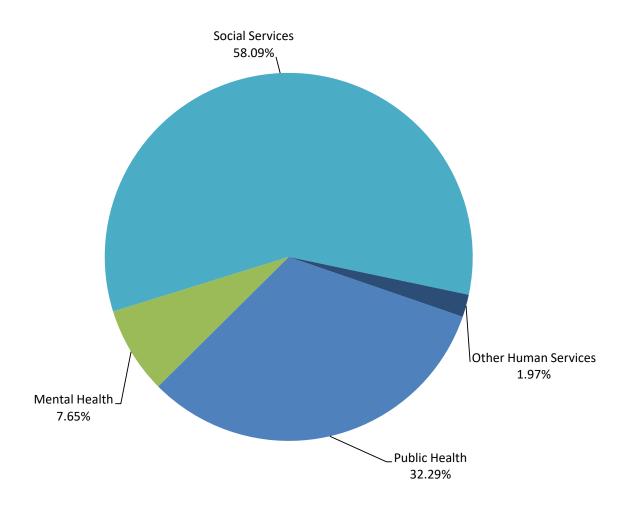
# **Human Services Recommended Budget**



Business Area	2016-2017 Actual Expenditures	FY2017-18 Original Budget	FY2017 12 Month Estimate	FY2018-19 Department Requested	FY2018-19 Manager Recommended
Public Health	\$22,713,030	\$26,034,159	\$25,870,409	\$26,338,993	\$26,059,953
Mental Health	\$6,217,381	\$6,131,224	\$6,131,224	\$6,268,208	\$6,171,224
Social Services	\$55,900,793	\$62,347,767	\$41,278,748	\$48,829,127	\$46,891,106
Other Human Services	\$1,720,402	\$1,170,732	\$1,687,452	\$2,029,328	\$1,593,017
Grand Total	\$86,551,606	\$95,683,882	\$74,967,834	\$83,465,656	\$80,715,300

## **PUBLIC HEALTH**



**GOAL 2 HEALTH AND WELL-BEING FOR ALL:** Improve the quality of life across the lifespan through protecting the health of community, reducing barriers to access services and ensuring a network of integrated health and human services available to people in need.

#### **MISSION**

The Durham County Health Department's mission is to work with our community to prevent disease, promote health, and protect the environment.

#### **DEPARTMENT DESCRIPTION**

The department is comprised of seven divisions: Leadership and Business Management, Allied Health, Health Education Community Transformation, Dental, Medical Services, Nutrition, and Environmental Health. These divisions work collaboratively to accomplish the following goals:

- Promote optimal health and wellness of all;
- Decrease premature death rates;
- Prevent and control communicable disease; and
- Maximize organization productivity.

In addition to conducting the day-to-day work of public health, the department is also focusing on: workforce development; communication and marketing; technology; access to medical and dental care; obesity and chronic illness; and education.

		2016-2017	2017-2018	2017-2018	2018-2019	2018-2019
	Summary	Actual	Original	12 Month	Department	Manager
		Exp/Rev	Budget	Estimate	Requested	Recommended
•	Expenditures					
	Personnel	\$13,664,530	\$16,034,043	\$15,731,520	\$16,630,708	\$16,480,366
	Operating	\$8,742,629	\$10,000,116	\$10,126,866	\$9,708,285	\$9,579,587
	Capital	\$305,874	\$0	\$12,023	\$0	\$0
	Total Expenditures	\$22,713,033	\$26,034,159	\$25,870,409	\$26,338,993	\$26,059,953
•	Revenues					
	Intergovernmental	\$8,878,907	\$6,758,209	\$6,622,714	\$6,422,727	\$6,422,727
	Contrib. & Donations	\$2,073	\$3,000	\$1,047	\$0	\$0
	Service Charges	\$444,089	\$359,330	\$361,418	\$377,900	\$377,900
	Other Revenues	\$177,388	\$52,300	\$93,428	\$34,000	\$34,000
	Total Revenues	\$9,502,457	\$7,172,839	\$7,078,607	\$6,834,627	\$6,834,627
	Net Expenditures	\$13,210,576	\$18,861,320	\$18,791,802	\$19,504,366	\$19,225,326
	FTEs	212.46	234.47	234.47	235.55	233.55

#### 2018-19 BUDGET HIGHLIGHTS

- Moved funds from Child Health Assessment and Prevention Program, including 3 FTEs to School Health to create 3 new School Health Nurse FTEs.
- Eliminated 3 FTEs in the Diabetes Coalition Project to offset revenue decline
- Environmental Health Specialist (General Inspections/Food & Lodging Program) 1 FTE
- Registered Environmental Health Specialist 2 FTES
- Increase Pharmacist hours from .52 to .60 FTE = .08 FTE
- Reduced agency-wide contracted services and realigned dollars
- Eliminated 1 FTE for the Dental van driver and contracted the service.
- \$205,500 of non-profit funds, agencies are listed in the Appendix under Goal 2.

Program Budget	FY2017-18 Approved Budget	FY2017-18 Approved FTE	FY2018-19 Department Request Budget	FY2018-19 Department Request FTE	Recommended	FY2018-19 Manager Recommended FTE
Public Health						
Allied Health	\$1,955,696	12.52	\$1,801,629	12.60	\$1,801,629	12.60
Dental	\$1,092,549	10.00	\$1,171,318	9.00	\$1,171,318	9.00
Environmental Health	\$1,723,300	24.00	\$1,936,359	27.00	\$1,936,359	27.00
Health Education & Community Transformation	\$3,339,861	30.00	\$3,229,802	30.00	\$3,239,802	30.00
Leadership and Business Management	\$4,365,036	43.60	\$4,644,437	45.60	\$4,355,397	43.60
Medical Services	\$11,506,014	81.85	\$11,598,875	83.85	\$11,598,875	83.85
Nutrition	\$2,051,703	32.50	\$1,956,573	27.50	\$1,956,573	27.50
Grand Total	\$26,034,159	234.47	\$26,338,993	235.55	\$26,059,953	233.55

#### **Allied Health**

**Program Purpose**: The purpose of the Allied Health program is to support the department by providing laboratory and pharmacy services. The laboratory provides testing and results that aid in the diagnosis, treatment, and prevention of disease. The pharmacy dispenses medication used in the treatment and prevention of disease.

**Program Description**: Allied Health is comprised of the laboratory and pharmacy operated within the department. The Laboratory provides phlebotomy and specimen procurement services for the department's Clinics, Lincoln Community Health Center, and Community Outreach Events. Laboratory tests are performed by trained Laboratory Technicians who have demonstrated competency. The Pharmacy provides medication services for Clinics, DCo Wellness Clinic, and DCo Detention Center. Medications are filled and dispensed by licensed Pharmacists and a Pharmacy Technician who interpret clinician orders, monitor for possible drug interactions, and provide medication counseling to patients. The Pharmacy maintains a comprehensive formulary enabling treatment and prevention options for a variety of diseases and conditions.

#### **Dental**

**Program Purpose**: The Dental Division provides access to comprehensive dental care for uninsured and underinsured children and youth through 20 years of age and pregnant women.

**Program Description**: The Dental Program provides oral health services to address unmet needs. Services are provided onsite in a state of the art dental clinic and in a mobile dental unit, the Tooth Ferry, that visits specific DPS elementary schools. Staff members also provide dental screenings and oral health education sessions.

#### **Environmental Health**

**Program Purpose**: The Environmental Health Division enforces laws & regulations that pertain to food & lodging, institutions, child cares, onsite waste treatment, water, and many other health-related services and industries. Team members educate and regulate operators. They inform, educate and empower Durham County residents and visitors about issues that affect their health. Information provided by Environmental Health and Local Public Health Emergency Preparedness allows people to make informed decisions that impacts their personal health as well as the health of their families.

**Program Description**: Environmental Health enforces North Carolina Administrative Codes to ensure that a variety of establishments, waste treatment systems, and drinking water wells are operated and maintained in a manner that protects public health and the environment. Almost all Environmental Health regulatory activities are State mandated via North Carolina General Statutes (State Law). Environmental Health staff issue establishment and system operational permits. Staff also train and educate operators on proper sanitary and environmentally correct practice.

#### **Health Education Community Transformation**

**Program Purpose**: The Health Education Community Transformation Division educates, mobilizes, assesses, and creates policy, system and environmental change to positively influence the health of Durham County residents.

**Program Description**: The Division of Health Education Community Transformation addresses health by influencing the decisions and actions that individuals, groups and communities make that ultimately promote health and prevent violence, injury, disease and disability. Health Education also aims to influence policies, systems and the environment to promote health. Staff members provide in-person and virtual education, screenings, and evidence-based programs to individuals, neighborhoods, faith-based organizations, and workplaces.

#### **Leadership and Business Management**

Program Purpose: The Leadership and Business Management program provides direction and sound business management

services in order to achieve effective, efficient, high quality services and fulfill the department's mission.

**Program Description**: The Leadership and Business Management Division provides support to all divisions and programs in the department. These functions include administrative oversight of all public health domains including finance, purchasing, patient registration and billing, IT, registering of vital records, contracts services, and facilities services.

#### **Medical Services**

**Program Purpose**: The Medical Services Division investigates, screens, educates and provides treatment and other clinical care to those who either seek care or are referred for care.

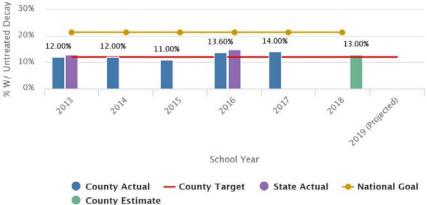
**Program Description**: Medical Services Division comprises the largest component of the department's budget providing mandated and other services that address unmet needs of our community. The division's staff is a multidisciplinary staff matrix of providers (advanced practice providers and contract physicians), nurses, social workers, and ancillary staff. The primary program areas are Care Coordination for Children, Detention Facility Health Services, Pregnancy Care Management, Refugee Health, School Health, Women's Health Clinic, and Communicable Disease Control.

#### Nutrition

Program Purpose: The Nutrition Division provides population-based and individual clinical services, so Durham County residents can learn and put into practice eating and exercise behaviors that lead to disease prevention and optimal health. Program Description: The Nutrition Division and the Durham Diabetes Coalition/Chronic Care Initiative (DDC/CCI) conduct individual and population-based services. Clinical services are safety net services for Durham residents who are uninsured or underinsured. These services include individual counseling and/or guidance to clients for whom guidance can prevent, treat or stabilize a diagnosed condition, such as diabetes, hypertension, heart disease, and obesity. The Durham's Innovative Nutrition Education (DINE) program teaches students in qualifying schools about nutrition and physical activity to move towards healthier behaviors. DINE and DDC/CCI community programs conducts education at community sites and works on policy, systems, and environmental changes that impact the nutrition and physical environment in eligible childcare facilities, food retail markets, faith-based organizations, and community sites.

#### **PERFORMANCE MEASURES:**

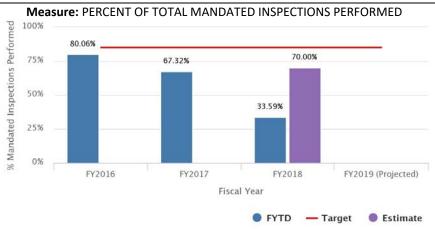
Measure: PERCENT OF DURHAM PUBLIC SCHOOL KINDERGARTNERS WITH UNTREATED DENTAL DECAY



Measure description: Dental decay is one of the most common chronic infectious diseases among children that if left untreated can result in problems with speaking, playing, and learning. Children from low income households experience higher untreated tooth decay. Dental decay is measured by visual examination by a public health dental hygienist. If dental decay is found, the student is referred for dental care at public health or with their dentist. This measure aligns with County Strategic Plan Goal 2, Objective 2 - Healthy Children and Youth - support the optimal growth and development of children and youth.

**Trend explanation:** The dental decay percentage for Durham County typically varies from 12-14% annually. Variations are a result of the percentage of children being screened in the school according to parental consent and that all 30 schools agree to participate. Durham County and North Carolina perform significantly better than National data.

**FY2018-19 target projection:** Public Health attempts to screen Kindergarten in all of Durham's Public Elementary schools to identify as many children that have a high risk for cavities. The department is aiming to reduce the percentage of Durham Public School kindergartners with untreated dental decay and reach our goal of 12% or less during the 2018-19 school year. The current Healthy People 2020 national goal for children ages 3 to 5 is 21.4%.

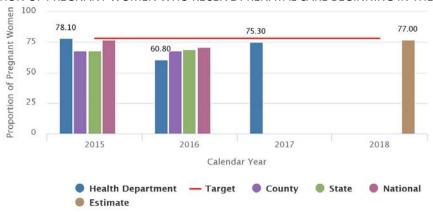


**Measure description:** This measure shows the percentage of State mandated inspections completed. The majority of these inspections are for food service establishments. Inspections provide education and regulation toward the goal of food safety.

**Trend explanation:** The trend varies based on staffing levels and growth in the number of establishments permitted. From FY08-FY17, Durham County experienced a 115% increase in the number of required mandated inspections to be completed. This increase does not take into account the complex nature of Durham's food service community. Per capita, Durham has more Mobile Food Units than any other North Carolina county and has a much higher than average number of establishments that conduct specialized food processes, which require additional oversight and time commitment by staff.

**FY2018-19 target projection:** The State mandated inspections are the most frequent and have the largest direct impact to most of the public. Although eventually the goal is to reach 100%, the current goal is 85%. Due to the restaurant growth in Durham over the last several years, public health has made a request for additional positions to be able to meet this benchmark.

Measure: PROPORTION OF PREGNANT WOMEN WHO RECEIVE PRENATAL CARE BEGINNING IN THE FIRST TRIMESTER



Measure description: This measure shows the proportion of pregnant women who receive prenatal care beginning in the first trimester. Access to prenatal care in the first trimester of pregnancy is a clinical quality measure to assess the adequacy of prenatal care for pregnant women. Accessing care in the first trimester is essential and associated with positive outcomes for infants and mothers. Beginning prenatal care in the first semester is crucial because it decreases the risks of delivering a low birth weight infant and reduces the risk of newborn death. The NC DHHS Maternal Health Services has provided a wide range of maternal health services to encourage low-income pregnant women to begin early prenatal care and follow recommended perinatal care guidelines before and after giving birth. This measure aligns with County Strategic Plan Goal 2, Objective 2.3 - Healthy Children and Youth - support the optimal growth and development of children and youth.

**Trend explanation:** Durham County Public Health data increased from 2016 to 2017 because of education around initiation of early prenatal care and that the health department was a safe space to seek care. Community education was paramount to this increase.

FY2018-19 target projection: The target reflects the Healthy People 2020 target of 77.9%.

# MENTAL HEALTH (ALLIANCE BEHAVIORAL HEALTHCARE LME/MCO)



**GOAL 2 HEALTH AND WELL-BEING FOR ALL:** Improve the quality of life across the lifespan through protecting the health of community, reducing barriers to access services and ensuring a network of integrated health and human services available to people in need.

#### **MISSION**

Alliance Behavioral Healthcare is committed to improving the health and well-being of the people we service by ensuring highly effective, community-based support and care. Our vision is to be a leader in transforming the delivery of whole person care in the public sector.

#### PROGRAM DESCRIPTION

Alliance Behavioral Healthcare is the Local Management Entity (LME)/Manage Care Organization (MCO) for mental health, developmental disabilities, and substance abuse for a catchment area that includes Cumberland, Durham, Johnston and Wake counties.

Alliance is responsible for ensuring that citizens who seek help receive the services and supports for which they are eligible to achieve their goals and to live as independently as possible. Alliance is also responsible for making sure the citizens receive quality services and that their individual rights are protected.

Alliance is responsible for managing finances, service authorizations, contracts with direct service providers, service quality, and regulatory standards, developing the service array and ensuring appropriate customer choice.

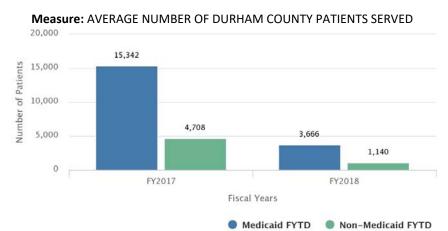
Alliance contracts with more than 2,000 service providers to provide mental health, developmental disabilities and substance abuse services to children and adults in the entire catchment area. For those clients who do not speak English, a list of providers who speak other languages can be provided.

		2016-2017	2017-2018	2017-2018	2018-2019	2018-2019
	Summary	Actual	Original	12 Month	Department	Manager
		Exp/Rev	Budget	Estimate	Requested	Recommended
•	Expenditures					
	Operating	\$6,217,380	\$6,131,224	\$6,131,224	\$6,268,208	\$6,171,224
	Total Expenditures	\$6,217,380	\$6,131,224	\$6,131,224	\$6,268,208	\$6,171,224
•	Revenues					
	Total Revenues	\$0	\$0	\$0	\$0	\$0
	Net Expenditures	\$6,217,380	\$6,131,224	\$6,131,224	\$6,268,208	\$6,171,224
	FTEs	0.00	0.00	0.00	0.00	0.00

#### 2018-19 BUDGET HIGHLIGHTS

- Alliance will continue a lease agreement with Durham County to lease space in the Human Services Complex until December of 2018.
- Added \$40,000 to El Futuro, the primary provider of mental health services to the Latino population in Durham, to be able to expand and enhance their services in the face of growing demand in Durham.

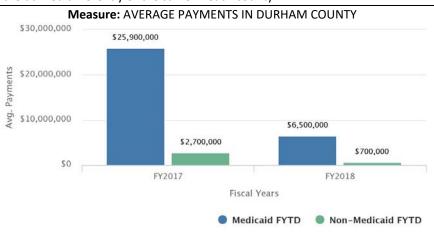
#### **PERFORMANCE MEASURES:**



**Measure description:** This measures the average number of Durham County patients served. This number represents the monthly average number of unique individuals that received services from an Alliance provider during the quarter. This measure shows service utilization in both Medicaid and non-Medicaid individuals for Durham County specifically.

**Trend explanation:** Alliance tracks any significant changes and trends related to service access, utilization and spending over time. Any significant changes and trends that are noted receive more detailed data analysis to determine cause, effect on the service system and to individuals served, and to determine if additional interventions are needed to mitigate negative trends.

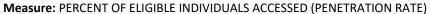
**FY2018-19 target projection:** There is no specific target in relation to service utilization and spending. The data are compared quarterly within Durham County to identify changes in the service system and compared to other Alliance counties as a measure of how services are utilized differently or the same in each county.

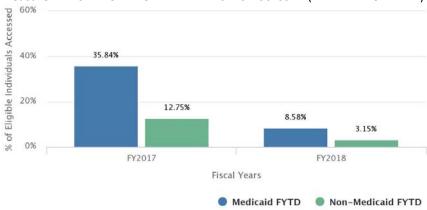


Measure description: This measure shows spending in both Medicaid and non-Medicaid individuals for Durham County.

**Trend explanation:** Alliance tracks any significant changes and trends related to service access, utilization and spending over time. Any significant changes and trends that are noted receive more detailed data analysis to determine cause, effect on the service system and to individuals served, and to determine if additional interventions are needed to mitigate negative trends.

**FY2018-19 target projection:** There is no specific target in relation to service utilization and spending. The data are compared quarterly within Durham County to identify changes in the service system and compared to other Alliance counties as a measure of how services are utilized differently or the same in each county.





**Measure description:** This measures the penetration rate, or the portion of individuals eligible for services in Durham County who accessed them during a quarter. The average penetration rate for non-Medicaid funded individuals is calculated by comparing the numbers of individuals who accessed services compared to the total number of individuals who are identified as indigent in Durham County.

**Trend explanation:** Alliance tracks any significant changes and trends related to service access, utilization and spending over time. Any significant changes and trends that are noted receive more detailed data analysis to determine cause, effect on the service system and to individuals served, and to determine if additional interventions are needed to mitigate negative trends.

**FY2018-19 target projection:** There is no specific target in relation to service utilization and spending. The data are compared quarterly within Durham County to identify changes in the service system and compared to other Alliance counties as a measure of how services are utilized differently or the same in each county.

## **SOCIAL SERVICES**



**GOAL 2 HEALTH AND WELL-BEING FOR ALL:** Improve the quality of life across the lifespan through protecting the health of community, reducing barriers to access services and ensuring a network of integrated health and human services available to people in need.

#### **MISSION**

Created by the North Carolina General Assembly and sustained with public funds, the Durham County Department of Social Services' vision is a community where families achieve well-being. The department's mission is "Partnering with families and communities in achieving well-being through prosperity, permanence, safety and support."

The department operates with a Core Values Statement:

The staff members of the Durham County Department of Social Services make this commitment to individuals, families, our community and ourselves:

- We will show RESPECT by recognizing the importance of each individual, treating everyone with kindness, dignity and compassion.
- We will demonstrate **INTEGRITY** by being honest, dependable, trustworthy, responsible and accountable for performance and results.
- We will cultivate **PARTNERSHIP** as the best way to help individuals and families develop their strengths and meet their needs, while working together to achieve more.

#### **DEPARTMENT DESCRIPTION**

The agency's services programs provide for the protection of abused and neglected children and adults, the provision of services to prevent unnecessary institutionalization of disabled and elderly residents, Work First support services, school and community social work services, and child day care subsidy.

Our public assistance programs provide entitlement benefits for health access and nutrition services, foster care and adoption payments as well as cash assistance through Work First. Programs include Food and Nutrition Assistance; Medicaid and North Carolina Health Choice for Children; and Work First Family Assistance.

The Child Support Enforcement program ensures that non-custodial parents provide financial and medical support for their children. This includes the location of non-custodial parents and their assets, establishing support orders, and establishing paternity. As necessary, this service is also responsible for collection and distribution of payments and enforcement for non-payment of legal child support obligations.

	2016-2017	2017-2018	2017-2018	2018-2019	2018-2019
Summary	Actual	Original	12 Month	Department	Manager
	Exp/Rev	Budget	Estimate	Requested	Recommended
Expenditures					
Personnel	\$26,571,049	\$28,102,147	\$25,916,949	\$29,905,276	\$29,176,084
Operating	\$29,329,754	\$34,245,620	\$15,361,799	\$18,923,851	\$17,715,022
<b>Total Expenditures</b>	\$55,900,803	\$62,347,767	\$41,278,748	\$48,829,127	\$46,891,106
Revenues					
Intergovernmental	\$38,423,009	\$45,309,630	\$25,739,324	\$29,823,524	\$29,326,100
Contrib. & Donations	\$10,553	\$2,831	\$5,221	\$2,831	\$2,831
Service Charges	\$3,613	\$6,600	\$24,357	\$6,600	\$6,600
Other Revenues	\$191,522	\$137,162	\$256,619	\$137,162	\$137,162
Total Revenues	\$38,628,697	\$45,456,223	\$26,025,521	\$29,970,117	\$29,472,693
Net Expenditures	\$17,272,106	\$16,891,544	\$15,253,227	\$18,859,010	\$17,418,413
FTEs	504.00	503.00	509.00	525.00	509.00

#### 2018-19 BUDGET HIGHLIGHTS

- Durham County has now been fully integrated into the State NC FAST system for childcare payments. Moving forward
  Durham County will no longer make childcare payments and thus will not receive this reimbursement revenue from the
  State for childcare services. As a result, the DSS budget has an expenditure and revenue reduction of \$16.3 million
  dollars.
- 6 new FTEs were funded mid-year FY 2017-18 in Child Protective Services Full year funding for FY 2018-19 for those positions is \$365,663
- Funding for ½ of a Social Worker position at the Center for Senior Life \$30,000- Department of Social Services (DSS) and the Durham Center for Senior Life (DCSL) have piloted a shared Social Worker position to ensure that Senior are referred to community agencies in a timely and efficient manner.
- Expansion of Lincoln Community Health Center Contract for medication assistance \$30,000. This expansion will allow
  uninsured or underinsured citizens to receive medically necessary prescription medication from Lincoln Community
  Health Center at no cost.

Program Budget Social Services	FY2017-18 Approved Budget	FY2017-18 Approved FTE	FY2018-19 Department Request Budget	FY2018-19 Department Request FTE	FY2018-19 Manager Recommended Budget	FY2018-19 Manager Recommended FTE
Administration and Management	\$1,207,907	9.00	\$1,562,823	9.00	\$1,407,879	9.00
Adult Services	\$5,980,437	65.00	\$6,458,545	68.00	\$6,152,217	65.00
Business Office	\$1,278,609	16.00	\$1,302,661	16.00	\$1,302,661	16.00
Child Support	\$3,054,361	40.00	\$3,110,012	40.00	\$3,110,012	40.00
Child Welfare	\$13,096,708	112.00	\$14,674,865	120.00	\$13,794,362	118.00
Crisis Services	\$1,064,817	8.00	\$1,226,811	8.00	\$1,081,049	8.00
Customer Accountability and Talent Development	\$3,788,185	57.00	\$3,913,102	58.00	\$3,875,869	57.00
Public Assistance	\$14,289,483	180.00	\$13,968,996	190.00	\$13,555,745	180.00
Work First Employment and Child Care Services	\$18,587,260	16.00	\$2,611,312	16.00	\$2,611,312	16.00
Grand Total	\$62,347,767	503.00	\$48,829,127	525.00	\$46,891,106	509.00

#### **Administration and Management**

**Program Purpose**: Provide business operations support to internal and external agency partners while ensuring efficient and effective use of public funds

**Program Description**: Provide leadership and support to internal and external stakeholders to support the agency in fulfilling its mission and vision while providing timely and effective services to our clients.

#### **Adult Services**

**Program Purpose**: To protect vulnerable adults and keep them safe wherever they live through providing adult protective services, guardianship, In-Home Aide, Home Delivered Meals, Adult Care Monitoring and the Community Alternative Program for Adults.

#### **Business Office**

**Program Purpose**: Provide business operations support to internal and external agency partners while ensuring efficient and effective use of public funds.

#### **Child Support**

**Program Purpose**: Locate non-custodial parents, establish, distribute and enforce court ordered child support payments for children and families to ensure that parents help pay for their children's support costs

#### **Child Welfare**

**Program Purpose**: To protect children, keep them safe, maintain and obtain safe stable/permanent homes. This is done through receiving, screening and investigating reports of suspected abuse, neglect and dependency of children; providing intensive in-home services to families at risk of or with a history of above; and providing child placement and permanency services for youth placed in the custody of DSS

#### **Crisis Services**

**Program Purpose**: To advocate, refer and provide services to adults and families with children who are in crisis related to health, housing, and energy problems to keep them from becoming homeless and/or to elevate lack of access to a medication

#### **Customer Accountability and Talent Development**

**Program Purpose**: Provide staff training and development, Reception, Call Center and Quality Assurance operations for the department

#### **Public Assistance**

**Program Purpose**: Provide benefits to promote health access, nutritional services, and short-term cash assistance to eligible families.

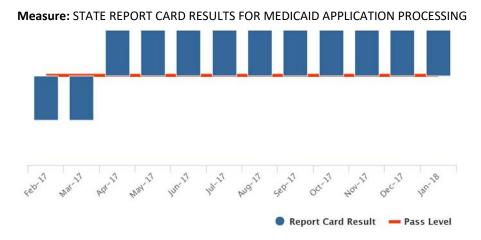
**Program Description**: Provide entitlement benefits for health access (Medicaid, Healthchoice, Medicaid Transportation), nutrition services (FNS), cash assistance (Work First) and energy program Emergency Assistance. Ensure timely and accurate assistance to individuals in need.

#### **Work First Employment and Child Care Services**

**Program Purpose**: Provide supportive services to gain and maintain employment.

**Program Description**: Provide service benefits for Cash Assistance (Work First) and Child Care Subsidy program to help citizens gain employment and become self-sufficient.

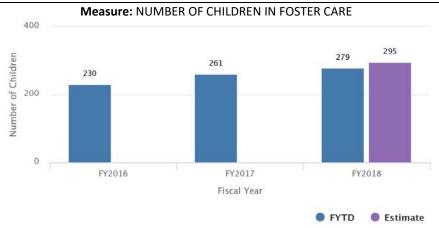
#### **PERFORMANCE MEASURES:**



Measure description: The number of Medicaid applications processed timely is being measured to ensure families are receiving medical services in a suitable timeframe. This is a State requirement and failure to timely process and dispose of applications can result in a corrective action and/or financial liability to the County. This measure is critical for the department to assess and determine allocated resources needed to timely and effectively process Medicaid applications. This measure is in alignment with Strategic Plan Goals 2 and 5.

**Trend explanation:** DSS has authorized overtime to process applications. The department is also assessing current workflows and structure to maintain passing the Medicaid Report Card. Factors that can impact this trend include: the economy, child poverty rate, federal policy, the number of applications being received/processed, and staff recruitment and retention.

**FY2018-19 target projection:** The target is set to pass the State Medicaid Report Card which means receiving a Report Card result of 90% or greater in timeliness for Medicaid application processing. DSS is projecting to continue to pass the State Medicaid Report Card in FY19. Note: The report card was restarted effective April 2017.

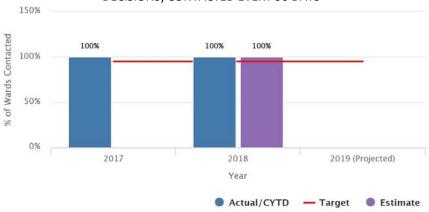


Measure description: DSS monitors, evaluates, and plans for the number of youth in custody. Critical services include education, physical/mental health, safety/well-being, and establishment of a permanent care plan. In addition, the Federal Children's Bureau and the NC Division of Social Services track this data to evaluate outcomes for youth such as safety, repeat maltreatment while in foster care, recidivism, and timeliness to permanence. This measure aligns with Strategic Plan Goals 2 and 3 and is key to allocating resources to effectively serve children in care and meet State targets for permanence and safety.

**Trend explanation:** DSS continues to see a growth in the number of children in foster care. DSS experienced a 5% increase between Q4 FY17 and Q2 FY18. This trend is statewide as several counties have experienced growth of 50% and higher. There are numerous factors leading to placement of children in DSS, including substance misuse, mental health, domestic violence, improper parenting skills, and developmental needs of families/children.

**FY2018-19 target projection:** There is not a target for the number of children in foster care; however, the department projects to have roughly 310 children in custody in FY19. This is due to the increased growth in foster care over the last four years.

# Measure: PERCENTAGE OF ADULT WARDS (A PERSON DEEMED INCOMPETENT AND UNABLE TO MAKE INDEPENDENT DECISIONS) CONTACTED EVERY 90 DAYS

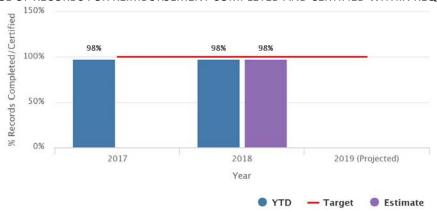


Measure description: DSS serves as a public guardian to protect adults (18 and older) deemed incompetent by the court. In this role, DSS is responsible for the safety and well-being of these adults and makes routine decisions regarding care, placement, and daily life decisions on behalf of the adult ward. State policy requires DSS to assess the health and well-being of adult wards with an in-person meeting to assess their needs at least once every 90 days. This is done to ensure their safety and living conditions are appropriate and suitable. This measures the percent of adult wards who are contacted every 90 days. This measure aligns with Strategic Plan Goals 2 and 3.

**Trend explanation:** This measure is monitoring the quality of life and the effectiveness of the plan of care. The demographics of the adult wards have been changing with younger clients having more mental health issues and higher vulnerability. This meant that quarterly visits were no longer sufficient, so a plan was put in place to have monthly visits. This means by default DSS is meeting the State mandate.

**FY2018-19 target projection:** The target is set at 95% of adult wards contacted every 90 days. This target is a State mandated performance measure per policy 10A NCAC 71B.0101 (b)(2), North Carolina Office of Administrative Hearings – Chapter 71.

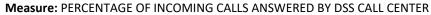
Measure: PERCENTAGE OF RECORDS FOR REIMBURSEMENT COMPLETED AND CERTIFIED WITHIN REQUIRED TIMEFRAMES

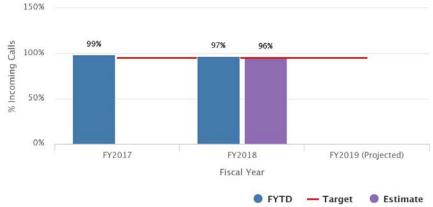


**Measure description:** Each NC county must submit timekeeping records to the State to receive reimbursement. These are known as "Daysheet Records." Each record shows the amount of time a worker spends on a case, which is reflective of what a DSS worker does each day. This measure looks at the percentage of Daysheet Records that are completed and certified within the timeframe required by the State. Failure to have 100% of time reported leads to incorrect reimbursement by the State. This measure aligns with Strategic Plan Goal 5.

**Trend explanation:** This measure has been fluctuating over the past 7 months. DSS staff drafted new policy and protocols to improve the measure, which were implemented March 2018. The compliance rate for this measure should increase.

**FY2018-19 target projection:** The target is set at 100% to receive the maximum amount of revenue from the State. Because this record keeping is required for reimbursement and incorrect reimbursement significantly impacts the agency, it is important to keep this target high.





**Measure description:** The percentage of calls answered by the DSS Call Center is being measured to ensure exceptional customer service. Customers may call the Call Center for a broad range of reasons including to obtain information about applying for benefits or services, to check on the status of an application, to speak to a case or social worker, or to report child or adult abuse and neglect. Due to the high volume of calls it is critical that calls are answered so that Durham County citizens have access to the benefits and services they seek. This measure aligns with Strategic Plan Goal 5.

**Trend explanation:** During the year, the volume of calls reflects the level of demand for services. During this quarter, there were some technology changes that slightly impacted the ability to answer calls.

**FY2018-19 target projection:** The call handling percentage is set at 95% per internal policy. This number has been lower than usual but still above target due to technology system changes. This measure is estimated to end the year at approximately 96%, so the target for FY19 will remain at 95%.

### COORDINATED TRANSPORTATION SYSTEM



**GOAL 2 HEALTH AND WELL-BEING FOR ALL:** Improve the quality of life across the lifespan through protecting the health of community, reducing barriers to access services and ensuring a network of integrated health and human services available to people in need.

#### **MISSION**

The Durham County Center of North Carolina Cooperative Extension helps individuals, families, and communities use research-based information and county resources to improve the quality of their lives.

#### PROGRAM DESCRIPTION

**Program Purpose:** The purpose of Durham County ACCESS is to seek funding and administer a grant, financial management and customer service program to deliver excellent coordinated demand response transportation to meet the mobility needs of seniors, disabled, transportation disadvantaged, rural general public and employment trips for Durham County residents.

**Program Description:** Transportation through Durham County ACCESS improves the quality of life of Durham County residents by providing safe and accessible transportation to seniors, individuals with disabilities, residents going to work, and the general public in rural Durham County. Durham County ACCESS is a proud partner in a coordinated network with the City of Durham's Go ACCESS transportation program. All Durham County ACCESS vans are wheelchair accessible. Interested individuals must complete an application and receive approval to initiate service. Durham County ACCESS receives funding from federal, state, and local grants to support this broad level of transportation services and is supported by a 7-member transportation Advisory Board appointed by the County Commissioners.

	2016-2017	2017-2018	2017-2018	2018-2019	2018-2019
Summary	Actual	Original	12 Month	Department	Manager
	Exp/Rev	Budget	Estimate	Requested	Recommended
<ul><li>Expenditures</li></ul>					
Personnel	\$130,533	\$133,116	\$137,191	\$212,350	\$178,624
Operating	\$998,982	\$605,450	\$1,118,095	\$990,312	\$667,727
Capital	\$53,860	\$0	\$0	\$390,000	\$310,000
Total Expenditures	\$1,183,375	\$738,566	\$1,255,286	\$1,592,662	\$1,156,351
Revenues					
Intergovernmental	\$714,424	\$658,006	\$905,006	\$927,421	\$927,421
Service Charges	\$0	\$5,120	\$5,120	\$0	\$0
<b>Total Revenues</b>	\$714,424	\$663,126	\$910,126	\$927,421	\$927,421
Net Expenditures	\$468,951	<i>\$75,440</i>	\$345,160	\$665,241	\$228,930
FTEs	2.00	2.00	2.00	2.60	2.00

#### 2018-19 BUDGET HIGHLIGHTS

This budget allows Durham County Access to maintain target levels of service.

#### **PERFORMANCE MEASURE:**

Measure: NUMBER OF DURHAM COUNTY ACCESS SINGLE TRIPS PROVIDED TO DURHAM COUNTY RESIDENTS



**Measure description:** This measure shows the number of single trips provided to Durham County residents each fiscal year. This measure justifies the ACCESS expenditure that helps meet the mobility needs of the community. A "trip" is an on-demand ride that the consumer takes on an ACCESS van when requested. The system serves citizen transportation needs for the more rural areas of the County, the elderly, and disabled citizens. It also provides rides for residents for work or healthcare purposes. This measure aligns with Strategic Plan Goal 1.

**Trend explanation:** The increase in the first two quarters exceeds the target due to funding increases and increased efficiencies in program delivery.

**FY2018-19 target projection:** The target is currently set at 28,176 trips per fiscal year; this target may be increased if the current trend continues.

## **JUVENILE CRIME PREVENTION COUNCIL (JCPC)**



**GOAL 2 HEALTH AND WELL-BEING FOR ALL:** Improve the quality of life across the lifespan through protecting the health of community, reducing barriers to access services and ensuring a network of integrated health and human services available to people in need.

#### PROGRAM DESCRIPTION

The Juvenile Crime Prevention Council (JCPC) works in partnership with the United States Department of Justice's Office of Juvenile Justice and Delinquency Prevention (OJJDP) to improve the lives of youth by reducing and preventing juvenile crime. Durham's JCPC prioritizes the needs of youth in Durham County and distributes funds to local programs. JCPC focuses on gang prevention and intervention.

These funds are allocated to Durham County by the North Carolina Department of Juvenile Justice and Delinquency Prevention (DJJDP) from their Intervention/Prevention Funding. This money is available only for programs serving delinquent, undisciplined, and youth at-risk of court involvement, and is restricted to services providing intermediate and community sanctions to juvenile court for delinquent and at-risk youth. Programs are required to offer treatment, rehabilitation, and/or educational enrichment as prioritized in the publicly advertised "Request for Proposals" (RFP) attached.

The Durham JCPC conducted the funding allocation process in accordance with the relevant N.C. General Statues, and the N.C. Department of Juvenile Justice and Delinquency Prevention (DJJDP) procedures and guidelines. Once the applications were received, the Durham County Juvenile Crime Prevention Council (JCPC) voted to adopt the Durham Annual Funding Plan.

The administrative oversight of this program is managed by the Criminal Justice Resource Center (CJRC).

The following programs are recommended for funding contingent to inclusion in the State of North Carolina budget:

- Durham County Teen Court and Restitution \$148,000
- Durham County Clinical Family Counseling (El Futuro) \$30,000
- Parenting of Adolescents (Home Family Counseling) \$139,372
- The P.R.O.U.D (Personal Responsibility to Overcome with Understanding and Determination) Program \$76,294
- Rebound Alternatives for Youth (Interpersonal Skill Building) \$31,000
- Juvenile Literacy Center (Tutoring/Academic Enhancement) \$12,000

Also, these programs and administrative functions are recommended for funding contingent to inclusion in the State of North Carolina budget but are located within other County agencies:

- Project BUILD Building Uplifting and Impacting Lives Daily (Cooperative Extension) \$88,000
- Juvenile Crime Prevention Council Administrative Costs (Criminal Justice Resource Center) \$12,000

**Funds Center:** 5800273000

		2016-2017	2017-2018	2017-2018	2018-2019	2018-2019
	Summary	Actual	Original	12 Month	Department	Manager
		Exp/Rev	Budget	Estimate	Requested	Recommended
•	Expenditures					
	Operating	\$537,025	\$432,166	\$432,166	\$436,666	\$436,666
	Total Expenditures	\$537,025	\$432,166	\$432,166	\$436,666	\$436,666
•	Revenues					
	Intergovernmental	\$539,630	\$432,166	\$432,166	\$436,666	\$436,666
	Total Revenues	\$539,630	\$432,166	\$432,166	\$436,666	\$436,666
	Net Expenditures	(\$2,605)	<b>\$0</b>	<i>\$0</i>	<i>\$0</i>	<i>\$0</i>