

2008-09 County MFIP/CCSA Biennial Service Agreement

Minnesota Family Investment Program and Children and Community Services Act

January 1, 2008 to December 31, 2009



Minnesota Department of **Human Services**

Type of Service Agreement

	Individual county submitting a:
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	Multi-county partnership submitting a:
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<input checked="" type="checkbox"/>	Combined MFIP/CCSA Agreement
<input type="checkbox"/>	MFIP-only agreement
<input type="checkbox"/>	CCSA-only agreement

<input type="checkbox"/>	Combined MFIP/CCSA Agreement
<input type="checkbox"/>	MFIP-only agreement
<input type="checkbox"/>	CCSA-only agreement

County Name:

Waseca County

County Names:

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County MFIP/CCSA Biennial Service Agreement

January 1, 2008 to December 31, 2009

CONTACT

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Date:	September 12, 2007

* * *

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. Based on your response on the needs of MFIP participants in the 2006-07 service agreement (Section I, Part A, Question 1), for which stated needs is your county making the most progress?

Job skills development is a primary area that we are making the most progress. Our employment services provider has taken over providing a skills development class and we have seen great improvement in attendance and active participation by the MFIP participants. In addition we see improvement in accessing of social services, i.e. mental health services, as our participants work with our MFIP social worker.

2. Describe the more persistent needs of participants that your county continues to address with MFIP funds and what kind of support may be needed to help resolve these needs/issues.

Transportation continues to be a persistent need as we are an area without public transportation and reliable transportation is so essential to obtaining and maintaining employment. Another area we struggle with is job development as our employment opportunities in Waseca County seem to be more limited.

3. For each of the categories listed below, tell us what proportion of the MFIP participant caseload will likely need these services in the 2008-09 biennium. A participant could be included in more than one category.

Needs/Services	Percent of Participants
Education	30%
Transportation	100%
Child Care	95%
Employment	100%
Housing	50%
Mental Health	40%
Chemical/Substance	15%
Support Services	100%
Language	6%

4. If you have additional comments regarding the needs of MFIP participants, use the space provided below.

- Transportation is always a great need so money and time is spent on addressing transportation needs.
- We are disappointed that we did not have the opportunity for the broad usage of supported work funds as other counties did that did not achieve work participation rates for MFIP. It would have provided us an excellent opportunity to partner with our local employers and increase the options for our MFIP population.

5. Do the needs of the Diversionary Work Program (DWP) participants differ from your

MFIP participants? If yes, briefly describe their most important needs below. If no, enter “same” in the response box.

We don't see great differences but the primary areas we do see are: 1) DWP participants have a better work history; and 2) the DWP participants do not have the increased level of health issues as our MFIP participants.

B. Strengths and Resources to Address MFIP Needs

1. In the previous service agreement, counties described plans and efforts to maximize strengths and resources available to the county to address needs of MFIP/DWP families during CYs 2006-7 (Section 1, Part B). Provide a brief evaluation on how well these efforts are working and what your county is planning to do differently in the 2008-09 biennium. Include any new strengths and resources available to the county in 2008-09.

- Our MFIP social worker embedded in the children’s unit of our social services unit continues to be a positive resource to our clientele with barriers to employment. This is a program we plan to continue.
- We have strengthened our working relationship with our employment services provider and view them as being able to fill many of the roles we need for continued improvement and development of job opportunities and follow-up for our clientele.
- The issue of job coaching has not really developed and we are unsure of where we will go with this over the next two years. We may simply plan to work more closely with our employment services provider to address all of the options that might best work for various clientele and depend on their expertise as they bring many years of experience in working with the MFIP clientele.
- We continue to work with our employment service provider to emphasize the need to develop relationships with employers to secure increased options for job opportunities.

2. Family Stabilization Services Addendum

The 2007 legislature requires counties and tribes to describe how they will provide services for those families who qualify for Family Stabilization Services (FSS) under MFIP and DWP effective February 1, 2008. In order to satisfy this requirement, an addendum to the Service Agreement must be submitted to the department by December 31, 2007. The department will issue further instructions by November 1, 2007 on how to complete the addendum.

3. Employment Services Provider Information

List the name, address and phone number of current employment services (ES) providers in your county. *(Insert more rows if there are more than two providers.)*

Name	Address	Phone Number
MVAC	105 3 rd Ave. NE; Waseca, MN 56093	507-835-8240

C. MFIP Outcomes and Measures

Under the MFIP Consolidated Fund and the overall outcome for MFIP—*Economic Stability for Poor Families*—county performance will be based on the following

indicators.

Three-year MFIP Self-support Index

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

In the 2006-07 Biennial Service Agreement, your county identified strategies to ensure that the county’s three-year Self-support Index (SSI) is either within or above the county’s range of expected performance during CYs 2006-07. Review the statistics provided below for your county’s performance on the SSI for the four quarters beginning April 2006 and ending March 2007.

- [Quarterly and Annualized Performance on the SSI](#)

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

If your county is “within” or “above” the county’s expected range of performance on the annualized Self-support Index, provide a concise analysis on your county’s performance during this one-year period including an evaluation of how well the strategies stated in your 2006-07 Service Agreement (section I, part C, Indicator 1) are working to improve your county’s current performance on this measure. Include any new strategies your county will implement in the 2008-09 biennium. In addition, enter 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 the two 12-month periods noted in the response box.

Analysis/evaluation/new strategies:		
N/A		
From the Apr. 06-Mar. 07 annualized data, enter where your county’s performance is (above, within or below your expected range) and the percentage performance:		%
Enter annualized targets you hope to achieve for the periods:	Apr. 07 – Mar. 08	%
	Apr. 08 – Mar. 09	%

2. Counties “below” the expected range of performance

If your county is “below” the expected range of performance on the annualized three-year SSI, your county will not receive the 2.5 percent performance bonus unless the county submits a Performance Improvement Plan (PIP) and it 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 Performance Improvement Plan.

Please see attached email document for our PIP to receive the 2.5% performance bonus.

- [Performance Improvement Plan for the SSI](#)

MFIP Work Participation Rate

Measure: Percent of non-exempt MFIP adults who meet the TANF work participation requirements.

In the 2006-07 Biennial Service Agreement, counties identified strategies to improve their performance on the MFIP Work Participation Rate (WPR). Review the statistics provided below for your county’s performance on the WPR Rate for the four quarters beginning April 2006 and ending March 2007.

- [Quarterly and Annualized Performance on the WPR](#)

1. Counties with a Work Participation Rate of 50 percent or more or a five percent increase from the previous year

If your county meets or exceeds 50 percent on the annualized MFIP Work Participation Rate or had a five percentage point increase from the year before (Apr. 05 – Mar. 06), provide a concise analysis of your county’s performance during Apr. 06 – Mar. 07 and include an evaluation of how well the strategies stated in your county’s 2006-07 Service Agreement (section I, part C, Indicator 2) are working to improve your county’s current performance. Include any new strategies your county will implement in the 2008-09 biennium, and at the bottom of the response box enter anticipated targets your county will work to achieve in the next two years.

Analysis/evaluation/new strategies: Our identified strategy changed over the course of the last year and we now have a stronger working relationship with our employment services provider. They have strengthened their job skills development program as well as working on improving job development.		
Current performance level		61%
Enter annualized targets you hope to achieve for the periods:	Apr. 07 – Mar. 08	61%*
	Apr. 08 – Mar. 09	61%

*We are hopeful that we can remain at our current level but we want to identify this level with a caution: the 50% level is the goal that has to be achieved during the year. We obviously have been above this for the past 2 years however we are very cautious as we enter into the upcoming year due to the many changes. Therefore we will work toward maintaining the 61% level but do not want to be considered as “failing” if we fall to anything between 50% and 61%.

2. Counties with a Work Participation Rate below 50 percent that did not achieve a five percentage point improvement from the previous year:

If your county performance is below 50 percent on the annualized MFIP Work Participation Rate for Apr. 06 – Mar. 07 and did not achieve a five percentage point increase from the previous year (Apr. 05 – Mar. 06), your county will not receive the 2.5 percent performance bonus unless your county submits a Performance Improvement Plan (PIP) and it 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 Performance Improvement Plan.

N/A for Waseca County

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

Promoting Equity in MFIP Outcomes

Performance gaps of subgroups over the four alternate quarters covering the period Jul. 2005 to Mar. 2007 (Jul.-Sep. 2005, Jan.-Mar. 2006, Jul.-Sep. 2006 and Jan. - Mar. 2007) are provided below. Performance gaps were calculated when a subgroup within a county had at least 30 cases. Click on the link below to review a summary of subgroup performance data for SSI and WPR within your county (note: there are two sheets in the excel file):

- [Two-Year Performance Trend of Racial/Ethnic and Immigrant Groups](#)

1. Counties needing to submit an action plan for the 2008-09 biennium

If your county has one or more subgroups with a gap of at least five percentage points from the county rate in both the last quarter (Jan.-Mar. 2007) and the average of the four quarters, the county must submit an action plan addressing the questions below. If your county has already submitted an action plan in the 2006-07 service agreement, skip this question and move to question 2. *(One response box is provided below. Copy and paste if there are more than one subgroup).*

N/A for Waseca County

Name of subgroup:	
Percentage gap from county's rate for the Jan.-Mar. 2007 qtr. (e.g. -15.3%):	%
Anticipated percentage gap you hope to achieve by the end of 2009 (e.g. -10%):	%

- i) What efforts has your county taken to date to acknowledge and address these outcome gaps?

- ii) What community-based partners has your county engaged with to address these gaps, and to what extent have these efforts been successful?

- iii) What is your county's plan to reduce these gaps in the next biennium?

2. Counties who already submitted an action plan for the 2006-07 biennium

If your county already submitted an action plan for the 2006-07 biennium, provide a concise response to the following questions:

Since the submission of your action plan, briefly summarize:

- Which activities were conducted by your county;
- Which partners were engaged;
- What progress has been made to reduce these gaps; and
- What activities are being planned for the 2008-09 biennium.

We did do some work with a new partner, MRCI, but in evaluation felt that we were

not seeing the results we had anticipated. Therefore, we are working more cooperatively with our ES provider and have engaged in a much stronger working relationship with them. In particular we recognize the value of the Job Skills class that ES is providing and it is our intent to continue with this as a focal point of our activities in '08-'09.

3. Counties not required to submit an action plan

Minnesota is becoming an increasingly diverse state. If your county does not have a racial/ethnic or immigrant group with 30 or more cases, or a gap of five percentage points or more, provide a brief summary of your county's approaches and practices as you work to address the diverse MFIP populations within your county during the 2008-09 biennium.

Waseca County continues to have less diversity than many other areas in MN. However, we do have a Spanish speaking staff member working in the Income Maintenance Unit who works with the MFIP population. In addition we assure that staff receives training in cultural diversity to work toward continuous sensitivity to the many issues that they need to be sensitive to when working with a diverse population, including an understanding of the culture of poverty.

Section II: Children and Community Services Act (CCSA)

A. Statement of Needs

1. In the CYs 2006-07 Biennial Service Agreements, counties identified the most important social services issues/needs of children who experience dependency, abuse, neglect, poverty, disability, chronic health conditions or other factors in the following four program areas. For each of the four program areas below, answer the following questions: Will these needs change for the 2008-09 biennium? What are the long-term needs of children your county continues to wrestle with?

Children's Mental Health:

- We continue to see more children with complex diagnoses and multiple needs.
- In addition the need for more child psychiatrists to serve and treat children continues to be a priority need for our area.
- Transition is a difficult time for children with serious mental health disorders. They do not have the skills to be prepared for adulthood and many have not graduated by the time they are turning 18 or even 19. this is an area we see a need for addressing in the next biennium.
- Funding for services continues to be an issue if a child is not on MA because for many families private insurance does not cover skills services or else co-pays are so high that families have a difficult time paying them.
- Education for schools is still an issue in terms of how do we work with the schools to understand the behavioral issues that children with SED have and how they can best be served in the school setting to be able to complete their education.
- We have found more resources meeting the needs of children with RAD so this is an area we do not need to identify as a priority as we enter the upcoming biennium. However, there is a continued need for community understanding of the needs and difficulties children with RAD present.
- We do have a parent support group that has been started in our community for parents of children with behavioral issues. This has just been started within the current year and we believe it is well received in the community and appears to be benefiting the families participating.
- We are part of a children's mental health initiative that is working to develop a continuum of care in our region based on the adult mental health initiative model. We see this as a real opportunity to improve upon the continuum of care for children in need of mental health services.

Child Safety:

- The primary issue we see in our community is chronic neglect of children in their homes. This is a very frustrating area as we see little change and yet the situations are usually not of such severity as to require child removal and permanency planning but we are concerned about what motivates parents to meet the needs of their children both in terms of their physical care as well as

their emotional development. We are going to have funding to expand our family life skills program and will be working more closely with the public health “healthy start” program so we will be coordinating resources and services. It is our hope that the utilization of this preventative model in combination with expansion of our program will assist in securing change in this area. Our primary concern is the emotional impact on children of neglect.

- We are bringing our PSOP approach in house with the anticipated outcome that we will be able to reach more families than we have been reaching through having the program centered in a non-profit organization. This decision was made after much evaluation of the program by the supervisors of our local 3 counties (Waseca, Dodge, and Steele) and we do hope for an improved outcome as we coordinate the provision of these services more closely with the rest of our children’s services unit.
- We continue to have concerns about how best to work with families where we are dealing with parents who suffer from SPMI. This area is a constant challenge and we engage a variety of service providers (Adult mental health case managers, life skills workers, and respite services) and all work toward the goal of keeping children safe in their homes by providing a consistent coordinated approach to working with the family.
- Growth and development of the utilization of Family Group Decision Making (FGDM). This service has been a major benefit to addressing the issues that present themselves in families and give the power to the family for decision making. This is a service that we will continue to utilize to effectively reach decision making with the family at the center of the planning.

Child Permanency:

- An area we continue to struggle with is the question of whether we should pursue transfer of custody vs. TPR due to the reality that we have experienced some disruptions with transfer of custody. The decision as to which is the best way to go is a question we continue to ask with each situation and we are constantly analyzing the decisions we have made.
- We are serving many families who have adopted special needs children and are recognizing the importance of families being prepared to parent their children. This continues to be an area we are sensitive to and cognizant of as we pursue adoptive placements for children we have responsibility for.
- A concern we have is for the facilities we work with when children are placed in residential treatment. There needs to be more education with facility staff as to their role when we are working to address behaviors/issues in order for children to be able to move to permanency. This is an issue that we continue to struggle with as to how to work with the facilities to respect their roles and yet have them respect our role in working with them and the child toward permanence for the child/children.
- FGDM: we have been using this service as a tool in reaching permanency decisions and see this as a valuable tool to “give the power” to the family, when appropriate, to work together as a team to reach the best permanent placement decision for children. We want to continue to utilize this tool as a effective methodology for decision making that again keeps the family, when appropriate, at the center of the planning.

Child Well-being:

- We continue to address the issues of dual diagnosis adults who have children to work toward the healthy emotional development of their children while they continue to reside in their parental home. These families continue to be one of the biggest challenges we face in maintaining children in their family homes and assuring that their needs are being met consistently and in a healthy manner.
- Funding is again an issue. We strive to provide an array of services to assist families in maintaining and/or improving the well being of their children but the funding issue continues to be a question especially when we are addressing children with serious needs vs. can we provide services from a preventative perspective, i.e. whose needs takes priority when funding for services is limited.
- Dental care: when is this issue going to be addressed on a statewide basis? This issue seriously affects the overall well being of children and yet it is an issue that remains an enigma.
- Transportation continues to be a concern for getting children to medical, counseling and social support activities. If we are going to meet the needs of children to improve their well-being we must be able to have transportation issues resolved. We are exploring new opportunities for addressing transportation needs as we enter '08.
- PSOP: this is an opportunity to meet children and family needs before the need becomes more serious. Please see this addressed above.
- Custody disputes continue to be an issue that “eats up” a lot of social worker, particularly intake time. Our concern in this area is more from the perspective of how this issue can be addressed to work with parents to focus on the needs of their children – but first they need to recognize that the needs of the children need to be foremost; not their dispute with their former spouse/partner.
- Administrative reviews: We have established a formalized process for administrative reviews for cases that do not need to be reviewed in court or that need an administrative review in between court hearings. We are utilizing a team in conjunction with our Pre-placement screening team process that meets on a regular basis and assures us of always having a 3rd party team member that is not directly connected to the case. This process is working well and the families that have been involved in the utilization of the admin. reviews do indicate that the process is working well from their perspective too.

2. In the 2006-07 service agreement, you identified key issues your county was planning to address in CYs 2006-07 for adults with developmental disabilities and other vulnerable populations in your county. For what issues is your county making the most progress and what priorities of needs will you be addressing in the 2008-09 biennium?

- We are now involved in 2 homelessness prevention projects that are assisting us in meeting the needs of people with housing issue so that is a major change and accomplishment since the '06-'07 plan was written.
- We are holding regular meetings with school people to work jointly on the process of transitioning. Our adult/DD supervisor has completed a brochure on DD services that is a resource we are now able to share to assist families in understanding what is available for people/children with DD.

- Transportation services continue to be a challenge and we continue to seek out options to address our transportation needs.
- Priorities over the next two years include:
 - ❖ assessing the ongoing case management needs in our Adult/DD unit. We currently have two workers on staff that provide the services in this area and then have arrangements for contracted case management as well. We need to be assessing this and determine how we can best serve people's needs as this area continues to grow.
 - ❖ On going evaluation and assessment of the increases in VA services. We are seeing an increase in reporting and need to monitor this to determine if this will be an ongoing, long range need in our county. There is a strong possibility that it will be due to the aging of the population and the growth in residences and services for an aging population.

3. Minnesota is becoming an increasingly diverse state. What practices and approaches does your county have in place and/or developing to address the social services issues/needs of children from diverse racial/ethnic and immigrant groups in your county?

Diversity in Waseca County is still limited. However, we have an ongoing goal to assure that staff is sensitive to diversity issues and we strive to meet the needs of all citizens of Waseca County regardless of their race, culture, etc. A change for us since completing the last plan is that we have a staff person who is fluent in Spanish which helps us meet and understand the needs of our clientele whose primary language is Spanish. In addition we are attuned to the culture of poverty and assure that our staff is sensitive to the differences that are inherent when families are struggling in poverty to meet their children's needs.

B. Strengths and Resources to Address CCSA Needs

In the previous service agreement, you described your county's plan or efforts to maximize strengths and resources available to the county to address needs of CCSA families during CYs 2006-07 (section 1, part B). Provide a brief evaluation on how well these efforts are working and what your county is planning to do differently in the 2008-09 biennium. Include any new strengths and resources available to your county in 2008-09.

- We continue to have a well trained, competent staff to provide social services to Waseca County residents. Our two supervisors in social services work with the staff to assure ongoing training is obtained in the areas they work within as well as cultural competency training, etc.
- Waseca County does have a day treatment system that runs from elementary through high school, including an off campus program called WCOC (Waseca County Off Campus). We believe that the ability to provide this range of day treatment services is a valuable tool in meeting the needs of children and families in Waseca County who face and deal with mental health concerns for their children. Our Children's mental health case managers continue to be co-supervised by our children's social services supervisor and a clinical supervisor through our mental health center. We believe that this enhances the quality of the services provided by the case managers.
- We continue to have a network with the various other service providers in our

communities as well as the schools.

- Changes for '08-'09:
 - ❖ PSOP – Parent Support Outreach Program: this program as mentioned earlier is being brought “in-house”. We hope for an outcome of increased contacts and case openings in order for our child welfare staff to work more voluntarily with families in a more preventative manner to prevent abuse and/or neglect. Our supervisors from our 3 adjoining counties (Dodge, Steele, and Waseca) had worked together with a non-profit organization up until just recently and closely evaluated the program and concluded that we could do better in making initial contacts and opening cases if we brought the services into each of our agencies. We will now be monitoring and evaluating to determine if we are able to achieve the desired outcome.
 - ❖ Children’s Mental Health Initiative: we are part of a pilot CMH Initiative and look forward to developing this initiative based on the Adult model with the anticipated outcome of providing more flexibility in services and a broader continuum of services across our counties so that children will have access to the same services regardless of which of our counties they are in.
 - ❖ Expansion of Family Life Skills program: We will be working together with Public Health to expand services in both of our agencies to increase resources for families. These resources are the Family Life Skills program that Waseca County Human Services provides and the Healthy Start program that is operated through Public Health. The goals of program expansion revolve around: 1) providing increased access to in-home services to families to prevent out of home placement and/or child abuse and/or neglect; 2) having increased coordination between the two programs to enhance services to families, i.e. if a family no longer qualifies to receive Healthy Start but could benefit from ongoing in-home services that they could be referred to the Family Life Skills program; and 3) improved service delivery.

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 calendar year 2004 data ([Bulletin #05-68-08](#) and [Bulletin #06-68-11](#)). The performance report with CY 2006 data is being prepared for publication.

The link below provides a summary of county performance for the last three years, including an average three-year performance. Review your county performance and respond to the questions that follow:

- [CCSA Performance Data for Calendar Years 2004-06](#)

1. All counties

In the table below, enter your county’s 2006 performance and three-year average (from the data provided) for each of the measures, and the anticipated target you hope to

achieve in CYs 2008 and 2009.

CCSA Measures (abbreviated)	Fed/State Standards	County				
		CY 2006	3-Year Average	Anticipated Targets		
				2008	2009	
1: Children who showed improved mental health						
	within 6 months	6.1 %	5.6%	1.9%	5%	4%
2: Recurrence of child abuse/neglect	within 12 months	7.5 %	5.6%	1.9%	5%	4%
3: Child maltreatment by foster parent		.57 %	1.69%	.56%	.56%	.50%
4: Re-entered placement within 12 months		8.6 %	23.5%	29.17%	15%	10%
5: Reunified within 12 months of placement		76.2 %	96%	97.1%	98%	98%
6: Adopted within 24 months		32.0 %	N/A	50%	100%	100%
7: Transfer of legal custody to a relative within 12 months		64.0 %	100%	88.9%	100%	100%
8: Two or fewer placement settings		86.7 %	93%	95.2%	95%	96%
9: Received a health exam within one year						
10: Received mental health screening						

2. Counties not meeting the national/state standard for CY 2006 and for the three-year average

For any measure for which your county is not meeting the national/state standard for both CY 2006 and the county’s three-year average, enter the measure number and briefly discuss strategies your county will continue, change or do differently to ensure your county reaches and exceeds the anticipated targets set for 2008 and 2009. If a Minnesota Child and Family Service Review was recently conducted in your county and your county is currently working under a Program Improvement Plan (PIP) for that measure, reference the PIP, and briefly describe the strategies. If your county would like to see the approaches and strategies of other counties on a particular measure as reported in the 2006-07 service agreement, refer to [bulletin #06-68-11](#) and [click on Link 4 on Page 8](#). (One response box is provided below. Copy and paste as needed).

Measure #: 4
Steps to improve performance: 1) Correctly identifying respite care; 2) use of trial home visits; 3) continued use of Family Group Decision Making. With the use of these strategies it is our intended outcome to improve the re-entry rate into foster care

3. All Counties (optional)

The department continues to encourage the sharing of good practices and approaches that are working well across the state. If your county has identified one or more practices that is leading to 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 led to positive outcomes:

4. CCSA performance by racial/ethnic groups

CCSA 2006 data by racial/ethnic subgroups (using Bureau of Census categories) are provided for measures 4 (re-enter placement within 12 months), 5 (reunified within 12

months of placement) and 8 (two or fewer placement settings).

Counties with two or more racial/ethnic subgroups having 10 or more individuals in a numerator were examined to determine subgroup performance from the average county performance. Access the link below and review the data provided for Measures 4, 5 and 8. (Note: three spreadsheets—one for each measure—are included in this excel document).

- [CCSA Performance Data by Racial/Ethnic Groups for CY 2006](#)

If your county has a racial/ethnic subgroup with a performance rate that is five percentage points or more below the county rate on any measure (shaded cell), briefly described what issues may have led to these differences in outcomes, and steps your county will take to improve the outcome for this group for CYs 2008 and 2009.

N/A

Section III: Integrating Services for Child Welfare and MFIP Families

In the 2006-07 service agreement, the department asked counties if they were looking at integrating services for families who are receiving MFIP and CCSA services. Nearly half (40) of Minnesota counties responded favorably and described various approaches and issues.

In the response box below, briefly discuss: (1) what efforts your county has taken since the last service agreement to assist families that need MFIP and child welfare services, (2) your county's experiences as you worked with these families, (3) strategies to coordinate these services, and (4) strengths and limitations of your county's efforts.

We have had an MFIP social worker on staff that is embedded in the Children's division of the social services unit. This has enabled our county to have coordination among income maintenance services, employment services and social services which obviously is a benefit to the families who are served by the MFIP social worker. Our primary strategies for coordination are to have regular meetings among income maintenance, employment services and the MFIP social worker as well as to have quarterly management team meetings that involve all the areas. The strength of this effort is the coordination, access to social services for children and families, and the availability of social worker services to the MFIP clientele. The primary limitation is that while income maintenance and social services are housed in the same building our ES provider is located in a separate building.

If your county has a racial/ethnic or immigrant group with an inequity in **both** an MFIP and CCSA outcome measures, briefly discuss your county's efforts to coordinate and address these inequities across MFIP and child welfare programs across your county agency.

N/A

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 the development of the service agreement:

<input type="checkbox"/>	Public hearing
<input type="checkbox"/>	Newspapers
<input type="checkbox"/>	Community meetings
<input type="checkbox"/>	Radio announcements
<input checked="" type="checkbox"/>	County Website
<input type="checkbox"/>	Others (specify):

2. Prior to submitting your 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 planning process or the service agreement by selecting one of the following two options:

<input type="checkbox"/>	Public input was received (<i>continue with the questions below</i>)
<input type="checkbox"/>	Did not impact our planning process/service agreement
<input type="checkbox"/>	Did impact our planning process/service agreement, particularly the:
<input type="checkbox"/>	Needs Statement section
<input 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:
<input type="checkbox"/>	No public input was received

Section V: County Budget

In the budget table below, indicate the amount and percentage for each item listed with the specific MFIP or CCSA consolidated fund for calendar years 2008-09. 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.

2008 MFIP	Budgeted Amount	Percent	2008 CCSA	Budgeted Amount	Percent
Employment Services (DWP)	\$38,422	13.8%	Children’s Mental Health	\$163,200	32%
Employment Services (MFIP)	\$182,258	65.4%	Child and Family Services	\$244,800	48%
Emergency Services ¹	\$16,000	5.7%	Adult Services	\$102,000	20%
Administration	\$17,000	6.1%	Other 1:	\$	%
Income Maintenance Administration	\$25,000	9.0%	Other 2:	\$	%
Other 1:	\$	%	Other 3:	\$	%
Other 2:	\$	%	Other 4:	\$	%
2008 MFIP Budget	\$278,680*	100%	2008 CCSA Budget	\$510,00	100%

A portion of 2009 allocations to counties will depend on legislative actions in 2008. Use your county’s 2008 allocation or its anticipated allocation for CY 2009. When 2009 final allocations are published, use the criteria set forth in the instructions bulletin to determine if your county should submit an amended budget page.

2009 MFIP	Budgeted Amount	Percent	2009 CCSA	Budgeted Amount	Percent
Employment Services (DWP)	\$38,422	13.8%	Children’s Mental Health	\$163,200	32%
Employment Services (MFIP)	\$182,258	65.4%	Child and Family Services	\$244,800	48%
Emergency Services ¹	\$16,000	5.7%	Adult Services	\$102,000	20%
Administration	\$17,000	6.1%	Other 1:	\$	%
Income Maintenance Administration	\$25,000	9.0%	Other 2:	\$	%
Other 1:	\$	%	Other 3:	\$	%
Other 2:	\$	%	Other 4:	\$	%
2009 MFIP Budget	\$278,680*	100 %	2009 CCSA Budget	\$510,000	100%

¹ If dollars are budgeted for emergency services, send a copy of the county’s emergency services policy as an email attachment when submitting the 2008-09 MFIP/CCSA Biennial Service Agreement.

*** we are submitting a PIP and if we are approved and receive the funding we will put an additional \$7,006 into MFIP ES including administration.**

Administrative Cap Waiver

Is your county requesting a waiver of the MFIP administrative cap?

- | | | |
|-------------------------------------|-----|--|
| <input type="checkbox"/> | Yes | If yes, provide a concise response to the following three questions. |
| <input checked="" type="checkbox"/> | 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?

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 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 will have a contingency plan in place by Sept. 28, 2007, 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:

- 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.

Details on the preparation of this plan can be found in Bulletin #07-68-10, titled "Child Welfare Disaster Preparedness Plans." If you have questions or need clarification, contact Jean Thompson at (651) 431-3856.

Section VII: Certification for Submission

Checking this box certifies that this Biennial Service Agreement has been prepared as required and approved by the county board(s) under the provisions of Minnesota Statutes 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

Date of Submission

Date:	
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