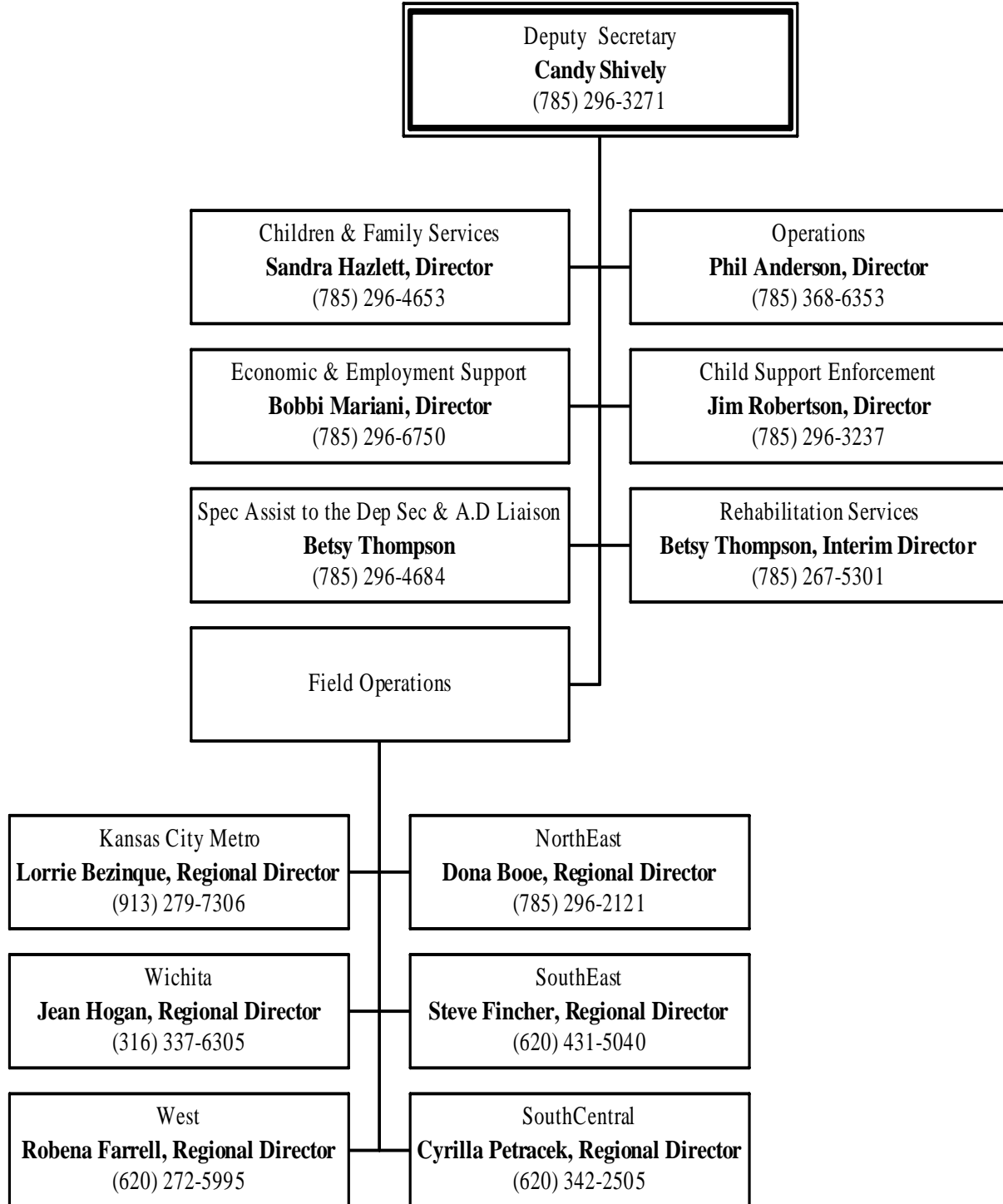


# Integrated Service Delivery



## **PROGRAM OVERVIEW - Integrated Delivery Service**

The mission of the Integrated Service Delivery Division is to protect children and adults, promote permanent nurturing families, and provide the appropriate resources to meet the self-sufficiency needs of our customers.

The philosophy of the Integrated Service Delivery Division is to keep consumers as the focus while connecting them to the right resources and services. We will:

- Secure the safety, permanency, and well-being of children;
- Help consumers identify their needs;
- Have knowledge about the resources in the community and the services in the agency; and
- Take responsibility for connecting consumers to the resources and services that will meet their needs.

The Integrated Service Delivery Division (ISD) serves clients by providing services in offices located throughout the State. These services are provided directly by the division or through community partnerships. The division's work encompasses services to children, to families with children, and to vulnerable adults or adults who have special needs. The division's emphasis is to secure a safe, permanent and self-sufficient environment for the individuals and families who are our customers.

The safety and permanency for children cannot be accomplished by the agency alone, so the division is actively involved in partnering with public, private, and community agencies to improve child and family well-being. The division purchases services from qualified providers for intensive in-home services, for family preservation, reintegration, foster care and adoption services. The division manages client services by establishing and monitoring policy, performance standards and program results.

Furthering self-sufficiency is accomplished by helping clients overcome barriers to employment, or assisting them to access other sources of consistent income, such as social security disability. ISD assists individuals who must overcome financial, educational, health, and disability barriers by helping them acquire funds to support dependent children; teaching them skills needed in job seeking, providing them educational opportunities or job specific training, and treating and accommodating their physical and mental health barriers. The division provides support services tailored to the needs of each customer. Assistance with acquiring child support, child care, nutrition, medical services, transportation, energy assistance, and other social services needed to meet basic living needs and to enable continuing employment is provided. This includes help in returning to the workforce after a job loss or, after a substantial amount of training and rehabilitation, to acquire job skills that provide wage levels sufficient to achieve self-sufficiency. The division also helps individuals obtain Federal aid to which they are entitled, such as social security disability insurance, supplemental security income and Medicare.

Despite all the efforts described above, there will still be individuals and families who occasionally need financial help. The division provides cash assistance to families and individuals who need help in meeting basic needs for food and shelter. ISD attempts to diminish

such need as quickly as possible by working with the family or the individual in the ways which were described above. In many cases, the earning power of the individual or family is impacted by disability, illness, lack of education, or other substantial barriers. In such cases, ISD provides assistance to fill the gaps not met by a family's wages, child support, or other resources. This assistance includes help to acquire health care, food, utilities and child care. ISD is also charged with protecting vulnerable adults who are unable to protect their own interests from abuse, neglect and exploitation.

**Central Office.** The ISD Central Office staff are divided into four program sections:

- **Economic and Employment Support** is responsible for administering several key financial aid programs, including basic cash assistance to the unemployed and disabled, food assistance, energy assistance, child care and early childhood development, nutrition education and several other programs. Staff also administer the programs which aid the unemployed in identifying and addressing employment barriers. This section also houses the ISD Administration program which includes a small number of staff that work at a division-wide level. This includes the Deputy Secretary, the Special Assistant to the Deputy Secretary, a liaison to Field Offices, and the Division's Operations Director.
- **Rehabilitation Services** administers the Vocational Rehabilitation Program which aids individuals with disabilities to gain, or regain, employment. This section also provides many services for the blind, including the Rehabilitation Center for the Blind and Visually Impaired, administers the State's Commission for the Deaf and Hard of Hearing; and administers Disability Determination Services on behalf of the Social Security Administration.
- **Child Support Enforcement's** focus is to administer efforts to help all who request aid in establishing paternity, obtaining a child support and/or medical support order through the courts, and enforcing those support orders through a variety of collection processes.
- **Children and Family Services** is responsible for administering the child welfare programs, including foster care, adoption, family preservation, and family and community services. The division also administers child protective services.

**Field Operations.** Field staff are employed throughout Kansas and deliver the bulk of all SRS benefits and many direct services. These varied positions are organized into six regional management areas. The regional directors report to the Deputy Secretary of the Integrated Service Delivery Division. The staff of these six regions perform the following functions:

- Determine applicants' eligibility for, and provide for the delivery of program benefits and services administered directly by the ISD Division;
- Determine applicants' eligibility for the various health care benefits of the Medicaid; MediKan, and HealthWave programs. The policies for these programs are designed and administered by the new Division of Health Policy and Finance;
- Investigate all alleged abuse, neglect, and fiduciary abuse of adults, and coordinate with community resources to provide protective services;.

- Investigate all alleged abuse and neglect of children, and coordinate with and oversee all foster care, adoption, and family preservation contractors;
- Coordinate all programs and services funded by, or delivered by, SRS to ensure that they are aligned to best meet the needs of client groups as well as individual clients;
- Advocate for the poor and people with disabilities, and coordinate SRS efforts with services available through community non-profit, proprietary, and governmental entities;
- Provide operational support for all the above SRS efforts which includes the physical plant and equipment, computers, communication systems, human resource administration, accounting, and other financial functions; and
- Conduct quality assurance and monitoring for both children and adults receiving services relating to mental health, substance abuse, or developmental disabilities.

The following table identifies the six SRS management regions and the counties within each region.

Counties Within SRS Management Regions	
Region	Counties Served
KC Metro	Douglas, Franklin, Johnson, Leavenworth, Miami, Wyandotte
NorthEast	Atchison, Brown, Clay, Cloud, Dickinson, Doniphan, Ellsworth, Geary, Jackson, Jefferson, Jewell, Lincoln, Marshall, Mitchell, Nemaha, Osage, Ottawa, Pottawatomie, Republic, Riley, Saline, Shawnee, Wabaunsee, Washington
South Central	Butler, Chase, Chautauqua, Coffey, Cowley, Elk, Greenwood, Harper, Harvey, Kingman, Lyon, Marion, McPherson, Morris, Reno, Rice, Sumner
SouthEast	Allen, Anderson, Bourbon, Cherokee, Crawford, Labette, Linn, Montgomery, Neosho, Wilson, Woodson
West	Barber, Barton, Cheyenne, Clark, Comanche, Decatur, Edwards, Ellis, Finney, Ford, Gove, Graham, Grant, Gray, Greeley, Hamilton, Haskell, Hodgeman, Kearny, Kiowa, Lane, Logan, Meade, Morton, Ness, Norton, Osborne, Pawnee, Phillips, Pratt, Rawlins, Rooks, Rush, Russell, Scott, Seward, Sheridan, Sherman, Smith, Stafford, Stanton, Stevens, Thomas, Trego, Wallace, Wichita
Wichita	Sedgwick

## MAJOR PROGRAMS ADMINISTERED BY THE ISD DIVISION

### Temporary Assistance for Families

In 1996, Congress passed the *Personal Responsibility and Work Opportunity Reconciliation Act* which transformed the nation's major chief welfare program (*Aid to Families with Dependent Children*) by creating the *Temporary Assistance for Needy Families Program* (TANF). TANF ended families' entitlement to welfare, limited financial assistance to sixty months, replaced the unlimited Federal/State matching entitlement funding with fixed block grants to States, and required adults to engage in work activities. In addition, States are required to spend 75 to 80 percent of the 1994 investment in the former AFDC program. This commitment is termed the *TANF Maintenance of Effort (MOE)*. The *Temporary Assistance for Families Program (TAF)* provides cash assistance to very low-income families with children for essential needs. Families receiving financial assistance must have incomes generally below thirty percent of the Federal poverty level. All families receiving TAF are eligible for Medicaid. The majority of adults must be looking for work from the moment they apply for assistance in order to qualify for TAF Cash Assistance. Caseload detail for this program can be found in the Caseload Information section.

### **TAF Employment Services**

This TANF program is devoted to helping adults obtain and keep employment as a means of achieving self-sufficiency. All adult TAF recipients, except those with a child under age one, those age sixty or over, and those needed in the home to care for a disabled household member, must work or participate in work activities 30 hours a week (55 hours for two-parent households) in order to receive TAF cash assistance for their family. Federal law requires at least fifty percent of TAF adults whose youngest child is over the age of one to be involved in a work activity each month. Caseload detail for this program can be found in the Caseload Information section.

### **General Assistance**

General Assistance programs have existed in various forms at the county level since statehood. The policies for this State funded program were made uniform across the State when SRS was created in 1973. The General Assistance program serves disabled adults who are unable to work and whose eligibility for Federal disability benefits is pending. Disabled adults with income less than generally thirty percent of the Federal poverty level may qualify for this Cash Assistance Program. General Assistance clients are not eligible to receive Federal Medicaid services. Instead, General Assistance clients receive MediKan, which is a more restrictive medical benefit package. General Assistance is limited to 24-months unless hardship criteria are met. Caseload detail for this program can be found in the Caseload Information section.

### **Funeral Assistance**

The burial of indigent persons was a local responsibility, usually delegated to the county Boards of Welfare, until SRS was created in 1973. This limited aid has been available to families who are presently receiving TAF, General Assistance, Food Stamps, or Medicaid. The average payment for a funeral is approximately \$545.

<b>Funeral Assistance</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Annual Persons	961	1,018	862	862
Assistance	\$531,793	\$552,511	\$470,000	\$470,000

### **Low Income Energy Assistance Program**

The Federally-funded Low Income Energy Assistance Program (LIEAP) provides energy assistance to households with income at or below 130 percent of the poverty level. Elderly, disabled, public assistance families, and low income working families are the primary groups assisted. Because LIEAP helps with only a portion of typical household energy costs, clients are required to make regular utility payments prior to receiving assistance. This requirement emphasizes client responsibility for making their energy payments. The application period is from January through March. The benefit is a lump sum annual benefit and can be used to pay heating or cooling costs. Volatility in both congressional appropriations for energy assistance and the cost of energy, vary from year to year, and presents a challenge in predicting the demand for energy assistance. Caseload detail for this program can be found in the Caseload Information section.

### Refugee Services

The Refugee Act of 1980, amended the Immigration and Nationality Act to establish uniform assistance and services to refugees. This program is entirely funded by the Federal government on behalf of refugees who have immigrated to this country. Grants are made to community organizations to provide social services to refugee populations. In addition, financial and medical assistance is provided during a refugee's early months in this country. These following cash assistance benefits parallel TAF benefits.

<b>Refugee Services</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Persons Served	232	240	250	250
Grants and Assistance	\$159,354	\$154,951	\$165,986	\$170,540

### Adult Protective Services

Adult Protective Services investigate all reports of abuse or neglect of vulnerable adults age eighteen and above without regard to income, to prevent or alleviate abuse, neglect, exploitation, or fiduciary abuse. Vulnerable adults are those individuals who are unable to protect their own interests, and who are harmed or threatened with harm, through action or inaction by themselves or others. This includes the elderly, physically disabled, mentally ill, and developmentally disabled individuals. These adults may live alone, with others, or in care-giving living arrangements in their communities. Adults have a right to refuse services if they have capacity. Involuntary intervention (guardianship or conservatorship) is initiated only if the adult is incapable of protecting himself/herself because of major mental/physical disability, and there are no other options. Services provided, with consent of the individual who has capacity, include only those services determined to be needed to protect the adult in the least restrictive manner.

<b>Adult Protective Emergency Services</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Investigations	5,762	5,495	5,600	5,600
Assistance	\$364,441	\$330,217	\$435,307	\$435,307

### Food Stamp Benefits

The Food Stamp Program became statewide in Kansas in 1973. Prior to that, many of the larger counties distributed USDA surplus food in lieu of food stamps. The Food Stamp program provides benefits to individuals and families to assist with food costs. This 100 percent Federally funded program assists individuals and families with incomes less than 130 percent of the Federal poverty level. Food stamp benefits are issued through Electronic Benefit Transfer (EBT). Each family or individual receives a *Vision Card* which allows access to an individual account in which the benefit amount is deposited. This account may be used only to purchase Food Stamp approved food items. Food stamp benefits are excluded from the State budget. Caseload detail for this program can be found in the Caseload Information section.

### **Food Stamp Employment and Training Program**

This employment program was mandated by the Federal Food Security Act of 1987. The Food Stamp Employment and Training program targets families who receive food stamp benefits but not TAF Assistance. This program is very limited and does not duplicate efforts made in the TAF-Employment Services Program. The vast majority of food stamp recipients who are not receiving TAF are either elderly, or disabled people, or low-income working families. This program operates in five counties within the NorthEast Region. Therefore, the target population is quite small. Both programs share the goal of preventing long-term dependence on Public Assistance.

<b>Food Stamp Employment and Training</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Average Monthly Adults	146	303	450	450
Services and Assistance	\$3,616	\$35,675	\$81,576	\$81,576

### **Food Distribution Assistance**

Food Distribution services provide food to low-income households, charitable institutions, elderly food programs, pregnant or nursing women, and children under age six. These services are accessed through community organizations which distribute food to take home or prepare meals.

<b>Food Distribution Assistance</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Average Monthly Persons	22,579	22,338	23,000	23,000
Value of Food Distributed	\$5,524,043	\$4,025,892	\$4,000,000	\$4,000,000

Note: the value of food distributed is not included in the budget.

### **Child Care Assistance**

Major Federal legislation in 1988 and 1996, recognized the key role child care subsidies can have in allowing low-income wage earners to retain employment thereby reducing their dependence on Public Assistance Programs like TAF. Child Care subsidies help families whose incomes are below 185 percent of the poverty level. The amount of child care assistance provided varies by household size, the number of children in care, family income, and the type of child care setting. Beginning in FY 2006, assistance for child care payments is paid directly to the family. Child care rates are reviewed biennially through a market survey to insure that they are adequate, as required by Federal regulation. Caseload detail for this program can be found in the Caseload Information section.

### **Child Care Resource and Referral and Professional Development**

Early learning initiatives assist parents in accessing developmentally appropriate programs for their children to succeed in school. The largest portion of these contracted funds assist in supporting a statewide network of resource and referral agencies. These agencies provide parents information and referrals to child care/early education programs, and provide consumer education about choosing appropriate care settings for children and specialized services to providers, caring for infants and toddlers. Grants are also available to several agencies who

provide training, technical assistance, and educational opportunities to providers through a variety of programs. These programs assist providers in developing age appropriate practices and early literacy/language development activities, so all Kansas children may succeed in school. Research has shown that ages zero to three are the most crucial years for brain development, so developmentally appropriate practices and activities are crucial for Kansas children in care. Federal mandates also require Kansas to implement school readiness guidelines that align with K-12 standards, a statewide professional development system for providers, and coordination between all early learning programs (CCDF, Head Start, TANF, etc.).

<b>Child Care Resource &amp; Referral and Prof Dev.</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Contracts	\$2,997,140	\$3,179,071	\$2,997,139	\$2,997,139

### **Kansas Early Head Start**

In 1998, the Kansas Legislature approved an Early Head Start initiative as a partnership with the Federal government. Early intervention through high quality programs enhances children’s development during their formative years, enables parents to be better caretakers and teachers to their children, and helps parents meet their own goals, including economic independence. Comprehensive services available to program participants include: weekly home visits, physical and mental health education, nutrition education, social services, parental involvement and education, services for children with disabilities, job seeking and retention support, and child care for parents who are working or are in school. In addition, the Head Start Collaboration Office within SRS strives to improve the coordination of policies and initiatives among early childhood programs within the State. Early Head Start grants are awarded to 13 early learning programs in 32 counties that presently serve 825 children from birth to age four and their families. The following table details the program’s service level. The FY 2005 actual expenditures exclude \$668,935 in transfers.

Katie was a young single mother when she enrolled her child in Early Head Start three and a half years ago. Katie has been active in parent committees and Head Start Policy Council as both President and as a parent representative. She is an advocate for early oral health care. Katie is now employed and a volunteer Emergency Medical Technician. Katie just received the 2005 Beating the Odds Award from the Kansas Head Start Association. The award is given to a parent who has made significant gains

<b>Kansas Early Head Start</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Children Served	825	825	825	1,017
Grants	\$7,220,680	\$7,238,139	\$7,889,618	\$9,742,397

**Vocational Rehabilitation Services (VRS)**

The Rehabilitation Services Program provides comprehensive VRS to help people with blindness or general disabilities become gainfully employed. Services may include: assessment, vocational counseling, physical and mental restoration services, training, assistive technology, and job placement. Transition planning is also available to help special education students prepare for employment and independent living. All vocational rehabilitation services are individualized according to each person’s disability, strengths, interests, skills, goals and informed choice.

The VR program has helped Renaldo greatly. He sharpened his skills by taking a computer course and other classes at the Adult Learning Center. This program has provided him with an opportunity to work in the community to earn a living, pay taxes, and avoid dependence upon Social Security benefits. The VR program has helped his work life to continue and has assisted others in their efforts to get back on track with their lives.

Community-based services are emphasized through agreements with community mental health centers, independent living centers, community developmental disability organizations, or other community rehabilitation programs. Services offered through these public-private partnerships are intended to improve the array of services available and the choice of service providers for people with disabilities. Services include: supported employment, transitional employment, job placement and assistive technology. Rehabilitation Services also operates Career Development Centers (CDCs), which provide vocational assessment and supported education services in each of the six SRS regions. Caseload detail for this program can be found in the Caseload Information section.

**Kansas Commission for the Deaf and Hard of Hearing**

The Kansas Commission for the Deaf and Hard of Hearing offers advocacy, information and referral, sign language interpreter registration, coordination of interpreting services, and the Kansas Quality Assurance Screening for certification of sign language interpreters. A major goal of the commission is to expand access to qualified sign language interpreters throughout Kansas.

<b>KS Commission for the Deaf and Hard of Hearing</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Interpreters Certified/Recertified	n/a	53	70	70

**Services for the Blind and Visually Impaired**

The Services for the Blind and Visually Impaired operates a broad array of programs. They include: the Rehabilitation Center for the Blind and Visually Impaired, a comprehensive rehabilitation facility offering independent living skills training, vocational assessment, and technology services; the Kansas Seniors Achieving Independent Living program which provides independent living skills training in the home communities of older Kansans who experience blindness or visual impairment; the Rehabilitation Teaching program which provides services to consumers in their home communities to help them adjust to blindness and increase their skills in the areas of communication, orientation and mobility, and daily living; and the Business Enterprise Program which offers persons who are legally blind the opportunity to manage food service enterprises, vending stands and snack bars. This unit also provides technical assistance

and support to field staff on the delivery of Vocational Rehabilitation Services for people who are blind or visually impaired. The number of persons served by these programs is shown in the following table.

<b>Services for the Blind and Visually Impaired</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Persons Served	872	950	981	1,018
Expenditures	\$2,336,172	\$2,752,748	\$2,546,206	\$2,540,938

### **Disability Determination Services (DDS)**

DDS makes disability and blindness determinations for the U.S. Social Security Administration on the Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) claims filed or reviewed in Kansas. The average number of claims adjudicated monthly is shown below.

<b>Disability Determination Services</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Monthly Claims Adjudicated	2,708	2,922	2,750	2,750
Expenditures	\$13,217,800	\$13,481,864	\$14,243,421	\$14,283,552

### **Child Support Enforcement (CSE)**

Congress enacted Title IV-D of the Social Security Act, the CSE Program, to counteract the ballooning tax burden of Public Assistance programs for children left unsupported by one or both parents, and to improve the lives of the one in four children living in poverty. Federal law requires each State to establish: an effective statewide uniform CSE Program to improve the quality of life for children, to reduce expenditures for cash assistance, food stamps, foster care, and medical assistance, to help families become independent of public assistance, and to return the responsibility of supporting children to parents whenever possible. Failure to meet Federal requirements will result in fiscal sanctions to both the TANF Block Grant and CSE Programs.

The CSE Program is a joint Federal, State (judicial and executive branches), county, and private operation which must satisfy numerous Federal requirements. The program must provide a full range of child and medical support services from the establishment of orders to modification and enforcement of those orders. SRS is the designated Title IV-D CSE enforcement agency for Kansas. Services are provided in all areas of the State by a number of full-time and part-time ISD field staff, by contracts with one prosecuting attorney, some court trustees, and private sector providers (private attorneys, credit bureaus, process servers, and paternity testing facilities). These services are not just for low-income persons receiving other SRS benefits. Any custodial parent may ask for our unique absent parent location and child support enforcement services. No other private or government agency has the legal authority to provide these services.

<b>CSE Cases and Collections</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Cases	134,222	131,321	130,832	129,468
Total Collections	\$151,495,028	\$156,294,122	\$160,938,717	\$164,566,144
State Portion of Collections	\$17,569,530	\$16,840,668	\$16,925,179	\$17,341,317

### **Child Protective Services and Family Support**

The responsibility for responding to reports alleging a child is in need of care rests with local SRS regional office social workers and law enforcement officers. They are responsible for determining if a child abuse report is valid and whether there is a need for further action. If the report alleges abuse or neglect, the response involves assessing the immediate safety of the child, evaluating the family's ability to protect the child from future harm, and determining the services required to support the family in safely caring for their child. Family Services and Family Preservation Services are available, but if it is determined that the safety of the child requires an out-of-home placement, the court may be petitioned for custody and out-of-home placement. If the report is of non-abuse or neglect (runaway, truant, out of control child), the Department responds by assessing the needs of the child and others, the family situation, and to assist the family in accessing necessary services. In some cases, the child may come into the custody of the State for temporary care and services.

***Intake and Assessment.*** SRS provides a number of essential services to children and families. Services include: child protective services, family based assessments, eligibility determination, and information and referral. These services are provided by staff in the local SRS offices. Staff investigate allegations of abuse and neglect to determine the validity of the report, assess family strengths and needs, and provide or arrange for delivery of services to support the family's ability to care safely for their child(ren). A variety of services are also procured from local service agencies. The number of reports received by SRS follows.

<b>Reports Received</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Abuse/Neglect Reports	29,309	29,014	32,855	33,484
Non-Abuse/Neglect Reports	13,793	18,395	15,461	15,758
Total Reports	43,102	47,409	48,316	49,242
<i>Abuse/Neglect Percent</i>	<i>68%</i>	<i>61%</i>	<i>68%</i>	<i>68%</i>

***Community Services.*** Community Services establish local collaborative efforts to provide services to children and their families to prevent unnecessary placements of children into Foster Care. These efforts are primarily directed at children who are safe from abuse and/or neglect by their care givers, but who need preventive services, either because of their own behaviors, or the parent's need for support. These could be children with behavioral problems, truants, or children with serious medical, or mental health needs. These services are designed to be provided by community providers to prevent SRS from becoming involved with the family through an abuse/neglect or non-abuse/neglect assessment.

<b>Community Services</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Children Served	3,564	4,894	5,205	5,205
Expenditures	\$1,400,390	\$1,623,279	\$1,726,332	\$1,726,332

**Family Services.** Family Services recognizes the inherent integrity and value of the family. Whether a child is in need of protection, or is in conflict with home or community, the use of family centered services is an effective approach for preserving the family, and the family's safe functioning. These services are primarily delivered to the family unit rather than to individual family members. However, individual family members may also receive specific services. Services may be court ordered, recommended by SRS, or requested by the family.

The purpose of providing services is to address the safety and risk factors identified and to sustain or enhance the family's capacity to care for their children. Safety and prevention of out-of-home care are the primary goals of family services. These services address the stresses that are impairing family functioning, enable parents to be in charge of their children, and build on resources of the family and community. Services may be offered by SRS staff or through referrals to other community agencies or entities.

<b>Family Services</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Families Served	1,316	1,333	1,752	1,752
Expenditures	\$1,570,224	\$1,732,483	\$2,276,657	\$2,276,657

**Family Preservation.** The Family Preservation Services Contracts were established July 1, 1996. The Family Preservation Program provides intensive services offered to families who are at imminent risk of having a child come into the custody of the Department and removed from their home; unless, the family can make the changes necessary to provide adequate care and safety. These services assist the family in identifying and understanding the problems within the family that place a child at risk of out-of-home placement, and assist them in finding ways to change how the family unit functions. Caseload detail for this program can be found in the Caseload Information section.

### **Permanency Planning**

If the safety of the child warrants the child being removed from the home, the court may be petitioned for custody and out-of-home placement. The following programs describe the services that place the child on a path toward a permanent placement.

**Reintegration/Foster Care.** On March 1, 1997, private contract agencies, Child Welfare Community-Based Service (CWCBS) providers, assumed responsibility for Reintegration/Foster Care services under the close supervision of SRS staff. Services provided by the CWCBS providers include case planning, placement, service delivery, and collaboration with communities. These CWCBS providers help to assure children receive appropriate services in close proximity to their home. The SRS social worker is responsible

for monitoring service delivery to achieve established outcomes. In the nine contract years of operating this very complex program, CWCBS providers have met or exceeded outcome goals related to child safety, minimizing placement moves, maintaining siblings together in placement, and maintaining placement in or close to the child’s home community.

Reintegration/Foster Care Services are provided to children and families when the court has found the child to be a “Child In Need of Care” (CINC) and requiring out-of-home placement to meet their safety needs. Effective July 1, 2005, Reintegration/Foster Care Services are provided by the Family Preservation provider if out-of-home placement is required during the twelve-month service period for a family preservation referral. Services are provided by the Reintegration/Foster Care provider for all other referrals. The Family Preservation or Reintegration/Foster Care provider will continue to provide services to the child and family until the child has been reintegrated or reached another permanency, including adoption. This continuity of service by the same provider will result in more timely permanency, and will minimize delays in permanency plans, which were a characteristic of the former bifurcated contracts. In the previous contract structure, children were moved between contracts and providers as their permanency plans changed.

Most children who require out-of-home placement have been abused or neglected and have significant developmental, physical, and emotional needs that require a wide and extensive array of service and care options. The preferred placement for children is with relatives or other kin, as this allows the child to continue connection with persons important to them. When no relatives or other kin are available, family foster homes are the next placement option. When possible, children are to be placed in settings which allow them to continue to attend the same school they attended prior to out-of-home placement. Siblings are also to be placed together whenever possible unless other circumstances dictate. Some children will require more structured treatment-oriented settings in group homes, residential centers, or Medicaid funded inpatient psychiatric facilities. These Medicaid expenditures are included in the Mental Health Division budget. Caseload detail for this program can be found in the Caseload Information section.

***Adoption Resource Recruitment.*** The Adoption Resource Recruitment Contract, effective in FY 2006, provides recruitment and training for families interested in foster parenting/adoption. This program previously reflected services to children whose parents’ parental rights have been terminated or relinquished by providing the child a permanent family.

<b>Adoption Resource Recruitment</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Families Recruited	–	–	205	205
Expenditures	–	–	\$3,549,996	\$3,727,500

***Adoption Services.*** Adoption Support provides assistance in the placement of children in permanent adoptive homes. These services include Adoption Subsidies for families who adopt children as well as Federal Initiative funding to increase and enhance adoptive

resource stability. This subprogram funds adoption support for families who adopt children with special needs. The subsidy can include: medical services, a special one-time payment to provide for legal fees, or an ongoing monthly financial subsidy for children who have significant medical, emotional, or developmental needs. Adoption Support is essential to enable special needs children, who would otherwise remain in SRS custody, to be placed in permanent adoptive homes. This placement is the goal for children who cannot be reunited with their families. Caseload detail for this program can be found in the Caseload Information section.

**Permanent Guardianship.** Permanent Guardianship is a viable permanency option for children in Kansas, and is explored when there are compelling reasons why reintegration and adoption are not the preferred permanency options for the child, due to age of the child, strong family bonds, or cultural traditions. When guardianship is established for the youth, a subsidy may be provided to assist these families who are willing to assume the responsibility of establishing a permanent home for older children, and their siblings. Once eligibility is determined and an agreement is in place, the subsidy can continue until the child reaches eighteen years of age or longer, while the child completes his or her high school education.

<b>Permanent Guardianship</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Average Monthly Children	59	63	119	119
Guardianship Subsidies	\$159,975	\$170,525	\$320,200	\$320,200

### Independent Living Services

Young people between the ages of 15 and 23, who are no longer in out-of-home placement, may also be eligible for services and supports to help make the transition to self-sufficiency. These services are provided by the local SRS offices to all youth who are eligible for Chafee or Education and Training Voucher (ETV) funding and were in SRS, JJA, or tribal custody. Financial assistance is also available to eligible youth for post secondary education, certified training programs, and monthly independent living subsidy.

Sam is a former foster care child who was in the independent living program. With the tuition assistance help he received, Sam is graduating from WSU with a degree in Business Administration. Bank of America, where he has worked part-time for three years, has offered him a professional position. Sam also shares in ministry through his church.

<b>Independent Living</b>	<b>FY 2004 Actual</b>	<b>FY 2005 Actual</b>	<b>FY 2006 GBR</b>	<b>FY 2007 GBR</b>
Persons Served	301	347	446	446
Assistance	\$854,637	\$1,154,815	\$1,484,016	\$1,484,016

## KEY FEDERAL FUND REQUIREMENTS

Many Federal funds received by the Department consist of matching, unlimited entitlement funds, such as Title XIX Medical Assistance, Title IV-D Child Support Enforcement, Title IV-E Foster Care, and Federal Food Stamp Administration funds. The Department also receives funds in which a State Maintenance of Effort (MOE) is required and for which funding is limited. The following describes three major Federal fund requirements associated with ISD programs, although the funds are used throughout the Department.

### Child Care and Development Fund and State Expenditure Requirements

The Federal Child Care and Development Fund (CCDF) is composed of three distinct funding sources: mandatory, matching, and discretionary funds. The State MOE and matching requirements are closely related. For a State to access CCDF matching funds, it must spend the MOE and obligate all mandatory funds by the end of the FFY. Federal child care matching funds are matched at the Federal Medical Assistance Percentage rate, (approximately forty percent State and sixty percent Federal), and must be obligated in the year they are awarded. The discretionary funds are 100 percent Federal funds. The several earmarks attached to the CCDF discretionary funds are not detailed in the table below. The State funds necessary to access the Federal funds are concentrated in the Child Care Assistance budget. The Federal funds and corresponding State expenditure requirements for FY 2006 and FY 2007 are presented in the next table. All amounts, particularly the discretionary fund amounts, are estimates and depend on Congressional appropriations.

Source	FY 2006	FY 2007
<i>Federal Funds</i>		
Mandatory Funds	\$9,811,721	\$9,811,721
Matching Funds *	15,146,721	15,606,721
Discretionary Funds	19,017,528	19,017,528
Subtotal - Federal Funds	43,975,970	44,435,970
<i>State Fund Requirement</i>		
Maintenance of Effort	6,673,024	6,673,024
State Matching Funds *	9,925,537	10,225,537
Subtotal - State Funds	16,598,561	16,898,561
Total	\$60,574,531	\$61,334,531

\* Assumes approval of the 2005 Deficit Reconciliation Act

### TANF Maintenance of Effort (MOE)

In order to receive the entire \$101,932,061 TANF Block Grant, Kansas must spend a specified minimum in State funds, termed the "TANF Maintenance of Effort". The TANF MOE is \$65,866,201, and represents eighty percent of State funds spent in the base FY of 1994. Congress offered States an incentive to achieve the TANF work requirements by decreasing the State MOE requirement to 75 percent for States which meet the work requirements. The 75 percent MOE level for Kansas is \$61,963,271, or \$4 million less than the eighty percent level. The TANF MOE is budgeted in specific program budgets. Centralizing the State MOE dollars enables the Department to monitor the State expenditures accurately and avoid overspending or underspending the State expenditure target. A major source of the State's MOE is the Kansas

Earned Income Tax Credit. The TANF law allows States to claim refundable tax credits toward the MOE if the credit exceeds the underlying tax upon which the tax credit is based. As such, SRS counts only net refunds from the Kansas Earned Income Tax Credit toward the TANF MOE.

<b>PCA</b>	<b>Program Title</b>	<b>FY 2006</b>	<b>FY 2007</b>
<b><i>MOE - Budgeted Funds</i></b>			
27100	Temporary Assistance for Families (TAF)	29,821,028	29,821,028
27800	Child Care for Families Receiving TAF	6,673,024	6,673,024
53410	Children's Flexible Funds	359,959	359,959
53510	Family Preservation	1,871,030	1,871,030
53660	Emergency Shelter	795,574	795,574
53710	Community Funding	1,726,332	1,726,332
	Subtotal - Budgeted Funds	\$41,246,947	\$41,246,947
<b><i>MOE - External Sources</i></b>			
	KS Dept of Revenue Earned Income Tax Credit	\$25,000,000	\$25,000,000
	Total State Maintenance of Effort	\$66,246,947	\$66,246,947
<b>Minimum Federal Maintenance of Effort Requirement</b>			
	75% TANF MOE Requirement (if work participation rates are met)	\$61,963,271	\$61,963,271
	80% TANF MOE Requirement (standard requirement)	\$65,866,201	\$65,866,201

**Vocational Rehabilitation Services Maintenance of Effort and Matching Requirements**

Federal funding covers 78.7 percent of the cost of Rehabilitation Services operations effectively providing \$3.69 for every dollar of State funds provided. The Basic Support Grant is a capped grant so excess expenditures are required to be made with 100 percent State funds. To maximize the leveraging of State funds, the Department's objective is to utilize as much of the Federal grant each year as State funds allow, but to not spend additional State funds beyond those required for matching purposes. Doing so, could create problems with MOE requirements. MOE requires the State to expend each FFY at least the amount that it expended the FFY two years prior - i.e. FFY 2007's State funds expenditure must be at least equal to FFY 2005's.