

WE IMPROVE THE QUALITY OF VULNERABLE OKLAHOMANS BY INCREASING THE HEALTHIER, MORE INDEPENDENT AND PRODUCTIVE LIVES.

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# ANNIVERSARY

This fiscal year marked the 80<sup>th</sup> anniversary of the Oklahoma Department of Human Services. A lot has changed in this state in the last 80 years, including the ways we serve and support people who are vulnerable due to poverty, age, disability, abuse or neglect.

"There is not a man of us who does not at time need a helping hand to be stretched out to him, and then shame upon him who will not stretch out the helping hand to his brother."

- Theodore Roosevelt

## INTRODUCTION

As we provide details of our performance and our impacts in this report, we chose images of Oklahomans in need during times in our state's history that precipitated the creation of this agency. We also share the images and stories of people we help today and how their lives have been changed for the better by our services.







Caption Description: Little girl in shack home in camp near May Avenue. Oklahoma City. July 1939. Photography: Russell Lee

While reviewing our impact and reflecting on our history, we ask a challenging question: "What if?" What if no one lived in poverty? What if every family had enough to eat and could pay their basic bills? What if no child was abused, abandoned or neglected? What if no vulnerable adult suffered from abuse or exploitation? What if you needed a helping hand? What if 80 years of helping people makes all the difference?

We are the Oklahoma Department of Human Services and we are proud of our history of providing help and hope to our fellow Oklahomans when they need it most.





#### DIRECTOR'S LETTER

Fiscal Year 2017 was yet another challenging year for the State and for the Department of Human Services. Our agency began the year with projected operating expenses of \$755 million state dollars

payments, and a third consecutive year of reduced federal Medicaid funding. The combination of reduced appropriations, two state revenue failures, and higher operating costs created a more than \$100 million shortfall in our budget.

requested DHS not make cuts to critical Medicaid Waiver programs that provide care to Oklahomans who are aging and who have disabilities, while also pledging support for an agency request later in the fiscal year for supplemental

We fervently wish there were no need for our services-that everyone in this state would enjoy safe, healthy, independent
and productive lives. Until that day comes, we will continually strive
to be a stout safety net for those who need us.

and an appropriation of \$652 million--\$27 million less than the previous year. We were struggling to meet unfunded higher costs relating to serving kids in state custody, higher adoption assistance

As the legislative session closed in May 2017, legislative leaders acknowledged that DHS' appropriation would not be sufficient for the entire upcoming fiscal year. As a result, legislative leaders

funding for those programs. Facing the likelihood any supplemental funding would only be appropriated for the Aging and Developmental Disabilities Medicaid home



THIS IMAGE WAS CREATED USING A PICTURE OF THE OKLAHOMA STATE CAPITOL COMPLEX IN 1963. IT INCLUDES THE CAPITOL, SEQUOYAH AND WILL ROGERS BUILDINGS.

PROVIDED BY THE OKLAHOMA HISTORICAL SOCIETY.

## DIRECTOR'S LETTER CONT.'D

and community-based waiver programs, we identified \$45 million in state dollar reductions to our SFY 2017 budget to account for the remaining potential shortfall. Funding was not available to provide planned increases in foster and adoptive home rates or child welfare front line salaries as called for in the Pinnacle Plan.

Following the same guiding principles we had employed the previous year, \$24.6 million of the state dollar reductions (\$48.5 million with the loss of federal funds) were made in internal administrative areas, including the elimination of more than 150 positions. That was achieved by centralizing HR, budget, contract, and

communications functions. Since state fiscal year 2014, more than 1,200 non-child welfare positions have been cut from our workforce. We also closed or consolidated all free-standing Child Support offices and reduced contracts for training, computer software, and other services that directly support programs.

Another \$20 million in state dollar reductions (\$24.3 with the loss of federal funds) were made to benefit programs and providers. These cuts included eliminating funding for the 211 program and senior volunteer programs; reducing all TANF contracts, including work contracts; eliminating funding for Marriage Initiative programs; reducing funding



## DIRECTOR'S LETTER CONT.'D

and support services to childcare providers for training, educational scholarships and consultations on mental health and behavioral issues; and continuing the freeze to the Developmental Disabilities Family Support Assistance Payment program.

These reductions come on the heels of \$35 million in cuts to our agency's initial 2016 budget and an additional \$44 million in cuts from back-to-back state revenue failures during that fiscal year. DHS did receive \$16 million back from the 2016 revenue failures which we used to offset cuts that had been planned to senior nutrition programs and to fund increased numbers of adoption assistance payments.

The cumulative impacts of a few years of budget cuts have taken a toll in DHS. Some of these are described in this report. Losses in productivity, higher workloads, and longer wait or response times in our work with our clients are real consequences. However, through our past experiences in continuous improvement and our latest work to improve practices and achieve efficiencies, we were able to mitigate some of the unfortunate impacts.

On a positive note, and due in large part to the financial support of the Governor and Legislature for the Pinnacle Plan, we continued to see solid progress in our efforts to better serve children in our

care, their families, and our foster and adoptive homes. For the first time since state fiscal year 2013, we saw fewer children in state care, another record year of adoptions, more children being reunited with their families, and an increased focus on safety and in-home prevention services. In this report, you can read more about the accomplishments in Child Welfare Services.

I cannot close this message without thanking our many contractors and provider partners who have continued to stand by us through multiple years of contract reductions. Community organizations, district attorneys' offices, landlords, providers, and

#### DIRECTOR'S LETTER CONT.'D

a host of other partners absorbed reductions along with us while continuing steadfastly to help us fulfill our mission to serve vulnerable Oklahomans. We simply could not accomplish our goals without these partners, and I cannot express our gratitude enough.

And speaking of gratitude-Our employees have persevered through these trying financial times, all the while maintaining their commitment and compassion for their less fortunate friends and neighbors in their communities in every corner of the state. Through it all they keep pulling together, focused on our mission of serving those who most need our help. Oklahoma is so fortunate to have such dedicated employees.

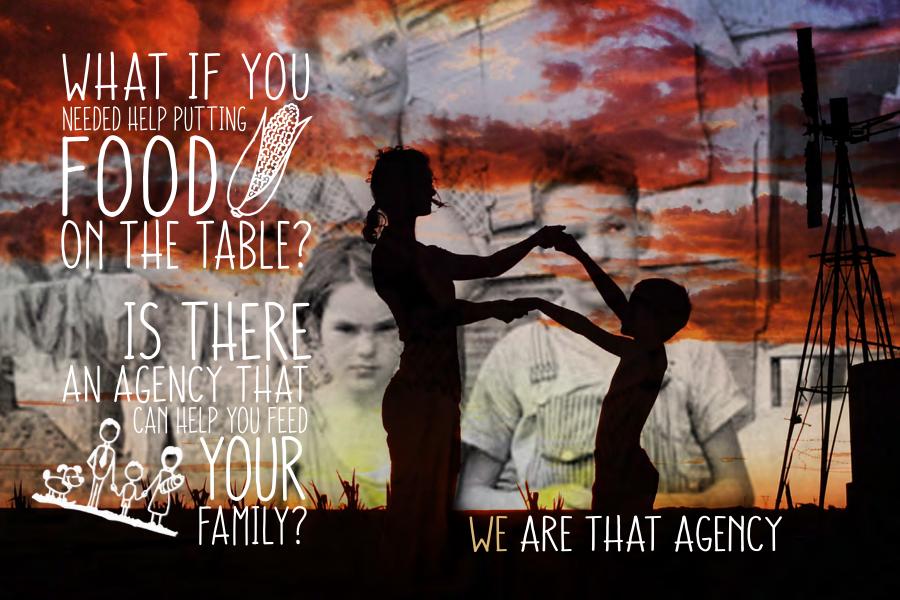
This is how DHS has served vulnerable Oklahomans for the past 80 years—with skill, commitment and compassion. We fervently wish there were no need for our services-that everyone in this state would enjoy safe, healthy,

independent and productive lives. But until that day comes, we will continually strive to be a stout safety net for those who need us.

Director, Oklahoma Department of Human Services

Ed Lake







Caption Description: People living in miserable poverty, Elm Grove, Oklahoma County. August 1936.

Photography: Dorothea Lange

# Nearly a third of Oklahomans needed help feeding their families through the Supplemental Nutrition Assistance Program (SNAP) in 2017.

The division that helps Oklahomans with this core need is **Adult and Family Services** (AFS). AFS staff administers state and federal social safety net programs designed to assist low-income Oklahomans with meeting their most basic needs and improving their quality of life.

AFS programs include: Child Care Subsidy

Low Income Home Energy Assistance Program (LIHEAP)

SoonerCare (Medicaid) eligibility for the aged, blind and disabled population

State Supplemental Payment (SSP)

Supplemental Nutrition Assistance Program (SNAP)

Temporary Assistance for Needy Families (TANF)

#### **Adult and Family Services**

#### WHAT IS SNAP?

The **Supplemental Nutrition Assistance Program** (SNAP) provides 100 percent federally-funded benefits to help low-income individuals and families access nutritious food. The average benefit is \$4.02 per person per day or \$1.34 per meal. Participants use an Access Oklahoma electronic benefits card, similar to a debit card, which is accepted at 3,655 retail grocery outlets, including farmers markets and direct-to-market farmers. In SFY 2017, 385,813 Oklahoma families participated in the program and DHS distributed \$890,126,021 in food benefits.

To improve the SNAP accuracy rate and encourage collaboration, SNAP Quality Control staff provided technical assistance to program staff. The SNAP accuracy rate for Federal Fiscal Year (FFY) 2016 currently meets Federal standards.

AFS continues to work with SNAP education partners and local communities to expand the use of SNAP food benefits at farmers markets across Oklahoma. In SFY 2017, 21 farmers markets had SNAP sales exceeding \$142,800. Through a United States Department of Agriculture grant, 11 farmers markets participated in a new program called Double Up Oklahoma. Through Double Up, SNAP recipients can eat healthier by purchasing up to \$40 of fruits and vegetables with \$20 of their SNAP benefits at participating farmers markets. Additional farmers markets may be added to this program in SFY 2018.

\$887,878,740

MILLION WORTH OF FOOD ITEMS
WERE PURCHASED THROUGH SNAP
IN SFY 2017 AT 3,655 RETAIL
GROCERY OUTLETS INCLUDING
FARMERS MARKETS AND
DIRECT-TO-MARKET FARMERS.

To help able-bodied unemployed SNAP recipients achieve economic self-sufficiency. AFS began building a SNAP Employment and Training (E&T) program in Oklahoma County using a contractor. The E&T program provides unemployed SNAP recipients with opportunities to reduce barriers to finding and maintaining employment through job search, training and support, vocational education, job retention services, on-the-job training and soft skills development. Expansion of the program will be limited without state funding to offset the retrospective nature of federal funding. However, this program is expected to expand to Tulsa County in SFY 2018.



LESS THAN 2 PERCENT OF SNAP HOUSEHOLDS

HAD AT LEAST TWO WORKING ADULTS IN THE HOME DURING THE PAST YEAR





27 PERCENT OF SMAP HOUSEHOLDS



HAD AT LEAST ONE WORKING ADULT IN THE HOME DURING THE PAST 12 MONTHS

# 850,855 INDIVIDUAL OKLAHOMANS AND 385,813 FAMILIES RECEIVED FOOD THROUGH SNAP

MEDIAN MONTHLY INCOME FOR SNAP RECIPIENTS WAS

\$1,127 (OF HOUSEHOLDS WITH EARNED INCOME)

#### SNAP BENEFITS ISSUED (DOLLAR AMOUNTS)

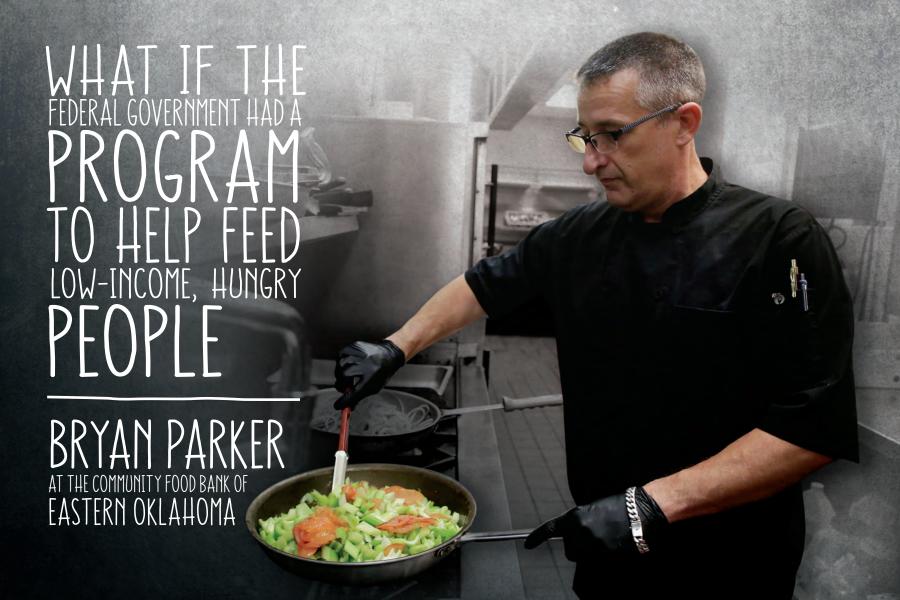
2013	\$957,400,000
2014	\$900,700,000
2015	\$859,600,000
2016	\$884,300,000
2017	\$890,100,000

<sup>\*</sup> AMOUNTS HAVE BEEN ROUNDED

#### OKLAHOMANS PARTICIPATING IN SNA

2013	889,100
2014	902,500
2015	867,968
2016	874,873
2017	850,855





#### FORMER SNAP RECIPIENT TESTIFIES TO CONGRESS

(This is Parker's story, in his own words, to the US Senate Committee on Agriculture, Nutrition and Forestry during hearings on Nutrition Programs: Perspectives for the 2018 Farm Bill.)

**Photo Caption:** Bryan Parker works in the kitchen in the Lobek Taylor Culinary Trade Program at the Community Food Bank of Eastern Oklahoma – photo courtesy of the Tulsa World.

years as the owner of a small chain of English cram schools and as a physical fitness trainer of fighters in Japan. In 2010, I moved back to Tulsa to be with my family. I have two daughters

Like many people do, I lost my job about three years ago. I felt down on my luck and was battling depression and anxiety because I couldn't find a job. I could no longer afford to own my

You really don't know what it's like to be hungry until you haven't eaten for days. All you can focus on is when you might eat again. This is why SNAP is so important to me and the people that need it.

"Thank you for inviting me to testify today. I am Bryan W. Parker. I am 51 years old and a native of Tulsa, Oklahoma. I am a recipient of **SNAP benefits**.

Just like anyone else, l've been through many ups and downs in my life. I served in the Navy on the USS Midway from 1985-1988. I then lived in Japan for 20 that are both grown and very successful in life. I worked in the restaurant industry and held every position from dishwasher to general manager. I felt accomplished, successful, and never worried about paying my bills, buying food or wondering where I would get my next meal. That was never a thought that went through my head.

car or home. With each interview, the struggles seemed to just keep coming. No one was willing to give me an opportunity. It is tough being a 51-year-old man living in a hotel and searching for work.

During this hard time, SNAP has been a life saver to me. Not only has it given me the nutrition to

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stay alive, but it has given me hope. You can endure a lot of pain and suffering in life, but one thing you can't withstand is having no food and being hungry. I am very thankful for the SNAP benefits I'm receiving while trying to get back on my feet.

I am happy to say that someone has finally decided to give this 51-year-old a chance. I am currently enrolled in the Community Food Bank of Eastern Oklahoma's Culinary Trade Program, and am more than halfway finished with this 16week course. The Culinary Trade Program is free to participants and helps people needing a second chance on life, like me. I'm currently working five days a week for seven hours a day for the program. The program not only teaches professional cooking skills, but also life skills. The executive chef's motto

"A.A.&E." is my favorite. "A.A.&E" stands for Attitude, Attendance, and Effort. He always says these are the keys to life.

When I graduate from the Culinary Trade Program I will have a manager's license in food safety that will transfer anywhere in the country. The program will also help place me in a job in the restaurant industry. I ultimately want to work in a professional kitchen, and with hard work, one day own my own restaurant, because cooking is my passion.

None of this would be possible without the help of SNAP and the Culinary Trade Program. I see every day how important SNAP is to many lives in my community. Everyone needs to eat. Not just employed people or rich people need to eat, everyone does. Food is fuel and without it, you have no strength to motivate you to move

forward. SNAP helps to take away just one more daily worry that most people don't even consider - hunger. I would be in a different situation than I am now if it weren't for SNAP. I would probably be homeless.

You really don't know what it's like to be hungry until you haven't eaten for days. All you can focus on is when you might eat again. This is why SNAP is so important to me and the people that need it. I honestly believe any working middle class individual or family is one life changing event away from being in the same situation that I'm in. One day I want to be able to pay it forward and hopefully I am doing that right now. Thank you for allowing me to speak and tell my story, I'm very blessed and fortunate to be given this opportunity."

> BRYAN W. PARKER TULSA, OK

#### WHO CAN HELP OKLAHOMANS WITH QUALITY, AFFORDABLE HEALTH CARE?

In SFY 2017, AFS renewed **SoonerCare (Medicaid)** eligibility for 187,012 Oklahomans and facilitated new SoonerCare (Medicaid) enrollment for 69,138 Oklahomans on behalf of the Oklahoma Health Care Authority (OHCA) for those unable to enroll directly through the OHCA web site.

DHS administers the state-funded, federally-mandated **State Supplemental Payment** (SSP) cash assistance program for low-income persons who are 65 years of age or older, disabled, or blind and meet income and resource standards. Persons receiving SSP also receive SoonerCare (Medicaid) benefits.

DHS administers funds from Title V, **Children with Special Health Care Needs** (CSHCN) federal grant which pays for respite care, equipment, diapers, and formula not covered by Title XIX for this population. CSHCN funds also pay for non-Medicaid compensable physician services for children in state custody involved with Child Welfare Services. DHS is partnering with the Oklahoma Family Network to identify coverage gaps and improve transition services across multiple agencies for custody youth with special health care needs turning 18 years of age. The focus will be on developing more comprehensive service providers available to serve this population.

SoonerCare (Medicaid) is the largest payer of nursing home level of care in Oklahoma. DHS staff determines financial eligibility for both the **Medicaid Home and Community-based AD***vantage* **program** and nursing home services. To expedite processing of nursing home assistance across the state, AFS partnered with the Oklahoma Association of Health Care Professionals.

#### WHAT IF YOU LOST YOUR JOB? WHO COULD HELP?



ADULTS PARTICIPATED IN THE TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) PROGRAM ON AVERAGE EACH MONTH.



OF TANF RECIPIENTS WHO FOUND EMPLOYMENT REMAINED EMPLOYED FOR AT LEAST SIX MONTHS.

The **Temporary Assistance for Needy Families** (TANF) program provides parents with 100 percent federally-funded, time-limited cash assistance, job training, education, and employment services to help families reach and sustain economic self-sufficiency. Families may also receive services such as financial planning, parenting skills and after-school mentoring programs for children.

DHS partners with Oklahoma Works and a network of other state agencies to address our clients' and the larger community's workforce development needs through education, employment, and training programs that connect people with employment opportunities. Currently, DHS and Oklahoma Works are implementing a one-stop plan to bring business, industry, service providers and job seekers together to promote full employment and wealth creation throughout the state.

#### TANF BENEFIT PARTICIPATION

2013	8,121 Adults – 26,489 Children
2014	6,385 Adults – 23,316 Children
2015	5,605 Adults – 23,536 Children
2016	5,327 Adults – 23,324 Children
2017	5,574 Adults – 19,215 Children



#### WHO CAN HELP LOW-INCOME PARENTS WITH CHILD CARE COSTS?



DHS receives and administers the federal Child Care and Development Block Grant (CCDBG) which helps low-income parents pay for high-quality, licensed child care so they can work and/or complete their education or training. **Subsidized child care** is also provided to help prevent neglect, abuse or exploitation that can occur when children are left with untrained or unqualified caregivers in environments that are not licensed and monitored. Research has also shown pre-school children who participate in child care programs with early education activities are more prepared to enter school.

In SFY 2017, DHS was forced to freeze enrollment for two months due to a state revenue failure and budget shortfall, affecting hundreds of families and impacting child care providers statewide.

In SFY 2017 DHS revised subsidy rules to implement 12-month eligibility as a requirement of the Child Care and Development Block Grant Act of 2014. This new rule promotes healthy child development and school success by encouraging continuity of care and stability in child care placement. Subsidy rules will be revised in SFY 2018 as per federal requirements to include locking in co-payments during the 12-month eligibility period as well as establishing an exit income threshold set at 85 percent of State Median Income. This change will help mitigate the "cliff effect" and allow parents to accept modest raises without losing their subsidy.

#### CHILD CARE SUBSIDIES COST

2013	\$126,000,000
2014	\$123,000,000
2015	\$126,000,000
2016	\$125,000,000
2017	\$121,000,000

<sup>\*</sup> AMOUNTS HAVE BEEN ROUNDED

#### WHO CAN HELP OKLAHOMANS WHO STRUGGLE TO PAY THEIR HEATING BILLS?

Low Income Home Energy Assistance Program (LIHEAP) provides winter heating, energy crisis, and summer cooling assistance to eligible low-income households during specific application periods throughout each year and provides funding to the Department of Commerce for weatherization services activities. Responding to the state budget challenges and staff reductions in 2017, AFS began contracting with the University of Oklahoma Center for Public Management to administer LIHEAP using the OKDHSLive.org website. This outsourcing helped AFS reduce state expenditures for the program.

WINTER HEATING ASSISTANCE	77,862 HOUSEHOLDS
ENERGY CRISIS ASSISTANCE PROGRAM	3,958 HOUSEHOLDS
SUMMER COOLING ASSISTANCE	89,636 HOUSEHOLDS

#### HOW CAN AFS CONTINUE TO IMPROVE?

SFY 2017 saw some program improvements despite continued significant AFS staff reductions due to budget cuts. AFS actively uses **Lean Six Sigma** (LSS) business process analysis as the foundation for continuous quality improvement and to identify efficiencies.

Using funds from a **USDA Food and Nutrition technology grant**, AFS is in the process of: enhancing its online application and renewal system for easier use on mobile devices; installing Wi-Fi coverage in several county offices; outfitting customer assistance representatives with wireless tablets; and developing an interview appointment system to improve customer service, benefit access, and standardize practices and procedures for clients and staff. These technological enhancements will increase access to services for clients and save staff time.

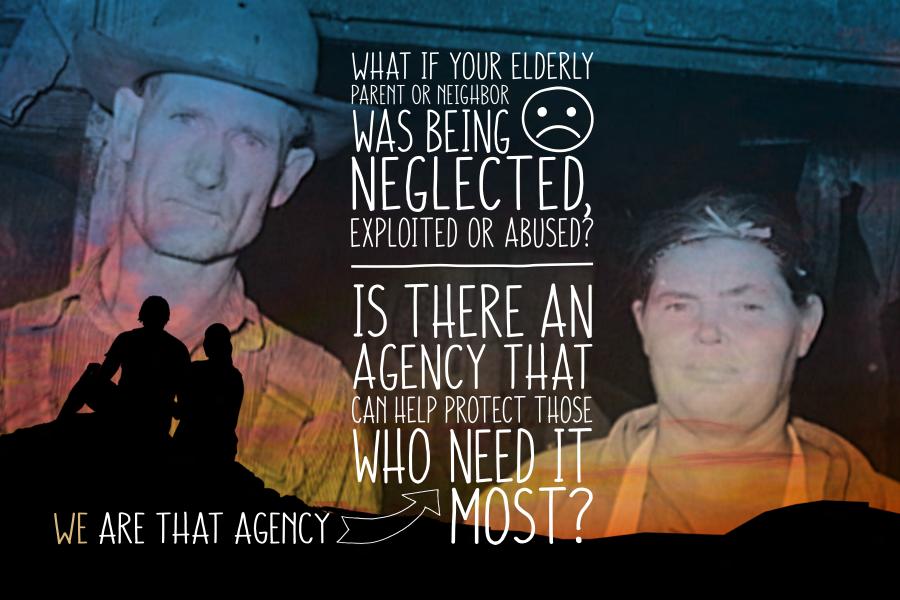
In SFY 2016, AFS began a **Food Distribution Program on Indian Reservations** (FDPIR) project with the Choctaw tribe and in SFY 2017, developed a computerized system and process to prevent dual participation in SNAP and tribal food distribution programs. The goal is to implement the system with all tribes and develop a system that allows AFS staff to verify participation in tribal food distribution programs. This will reduce time spent by AFS and tribal staff in verifying eligibility for the 16,000 certifications averaged per month by the 15 Oklahoma tribes with food distribution programs.

In 2017, AFS expanded eligibility information available to housing providers with confidentiality agreements by electronically providing both **benefit and child support data via computer** to facilitate applications from low-income families for assistance with rent and housing. The transaction shortens eligibility determinations for clients and reduces the number of information requests fielded by AFS and Child Support Services (CSS) staff. CSS received more than 40,000 such requests in 2016.

#### HAS AFS BEEN IMPACTED BY RECENT BUDGET CUTS?

AFS employees are paid by a combination of state appropriations plus federal grants for all of the programs administered. As a result of state budget cuts, AFS lost more than 250 positions in SFY 2017 and a total of nearly 650 since 2015. Leadership is carefully monitoring program performance since staff shortages not only reduce quality of service for vulnerable Oklahomans but put the agency at risk for federal financial penalties as well.

In response to staff reductions in September 2016, **OKDHSLive.org** began accepting SNAP and Child Care applications from individuals or households without existing case numbers. This allows individuals to apply for SNAP or Child Care Subsidy benefits through OKDHSLive.org instead of applying at a local DHS county office. In December 2016, OKDHSLive.org began accepting applications for utility assistance. All applications for LIHEAP Winter Heating in 2016 and the Energy Crisis Assistance Program (ECAP) in 2017 were accepted through OKDHSLive.org.





Caption Description: Father and mother of a large family who made their living by collecting old vegetable crates and selling them to others in the camp for building material. Camp near May Avenue, Oklahoma City. July 1939.

Photography: Russell Lee

# APS received nearly 23,000 calls of possible abuse, neglect or exploitation of a vulnerable adult.

The division that helps protect these vulnerable adults is **Adult Protective Services** (APS). APS provides protection for adults ages 18 and older from abuse, neglect or exploitation in both private residential settings and long-term care facilities. The Oklahoma *Protective Services for Vulnerable Adults Act* established intervention and assistance for vulnerable adults in cases of abuse, neglect and exploitation and set requirements for reporting suspected cases. APS is primarily funded through state appropriations because there are no federal funding sources specifically for the protection of vulnerable adults. However, some APS activities qualify for Medicaid reimbursements when workers provide certain types of services for Medicaid-eligible clients.

APS has three main components:

Community protective services to reduce or eliminate the risk of harm and provide referrals for other types of services

Long-term care investigations of alleged maltreatment in nursing homes

HIV/AIDS case coordination and information services

### **Adult Protective Services**

#### HOW DOES APS HELP OKLAHOMANS?



WERE CONNECTED TO COMMUNITY SERVICES TO MEET THEIR BASIC NEEDS



FOR SERVICES

Each year, thousands of Oklahoma adults suffer from abuse, neglect, self-neglect and exploitation. Consistent with recent changes to the *Protective Services for Vulnerable Adults Act*, self-neglect is now addressed with focused service planning rather than through full-scale investigations. Home visits continue to be an essential element of both service planning and investigation, as is the assessment of risks, needs and capacity.

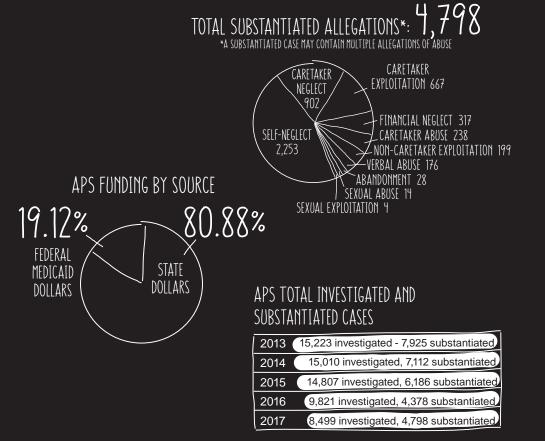
Many elderly, frail and vulnerable victims depend upon others to meet their basic needs such as adequate food and shelter, personal hygiene, and medical care.

In addition to protection from abuse and neglect, APS helps vulnerable Oklahomans find and obtain services. Protective services are offered to vulnerable adults to stop maltreatment and service plans are developed and implemented to prevent future occurrences.



Vulnerable adults who retain decision-making abilities may voluntarily choose to participate in all, some, or none of the services offered. APS is ethically client-centered and traumainformed and client decisions are respected, even when those decisions appear problematic to the APS specialist.

When ordered by a court, involuntary services may be provided through guardianship for vulnerable adults who lack decision-making abilities, refuse services, and are in situations where death or serious physical harm is likely to occur.



## APS COMPLETED 8,499 INVESTIGATIONS

#### WHO CAN HELP WITH SUSPECTED NURSING HOME ABUSE?

The **Long Term Care Investigations** (LTCI) unit receives and investigates abuse, neglect, and exploitation complaints made by or on behalf of nursing facility residents. Since 1976, LTCI has worked with nursing facilities, law enforcement, professional boards, enforcement and advocacy agencies and others to resolve complaints and stop institutional abuse and prevent their reoccurrence in nursing facilities, veterans' centers, and Specialized Facilities for Individuals with Intellectual Disabilities.

Because of budget cuts in SFY 2017, just three full-time investigators were assigned to investigate complaints at approximately 402 nursing facilities across the state. LTCI received 5,813 self-reports from nursing facilities. Reports including abuse, neglect or exploitation were forwarded to APS staff for possible investigation. In SFY 2017, there were 4,050 referrals of maltreatment of persons residing in nursing facilities. 375 cases met criteria to be assigned for investigation and 392 reports were referred to other agencies including the Oklahoma State Department of Health, the Attorney General's Medicaid Fraud Division, county APS and the state ombudsman.

#### IS THERE HELP FOR OKLAHOMANS DIAGNOSED WITH HIV/AIDS?

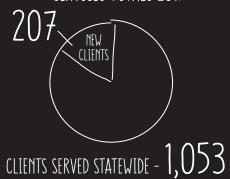
AIDS Coordination and Information Services (ACIS) provide comprehensive bio-psychosocial case management and information to individuals diagnosed with HIV/AIDS and their families. One in four newly-diagnosed individuals in Oklahoma received an AIDS diagnosis within three months of first testing positive for HIV. In addition to case management, ACIS professional care coordinators provide clients with assessments, advocacy, interventions, access to community resources and follow-up services to ensure client needs are met. Approximately 20 percent of ACIS clients qualify for Medicaid services; the remaining 80 percent rely on other services coordinated through ACIS. Due to budget reductions in SFY 2017, ACIS staff members were reduced from six to three.



AIDS COORDINATION & INFORMATION SERVICES COORDINATED AND CONNECTED CLIENTS



AIDS COORDINATION & INFORMATION SERVICES TOTALS 2017



#### HOW HAS APS BEEN IMPACTED BY STATE BUDGET CUTS?

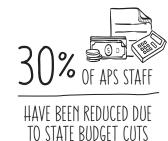




RULES CHANGE PROPOSAL TO REPLACE 'EMERGENCY' RESPONSES WITH 'URGENT' RESPONSE TIME FRAMES



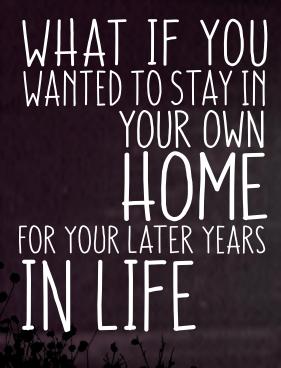
RULES CHANGE PROPOSAL TO DELAY MALTREATMENT INVESTIGATIONS AT NURSING HOMES FROM SEVEN DAYS TO 30 DAYS



APS has lost nearly 30 percent of its front-line staff since 2015 as a result of state budget reductions. The number of completed investigations and service plan cases is down from SFY 2016 which can be directly correlated to fewer staff available to address reports of potential abuse, neglect and exploitation. Because of staff

reductions, APS requested a rules change from Governor Mary Fallin in September 2017 that will allow APS workers to initiate investigations into allegations of maltreatment within five working days of receiving a report instead of the current three working days. In addition, the proposed rules change would eliminate "emergency" responses and replace them with "urgent" responses, which will allow investigators 24 hours to initiate an investigation instead of the current four hours. Also included is a proposal to allow investigations of maltreatment in nursing homes within 30 days instead of the current seven days (or 48 hours in an emergency).





WHAT AGENCY COULD YOU TURN TO FOR SUPPORT?





Caption Description: Matriarch of family camped near a creek bed, panning for gold. "Slept in a bed all my life long till now-sleeping on the ground." May 1935.

Photography: Dorothea Lange

# Over 20,000 Oklahoma seniors maintained their independence and lived in their own homes because of supports they received through the AD*vantage* Program.

**Aging Services** (AS) helps administer community programs that support the rights, independence and quality of life of older Oklahomans.

#### **Aging Services**

#### ARE THERE OPTIONS TO LIVING IN NURSING HOMES FOR SENIORS?



WERE ABLE TO MAINTAIN THEIR INDEPENDENCE AND LIVE IN THEIR HOMES BECAUSE OF SUPPORTS THEY RECEIVED THROUGH THE ADVANTAGF PROGRAM.



The largest service program is the **AD***vantage* **Program**, a Medicaid home and community-based waiver. Studies show people want to maintain their independence and live in their own homes as long as possible and in-home services are a cost effective way for many adults to do so. The AD*vantage* Program helps older adults and adults with physical disabilities live at home with supports instead of a nursing facility or other institutional care option. This program, along with Medicaid State Plan Personal Care, offer in-home services such as home-making services, personal care, case management, home-delivered meals, prescriptions, and other services.

#### ADVANTAGE PROGRAM (PERSONS SERVED):

2012	20,970
2013	20,953
2014	20,731
2015	20,674
2016	21,147
2017	20,932



#### WHAT IF SENIORS NEED MEALS OR PROTECTION WHILE IN ADULT CARE FACILITIES?

Aging Services administers the federal Older Americans Act (OAA) funds in conjunction with the 11 Area Agencies on Aging (AAA). The AAAs contract with AS and provide a variety of services to persons age 60 and older, regardless of income. Services include: **meals (congregate and home-delivered)**, **transportation**, **legal services**, **homemaker services** and **respite for caregivers**. Two of the most accessed services are:

#### **Congregate and Home-Delivered Meals:**

These critical meals are provided for seniors at 200 sites statewide or delivered to the recipient's home. In SFY17, 1,355,850 congregate meals and 1,315,232 home-delivered meals were provided.

ADVANTAGE MEALS	3,898,979	MEDICAID FUNDING
HOME DELIVERED MEALS	1,315,232	OLDER AMERICANS ACT FUNDING
CONGREGATE MEALS	1,355,850	OLDER AMERICANS ACT FUNDING



Long-Term Care Ombudsman: This program protects the rights of residents in long-term care facilities, including nursing homes, assisted living and similar adult care facilities. An Ombudsman helps advance the quality of life and care available to facility residents. In SFY17, the program investigated 7,054 complaints from residents and family members, a nearly 20 percent increase over SFY16. Over 99 percent of those complaints were resolved without the need for referral to another agency for enforcement. For more information, a complete annual report on the Long-Term Care Ombudsman Program is available.

#### WHAT IF A SENIOR NEEDS HELP FINDING WORK?



AGE 55 AND OLDER
RECEIVED HELP PREPARING FOR
OR FINDING FMPLOYMENT.

Authorized through the OAA and funded by the U.S. Department of Labor, the **Senior Community Services Employment Program** provides work-based training in part-time community service assignments and assistance in the development of skills and experience for adults age 55 and older who: have income below 125 percent of the federal poverty level; are unemployed; are residents of Oklahoma; and have poor employment prospects. During this fiscal year, 117,260 work-based training hours were provided to 169 seniors in 34 counties in conjunction with contract partners.

#### IS THERE A PLACE SENIORS CAN GO DURING THE DAY TO SOCIALIZE?

In SFY17, the **Adult Day Care program** had 29 sites across the state serving 627 persons. The program supported 111,228 service days and 667,368 service hours for the year. Almost half (45%) of the state program funds provide services to individuals on the waiting list for developmental disabilities home and community-based waiver services.

#### WHAT ABOUT SENIORS WHO CAN'T DRIVE? WHO CAN HELP?

Transportation services to medical appointments, shopping and other social services are provided across the state through the **Federal Transit Administration's Section 5310 program**. This program, celebrating its 41st year at DHS, provided funds to more than 150 non-profit organizations and governmental entities to purchase accessible vehicles and provide for transportation of older individuals and persons with disabilities. In federal fiscal year 2017, the program provided 1,439,313 trips for 578,879 riders with approximately 550 vehicles traveling a combined 7,839,204 miles.

#### WHAT'S THE IMPACT OF THE STATE BUDGET CUTS TO OKLAHOMA SENIORS?

In previous fiscal years, Aging Services provided state funding to support three programs under the Corporation for National and Community Services (CNCS) Volunteer Program: The Foster Grandparent Program, the Retired Senior Volunteer Program, and the Senior Companion Program. In SFY 2016, more than 5,500 CNCS volunteers contributed 1,189,479 hours of services worth \$25,573,798 assisting with children in public schools, providing companionship for homebound adults, and supporting community activities. Unfortunately, due to state budget cuts for SFY 2017, Aging Services could no longer support the CNCS Volunteer Program and ceased funding these programs.

Another vital community service that was supported through funding from Aging Services was 2-1-1, the free 24-hour telephone number that connects callers with health, mental health, and human service resources. In SFY 2016, Aging Services provided 35 percent of 2-1-1's funding. That year, 2-1-1 answered more than 325,000 inquiries from Oklahomans seeking social services. In SFY 2017, Aging Services could no longer support 2-1-1 due to budget cuts, reducing 2-1-1's capacity to assist Oklahomans by more than a third.



#### TRANSPORTATION PROGRAM MAKING A DIFFERENCE FOR 600,000 OKLAHOMANS

Since 1976, the Oklahoma Department of Human Services has been helping older adults and adults with disabilities attend medical appointments, go shopping, and remain connected to their communities. Section 5310 grant program and we make application for capital assistance for vehicles," said Laura Corff, Transit Director for the United Community Action Program. "We're able to replace our vehicles to provide service to our seniors and individuals walking. "This is perfect for me because I can go where I need to go and then I'm not having to worry about calling a taxi and maybe not getting there."

And husband and wife, Ron and Winnie Covill.



It's just independence... When you can't see to drive, that's one of the hardest things in the world. And to be able to go places is life-saving. It truly is."

Through the Federal Transit
Administration's Section
5310 grant, DHS Aging
Services assists more than 150
non-profit organizations and
government entities purchase
accessible vehicles to use for
transportation programs.

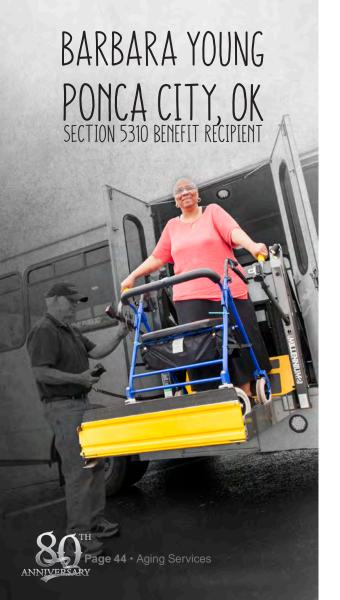
"The Oklahoma Department of Human Services administers the with disabilities and others in the community who need transportation."

Each year, nearly 600,000 people ride vehicles purchased through DHS and the 5310 program. People like Barbara Young of Ponca City.

"I don't drive anymore," said Young, who has difficulty "Winnie's president and I'm the program chairman for the Lions Vision Support Group here in Ponca and we can get around, we can go places," said Ron Covill.

"Because I lost my sight completely, I'm now totally

Page 43 • Aging Services



blind and Winnie is legally blind, so neither of us can drive," he explained. "The transit gets us where we want to go, when we want to go, and riding it we can be independent. We don't have to depend on family or friends or something to come and get us, we just depend on the transit to give us our lives back, and they do."

"I can not only go grocery shopping and to the doctor," Young added, laughing, "but I can go to the movies any time I want to see something!"

"It's just independence," Winnie Covill was quick to agree. "When you can't see to drive, that's one of the hardest things in the world. And to be able to go places is lifesaving. It truly is."

"Our partnership with the Department of Human Services

allows us to have a transportation program that we can offer to our riders," Corff explained, nearly brought to tears after hearing the riders talk about the program.

"Because we are able to get new vehicles, and replace the old ones, we can maintain a dependable service. Our customers rely on us, they rely on our drivers to show up every day, and they rely on our vehicles to be able to stay on the road."

"Safe, dependable transportation means freedom to many of our riders and their families," Corff concluded with a smile.

SAFETY. HEALTH.
INDEPENDENCE.
PRODUCTIVITY.

WE ARE THAT AGENCY







Caption Description: Miracle Hill Orphanage. Food storage area. Oklahoma. Copyright 1964.

Photography: Daily Oklahoman

## In 2017, Child Care Services licensed 3,359 child care facilities to keep our children safe.

Child Care Services (CCS) Child Care Services (CCS) is statutorily mandated by the Oklahoma Child Care Facilities Licensing Act under Title 10. The mission of CCS is to ensure Oklahoma families have access to licensed, affordable, high-quality child care to help children develop to their fullest potential in a safe, healthy and nurturing environment. CCS licenses all child care services in the state and works in partnership with child care providers, Smart Start Oklahoma, community organizations, tribes, state agencies and other stakeholders to develop quality child care in communities and help child care providers achieve maximum standards. CCS is funded through the federal Child Care Development Block Grant (CCDBG) and required matching state dollars.

#### **Child Care Services**

#### WHO CAN HELP PARENTS CHOOSE SAFE CHILD CARE?

**Licensing staff** conducts up to three monitoring visits each year of licensed child care providers statewide. In SFY 2017, CCS licensed 3,359 child care homes and centers with an average monthly capacity of 122,647 children. On average, 42 child care permits were issued to new child care program applicants each month.

Regular monitoring visits help ensure the safety of children and help providers meet compliance requirements. A database of complaint investigations and child care providers is located on the DHS website (www.okdhs.org).

In SFY 2017, CCS was significantly affected by staff reductions because of state budget cuts. CCS leadership reduced the number of child care regions from six to four and increased the number of supervisory groups from six workers to eight.



### MONTHLY AVERAGE FACILITIES FOR CHILD CARE HOMES AND CENTERS

2012	Homes - 2,485 Centers - 1,726
2013	Homes - 2,281 Centers - 1,679
2014	Homes - 2,181 Centers - 1,644
2015	Homes - 1,996 Centers - 1,562
2015 2016	

### MONTHLY AVERAGE CAPACITY FOR CHILD CARE HOMES AND CENTERS

2012	Homes - 21,916 Centers - 113,669
2013	Homes - 20,114 Centers - 112,511
2014	Homes - 19,165 Centers - 111,985
2015	Homes - 17,622 Centers - 108,501
2016	Homes - 16,766 Centers - 107,434
2017	Homes - 16,281 Centers - 106,366

#### WHO CAN HELP CHILD CARE FACILITIES IMPROVE FOR THE SAKE OF OUR KIDS?



94 CHILD CARE SPECIALISTS
OVERSEE THE SAFETY OF

122,647 CHILDREN

Oklahoma was the first state in the nation to successfully implement a Quality Rating and Improvement System (QRIS) for licensed child care programs. The program is called **Reaching for the Stars.** It helps child care providers improve the quality of care they provide. There are four levels: One Star, One Star Plus, Two Star and Three Star. Licensed programs that meet quality criteria receive a star rating and higher reimbursement rates for providing care for children whose parents receive child care subsidies.

The impact of budget reductions in SFY 2017 required additional innovation from CCS. The Environment Rating Scale was replaced

with a QRIS selfassessment tool to help child care programs evaluate the quality of their programs through an ongoing evaluation process. Evaluation practices include health and safety checklists, personnel and family surveys and equipment inventories.

NUMBER OF TWO AND THREE STAR CHILD CARE FACILITIES AS OF JUNE 30

2012	2 Star - 1,758 3 Star - 231
2013	2 Star - 1,561 3 Star - 248
2014	2 Star - 1,502 3 Star - 270
2015	2 Star - 1,389 3 Star - 256
2016	2 Star - 1,342 3 Star - 258
2017	2 Star - 1,274 3 Star - 265



#### HOW HAS CCS WORKED TO CONTINUALLY IMPROVE FOR THE FUTURE?

Using the DHS Strategic Plan and Quality Service Standards, Child Care Services embraced the challenges and changes required by legislation and the reauthorization of CCDBG. The ultimate outcome is to improve the quality of child care and provide a safe, healthy, nurturing and inclusive environment for children to develop to their fullest potential.

CCS and community partners developed tools to help child care providers develop quality programs that respect all children and oversaw the development of training to help implement positive behavioral interventions and support models to prevent expulsion of pre-school aged children, and provided referrals to organizations serving homeless families.

As the administrator of the CCDBG, Child Care Services provides consumer education about child care to Oklahoma families statewide. The revised webpage, *Providing Oklahoma with Quality Child Care*, can be found on the DHS website (<a href="www.okdhs.org">www.okdhs.org</a>). The website provides information to help families choose quality child care, learn about child care options, find information about children's health, growth and development and encourages providers to improve the quality of their services.

#### WHO KEEPS CHILDREN SAFE IN OUT-OF-HOME CARE?

The CCS **Residential and Child Placing Agency Licensing Program** ensures facilities and programs are safe and healthy environments for children and youth in custody who are placed in 24-hour out-of-home care. The unit licenses and monitors residential programs and child-placing agencies throughout the state and offers a variety of consultative services. The unit is also responsible for investigating complaints of noncompliance with licensing requirements or violations of the Oklahoma Child Care Licensing Act.

#### Licensed programs include:

- · Residential child care facilities
- Regimented residential programs
- · Children's shelters
- · Residential treatment facilities
- Secure care facilities
- Foster care agencies
- · Adoption agencies
- Independent living programs

During SFY 2017, Residential Licensing Services monitored 28 children's shelters and 69 residential child care programs with a combined capacity of 2,579 children. In addition, the unit monitored 61 child-placing agencies.

#### WHO TRACKS PROFESSIONAL DEVELOPMENT OF CHILD CARE PROVIDERS?

CCS maintains the **Oklahoma Professional Development Registry** to provide valuable information about that state's early childhood workforce including staff turnover in child care facilities, the number of professionals in the child care industry and their credentials and professional development needs for provider staff.

- 43,000 child care provider staff attended low or no-cost professional development
- 750 child care provider staff participated in Scholars for Excellence Scholarship program
- 220 child care provider staff obtained certificates and degrees
- 885 hours of consultation and technical assistance was provided to child care programs
- 352 child care provider staff contacted the Warm Line for health and child guidance
- 93 child care facilities received on-site visits from a consultant regarding children's behaviors

#### HOW HAS CCS BEEN IMPACTED BY BUDGET CUTS?

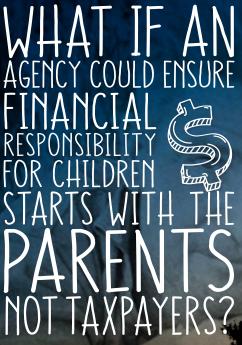
Due to budget reductions in SFY 2017, Child Care Services staff was reduced by 24 percent (38 staff members) across all levels. As a result, CCS reorganized its statewide structure and reduced the number of unannounced visits to child care providers in some parts of the state.

#### Programs eliminated:

- Environmental Rating Scale which helped programs evaluate their programs and set goals for improvement
- Reward Program a salary supplement that provided two payments per year to child care provider staff who met specific income and education requirements
- Oklahoma Department of Mental Health and Substance Abuse Services contract which
  provided mental health consultation to child care programs

#### Reductions:

- Warm Line a statewide, toll-free services for child care providers seeking answers about health and child development issues
- Scholars for Excellence program coordinated by Oklahoma community colleges to recruit, assist and support child care teachers seeking a credential, certificate, associate's or bachelor's degree in early childhood education



WHAT IF THERE'S AND A GENCY

Human Services

DOING JUST THAT?



WE ARE THAT AGENCY





Caption Description: Drought refugees from Oklahoma camping by the roadside. They hoped to work in the cotton fields. Family of seven. August 1936.

Photography: Dorothea Lange

# As of June 30, 2017, there were 218,000 Oklahoma children that had open child support cases to help their families.

Under federal law, **Child Support Services** (CSS) is responsible for establishing, monitoring and enforcing child support orders, and recovering taxpayer funds spent on public assistance services. The collection and distribution of reliable child support helps families to be more self-sufficient, decreasing reliance on public assistance.

Child Support Services include: Locating parents

Establishing legal fatherhood (paternity)

Establishing and enforcing fair child support orders

Increasing health care coverage for children through medical support orders

#### **Child Support Services**

#### WHO CAN HELP ESTABLISH PATERNITY OF A CHILD BORN OUT OF WEDLOCK?

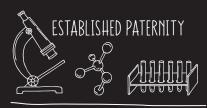
**Paternity establishment** is the first, crucial step in ensuring that the financial responsibility for supporting children starts with the parents, not the taxpayers. CSS helps determine the parentage of children born to unmarried couples. When fatherhood is in doubt, CSS follows legally established genetic testing procedures. Through the previous decade, CSS was among the highest performing states in the country for Statewide Paternity Establishment Performance Measures. However, due to budget reductions and staffing cuts, performance in this area dropped from 112.42 percent in SFY 2016 to 106.15 percent in SFY 2017. Even a single year's drop can affect families for the lifetime of a child.

#### WHO CAN WORK WITH THE COURTS TO ESTABLISH CHILD SUPPORT?

Child support orders are established through a court process. In the last decade, CSS improved its **Support Order Establishment** rate from 70 percent in 2006 to 82 percent in Federal Fiscal Year (FFY) 2016, an increase of 18 percent. The national average was an increase of 12 percent over the same 10-year period. CSS established 10,853 support orders in SFY 2017, a decrease of 18 percent from the year before. The 1.6 percent decrease in cases with child support orders at the end of SFY 2017 was offset by the 1.9 percent decrease in total open cases, netting CSS a minor improvement in support order establishment of 0.3 percent.



199,000 CASES OPEN AT THE END OF THE YEAR REPRESENTING 218,000 CHILDREN UNDER THE AGE OF 19.



128,000 CHILDREN BORN OU OF WEDLOCK NOW HAVE PATERNITY ESTABLISHED OR ACKNOWLEDGED



#### WHO CAN HELP WITH UNPAID CHILD SUPPORT?

Children benefit most from regular, reliable support. When support is not paid, an arrearage accumulates. CSS improved the percentage of cases with **Arrears Support Collections** from 60 percent in FFY 2006 to 61 percent in FFY 2016 which was only about a quarter of the national average improvement. Arrears support collected in SFY 2017 dropped 4.5 percent.

#### HOW MUCH DID CSS COLLECT ON BEHALF OF CHILDREN AND FAMILIES?

In SFY 2017, CSS collected \$360 million dollars in child support with 199,000 cases open at the end of the year. This is a drop of \$8 million (2.1 percent) and 3,800 cases (1.9 percent) compared to SFY 2016. CSS was 22nd in the nation in improving collections per ordered case, with a 19 percent increase between FFY 2006 and 2016. In SFY 2017, as a result of staffing reductions, CSS saw a drop in collections per ordered case of 0.5 percent.



CSS COLLECTED \$360 MILLION DOLLARS
IN CHILD SUPPORT. THIS IS A DROP OF
\$8 MILLION COMPARED TO SEY 2016.



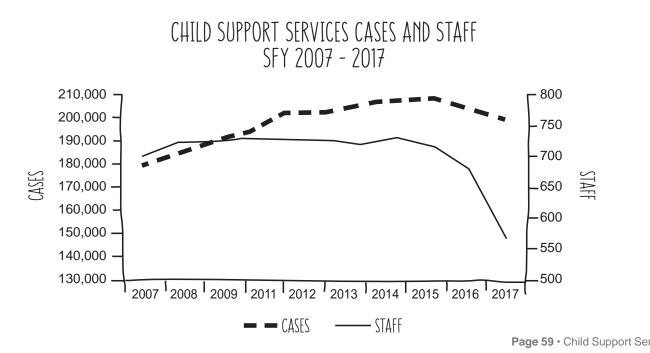
CHILD SUPPORT SERVICES (CSS)
WAS 22ND IN THE NATION IN
IMPROVING COLLECTIONS
PER ORDERED CASE.



AS A RESULT
OF STAFFING REDUCTIONS,
CSS SAW A 0.5 PERCENT
DROP IN COLLECTIONS.

#### HOW HAS CSS BEEN IMPACTED BY RECENT BUDGET CUTS?

State budget reductions in state fiscal years (SFY) 2016 and 2017 cut CSS staff 16 percent and reduced office locations from 40 to 35. CSS also reduced administrative contracts, including those with District Attorneys, by 15 percent. Performance suffered in almost every measured area which may reduce federal incentives available in the next fiscal year. Open cases at the end of the fiscal year were down 1.9 percent and the number of custodial persons who received child support in the last half of SFY 2017 was down 13.7 percent compared to the same period in SFY 2016.



#### HOW MANY CASES WERE OPEN AT THE END OF THE FISCAL YEAR?

Here's a snapshot of the CSS cases at the end of the fiscal year (June 30, 2017):

199,000 open cases at the end of the year -

- **165,000 cases** have an order for child support, of which:
  - 12,000 cases were for Oklahomans receiving public assistance (TANF or children in foster care)
  - o 49,000 cases were for Oklahomans who had former public assistance cases
  - o 104,000 cases were for Oklahomans who were never on public assistance

218,000 children (under the age of 19) are included in the open cases, of which -

- 153,000 children were born to unmarried couples
  - o 128,000 children born to unmarried couples now have paternity established or acknowledged

125,000 ordered cases received some type of collection over the past year

120,000 ordered cases have medical support ordered

**104,000 cases** (of the 168,000 cases with arrears) received a collection on those arrears

#### WHAT ARE THE RESULTS FROM LAST YEAR?



ON THE PROGRAM

- Paternity Establishment Percentage 106.2% (comparing one year's births to unmarried couples with acknowledged and court-ordered paternities from the next year)
- Support Orders Established 82.8% of caseload
- Current Support Collected 54.2% percent of amount due
- Arrears Support Collected 61.9% percent of cases had collections
- Medical Support Orders Established 93.7% percent of all cases with support orders also had medical support orders established
- Cost Effectiveness Ratio \$5.79 was recovered for each dollar expended on the program

#### HOW MANY NEW CASES WERE OPENED?

HOW MANY INVOLVED OTHER STATES?

37,000 new cases opened in SFY 2017 -

- 16,576 cases from Medicaid referrals
- 7,653 cases from private applications
- 5,277 cases from Foster Care
- 3,328 cases from TANF
- 2,068 cases from other states
- · 2,513 cases from Day Care

27,000 cases involved other states -

- 12, 000 cases involve custodial persons living in Oklahoma, but the noncustodial parent lives in another state
- 15, 000 cases involve noncustodial parents living in Oklahoma, but the custodial person lives in another state





Caption Description: Children under the National Youth Administration. July 1936.

Photography: Dorothea Lange

# Over 130,000 Oklahoma children were reported as possible victims of child abuse, neglect, or both.

**Child Welfare Services** (CWS) is committed to improving the safety, permanency and well-being of children and families involved with the system due to abuse or neglect. CWS works to keep families together whenever safely possible. When a child must be removed from the home to ensure safety, CWS searches for relatives or foster parents who can support the child and family while efforts are made toward reunification. When the child and family cannot be safely reunified, CWS focuses efforts to find the child an adoptive family or a guardian to ensure permanent, supportive connections that will last through adulthood.

Child Welfare Services are funded through a combination of state dollars and federal funds from Titles IV-B and IV-E of The Social Security Act, Medicaid and Temporary Assistance to Needy Families (TANF).

#### **Child Welfare Services**

#### HOW MANY CHILDREN CAME INTO CONTACT WITH CWS?



IN SFY 2017, 133,055 CHILDREN WERE ALLEGED VICTIMS OF ABUSE AND NEGLECT. OF THOSE REPORTS, 15,289 CHILDREN WERE CONFIRMED TO BE VICTIMS.

In SFY 2017, DHS received 79,310 reports of alleged child abuse, neglect, or both, in which 133,055 children were alleged victims. Of those reports, 15,289 children were confirmed to be victims. This year, there were 5,700 children who left state custody and were successfully reunited with their biological families, adopted, or placed in a guardianship situation. This is the highest number of exits from state care in one year since SFY 2009.

#### WHAT SHOULD WE DO IF WE THINK A CHILD IS BEING ABUSED?



IN SFY 2017, THE ANSWER
RATE AT THE CHILD ABUSE
AND NEGLECT HOTLINE WAS
MAINTAINED ABOVE 95 PERCENT
1-800-522-3511



DHS maintains a 24-hour statewide, centralized **child abuse and neglect hotline** to take reports regarding children, younger than 18 years old, believed to be a victim of abuse, neglect or both. Ongoing targeted recruitment and hiring at the hotline has maintained staffing levels which allow for calls to be answered timely and with quality information – all of which is crucial to the safety of children. During the entirety of SFY 2017, the answer rate at the hotline has been maintained above 95 percent. Process improvements continue to increase the speed at which referrals are identified and assigned to local offices.

#### HOW DOES CWS WORK WITH FAMILIES TO KEEP THEIR KIDS SAFE?

If a child is found unsafe after an assessment of the family situation, CWS intervenes to assist the family and keep the child safe. One option is **Family-Centered Services (FCS)**, which allows the child to remain in the custody of their parents with a safety plan. FCS cases focus on the child's safety, preserving and strengthening the parent's or caregiver's abilities to keep children safe. Most families in an FCS case will receive Comprehensive Home-Based Services (CHBS) and referrals to other community services that best meet their needs. CHBS is only appropriate for families where children are at moderate risk of removal. As of June 2017, there were 709 open FCS cases statewide.



#### HOW DOES CWS WORK TO PREVENT FURTHER ABUSE AND NEGLECT?

The primary source of federal funding for children in foster care is **Title IV-E**. The U.S. Department of Health and Human Services has waived certain requirements and allowed some states, through demonstration projects, to use these funds more flexibly to test new approaches to service delivery and improve outcomes for children and families involved in the child welfare system.

From SFY 2011 through SFY 2014, Oklahoma saw a dramatic increase in the number of children being removed from their homes and placed in state custody. The majority of children entered custody due to neglect and other reasons—not physical or sexual abuse. Studies in Oklahoma have shown that many children could have safely avoided removal if effective services would have been available in their families' homes.

The DHS waiver demonstration project, known as **Intensive Safety Services** (**ISS**), targets those families where the removal risk is higher and therefore not appropriate for CHBS. ISS provides services in the home three to five times a week, eight to 10 hours per week for duration of four to six weeks for families with children from birth-12 years of age. These services are provided by contracted master's level licensed behavioral health professionals or those under supervision for licensure. At the end of the ISS period, the families then step down to a CHBS case for continued services up to six months. Each family must also have a Family-Centered Services worker throughout the life of their case. In the first two years of the project in Oklahoma, 300 children have been safely maintained with their families, avoiding removal and placement into DHS custody.

#### WHAT IS THE GOAL FOR KIDS IN DHS CUSTODY?

When children cannot be maintained safely with their families, then the courts place them in DHS custody. Children who are in DHS custody, whether they are in foster care, inpatient care, trial adoption, trial reunification, or similar services, are considered to be in **out-of-home care**. The goal for most of these children is to return to their own home. DHS has seen over a nine percent decrease in the number of children in out-of-home care from the last fiscal year, and a 17 percent decrease for the last two fiscal years. Also, the number of children entering out-of-home care has continued to decrease since SFY 2014.

Decreases in the numbers of children coming into state care and increases in children leaving state care are both positive outcomes which are the result of several years of reform efforts. CWS has increased state dollar investments into comprehensive home-based services which keep children safe at home while parents work to correct issues that led to unsafe conditions. These same services also help parents who have had their children removed reunite their families faster. Intensive Safety Services funded through the Title IV-E federal waiver has also helped to keep children safe at home with their families. CWS efforts to help children and teens who cannot return home to find permanency through adoption or guardianships has also helped to reduce the numbers of children in care.

#### OUT OF HOME CARE:

SFY	Removed at Beginning of SFY	Entering Out of Home Care	Exiting Out of Home Care	Removed at End SFY
2013	8,843	5,676	4,519	9,980
2014	9,980	6,078	4,761	11,301
2015	11,301	5,328	5,774	10,917
2016	10,917	5,143	5,971	9,964
2017	9,964	5,158	6,047	9,044

#### WHO ARE THE FOSTER FAMILIES?



884 NEW FOSTER FAMILIES

RECRUITED BY DHS AND PARTNER
AGENCIES IN SFY 2017

Foster families are a vital part of the child welfare system in protecting children from abuse and neglect. When children cannot safely remain with their parents, a match is made with an appropriate foster family. The foster family may be related to the child, have a previous relationship with the child, or be a non-related foster family. Focused recruitment efforts with multiple community partners, including Governor Mary Fallin supporting the Oklahoma Fosters campaign, assisted DHS and Resource Family Partner agencies to recruit 884 new foster families in SFY 2017. DHS will continue recruitment efforts and supports to foster families until every child has the right foster family.



## THE MAJORITY OF SPECIAL NEEDS CHILDREN IN FOSTER CARE ARE CARED FOR BY FOSTER FAMILIES OR RELATIVE CAREGIVERS.





WHAT IF PROGRAMS WORKED TOGETHER TO SERVE FAMILIES
WHO FOSTER OR ADOPT SPECIAL NEEDS CHILDREN

MIKE & DAWN JONES WITH THEIR SON DEN



Page 70 • Child Welfare Services



#### WHAT IF A SPECIAL LITTLE BOY FOUND THE RIGHT FAMILY?

Dawn and Mike Jones had not even thought about becoming foster parents. Their youngest child would soon graduate from high school and they thought they would be 'child free.' But then, one When Zayden came for his first visit to meet Dawn and Mike, he immediately claimed their house as his own. "He just kept saying, 'Zayden's house; Zayden's house," said Dawn.

One week later, Zayden came back for an overnight visit and

Now, he bathes and dresses himself, uses utensils, microwaves his own little pizza snacks, and goes to school. "He has just thrived!" said Dawn.

Child Welfare's Developmental Disabilities Services Educational



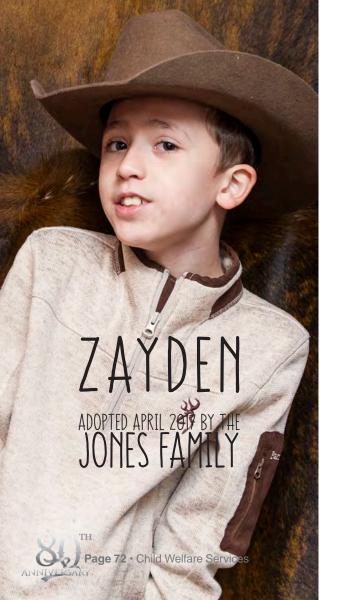
of their nieces saw a Facebook video about the last child at the Pauline Mayer Children's Shelter in Oklahoma City.

"I watched the video and sent it to Michael," said Dawn. "And he said, 'Call and see.' We didn't think anything would happen."

Well, something did happen. And it was magical. as Dawn says, "We've had him ever since!"

When Zayden first arrived, he did not use utensils, he was not toilet-trained, and he mostly spoke in one-word sentences. His school work was at the kindergarten level. His behaviors included rolling on the floor and spitting on or hitting people.

Unit helps families who foster and adopt children with special needs. If a child needs occupational or speech therapy, assistance with an Individualized Education Plan in the school system, help with co-occurring mental health issues, or just some transportation assistance, the unit gets those services setup for the family.



"These children are still children," said Darla Hill-Myers, program supervisor. "They still want to play on the playground, they want to go to the zoo, they still want to eat mac 'n cheese and not green beans. They want to do all the same things all kids want to do."

Dawn says Zayden is just like any other kid: he goes to regular classes in school in a regular classroom with everybody else, he needs reminders to clean up his room, he wants to build a gocart with his dad, Mike, and he likes to go out to eat.

"The community has been real supportive of him," said Mike. "They all know him and spend time with him. He likes riding his bike with his friends." And he likes going to the local café where staff knows exactly what Zayden's order will be: chicken strips and Doritos.

"You just can't be scared because of a label," said Dawn. "That's all 'special needs' is – a label. You can't let that stop you. You can't let that scare you. You just never know about that child out there who needs you and who you're just going to fall head-over-heels in love with."

Zayden's adoption was finalized in April 2017.

SAFETY. HEALTH.
INDEPENDENCE.
PRODUCTIVITY.
WE ARE THAT AGENCY

#### WHAT IS SUCCESS FOR CHILDREN IN STATE CUSTODY?

In SFY 2017, 2,594 children left state care through **reunification**. Safe reunification is the ultimate success because it means together the family and DHS were able to correct the conditions that led to removal of the children and restore the family. Reunification also ensures children maintain long-term connections to their kin, culture and community which are the overall goals of child welfare services.

SFY	REUNIFICATION	ADOPTION	GUARDIANSHIP	TOTAL EXITS TO PERMANENCY
SFY13	2,421	1,318	439	4,178
SFY14	2,625	1,268	499	4,392
SFY15	2,700	2,186	535	5,421
SFY16	2,816	2,243	539	5,598
SFY17	2,594	2,576	530	5,700

In cases where a child cannot be safely returned to his or her own home, **adoption** provides permanency for the child. In SFY 2017, DHS staff finalized adoptions for 2,577 children, giving them a permanent home. These were the highest number of adoptions in a single fiscal year since SFY 1998, and nearly double the number of adoptions in SFY 2011.





THIS IS THE HIGHEST NUMBER OF ADOPTIONS IN A SINGLE FISCAL YEAR SINCE SFY 1998, AND NEARLY DOUBLE THE NUMBER OF ADOPTIONS IN SFY 2011.



Occasionally, there are times where the adoption is not successful and is dissolved. In SFY 2017, there were 36 adoption dissolutions (only 1.4 percent of finalized adoptions). On average, these dissolved adoptions lasted 71 months.

There are currently 18,417 children and their adoptive families receiving adoption assistance payments.

#### HOW DO PARTNERS HELP OUR CHILDREN AND FAMILIES?

The partnerships that DHS has with various community collaboratives, other state agencies, treatment providers and the Native American Tribes of Oklahoma, help improve outcomes for children and families. National partners such as the Annie E. Casey Foundation and Casey Family Programs provide support to develop innovative solutions that promote safety, permanency and well-being for children and families.

#### HOW IS CWS IMPROVING FOSTER CARE?

In January 2012, the Oklahoma Department of Human Services settled a class-action lawsuit filed against its foster care system by a child advocacy group. As a result of this settlement, DHS created, and in 2013 implemented, the **Oklahoma Pinnacle Plan** which was a detailed plan to improve the foster care system. Funding for the improvements over the past five fiscal years includes more than \$108.8 million earmarked appropriations plus more than \$118 million DHS has redirected internally to CWS. Progress and achievements to date include:

- DHS has added more than 800 new case workers and supervisors to the child welfare workforce, which is being paid 23 percent more due to funding for raises. This has resulted in lower caseloads and less turnover of frontline workers.
- Since the Pinnacle Plan began, more than **9,500 children have been adopted** from the foster care system and more than **13,000 have been successfully reunited** with their families.
- DHS and its contract partners have recruited and approved more than 3,500 new foster families
  who are providing traditional level care.
- The use of **emergency children's shelters has been significantly reduced** statewide by 60 percent since the Pinnacle Plan was implemented. DHS has closed one of its state-run shelters and plans to close the second when the last remaining child has been placed.
- DHS has invested in **more home-based services** to keep many children safe with their families and avoid removals. In cases where children have been removed, these services have also helped correct the problems in families that led to the removal of their children so they can be reunited faster.
- DHS has increased public-private partnerships to fund and support services the agency could not offer on its own or with limited state appropriations.

WHAT IF STRONGER RELATIONSHIPS COULD HELP INDIAN REMAIN CONNECTED TO

CARMIN TECUMSEH-WILLIAMS DHS TRIBAL LIAISON



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#### WHAT IF DHS AND TRIBAL NATIONS WORKED TOGETHER TO BENEFIT FAMILIES?

Carmin Tecumseh-Williams is the DHS tribal liaison. A member of the Muscogee-Creek Nation, she works to strengthen relationships between tribal nations and DHS to help the agency better serve tribal families.

Tecumseh-Williams said that was an encouraging sign for tribes because they felt their concerns were acknowledged and respected.

The history of child welfare services and Indian children has often been controversial.

from unsafe situations at home, DHS works closely with tribes to help ensure children are placed in foster homes within their own tribes.

"Children are our most important asset," said Tecumseh-Williams. "When

Historically, tribes have some mistrust for the state...
It's really important for us to invest in and commit
to relationships with tribes in order to heal.

"Historically, tribes have some mistrust for the state," said Tecumseh-Williams. "It's really important for us to invest in and commit to relationships with tribes in order to heal."

Director Lake is the first DHS director ever to meet faceto-face with tribal nations. For many years, tribal children were placed in non-Indian foster homes at an extraordinary rate. In 1978, the Indian Child Welfare Act gave tribes the right to intervene in the court process and help determine where tribal children should be placed. Now, when tribal children are removed

our children are not placed back into our care amongst our people, we lose them. And they lose us. And therefore, they lose a part of who they are."

Deborah Shropshire, DHS Deputy Director of Child Welfare Community



OKLAHOMA TRIBES RECRUIT AND TRAIN THEIR OWN FOSTER HOMES.



Partnerships, says true partnerships with tribal nations are based on mutual respect and problem-solving around a tribal family's needs.

"We've got some payback to do for what's been done years ago," said Shropshire. "We can't change the past, but we can make a difference today in how we create opportunities for children to know where they came from."

DHS tribal liaisons are vital to the mission of nurturing and improving partnerships between sovereign Indian nations and DHS in order to better serve Indian families across our state.

SAFETY. HEALTH INDEPENDENCE. PRODUCTIVITY. ARE THAT AGENCY



## FEDERALLY-RECOGNIZED TRIBES IN OKLAHOMA





#### WHAT IF DHS AND COMMUNITIES CAME TOGETHER TO HELP FAMILIES IN NEED?

The mission of the Office of Community and Faith Engagement (OCFE) is to promote partnerships and engage communities in collaborative efforts to promote and enhance the wellbeing of all Oklahomans.

OCFE partnered with the Infant Mortality Alliance, Oklahoma City-County Health Department and dozens of African-American churches to help develop the Leading Ladies for Healthy Babies initiative. The program educates families about safe sleep

The Office of Community and Faith Engagement would not be able to maintain its mission without the army of volunteers and partners who help serve Oklahomans in need. The annual Volunteer/Community Partner Recognition Ceremony recognizes businesses,

We rely a great deal on others... I am gratified to know so many people come together to help us serve Oklahoma's children and families.

The wellbeing of babies is certainly one area of OCFE's focus. For too many Oklahoma infants, sleep environments are not always safe. The infant mortality rate for the African American population of Oklahoma City is nearly twice as high as the Caucasian rate.

environments and provides mom-to-mom mentoring for pregnant mothers within their congregations. Since the initiative began, the infant mortality rate for African Americans in Oklahoma City has decreased by nearly nineteen percent. individuals, community partners, and civic groups for their tireless efforts to make a difference in the lives of children and families in Oklahoma.

# IN 2017 THE OFFICE OF COMMUNITY & FAITH ENGAGEMENT JOINED PARTNERS TO COORDINATE AND SUPPORT:

SAFE SLEEP INITIATIVE STATE CHARITABLE CAMPAIGN LEADING LADIES FOR HEALTHY BABIES FATHERHOOD INITIATIVE VOLUNTEER/PARTNER RECOGNITION CEREMONY DOMESTIC VIOLENCE AWARENESS VOLUNTEER STANKSGIVING MEAL DONATIONS DAS FOSTER WISHES

One of OCFE's biggest undertakings is coordinating the annual Christmas gift donation drive for foster children. The project begins each July when child welfare staff receives 'wish lists' from foster children. With generous help from churches, businesses, civic groups and volunteers, nearly 6,000 wish lists were filled last year. In addition, a private partner donated 200,000 square feet of warehouse space to store the presents until they could be delivered to children in DHS custody.

Due to DHS budget reductions, the Office of Community and Faith Engagement is now comprised of just two staff members. The support and involvement of community partners, stakeholders and volunteers is absolutely vital. "We rely a great deal on others," said Jacobs. "I am gratified to know so many people come together to help us serve Oklahoma's children and families."

SAFELY, HEALTH.
INDEPENDENCE.
PRODUCTIVITY.
WE ARE THAT AGENCY







Caption Description: Children in Oklahoma drought, refugees on highway. Family of six; no food, no money and almost no gasoline. June 1935.

Photography: Dorothea Lange

# 8,186 Oklahomans with developmental disabilities, ranging from ages 2 to 89, were helped by Developmental Disabilities Services.

**Developmental Disabilities Services** (DDS) offers a wide array of community services which are individualized to meet each person's needs. Our mission is to enable persons with intellectual and developmental disabilities lead healthy, independent and productive lives to the fullest extent possible, promote the full exercise of their rights, protect their integrity, and help ensure the well-being of their families.

DDS programs include: Medicaid Home and Community Based Waiver Services

Family Support Assistance Payments

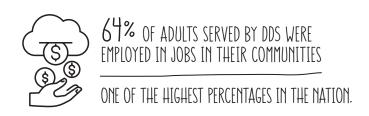
State-funded group homes, employment, assisted living and

guardianship services

Page 85 • Developmental Disability Services

#### **Developmental Disabilities Services**

#### HOW DOES DDS HELP OKLAHOMANS WITH DISABILITIES?



The DDS service system depends on contractual relationships with more than 100 community service agencies around the state who provide direct care and employment services to the individuals served.

#### WHAT SERVICES ARE AVAILABLE TO ADULTS AND CHILDREN WITH DISABILITIES?

Medicaid Home and Community-Based Services (HCBS) waiver programs represent the majority of the services administered. DDS manages four HCBS waiver programs: **In-Home Support waiver for Adults**; **In-Home Support waiver for Children**; the **Community waiver**; and the **Homeward Bound waiver**.

Individuals receiving services live in their own home, family homes, shared living homes or groups homes. Services were provided by 694 different providers including residential and vocational provider agencies, nursing providers, dental providers, occupational therapists, physical therapists, speech therapists, psychologists, durable medical equipment suppliers and pharmacies. HCBS programs allow Oklahoma to use federal matching dollars appropriated through Federal Medical Assistance Percentages (FMAP). Because HCBS programs are expanded Medicaid services, recipients must also be Medicaid (SoonerCare) eligible.

### TOTAL NUMBER OF PERSONS RECEIVING HCBS WAIVER SERVICES:

2013	5,081
2014	5,369
2015	5,610
2016	5,560
2017	5,390

Numbers served are going down because more children with disabilities in child welfare services are being served. Plans of care for these children are considerably more intensive and cost more per person than some of the average recipients.

The average individual cost of serving an adult receiving in-home services ranges from 26 to 32 percent of the annual cost of private Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID).

93 percent of individuals receiving HCBS are in a residential setting. They may also receive one or more of the following services:

- 3% of individuals receive Nursing services
- 36% of individuals receive Assistive Technology services
- 56% of individuals receive **Employment Services**
- 71% of individuals receive Transportation Services
- 72% of individuals receive Habilitation Training Specialists Services





#### WHAT IS THE STATUS OF THE DDS WAITING LIST?

### \*NUMBER OF PERSONS WAITING FOR HOME AND COMMUNITY-BASED SERVICES:

2013	7,044	
2014	6,980	
2015	7,137	D
2016	7,405	
2017	7,560	

\*DDS does not verify eligibility for HCBS until funding is available.

DDS maintains a **waiting list** for HCBS. When additional state funds are made available, individuals on the list are offered access to services as eligible; however, no state funds have been appropriated to serve the waiting list in several years. People on the waiting list are eligible for and often receive services from other programs while they are waiting.

Governor Mary Fallin issued Executive Order 2015-17 which provided guidance to DHS to pursue the viability of prioritizing the DDS waiting list based on need. To date,

DHS has worked with the University of Oklahoma to gather research from other states that have implemented policy changes of this sort. The agency is working to evaluate the research from OU and the feasibility of such changes to DDS policy. In SFY 2018, DHS plans to engage with stakeholders, advocates, self-advocates and families for input on how the agency should design a community-based needs assessment for DDS waiting list members.

Here's what we know about those who are waiting for Home and Community-Based Services:

- All 77 counties have at least one individual receiving services
- 43% of HCBS recipients live in Oklahoma and Tulsa Counties
- The individuals' ages ranges from a few months to 80 years of age
- 41% of the individuals are under 18

- 10% of the individuals are 19 to 21
- 45% of the individuals are 22 to 55
- 90% of the individuals reside in their own or family home
- 39% of the individuals have been on the waiting list for over 8 years
- 62% of the individuals are enrolled in SoonerCare
- 30% of the individuals receive SNAP Benefits
- 10% participate in the Family Support Assistance Subsidy program
- 6% of the individuals participate in State-funded services
- 2% of the individuals receive State Plan Personal Care
- 2% of the individuals receive Adult Day Services through Aging Services

#### WHAT IF OKLAHOMANS WITH DISABILITIES AREN'T ELIGIBLE FOR MEDICAID?



A number of Oklahomans with developmental disabilities are not Medicaid-eligible for various reasons. For these individuals, there are a limited amount of services funded entirely with state dollars. In SFY 2017, 1,176 individuals received **state-funded services** from 68 providers. These services include: sheltered workshop and community-integrated employment services, group home services, and adult day services.

#### IS THERE HELP FOR FAMILIES CARING FOR CHILDREN WITH DISABILITIES AT HOME?



DDS offers Family Support Assistance Payments (FSAP) to families who are caring for children under the age of 18 with developmental disabilities at home. In SFY 2017, families caring for 1,568 children received Family Support Assistance Payments. The payment is \$250 per month for the first eligible child up to a maximum of \$400 per month, depending on the number of eligible children. These payments are provided to families with annual gross incomes that do not exceed \$45,000 per year and are funded from the Temporary Assistance to Needy Families (TANF) grant.

#### HOW WAS DDS IMPACTED BY BUDGET CUTS?



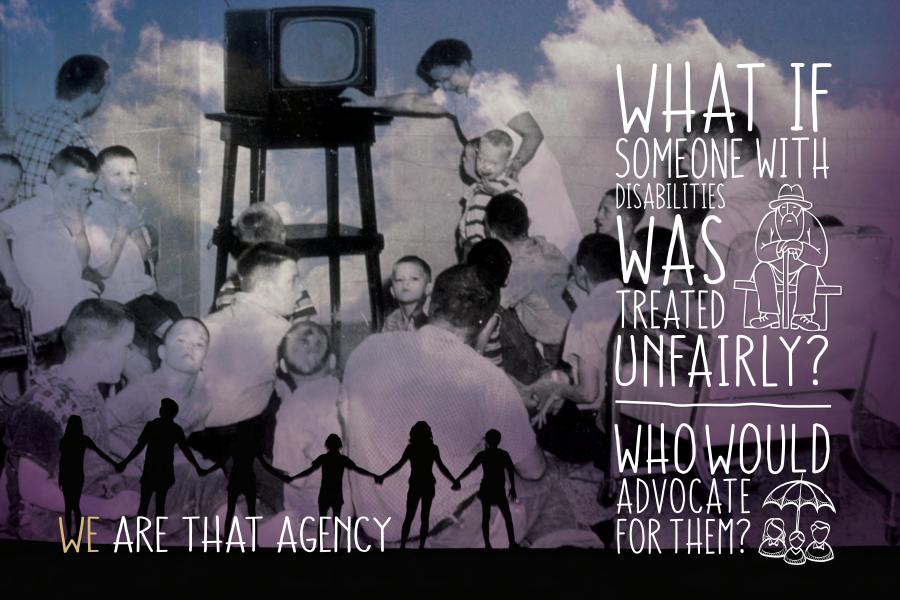
As a result of state revenue failures and DHS budget cuts in SFY 2016 and 2017, DDS was forced to cut case management and administrative positions, reduce the rates paid to HCBS provider agencies by 3.5 percent, and freeze the Family Support Assistance Payment program.

The HCBS rate reductions, effective September 2016, also applied to state-funded services. By the end of SFY 2017, the number of individuals served in state-funded services dropped by seven percent because of the rate reduction.

DDS froze the Family Support Assistance Payment program in January 2016 and the freeze continued through SFY 2017. SFY 2016 ended serving 1,800 children representing 1,694 families. Since the program has been frozen, 232 children have aged out of the program and no new children have been added. Thirty-five percent of children under age 18 on the waiting list received FSAP. Because of the freeze, that number has dropped to 25 percent in SFY 2017 and will continue to drop as children age out of the program.

Over the last two fiscal years, DDS reduced case management and social service specialist positions statewide by 20 percent and cut 35 percent of all other types of positions. Staffing losses have increased caseloads for case managers and put a strain on DDS' ability to operate each program and deliver services.

Budget cuts and staff losses combined have resulted in a ten percent overall reduction of individuals served.





Caption Description: Institutional children with intellectual and developmental disabilities living at the Enid State School, 1950's.

Photography: DHS Photography Archives

# 1,137 Oklahomans with disabilities received services through the Office of Client Advocacy.

The mission of the **Office of Client Advocacy** (OCA) is to ensure the safety, well-being, fair treatment, and individual rights of persons with intellectual disabilities served by DHS as well as children in state custody living in residential facilities. OCA provides advocacy services, administrative reviews, and investigations of abuse, neglect or exploitation of children or vulnerable adults. OCA has three Investigative Units: Children's Investigations, Vulnerable Adult Investigations, and Specialized Investigations. OCA provides grievance resolution for children and adults who are served by DHS programs and investigates complaints of foster parents.

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#### **Office of Client Advocacy**

#### WHO HELP'S PROTECT CHILDREN IN GROUP HOMES AND TREATMENT FACILITIES?

OCA is charged with the responsibility to conduct investigations for children residing outside their own homes other than in foster care, including children living in group homes and mental and behavioral health treatment facilities.

#### CHILDREN'S INVESTIGATIONS IN RESIDENTIAL FACILITIES:

SFY	Total Referrals Received	Referrals Assigned	Substantiated Findings
2014	1,199	371	59
2015	1,510	515	69
2016	1,588	465	89
2017	1,343	413	78

1,343 REPORTS OF ABUSE OR NEGLECT OF CHILDREN IN RESIDENTIAL FACILITIES WERE RECEIVED WITH

413 investigations conducted.
78 of those cases had a confirmed victim.

#### WHO HELPS PROTECT VULNERABLE ADULTS RECEIVING SERVICES?

OCA is also charged with the responsibility of investigating allegations of abuse, neglect or exploitation of Hissom Class Members as well as vulnerable adults receiving services from Developmental Disabilities Services (DDS). In SFY 2017, OCA received 1,248 reports (referrals) alleging abuse or neglect of vulnerable adults. Of those referrals, 526 were investigated.

Referrals and investigations may include multiple victims as well as more than one allegation type such as abuse, neglect, exploitation, financial exploitation, sexual abuse, indecent exposure, sexual exploitation, or verbal abuse.

#### **VULNERABLE ADULT INVESTIGATIONS:**

SFY	Total Referrals Received	Investigations Assigned	Investigations Completed
2015	1,465	554	585
2016	1,342	647	588
2017	1,248	526	605

#### **VULNERABLE ADULT INVESTIGATIONS:**

SFY	2014	2015	2016	2017
Total Allegations Investigated	2,567	3,230	2,180	2,168
Confirmed	871	1,050	897	839

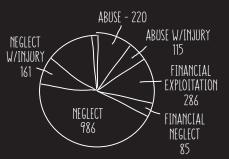


1,248 REPORTS OF ABUSE, NEGLECT OR EXPLOITATION OF VULNERABLE ADULTS WERE RECEIVED WITH 526 RESULTING IN INVESTIGATIONS.

#### VULNERABLE ADULT ALLEGATIONS INVESTIGATED BY OCA IN SFY 2017 BY CLIENT TYPE



#### VULNERABLE ADULT ALLEGATIONS INVESTIGATED BY OCA IN SFY 2017



#### WHAT DOES THE SPECIALIZED INVESTIGATIONS UNIT DO?

A total of 21 cases were completed by the **Specialized Investigations Unit** in SFY 2017. Ten of the investigations were related to allegations of foster parent retaliation, harassment or discrimination. Eight of the investigations resulted in no confirmed findings, while two resulted in a confirmation. When an investigation results in a confirmed finding against an agency employee, the agency is mandated by statute to promptly initiate a plan of corrective discipline which could include dismissal of the employee.

Eleven of the special investigations were administrative, arising from cases involving a death or near death of a child known to DHS and are assigned at the request of the DHS Director. The investigation is to obtain an independent objective review in order to identify any concerns or recommend systemic changes.

#### WHO CAN HELP RESOLVE ISSUES WITH SERVICE DELIVERY?



OCA advocates act as a member of the client's interdisciplinary support team and assist with resolving issues relating to services, quality of life and care. In SFY 2017, **Advocacy Services** were provided to 1,137 clients identifying issues with service delivery and successfully resolving 99 percent of cases through informal problem resolution. Ninety-seven percent of these cases were resolved in 30 days or less.

OCA offers special advocacy to assist individuals eligible for or receiving services from DDS with resolving issues related to services they currently have or may need to obtain. OCA provided special advocacy services to 243 individuals in SFY 2017, 181 of these were new referrals.

OCA also received 72 referrals for special advocacy for children in state custody during SFY 2017. This is an 89 percent increase from the previous fiscal year. OCA is expanding special advocacy services for children in state custody who have disabilities to include assistance with educational issues and concerns.

The OCA financial consulting unit received 15 referrals to audit client personal funds, which resulted in the reimbursement of \$43,040.42 to clients whose funds had been misused, mismanaged or exploited.



#### WHO CAN HELP CHILDREN IN DHS CUSTODY VOICE THEIR CONCERNS ABOUT SERVICES?

The **Grievance Program** provides a process for children in DHS custody and DDS service recipients to voice complaints and seek timely resolution of their concerns. In SFY 2017, 738 grievances were processed which is a 66 percent decrease from SFY 2016. Ninety-three percent of grievances were resolved at the lowest level.

OK Foster Parent Voices is a grievance and complaint process available for foster parents established through legislation in 2014. The program is in partnership with the Oklahoma Commission on Children and Youth, housed in OCA, and overseen by the Foster Care Ombudsman. In SFY 2017, 257 complaints were filed by foster parents with the majority being resolved at the lowest level of informal problem resolution.

#### WHAT ABOUT QUALITY ASSURANCE WHEN IT COMES TO OCA'S INVESTIGATIONS?

The OCA **program review** serves as a formal appeal and quality assurance (QA) process for investigative findings. On May 1, 2016, OCA implemented a protocol for the review of all substantiated cases regardless of whether the Person Responsible for the Care of the Child of Interest (PRFCI) appealed the findings or not. Prior to this time, only cases in which the PRFCI requested a formal appeal were reviewed. This enhanced practice was implemented to ensure a more robust quality assurance process for the investigative division. In SFY 2017, the program review committee conducted 92 reviews; 69 of which were through the formal appeal process and 23 QA program reviews. The committee upheld 86 of the 92 cases resulting in a 6.5 percent overturn rate. The rate was 38 percent in SFY 2015 and 16 percent in 2016.

#### HOW HAS OCA BEEN IMPACTED BY THE BUDGET?

Due to budget reductions in SFY 2016, OCA was forced to cut 17 positions (25 percent) of staff and continued budget restrictions in SFY 2017 did not allow for the replacement of these positions. As with all other DHS divisions and staff, OCA has prioritized safety and well-being of vulnerable persons to take priority over other duties.

The positions cut were responsible for investigations, advocacy, accepting referrals of abuse/neglect, grievances and foster care ombudsman services. OCA has continued to ensure the immediate

safety of children and vulnerable adults through timely initiation of investigations and immediate protective action plans when warranted. However, staff shortages have resulted in increased turnover of staff, decreased timeliness for report completion causing delays in the registry of abusive caretakers, and decreased responsiveness to contract providers.

OCA previously reviewed all grievances filed by children in DHS custody living in group treatment facilities to identify potential issues, trends or unreported abuse/neglect. OCA continues to obtain these documents and track statistical data, but has been unable to continue the process of examining individual grievances due to decreased staffing and other duties within the division. The advocacy program is at maximum capacity and now must scrutinize all requests for special advocacy.





Caption Description: Officials of local chapter of United Cannery, Agricultural, Packing, and Allied Workers of America (UCAPAWA) agricultural union, looking over newspaper clippings. Creek County, Oklahoma. 1940.

Photography: Russell Lee

# The Office of Inspector General completed 1,242 investigations for fraud resulting in recoupment of taxpayer dollars, restitution, or program disqualification.

The **Office of Inspector General** (OIG) oversees and preserves the integrity of DHS programs and services through prevention, detection and prosecution of fraud, waste or abuse by DHS clients, vendors, employees or the public. OIG consists of four units working together to maintain accountability and integrity in DHS programs and services. In addition, OIG provides administrative oversight of the Office of Background Investigation which performs a similar accountability role.

#### **Office of Inspector General**

#### WHO HELPS ENSURE QUALITY CONTROL?

The **Administrative Review Unit** conducts audits of Medicaid and child care assistance cases to ensure accuracy. The unit also screens incoming OIG referrals, conducts preliminary reviews of information received, and then either refers the case for full investigation or forwards the information to the appropriate DHS division for further review. Additionally, the unit reviews interstate data matches to find possible dual participation in SNAP, TANF and Medicaid programs.

#### WHO AUDITS DHS PROGRAMS TO MAKE SURE THEY'RE COMPLIANT?



\$424,063.24
IN CUMULATIVE RESTITUTION
ORDERED FROM 21 INDIVIDUALS
ADJUDICATED IN CRIMINAL COURT

The **Internal Audit Unit** helps ensure accountability and compliance by conducting a variety of audits of DHS programs, contracts and subcontractors. The unit also conducts audits of licensed child care facilities to ensure compliance with regulations and policies as well as determining legitimacy of claims filed for reimbursement.





#### WHO HELPS KEEP DHS INFORMATION SECURE?

The **Information Security Management Unit** investigates incidents related to DHS information and technological devices that store information. This unit continues to develop a more comprehensive information security awareness program for DHS and update information security policy to address changing technology uses.

#### WHO CONDUCTS INVESTIGATIONS INTO POSSIBLE EMPLOYEE MISCONDUCT?

The **Investigations Unit** conducts investigations into allegations of benefit program fraud and allegations of DHS employee misconduct. This unit continues to implement a redesigned investigative case management system that is more reliable and accessible, and includes a more robust reporting capability which helps OIG meet new USDA Food and Nutrition Services reporting requirements.



#### WHO PERFORMS BACKGROUND CHECKS FOR THE AGENCY?



The **Office of Background Investigations** conducts an average of 60,000 background checks annually for licensed child care providers, child welfare resources and families, and DHS employees who are granted certain access and review privileges. The unit continues to update policy to reflect new state and federal laws and regulations aimed at enhancing the frequency and thoroughness of background checks.

#### HOW HAS OIG BEEN IMPACTED BY THE BUDGET?

Because of budget cuts and the resulting loss of staff positions, fewer fraud investigations were completed in SFY 2017 and implementation of security awareness initiatives and processing times for background checks were delayed.



# DHS staff statewide participate in various levels of Lean Six Sigma training modules providing the framework for breakthrough process improvement using the 'Define, Measure, Analyze, Improve and Control' (DMAIC) method.

LEAN/SIX SIGMA

age 102 · Continuous Quality Improvement

# CONTINUOUS QUALITY IMPROVEMENT SAVING TIME AND MONEY

Since 2005, the Oklahoma Department of Human Services has used business industry-proven Lean Six Sigma methodology to improve efficiencies and cost-effectiveness in delivering quality human services. The budget crisis the state and the agency have faced over the past several years makes improvement initiatives even more critical as services, and the staff to deliver them, continue to suffer repeated reductions.

DHS formed the Office of Performance Outcomes & Accountability to help the agency drive a culture of continuous quality improvement into everything the agency does while at the same time making the job more manageable for a reduced workforce.









The DHS Quality Standards campaign was launched in 2015 and continues to empower employees by providing tools that promote four main agency standards: safety, integrity, professionalism and compassion.

Within the last 18-24 months, DHS staff completed 33 process improvement projects resulting in \$9,033,630 in hard savings or immediate reductions to cost, and an additional \$1,144,841 in soft



The Improvement Pipeline was launched in 2016 and is open to all staff with the sole purpose of improving the efficiency and quality of the work being done throughout the agency. Staff can now communicate issues, pain points and potential solutions with agency and division leadership.

savings, or savings in future time spent or costs avoided. This is money and time that are being used to better advantage elsewhere within the agency. These projects have also been critical to improving policy and procedures to help DHS become more efficient in serving clients and improving safety for vulnerable children and adults.



WITHIN THE LAST 18-24 MONTHS,
DHS STAFF COMPLETED 33 PROCESS
IMPROVEMENT PROJECTS RESULTING
IN \$9,033,630 IN HARD SAVINGS
OR IMMEDIATE REDUCTIONS TO COST, AND
AN ADDITIONAL \$1,144,841
IN SOFT SAVINGS, OR SAVINGS IN
FUTURE TIME SPENT OR COSTS AVOIDED.



DHS conducts a full strategic planning cycle with the goal of complete strategic alignment within the agency where all divisions work together toward the agency's mission. The reporting of outcome indicators, descriptions of action plans and programs, and accountability are all key components to the strategic planning process.

#### CONTINUOUS QUALITY IMPROVEMENT CONT.'D

While we are proud of these accomplishments, the very nature of continuous quality improvement means there is always a better way. Oklahomans deserve the best possible service with the resources available, and DHS holds an unwavering commitment to continuing to reduce costs, streamline processes, and improve service. That is our Quality Service pledge.

Among our improvement projects, a few stand out:

- As part of the Centrex Telepay Project, we identified and disconnected 482 phones that were no longer needed. The hard savings for the 482 phones was \$88,330 annually.
- Through a project involving our nurses in Aging Services, we discovered that using Random Moment in Time Study approaches to more accurately capture how they spent their time among various program areas, we could better leverage federal match rates, recouping 72 percent Federal Financial Participation versus the 50 percent FFP previously being claimed, translating to an annual savings to Oklahoma taxpayers of \$668,380.
- Another project analyzed why Title IV-E eligible child welfare funding was declining, despite broadened scope of eligibility criteria for homes to qualify for adoption assistance.

#### CONTINUOUS QUALITY IMPROVEMENT CONT.'D

The team determined that a critical report to verify reimbursable IV-E eligible expenditures was not being transmitted to the Federal Government. Once this error was fixed, the agency was able to accurately report IV-E and recoup **\$4.4M** in federal funding in FY 15.

- A project on cell phone tracking produced a unified process and electronic system for tracking cell
  phones, allowing the agency to eliminate unnecessary cellular device service, for a savings of \$172,800
  annually. This project team also identified duplicative or otherwise unnecessary cellular information
  security accounts that, once eliminated, are saving the agency another \$18,000 per year.
- Focusing on service to customers, another project reduced the automatic closure of SNAP mid-year renewals by almost half. The analysis showed that clients did not know the necessary information to keep their benefits when calling the OKDHSLive call centers. Other issues included lack of standards for client contact information, no methods for clients to reach the worker responsible for their case, and worker difficulty in finding client case information. As a result, the team implemented tools that allow phone agents to quickly verify necessary information so all phone agents can address the needs of clients the first time they call. The number of client follow-up calls and office contacts were reduced as well as the related time staff had to devote to case follow-up.
- A project completed in 2014 reduced the number of days it takes to process Emergency Order SNAP
  requests from an average of seven days to same-day processing. What this means in practical terms is
  qualifying families with no income and no employment may receive food benefits on the same day
  they come into a DHS county office, saving staff time while delivering vastly superior service to
  those in need.



1166 EMPLOYEE POSITIONS HAVE BEEN CUT FROM DHS OUTSIDE CHILD WELFARE SERVICES SINCE 2014.

#### ACCOUNTABILITY

State and federal monies fund the DHS programs. State funds are used to meet federal matching requirements, maintain programs and services, and fund programs that have limited or no federal funding.

#### VOLUNTARY BUY OUTS AND REDUCTIONS IN FORCE SFY 2014 - SFY 2016:

Total Positions Eliminated	1,205
All other staff	813
Shelters	39
NORCE & SORC	353

#### FULL-TIME PERMANENT EMPLOYEES:

Division	SFY 2017
Adult and Family Services	1,443
Adult Protective Services	140
Aging Services	156
Child Care Services	125
Child Support Services	403
Child Welfare Services	2,950
Developmental Disabilities Services	412
Program Support	480
Total	6,109

#### HEADCOUNT (FULL-TIME PERMANENT EMPLOYEES AND NON-CHILD WELFARE SERVICES EMPLOYEES)

FY	Total Full-time Employees	Total Non-CWS	Total CWS
2014	7,017	4,519	2,280
2015	7,003	4,364	2,717
2016	6,571	3,350	2,946
2017	6,109	3,159	2,950

This does not include vacancies, part-time or temporary employees.



#### STATISTICAL HIGHLIGHTS

PROGRAMS*	FY 2017	FY 2016	PERCENT CHANGE
DHS Expenditures (SFY)	\$2,234,175,196	\$2,308,933,454	-3.24%
Adult and Family Services, Child Care Services Provided (SFY)	44,942	31,713	41.71%
Adult and Family Services, SNAP (Food Stamp) Program, Persons (SFY)	850,855	874,873	-2.75%
Adult and Family Services, SNAP (Food Stamp) Program, Value (SFY)	\$890,126,021	\$884,328,557	0.66%
Adult and Family Services, SNAP (Food Stamp), Cases (SFY)	385,813	389,029	-0.83%
Adult and Family Services, State Supplemental, Persons (MA)	88,975	87,866	1.29%
Adult and Family Services, State Supplemental, Expenditures (SFY)	\$48,114,138	\$29,170,765	64.94%
Adult and Family Services, TANF, Cases (SFY)	11,140	11,832	-5.85%
Adult and Family Services, TANF, Expenditures (SFY)	\$19,163,981	\$17,733,636	8.07%
Adult and Family Services, TANF, Persons (SFY)	24,789	28,651	-13.48%
Adult Protective Services, Investigations (SFY)	8,499	9,821	-13.46%
Adult Protective Services, Substantiated (SFY)	3,486	4,378	-20.37%
Aging Services, ADvantage Meals (SFY)	3,898,979	3,765,501	3.54%
Aging Services, Congregate Meals (SFY)	1,355,850	1,494,956	-9.31%
Aging Services, Home Delivered Meals (SFY)	1,315,232	1,370,177	-4.01%
Child Care, Licensed Capacity (MA)	122,253	124,200	-1.57%
Child Care, Licensed Facilities (MA)	3,317	3,438	-3.52%
Child Support Services, Cases (QA)	201,459	206,701	-2.54%
Child Support Services, Collections (SFY)	\$360,171,081	\$367,754,145	-2.06%
Child Welfare Services, Adoptions Finalized (SFY)	2,577	2,244	14.84%
Child Welfare Services, Adoptions Subsidies (EOFY)	18,417	16,611	10.87%
Child Welfare Services, Child Protective Services, Substantiated (SFY)	15,289	15,187	0.67%
Child Welfare Services, Out-of-Home Care Placements (EOFY)	9,923	9,984	-0.61%
Developmental Disabilities Services, Home- and Community-Based Waiver Services (EOFY)	5,390	5,560	-3.06%

SFY = State Fiscal Year MA = Monthly Average EOFY = End of Fiscal Year QA = Quarterly Average Statistical tables for DHS programs are online – www.okdhs.org/Library

\* Not all inclusive

#### DHS BUDGET AND EXPENDITURES

PROGRAM/ACTIVITY         FY 2017 BUDGET         FY 2017 EXPENDITURES         FY 2016 EXPENDITURES         PECENT CHANGE           Total DHS Budget, Expenditures and Food Program Values         \$2,311,221,229         \$2,234,175,196         \$2,308,933,454         -3.2           Commodity Values         N/A         \$17,574,630         \$24,081,199         -28.7           Adult and Family Services         \$1,281,350,238         \$1,223,818,605         \$12,37,870,37         -0.8           Administration         \$473,331         \$412,821         \$564,151         -26.8           Programs Management         \$2,047,570         \$2,005,251         \$2,262,745         -11.4           SNAP Admin and Contracts         \$9,756,573         \$7,270,470         \$8,218,005         -11.5           TANF Programs         \$21,597,582         \$19,163,981         \$17,733,636         8.1           TANF Programs fulltative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6					
Commodity Values         N/A         \$17,574,630         \$24,641,199         -28.7           Adult and Family Services         \$1,261,350,238         \$1,223,818,605         \$1,233,787,037         -0.8           Administration         \$473,331         \$412,821         \$564,151         -26.8           Programs Management         \$2,047,570         \$2,005,251         \$2,262,745         -11.4           SNAP Admin and Contracts         \$9,756,573         \$7,270,470         \$8,218,005         -11.5           TANF Programs         \$21,597,582         \$19,163,981         \$17,73,636         8.1           TANF Work Activities         \$25,331,904         \$20,763,949         \$27,653,837         -24.9           Marriage Initiative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.3           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,389,000	PROGRAM/ACTIVITY	FY 2017 BUDGET	FY 2017 EXPENDITURES	FY 2016 EXPENDITURES	PERCENT CHANGE
Adult and Family Services         \$1,261,350,238         \$1,223,818,605         \$1,233,787,037         -0.8           Administration         \$473,331         \$412,821         \$564,151         -26.8           Programs Management         \$2,047,570         \$2,005,251         \$2,262,745         -11.4           SNAP Admin and Contracts         \$9,756,573         \$7,270,470         \$8,218,005         -11.5           TANF Programs         \$21,597,582         \$19,163,981         \$17,733,636         8.1           TANF Work Activities         \$25,331,904         \$20,763,949         \$27,653,837         -24.9           Marriage Initiative Respite         \$0         \$20         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000	Total DHS Budget, Expenditures and Food Program Values	\$2,311,221,229	\$2,234,175,196	\$2,308,933,454	-3.2
Administration         \$473,331         \$412,821         \$564,151         -26.8           Programs Management         \$2,047,570         \$2,005,251         \$2,262,745         -11.4           SNAP Admin and Contracts         \$9,756,573         \$7,270,470         \$8,218,005         -11.5           TANF Programs         \$21,597,582         \$19,163,981         \$17,733,636         8.1           TANF Work Activities         \$25,331,904         \$20,763,949         \$27,653,837         -24.9           Marriage Initiative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           ABS Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         <	Commodity Values	N/A	\$17,574,630	\$24,641,199	-28.7
Programs Management         \$2,047,570         \$2,005,251         \$2,262,745         -11.4           SNAP Admin and Contracts         \$9,756,573         \$7,270,470         \$8,218,005         -11.5           TANF Programs         \$21,597,582         \$19,163,981         \$17,733,636         8.1           TANF Work Activities         \$25,331,904         \$20,763,949         \$27,653,837         -24.9           Marriage Initiative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs	Adult and Family Services	\$1,261,350,238	\$1,223,818,605	\$1,233,787,037	-0.8
SNAP Admin and Contracts         \$9,756,573         \$7,270,470         \$8,218,005         -11.5           TANF Programs         \$21,597,582         \$19,163,981         \$17,733,636         8.1           TANF Work Activities         \$25,331,904         \$20,763,949         \$27,653,837         -24.9           Marriage Initiative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$12,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management	Administration	\$473,331	\$412,821	\$564,151	-26.8
TANF Programs         \$21,597,582         \$19,163,981         \$17,733,636         8.1           TANF Work Activities         \$25,331,904         \$20,763,949         \$27,653,837         -24.9           Marriage Initiative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff <td>Programs Management</td> <td>\$2,047,570</td> <td>\$2,005,251</td> <td>\$2,262,745</td> <td>-11.4</td>	Programs Management	\$2,047,570	\$2,005,251	\$2,262,745	-11.4
TANF Work Activities         \$25,331,904         \$20,763,949         \$27,653,837         -24.9           Marriage Initiative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protecti	SNAP Admin and Contracts	\$9,756,573	\$7,270,470	\$8,218,005	-11.5
Marriage Initiative Respite         \$0         \$200         \$49,640         -99.6           Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$0,431,569         \$9,343,769         \$11,872,492         -21.3           Executive a	TANF Programs	\$21,597,582	\$19,163,981	\$17,733,636	8.1
Energy Assistance         \$29,589,400         \$27,432,345         \$23,409,406         17.2           Refugee Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9	TANF Work Activities	\$25,331,904	\$20,763,949	\$27,653,837	-24.9
Refuge Programs         \$2,056,928         \$1,209,629         \$1,505,212         -19.6           Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9	Marriage Initiative Respite	\$0	\$200	\$49,640	-99.6
Programs for the Aged, Blind and Disabled         \$48,459,346         \$48,114,138         \$29,170,765         64.9           AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Energy Assistance	\$29,589,400	\$27,432,345	\$23,409,406	17.2
AAB Sales Tax Relief         \$3,400,000         \$3,271,640         \$3,218,800         1.6           Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Refugee Programs	\$2,056,928	\$1,209,629	\$1,505,212	-19.6
Day Care Payments         \$133,890,000         \$120,789,040         \$124,853,645         -3.3           EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Programs for the Aged, Blind and Disabled	\$48,459,346	\$48,114,138	\$29,170,765	64.9
EBT SNAP         \$890,045,000         \$885,012,018         \$879,987,846         0.6           Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	AAB Sales Tax Relief	\$3,400,000	\$3,271,640	\$3,218,800	1.6
Business Process Management         \$16,039,769         \$12,980,972         \$14,372,599         -9.7           Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Day Care Payments	\$133,890,000	\$120,789,040	\$124,853,645	-3.3
Children with Special Health Care needs         \$1,811,495         \$1,319,370         \$1,486,848         -11.3           Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	EBT SNAP	\$890,045,000	\$885,012,018	\$879,987,846	0.6
Operations Management         \$688,830         \$352,007         \$805,717         -56.3           Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Business Process Management	\$16,039,769	\$12,980,972	\$14,372,599	-9.7
Regional Offices and Field Staff         \$76,162,510         \$73,720,773         \$98,494,185         -25.2           Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Children with Special Health Care needs	\$1,811,495	\$1,319,370	\$1,486,848	-11.3
Adult Protective Services         \$10,131,569         \$9,343,769         \$11,872,492         -21.3           Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Operations Management	\$688,830	\$352,007	\$805,717	-56.3
Executive and Admin Services         \$387,306         \$268,589         \$436,251         -38.4           Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Regional Offices and Field Staff	\$76,162,510	\$73,720,773	\$98,494,185	-25.2
Community Adult Protective Services         \$643,699         \$729,883         \$487,033         49.9           AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Adult Protective Services	\$10,131,569	\$9,343,769	\$11,872,492	-21.3
AIDS Coordination Information Services         \$685,722         \$575,019         \$860,071         -33.1	Executive and Admin Services	\$387,306	\$268,589	\$436,251	-38.4
	Community Adult Protective Services	\$643,699	\$729,883	\$487,033	49.9
Field Staff \$8,414,842 \$7,770,278 \$10,089,137 -23.0	AIDS Coordination Information Services	\$685,722	\$575,019	\$860,071	-33.1
	Field Staff	\$8,414,842	\$7,770,278	\$10,089,137	-23.0

Statistical tables for DHS programs are online – www.okdhs.org/Library

#### DHS BUDGET AND EXPENDITURES (CONT.'D)

PROGRAM/ACTIVITY	FY 2017 BUDGET	FY 2017 EXPENDITURES	FY 2016 EXPENDITURES	PERCENT CHANGE
Aging Services	\$124,735,923	\$122,639,402	\$132,236,620	-7.3
Administration	\$685,508	\$651,252	\$742,916	-12.3
Special Unit on Aging	\$2,908,221	\$2,727,273	\$2,961,508	-7.9
Grants	\$684,514	\$423,616	\$1,044,056	-59.4
Seniors' Farmers Market	\$43,231	\$43,230	\$66,546	-35.0
ADvantage Administration	\$4,631,684	\$4,344,560	\$4,539,600	-4.3
Support Services	\$168,304	\$201,068	\$196,335	2.4
Personal Care - State Office	\$857,687	\$750,722	\$1,205,341	-37.7
Personal Care - County Offices	\$8,070,283	\$6,886,411	\$8,775,002	-21.5
Transportation Program	\$2,779,293	\$641,729	\$2,288,315	-72.0
211 Call Center	\$1,900	\$132,904	\$820,156	-83.8
Nutrition & Social Services	\$24,225,884	\$23,401,707	\$24,441,679	-4.3
Older American Volunteer Program	\$0	\$91,922	\$596,135	-84.6
Adult Day Services	\$3,693,874	\$3,451,893	\$3,690,363	-6.5
Personal Care - State Share Title XIX	\$5,041,790	\$4,664,153	\$4,839,823	-3.6
ADvantage Waiver - State Share Title XIX	\$69,517,665	\$73,055,517	\$74,553,420	-2.0
Interactive Voice Response (IVR)	\$1,066,085	\$959,206	\$1,224,959	-21.7
N.F. Sales Tax Relief	\$350,000	\$208,840	\$236,160	-11.6
Non-Waivered Services	\$10,000	\$3,398	\$14,308	-76.2
Child Care Services	\$18,193,145	\$16,836,574	\$20,852,782	-19.3
Administration	\$2,970,587	\$2,335,147	\$3,496,066	-33.2
Quality Initiatives	\$6,653,451	\$6,707,499	\$7,620,040	-12.0
County Offices	\$7,315,799	\$7,065,600	\$7,675,064	-7.9
Residential Services	\$655,996	\$0	\$580,730	-100.0

Statistical tables for DHS programs are online - www.okdhs.org/Library

#### DHS BUDGET AND EXPENDITURES (CONT.'D)

PROGRAM/ACTIVITY	FY 2017 BUDGET	FY 2017 EXPENDITURES	FY 2016 EXPENDITURES	PERCENT CHANGE
School Readiness	\$597,312	\$728,328	\$1,480,881	-50.8
Child Support Services	\$56,193,799	\$49,104,598	\$61,217,476	-19.8
Administration	\$8,471,027	\$6,546,528	\$9,770,396	-33.0
Field Staff	\$23,526,225	\$21,719,165	\$25,549,313	-15.0
District Attorney Contracts	\$4,851,133	\$4,896,103	\$7,417,122	-34.0
Private Contracts	\$2,342,223	\$2,147,189	\$3,308,289	-35.1
Grants	\$109,981	\$100,586	\$122,633	-18.0
Support Service Contract	\$13,340,982	\$10,868,230	\$11,640,844	-6.6
Administrative Contracts	\$3,552,228	\$2,826,797	\$3,408,879	-17.1
Child Welfare Services	\$483,575,869	\$461,859,021	\$457,751,681	0.9
Executive Services	\$563,090	\$558,691	\$538,255	3.8
Partnership Services	\$1,698,562	\$1,500,314	\$1,024,387	46.5
Operations and Business Process	\$5,772,508	\$5,478,127	\$6,359,547	-13.9
Hotline	\$4,743,270	\$6,550,626	\$7,306,835	-10.3
Bridge and Consolidated Resources	\$67,263,136	\$63,064,666	\$61,414,764	2.7
Field Services	\$153,215,632	\$142,470,330	\$143,407,855	-0.7
Program Services	\$19,057,830	\$15,594,064	\$16,246,505	-4.0
Quality Assurance & Staff Development	\$7,007,882	\$5,629,470	\$7,147,542	-21.2
KIDS, Technology & Governance	\$3,217,276	\$2,537,912	\$3,254,233	-22.0
Oklahoma Children Services	\$12,612,144	\$11,960,077	\$11,974,486	-0.1
DHS Group Homes & Shelters	\$4,556,854	\$4,636,462	\$7,907,312	-41.4
Family Foster Care Payments	\$50,968,412	\$48,440,785	\$50,246,271	-3.6
Specialized Placement Foster Care Payments	\$29,854,579	\$20,701,126	\$24,916,105	-16.9
Adoption Assistance Payments	\$107,911,749	\$114,966,973	\$101,406,028	13.4

Statistical tables for DHS programs are online – www.okdhs.org/Library

#### DHS BUDGET AND EXPENDITURES (CONT.'D)

PROGRAM/ACTIVITY	FY 2017 BUDGET	FY 2017 EXPENDITURES	FY 2016 EXPENDITURES	PERCENT CHANGE
Foster Care Special Medical	\$629,333	\$942,832	\$1,611,522	-41.5
Targeted Case Management XIX	\$13,200,000	\$15,860,927	\$11,688,887	35.7
Behavior Outpatient Services	\$1,303,612	\$965,637	\$1,301,147	-25.8
Developmental Disabilities Services	\$213,711,081	\$199,736,016	\$223,887,525	-10.8
Administration	\$5,016,084	\$4,603,127	\$6,204,221	-25.8
Resource Centers	\$13,025,509	\$13,094,596	\$16,899,890	-22.5
Area Services	\$25,881,484	\$23,088,673	\$28,240,339	-18.2
Community Services	\$169,788,004	\$158,949,620	\$172,543,075	-7.9
Program Support	\$143,329,605	\$119,014,046	\$121,087,766	-1.7
Executive Offices	\$35,374,045	\$23,979,859	\$22,215,782	7.9
Office of Communications	\$1,932,559	\$1,687,679	\$1,528,602	10.4
Finance Services	\$12,694,569	\$10,470,404	\$10,857,078	-3.6
Support Services	\$46,510,239	\$38,973,170	\$41,595,060	-6.3
Data Services	\$38,881,989	\$37,011,263	\$37,473,940	-1.2
Office of Business Quality	\$2,007,331	\$1,832,526	\$2,305,233	-20.5
Legal Services	\$4,677,954	\$4,296,788	\$4,489,790	-4.3
Oklahoma Developmental Disabilities Council	\$1,250,919	\$762,357	\$622,282	22.5
Construction & Special Projects	\$0	\$14,248,536	\$21,598,876	-34.0

Commodity values are the amount distributed plus cases damaged and long/short cases. Statistical tables for DHS programs are online – www.okdhs.org/Library

SNAP (Food Stamps) are actual expenditures.

#### **CONTRIBUTORS**



CONCEPT, DESIGN & LAYOUT

Christina Guadalupe is a talented graphic designer who brings more than 20 years of experience to the DHS Office of Communications. Christina presented great ideas and crafted infographics and charts to better illustrate the vital data presented throughout this report. She also helped design concepts which were later transformed into the overall design.

Caroline Miller is a master-level photographer who has captured agency-related images for nearly a decade. Caroline helps visually communicate real-life stories of the Oklahomans we serve. She was a key player in the concept development of this report and contributed skillful imagery combining historical photographs with silhouettes to visually present a hopeful future.

Tammy Rogers is an artist, graphic designer and supervisor of DHS Design & Photography Services. She has shared her talents with the agency for nearly 15 years and develops smart, creative, high-quality, materials that skillfully communicate messages to target audiences. For this report, Tammy contributed to the development

of the overall concept, designed the layout, and added elements from other contributors throughout.

#### DATA & STATISTICS

Jennifer Dalton is the Research and Evaluation Administrator with the DHS Office of Performance Outcomes and Accountability. Jennifer has been with the agency since 2001. She and her team compiled and validated all data presented in this report and the accompanying statistical tables which help tell the story of the Oklahomans DHS serves.

#### FEATURED STORIES

We'd like to give a special shoutout to the following individuals who shared their personal stories published inside this report: Ron & Winnie Covill Barbara Young The Jones Family Bryan Parker

#### PRINTING & PRODUCTION

Monica Rouner oversees DHS Print Services and has been with the agency for 16 years. The Print Shop, which includes Billy Cox, Jeff Dees, Buck Easterly, Ray Robinson and Robert Simmons helps produce high-quality print media, including this annual report.

#### WRITING & EDITING

**Debra Martin** has served as a communications manager for DHS since 2011. The theme for this annual report follows the agency's 80th anniversary video which

Debra wrote and produced. For this report, she worked with Adult and Family Services, Child Care Services and the Office of Inspector General on their sections and also produced video stories for Child Welfare Services, the Office of Community and Faith Engagement and the DHS Tribal Affairs Liaison as well as retrieving archived photographs from the National Archives and the Oklahoma Historical Society.

Sheree Powell is the Director of Communications and Community Relations for DHS and has been with the agency for 34 years. She has the privilege of leading a team of extremely talented communications, graphic design, video, photography and web professionals. For most of her career, Sheree has been involved in the production of the DHS annual report and serves as its chief editor, providing her team with vision and

valuable knowledge as the agency tells its story year after year.

Jeff Wagner has worked as a DHS communications professional for nearly a decade and has served as a voice for important agency programs and services. His contribution to this report includes content for Aging Services, Child Support Services, and Continuous Quality Improvement, as well as special video features on the Aging Services transportation grant and the agency's continuous improvement efforts.

Casey White has been with the agency for almost 16 years and is a communications manager focusing on Child Welfare Services and social media. Casey is grateful for the opportunity to share stories of both our amazing staff and those we serve. Casey contributed to the editing and proofing process of this annual report.



## WE ARE THAT AGENCY