misc	7,575.00	496.32	496.32	6.55%	496.32	496.32	0.00	0.00	0.00%				
IV-E First Year Expense	500.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
IV-E Non-First Year Expense	33,000.00	391.55	2,051.38	6.22%	391.55	2,051.38	0.00	0.00	0.00%				
Workfare Incentives	5,000.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
Reserved for use	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	0.00%				
NIR Administration	12,500.00	101.85	363.33	2.91%	0.00	0.00	363.33	12,500.00	2.91%				
Training, A/P/C/S	500.00	0.00	0.00	0.00%	0.00	0.00	0.00	335.00	0.00%				
Training, Title XX	5,000.00	0.00	3,165.00	57.55%	0.00	2,532.00	633.00	1,100.00	57.55%				
TANF Burials	1,800.00	0.00	0.00	0.00%	0.00	0.00	0.00	1,800.00	0.00%				
Other, Spec. Needs, Fraud Inc.	0.00	0.00	0.00	0.00%	5,574.24	13,094.19	-13094.19	(15,000.00)	87.29%				
Total Misc. Programs & Expense	712,697.00	49,364.40	238,695.07	33.52%	54,836.79	250,992.93	-12097.86	835.00	-1448.85%				

Received Date	Assigned Worker	Referral Source	Type of Complaint	PRAN
5/22/2017	Hansen-Davis, Becca M.	DHS Staff	YIC	N
5/27/2017	Gurule, Tina E.	Family/Relative	YIC	N
5/3/2017	Schechter, Alexis A.	Law Enforcement	Neglect	Y
5/4/2017	LoPresti, C.J.	Counselor/Therapist	Neglect	N
5/8/2017	Schechter, Alexis A.	Unknown/Anonymous	Sexual Abuse	N
5/11/2017	LoPresti, C.J.	Day Care Provider	Neglect	FAR
5/14/2017	Schechter, Alexis A.	Unknown/Anonymous	Neglect	FAR
5/22/2017	Kelly, Rebekah J.	DHS Staff	Neglect	N
5/25/2017	Schechter, Alexis A.	Victim's Advocate	Neglect	FAR
5/31/2017	Curliss, Joshua D.	Family/Relative	Neglect	FAR
5/2/2017	LoPresti, C.J.	Parent	Neglect	FAR
5/3/2017	Kelly, Rebekah J.	Counselor/Therapist	Neglect	FAR
5/5/2017	LoPresti, C.J.	Law Enforcement	Neglect	FAR
5/10/2017	Kelly, Rebekah J.	Family/Relative	Neglect	FAR
5/13/2017	Schechter, Alexis A.	Hospital Staff	Neglect	Y
5/18/2017	LoPresti, C.J.	Parent	YIC	N
5/1/2017	Schechter, Alexis A.	Court	Neglect	FAR
5/26/2017	Kelly, Rebekah J.	Court	YIC	N
5/2/2017	Hansen-Davis, Becca M.	Law Enforcement	Neglect	FAR
5/3/2017	Schechter, Alexis A.	Day Care Provider	Physical Abuse	FAR
5/6/2017	Hansen-Davis, Becca M.	Law Enforcement	Neglect	N
5/11/2017	Kelly, Rebekah J.	School Staff	Neglect	FAR
5/13/2017	Schechter, Alexis A.	Hospital Staff	Neglect	N
5/20/2017	Kelly, Rebekah J.	Law Enforcement	YIC	N
5/25/2017	Hansen-Davis, Becca M.	Victim's Advocate	Neglect	FAR
5/29/2017	Kelly, Rebekah J.	Law Enforcement	Neglect	N
5/1/2017	Kelly, Rebekah J.	School Staff	Physical Abuse	Y
5/3/2017	Hansen-Davis, Becca M.	Family/Relative	Neglect	FAR
5/4/2017	Hansen-Davis, Becca M.	Parent	YIC	N
5/9/2017	LoPresti, C.J.	Family/Relative	Neglect	FAR
5/11/2017	Schechter, Alexis A.	Other	Neglect	Y
5/18/2017	Hansen-Davis, Becca M.	Unknown/Anonymous	Neglect	FAR

32

Breakout by type of Allegation:

Courtesy	0				
Court-Ordered Plmt/Service	0	0%	Y=	4	12.50%
Delinquency	0		N=	12	37.50%
Domestic Violence	0		FAR=	16	50.00%
Emotional Abuse	0		Pending=	0	0.00%
Intake Service Request	0			32	100.00%
Neglect	23	72%			
OOHPE	0	0%			
Physical Abuse	2	6%			
Preliminary Investigation	0	0%			
Relinquishment Counselling	0				
Sexual Abuse	1	3%			
Welfare Check	0				
Youth In Conflict	6	19%			
	<u>32</u>	<u>100%</u>			

MONTHLY DIRECTOR'S REPORT

To: Board of Social Services
 From: Steve Clifton
 Month: June 2017

The Director's activities for the month are as follows:

06/01/17	Attended meeting with School Districts RE- 1, RE-2 and USC regarding the Career Track Education Program Meeting with Lisa Hall on access system Brief meeting with Child Welfare Supervisor for Foster Care update Reviewed two performance evaluations
06/02/17	Reviewed three performance evaluations
06/05/17	Attended Administrators Meeting to discuss interdivisional issues
06/06/17	Meeting with three eligibility technicians Office visit with Mick Stumph regarding child welfare and to discuss a performance evaluation Meeting with Wanda Embrey-Goss for regarding assistance payments, child support and transition
06/15/17	Meeting with Superintendents to discuss follow-up on educational programing and to discuss meeting with Southeast Directors this fall
06/19/17	Attended Administrators Meeting to discuss interdivisional issues and listen to presentation by RMMI on document scanning Meeting with Stacie Kwitek-Russell regarding updates and transition plan
06/26/17	Will attend Administrators Meeting to discuss interdivisional issues, transition and budget
06/27/17	Will attend BOSS Monthly Meeting
06/29/17	Will meet with Pueblo County DSS Director to discuss various issues and updates
06/30/17	Will meet with Executive Director of Boys and Girls Club to discuss mentoring program as well overview of Boys and Girls Club

This concludes the Director's Report for the month. I will be happy to answer any questions at your convenience.

MEMORANDUM OF UNDERSTANDING
The State of Colorado Department of Human Services

And

**The Board of County Commissioners or other elected governing body of Fremont
County(ies), Colorado**

This Memorandum of Understanding (or "MOU") is made this 27th day of JUNE 2017, between the State of Colorado Department of Human Services (the "CDHS") and the Board of County Commissioners or other elected governing body of Fremont County(ies), Colorado (the "County").

CDHS is the sole state agency with the responsibility to administer or supervise the administration of the human services programs listed in CRS 26-1-201.

The Colorado General Assembly enacted SB 13-231 in response to the CDHS being granted waiver authority by the United States Department of Health and Human Services, Administration for Children and Families, under Section 1130 of the Social Security Act, which authorizes states to conduct demonstration projects which are determined to promote the objectives of parts B or E of Title IV of the Social Security Act. A copy of the waiver terms and conditions are attached to this MOU as Exhibit A.

CRS 26-5-105.4 requires CDHS and the County to enter into a Memorandum of Understanding that explains the County's duties and responsibilities in implementing the Title IV-E Waiver Demonstration Projects.

CDHS and the County understand and agree that the services outlined in this MOU are subject to available appropriations by the General Assembly, and neither party will be obligated to provide services or assistance if adequate appropriations have not been made.

The following terms are agreed to by CDHS and the County:

1. MOU MEETS PERFORMANCE AGREEMENT REQUIREMENT

The parties agree that the provisions of this MOU constitute compliance with CRS 26-5-105.4.

2. TERM

The term of this MOU will be from July 1, 2017 to and including June 30, 2018.

3. DEFINITIONS

The parties agree to provide the following minimum services to the identified populations as denoted below (check all that apply):

Family Engagement – Meetings will be provided to families with a newly opened child welfare case during the demonstration period:

- Within seven business days of case opening;
 - (in FAR cases, within seven business days after the 60th day (69 days by including weekends);
- Within seven business days of initial placement;
- Every 90 days when in out-of-home care (DHS/DSS custody);
- Every six months in in-home (case open).

Permanency Roundtables – Meeting will be held quarterly for:

All open cases involving a child/youth with a goal of Other Planned Permanent Living Arrangement; and/or

All open cases involving a child/youth who has been in out of home care for 12+ months; and/or

Other: *All open cases involving a child/youth in care over 6 mos. in need of stronger permanency planning - PRTs will be provided through IV-E for Custer County and Care Per Treatment.*

Kinship Supports – Support services and goods will be provided to kinship families who are:

Licensed kinship foster caregivers;

Non-licensed kinship foster caregivers.

- Trauma Informed Screening, Assessment, and Treatment to the following target population:

Population priorities: 1. Children/youth subject of a D&N
2. Youth in care through a Delinquency case 3. Children/youth with multiple prior D&N involvements

4. **REQUIRED DUTIES OF THE COUNTY**

- a) During the term of the agreement, the County agrees to implement the intervention(s) in accordance with the rules adopted by the State Board of Human Services, and as described in Exhibit B, "County IV-E Waiver Demonstration Application," modified as necessary in accordance with Section 6 of this Memorandum of Understanding.
- b) The County will maintain sufficient records, will submit reports, and will accurately record Colorado Trails (Trails) and CFMS actions as may be required to document all cost and case activities supporting the implementation of the Waiver, and will permit CDHS, its evaluators, duly designated agents and/or representatives of the federal government, to inspect the records and will make such records available to CDHS as specified in CRS 26-1-122. If the County complies with current record keeping requirements as outlined by current rules, such shall be considered to be "sufficient records."
- c) Counties shall report costs to provide an intervention service to an individual, as authorized through this MOU. The cost shall include the type of intervention service provided, the volume of such services provided, and costs of the intervention service, where applicable. The costs include intervention funds, staff and vendor costs as identified in Trails, County Financial Management System (CFMS) and/or 100% time reporting by individuals performing a waiver activity. There is a presumption that a cost is not a waiver cost unless affirmatively documented in CFMS, Trails, and/or a vendor's time detail report for 100% time reporting.
- d) The County agrees to participate in the evaluation of the Title IV-E Waiver Demonstration Project, as described under Section 3 of Exhibit A, and as established under CRS 26-5-105.4.
- e) In accordance with CRS 26-5-105.4, the County agrees to the State retaining 50% of the Child Welfare savings resulting from the IV-E Waiver activities. The remaining 50%

savings will be retained by the County for additional Child Welfare services, as defined in CRS 26-5-101.3. Cost savings are determined as follows:

- 1) The difference between *i*) the amount of Title IV-E funds that were claimed for foster care maintenance, case planning and administration and eligibility determination in State Fiscal Year (“SFY”) 2012-13, and *ii*) the amount of Title IV-E funds that would have been claimed for foster care maintenance, case planning and administration and eligibility determination in SFY 2017-18, had the State of Colorado not been granted waiver authority by the United States Department of Health and Human Services under Section 1130 of the Social Security Act.
- 2) For the ten counties with the largest caseload size, the methodology for distributing cost savings between counties that have entered into a Title IV-E Waiver Demonstration Project MOU shall be based on the reduction in the number of foster care bed days between SFY 2012-13 and SFY 2017-18;
- 3) For all other counties that have entered into a Title IV-E Waiver Demonstration MOU with CDHS, the methodology for distributing cost savings between counties that have entered into a Title IV-E Waiver Demonstration Project MOU shall be based on the reduction in the number of foster care bed days between either SFY 2011-12 or SFY 2012-13, and SFY 2017-18, as selected by the County.
- 4) “Cost savings” shall not include unspent Title IV-E Waiver Demonstration Project funds provided to counties through the MOU for purposes of implementing Waiver Interventions. Any such unspent funds remaining at the end of SFY 2017-18 shall revert to the Title IV-E Waiver cash fund and rolled into the SFY 2018-19 child welfare block allocation, unless the CDHS is granted a Waiver extension. If an extension is granted, the reverted funds shall be included in the total amount of available funds for counties’ SFY 2018-19 IV-E Waiver Demonstration extension interventions.
- 5) The County insures any county employee funded with Title IV-E Waiver Intervention funds participates in 100% time reporting. County employees with 100% of time devoted to Title IV-E Waiver intervention(s) may utilize the six Month Certification form in lieu of 100% time reporting.

- f) No later than June 30, 2019, the County agrees to use 50% of the underspent county Title IV-E Waiver funds for child welfare services that can include:
 - 1) IV-E Waiver intervention services to eligible and non-eligible Title IV-E children
 - 2) Conventional title IV-E program services that are maintained for those Title IV-E eligible children in out of home placement
 - 3) Other child welfare services to eligible and non-eligible Title IV-E children and their families
 - 4) The County plan to expend either allocated Title IV-E Waiver funds, or underspent county Title IV-E Waiver funds as outlined in Exhibit B.

5. DUTIES OF CDHS

- a) CDHS will oversee the implementation of the Title IV-E Waiver Demonstration Project, and will develop standardized forms and reporting processes for the tracking of participants, in consultation with the Counties.
- b) CDHS will monitor the County's provision of Title IV-E Waiver intervention services as outlined in the Exhibit B and Exhibit C. CDHS will pull any necessary records or data for monitoring purposes from existing TRAILS and other current recording/data keeping systems. CDHS will not request the County to compile records/data that CDHS may compile or access through the use of TRAILS or other record/data keeping systems.
- c) CDHS will exercise oversight of and responsibility for the development, implementation, maintenance, and enhancement of Trails and its application relative to Child Welfare Services.
- d) For SFY 2017-18, CDHS agrees to allocate to counties any Title IV-E funds transmitted to the Title IV-E Waiver cash fund and appropriated by the general assembly to either implement the Title IV-E Waiver Demonstration Project, or to fund out of home placement and case planning for Title IV-E eligible children, in accordance with CRS 26-5-105.4.

6. BUDGET

In the preparing of Exhibit B, "Title IV-E Waiver Demonstration Project Year 5 (SFY2017-18) Application," the County shall develop a detailed budget that identifies all direct costs associated

with the implementation of the Waiver interventions, as defined in Section 3 of this Memorandum, for which the County has applied for IV-E Waiver Demonstration funds,

- a) Based on the results of negotiations with CDHS, should the level of funding awarded through the MOU differ from the funding requested through the Application, the County shall prepare and submit a revised Budget and any other changes to service delivery that will differ from the County's original Application submission. The revisions to the Application, once accepted by CDHS, shall constitute the Exhibit B, and shall become part of this MOU.
- b) With the written approval of CDHS, the County may request a revision to its accepted budget during the term of the agreement:
 - 1) The County may transfer budgeted funds between expenditure line items within a specific intervention, provided that the transferred amounts do not constitute a significant modification to the services as described within the Application.
 - 2) A written statement of impact to the services as described in the Application shall be prepared by the County and accompany any requested budget revisions that exceed the thresholds as identified in Sections 6.B.1 above, and may be required by CDHS for any requested budget revision falling within the thresholds identified in Sections 6.B.1 above.

7. SEVERABILITY

To the extent that this MOU is executed, and performance of the obligations of the parties may be accomplished, the terms of the MOU are severable. Should any singular term in this MOU be declared invalid or become inoperative for any reason, it will not invalidate the MOU itself, or any of the terms included therein.

8 INTEGRATION OF UNDERSTANDING

The parties recognize the nature of the relationship between the County and the State. This relationship is governed more broadly by pertinent provisions of the Colorado Constitution and of state statutes and rules, including lawful rules promulgated by the State Board of Human Services. The parties further recognize that this MOU is not intended to supersede or change the relationship between the County and the State as established by any legal authority.

9. NO THIRD PARTY BENEFICIARY

This MOU is binding to CDHS and the County, as well as their respective successors and assigns. It is agreed that the enforcement of the terms and conditions of this MOU are reserved for CDHS and the County, to the extent permitted by law. Nothing contained in this MOU allows a claim or right of action by a third party. Any third party receiving services or benefits under the provisions of this MOU is deemed an incidental beneficiary.

10. DISPUTE RESOLUTION

Prior to the execution of this document, if the parties are unable to reach agreement concerning the inclusion of, or wording of, provisions of the MOU, either party may refer the dispute to the Title IV-E Waiver Demonstration Project Oversight Committee. The Committee's decision will be made by a majority vote of its members, and is non-binding.

If dissatisfied with the decision of the oversight committee, either party may seek review by the Office Director of Children Youth and Families or designee. Nothing in these provisions limits a party's ability to pursue other remedies available under the law.

11. TERMINATION

The parties acknowledge that withdrawal from this MOU will result in the termination of this Agreement and termination of funding and services associated with this Agreement. The County shall assure as little disruption as possible in the delivery of services provided to Recipients.

- a) **Withdrawal/Termination.** Any party may withdraw from this Agreement at any time by providing 30 days written notice to all other Parties.
- b) **For Loss of Funds.** Any party may withdraw from this Agreement, in the event of loss or reduction of resources from its funding sources and shall provide notice of withdrawal, in writing within 30 days.
- c) **Lack of Compliance.** CDHS may terminate the agreement if it is found the County is not complying with the terms of this memorandum. In the event the memorandum is terminated for failure to perform, interventions funds may be reduced at the discretion of CDHS.

IN WITNESS WHEREOF, the Parties hereto, through their authorized representatives have executed this Memorandum of Understanding effective for the dates written above.

Ann Rosales, Director, Division of Child Welfare

Date

COUNTY(ies) OF FREMONT COLORADO,
by and through the BOARD OF COUNTY COMMISSIONERS


Chairman

ATTEST:

 County Clerk to the Board

DATE: 6/27/17

COLORADO DEPARTMENT OF HUMAN SERVICES
Title IV-E Waiver Demonstration Project
Individual County
Year 5 (SFY 2017-18) Application

Colorado Department of Human Services encourages you to apply to participate in the fifth year of the Title IV-E Waiver Demonstration Project. It is not mandatory for you to participate in all 5 interventions. Research your county's child welfare needs and gaps in service delivery and utilize this funding to improve services to children, youth and families in need. Use data to support needed FTE's and funding for hard goods. Structure and positions must be in place for implementation on 7/1/17. Please contact Tyler Allen, Administrator of the Title IV-E Waiver Demonstration Project at tyler.allen@state.co.us, 303.866.2154, with questions related to this application. This application is due for submission by 4/14/2017.

Name of County/Region: Fremont and Custer Counties

Primary Contact: Mick Stumph Date: 4/15/17

County: Fremont Agency: Fremont County DHS

Address: 172 Justice Center Road City, State Zip Canon City, CO 81212

Phone: 719-269-2041 Email: Michael.stumph@state.co.us

Waiver Interventions

What Title IV-E Waiver Interventions are you applying for funding?			
<input checked="" type="checkbox"/> Family Engagement	Total Funding Amount Requested:		\$5,330.00
<input checked="" type="checkbox"/> Permanency Roundtables	Total Funding Amount Requested:		\$1,570.00
<input checked="" type="checkbox"/> Kinship Supports	Total Funding Amount Requested:		\$149,222.00
<input checked="" type="checkbox"/> Trauma-Informed Screening, Assessment, and Treatment	Total Funding Amount Requested:		\$100,000.00
TOTAL:			\$256,122.00

Are there Title IV-E Waiver Interventions you are implementing with fidelity, to be included in the evaluation, but are not requesting funding? Please fill out the corresponding area of this application.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Family Engagement (Fremont) | <input type="checkbox"/> Kinship Supports |
| <input checked="" type="checkbox"/> Permanency Roundtables (Fremont) | <input type="checkbox"/> Trauma-Informed Screening and Referral |

Sustainability Plan

Provide an estimate of funds (other state or local funds) that will be made available, if any, to sustain intervention expenses in SFY 2018-19

Family Engagement	Total Funding Amount Estimated:	\$5,330.00 (Core, IV-E Savings))
Permanency Roundtables	Total Funding Amount Estimated:	\$1,570.00 (Core, IV-E Savings))
Kinship Supports	Total Funding Amount Estimated:	\$149,222.00 (Core, IV-E Savings))
Trauma-Informed Screening, Assessment, and Treatment	Total Funding Amount Estimated:	\$100,000.00 (Medicaid/Core)
TOTAL:		\$256,122.00

Management Plan for Waiver Intervention(s) Implementation

Who will provide oversight, coaching, and supervision of the interventions? Will your management team include the data analyst, financial manager, staff members throughout the hierarchy? If a Region, include representation from each county.

Name: <u>Mick Stumph</u>	Title: <u>Family and Adult Services Administrator</u>
Agency: <u>Fremont County DHS</u>	
Phone: <u>719-269-2041</u>	Email: <u>Michael.stumph@state.co.us</u>
Specific Intervention: <u>Kinship Supports, Trauma Informed Screening, Assessment, and Treatment</u>	

Name: <u>Carrie Porter</u>	Title: <u>Permanency and Support Supervisor</u>
Agency: <u>Fremont County DHS</u>	
Phone: <u>719-269-2092</u>	Email: <u>Carrie.porter@state.co.us</u>
Specific Intervention: <u>Kinship Supports, Trauma Informed Screening, Assessment, and Treatment</u>	

Name: <u>Kendyl Yates</u>	Title: <u>Core Coordinator</u>
Agency: <u>Fremont County DHS</u>	
Phone: <u>719-269-2187</u>	Email: <u>Kendyl.yates@state.co.us</u>
Specific Intervention: <u>Trauma Informed Screening, Assessment and Treatment</u>	

Name: <u>Linda Potter</u>	Title: <u>Kinship Support Caseworker</u>
Agency: <u>Fremont County DHS</u>	
Phone: <u>719-269-2106</u>	Email: <u>Linda.potter@state.co.us</u>
Specific Intervention: <u>Kinship Supports</u>	

Name: <u>Dani Jones</u>	Title: <u>Kinship Support Caseworker</u>
Agency: <u>Fremont County DHS</u>	
Phone: <u>719-269-2128</u>	Email: <u>Dani.jones@state.co.us</u>
Specific Intervention: <u>Kinship Supports</u>	

Name: <u>Stacie Kwitek-Russell</u>	Title: <u>Agency Administrator/Interim Director</u>
Agency: <u>Fremont County DHS</u>	
Phone: <u>719-269-2067</u>	Email: <u>Stacie.kwitek@state.co.us</u>
Specific Intervention: <u>Kinship Supports, Trauma Informed Screening, Assessment and Treatment</u>	

Describe the structure of the oversight, coaching, and supervision. If you are a region, which county will be the fiscal agent?

(Frequency of meeting as a group, individual supervision, consultation, peer coaching, intra-county support, etc. If implementing multiple interventions please provide separate plans as necessary.)

Fremont County DHS is the fiscal agent.

Oversight: A IV-E Waiver oversight committee was developed to oversee the implementation of the three interventions during year one. This committee will be changing the members slightly to include those listed above. This group will meet monthly, unless an increased frequency is determined to be needed, to review data, to monitor fidelity of the interventions, expenditures, and review outcomes.

Coaching: We have experienced staff to provide coaching for each regarding Kinship Supports. The Trauma Informed Screening, Assessment and Treatment has its own oversight as a contracted provider.

Supervision: Individual supervision occurs monthly for our experienced workers and more frequently when we have new staff. The entire child welfare unit receives group supervision monthly. Additionally the Kinship workers will meet monthly as a group to receive group supervision with the supervisor. The Trauma Informed Screening, Assessment and Treatment has its own supervision structure as a contracted provider.

Have you identified any barriers or potential barriers in providing the monitoring, oversight, coaching and supervision of the intervention(s)? If you are a region, which county(ies) will provide monitoring, oversight, coaching and supervision?

None noted.

How can CDHS support you in meeting your technical assistance, coaching, and/or training needs?

- **Provide up-to-date data on a regular basis.**
- **Provide training on the kinship intervention to all child welfare staff.**

FAMILY ENGAGEMENT

If you are part of a region, which counties will participate in this intervention? How will staff/goods/services will be shared?

Custer County Only

Are you building on existing practice? Yes No

If yes, describe current model, including target population, and efforts to ensure fidelity. Is there anything unique to your efforts to implement Family Engagement?

We implemented Family Engagement Meetings through the Year 1 IV-E Waiver Demonstration Project. We currently hold FEMs at a greater frequency than the fidelity requires; where the model requires in-home cases to have FEMs every 6 months, we hold them at a minimum of every 90 days. Our practice also frequently includes EPP cases having FEMs every 30-60 days rather than 90 days. For the IV-E Waiver year 5 we are not requesting funding for Fremont County as we will be providing FEMs through our Core Services Program. However, we will continue to provide FEMs to Custer County through the year 5 Waiver. Custer County has been a great partner in wanting to have FEMs completed for their families and have embraced working with Fremont County through this process. They have supported Fremont County's efforts to provide the same model and have supported training of their staff in the model.

Are you prepared for intervention service delivery by 7/1/17? If not, what is your intervention start date?

Yes

Is your staff currently trained in a model, consisting of the core components? If not, what are your plans to train staff in preparation for implementation by 7/1/17?

Yes

Based on your county/region's Trails data, what is the number of families currently being served through Family Engagement? (Regions – specify data for each county)

Custer County has been provided with ten FEMs over the last year. This has been direct services to five families.

Based on your county/region's Trails data, what is the anticipated number of families to be served through Family Engagement with the additional IV-E Waiver funds? (Regions – specify data for each county)

Custer County would estimate serving 8 families this next fiscal year. While Fremont County will not be providing FEMs through the Waiver we would estimate serving 235 families in the next fiscal year.

If you implemented the Family Engagement intervention as part of Title IV-E Waiver Demonstration Project Year 4, what was your progress towards meeting your goals? (such as: did you meet your desired outcomes? What challenges did you experience? How will you practice change and/or improve in Year 5?)

Goals noted for the last year application included:

- **Decrease the Average Daily Population for residential care. Overall our residential care numbers have shown an increase. We did find however, that there were some community issues that arose that may have impacted the increase from 5 to 8. A significant concern has been an increase in substance among adolescents in the community. To combat that, in conjunction with Family Engagement Meetings, we are working on an Intensive Adolescent Out-Patient program to better serve these youth.**
- **Decrease the Average Daily Population for group home care. Our average Group Home Placement has increased by one but would note that both youth in the same group home are long-term care youth.**
- **Continue to increase the rate of kinship foster care, in correlation to the decrease of the use of foster care. This continues to be our greatest area of improvement and we have seen an increase from 35 to 40 kinship homes while placements in foster care have decreased from 42 to 32. Custer County currently has 4 children in foster care placement.**

What are your specific goals and desired outcomes for this upcoming year in implementing Family Engagement in your county/region?

- Fremont County will maintain the FEM Model through Core Services
- Continue to increase the rate of kinship foster care, in correlation to the decrease of the use of foster care.
- Continue to support Custer County with the FEM process and to help facilitate their process into other funding sources in looking towards the Waiver ending.

FAMILY ENGAGEMENT BUDGET

Complete the table below to justify FTE funding: (Cost of FTE to include salary, benefits, mileage, and cellphone.)
 (Examples are written in gray and italicized)

Position Level	Function	Workload	Status	Cost
Caseworker IV	Facilitator	30 meetings per month	Continuation from Years 1, 2, 3, & 4...Fremont County Only Funded through Core Services	\$0
Caseworker IV	Facilitator	30 meetings per month	Continuation from Years 1, 2, 3, & 4...Fremont County Only Funded through Core Services	\$0
Child Welfare Supervisor II	Facilitator	1 meeting per month	Continuation from Years 1, 2, 3, & 4...Custer County Only	4,880.00
"FTE" TOTAL				\$4880

Complete the table below to justify OTHER funding: (E.g., hard goods, services, travel for families)

Goods/Service	Families Served	Cost/Unit	Cost
Transportation funds (gas cards, shuttle tickets)	8	\$50.00	\$200.00
Meeting Supplies	8		\$250.00
"OTHER" TOTAL			\$450.00

Do you have specific infrastructure and/or start up needs that would be a one-time request? **\$0.00**

(Reflected on page 1) **"FTE/OTHER/INFRASTRUCTURE" TOTAL** **\$5330.00**

Do you intend to fund this intervention in the state fiscal year following the end of the demonstration (SFY 2018-19)?
 Yes No

If no, please enter "\$0" in the "Family Engagement" line of the "Sustainability Plan" section on page 1 of this application. If yes, please describe what funding stream you intend to use (e.g.- Child Welfare block grant, Core Services, local funds,...) and for what amount. Please enter the total amount of anticipated funding in the "Family Engagement" line of the "Sustainability Plan" section on page 1 of this application.

Additional Comments, Concerns, Justifications:

PERMANENCY ROUNDTABLES

If you are part of a region, which counties will participate in this intervention? How will staff/goods/services will be shared?

Custer County Only

Are you building on existing practice? Yes No

If yes, describe current model, including target population, and efforts to ensure fidelity. Is there anything unique to your efforts to implement Permanency Roundtables?

Yes, Fremont County implemented Permanency Roundtables during Year 1 Implementation. We focused initial implementation on all youth over the age of 16 and in care over 12 months, but have expanded it to include any child/youth out of the home for more than 6 months or those children whom we do not have a good permanency option for immediately. Our first PRT for Custer County was held on 5/14/15. In year 5 of the Waiver PRTs for Fremont County will be funded through Core Services. We will continue to utilize the Waiver in year 5 to provide PRTs for Custer County.

Are you prepared for intervention service delivery by 7/1/17? If not, what is your intervention start date?

Yes

As a part of the implementation of the Permanency Roundtable (PRT) practice, the following training schedule is required: Achieving Permanency through Roundtables, Permanency Roundtables Skills and Youth Centered Permanency Roundtables. IV-E waiver funding cannot be utilized for training expenses (though the state offers alternative provisions for PRT trainings). Is your staff currently trained in the PRT model? If not, what are your plans to train staff in preparation for implementation by 7/1/17?

Our Master Practitioner and current staff are trained in the model. Our Master Practitioner received the training necessary to train our staff and if a new Master Practitioner is added, they will receive all training necessary.

Based on your county/region's Trails data, what is the number of youth currently being served through Permanency Roundtables? (Regions – specify data for each county)

Custer County is currently serving 2 active children and Fremont County is serving 64.

Based on your county/region's Trails data, what is the anticipated number of youth to be served through Permanency Roundtables with the additional IV-E Waiver funds? (Regions – specify data for each county)

As noted earlier PRTs for Fremont County will be served through Core Funding for the year 5 Waiver, however Custer County will utilize IV-E Waiver funds for the year 5 Waiver and estimate 3 youth will be served. However, we would note that Fremont will utilize some of the Goods/Services Budget to supplement other dollars for youth incentives.

If you implemented the Permanency Roundtables intervention as part of Title IV-E Waiver Demonstration Project Year 4, what was your progress towards meeting your goals? (such as: did you meet your desired outcomes? What challenges did you experience? How will you practice change and/or improve in Year 5?)

Goals noted last year included:

- 1. Decrease Termination rates by increasing returns home or Permanent Legal Guardianships. Overall the Department has an increased success rate in finding permanency through alternatives with family members. We have had a successful RGAP case, several custody arrangements and multiple adoptions by family members. Further we feel that through PRTs we have found permanent options for several children that were in long-term care on the adoption caseload and or awaiting adoption. We have significantly dropped the adoption caseload, almost in half.**
- 2. Increase task completions by original timeframes. We have had some challenges with this goal and have implemented an immediate feedback system during PRTs in which the Administrator in the room is allowed to question or challenge Department team members for not completing their assignments. Will continue this goal. Challenges continue to be in the arena of specific GALs who do not support or encourage the process and challenge the process in meeting their personal expectations that children get more benefits and supports out of emancipation than any other legal permanence.**

What are your specific goals and desired outcomes for this upcoming year in implementing Permanency Roundtables in

your county/region?

1. **Decrease Termination rates by increasing returns home or Permanent Legal Guardianships.**
2. **Increase task completions by original timeframes.**

PERMANENCY ROUNDTABLES BUDGET

Complete the table below to justify FTE funding: (Cost of FTE to include salary, benefits, mileage, and cellphone.)

(Examples are written in gray and italicized)

Position Level	Function	Workload	Status	Cost
Caseworker IV	Master Practitioner	15 youth monthly 109 annually	Continuation of Years 1, 2, 3, and 4 (Fremont County only)	\$0
Child Welfare Supervisor II	Master Practitioner	3 annually/1 bi- monthly	Continuation of Years 1, 2, 3, and 4 (Custer County only)	\$1220.00
"FTE" TOTAL				\$1220.00

Complete the table below to justify OTHER funding: (E.g., hard goods, services, travel for families)

Goods/Service	Youth Served	Cost/Unit	Cost
Gift Cards	3 (Custer) up to 37 youth (Fremont)	\$10.00	\$200.00
Travel for kin to attend	3	\$100.00	\$150.00
"OTHER" TOTAL			\$350.00

Do you have specific infrastructure and/or start up needs that would be a one-time request? **\$0**

(Reflected on page 1) **"FTE/OTHER/INFRASTRUCTURE" TOTAL** **\$1570.00**

Do you intend to fund this intervention in the state fiscal year following the end of the demonstration (SFY 2018-19)?

Yes No

If no, please enter "\$0" in the "Permanency Roundtables" line of the "Sustainability Plan" section on page 1 of this application. If yes, please describe what funding stream you intend to use (e.g.- Child Welfare block grant, Core Services, local funds,...) and for what amount. Please enter the total amount of anticipated funding in the "Permanency Roundtables" line of the "Sustainability Plan" section on page 1 of this application.

Additional Comments, Concerns, Justifications:

KINSHIP SUPPORTS

If you are part of a region, which counties will participate in this intervention? How will staff/goods/services will be shared?

This intervention is for Fremont County only.

Are you building on existing practice? Yes No

If yes, describe current model, including target population, and efforts to ensure fidelity. Is there anything unique to your efforts to implement Kinship Supports?

Through year one, we hired a kinship support caseworker. Due to growth of kinship placements we added a second kinship support worker in year four. Our target population continues to be certified and non-certified kin. The kinship support workers meet with all kin that have had the placement of a kinship child; voluntary placement or legal. The kinship support workers complete the initial needs assessment with the family, develops with them a plan to meet their needs, establishes a schedule for ongoing contact, remains available to them, completes ongoing needs assessments, assists them in finding community and agency resources, including helping them apply for child only TANF, WIC, Food Assistance and Daycare, attends FEMs and court with them upon request, manages the kinship support funding requests and coordinates services with the intake/ongoing caseworker.

Are you prepared for intervention service delivery by 7/1/17? If not, what is your intervention start date?

Yes, both kinship workers are in place and established in practice.

Is your staff currently trained in a model, consisting of the core components? If not, what are your plans to train staff in preparation for implementation by 7/1/17?

The kinship support caseworkers have participated in all kinship teleconferences and meetings and are working within the guidelines provided by the checklist. We would however, appreciate formal training around this topic.

Based on your county/region's Trails data, what is the number of kinship families currently being served through Kinship Supports? (Regions – specify data for each county)

Currently Fremont County DHS projects that in the IV-E waiver year will have served 91 kinship families.

Based on your county/region's Trails data, what is the anticipated number of kinship families to be served through Kinship Supports with the additional IV-E Waiver funds? (Regions – specify data for each county)

Based on current estimate and growth of kinship placements over the last four years we would estimate that we will serve 100 kinship families in IV-E Waiver year 2017-2018

If you implemented the Kinship Supports intervention as part of Title IV-E Waiver Demonstration Project Year 4, what was your progress towards meeting your goals? (such as: did you meet your desired outcomes? What challenges did you experience? How will you practice change and/or improve in Year 5?)

The utilization of kinship placements has continued to grow; currently there are more children in kinship placements than in stranger foster care. We're very proud of the progress made in this area. Primary challenges in this area are that kinship placements, due to the emergency of the placement, can be more time intensive and frequently need more support due to dynamics that go along with kinship placement, such as changed relationships, navigating the system, and the need for additional up-front hard goods such as beds and/or clothing.

In year five one goal would be to make sure that at the time of placement we are assessing the kinship family for and/or addressing potential permanency of the placement. A second goal would be to explore putting in additional supports and/or services to address the sustainability of the placement.

What are your specific goals and desired outcomes in implementing Kinship Supports in your county/region?

- Continue to increase kinship placements, proportionate to the decrease of foster placements.
- Increase the percentage of first placements being with kin.
- To increase the sustainability of hard goods when the waiver ends.

KINSHIP SUPPORTS BUDGET

Complete the table below to justify FTE funding: (Cost of FTE to include salary, benefits, mileage, and cellphone.)

(Examples are written in gray and italicized)

Position Level	Function	Workload	Status	Cost
Caseworker III	Kinship Support/Benefits Navigator	50 Families	Expansion of years 1, 2, 3 and 4	\$49,000.00
Caseworker III	Kinship Support/Benefits Navigator	50 Families	Expansion of year 4	\$49,000.00
TOTAL				\$98,000.00

Complete the table below to justify OTHER funding: (E.g., hard goods, services, travel for families)

Goods/Service	Families Served	Cost/Unit	Cost
Fam. Supports-Food/Clothing/Supplies	50	\$300	\$15,000
Fam. Supports-Furniture/Appliances	20	\$440	\$8,800
Fam. Supports-Rent/Utilities	20	\$472.35	\$9,447
Fam. Supports-Safety Items	50	\$100	\$5,000
Fingerprints for Non-Certified Kin	25 (2 adults)=50	\$39.50	\$1,975
Child Care	10	\$200	\$2,000
Transportation-Out of State Travel	10	\$100	\$1,000
Transportation-Fuel	50	\$100	\$5,000
Transportation-Insurance/Repair	5	\$300	\$1,500
Family/Youth Activities-youth sports, school activities, band instruments	15	\$100	\$1,500
"OTHER" TOTAL			\$51,222.00

Do you have specific infrastructure and/or start up needs that would be a one-time request? \$

(Reflected on page 1) **"FTE/OTHER/INFRASTRUCTURE" TOTAL** **\$149,222.00**

Do you intend to fund this intervention in the state fiscal year following the end of the demonstration (SFY 2018-19)?

Yes No

If no, please enter "\$0" in the "Kinship Supports" line of the "Sustainability Plan" section on page 1 of this application. If yes, please describe what funding stream you intend to use (e.g.- Child Welfare block grant, Core Services, local funds,...) and for what amount. Please enter the total amount of anticipated funding in the "Kinship Supports" line of the "Sustainability Plan" section on page 1 of this application.

Additional Comments, Concerns, Justifications:

Our utilization of kinship placements is continually increasing, both legal placement and voluntary. This is an area of practice that we focus on and are very proud of our improvements.

If you are part of a region, which counties will participate in this intervention? How will staff/goods/services will be shared?

This intervention is for Fremont County only.

Please identify your collaborating local mental health provider(s) and describe what efforts you are making to ensure ongoing collaboration with them? Is your local mental health provider(s) willing to participate in the evaluation processes of the IV-E Waiver?

Fremont County has had ongoing discussions and collaborative efforts with our local community mental health agency. However, we have real struggles with them being able to provide the quality or quantity of services we need for our population. The standard of service from the local mental health provider is approximately one hour of therapy per month. Due this ongoing concern the County has utilized a private provider who has specialized their services to meet the need for ongoing Trauma specific therapy.

The private provider has gone above and beyond in meeting our children’s needs and further contracts through Core Services to provide Trauma informed specific services to adults involved with the Department. The provider has employed an integrated model of service provision as well as collaborating with the local drug and alcohol provider, the local mental health provider, victim’s advocate and caseworkers. The provider has been eager to support our families and has also participated in the Office of Behavioral Health survey process.

Methodologies noted by the provider for assessment include: Child PTSD Symptom Scale (PCSS), and the PCLC for adults. Treatment includes: individual psychotherapy, TF-CBT, Complementary or adjunctive supports, Bruce Perry and CPT.

The private provider noted above has worked primarily with children over the age of six and adults. For children zero to five years of age our local Early Childhood Mental Health program has also implemented a support process for children that are identified through screening to have experienced Trauma. The Early Childhood program then provides supports for that youth with a trauma informed approach in whatever services are being provided either therapeutic or case management. The Early Childhood program has taken on this task as a call to provide better informed services and has not requested or required additional funding and support in order to do so.

Describe the prioritization of your target population with consideration of your local mental health provider’s capacity to assess and treat.

Fremont County chose to begin screening on children involved in Dependency and Neglect actions and the results have been so positive that caseworkers are now screening other youth involved with child welfare to include voluntary cases and/or delinquency cases. The screening process utilizes the Southwest Michigan Children’s Trauma Screen. If a child age 6-18 has a score of 6 or greater they are referred for further assessment. If there are other indicators or concerns not reflected on the screen a caseworker may override the screen and request further assessment. For children five years of age or younger all screens no matter the score are forwarded to the Early Childhood program.

The Provider noted above has expanded their practice to include other supports and services adding a second clinician to support the growing need. Further the provider is working on Medicaid certification so that the service can be maintained after the end of the waiver.

*Are you building on existing practice? Yes No
If yes, describe current model, including target population, and efforts to ensure fidelity. Is there anything unique to your efforts to implement Trauma-Informed Screening, Assessment and Treatment?*

We are going into the second year of providing Trauma Screening, Assessment and Treatment. As noted above our current targeted population has been for all children in which a Dependency and Neglect has been filed. The breakdown of further assessment occurs with age identification of six to eighteen years of age with a score of six or more on the screening or override for further assessment, and as noted earlier all screenings for children five or younger or submitted the Early Childhood Mental Health team.

Are you prepared for intervention service delivery by 7/1/17? If not, what is your intervention start date?

As noted above we are going into the second year of providing Trauma Screening, Assessment and Treatment and it has been very successful. Services and supports through our contracted provider are in place.

Is your staff currently trained in using the screening tool? If not, what are your plans to train staff in preparation for implementation by 7/1/17?

Yes, and as noted above, caseworkers are very invested in the process and invested in the treatment as well as pleased with the outcomes.

Implementation and evaluation of the IV-E Waiver requires that participating mental health providers include in their client assessment:

- *The Trauma History section of the Mental Health Referral Tool in the National Child Traumatic Stress Network/Chadwick Trauma-Informed Systems Project Child Welfare Trauma Training Toolkit, and*
- *one of the following three (age-dependent) tools:*
 - *Trauma Symptom Checklist for Young Children,*
 - *The Child Post Traumatic Stress Checklist, or*
 - *PTSD Checklist.*

Is your local mental health provider prepared to administer these assessments? What additional assessment tool(s) will be utilized?

As noted above the provider is utilizing the Child Post Traumatic Stress Checklist.

Implementation and evaluation of the IV-E Waiver requires that participating mental health providers include at least one of the following treatment modalities:

- *Child Parent Psychotherapy (0-5)*
- *Trauma Focused Parent Child Interaction Therapy (2-7)*
- *Trauma Focused Cognitive Behavioral Therapy (3-18)*
- *Alternatives for Families Cognitive Behavioral Therapy*
- *Adolescent Dialectical Behavioral Therapy*
- *Skilled therapist trained in sensory integration and the Neurosequential Model of Therapeutics*
- *Complementary supports addressing goals from assessment*

Is your local mental health provider prepared to utilize at least one of these treatment modalities? What additional treatment modalities may be utilized?

As noted above the provider is utilizing Individual psychotherapy, Trauma Focused Cognitive Behavioral Therapy, and additionally Adolescent Dialectical Behavioral Therapy.

Based on your county/region's Trails data, what is the anticipated number of families to be served through Trauma-Informed Screening? (Regions – specify data for each county)

80 families

Are your local mental health providers prepared to implement Trauma-Informed Assessment and Treatment? What is their capacity to assess and treat?

Yes, the provider is trained and has been providing services to children as needed. Currently the provider is seeing 25 children. This is not counting family work as well as Trauma Specific Therapy through Core Services for adults.

What are your specific goals and desired outcomes in implementing Trauma-Informed Screening, Assessment and Treatment in your county/region? Do you anticipate needing any technical assistance in the implementation of this intervention?

- **Decrease placement disruption**
- **Decrease congregate care placements**

TRAUMA-INFORMED SCREENING, ASSESSMENT, TREATMENT BUDGET

Complete the table below to justify FTE funding: (Cost of FTE to include salary, benefits, mileage, and cellphone.)

(Examples are written in gray and italicized)

Position Level	Function	Workload	Cost
Program Coordinator	Coordinate and track referrals, treatment and outcomes	All services referred for this program will be paid through Core.	\$0.00
TOTAL			\$0.00

Complete the table below to justify OTHER funding: (E.g., hard goods, services, travel for families)

Goods/Service	Families Served	Cost/Unit	Cost
Trauma Assessment and Treatment Provider	50 children	\$2000.00 per child estimated	\$100,000.00
"OTHER" TOTAL			\$100,000.00

Do you have specific infrastructure and/or start up needs that would be a one-time request? \$

(Reflected on page 1) **"FTE/OTHER/INFRASTRUCTURE" TOTAL** **\$118,500.00**

Do you intend to fund this intervention in the state fiscal year following the end of the demonstration (SFY 2018-19)?

Yes No

If no, please enter "\$0" in the "Trauma-Informed Screening, Assessment, and Treatment" line of the "Sustainability Plan" section on page 1 of this application. If yes, please describe what funding stream you intend to use (e.g.- Child Welfare block grant, Core Services, local funds, etc...) and for what amount. Please enter the total amount of anticipated funding in the "Trauma-Informed Screening, Assessment, and Treatment" line of the "Sustainability Plan" section on page 1 of this application.

Additional Comments, Concerns, Justifications:

The treatment provider is working on Medicaid certification so that this service can be provided after the waiver. The service referral system through the Coordinator position would be put into Core Services.

DATA and EVALUATION

Describe your county/region's expertise and capacity for data management.

Fremont County DHS does not have data or IT staff. We have been lucky enough to receive a lot of data through other projects such as Differential Response and Colorado Practice Model, and have used such data to continuously improve our practice. We do not, however, have the ability to pull our own data, other than TRAILS, ROM, and Crystal Reports. Therefore any ongoing data that the state can provide is GREATLY appreciated.

Will your county/region complete evaluation activities independent of the statewide evaluation of the Title IV-E Waiver and identified interventions?

We plan to meet monthly to review the data that we have access to and would welcome any support in this area that we can receive. We complete surveys with families following closure of kinship assessments and collect basic data in spreadsheets for number and tracking purposes. Our Trauma Treatment Provider utilizes the Office of Behavioral Health survey process. The Department also maintains tracking of scores for Trauma screens and subsequent referrals in spreadsheets.

Additional Comments, Concerns, Justifications:

BARRIERS

Do you foresee barriers internally in implementing the Title IV-E Waiver? In engaging community partners? In participating in the statewide evaluation? In collaborating with CDHS to ensure the success of Title IV-E Waiver?

Ongoing data collection is a challenge.

How may CDHS assist with addressing any of these barriers?

Providing data as available.

Additional Comments, Concerns, Justifications:

DIRECTOR'S SIGNATURE

Please accept this signature as verification of the information in the application as correct and support of my county's participation in the Title IV-E Waiver Demonstration Project, SFY 2017-18. Regional Models must include each county's Director's signature.

Steven Clifton, Director, Fremont County DHS
Printed Name


Signature

6-26-17
Date

Laura Lockhart, Director, Custer County DHS
Printed Name

Signature

Date

DATA and EVALUATION

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Steven Clifton, Director, Fremont County DHS
Printed Name

Signature

Date

Laura Lockhart, Director, Custer County DHS
Printed Name


Signature

6-22-17
Date