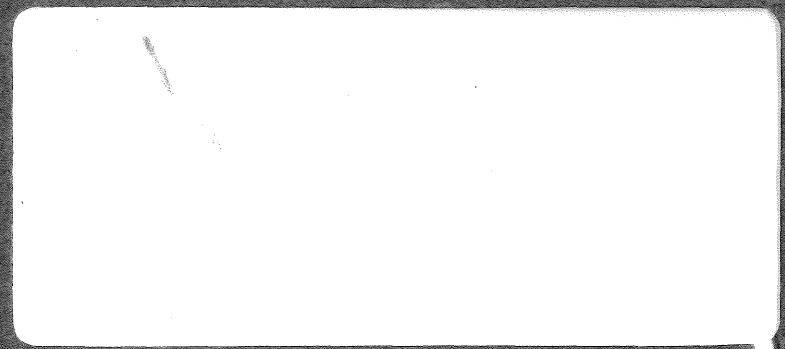


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**REPORT ON  
COMMUNITY SOCIAL SERVICES MONITORING  
AND  
EVALUATION  
1988**

**Prepared by:**

**Community Services Evaluation Section  
Policy Coordination Division  
March 1989**

## EXECUTIVE SUMMARY

Minnesota Statute 256E.05 directs the Commissioner of the Department of Human Services to monitor and evaluate the administration and delivery of community social services by county social service agencies. This report contains detailed information regarding the purpose, methodology, findings, and recommendations pertaining to four major monitoring and evaluation initiatives completed during calendar year 1988. The four major initiatives were:

1. Child Protection Rule Compliance Survey.
2. Client Access to the Service Delivery System Review.
3. Mental Health System Component Review.
4. Welsch Negotiated Settlement Case Record Review and Site Observation Visit.

Following is a summary of each of these initiatives.

### Child Protection Rule Compliance Survey:

On August 15, 1988 the Department's revised Child Protective Services Rule was adopted. This rule makes more explicit county social service agency responsibility in assessing, screening, and investigating reports of child maltreatment, and requires that the county agency provide protective services in accordance with a written service plan. The purpose of the monitoring survey, conducted in all county social service agencies, was to determine the extent to which county supervisors and child protection workers perceived that they were in compliance with the new rule, to gather information on county agency policies and procedures pertaining to child protection services and to establish a base line for future monitoring and evaluation of county agency performance in delivering child protection services.

This survey was not designed to gather information on all aspects of the new rule, but was focused on several critical areas of concern as identified by the Department's Child Protection Section. Information was gathered on the following compliance issues:

1. Use of established criteria in screening reports of maltreatment;
2. Timely notification of law enforcement;
3. In-person observation of children reported to be maltreated;

4. Use of the Tennessen Notice;
5. Use of Department approved risk assessment tool;
6. Written protective services plan developed with the family;
7. Quarterly reassessment of protective services plans;
8. Monitoring the delivery of child protection services;
9. Appropriate termination of child protection services;
10. Implementation of protection services training requirements; and
11. Time lines of response to reports of maltreatment.

County agency child protection supervisors and workers who were interviewed believed they were in substantial compliance with most rule requirements. The areas of lowest reported compliance were:

1. Timely notification of law enforcement;
2. Use of the Tennessen Notice.
3. Termination of protective services when there was insufficient grounds to proceed with court action; and
4. Implementation of training requirements.

As a result of these findings the Department recommends the following actions:

1. That the Child Protection Section arrange for or provide technical assistance to all county agencies, giving special attention to areas of lowest reported compliance.
2. That special attention be given to the few county agencies that reported a lower overall level of compliance.

The Community Services Evaluation Section of the Department of Human Services will begin a systematic review of protective services case records to determine actual compliance with the rule requirements. These case record reviews will enable us to compare actual compliance with perceived compliance.

### Client Access to the Service Delivery System Review:

Minnesota Rules, part 9550.0010 through 9550.0092 establishes several minimum administrative standards with which county agencies must comply. While the compliance survey conducted in 1988 did not review all these standards, the Department deemed it important to look at those standards pertaining to client access to the service delivery system. Three specific rule requirements were monitored:

1. Posted notice, prominently displayed, advising individuals of their right to apply for services without delay;
2. List of services provided by the county agency is readily available to individuals; and
3. Persons applying for social services are advised of their rights and responsibilities and how data collected on them will be used.

We found that 29 percent of the county agencies did not have the required posted notice of the right to apply for services and 25 percent of the counties did not have a list of offered services readily available.

All county agencies documented the use of forms advising applicants of their rights and responsibilities and how information collected about them will be used.

This report identifies the county agencies out of compliance with the rule requirements. These county agencies will be required to submit documentation that corrective action has been taken.

### Mental Health System Component Review:

The Comprehensive Mental Health Act of 1987 required county agencies to develop a mental health plan; a part of this plan required each county agency to identify how they would make some basic mental health services available in their county by July of 1988. The mental health system component review was designed to look behind the county plans to document the availability of required services. The mental health services clusters reviewed were:

1. Community Support Services;
2. Education and Preventions Services;
3. Emergency Services;
4. Outpatient Services; and
5. Residential Treatment Services.

This review also looked at the composition and activity of mental health advisory councils. The full report, included in the document, addresses each of these service clusters individually, and identifies how the services are provided - by contract or directly by the county agency.

As the report indicates, most county agencies are making available and/or providing the services required by the Comprehensive Mental Health Act. However, many contracts between county agencies and mental health providers lacked the specificity needed to verify the availability of some services.

As a result of this review the following action has been taken:

The names of county agencies not appearing to be in full compliance with statutory requirements have been given to the Mental Health Division for follow-up.

In addition, the following action is recommended:

The Mental Health Division should follow-up with those county agencies that had insufficient documentation to verify the availability of some mental health services.

The Community Services Evaluation Section will review county agency contracts with mental health providers to ensure compliance with the contract requirements of Minnesota Rules, part 9550.0040, governing the administration of community social services.

#### Welsch Negotiated Settlement Case Record Review and Site Observation:

Over 300 case record reviews, selected from 10 county agencies, were conducted to comply with the requirements of the Welsch v. Gardebring Negotiated Settlement. Case records reviewed represented a sample of persons with developmental disabilities residing in RTC's, community based ICF/MR's, SILS programs, waived services programs, foster homes, and parental homes. This review was designed to determine the extent to which county agencies were meeting the requirements of Rule 185. It involved a review of case record documentation and on-site observation of the subject of the case record, either at the subject's day program or place of residence.

The Department found overall compliance with the rule to be low. For example, while over 90 percent of the cases reviewed had an individual service plan, only 68 percent had a timely plan (reviewed in the past 12 months), and only 2 percent of the plans were complete. We also found that only 25 percent of the cases reviewed contained all the required assessments and only 2 percent of the case had timely assessments.

Based on our findings, the Community Services Evaluation Section recommends that efforts currently underway to revise Rule 185 remain a high priority in the Department. We also recommend that training of case managers be done incrementally with emphasis on "how to do it" issues. Topics like how to integrate assessments into an ISP and how to format an ISP are important to address.

Staff of the Community Services Evaluation Section and the Developmental Disabilities Division are currently developing a protocol for reviewing additional case records. The focus will be on persons with developmental disabilities who are receiving waived services or services governed by the provisions of Rule 40.



## CHILD PROTECTIVE SERVICES SURVEY

### Description of the Project:

The purpose of child protective services is to protect children from maltreatment including: sexual or physical abuse, neglect, emotional maltreatment and infant medical neglect. In August 1988, the Department adopted a new protective services rule. The rule focuses on assessing, screening and investigating reports of child maltreatment and ensuring that protective services are provided in accordance with written service plans.

In conjunction with adoption of this rule, the CSES initiated an assessment of county agency child protective services policies, procedures and practices. The purpose of the assessment is to establish a base line measure of county agency performance that can be compared with performance after the new rule has been in force for a period of time. This comparison will give Department managers a pre-rule/post-rule picture of county agency performance in child protective services. Further, the assessment will give managers information about staff training and technical assistance that will be necessary to ensure full implementation of the new rule.

### Consequences of Failure to Comply:

When county agencies fail to consistently and effectively implement the requirements of the rule, children may unnecessarily be placed at risk of maltreatment or, in some cases, children may be unnecessarily removed from their homes and families. In addition, county agencies that fail to substantially comply with the rule may be subject to a reduction in their community social services fund allocation pursuant to M. S. 256E.08, subd. 1.

### Method Used to Monitor:

A protocol for measuring county agency compliance with the provisions of the new rule was jointly developed by the CSES and the Department's Child Protection Section. The protocol, consisting of 35 general questions with numerous parts, was designed to evaluate compliance with the rule and to assess county agency child protective services practices that are of high interest to the Child Protection Section. The protocol was used by CSES staff to collect data from county agency personnel. A child protection supervisor and a child protection worker were interviewed separately in each agency. In some of the larger agencies, additional supervisory and worker staff were interviewed. For purposes of this report, we consolidated multiple responses into two sets of data, one from child protection supervisors and one from child protection workers. Agencies in which multiple staff were interviewed will be given a printout of all staff and supervisory responses.

## Summary of Findings:

**NOTE:** Following the Summary of Findings, Conclusions, and Recommendations is detailed information on responses given by supervisors and child protection workers to the questions asked at the time this review was done.

### A. Child Protection Rule Issues:

1. Depending on the county agency respondent, between 77 and 81 county agencies use the criteria established in the rule to screen reports of maltreatment.
2. Seventy-eight county agencies notify law enforcement within 24 hours when they accept a report of maltreatment. However, there is a significant amount of disagreement between supervisors and child protection workers regarding how law enforcement is informed.
3. All but two counties surveyed reported that they conducted "in-person" observations of children who were subjects of maltreatment reports.
4. County agencies report to being lax in providing the Tennessee Notice. In particular, there is a high amount of disagreement between supervisors and workers about providing the notice in writing.
5. Sixty-seven percent of the county surveyed reported that they used a risk assessment tool. The majority of the counties using a risk assessment tool properly used it to determine the need for child protection services.
6. Ninety percent of the county agencies reported that they developed, with the family, a written protective services plan, and 73 percent of the counties reported that they conducted quarterly reassessments of the plan. Twenty percent, of the county agencies reported that the frequency of reassessments depended on the specifics of particular case situations.
7. Thirty-nine percent of the supervisors and 29 percent of the workers surveyed reported at least monthly meetings with families receiving child protection services. At the same time, 66 percent of the supervisors and 54 percent of the workers said that frequency of contact depended on the specifics of the case situation. There was a high degree of disparity (37 percent) within county agencies between supervisors and workers as to the question of monthly contact with the families.
8. Sixteen percent of the supervisors and 19 percent of the workers responded that they were reluctant to terminate child protection services, even when they didn't have sufficient grounds to proceed with court action.
9. County agencies are seriously out of compliance with rule requirements to have an overall annual child protection training plan for the agency and for individual child protection workers. At the same time, 93 percent of the supervisors and 88 percent of the workers agree that a record of training received is maintained by the agency.



10. The vast majority of counties (87-94 percent) reported immediate response to situations of neglect, physical abuse, and sexual abuse which posed imminent danger.
11. Eighty-eight percent of the counties reported that they were not able to respond to reports of maltreatment where there was no imminent danger, by the end of the third working day.

B. Other Child Protection Issues:

Regarding questions pertaining to information about local policies and procedures, there were several responses which indicated differing levels of awareness between supervisors and child protection worker. Example of this disparity are as follows:

1. Overall, 58 percent of the workers and 51 percent of the supervisors responded that they had written instructions for when to complete forms pertaining to intake, assessment, and case opening.
2. Thirty-one percent of the supervisors and 25 percent of the workers reported they had written criteria to help determine when a referral constituted an emergency.
3. Thirty-four percent of the supervisors and 22 percent of the workers reported that the agency has standard training available for new child protection workers.
4. Supervisors and workers disagreed over the array of services available in their agencies.
5. Eighty-six percent of the workers and 82 percent of the supervisors said they had a child protection team.

Conclusions:

A. Perceived Compliance with Child Protection Rule:

One of the purposes of this survey was to determine what county agency child protection workers and supervisors believed was their county's readiness to implement certain key parts of the rule, and in conjunction with that purpose, to identify training and technical assistance needs to assist in full rule implementation.

The overall conclusion is that most county child protection workers and supervisors perceived themselves to already be in compliance with most of the key provisions of the new rule. There were two areas in which there was lower than average compliance in most county agencies, and a few county agencies where their overall readiness to meet key requirements of the rule was lower than the average.

B. Exceptions to Compliance:

1. Tennessee Notice:

There were serious reservations noted by child protection workers and supervisors regarding the need for and use of the Tennessee Notice. Workers and supervisors often tended to view the Notice as a barrier to carrying out productive assessments/investigations. They noted that law enforcement would often object to use of the Notice when law enforcement was participating in the investigation. Most counties, at a minimum use parts of the Notice, but some staff clearly refuse to use other parts of the Notice, particularly with younger victims of maltreatment. In particular, some agency staff objected, when talking to younger victims, to having to advise them of their right to refuse to answer questions.

2. Child Protection Training:

Regarding the rule requirement that county agencies have an overall annual agency plan for training in child protective services, and an annual plan for each individual child protection worker, many supervisors indicated a lack of understanding as to what specifically was needed in the training plan to comply with the rule. In several small counties, the thought was expressed that it wasn't necessary to have an overall training plan to assure that necessary training was received.

3. Difference in Responses Between Supervisors:

The survey points out a number of differences between supervisors and workers in how they responded to the questions. Two predominant areas of disagreement were in use of the Tennessee Notice and use of a risk assessment instrument. In most instances where there was a disparity, supervisors tended to perceive their county as being at a higher level of compliance than did the child protection workers.

We believe it is not unusual in a survey of this nature to find differences between workers and supervisors, because:

- a. the survey is primarily a query about perceptions and opinions;
- b. the social worker and supervisor come to the interview with different sources of information about what is happening; and
- c. supervisors and social workers tend to have a somewhat different emphasis and orientation to the agency and its work. The supervisor/manager tends to direct attention to the organization and its operations; the worker, on the other hand, tends to focus on the needs of the clients.

We believe the worker responses are probably more likely to reflect the policies, practices, and procedures as they are in individual agencies, while supervisory responses tend to reflect how things are supposed to be. The disparity of responses between supervisors and workers also may reflect some problems with internal communication in some county agencies.

### Recommendations:

1. That the Child Protection Section of the Department of Human Services provide information to all counties, spelling out the necessary elements of an overall annual training plan and of the annual individual child protection worker training plan. By October of 1989, the Child Protection Section will be issuing a request bulletin, asking the county agencies to send the Department their annual child protection training plans. These will be due in the Department by November 1, 1989. Staff of the Community Services Evaluation Section will be following up with those county agencies not submitting annual training plans on a timely basis.
2. That the Child Protection Section provide information about, including the use, value and utility of, the Tennesen Notice, and examine alternate ways of providing the Notice without disrupting the assessment and investigative processes. At about the same time this child protection survey was completed, staff of the Child Protection Section began regional training, for child protection staff, on the provisions of the new rule. One of the areas covered was proper use of the Tennesen Notice. We expect that levels of compliance with the rule provision has risen since this training.
3. That the Community Services Evaluation Section monitor compliance with the Tennesen Notice and training plan requirements no sooner than four months after additional training has been provided to county staff. The Community Services Evaluation Section will develop a plan to monitor compliance with the Tennesen Notice by February of 1990. This monitoring will be done in conjunction with a review of overall county agency child protection training plans.
4. That the Child Protection Section review the responses from counties showing an unusually low state of readiness to implement the rule and assist those counties in moving toward full implementation of the key provisions identified in this report. The Child Protection Section began to provide this assistance within two weeks of the rule promulgation. As the Community Services Evaluation Section begins its rule compliance monitoring in April of this year, county agencies identified as being seriously out of compliance with the rule will be referred to the Child Protection Section on an ongoing basis.

### Detailed Findings:

This section contains detailed information on county agency responses to questions pertaining to compliance with the rule, as well as responses to a number of informational questions incorporated into this survey.

NOTE: You will note that the total number of county agencies with a supervisory response totals 81 and the total with a worker response totals 82. There are 83 county agencies in the universe (Faribault/Martin/Wantonwan and Region VIII North are counted as one agency each). In two agencies the supervisor was so new it was not practical to conduct an interview, and in another agency the child protection worker was so new that interviewing this person would not have been practical.

Rule Compliance Questions:

Although this survey was not intended to result in sanctions for county agencies not fully in compliance with the new rule, findings as to how well the county agencies are coming into compliance with rule requirements are as follows:

1. Minnesota Rules part 9560.0216, subp. 3 requires county agencies to use certain criteria when screening reports of maltreatment. Our survey revealed the following:

<u>Rule Criteria</u>	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Allegations constitute maltreatment.	79	2	78	4
Contains sufficient identifying information.	81	0	81	1
Contains information not previously received.	81	0	77	5

2. For all reports of maltreatment accepted after screening, part 9560.0216, subp. 4 requires that the local law enforcement agency be notified verbally and in writing within 24 hours. Our survey indicated the following:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Law enforcement notified within 24 hours.	78	3	78	4
Verbally?	72	9	77	5
In writing?	72	9	70	12

**NOTE:** In 13 county agencies, there was internal disagreement regarding notification of law enforcement in writing. In 8 of the 13 county agencies the worker said that law enforcement was not informed in writing while the supervisor said they were informed.

3. Rule part 9560.0216, subp. 6 requires county agencies to make an in-person observation of the child reported to be maltreated, while completing an assessment. Our review revealed the following:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
In-person observation of the child is conducted?	79	2	80	2

4. Rule part 9560.0216, subp. 7 requires county agencies to routinely provide the "Tennessee Notice" to persons being interviewed as part of a child protection assessment investigation. Our survey revealed the following:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
County provides warning?	64	17	60	22
Verbally?	66	15	66	16
In writing?	53	28	40	42

**NOTE:** There is a rather high disparity of responses on this question when supervisors responses are compared to workers responses. This becomes even more significant when you consider that in 15 counties there is disagreement between supervisor and worker regarding whether the notice is given verbally and in 14 counties there is disagreement about whether the notice is given in writing. Thirteen workers say the notice is not given in writing while supervisors in these agencies say the notice is given in writing. Eight of 15 workers say the notice is not given verbally while their supervisors say it is given verbally.

5. County agencies were queried as to whether they currently use a risk assessment instrument in accordance with Rule part 9550.0220, subp. 6.B. Our survey revealed the following:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Use risk assessment tool:	55	26	53	29
a. to prioritize protective service reports.	26	55	22	60
b. to determine if maltreatment has occurred.	36	45	32	50
c. to determine if child protective services are needed.	52	29	49	33
d. to determine what services are needed.	38	43	30	52

**NOTE:** The rule requires the county agency to use a risk assessment tool to determine if child protective services are needed in accordance with 5.c. above.

6. Minnesota Rules part 9560.0226, subp. 2, 3, and 4 requires that when child protective services are mandated or when protective services are voluntarily accepted, there must be a written plan of service developed with the family; the rule further requires that when child protective services are purchased, the county agency must retain case management services; and in either case the plan must be reassessed quarterly with the family. Our survey revealed the following:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
There is written service plan?	75	6	76	6
LSSA retains case management?	74	7	76	6
Quarterly reassessment?	60	21	62	20

7. Minnesota rule part 9560.0028, subp.4 and 5 require at least quarterly reassessments of social service case plans when child protective services are involved. County agencies were queried as to their current policy on reassessment of cases requiring child protection services. Our survey revealed the following:

<u>Frequency of Reassessment</u>	<u>Supervisor</u>	<u>Worker</u>
Annually	3	5
Semi-annually	22	23
Quarterly	54	52
Depends on case	3	2

Fourteen county agencies reported that besides minimum requirements for reassessments, the frequency of reassessment was often related to the specifics of a particular situation. More volatile situations or cases involving frequent court action tended to result in more frequent reassessment.

8. Rule part 9560.0228, subp. 4 requires the county agencies to monitor the provision of child protective services, including at least monthly meetings with the family. Survey results are as follows:

	<u>Supervisor</u>	<u>Worker</u>
Weekly	5	8
Bi-weekly	9	9
Monthly	32	24
Quarterly	8	7
Depends on Case	27	34

Fifty-five supervisors and 45 protection workers stated that frequency of meetings with the family depended on the specifics of the case. It should also be noted that the response to this question revealed a high degree of disparity between supervisors and workers in individual agencies. For example, in 31 agencies there was disagreement over the question of monthly contact with the family. In 19 of the county agencies the workers said monthly meetings were not held, while their supervisors said they were. In the other 12 county agencies, the workers said monthly meetings were held and the supervisors said they were not held.

9. Rule part 9560.0228, subp. 6 requires the county agency to terminate child protective services either when the goals of service have been met and services are no longer needed or when the goals are not met, but there are insufficient legal grounds to proceed with court action. Our survey discovered the following:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Case closed/goals met.	80	1	81	1
Case closed/insufficient grounds.	68	13	66	16

10. Rule part 9560.0234, subp. 1, 3, and 5 requires county agencies to develop an overall annual agency training plan for child protection workers, to have an annual training plan for each child protection worker, and to maintain a record of training completed by each child protection worker. Our survey revealed the following:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Overall annual plan.	17	64	11	71
Annual worker plan.	23	58	20	62
Record of training.	77	4	73	9



11. Rule part 9560.0216, subp. 5.A. requires the county agency to take immediate action upon receipt of a report which indicates a child to be in imminent danger. We asked the county agencies to tell us the percentage of reports indicating imminent danger to which they responded to immediately. Our survey indicated the following:

TYPE DANGER	Child Protection Worker Immediate Response			
	<u>90-100%</u>	<u>75 to 89%</u>	<u>50-75%</u>	<u>0-49%</u>
Neglect	75	2	2	3
Physical Abuse	78	3	1	0
Sexual Abuse (Number of counties by category)	76	4	2	0

	Social Service Supervisor Immediate Response			
	<u>90-100%</u>	<u>75 to 89%</u>	<u>50-75%</u>	<u>0-49%</u>
Neglect	77	2		2
Physical Abuse	78	2		1
Sexual Abuse	78	2		1

**NOTE:** Numbers in columns equal number of county agencies reporting by the various percentage categories.

12. We also queried the county agencies concerning the response time to reports of maltreatment when there is no indication of imminent danger. Rule part 9560.0216, subp. 5.C. requires a response time within one working day, with a grace period of up to 72 hours provided the local agency has reasonable grounds to believe the child will not be in imminent danger and there is the need to respond to more serious reports. Nine counties indicated they were able to respond to between 90 and 100 percent of these reports within one working day.

On the other hand, 73 county agencies indicated that up to 50 percent of these reports could not be responded to by the end of the third working day.

Informational Questions:

Besides looking at how well the county agencies are coming into compliance with the new child protective service rule, adopted on August 15, 1988, the survey was designed to look at several other issues related to the child protection service delivery system. The areas queried, and responses, are as follows:

1. Does your county agency accept reports of maltreatment when there is a concurrent custody study or visitation dispute between the parents. Our survey results, by supervisor and child protection worker, are as follows:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Accept reports.	79	2	82	0
Require additional information.	57	24	66	16
Remind parties that reports must be made in good faith.	59	22	62	20
Remind reporting party that custody studies must be court ordered.	71	10	71	11
Question motivation of reporting party.	60	21	67	15
Use other additional criteria.	28	53	25	57

2. County agencies were queried as to whether they had written criteria to help intake workers evaluate and determine whether a referral is an emergency. Our results are as follows:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Written criteria.	26	55	21	61

3. County agencies were asked if they had written instructions detailing which forms are to be completed for the child protection service delivery system. Responses are as follows:

	<u>Supervisor</u>		<u>Worker</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
For intake.	39	42	49	33
For assessment.	40	41	44	38
For open case.	48	33	52	38

4. County agency staff were queried about how their new child protection workers are trained. Here are the affirmative responses to the question:

	<u>Supervisors</u>	<u>Workers</u>
Agency has standard training available.	28	18
Agency supervisor does the training.	78	74
Peer supervision by more experienced staff.	76	77
Send new staff to available training.	79	77
Asks neighboring county to do training.	10	8
Other training available (unspecified).	26	23

5. County agencies were asked for information on what percentage of child maltreatment reports assessed in the past year they were accompanied by law enforcement when doing an investigation. Our survey indicated that law enforcement accompanied county agency staff by type of maltreatment alleged according to the following:

<u>Type</u>	<u>90-100%</u>		<u>75-89%</u>		<u>50-75%</u>		<u>0-49%</u>		<u>Unknown</u>	
	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>
Number of counties where law enforcement accompanied county staff.										
Neglect	11	7	6	3	8	13	55	55	20	22
Physical Abuse	37	36	9	4	16	13	17	25	21	22
Physical Abuse (Criminal)	63	62	8	3	8	4	0	9	21	22
Sexual Abuse	69	69	9	1	5	2	0	6	19	22

6. County agencies were queried as to whether procedures had been developed with law enforcement for responding after hours to referrals determined to be emergencies. Our survey produced the following results:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Procedures with law enforcement.	79	2	76	6
Procedures in writing.	39	42	41	41

7. County agency staff were queried as to how cases were assigned child protection workers once a determination of the need for services is made. Our survey produced the following results:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Decision made at unit meeting or case staffing.	41	40	32	50
Worker doing assessment keeps case.	44	37	42	40
Assigned on basis of equal number of cases.	37	44	39	43
Assigned on basis of equal difficulty of case load	48	33	52	30
Assigned on basis of worker expertise/speciality.	62	19	62	20
Other method than above.	34	47	32	50

Based on county agency responses to the question, more than one criterion are used in determining how to assign new child protection cases.

8. As a follow-up to the question above, county agencies were asked to identify who in the agency usually assigns cases. Our survey results are as follows:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Supervisor	70	11	70	12
Intake Worker	7	74		82
Other	11	70	15	67

9. County agency staff were queried about how long it takes to develop a complete written protective services plan, once a determination of service need is made. Responses were as follows:

<u>Plan developed in:</u>	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Less than 1 week	10	71	6	75
1-2 weeks	29	52	29	53
2-3 weeks	24	57	28	54
3 weeks to a month	23	58	23	59

10. County agencies were queried as to the availability of an array of services for persons in need of child protective services. Our survey produced the following:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Case management	80	1	81	1
Counseling	79	2	82	0
Family-based Service				
Professional family-based service	68	13	72	10
*Paraprofessional family-based service	70	11	63	19
*Homemaking	57	24	66	16
Social and Recreational	56	25	55	27
Transportation	81	-	79	3
Adoption	79	2	82	0
Day Care (non-training or employment)	78	3	76	6
Respite Care	79	2	78	4
Residential Facility Placement	80	1	82	0
Emergency Shelter	80	1	82	0
Child Foster Care	81	0	82	0
Group Homes	81	0	82	0
Correctional Facilities	78	3	75	47
Extended Respite	45	36	46	36
*Other Services	37	44	31	51

\*The difference in the responses between supervisors and child protection workers in these areas is big enough to warrant a special notation.

11. County agencies were queried as to whether they had a child protection team, and if so, what functions the team performed. The survey results are as follows:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Have child protection team?	68	13	71	11
Does case consultation?	67	14	65	17
Does community education?	46	35	47	35
Does professional education?	41	40	34	48
Coordination of/Advocacy for resources?	52	29	45	37
Community prevention council. (Children's Trust Fund)	36	45	31	51
Other non-specified.	17	64	8	74

12. When child protection teams were used to provide case consultation, we queried the county agencies to determine the percentage of child maltreatment reports, by type maltreatment, for which consultation by the team was sought.

	<u>90-100%</u>		<u>75-89%</u>		<u>50-75%</u>		<u>0-49%</u>		<u>Unknown</u>	
	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>	<u>Sup.</u>	<u>Wrk.</u>
	Number of counties reporting use of team by percentage.									
Neglect	19	23	9	2	8	9	34	39	11	9
Physical Abuse	26	27	7	3	6	5	31	38	11	9
Sexual Abuse	29	30	8	3	4	5	29	35	11	9

13. Counties were also queried regarding the use of the child protection team in relation to:

a. reports of neglect:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Use team at screening/intake.	24	57	22	60
At initial assessment.	48	33	38	44
Case planning.	60	21	60	21

b. reports of physical abuse:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Use team at screening/intake.	25	56	22	60
At initial assessment.	50	31	42	40
Case planning.	60	21	61	21

c. reports of sexual abuse:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Use team at screening/intake.	24	57	23	59
At initial assessment.	47	34	34	36
Case planning.	58	23	63	19

14. County agency respondents were asked what percentage of child protection cases referred to the county attorney's office for filing of a juvenile court petition were accepted. Our survey results are as follows:

<u>Percent Accepted by County Attorney</u>	<u>Number of Counties</u>	
	<u>Supervisors</u>	<u>Workers</u>
90-100% cases	48	54
75-87% cases	15	10
50-74% cases	8	8
0-49% cases	7	7
Unknown	3	3



15. County agency respondents were also queried as to what percentage of child protection cases referred to the county attorney's office for criminal charges are accepted.

<u>Percent Accepted for Filing Criminal Charges</u>	<u>Number of Counties</u>	
	<u>Supervisors</u>	<u>Workers</u>
90-100% cases	29	30
75-89% cases	18	10
50-74% cases	10	9
0-49% cases	6	18
Unknown	18	15

16. County agency respondents were also queried as to the reasons the county attorney's office decides not to pursue court action on certain child protection cases referred to them. Our survey found the following:

<u>Reason for not pursuing court action:</u>	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Lack of evidence.	70	11	77	5
Child not a good witness.	51	30	53	29
Situation not serious enough to warrant juvenile court petition or criminal charges.	49	32	62	20
This type case not successful in court.	36	45	32	50
Not enough alternatives pursued prior to court.	28	53	40	42
Other (nonspecific).	13	68	16	66

17. County agency respondents were queried as to the criteria they used to define chronic neglect. Responses are as follows:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Service provided family for more than one year.	26	55	26	56
Services appear to have little or no impact on improving family functioning.	42	39	37	45
Other reasons (nonspecific).	25	56	25	57
We don't have agency definition of chronic neglect.	43	38	46	36

18. County agency respondents were asked to identify and prioritize the problems/conditions they saw most frequently in situations of chronic neglect. Supervisors and workers prioritized the problems/conditions in the following ranking:

<u>Supervisors</u>	<u>Workers</u>
1. Lack of supervision.	1. Lack of supervision.
2. Emotional maltreatment.	2. Emotional maltreatment.
3. Inadequate food and clothing.	3. Inadequate food and clothing.

While the above three problems/conditions are considered the most frequent indications of chronic neglect, the following are other stated problems/conditions.

<u>Supervisors</u>	<u>Workers</u>
4. Inadequate housing.	4. Alcoholism.
5. Alcoholism.	5. Inadequate housing.
6. Lack of medical care.	6. Lack of medical care.

19. County agency respondents were asked if they had a sexual abuse treatment program available locally and if they thought the services were effective. Survey results are as follows:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Local availability of program.	50	31	50	32
Program effective.	50	31	44	38

20. Finally, county agencies were queried as to whether they have a Child Mortality Review Committee and, if so, what agencies or professions are represented. Responses are as follows:

	<u>Supervisors</u>		<u>Workers</u>	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
Have Child Mortality Review Committee.	14	67	11	71
Representatives from:				
Social Services - public	13	68	10	72
Law Enforcement	12	69	8	74
Hospitals	5	76	4	78
Public Health	10	71	6	76
Physician	7	74	6	76
Social Services - private	6	75	3	79
Schools	2	79	2	80
Other (nonspecific)	7	74	3	79

## CLIENT ACCESS TO SOCIAL SERVICES DELIVERY SYSTEM

### Description of the Project:

Minnesota Rules, part 9550.0010-9550.0092, require county social service agencies to advise individuals by written notice, of their right to sign an application for social services at any time during the agency's normal business hours. In addition, the rules require the county social service agency to give each prospective applicant a written list of the services available according to the county's approved community social services plan, to inform prospective clients of their rights and responsibilities, and to tell them how data collected about them will be used.

### Consequences of Failure to Comply:

Failure of a county social service agency to comply with the rules governing applications and notification of services available could indicate that the county has effectively denied some individuals access to the social service system. In addition, counties that fail to substantially comply with the rules may be subject to a reduction in their community social services fund pursuant to M. S. 256E.08, subd. 1.

### Method Used to Monitor:

Community Services Evaluation staff used a three question protocol to determine compliance with these provisions of the Administrative Rule. The questions were as follows:

1. Has the county agency posted notice in a prominent place advising individuals of their right to apply for social services? (Rule part 9550.0070, subp. 1.)
2. Does the county agency have a written list of services available according to the county's community social services plan to give to the client/applicant? (Rule part 9550.0070, subp. 2.)
3. Does the county agency have a form, prescribed or approved by the commissioner that contains information on the applicants rights and responsibilities and on how data collected about the applicant will be used? (Rule part 9550.0070, subp. 4.)

## Summary of Findings:

### A. Notification of "client right to apply":

1. Fifty-one county agencies had a prominently placed notification at the time the Department's review began.
2. Nine additional county agencies had a prominently displayed notification before the Department's review was completed. These county agencies were Anoka, Dakota, Hennepin, Olmsted, Pipestone, Ramsey, Scott, Washington, and Winona.
3. Two county agencies were undergoing major reorganization and stated they would be in full compliance by March of 1989. These county agencies were Chisago and Mower.
4. The following 24 county agencies were not in compliance with this rule requirement: Becker, Benton, Blue Earth, Carver, Cass, Clay, Douglas, Grant, Itasca, Kandiyohi, Kittson, Marshall, Nicollet, Norman, Otter Tail, Pennington, Polk, Pope, Red Lake, Rock, Roseau, Stevens, Waseca, and Wilkin.

### B. Written list of services to give to applicants/clients:

1. Sixty-one county agencies had a current listing of social services readily available to give to social service applicants and clients.
2. Two county agencies, Chisago and Mower, were undergoing major organizational changes and planned to have a current listing of services available by March of 1989.
3. One county agency, Mahnomon, had a current listing of services, but did not routinely make it available to applicants or clients.
4. Twenty-one county agencies did not have a current list of social services available for applicants/clients. These county agencies were: Becker, Benton, Cass, Clay, Douglas, Fillmore, Freeborn, Grant, Itasca, Kandiyohi, Kittson, Nicollet, Norman, Otter Tail, Polk, Red Lake, Rock, Steele, Stevens, Todd, and Traverse.

### C. The county agency had a DHS approved form containing information on applicants rights and responsibilities and information on how data collected about applicants would be used:

1. Every county agency was in compliance with the requirements of this rule provision. The primary reason for the high level of compliance with this provision is the county agency use of the DHS-2140, Application and Initial Plan for Social Services, which contains this information.

D. Recommendations/Corrective Action Steps:

1. County agencies out of compliance with these rule requirements were advised of the same. The Department is requiring each county agency out of compliance with provisions A and B to provide us with documentation that corrective action has been taken. This documentation can take the form of a copy of the county agency's "Clients Right to Apply for Social Services Without Delay," and a brochure listing available services, including any special eligibility provisions, if applicable.
2. Some county agencies thought that it didn't make sense to have the "Right to Apply" notification because that's the reason applicants come to the county agency. There was concern that such a notification expressed the obvious. Our experience tells us that not all potential clients are given the right to apply, on the basis of such things as presumed income ineligibility or the unavailability of particular services the applicant is seeking. Regardless of circumstances, any potential applicant must be given the right to apply for services without undue delay. It is this process that provides the basis for due process in those instances when applicants are determined to be ineligible, for whatever reason.

## MENTAL HEALTH PLAN SERVICE SYSTEM COMPONENT REVIEW

### Description of the Project:

In 1987, the "Comprehensive Mental Health Act" was enacted to assure that mental health services become available to all Minnesotans. The Mental Health Act required local county agencies hereafter referred to as county agencies to develop an array of comprehensive mental health services. In conjunction with a review of the status of mental health advisory councils, the Department decided to review the implementation of the following services, required by the Mental Health Act to be available by county agencies by July 1, 1988.

Education and Prevention  
Emergency Services  
Outpatient Services  
Residential Treatment  
Community Support Services

Under the Mental Health Act county agencies were required to submit a plan showing how they would make the basic mental health services available by July 1, 1988. The purpose of the mental health plan "look behind" assessments was to determine the extent to which the county agencies had implemented their mental health plans.

### Consequences of Failure to Comply:

If county agencies fail to implement their approved mental health plans, rudimentary mental health services will not be available to prevent long-term and recurring treatment and the mental health of Minnesota's citizens will be in jeopardy because of an inability to access needed mental health services. County agencies that are found to be substantially out of compliance are subject to having mental health Funds withheld pursuant to M.S. 245.483, subdivisions 1 through 4 until compliance is achieved .

### Method Used to Monitor:

The Community Services Evaluation Section, in conjunction with staff of the Mental Health Division, developed a standardized protocol, containing six basic questions and some 50 subparts to the questions. The protocols were used to review county mental health services and determine the extent to which county agencies had implemented their mental health plans. Information about mental health plan implementation was collected through interviews with social services administrators, supervisors, and mental health case managers and reviews of documentation (i.e., county board minutes, contracts with mental health providers).



## Summary of Findings:

Between July 1 and December 9, 1988, the Mental Health System Review protocol was administered in each county agency. For this review F/M/W (Faribault, Martin, Watonwan) and Region VIII North (Lincoln, Lyon, Murray) were each considered as one agency. The universe of county agencies reviewed was therefore 83 rather than 87. The results of this review are as follows:

### A. Mental Health Advisory Council:

1. **MINNESOTA STATUTES 245.466, SUBDIVISION 5**, requires each county board of commissioners to establish a mental health advisory council, or a mental health subcommittee of an existing advisory council. The law also requires representation on the advisory council by a mental health consumer, a family member of a consumer, a mental health professional, and a member of a community support services program. Our review revealed the following:
  - a. All 83 county agencies had a mental health advisory council.
  - b. Eighty of 83 county agencies had a mental health consumer representative on the advisory council.
  - c. Seventy-eight of 83 county agencies had family member representation on the advisory council.
  - d. All 83 county agencies had representation by a mental health professional on the advisory council.
  - e. Eighty-two of 83 county agencies had representation by a community support services program on the advisory council.

**Note:** We found a few vacancies because of council resignations, turnover of Community Support Program staff representatives, and job transfers. One county agency was reluctant to identify the consumer and family member because of data privacy concerns.

2. **MINNESOTA STATUTES 245.466, SUBDIVISION 5** also requires the mental health advisory council to "meet at least quarterly to review, evaluate, and make recommendations regarding the local mental health system;" to at least annually "arrange for input from the regional treatment center's mental illness program unit regarding coordination of care between the RTC and community based services;" and requires the county board to "consider the advice of the local mental health advisory council in carrying out its authorities and responsibilities."

Our review of the local agencies resulted in the following findings:

- a. Seventy-six mental health advisory councils were meeting or were scheduled to begin meeting quarterly to review, evaluate, and make recommendations regarding the local mental health system. In seven county agencies there was no documentation that the advisory council had been or was scheduled to begin meeting quarterly.

- b. While the Comprehensive Mental Health Act does not require that actual meetings between the advisory council and the RTC-MI program unit occur, the Department has determined that such meetings would be a good indicator of coordinated efforts. Thirty-four advisory councils or designated council members have met with staff of the mental illness unit of the Regional Treatment Centers in order to facilitate the coordination of mental health services. Twenty-two additional advisory councils or designated council members had plans to meet with the RTC mental illness program units before the end of the state fiscal year. In 26 instances, we found no documentation that meetings between these two groups was planned.
- c. While the Comprehensive Mental Health Act only requires the advisory council to provide input to the county board, the Department believes that council representation at meetings of the county board or human services board is a good indicator that mental health system concerns are being brought to the board. Thirty-four advisory councils or members of these councils have met with their county board of commissioners this year. Twenty-four additional mental health advisory councils had plans to meet with the county board prior to the end of the current state fiscal year. We could find no documentation of the advisory council's intent to meet with the county board in 24 county agencies.

B. Education and Prevention Services:

Minnesota Statutes 245.468 requires the county board to provide directly or contract for education and prevention services to persons residing in the county. Our review produced the following results:

- \*1. Sixty-seven county agencies provided Education and Prevention Services through contract with a mental health provider.
- \*2. Eight county agencies provided these services directly.
- 3. Twenty-eight county agencies provided these services both directly and under contract.
- \*4. In seven county agencies we found no documentation that these services were being offered. Readers of this report are cautioned that lack of documentation does not necessarily mean the service is unavailable. In one county we found evidence that education is provided by their vocational/technical institute, but could find no "prevention" provider. In two counties, agency staff indicated the service was being provided, but the contractual relationship did not specifically identify the service, or there was no contract in place.

\*1, 2, and 4 (underlined numbers) identifies the universe of county agencies. 3 is a subset of 1.

C. Emergency Services:

Minnesota Statutes 245.469 requires county boards to provide directly or contract for emergency services to meet the needs of county residents who are experiencing emotional crises or mental illness. Our review findings are as follows:

- \*1. Seventy-five county agencies contracted for emergency services.
- \*2. Five county agencies offered emergency services as a direct service.
- 3. Thirty-four county agencies provided emergency services both directly and under contract.
- \*4. Three county agencies lacked the documentation necessary to make a clear determination that the services were available. One county had some service documented - crisis hot line, trained staff and 30 minute telephone access to a psychiatrist. According to staff of another county agency, the county had the service available, but the contract did not give evidence of its availability.
- 5. Specific components of emergency services include supervised after hours service access, 30 minute availability of a mental health professional, 911 staff trained in crisis intervention skills, and the availability of acute hospital care. Our review revealed the following:

<u>Service</u>	<u>Number of Counties With Service</u>
a. Supervised, "after hours" service available.	73
b. 30 minute access to mental health professional.	72
c. 911 service used:	33
1. training in crisis intervention provided/arranged for 911 staff.	18
d. Acute care hospital care available.	76

**NOTE:** 911 service is not required to be provided, if the county agency has alternative methods of providing emergency services.

\*1, 2, and 4 above equals the universe of counties reviewed.

D. Outpatient Services:

Minnesota Statutes 245.470, subdivision 1 requires county boards to provide or contract for enough outpatient services to meet the needs of persons with mental illness residing in the county. Our review findings are as follows:

- \*1. Seventy-seven county agencies contracted for outpatient services.
- \*2. Four county agencies both provide and contract for the services.
- \*3. Two county agencies did not have sufficient documentation to determine the availability of these services.
- 4. Outpatient services include diagnostic assessments, psychological testing, development and modification of individual treatment plans, making referrals and placements, therapy and medication management. Our review, by service component, resulted in the following findings:

<u>Service</u>	<u>Number of Counties With Service</u>
a. Diagnostic Assessment	77
b. Psychological Testing	72
c. Individual Treatment Plans	71
d. Referrals and Placements	74
e. Therapy	79
f. Medication Management	75

Our review indicated that 14 county agencies could not document the availability of all six components of Outpatient Services. In four of these county agencies we could find no documentation of any service components, but in two of these county agencies, we did find documentation of outpatient services, but no identification of the service component.

\*1, 2, and 3 equals the universe of county agencies reviewed.

5. Minnesota Statutes 245.470, subdivision 2 also requires that appointments for outpatient services be timely (within 3 weeks) and that multi-disciplinary mental health professional staff be used. These staff include a medical doctor, licensed consulting psychologist, clinical social worker, licensed psychologist, and nurse practitioner. Our review indicated the following:

<u>Service</u>	<u>Number of Counties With Service</u>
a. Service available within three weeks.	61
b. Access to multi-disciplinary mental health professionals.	76

E. Residential Treatment Services:

Minnesota Statutes 245.472 requires county boards to contract for enough residential treatment services to meet the needs of all persons with mental illness residing in the county who are in need of that service. The law also requires that providers of this service be appropriately licensed. Our review results are as follows:

1. Seventy county agencies showed evidence of having contracts for residential services for children (Rule 5) and adults (Rule 36).
2. County agencies who did not have residential service providers within their geographic borders had placement agreements as evidence that the service was provided as appropriate even though they had no service providers located in their counties. In these instances, services were being purchased under a host county agreement between another county and the service provider, and placement agreements between the county of financial responsibility and the residential provider were in place.

F. Community Support Services:

Minnesota Statutes 245.471 requires county boards to provide or contract for community support services within the county to meet the needs of persons with serious and persistent mental illness residing in the county. Our review resulted in the following findings:

- \*1. Twenty-one county agencies provide community support services only as a direct service.

- \*2. While the Mental Health Division of the Department provided Rule 14 community support services (CSP) dollars to local agencies, only sixty-one county agencies had clearly documented the availability of the community support services under an approved grant application. The Mental Health Division believes that this discrepancy is caused by multi-county Rule 14 grants where documentation may exist in only one county. There were no identifiable contracts in place between the county agencies and the community support services projects.
  - 3. Thirty county agencies made CSP services available both directly and through a Department of Human Services approved grant application.
  - \*4. In one county, we could not find the documentation necessary for us to make a determination that CSP services were available.
- \*1, 2, and 4 equals the total number of county agencies reviewed.

Community Support Services Programs include the following components: client outreach, medication management, independent living skills, supported work/employability, crisis assistance, psychosocial rehabilitation, assistance in applying for government benefits, housing assistance, and day treatment (by July 1, 1989). Our survey produced the following results:

<u>Service</u>	<u>Number of County Agencies</u>
1. Client Outreach	80
2. Medication Management	81
3. Independent Living Skills	80
4. Employability/Supported Work	80
5. Crisis Assistance	82
6. Psychosocial Rehabilitation	81
7. Assistance/Government Benefits	77
8. Housing Assistance	80
9. Day Treatment (not required until 7/89)	72

Our review found that 12 county agencies did not have documentation that all components of CSP were in place. Six of these county agencies were missing only the day treatment component - a component not required to be in place until July 1, 1989.

G. Conclusions:

1. Our review found that the county agencies appear to be making a sincere effort to have broad representation on their mental health advisory councils.
2. Many of the contractual agreements between county agencies and mental health providers lacked specificity regarding services being purchased, the unit cost of services and a process for determining income eligibility for the service. As a result of this conclusion, the Department will, this year, undertake a review of all county agency contracts with mental health providers to ensure compliance with Minnesota Rule part 9550.0040, Grants and Purchase of Service Contracts.
3. our mental health system component review indicates that the county agencies are, for the most part, implementing the basic mental health services required by the Comprehensive Mental Health Act. Even in those 14 county agencies where we could not find documentation of all six components of Outpatient Services, we were able to find substantial evidence of compliance in several of these county agencies. Five county agencies had documentation of five of the six components, two county agencies had documentation of four of the six components, and two county agencies could document three of the six components. At the time this report is being published, staff from the Mental Health Division have already begun to follow-up with county agencies not having documentation of the availability of some mental health services.
4. One county agency did not have sufficient documentation to ascertain the availability of basic mental health services, except for residential treatment; one county agency did not have documentation of the availability of Education and Prevention, Emergency and Outpatient Services; and one county agency did not have documentation to ascertain the availability of Education and Prevention and Emergency Services. At this time this report is being published, staff from the Mental Health Division have already begun following up with these county agencies to ensure full compliance with the Comprehensive Mental Health Act.

**WELSCH V. GARDEBRING CASE RECORD  
AND SITE OBSERVATION REVIEW**

**Description of the Project:**

The Welsch v. Gardebring Negotiated Settlement required the Department of Human Services to conduct field reviews of the case records and services delivered to 250 Minnesotans with developmental disabilities. The case record reviews included a review of individual service plans, individual habilitation plans and county agency compliance with some of the requirements of the Minnesota Rules governing case management for persons with developmental disabilities (DHS Rule 185). On-site review of the services delivered to persons with developmental disabilities in their homes, day programs, and out-of-family home residential programs included assessment of the appropriateness of program activities, the degree to which persons with developmental disabilities were physically and socially integrated into their communities, whether they were receiving services in the least restrictive manner and the linkage between the services described in written service plans and the actual delivery of services in the community.

**Consequences of Failure to Comply:**

If the Department had failed to conduct these field reviews in accordance with the time frames required by the Negotiated Settlement the Department would have been out of compliance with the settlement approved by the federal court.

**Method Used to Monitor:**

Community Services Evaluation Section staff used a structured protocol and assessment instruments to review county agency case records and conduct on-site observations of community services provided to persons with developmental disabilities.

**Summary of Findings:**

Over 300 field reviews were conducted in 10 counties. The following county agencies comprised the county sample:

Blue Earth	Polk
Crow Wing	Ramsey
Hennepin	St. Louis
Meeker	Scott
Olmsted	Wright



The findings of the field reviews were analyzed along with data on county case management ratios in a report compiled for the Division for Persons with Developmental Disabilities by Greystone Group, Inc. In addition, the Department compiled the following information from the data base developed from the field reviews.

- A. Rule 185 requires that case managers be responsible to see that all required assessments are completed. There are 10 areas in which assessments must be made. We found all assessments completed in 78 of 303 cases reviewed, or in 25 percent of the sample.
- B. Rule 185 requires that assessments be timely. Timely is defined as from current up to 365 days depending on the type of assessment. We found only 6 of 303 assessments, or 2 percent of the case load sample, meeting the definition of timely in all 10 assessment areas.
- C. We also found a number of assessments missing from the case records. The most frequently missing assessments follow:

	<u>Number of Cases</u>
Social Environment	102
Hearing Screening	101
Dental	99
Physical Environment	96
Vision Screening	92
Gross and Fine Motor Skills and Mobility	83
Physical	56

- D. Rule 185 requires the development of an Individual Service Plan for each person who is developmentally disabled. In the sample review of 303 case records, 280 cases contained an Individual Service Plan; 23 case records contained no identifiable Individual Service Plan.

While 280 or 92 percent of the cases reviewed had an identifiable Individual Service Plan, only 205 cases or 68 percent had a timely Individual Service Plan.

Timely in this case means that the Individual Service Plan has been reviewed, and updated as appropriate, within 12 months of the date of the case record review.

- E. Only 2 percent or 7 of the 303 cases reviewed contained all the Individual Service Plan information required in Rule 185.

F. Rule 185 requires the county agency case manager to convene the interdisciplinary team to develop a single client-specific Individual Habilitation Plan which integrates the services provided by all providers and subcontractors. The case record review process identified 50 Individual Habilitation Plans, or 16.5 percent of the total, which were developed in accordance with the requirements of Rule 185.

Case record reviews resulted in the identification of 247 Individual Habilitation Plans which were developed by service providers. In 7 instances, no identifiable Individual Habilitation Plan was found in the case record.

G. Of the cases reviewed, the Department was interested in looking at the number of cases reviewed where all skills were taught in natural community setting. We found 20 cases or 6 percent of the cases sampled where virtually all skills were being taught in natural community settings.

H. Of the 303 cases reviewed, there was no current case manager assigned in 4 cases or 1.3 percent of the sample universe.

#### Recommendations:

1. The Department should maintain, if not strengthen its efforts to train case managers in the various provisions of Rule 185. Rather than conduct training in all aspects of the rule, consideration should be given to incremental training - assessments, relationship of assessments to individual service plans, services plan development, how to develop IHP's, etc. It is as important to focus on the "how to do it" piece as on the "what is the standard" piece. The Division on Developmental Disabilities will be hosting a conference, April 18 and 19, 1989 in Bloomington, entitled "Tailoring the System to Meet Individual Needs." Case managers have been invited to attend this conference. Also, the Case Management Training Manual is now completed and will be distributed at this conference and at future training sessions around the state. This manual does contain a number of examples of the "here's how to do it" variety.
2. The Department should standardize outlines for use in ISP and IHP development and reassessment. In conjunction with this, the Department should be explicit regarding what should be included in client case records and how the information should be organized. The Case Management Training Manual does contain sample outlines for ISP and IHP development, and case managers are encouraged to follow the respective outlines. Use of these outlines, or formats, is not required.

3. In revising Rule 185, the Department should focus on streamlining case management requirements and simplifying record keeping. The case manager's role in the development of the IHP should also be examined. Revision of Rule 185 is in progress now with a target completion date of December 31, 1989. Both county and provider staff are interested in this revision process, so the Division for Persons with Developmental Disabilities is approaching this effort with a commitment to listen to all the input being provided. The areas of assessments, IHP's and, to a lesser extent ISP's are being revised. Efforts will also be made to strengthen the monitoring responsibilities of case managers. It is important to note that Rule 185 revision is a major revision and nothing has yet been finalized.
  
4. The Department should continue case record reviews of persons with developmental disabilities with special attention given to persons receiving waived services and who may or may not be covered by the provisions of Rule 40. The Community Services Evaluation Section is currently in the process of developing protocols designed to review case record documentation of services provided to persons identified above as receiving waived services. Field reviews will be conducted, beginning by June 1, 1989.