



Madison County
Department of Social Services

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April 25, 2016

John M. Becker, Chairman
Madison County Board of Supervisors

Alexander R. Stepanski, Chairman
Health and Human Services Committee

Mark Scimone, County Administrator
Madison County

Dear Gentlemen:

The Madison County Department of Social Services 2015 Annual Report is attached. Within the next several pages, you will read stories of personal triumph and harsh realities. The two are often intertwined when confronted with poverty issues and family dysfunction. As an example, over 2,000 families came to DSS last year, representing over 4,000 people, with 800 of them homeless or facing evictions, 500 with utility disconnection notices, and 100 without fuel for heating. When faced with such staggering need, I am very proud to say that the employees of Madison County DSS were always ready to assist.

The State's effort to "take over" Medicaid administration continues to progress slowly, although methodically, forward. This has resulted in DSS requesting to refill some vacant positions as a result. We continue to monitor the effectiveness of the State in managing this complex caseload and have sought to keep the front lines of DSS as strong as possible throughout this transition.

The year has also been particularly rough for other parts of the agency. Notably, the first floor of the department underwent major renovations to accommodate the Career Center employees, who were relocating here from another location. The renovations lasted much of the summer and well into fall, which required some staff to move, move again, and then finally be settled into a "final" work location. All of this required tireless coordination and understanding of supervisors and workers.

At the same time, many of these same workers were being tested in the first full year of a new way to organize their work: task-based. Instead of relying on caseloads determined by alphabetical assignment, the task-based system would assign work based on availability and expertise. Needless to say, this new way of doing work, together with the other ever-changing workplace rules and environment, caused many disruptions. It is expected that as staff and



supervisors (and clients!) get more accustomed to the task-based system, together with the State's rollout of the Integrated Eligibility System (IES), all will become more comfortable and enjoy the labor savings it provides.

The Child & Family Services Unit was also very busy this past year implementing the Preventing Sex Trafficking & Strengthening Families Act, a comprehensive series of new requirements passed at both the federal and state levels. In a very real sense, the act deals with the serious topic of protecting our children, especially runaway and at-risk youth. The manner in which the act was implemented in New York State, however, was not supportive of local districts. In fact, most of the major policy changes were sent to each local DSS with hardly any notice and when the state did ask and receive comments regarding the changes requested, those comments were ignored. We are hopeful that the implementation issues thus far identified are corrected in the not-too-distant future and that any forthcoming policy changes are considered more thoroughly than this was. Fortunately, we have excellent Child Welfare staff that overcame the shortcomings and were able to effectively put in place training and policy to deal with these issues.

Finally, this past year was a year of moving forward for me personally and professionally. As the President of the New York Public Welfare Association for much of 2015, I was afforded the great opportunity to lead a group of committed and passionate DSS Commissioners from across the state. At the same time, I was fortunate to continue my recovery from my snowmobile accident a few short years ago. Both renewed my sense of commitment to Madison County and leading the Department of Social Services.

Challenges and opportunities await us in the coming year. We are facing an unprecedented epidemic of heroin and opiate addiction in our community that is tearing apart families and causing unknown pain and suffering. The community needs to take a proactive and informed role to ensure prescription medications are used in the amounts necessary and only for as long as necessary. Once a person is addicted to pain management medications (like opioids), the likelihood of him/her seeking out cheaper (and often more available) narcotics like heroin is greatly increased, causing irreparable harm to children and adults.

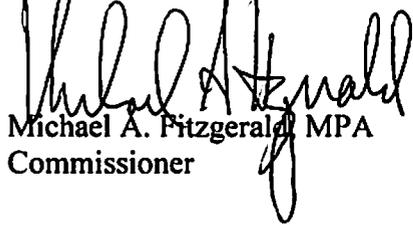
We also are facing challenges in our financial programs with operationalizing the Able Bodied Adults Without Dependents (ABAWD) requirements for Supplemental Nutrition Assistance Program (SNAP). This is a complicated set of tracking and monitoring that does nothing to help people get employed and takes away from the work to move these same people to self-sufficiency. We are hopeful that systems are developed to ease the administrative burden this has created. Additionally, the department will continue to ensure that homeless persons are housed with or without the Governor intervening with executive action.

Opportunities also abound for the department in the coming year and we are very excited to see the beginning phases of the State's replacement to the Welfare Management System (WMS), an antiquated case management system that has been in place for 30+ years. The Integrated Eligibility System (IES) will be the first major investment in many years by the State in reimagining the front door to DSS. We also anticipate many advantages having now converted our electronic images from a local system (OnBase) to a State-supported system (I/EDR). This will allow workers to now have access to electronic records from other counties and provide additional support to residents seeking services.

Finally, having converted financial and payroll records to new accounting software, DSS is hopeful that any remaining "bugs" in the system can be rectified in the coming months to ease the time and difficulty of this new program.

In conclusion, you will read many more details of the activities of DSS over the past year in the pages that follow. Many will highlight the positives of all that DSS does for the community and some will point out those areas that even with best of intentions, some families find themselves in unfortunate conditions. DSS will continue to meet the challenges of today and the future.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read "Michael A. Fitzgerald". The signature is fluid and cursive, with a large initial "M" and "A".

Michael A. Fitzgerald MPA
Commissioner

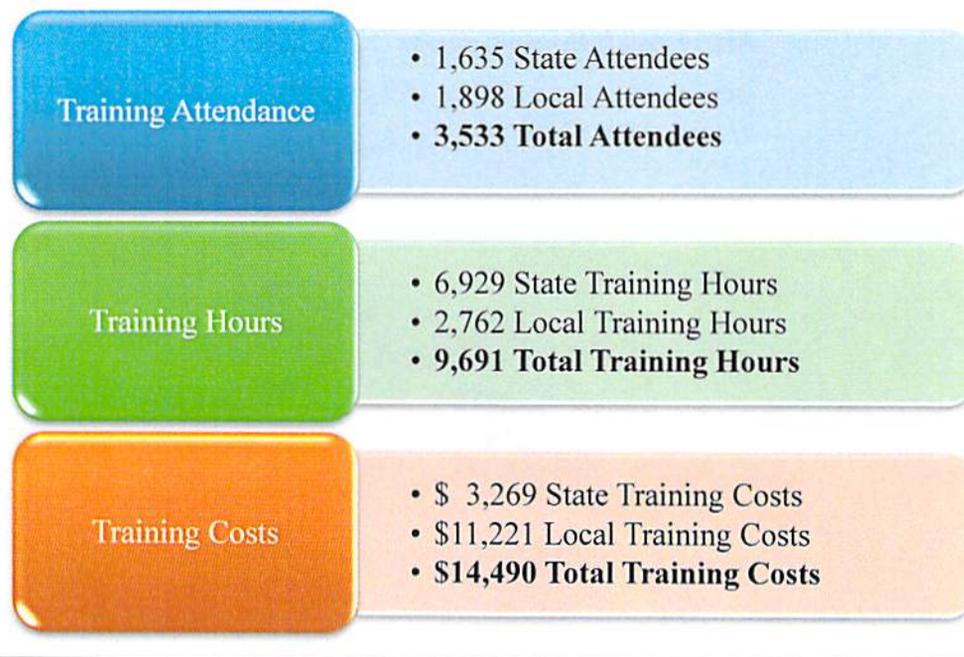
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STAFF DEVELOPMENT

One of the areas that the Confidential Secretary is responsible for is the scheduling of mandatory and professional development training for the DSS staff. This includes state-sponsored training and training provided by the Personnel Office, along with other locally-offered classes. Children's Services Caseworkers and supervisory staff are required to annually attend at least six hours of New York State approved CPS in-service training.

Training is conducted in a range of settings, including classroom, electronically via employee desktops, or in a group setting "teleconference" that is transmitted through the Internet. New York State offers its training at various venues across the state and usually in multiple locations to accommodate counties by minimizing travel time. Madison County is fortunate to be located closely to the Center for Development of Human Services (CDHS) training center in Liverpool, New York, which is one of the state's contracted training providers. If state training is unavailable at that location, employees typically travel to Utica, Cortland, Albany or Rochester. Other contracted providers include Brookdale Center on Aging, SUNY Albany, SUNY Potsdam and SUC at Buffalo.



All new positions, whether promotional or new hire, are given at least 75 hours of in-house new worker training, which is conducted by the directors and supervisors. Some titles; i.e., Social Welfare Examiner and Children's Services Caseworker, also require a minimum number of hours of state-sponsored training. Caseworkers require three-to-four months of intensive state-sponsored Common Core and agency training before acquiring their own caseloads.

Due to a high statewide turnover of Caseworkers in 2015, the "Common Core" training was redesigned into "Foundations" training. Instead of four weeks of Core classroom training followed by two weeks of CPS Response classroom training, trainees now attend two weeks of Foundations training and then two weeks of CPS Response. The remaining two weeks of

Foundations are completed at a later date. The motive behind the change is so Caseworkers can pick up full caseloads sooner. CPS Response must be completed before a caseload can be assigned. Foundations training continues into 2016.

The Personnel Office has moved online for many of the county's mandatory training sessions. Personnel is able to track training completion. Feedback on this training style has been mostly positive, as employees are able to complete the training at their desks and at their convenience.

In 2015, the department saw four promotions (Support Investigator, Case Supervisor Grade B, Senior Caseworker, and Senior Social Welfare Examiner) and eight new hires (Office Assistant II, Office Assistant I, five Caseworkers, and four Energy Resource Aides). Two staff members resigned (one Caseworker and one Office Assistant I), three retired (one Social Welfare Examiner, one Case Supervisor Grade B, and one Senior Social Welfare Examiner), and one was removed (Caseworker).

Always walk through life as if you have something new to learn and you will.

- Vernon Howard



Classroom Training

- State and local training conducted in a classroom setting either onsite or at various venues throughout the state. State training registration is done through the Human Services Learning Center (HSLC).

Foundations Training

- Foundations training team includes the Foundations trainer, trainee's supervisor, and confidential secretary/training coordinator. This training is the redesigned Common Core training. Caseworkers can pick up a caseload after six weeks of training instead of the 14 weeks associated with Common Core.

Webinars

- Trainees view a presentation via computer while verbally communicating by telephone. This may be attended by a group using a projector connected to the computer or may be individually attended by using the employee's desktop.

iLine Training

- State-sponsored iLine classes are computer-based and accessed through the trainee's desktop. These are interactive classes and include participants from across New York State. These training sessions are conducted at specific dates and times.

TrainingSpace

- State-sponsored TrainingSpace courses are also accessed through the trainee's desktop. These are view-only sessions and can be conducted at the trainee's convenience rather than specific dates and times.

Teleconferences

- State-sponsored teleconferences are offered at various times throughout the year with no pre-registration required. These sessions, viewed as a group, are broadcast via Internet on designated dates and times. Participants' questions are faxed to the trainers and are answered during the broadcast. Most of the teleconferences eventually become TrainingSpace offerings.

INCOME MAINTENANCE

The Income Maintenance unit includes both the Temporary Assistance program (TA) and the Supplemental Nutrition Assistance Program (SNAP). The unit consists of four Social Welfare Examiners who determine eligibility for TA, and eight Social Welfare Examiners who determine eligibility for SNAP, with three Senior Social Welfare Examiners overseeing both programs.

The Temporary Assistance unit remained fairly consistent in 2015, showing only a slight decrease in applications registered:

TA	2014	2015
Caseload	354	356
Applications Registered	1,076	944

Applicants for Temporary Assistance (emergency or ongoing assistance with shelter, heat, utilities) are required to complete a pre-screening sheet, also referred to as a “white sheet,” which the agency uses to determine what assistance is needed. This year, there were 2,025 pre-screening sheets completed. The following represents the type of assistance requested through pre-screening sheets:

<u>Individuals</u>	<u>Type of Assistance</u>
4,084 (2,464 adults, 1,620 children)	individuals represented in the 2,025 sheets
832	homeless or have a pending eviction
477	utility disconnect*
97	out of fuel*

*does not reflect *active* TA or SNAP households with utility disconnection or no fuel

The SNAP program continued to see a slight increase in applications, including online applications. Applicants for SNAP have the ability to apply online through the Office of Temporary and Disability Assistance (OTDA) myBenefits website – www.myBenefits.ny.gov. Of the 837 applications received via the website, 299 were received outside of regular agency business hours, which shows that this method is critical in providing access to assistance for those unable to come in to the agency during normal business hours.

SNAP	2014	2015
Caseload	4,561	4,472
Applications Registered	2,762	2,857
Online Applications	785	837

Throughout the year 2015, the Temporary Assistance program served an average of 638 individuals residing in Madison County. The SNAP program served over 8,600 individuals.

Temporary Assistance

	2014	2015
Phone Calls	7,095	6,779
Monthly Average	591	565
Walk-ins	4,029	3,785
Monthly Average	336	315

SNAP

	2014	2015
Phone Calls	26,870	26,670
Monthly Average	2,239	2,223
Walk-ins	4,471	4,707
Monthly Average	373	392

FRAUD

In late 2014, a third Senior Social Welfare Examiner position was added to the IM unit to act as a contact for the Sheriff’s Office Investigations unit, which conducts all potential fraud investigations. This position provides program information to the Sheriff’s Office and handles systems reports in regards to the following Program Integrity initiatives:

- Public Assistance Recipient Information System (PARIS), which identifies recipients who are actively receiving assistance in other states.
- Prison Match (State), which identifies recipients who are incarcerated and are, therefore, ineligible for benefits because their needs are being met.
- Electronic Benefit Transfer (EBT) Out-of-State match, which identifies recipients who are consistently transacting benefits in states that are non-contiguous to New York State.

In 2015, there were 53 Prison matches, 85 PARIS matches, and 1 EBT Out-of-State match. There was a total of 114 fraud referrals made to the agency, resulting in 76 referrals being referred to the Sheriff’s Investigation unit. Of these 76 referrals, 14 resulted in arrests for welfare fraud.

UPCOMING CHANGES

In January 2016, participants in the Supplemental Nutrition Assistance Program (SNAP) who are classified as an Able Bodied Adult without Dependents (ABAWD) will be subject to work requirements as a condition of eligibility for SNAP. Previously, Madison County had an exemption to these requirements, which expired December 2015. The IM unit will be responsible for engaging and monitoring this additional population on a monthly basis to ensure all work requirements are met.

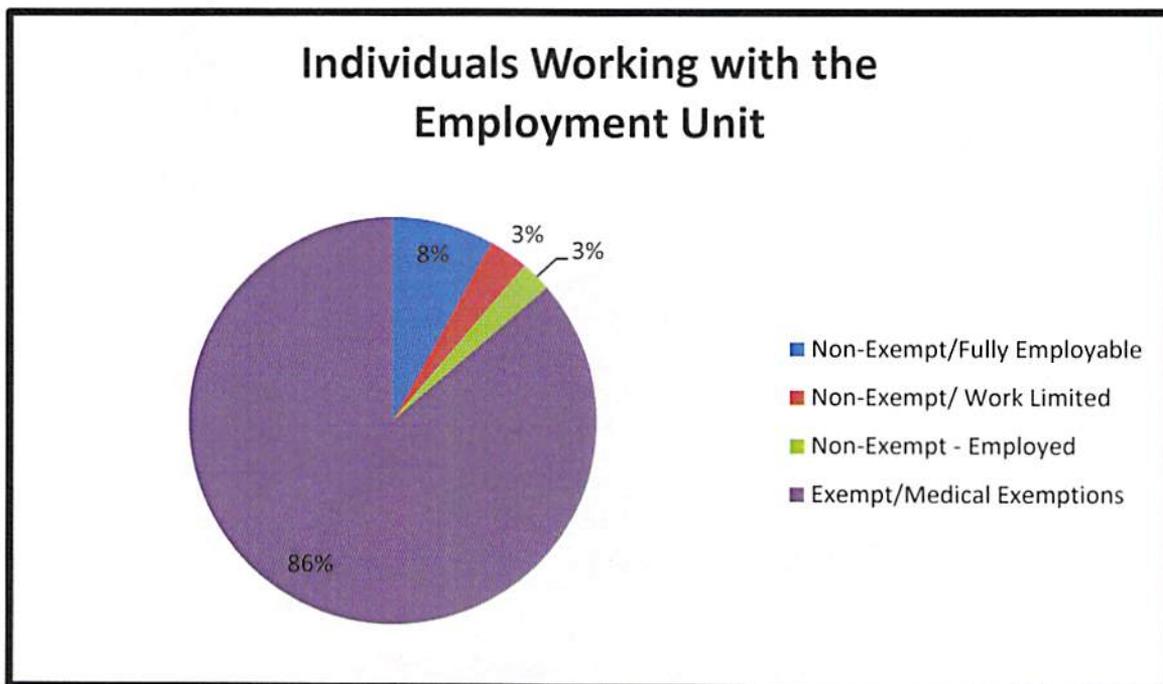
Submitted by Patricia Platt, Director of Financial Assistance

EMPLOYMENT

The Employment unit provides the essential support tools to individuals applying for and receiving temporary assistance to become self-sufficient. The staff works with two groups of individuals between the ages of 16 and 59:

- Non-exempt: individuals who are physically and medically able to work
- Exempt: individuals who are temporarily or permanently physically and/or mentally unable to work

The unit assists non-exempt adults to make finding and keeping employment a primary goal. Exempt individuals that are temporarily unable to work are assisted with accessing available treatment plans and/or rehabilitation services to facilitate their return to an employable status. Those permanently incapacitated are provided assistance to apply for social security funds.



Significant Changes in 2015

For many years, the unit has had the presence of an employee from the Office of Temporary and Disability Assistance (OTDA) New York State Jobs Program stationed at DSS to assist with employment-related activities such as assessment/employment plans, supervised job search, job placement services, job development, and reviewing individuals' progress with work activities and jobs. The employee retired in 2015 and OTDA notified DSS that they would not refill the position, resulting in the duties of this position becoming additional responsibilities for the two Welfare Employment Representatives.

The loss of the state employee combined with the change in ABAWD status (discussed in SNAP report), along with the increased homeless population the agency has experienced over the last several years resulted in management's request for an additional Welfare Employment Representative for 2016. The benefits that the unit is hoping to see from this position include having a more in-depth concentration on employment activities and work participation in an attempt to raise the current participation rates and assisting with the homeless population. Homelessness makes it even more difficult to obtain or maintain employment. The unit will also assist the SNAP unit with monitoring the ABAWD-required work participation beginning in 2016.

Work Participation

Temporary Assistance recipients must participate in countable work activities per month in order to continue to receive benefits. A few of the work activities are unsubsidized employment, on-the-job training, job search, community service, and work experience. The number of hours individuals are required to participate in work activities is dependent on the amount of Temporary Assistance and SNAP benefits they receive each month and household composition.

Madison County has a mobile work crew supervised by two Work Crew Leaders. The mobile work crew is the conduit for work experience for Temporary Assistance and SNAP recipients in Madison County, providing an atmosphere of teaching marketable skills. The mobile work crew performs jobs for Madison County non-profit agencies and municipalities. The projects provide a platform for the recipients to meet their required countable work activities participation while providing work at no cost to the agencies.



Submitted by Patricia Platt, Director of Financial Assistance

MOBILE WORK CREW

The work crew completed numerous projects for not-for-profit agencies and municipalities within Madison County, which helped these agencies afford projects that might not have been completed otherwise. The crew performed a total of 3,975 hours on projects as follows:

Major Projects:

- Madison County DSS – helped to prepare for major construction renovations, moved furniture, assisted with coordination of contractors, performed small projects not included in contractors' contracts, disassembled and re-assembled cubicles and offices.
- Madison County DSS building – helped to coordinate and move the Career Center from their former location to their new location in the DSS building.
- Sheriff's Patrol Building – assisted with coordination of entire project, provided demolition work, framing, insulation, wiring, fire alarm wiring, windows, sheetrock, sheetrock finishing, and roof repairs.
- Madison County – assisted with teardown of property located on corner of Creek and Buyea Roads and provided onsite cleanup.
- Madison County Landfill – put new roof on building due to storm damage.

Minor Projects:

- OHG Fishing Derby – helped with setup and cleanup.
- Boxing Hall of Fame – helped with cleanup.
- Canastota VFW – assisted with construction of pavilion.
- Madison County Cooperative Extension – repaired and painted main floor offices and hallways.
- Great Swamp Conservancy, Canastota – repaired and painted.
- Child Advocacy Center – repaired and maintained.
- Canastota DPW – leaf cleanup.
- Snow removal from county cars.

Madison County Landfill:

- E-Waste program with LOJOs.
- Landscaping and lawn mowing.
- Snow removal.
- Metal pile sorting (copper, aluminum, and other metals).
- Household battery and light bulb collection program.

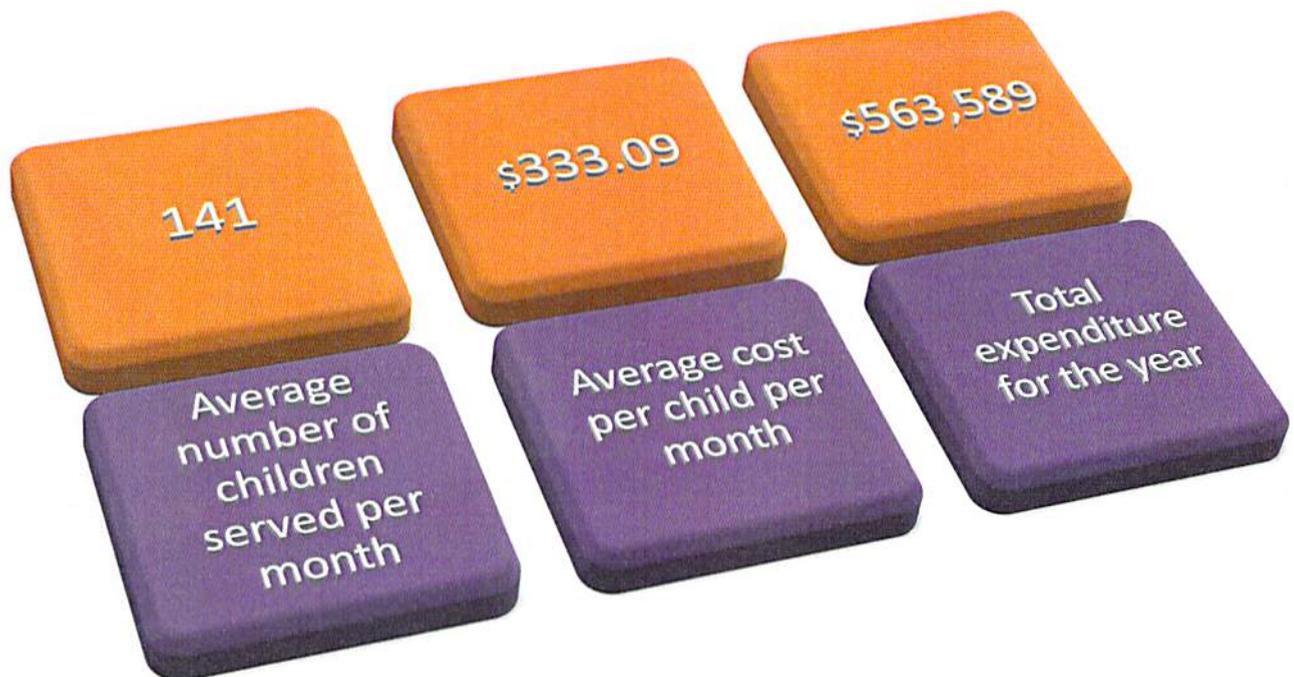
The agency continues to have worksite agreements with the Madison County Office for the Aging, Town of Sullivan, YMCA, and Oneida Recreation Department. We have had great success with our partnership with these agencies.



Submitted by Patricia Platt, Director of Financial Assistance



The Day Care program is an important element for parents who are currently employed, seeking employment, attending educational programs, or participating in our work experience program. The program provides a subsidy to eligible parents based on income, the child's age, and individual needs. The chart below indicates the averages for 2015 Day Care costs.



Submitted by Patricia Platt, Director of Financial Assistance

BURIALS

In 2015, DSS received 92 applications for indigent burials, with 76 of those applications being processed for payment by DSS. The total amount paid for burials was \$148,500.54, an average of \$1,953.95, which is a decrease of 19 percent from the previous year.

Below is the amount paid to our local funeral homes:

Funeral Provider	Applications	Denials	Costs
Ayer & Zimmer Funeral Home	2	1	\$2,391.00
Ballweg & Lunsford Funeral Home	1	0	\$1,875.00
Burgess & Tedesco Funeral Home	11	5	\$11,620.00
Campbell Dean Funeral Home	13	3	\$31,189.35
Coolican & McSweeney Funeral Home	4	0	\$8,405.40
Cremation Services of CNY	1	0	\$1,520.00
Dimbleby Funeral Home	1	0	\$3,487.99
Enea Funeral Home	1	0	\$2,719.29
Fahy Funeral Home	1	0	\$2,355.00
Farone & Sons Funeral Home	1	0	\$2,648.80
Fiore Funeral Home	5	2	\$8,908.20
G.F. Zimmer Funeral Home	5	1	\$8,783.00
Garland Bros Funeral Home	1	0	\$3,008.24
Gates Funeral Home	1	0	\$2,150.00
Ironside Funeral Home	3	0	\$7,924.00
J. Homer Ball Funeral Home	6	0	\$15,556.59
LaRobardiere Funeral Home	1	0	\$2,988.04
Maleki Funeral Home	1	0	\$2,150.00
Mathewson-Forani Funeral Home	2	0	\$3,248.06
Michael Brown Funeral Home	2	0	\$4,730.79
Nunn & Harper Funeral Home	1	0	\$2,220.00
Paul Funeral Home	1	0	\$3,110.00
Schepp-Eaton Tubbs Funeral Home	1	0	\$1,875.00
Smith Funeral Home	2	1	\$2,625.00
Tait Funeral Home	2	1	\$2,976.32
Traub Funeral Home	6	2	\$8,035.47
Total	76	16	\$148,500.54

Submitted by Patricia Platt, Director Financial Assistance

MEDICAL ASSISTANCE

Medical Assistance (Medicaid) is a program that provides health care coverage for eligible children and adults. To qualify for the Medicaid program, applicants must meet certain requirements such as income, resources, age, or disability. The Medicaid program makes payments directly to providers of medical care, such as hospitals, doctors, pharmacies, etc., and is funded through federal, state, and county appropriations.

The total Medicaid expenditures for Madison County in 2015 was \$108,337,917.53 with the local share being approximately \$10,666,581.30.

The Medical Assistance Unit continues to process applications for the non-MAGI population, certain MAGI populations, and remains responsible for under-care maintenance of both MAGI and non-MAGI populations.

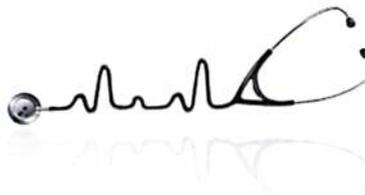
Year 2015 brought many changes to the Medical Assistance Unit. Staff turnover (due to retirements and promotions) resulted in changes in caseloads along with state program changes for Examiners. Within the unit, an Office Assistant II (OA II) and a Social Welfare Examiner positions were eliminated and another Social Welfare Examiner position was moved to the Supplemental Nutrition Assistance Program (SNAP) Unit. In addition, the Supplemental Security Income caseload previously carried by the eliminated OAII was integrated into the Medicaid community caseload.

2015 Statistics

There are **5,731 Medical Assistance cases** comprised of **8,746 individuals**. This is 12 percent of Madison County's population.

Totals as of December 31, 2015:

3,751	Community Medicaid cases
1,493	SSI cases
220	Nursing home cases
218	Waiver cases
49	Presumptive eligibility cases



1,213	Medicaid applications were registered
1,577	Medicaid cases were opened or reopened
21	Disability reviews were referred and processed
151	Application referrals received from NYS of Health for individuals disabled, in a nursing home or residential treatment facility, seeking retroactive coverage, foster care and adoption subsidy, and surplus income.
27	Undercare renewals were received from NYS of Health for those no longer financially eligible for Medicaid, individuals with Medicare or over 65 years of age, not a parent or caretaker relative.
8,866	Phone calls were received by the Medicaid unit in 2015
1,429	Individuals were seen by Medicaid Examiners in 2015

Medicaid Managed Care has been mandatory in Madison County since October 1, 2010. Exemptions from managed care enrollment are being eliminated and new populations/benefits are being phased into the plans as more and more services are covered. Madison County has two mainstream managed care plans: Fidelis Care and United Healthcare. There were **6,103 individuals enrolled in mainstream managed care as of December 31, 2015: 4,721 enrolled in Fidelis Care and 1,382 enrolled in United Healthcare.**

Managed Long-Term Care (MLTC) enrollment had been voluntary since October 1, 2012, and became mandatory December 1, 2014. Managed Long Term Care is a partially capitated insurance plan that covers community-based long-term home health care benefits for Medicaid recipients who demonstrate need for more than 120 days, as determined by the Conflict-Free Evaluation and Enrollment Center. These services are primarily defined as: nursing services in the home, certified home health aides, personal care services in the home, adult day health care, private duty nursing, or consumer directed personal care services. **Madison County now has four MLTC plans available with 69 consumers enrolled as of December 31, 2015: Visiting Nurses Services of New York (VNS) – 3 enrollments; Visiting Nurses Association of Central New York (VNA) – 63 enrollments; Fidelis Care – 3 enrollments; and i Circle Services – 0 enrollments.**

Transition of Long-Term Nursing Home Benefit into Medicaid Managed Care:

Beginning July 1, 2015, all Medicaid-eligible consumers age 21 or over in need of long term placement in a nursing facility were required to enroll in or remain enrolled in a Medicaid Managed Care Plan or Managed Long-Term Care Plan in order to receive this benefit as a covered service (unless otherwise exempt or excluded). Eligible Medicaid long-term placement consumers residing in a nursing home prior to the mandatory July 1, 2015, date were not required to enroll in a plan, but could voluntarily enroll beginning October 1, 2015. Medicaid Examiners continue to determine chronic care eligibility and are now responsible to code these consumers for enrollment in the eMedNY program restriction/exception field. Once coded, the

commencement of the 60-day period to choose a managed care plan is triggered. The plan selected must contract with the nursing home in which the consumer is placed. New York Medicaid Choice provides outreach, education materials, plan selection, and auto assignment if a plan selection is not obtained within the allowed timeframe for plan selection. As of January 1, 2016, seven consumers were enrolled in a plan.

Task Management System: The Medicaid Unit utilizes this software program to track and manage casework. Each Examiner is responsible for a specific part of the processing of cases. Community Medicaid consists of three divisions of work: Client Contact Workers, Trackers, and Finishers. Chronic Care work is assigned alphabetically; one examiner completes all related tasks to the case assigned to him/her. In 2015, the Medicaid Unit completed a total of 17,692 tasks.



2014-2015 MMIS CATEGORY COMPARISON

TYPE OF SERVICE	2014 ACTUAL	2015 ACTUAL	Inc/(Dec)	% OF CHG
HOSPITALS (IN&OUTPATIENT)	\$ 5,755,421.39	\$ 6,711,180.42	\$ 955,759.03	16.61%
SNF(SNF & ICF)	\$ 16,982,764.44	\$ 15,776,592.91	\$ (1,206,171.53)	-7.10%
CLINICS	\$ 2,949,451.50	\$ 2,799,220.10	\$ (150,231.40)	-5.09%
HOSPICE SERVICES	\$ 28,567.02	\$ 65,811.47	\$ 37,244.45	130.38%
PHYSICIANS	\$ 933,723.68	\$ 805,580.28	\$ (128,143.40)	-13.72%
DENTAL	\$ 194,419.21	\$ 191,248.30	\$ (3,170.91)	-1.63%
OTHER PRACTITIONERS	\$ 1,525,686.28	\$ 1,290,453.89	\$ (235,232.39)	-15.42%
CHILD IN MED PER DIEM	\$ 329,797.79	\$ 379,960.89	\$ 50,163.10	15.21%
PERSONAL CARE	\$ 828,866.03	\$ 674,641.22	\$ (154,224.81)	-18.61%
HOME HEALTH AID	\$ 144,118.11	\$ 107,556.62	\$ (36,561.49)	-25.37%
HOME NURSING	\$ 65,916.46	\$ 8,779.87	\$ (57,136.59)	-86.68%
ASSISTED LIVING PROG	\$ 130,287.54	\$ 186,417.09	\$ 56,129.55	43.08%
WAIVED SERVICES	\$ 23,618,034.95	\$ 25,985,996.32	\$ 2,367,961.37	10.03%
REHAB SERVICES	\$ 554.51	\$ 808.35	\$ 253.84	45.78%
THERAPIST	\$ 9,755.89	\$ 11,214.43	\$ 1,458.54	14.95%
REHAB OPTION SVCS	\$ 2,197,140.59	\$ 2,124,460.08	\$ (72,680.51)	-3.31%
DRUGS	\$ 1,731,165.04	\$ 1,788,131.56	\$ 56,966.52	3.29%
SICK ROOM SUPPLIES	\$ 123,830.71	\$ 122,480.10	\$ (1,350.61)	-1.09%
EYEGASSES	\$ 13,714.63	\$ 11,351.10	\$ (2,363.53)	-17.23%
DME AND APPLIANCES	\$ 163,760.40	\$ 149,175.87	\$ (14,584.53)	-8.91%
HMO SERVICES	\$ 35,252,234.50	\$ 42,313,470.39	\$ 7,061,235.89	20.03%
LTC-MANAGED CARE(NEW CAT)	\$ 713,039.03	\$ 1,693,106.23	\$ 980,067.20	137.45%
CASE MANAGEMENT	\$ 1,775,336.69	\$ 2,013,316.01	\$ 237,979.32	13.40%
PRE-PAID M H PLAN	\$ -	\$ -	\$ -	#DIV/0!
HIPP PAYEES	\$ 47,585.85	\$ 185,270.36	\$ 137,684.51	289.34%
TRANSPORTATION	\$ 2,496,683.32	\$ 2,745,796.25	\$ 249,112.93	9.98%
LAB & X-RAY	\$ 151,000.33	\$ 167,838.58	\$ 16,838.25	11.15%
OTHER	\$ 31,654.63	\$ 28,058.84	\$ (3,595.79)	-11.36%
TOTAL	\$ 98,194,510.52	\$ 108,337,917.53	\$ 10,143,407.01	10.33%

Submitted by Leigh Silkowski, Director of Financial Assistance

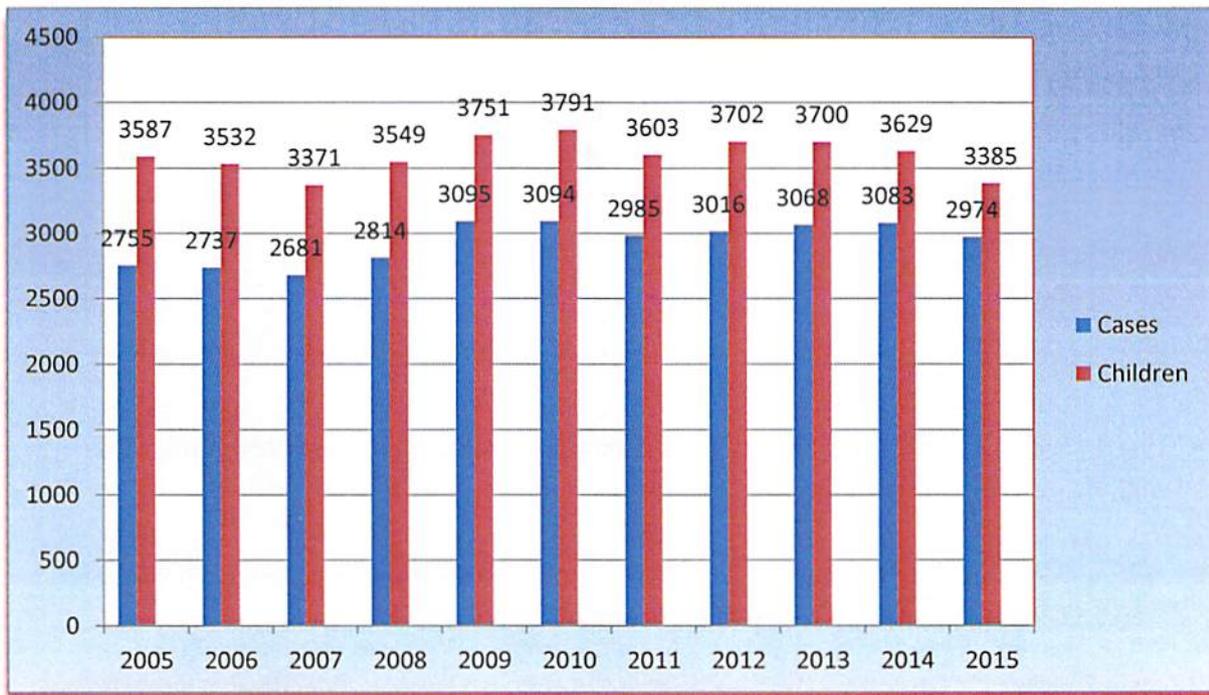
CHILD SUPPORT ENFORCEMENT

The Child Support unit assists custodial parents in obtaining financial and/or medical support for their children. Services include locating absent parents, establishing paternity, establishing and enforcing support orders, and collecting and monitoring child support payments.

Caseloads

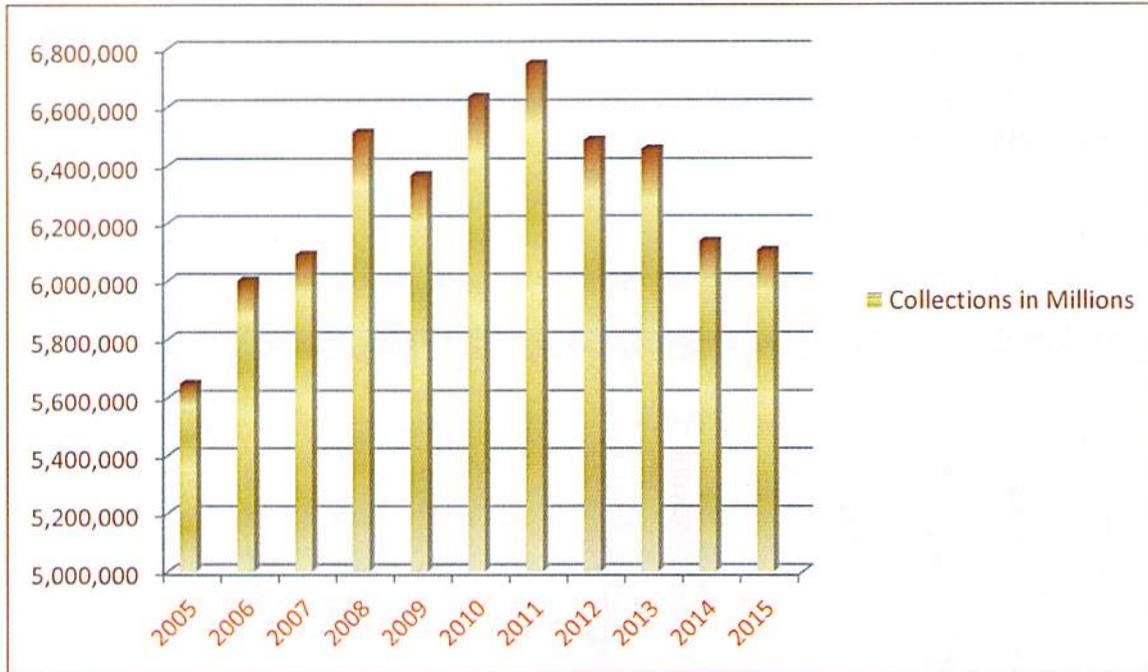
Over the past 10 years, the number of Child Support cases has fluctuated. This trend is repeated in the number of children served in those same cases. The unit ended the year 2015 with 2,974 cases, serving 3,385 children.

Chart reflects caseloads and children served over the past 10 years



Collections

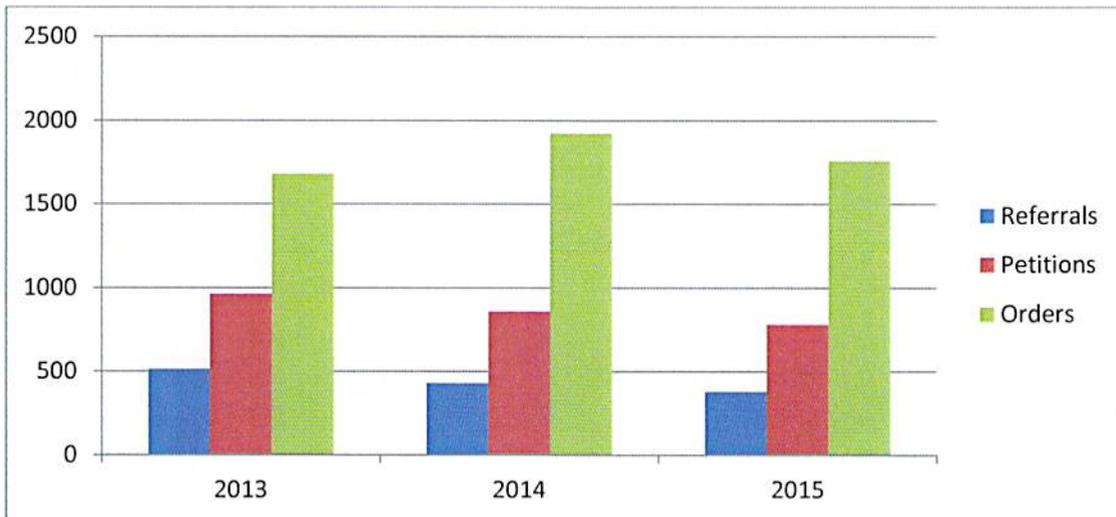
- Collections for 2015 totaled \$6,106,634, a slight decrease from last year's collections of \$6,138,578.



- \$101,495.83 in child support collected from non-custodial parents' New York State income tax refunds – an increase of 2.97 percent from 2014.
- \$194,883.15 in child support collected from non-custodial parents' federal income tax refunds – an increase of 67.93 percent from 2014.
- \$180,367.58 in child support collected from respondents' unemployment insurance benefits.
- \$6,999.91 in child support collected from lottery intercepts.

Enforcement Collections

- A combined total of \$32,138.71 was received as a result of property execution methods, including bank account and vehicle seizures.



- 783 petitions were filed by the Child Support unit, including paternity petitions, support petitions, and support collection petitions.
- 381 referrals were received from Temporary Assistance, Medical Assistance, and Foster Care units, enabling the Child Support unit to build cases to establish or enforce child and/or medical support.
- 1,760 child/medical support orders were received and processed by means of building new accounts and adjusting or closing existing Child Support accounts.
- 514 cooperation interviews were conducted and processed by the unit as a result of individuals applying for temporary/medical assistance.

Genetic Testing

In 2015, the Department entered into a contract with the Laboratory Corporation of America Holdings (LabCorp) for genetic testing services. LabCorp collects DNA samples at their own facility as opposed to onsite at the department. During 2015, LabCorp received a total of 92 individuals for genetic testing to assist in establishing paternity.

Future Goals

The Support Collection unit will continue towards its goal of improved utilization of enforcement methods in an effort to increase overall collections for the year 2016.

Submitted by Patricia Platt, Director of Financial Assistance

HOME ENERGY ASSISTANCE PROGRAM (HEAP)

HEAP is a federally-funded program, administered locally by DSS that assists low-income New Yorkers with the cost of heating in their home. The HEAP program offers four components: a regular benefit for heat, an emergency benefit for households in a heat or heat-related energy emergency, the Home Energy Repair/Replace Program (HERR), and the Cooling Assistance Component (CAC).

This year's HEAP program began the season with anticipated closing dates scheduled earlier than previous years, based upon federal funding. Additional federal funding was obtained, the program component closing dates were extended, and a second emergency benefit for heat and heat-related emergencies was made available.

2014-2015 Program Dates:

Component	Opening	Closing
Regular	November 17, 2014	March 27, 2015
Emergency	January 2, 2015	March 27, 2015
Second Emergency	March 9, 2015	March 27, 2015
HERR	November 10, 2014	January 9, 2015
Cooling Assistance	May 1, 2015	August 31, 2015

Application Options: HEAP applicants may request a Home energy Assistance Program Application from DSS either in person, by telephone, or may file an online application through myBenefits.ny.gov. Applicants may request a telephone interview or a face-to-face interview if preferred.

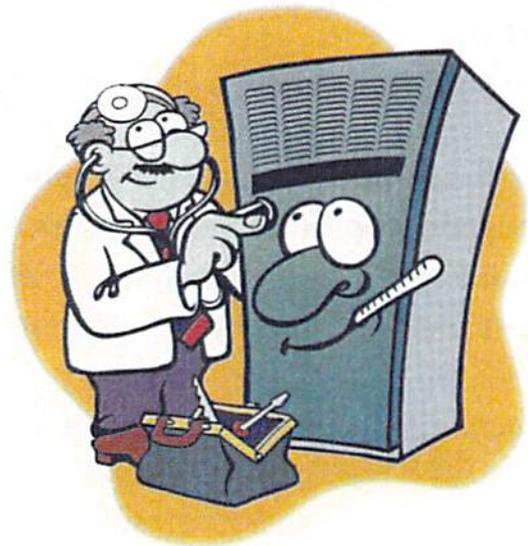
Regular HEAP base benefits range from \$21 to \$625 and Emergency HEAP base benefits range from \$140 to \$575, depending on the applying household's income, household size, fuel type, and living arrangement. An extra \$25 is added on for a Tier I household and another \$25 is added on if there is a vulnerable member in the household.

2014/2015 Statistics:

A total of **908 early outreach applications were mailed out** by NYS HEAP to vulnerable households (the head of the household is age 60 or older or under age 60, but contains a child under age 6 or a disabled individual) that received a regular HEAP benefit in the previous year. A total of 663 early outreach applications were returned to the Madison County HEAP unit and 654 were processed prior to opening date of the HEAP Regular component.

- The HEAP unit processed 1,024 mail-in/online applications (which included early outreach).
- The HEAP unit saw 1,342 walk-in applicants.
- The HEAP unit handled 6,045 phone calls.
- The HEAP unit processed 611 online applications.
- 5,295 Regular benefits were issued through the Supplemental Nutrition Assistance Program (SNAP) and HEAP units at a cost of \$2,057,097.
- 1,885 Emergency benefits were issued through the SNAP and HEAP units at a cost of \$980,110.

The HEAP Heating Equipment Repair and Replacement component helps eligible low-income homeowners repair or replace primary heating equipment necessary to keep the home’s primary heating source functional. The HEAP unit processed and referred the applications to Stoneleigh Housing, Inc.



- 23 repair or replacement referrals were made to Stoneleigh Housing.
- 10 furnace repairs were completed at a cost of \$4,056.86.
- 13 furnace replacements were completed at a cost of \$41,164.44.

The HEAP Cooling Assistance Component (CAC) provided a benefit of up to \$800 per household, this program year, for the purchase and installation of air

conditioners and fans to eligible households that include individuals with medical conditions exacerbated by extreme heat. Applications for this component were also forwarded to Stoneleigh through the HEAP unit. The HEAP unit is also responsible for payment of installed air conditioners.

- 34 applications were received
- 7 applications were denied
- 27 air conditioners were installed at a cost of \$15,356.38

As always, federal funding will play a key role in the planning and implementation of the next HEAP season program.



Submitted by Leigh Silkowski, Director of Financial Assistance

FAMILY SERVICES

Below you will see various charts and data points highlighting some of the past year's events in Family Services. There are also a few stories to help paint a more vivid picture of the families we have helped.

First, we will share some of the major issues and initiatives we have dealt with this past year. Unfortunately, we saw the continuing rise in heroin use in our community, which caused significant difficulties for family members of all ages. Newborn babies, our most vulnerable population group, have to endure weeks of withdrawal symptoms and treatment at the beginning of life, as well as lifelong physical or mental impairment. Young children are sometimes left to fend for themselves. Adolescents lack supervision or begin to follow in adult footsteps. Parents miss out on positive relationships with their children and may experience significant emotional and/or physical pain from addiction. Even grandparents are affected, with some who are now raising grandchildren.

Madison County was able to secure federal and state funding through a grant from the Office of Children and Family Services to help with this problem. The funding has allowed us to co-locate a mental health clinician, with a specialty in substance abuse, within Family Services. This clinician is able to go out with our staff to provide expert assessments and treatment recommendations. She is able to refer family members to treatment and to help ensure that all barriers to accessing treatment are removed. This is a significant help to our casework staff and improves services to families.

We have also been busy implementing the new federal legislation: Preventing Sex Trafficking and Strengthening Families Act. With this new law, we are required to complete a screening questionnaire for all children we come in contact with, regardless of their ages or situations, to determine if they are at risk of being victims of sex trafficking. We must complete one for every child, and although the tool is short, the total time needed is significant. Our staff, nevertheless, has done well to embrace this change and do what is required. We have identified two youth whom we believe to be victims of sex trafficking.

Finally, another major issue we have been faced with is the financial exploitation of our senior population. New York State has recently determined that financial exploitation costs citizens over \$100 million in lost assets with an additional cost of \$6.2 million to investigate these cases all in one year. From our own experience this year, we had one elderly couple within the county who was exploited for over \$400,000. Sadly, most financial exploitation is carried out by family members or close friends.

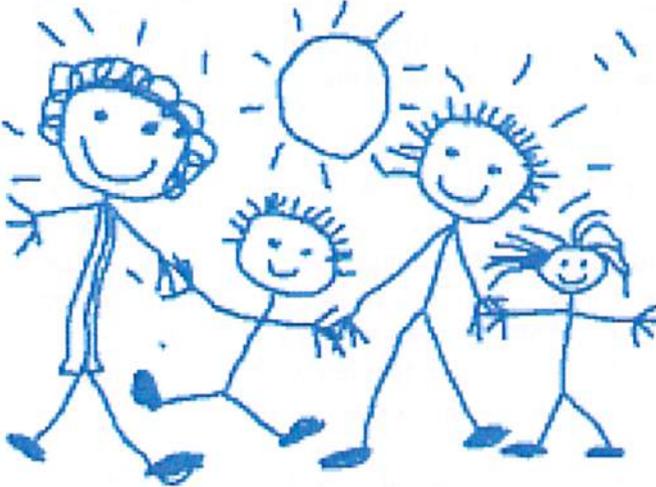
On the other hand, exploitation by "scam artists" seems to yield the highest dollar amounts stolen. A common scam at this time is for an elder to receive a phone call with an apparent "poor connection" and the scammer pretends to be a grandchild in trouble. The scammer then plays to the elder's desire to help and to be seen as a trusted confidant. Once that relationship is established, in a matter of a few minutes on the phone, the scammer will convince the elder to send money, either in cash or wire transfer, to get the grandchild out of trouble. These scams are very hard to trace, but we are working closely with law enforcement agencies to do what we can to protect our seniors.

We hope you find this information and that which follows as informative and a clear reflection of the hard work our staff has done all year.

Child Protective Services

Statistical Information Reports per Year:

Year	2015	2014	2013	2012	2011
Total Number of Reports	1529 (503 FAR)	1463 (540 FAR)	1499 (438 FAR)	1546 (363 FAR)	1492
Neglect/ Abuse Petitions Filed with Family Court	65	72	61	93	61



Monthly Child Protective Reports Sorted by Township

	Jan	Feb	March	April	May	June	July	Aug	Sep	Oct	Nov	Dec	Total
Brookfield	1	8	7	9	6	8	2	4	4	2	3	5	59
Cazenovia	3	0	3	4	1	1	1	0	2	7	6	6	34
DeRuyter	1	2	2	2	4	6	4	1	1	2	2	4	31
Eaton	7	10	5	5	6	8	9	2	12	3	7	8	81
Fenner	3	1	0	1	2	3	0	2	1	0	1	1	15
Georgetown	0	1	0	2	0	4	1	1	0	0	5	0	14
Hamilton	12	6	14	5	7	8	3	6	7	14	5	16	103
Lebanon	0	0	1	1	2	0	1	0	1	2	0	0	8
Lenox	18	12	21	26	23	34	24	27	19	24	16	14	258
Lincoln	2	2	0	0	1	0	0	0	0	1	1	0	7
Madison	2	4	8	6	5	5	4	13	1	9	2	3	62
Nelson	0	0	0	0	3	2	0	0	4	5	3	1	18
Oneida	32	31	37	23	33	28	24	38	33	31	23	31	364
Smithfield	0	0	0	0	1	0	0	0	0	0	0	1	2
Stockbridge	1	3	3	3	2	2	5	2	0	2	3	7	33
Sullivan	13	11	18	11	17	17	18	10	16	15	19	18	183
Other Reports	18	13	18	22	15	23	27	25	22	21	30	22	254
Total	113	104	137	120	128	149	123	131	123	138	126	137	1529

“Other” refers to reports shared with other counties where most family members live outside of Madison County. There were no significant increases or decreases in any one particular township.

Protective Services Success Story:

In 2015, CPS received a report regarding a pregnant mother of three children. She had a history of bi-polar disorder and drug and alcohol abuse. Prior to the report, the mother had already given custody of the three children to relatives, due to her admitted inability to provide a stable home and care for them. The oldest child was with the maternal grandmother and the two younger children were with a couple related by marriage.

The mother was homeless and staying with other family members. The caseworker made many visits and contacts trying to locate the pregnant mother, who was uncooperative with CPS.

The mother gave birth prematurely and tested positive for marijuana at the hospital. She admitted to marijuana use on a regular basis during her pregnancy. Due to the premature newborn’s medical needs, the baby remained at the hospital when the mother was discharged. Hospital staff expressed concern that the mother was not engaging with her new baby and was visiting the baby infrequently. The caseworker helped arrange for Medicaid transportation and the mother was able to visit more often and get instruction on the care the baby would need when discharged. This also helped to ensure that the infant was able to begin bonding to the mother, which is extremely important for the child’s overall wellbeing.

Just before the baby was to be discharged, the mother overdosed on prescription medications that were not her own. She was hospitalized due to this and was again homeless as a result of her actions. The caseworker discovered that the oldest child was visiting the mother when the mother took the overdose and had witnessed this event.

The caseworker met with supervisors to determine a plan for the newborn. She maintained constant communication with the mother through face-to-face visits and phone calls to determine who might be a safe resource for the baby. At times, this was a challenge because the mother moved from place to place and frequently would not answer her phone or return messages.

The caseworker was persistent. The caseworker made home visits to meet with several relatives in Madison and Onondaga Counties and researched CPS history on all possibilities. All of this had to be done within a few days so that the infant could be discharged and begin to bond with a safe parental substitute and have more frequent visits with the mother. The caseworker worked closely with the mother who wanted to avoid foster care for her newborn if at all possible.

The caseworker filed a neglect petition and, at court, the child was placed with a family member. The child remains in the relative’s care and is doing well. The mother is engaged in services to assist her in addressing her drug abuse and mental health issues, as well as learning to safely parent.



Throughout the investigation, the caseworker provided the mother with information and referrals for services including Mental Health, Family Counseling Services, and Community Action Program to help her address her mental health issues and drug abuse and to assist in establishing a stable home. The caseworker supported the mother in making a safety plan for her baby and helped the mother understand how her actions impacted the safety and wellbeing of her children.

Adult Protective Services

Statistical Information:

Year	2015	2104	2013	2012	2011
Number of Referrals	104	101	95	82	134



Foster Care Services

Statistical Information:

Year	2015	2014	2013	2012	2011
Children Placed in Care	27	34	29	46	20
Children Discharged from Care	32	40	29	25	29
Average Number in Madison County Foster Homes	24	25	35	34	30
Average Number in Therapeutic Foster Homes	7	9	11	9	5
Average Number in Higher Levels of Care	19	20	18	15	16
Children Adopted from Foster Care	6	14	5	9	10
Foster Homes Certified	10	7	8	8	9
Foster Homes Closed	4	9	7	12	6

Foster Care/Adoptions Success Story:

“Jack” was a 15 year old who was charged as a juvenile delinquent and placed on probation. Jack and several of his friends broke into a car dealership, caused damage to several vehicles, and stole property. Jack also had been caught and admitted to using alcohol and marijuana, including synthetic marijuana. He was petitioned back to Family Court for not following the conditions of his probation. When Jack went to court for his violation, he told the judge that he did not take his charges or probation seriously and continued to state that it was his friends’ fault that he got caught.

Jack was placed into DSS custody by the judge for a period of seven months. His foster care caseworker assessed his level of need, determined the appropriate level of care, and arranged for him to be placed into a residential care facility where he could receive the necessary care. There, all of his behaviors, including substance abuse and mental health, could be addressed. The facility would also provide 24-hour supervision. The foster care caseworker was able to closely monitor Jack's care and ensure that he received what was necessary.

While in DSS custody, Jack began to engage in his services and participate in his treatment plan. He had resided with a grandparent prior to being placed, as his parents, who lived separately, could not handle his behaviors. His therapist at the residential facility and his assigned caseworker from Madison County both worked closely with the family and involved all of them in Jack's treatment plan. The family expressed that they were very pleased with their service providers. They were also very happy that their thoughts and feelings were being heard and became part of the goals and service plan for Jack.

Jack began to take responsibility for his behaviors and decisions. He started to realize how his behaviors and actions adversely affected his family and himself. Jack engaged in substance abuse treatment and was able to identify that he was self-medicating his mental health problems rather than dealing with them in a positive manner.

Throughout this process, the family, residential care staff, and caseworker were able to work well together to achieve Jack's goals and reunite him with his family. Jack progressed so well that he was able to be discharged to his grandmother two months early, allowing him to live in a family setting, which we all know is best for children. The early discharge also saved the county roughly \$15,000 in residential care costs. To this day, the caseworker has not heard anything about Jack engaging in any concerning behaviors that required law enforcement, DSS, or Family Court involvement.



Preventive Services

Statistical Information:

Year	2015	2014	2013	2012	2011
Average Number of Open Preventive Cases	109	122	126	119	98
Average Number of Children	190	227	240	225	170
Referrals for Parent Aide Services	17	26	19	24	37
Number of Parent Aide Home Visits Made	285	366	377	528	529
Supervised/Coached Family Visits	643	485	699	600	542
People using Emergency Supply or Food Cupboards	27	43	42	53	97
Transportation Trips	447	492	550	603	829
Transportation Savings	\$18,340	\$20,539	\$17,174	\$18,038	\$20,326
Number of Children Receiving Life Skills Coaching	20	18	20	21	21
Number of Mentor/Mentee Matches	30	55	23	28	53

Our number of supervised visits or CFVs fluctuates based on the number of children who are in foster care. In 2012, we had only one Transportation Aide as opposed to 1.5 in 2011.

School Services Program

Statistical Information:

Year	2015	2014	2013	2012	2011
Number of Referrals	97	136	112	96	92

Source of Referral	School	Outside Agency	County Departments	Family
Number of Referrals	71	6	8	12

Referred Need	Mental Health Services	Medical Services	Juvenile Justice	Educational	Substance Abuse	Basic Needs	Parenting Skills
Number per Need	54	5	24	75	3	56	73

Each referral could reflect a variety of needs.

Age of Child	0-5 years	6-9 years	10-13 years	14-16 years	17-18 years
Number per Age Group	12	26	41	14	4

Success Story:

The School Services Program Coordinator makes home visits in order to develop plans to address goals identified by families and schools. Once goals are identified, referrals can be made to public and private service agencies. The coordinator is able to support families and service providers at an early point to prevent escalating difficulties or conflicts in the classroom and home.

One example was a family who spoke primarily Spanish and who was referred to the School Services Program for financial assistance. The School Services Coordinator was able to partner with a Spanish translator to make several home visits to assist this family with obtaining services to meet their basic needs. This included filling out applications for the family to receive SNAP and insurance, obtaining school supplies, accessing the local food cupboards, providing transportation to appointments, and finding both a Spanish-speaking primary care physician for the parents as well as a Spanish-speaking pediatrician for the children. This family has been so grateful with the assistance they have received from the School Services Program that they have since “referred” three other Spanish-speaking families to the School Services Coordinator for assistance.

PINS Diversion Program

Statistical Information:

Year	2015	2014	2013	2012	2011
Number of Referrals	117	110	112	92	99
Reasons for Referral	88 I&U	96 I&U	90 I&U	81 I&U	92 I&U
	55 TR	35 TR	41 TR	25 TR	22 TR
	34 MJ	11 MJ	21 MJ	13 MJ	15 MJ
Petitions Filed	13	14	12	7	7
Placements with DSS	5	11	8	5	5

For “Reason for Referral,” I&U stand for Incorrigible & Ungovernable; TR for Truancy; and MJ for Marijuana use – each youth can have more than one reason for referral.

Success Story:

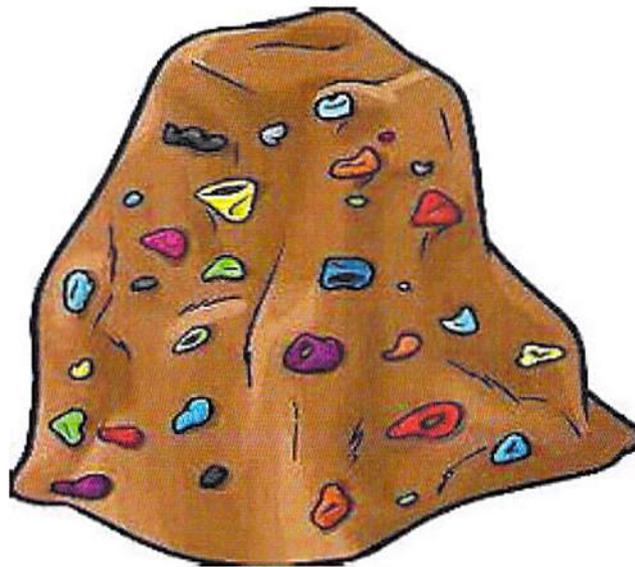
Madison County PINS Diversion Program submitted a referral to Liberty Resources Placement Diversion (LR PD) for a young man who was struggling to attend school due to domestic violence and the resulting anxiety around a particular incident. After the LR PD therapist completed an assessment on the family that included the mom and sister, it was clear that the entire family was struggling with clear expectations, boundaries, and family roles.

This family agreed to be part of the Adventure Therapy component to the Placement Diversion program. This included the entire family (mom and two kids) climbing the indoor rock wall on two occasions and attending several outdoor events that incorporated both high and low ropes course elements. The therapist also incorporated family-based activities into their “everyday” sessions as a way to continue to challenge the family to grow.

When school began in the fall, the family was able to utilize the skills they learned from handling stress and challenges on the ropes course, and they have been incredibly successful with the challenges of school and work. Mom reports that the best part of participating in Adventure Therapy has been the opportunity to have fun with her children and to learn better ways to support, communicate, and listen to each other. She stated that participating in Adventure Therapy had given them confidence in themselves to do something outside the box and push them to new limits.

The young man who refused to attend school has been able to attend every day so far this year (except when legitimately ill), and the family reports higher levels of cohesion and trust. Mom

has been able to make positive changes and has embraced her role and power as matriarch. She has gained new confidence to make changes in her professional life as well. Apart from the clearly definable success of school days attended, the family environment has improved greatly, with the siblings reporting a reduction in the number of their fights and an overall reduction in the tension and stress in the home.



Submitted by:
Melissa Maine, Deputy Commissioner for Family Services
Catherine Fowler, Case Supervisor Grade B
Jesica Priervo, Case Supervisor Grade B
Marcie Soule, School Services Program Coordinator
Emily Cameron, Senior Caseworker
Susan Osborne, Senior Caseworker

LEGAL

The Madison County Department of Social Services Legal Department provides legal counsel to all units within the agency. The Legal Department carries two major caseloads:

~ Family Services ~

~ Child Support Collection ~

In addition to these two major caseloads, the Legal Department provides representation to Adult Services, Medicaid, Temporary Assistance, estate matters, bankruptcy, property liens, foreclosures and any other DSS-related matters.

The Madison County Department of Social Services Legal Department consists of two Attorneys, one Paralegal, and one Office Assistant II. During this past year, the Legal Department implemented many new office procedures, streamlined its operation, and continued to operate in a highly efficient manner. Each member of the unit strives to provide the Madison County Department of Social Services and all of its units with the utmost in comprehensive legal assistance.

Family Services

Family Services is one of the two major caseloads carried by the Madison County Department of Social Services Legal Department. For Family Services, the Legal Department prosecutes cases in Family Court that involve the neglect and/or abuse of children residing in Madison County.

For the children in the care of the Madison County Department of Social Services, the Legal Department is required to keep the Madison County Family Court advised of each child's status and progress while in foster care. This is accomplished by the filing of a Permanency Report with the Court. The Permanency Report contains information including, but may not be limited to, each child's progress, services he/she is engaged in, and services he/she may require in the future.

For the year 2015, the Legal Department maintained the following:

<u>Active Cases:</u> 94	<u>Cases Opened:</u> 59
<u>Petitions filed:</u> 148	<u>Cases Resolved:</u> 69
<u>Court Orders:</u> 344	<u>Trials:</u> 36
<u>Permanency Hearings:</u> 39	<u>Permanency Reports:</u> 39
<u>Court Ordered Investigations:</u> 35	<u>Total Court Appearances:*</u> 426

*(Includes DSS noticed as Interested Party)

As part of the process in determining whether a case meets the criteria for the filing of a petition alleging neglect and/or abuse of a child(ren), the Madison County Department of Social Services Attorneys and Paralegal meet regularly with the staff of Family Services and continue to assist the Caseworkers in assuring compliance with all laws, regulations, and enforcement, as well as compliance with all current Family Court Orders.

2015 Legal/Caseworker Conferences

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When a private citizen files a petition in Family Court, the petition often contains allegations of domestic violence, drug abuse, and/or alcohol abuse between the parties. If the Family Court Judge believes further investigation into the allegations is warranted, the Judge will execute an Order Directing a Court Ordered Investigation (§1034 Family Court Act), and a DSS Caseworker is assigned to investigate the matter. The Madison County Department of Social Services Legal Department also receives a copy of the §1034 Order and monitors the Court's request. Once the Caseworker has completed his investigation and drafted a report, it is submitted to the Legal Department for review and is then submitted to the Court.

2015 Court Ordered Investigations

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The Madison County Department of Social Services also works with other agencies within Madison County and the Madison County Family Court in ensuring effective outcomes to reports of serious sexual and physical abuse of children, as well as assisting Respondents who are the subjects of neglect proceedings with drug and/or alcohol addiction. This assistance is achieved through the Multidisciplinary Team (MDT) and the Family Treatment Program.

Multidisciplinary Team (MDT)

The Madison County Multidisciplinary Team (MDT) is a group of professionals who work together in a collaborative manner to ensure effective response to reports of the sexual abuse of children as well as reports of serious physical abuse of children residing in Madison County. The DSS Attorneys are members of the MDT and join and advise on an as-needed basis. Participating agencies include: Madison County Attorney's Office; Madison County District Attorney's Office; Madison County Probation; Madison County Sheriff's Office; New York State Police; Canastota, Cazenovia, and Chittenango Police Departments; Oneida City Police Department; Madison County Mental Health; Madison County Public Health; and medical

personnel from Oneida Healthcare. The assistance of the many agencies who participate in the MDT ensures a successful conclusion to the relevant investigation(s) and serves to minimize any additional trauma to the child victim.

In addition to the MDT, the Attorneys for the Madison County Department of Social Services are members of the Child Fatality Review Team. The Child Fatality Review Team convenes on four occasions throughout the year to review investigative and preventative measures regarding any child fatality that occurs during the year.

Family Treatment Program

Established in August 2005, the Family Treatment Program is a specialized program that assists Respondents in child neglect proceedings where drug and/or alcohol addiction may have contributed to child abuse or neglect. The participants are required to attend various treatment programs such as drug, alcohol, and mental health counseling, as well as parenting classes. In conjunction with the Madison County Family Court, the Madison County Legal Department, caseworkers, service providers, and the participant's legal counsel meet twice per month to assess the participant's progress through the program. The Family Treatment Program's goal is to continue to ensure that the participant's children have a safe, nurturing environment by focusing on healthy, sober parenting. Since its inception, the Family Treatment Program has received one hundred ninety-six (196) referrals, seventy (70) accepted referrals and thirty-one (31) graduates. The program currently has seven (7) current participants with nineteen (19) pending referrals.

Child Care Review Service (CCRS)

The Madison County Department of Social Services incurs a substantial expense to provide foster care services to children. The federal and state governments can reimburse Madison County for part of the expense via Title IV-E, Title XX of the Social Security Act, TANF, and EAF. In order to maximize the federal and state reimbursement for the children who are in receipt of foster care services in Madison County, accurate and timely recording of information by Family Services staff in CONNECTIONS and WMS (Welfare Management System) and by the Madison County Department of Social Services Legal Department in CCRS is required. The information that is input into these systems is then reported to the state and federal governments who then reimburse Madison County for part of their expended foster care expense.

2015 CCRS Entries

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Fair Hearings

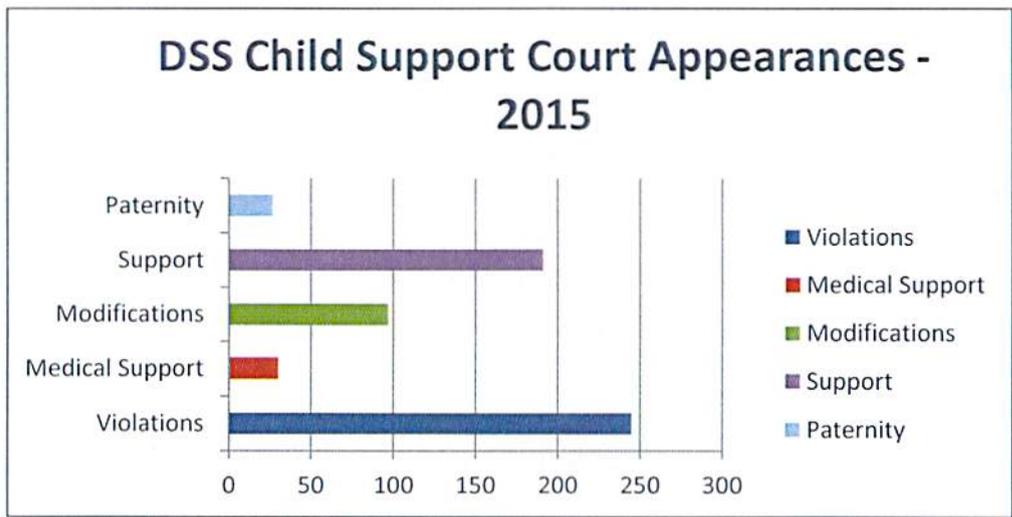
In addition to those cases of neglect and/or abuse that are filed in the Madison County Family Court, there are those cases that are reported as neglect and/or abuse to the Child Protective Hotline. Through investigation by the Child Protective Caseworkers, a determination is made as to whether or not the allegations contained in those reports should be indicated or unfounded.

Oftentimes, when a Child Protective report is indicated and closed, the subject of that report will request a fair hearing seeking a determination from the State Office of Children & Family Services that the determination made by the CPS Caseworker was correct. A fair hearing is then scheduled with an Administrative Law Judge and, at the fair hearing, the subject of the report and the Madison County Department of Social Services each have the opportunity to present evidence in support of each of their positions. The Administrative Law Judge will then rule on the evidence presented and will submit his decision at a later date.

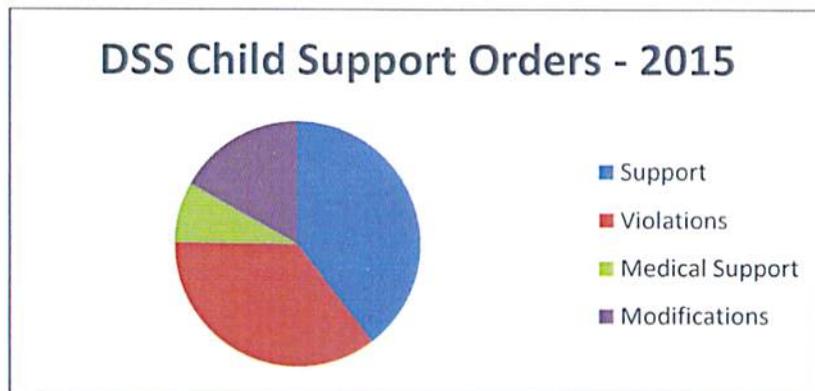
2015 Fair Hearings

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The other main caseload maintained by the Madison County Department of Social Services Legal Department is establishing child support collection in those instances when a child(ren) in Madison County is in receipt of temporary assistance, medical assistance, or is placed in foster care. The Legal Department also works to enforce child support orders, establish the paternity of a child(ren) in receipt of benefits, and recoup reimbursement for confinement cost expenditures related to the birth of a child(ren) who is in receipt of Medicaid. For the year 2015, the DSS Legal Department appeared on 590 child support cases.



In addition, the Madison County Department of Social Services Legal Department submits child support orders for filing with the Madison County Family Court regarding the cases where the Department is a party. In the year 2015, the Legal Department submitted 276 child support orders.



Money Judgments Filed on Behalf of the Madison County Department of Social Services

In certain child support cases, money that is owed to the Department for expenditures that can range from the cost of the birth of children in receipt of Medicaid to past due child support arrears for children in receipt of temporary assistance are set in money judgments to the Department and are filed with the Madison County Clerk's Office.

2015 Money Judgments Filed on Behalf of DSS

99: \$123,874.95

2015 Judgments Satisfied on Behalf of DSS

37: \$45,472.65

SUPPORTIVE SERVICES

Supportive Services' six Office Assistant I employees provide phone and walk-in notification to all DSS employees while concurrently providing additional clerical support to the financial programs. Each has individual duties as well as shared duties that are rotated on a daily basis and include:

- **Switchboard: 81,608 incoming phone calls** were received, logged, and forwarded to DSS employees.
- **Front Desk: 29,941 individuals were served at the front desk.** Supportive Services staff meets and screens all walk-in applicants at the front desk reception area. Routing slips are completed for each person who requests to speak with an employee or has an appointment and the information is entered into the front desk log. A numbered folder is assigned to each client and that number is used in lieu of his/her name to ensure confidentiality. Information is telephoned back to the "runner" in the clerical pool, who completes a "person out front" slip. A clearance report is run and any existing file is pulled from the record room and delivered to the correct Examiner.

Additionally, Supportive Services staff began using the Task Management System (TMS) to task appointments and "walk-in" clients to Temporary Assistance and SNAP Examiners in 2014. In October of 2015, they also began tasking HEAP "walk-in" applicants on a rotational log to HEAP staff.

As result of 2015 building renovations, clerical staff acquired new work stations. They transitioned from individual desks in an open room to individual cubicles located behind the front desk of the reception area and also behind the switchboard.

Case Filing and Retention: Case records are filed for the financial program Examiners daily. Inactive/closed case files were housed in the record room for a period of three years. This year's building renovations provided limited space for housing these files. To conserve space, new procedures were created for closed files. Supportive Services staff imaged case files containing only a closing authorization, removing an immense number of those files from existing cabinets.

Mail: Supportive Services staff is responsible to date stamp and look up demographics for each piece of mail using the Welfare Management System (WMS), sort, and forward to appropriate units.

Automated finger Imaging (AFIS): Supportive Services staff finger images and photographs Temporary Assistance applicants and forwards the information to an Examiner for the prevention of duplicate interstate benefits.

Common Benefit Identification (CBIC) Cards: Staff is responsible to order permanent cards and issue temporary cards to clients as ordered by Examiners for the financial program.

Individual duties include coordinating fair hearings, maintaining deceased case file records, AFIS reports, ordering and maintaining local and state forms, voter registration forms, phone rosters, Child-Teen Health Program informational mailings, data entry for Temporary Assistance and Daycare recertifications, maintaining front lobby brochures and pamphlets, and office supplies for staff.



Submitted by Leigh Silkowski, Director of Financial Assistance

RESOURCES

The resource recovery unit is responsible for the collection of monies due to the agency. The unit works with attorneys, nursing homes, financial institutions, and surrogate court in seeking reimbursement due to the agency. Activities include ensuring the collection of money from probates, estates, assignment of proceeds, and accident/casualty liens. Area banks are checked for undisclosed assets and determinations are made for the availability of third party health insurance.

Recoveries for 2015

Estates - PNA	\$ 30,470
Accident Liens	\$ 14,996
Burials	\$ 807
Estates	<u>\$ 60,160</u>
Total	\$106,433

The resource unit was responsible for doing K-Checks to ensure that new providers were eligible to receive payments from DSS as part of the county's corporate compliance policy. In 2015, the number of new vendors checked was 167.

ADMINISTRATIVE SERVICES

Expenditure/Revenue Analysis - 2015

	2015 <u>Expenditures</u>	2015 <u>Revenues</u>	Local <u>Share</u>
Gen Adm	\$ 9,332,667	\$ 6,936,717	\$ 2,395,950
Child Care Block Grant	\$ 571,233	\$ 764,043	(\$ 192,810)
Title XX	\$ 895,632	\$ 621,493	\$ 274,139
Medical Assist	\$ 18,185	\$ 66,387	(\$ 48,201)
MMIS	\$10,648,396	\$ 0	\$10,648,396
TANF/Family Assistance	\$ 2,193,987	\$ 1,943,171	\$ 250,816
Child Welfare	\$ 2,028,777	\$ 1,247,733	\$ 781,044
Juv. Delinq.	\$ 1,858,514	\$ 827,228	\$ 1,031,286
Safety Net	\$ 1,231,593	\$ 605,948	\$ 625,645
HEAP	\$ 6,332	\$ 3,763	\$ 2,570
EAA	\$ 16,282	\$ 8,368	\$ 7,914
Burials	\$ 145,039	\$ 20,121	\$ 124,918
Title IV-D	\$ 0	\$ 73,499	(\$ 73,499)
Total	\$28,946,638	\$13,118,470.70	\$15,828,167

Please note that this financial report is based on DSS financial reports dated 4/5/16.

The Madison County Treasurer has not finalized the financial information for 2015 as of this date ,
therefore this information is subject to change as more information becomes available.