WE IMPROVE THE QUALITY OF LIFE OF VULNERABLE OKLAHOMANS BY INCREASING THEIR ABILITY TO LEAD SAFER, HEALTHIER, MORE INDEPENDENT AND PRODUCTIVE LIVES.
do so using their mobile devices.
CON

- Director’s Letter: 4
- Adult & Family Services: 12
- Child Care Services: 52
- Child Support Services: 62
- Office of Client Advocacy: 98
- Office of Inspector General: 108
- Contributors: 120
<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Protective Services</td>
<td>32</td>
</tr>
<tr>
<td>Aging Services</td>
<td>38</td>
</tr>
<tr>
<td>Child Welfare Services</td>
<td>72</td>
</tr>
<tr>
<td>Developmental Disabilities Services</td>
<td>88</td>
</tr>
<tr>
<td>Continuous Quality Improvement</td>
<td>114</td>
</tr>
<tr>
<td>Accountability</td>
<td>118</td>
</tr>
</tbody>
</table>
"It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the season of light, it was the season of darkness, it was the spring of hope, it was the winter of despair…."

That quotation from Charles Dickens’ “A Tale of Two Cities” came to mind while recalling events that transpired during state fiscal year 2018 (SFY18). The tumultuous year was a fiscal and emotional roller coaster for the Department, our partners and providers, and, not least of all, the many vulnerable Oklahomans we serve.

We found ourselves over-using words like “unprecedented” and “historic” to describe events as they unfolded. Even our most tenured employees had never experienced a year quite like this one. Despite additional appropriations over several years, state revenue failures and increasing unfunded obligations such as growth in adoption assistance payments and the state’s larger share of Medicaid programs had required us to cut more than $80 million from our operating budget, including more than 1,200 positions. SFY18 then ensued with DHS facing a nearly $69 million budget shortfall at one point, but ended with a manageable $4.6 million overall reduction and a rosier outlook for the year ahead. What happened in between those two extremes is a tale not soon forgotten.
The Season of Darkness

The State Legislature appropriated $699.9 million to DHS for SFY18-$18 million above our previous year’s funding. We were certainly grateful for Governor Fallin’s and the Legislature’s continuing support of our agency given the state’s budget challenges and the competing needs for limited state funds. Unfortunately, the continuing cumulative effects of reductions and additional unfunded obligations created a $29.1 million budget shortfall for DHS to address for the fiscal year.

Closing this budget gap was much more difficult this year because we had made so many significant administrative and smaller program cuts in prior years. We also have continuing, sizeable, and required expenditures for major programs that cannot be cut, such as our Maintenance of Effort (MOE) payments for Medicaid and TANF totaling $92 million annually. After all of the previous budget tightening, it was not feasible to reduce that $29.1 million from our budget without impacting direct services to clients; however, we worked diligently to minimize potential harm from cuts to programs serving the most vulnerable people.

By spreading the cuts across many program areas, we were able to avoid drastic actions like totally eliminating any one program. We worked closely with our advocates and providers who helped us identify savings or reductions in areas having the least detrimental impacts. The plan was not what we wanted to do, but it did bring our budget into balance and would allow us to continue services to the most vulnerable. Or so we thought.

The Epoch of Incredulity

The Legislature fought through difficult political battles in pursuit of increasing state revenue up to the end of the session. One of the results was the enactment of a “smoking cessation fee” to be levied on cigarettes and other specific tobacco products. This fee was projected to add $214 million to the state’s overall SFY18 budget and was designated specifically for state “health services.” The DHS share was to be $69 million.

Soon after the state budget was passed and the appropriations process completed, a legal challenge to the smoking cessation fee
was made. The Oklahoma Supreme Court quickly overturned the fee as unconstitutional, declaring it a tax not passed in accordance with Oklahoma law.

This outcome forced the Office of Management and Enterprise Services to require the state agencies that had been appropriated funding from this fee to submit revised balanced budgets based on the revocation of those appropriations.

With the loss of this funding, added to our original shortfall of $29.1 million, DHS was facing a $98.1 million state budget shortfall. And it was already October.

At the end of October, as required by statute, DHS submitted a revised SFY18 balanced budget showing how the agency would absorb the additional $69 million state dollar loss. Because of the magnitude of the lost revenue and the concurrent fiscal year budget shortfall, most of the options for slashing our budget were simply unthinkable—e.g., the total elimination of several critical Medicaid Home and Community-based Service programs including the ADvantage waiver and the In-Home Supports Waiver, along with a host of other seriously deep program and service cuts. And even worse, the waiver-related reductions had a Dec. 1 effective date in order for sufficient savings to be realized in the fiscal year.

Governor Mary Fallin had earlier called a special session of the state legislature to address the looming consequences of the lost revenue from the smoking cessation fee—referred to by then as the “cigarette tax”—and to address several other legislative goals. At that point we remained somewhat optimistic the Legislature would come to an agreement on the budget and take necessary steps to restore our funding to avoid these unconscionable cuts.

**The Season of Light**

But Nov. 1 came with no budget agreement and that optimism rapidly faded. To meet advance notice requirements, we were forced to issue 30-day notices to service recipients of the impending end to their services. In the history of these service programs, some in existence for more than 20 years, this had never become necessary. Days before the dreaded Dec. 1 deadline, the legislature presented Governor
Fallin with a budget bill which she vetoed. However, with that action, she earmarked $27 million as a supplemental appropriation for DHS. That short-term funding pulled us from the brink and we rescinded the program cancellation notices.

Governor Fallin then called another special session which resulted in DHS receiving a second supplemental appropriation of $26.5 million. By March, House Bill 1020 passed providing us an additional $10.9 million.

In total, DHS had received $64.4 million in special appropriations to fill the $69 million budget hole. That meant our agency’s reduction for the remainder of the year became $4.6 million. We covered that manageable amount by continuing to hold hundreds of positions vacant across the agency, except for front-line child welfare positions. The state revenue failures of the past two years had taught us to keep some funded positions vacant for emergency situations, and we were certainly glad we did so.

The Epoch of Belief

DHS makes “discernible progress”

In the midst of the budget roller coaster ride, we received welcomed good news in Child Welfare Services. The co-neutrals, monitoring our foster care reform progress under the Pinnace Plan, issued their first Commentary of the 2018 calendar year declaring DHS had made “discernible progress.” The co-neutrals made note of our success in the recruitment of more than 400 new foster homes in the first half of SFY17, the highest number of new homes approved during the first half of any fiscal year since the reform efforts began.

The co-neutrals also commended DHS for the significant change in practice regarding placing children in emergency shelters and our efforts to ensure all potential family-based placements were exhausted before a child enters a shelter. The overall scorecard in this commentary reflected “good faith efforts to achieve substantial and sustained progress” in every measure except three for which the co-neutrals were “reserving judgement” to allow us time to fully implement some core strategies.
In this report, the co-neutrals made particular note of the state’s budget pressures which threatened “the pace and progress of the overall reform effort at a critical time,” and urged Oklahoma’s leaders to stay the course in funding DHS’ efforts in Child Welfare Services.

Around this same time, the Chronicle of Social Change released its findings in a national study of the rising numbers of children in state foster care and the concurrent decrease in the numbers of foster homes. Their report showed Oklahoma had the greatest increase in foster care capacity in the nation. And while most states were experiencing increasing numbers of children in foster care, Oklahoma was one of only three states experiencing a decrease.

**Last state-operated shelter closes**

The success in the recruitment of foster homes certainly contributed to our ability to find placements quickly for most children coming into foster care and significantly reduced our need for emergency shelters statewide. However, for most of this fiscal year, the Laura Dester Children’s Center in Tulsa became the placement of last resort for children and youth for whom we could not find placements—typically those presenting with intellectual and developmental disabilities, mental illness, and extreme behavioral challenges.

We had been trying to close Laura Dester since making the decision to close both the state-operated children’s shelters in 2014. We were successful in closing the Pauline E. Mayer Shelter in Oklahoma City in 2015. However, a convergence of events in Oklahoma between 2017 and 2018 caused the numbers of children placed at Laura Dester to increase. These events included the loss of DHS-contracted group homes and behavioral health treatment services for children. Through this experience the paucity of residential and treatment services in Oklahoma for children with co-occurring intellectual and developmental disabilities, mental illness, and behavioral challenges became all too apparent.

The co-neutrals, concerned about abuse and neglect referrals at Laura Dester, ordered the facility to be closed and the remaining children moved by June 30, 2018, despite the significant additional staffing and other resources we committed to improving services at the facility. We sought more time to phase out the closure because
the challenging needs and behaviors of the children there required more extensive planning to ensure appropriate placements. We countered with our own plan, but to no avail. The co-neutrals used their enforcement authority to obtain a court order to impose their original deadline. Putting even more energy and resources into the effort, our teams had placed every child by June 27, and DHS ended its use of Laura Dester as an emergency shelter.

To meet some of the needed services we had identified through these efforts, our Child Welfare and Developmental Disabilities Services divisions had been working together for several months to develop new placement options for children with higher levels of needs including more group homes, agency companion homes for children, and specialized family foster homes. Developmental Disabilities Services also initiated development of a targeted Medicaid waiver to serve state custody children with intellectual disabilities in community homes.

Through the competitive bidding process, we identified a qualified provider to operate a Medicaid Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-ID) to be provided at a re-purposed Laura Dester campus. This facility will serve as a short-term residential treatment facility for eligible children who will “step-down” to one of the other placement options when they are ready. Renovations being made to the facility to accommodate its new purpose are planned to be completed for an end of calendar year 2018 opening.

**The Season of Light**

As the battles continued in the State Legislature over how to create additional state funding for core government services, teachers and state employees banded together for a historic “walk out,” demanding long-overdue pay raises and better school funding. While many school districts closed for a week or more to allow their teachers to participate in marches at the state capitol, those state employees who participated used vacation days.
Subsequently the legislature passed and Governor Fallin signed bills providing teacher and state employee pay raises. House Bill 1024 provided a tiered pay raise for all state employees, starting July 1, 2018, ranging from $2,000 down to $750 per year depending on an employee’s annual salary. This was certainly a financial and psychological boost for our employees. Outside of Child Welfare Services, the last time DHS employees had received pay raises was in 2014.

The SFY19 state budget was then passed and signed by Governor Fallin in early May, with DHS receiving a $34 million increase in appropriations. This funding, along with an expected increase in federal matching dollars for the state’s Medicaid programs (FMAP), allows the agency in the next fiscal year to restore detrimental cuts, provide services to individuals on the developmental disabilities services waiting list, and increase provider and foster parent reimbursement rates.

Although SFY18 began under extremely trying circumstances, it ended without drastic cuts being required and with a decidedly more positive forecast for SFY19. We owe a great deal of gratitude to Governor Fallin and members of the Legislature who never gave up the fight for new funding. We also are so grateful to our employees, partners, providers, and advocates for persevering on behalf of the people and families we serve. And their diligence in telling the many stories about what our services mean to vulnerable Oklahomans ensured our clients’ needs were not ignored.

The Spring of Hope

...And so we begin a new year with renewed hope and energy in carrying out our mission—to improve the quality of life of vulnerable Oklahomans by increasing people’s ability to lead safer, healthier, more independent and productive lives. Here’s to tomorrow!

Ed Lake,  
Director of the Oklahoma Department of Human Services
In SFY 2018, nearly 12
Adult and Family Services

DHS Adult and Family Services (AFS) helps Oklahomans with many basic needs. AFS staff administers state and federal social safety net programs designed to assist low-income Oklahomans improve their quality of life.

AFS programs include:

- Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)
- Child Care Subsidy
- Low Income Home Energy Assistance Program (LIHEAP)
- SoonerCare (Medicaid) eligibility for the aged, blind and disabled population
- State Supplemental Payment (SSP)

a third of Oklahomans needed help feeding their families.
The Supplemental Nutrition Assistance Program (SNAP) provides 100 percent federally-funded benefits to help low-income individuals and families access nutritious food. The average benefit is $4.00 per person per day or $1.33 per meal. Participants use an Access Oklahoma electronic benefits card, similar to a debit card, which is accepted at 3,564 retail grocery outlets, including farmers markets and direct-to-market farmers. In SFY 2018, DHS issued $847,542,177 in food benefits to 382,157 Oklahoma families.

AFS continues to work with SNAP education partners and local communities to expand the use of SNAP food benefits at farmers markets across Oklahoma. In SFY 2018, 29 farmers markets had SNAP sales exceeding $173,000. Senior Farmers Markets had SNAP sales exceeding $18,000 during the same time period.

$844,603,831 worth of food items were purchased through SNAP in SFY 2018 at 3,564 retail grocery outlets including farmers markets and direct-to-market farmers.

To help able-bodied, unemployed SNAP recipients achieve economic self-sufficiency, AFS continued building OK SNAP Works, a SNAP Employment and Training program in Oklahoma County, through public-private partnerships. OK SNAP Works provides unemployed SNAP recipients with opportunities to reduce barriers to finding and maintaining employment through job search, training and support, vocational education, job retention services, on-the-job training and soft skills development. Expansion of the program will be limited without state funding to offset the retrospective nature of federal funding. OK SNAP Works initiated expansion of the program to Tulsa County in late SFY 2018.

Nearly one out of four children in Oklahoma experience food insecurity. This means approximately five children in every Oklahoma classroom do not get enough to eat each day. When children are hungry, it is hard for them to concentrate on school work and easy for them to get frustrated, distracted, and lose interest in school. In SFY 2018, DHS partnered with the Oklahoma Department of Education and Hunger Free Oklahoma to begin a pilot project called SNAP in Schools to reduce child hunger in the classroom. By increasing a family’s ability to purchase more food with SNAP benefits, DHS anticipates a five percent reduction in the number of children experiencing food insecurity.
### Food Benefits Issued

**$847,542,177**

Families Received Benefits

**382,157**

Food Items Purchased

**$844,603,831**

#### Oklahomans Participating in SNAP

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<tr>
<th>Year</th>
<th>Recipients</th>
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#### SNAP Value Issued

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<tr>
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<tr>
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<td>$859,600,000</td>
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<td>2017</td>
<td>$890,100,000</td>
</tr>
<tr>
<td>2018</td>
<td>$847,500,000</td>
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</table>

*Amounts have been rounded*
SNAP Recap

$4.00
Average daily benefit per person

$1.33
Average benefit per meal

3,564
Grocery stores, farmers markets and direct-to-market farmers participate

37%
Of households had an elderly or disabled member in the home

48%
Of households had children younger than 18 in the home

Less Than
2%
Of households had two working adults in the home

27%
Of households had one working adult in the home

$1,242
Median monthly income for households with earnings
ONE HUNDRED PERCENT SNAP Benefits are 100 percent federally funded.
Nearly one in four Oklahoma children does not know where their next meal will come from. Some of those children may sit next to your child in school.

The Oklahoma Department of Human Services (DHS), the Oklahoma Department of Education, Tulsa nonprofit Hunger Free Oklahoma and the USDA Food and Nutrition Service have developed a pilot project to reduce childhood hunger in the classroom called SNAP in Schools.

“SNAP is the Supplemental Nutrition Assistance Program – or what folks used to call ‘food stamps,’” said DHS Adult and Family Services Deputy Director Linda Cavitt. “About 80 percent of folks eligible for SNAP are receiving benefits; which means 20 percent of eligible families are not. That 20 percent includes a lot of children. We’re hoping to close that gap by five percent over the next couple of years.”

The goal of SNAP in Schools is to help more eligible families and children receive SNAP benefits by making the application process more accessible. Instead of walking into a DHS office to apply for SNAP, families can enroll on-site at school when they enroll their children for classes.

Hunger Free Oklahoma Executive Director Chris Bernard says a substantial amount of federal dollars is available to states to address the issue of child hunger.

48 percent of SNAP households had kids younger than 18
at home.
“We’re leaving about $400 million in federal nutrition funding on the table nationwide,” said Bernard. “We train school counselors, nurses and parent liaisons to identify parents who may be eligible, how to talk to them about SNAP and then help them through the process of enrolling online at www.okdhslive.org.”

Bernard says Hunger Free Oklahoma is focused on maximizing the impact of federal nutrition programs that are meant to support families as they work to become self-sufficient.

“People are proud,” said Bernard. “They want to be self-sustainable so stigma is a big issue. A lot of people just fill out a form for free or reduced lunch and they don’t make the connection over to SNAP. Once you get rid of scarcity, families can focus more long-term on how to bring themselves out of poverty.”

SNAP in Schools is currently offered in Oklahoma City, Tulsa and Tahlequah public schools.

“No one is getting an EBT (electronic benefits transfer) card at school,” said Bernard, “but hopefully it creates an opportunity for people who may never step inside a DHS building to apply for food assistance.”

The plan is to extend SNAP in Schools to more school districts statewide and also capitalize on the correlation to free school lunch programs. The USDA Community Eligibility Provision program can have a significant impact on the number of children eligible for free breakfast and lunch.

“Once you hit a certain percentage level of kids in a school district receiving free school lunches, then the entire district can offer free school lunches to all kids,” said Cavitt. “Now, more than ever, you’ve got to combine your resources. This was a perfect storm: DHS, Hunger Free Oklahoma, the USDA, and the Oklahoma Department of Education coming together to help feed more kids. It’s a win-win situation for our state.”
In SFY 2018, AFS renewed SoonerCare (Medicaid) eligibility for 171,509 Oklahomans and facilitated new SoonerCare enrollment for 61,704 Oklahomans on behalf of the Oklahoma Health Care Authority (OHCA) for those unable to enroll directly through the OHCA web site.

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

DHS administers funds from Title V, Children with Special Health Care Needs (CSHCN) federal grant, which pays for respite care, equipment, diapers, and formula not covered by Title XIX for this population. In addition, DHS staff determines financial eligibility for Tax Equity and Fiscal Responsibility Act of 1982 (TEFRA) medical benefits. TEFRA allows children with physical or intellectual disabilities to qualify for medical benefits when they are not eligible for Supplemental Security Income (SSI) because of their parent(s)’ income or resources.

CSHCN funds also pay for non-Medicaid compensable physician services for children in state custody involved with Child Welfare Services. DHS is partnering with Sooner Success and the Oklahoma Family Network to identify coverage gaps and improve transition services across multiple agencies for youth with special health care needs turning 18 years of age. The focus will be on developing more comprehensive service providers available to serve this population.

SoonerCare is the largest payer of nursing home level-of-care in Oklahoma. DHS staff determines financial eligibility for both the Medicaid Home and Community-based ADvantage program and nursing home services. To improve processing of nursing home assistance across the state, AFS partnered with the Oklahoma Association of Health Care Professionals.
The Temporary Assistance for Needy Families (TANF) program provides parents with 100 percent federally-funded, time-limited cash assistance, job training, education, and employment services to help families reach and sustain economic self-sufficiency. Families may also receive services such as financial planning, parenting skills and after-school mentoring programs for children.

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

<table>
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<tr>
<th>Year</th>
<th>TANF Adult</th>
<th>TANF Children</th>
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<tr>
<td>2014</td>
<td>6,385</td>
<td>23,316</td>
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<td>2015</td>
<td>5,605</td>
<td>23,536</td>
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<td>2016</td>
<td>5,327</td>
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<td>2017</td>
<td>5,574</td>
<td>19,215</td>
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<td>2018</td>
<td>4,440</td>
<td>19,689</td>
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1,958 Adults required to register for TANF Work employment or education activities

84% Of participants found employment and remained employed for at least six months
‘I saw a future.’
Jade See – 2018 Recipient

Jade See was a TANF recipient and mother of two who wanted to learn a skill that would help her support her young family.

“I was just job-hopping,” she said, “or I would be jobless for a while. It was bad enough that I was already dragging my son through the instability and financial problems. After my daughter was born, I didn’t want to put her through that, too. It’s not a way to live your life, especially when you have children.”

Temporary Assistance for Needy Families (TANF) is administered by the Oklahoma Department of Human Services to provide cash assistance for low-income families. Oklahoma and federal law requires TANF recipients to work or participate in education and training programs in order to receive benefits.

DHS works with education and training partners to help ensure TANF clients have more opportunities to learn skills to become successful and self-sufficient. One of the programs available to TANF clients, Help In Reaching Employment (HIRE), is available at Moore Norman Technology Center (MNTC) in Norman, Oklahoma.

“HIRE is funded through federal and state dollars,” said HIRE Coordinator Becky Wood. “The objective is to empower individuals through education and training to acquire skills to find employment. Many of them come to us because they want something better for their lives. They are restless for a better position.”

In SFY 2018, there were nearly 2,000 TANF Work
participants in Oklahoma.
Jade says TANF provided that extra help that made it a little easier for her to go back to school. She enrolled at MNTC and selected the auto collision repair class.

“I got to stand in front of the paint booth and watch someone paint cars and I was like, ‘Man, this is really interesting. I would like to give it a shot and see if it’s something I’m good at.’”

She was more than good at it – she was a natural. Jade is now an instructional assistant at MNTC and teaches the class to other students.

“This is my passion,” she said. “I’m not going to just settle for a low-paying job that I’m going to want to quit after a few months. I want to keep doing what I’ve been trained to do.”

Wood says the HIRE program is successful because it offers clients the gift of knowing they have capabilities and possibilities.

“I believe the investment Oklahoma has made in supporting our programs has enabled us to help get people on the track to success,” said Wood. “The thing I love most about Jade is that she is now creating a pathway for other women in a non-traditional career. For other women or other moms on TANF who say, ‘I could never do that,’ she’s showing them, ‘Yeah, you can.’”

TANF assistance helped Jade gain education and training that opened a door to a better life.

“I saw a future,” she said. “It was a relief, honestly. You have to reach out and earn it and work hard for it. I found something I am good at and enjoy doing. There’s no better feeling than that.”
ONE HUNDRED PERCENT

TANF is 100 percent federally funded.
Help with Child Care Costs

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

Due to federal requirements of the Child Care and Developmental Block Grant Act of 2014, subsidy rules were revised in October 2017 to include locking in copayments during the 12-month eligibility period as well as establishing an exit income threshold set at 85 percent of State Median Income. This change allows parents to accept modest raises without losing their subsidy.

In SFY 2018, DHS received an increase in federal funding to help ensure compliance with the Child Care and Development Block Grant Act. In addition to a provider payment increase, DHS plans to use these funds to increase eligibility and reduce copayments for families who receive subsidized child care.

43,642
Child Recipients

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<td>2015</td>
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<td>2016</td>
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<tr>
<td>2017</td>
<td>$121,000,000</td>
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<tr>
<td>2018</td>
<td>$125,000,000</td>
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* Amounts have been rounded
LIHEAP

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

77,816
Households that received Winter Heating Assistance

6,270
Households that received assistance from the Energy Crisis Assistance Program

68,498
Households that received Summer Cooling Assistance

Quality Improvement

AFS actively uses Lean Six Sigma (LSS) business process analysis as the foundation for continuous quality improvement and to identify efficiencies. Utilizing this process analysis during SFY 2018, AFS developed and piloted a new business process called First Contact Resolution. This process change is aimed at enhancing the overall customer experience and improving service and benefits delivery timeframes.
Adult Protective Services

Adult Protective Services (APS) investigates allegations of abuse, neglect or exploitation of vulnerable adults over age 18 in private residential settings and in long-term care facilities. APS also responds to the needs of vulnerable adults who are no longer able to take care of themselves. The Oklahoma Protective Services for Vulnerable Adults Act was passed by the Oklahoma legislature in 1979 to protect vulnerable adults who cannot protect themselves because of age or disability.

APS specialists receive specialized training for investigating maltreatment allegations and service planning to reduce risk. The program remains funded primarily through state dollars.

APS recognizes the need for intervention in certain cases of abuse, neglect and exploitation in populations of adults age 18 and older but also respects the person’s right to make his or her own decisions. APS works with adults to develop person-centered service plans that support and assist the vulnerable adult to live safely at home when possible.

APS components include:

- Community Protective Services to reduce or eliminate risk of harm and provide referrals for other types of services
- Long-term Care Investigations of alleged maltreatment in nursing homes
- HIV/AIDS Case Coordination and Information Services

19,667 calls of possible abuse, neglect or exploitation.
Reporting Maltreatment

APS receives referrals from various sources such as private citizens, law enforcement, facilities or individuals who self-report. APS has established a reporting page on the DHS website for individuals or other entities to access and report maltreatment of vulnerable adults.

https://apspublic.okdhs.org/

16,719
Internal and Community Services offered to adults

6,696
Adults referred to more appropriate responders

Investigations and Service Planning

Of the 11,716 referrals of maltreatment, 4,989 met the criteria for an APS investigation and 6,727 met the criteria for service-planning only. APS sends its investigative findings to the local district attorney with recommendations for prosecution.

Abandonment: 29
Caretaker Abuse: 193
Caretaker Exploitation: 446
Caretaker Neglect: 602
Financial Neglect: 217
Non-Caretaker Exploitation: 166
Self-Neglect: 1,612
Sexual Exploitation: 1
Sexual Abuse: 8
Verbal Abuse: 131

3,405
Substantiated Allegations on Completed Investigations
Helping Oklahomans

APS understands that vulnerable adults want to age in place. APS assesses persons’ risks and needs in order to develop an appropriate service plan and allow them to remain in their home for as long as possible. Adults have the right to accept or decline services. APS specialists are trained to assess vulnerable adults’ decision-making capacity and support their right to make their own decisions.

APS intervention attempts to prevent future maltreatment by helping vulnerable adults and their caretakers access appropriate services. APS works internally with DHS Adult and Family Services to help establish eligibility for benefits and develops professional relationships with community partners to provide additional services to vulnerable adults.
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<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community APS referrals received</td>
<td>19,667</td>
</tr>
<tr>
<td>Internal and Community Services offered to adults</td>
<td>16,719</td>
</tr>
<tr>
<td>Complaints received by LTCI</td>
<td>2,075</td>
</tr>
<tr>
<td>LTC Investigations</td>
<td>334</td>
</tr>
<tr>
<td>Services secured through AIDS Coordination and Information Services via federally-funded programs and private organizations</td>
<td>5,400</td>
</tr>
<tr>
<td>New clients served by AIDS Coordination and Information Services</td>
<td>87</td>
</tr>
<tr>
<td>Adults served statewide by AIDS Coordination and Information Services</td>
<td>954</td>
</tr>
</tbody>
</table>
Temporary Guardianship

When a vulnerable adult is at great risk of death or serious physical harm and no longer has the ability to make his or her own decisions, APS may petition the court for authorization to provide services through temporary guardianship.

APS Partnerships

APS works closely with DHS Adult and Family Services, Aging Services, Developmental Disabilities Services, Child Welfare Services, Legal Services, the Office of Client Advocacy, as well as community partners, to ensure clients receive the services they need.

Help with HIV/AIDS

AIDS Coordination and Information Services (ACIS) provides comprehensive bio-psychosocial case management and information to individuals diagnosed with HIV/AIDS and their families. In addition to case management, ACIS professional care coordinators provide clients with assessments, advocacy, access to community resources and follow-up services to ensure client needs are met.

Long-Term Care Investigations

Long-Term Care Investigations (LTCI) receives and investigates abuse, neglect, and exploitation complaints regarding residents in nursing facilities, including Veterans Centers and Specialized Facilities for Individuals with intellectual Disabilities. LTCI works with these facilities as well as law enforcement, professional boards, advocacy agencies, and other community partners to resolve complaints, stop institutional abuse and prevent their reoccurrence.
Aging Services

Aging Services (AS) administers community programs that support the rights, independence and quality of life of older Oklahomans and persons with physical disabilities.

6.26 million meals were provided to Oklahoma seniors.
Many services are provided through a Medicaid home and community-based waiver named the ADvantage program, AS’ largest program.

Studies show people want to maintain their independence and live in their own homes as long as possible and in-home services are a cost-effective way for many adults to do so. The ADvantage program assists its members in remaining in their homes throughout their lives, with the combined support of program services, family and friends. This program, along with Medicaid State Plan Personal Care, offers in-home services such as home-making services and personal care. Additionally, ADvantage offers case management, home-delivered meals, prescriptions and other services.

Many ADvantage services are provided directly to members to assist them with day-to-day needs. The most common among these include 4,343,453 hours of personal care services and 3,807,631 home delivered meals.

For members who wish to have more involvement in choosing and managing their own personal care services, the Consumer Directed – Program of Assistance Services and Supports (CD-PASS) option is available. There are currently 1,445 ADvantage members receiving this service, choosing to directly hire, set pay rates, supervise and essentially manage all aspects of the personal assistance services they receive.

Some services, such as respite, support members to continue living at home not by providing a direct service, but by providing opportunities for caregivers to have time away from their caregiving responsibilities. While not every ADvantage member needs or has respite services as part of their person-centered service plan, for many this is a critical piece to them remaining in their homes. Studies have shown that caregiver support can delay or prevent nursing home placement by improving caregiver depression and anxiety. In this way, respite services are beneficial to both the member and caregiver alike.
For some people, living in their own homes is no longer an option. For these individuals, ADvantage provides Assisted Living Services in 12 contracted facilities in Oklahoma. In an assisted living facility, members can receive services such as daily meals, housekeeping, laundry, medication assistance and personal care, among others. The Assisted Living option also provides for social and recreational opportunities for those members who wish to participate. There are currently 298 members receiving Assisted Living services. We expect these numbers to grow as more facilities come on board.

In late 2015, ADvantage program staff began discussions with a vendor to develop a new waiver management information system (WMIS) to replace the existing, outdated legacy system. After years of product development and linking of data elements across multiple programs and state agencies, the new system is set to go live in SFY 2019. The new Harmony WMIS will not only track service plans and cost/utilization data for ADvantage members, but will also allow for real-time processing of information between program staff and providers. Members will have access to the system as well via a member portal that will allow them to view their person-centered service plans and make contact with their case managers as needed. State Plan Personal Care (SPPC) services will also be managed through the Harmony system. This will allow the same benefits for both service providers and recipients of SPPC services.

### ADvantage Program (persons served)

<table>
<thead>
<tr>
<th>Year</th>
<th>Persons Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>20,731</td>
</tr>
<tr>
<td>2015</td>
<td>20,674</td>
</tr>
<tr>
<td>2016</td>
<td>21,147</td>
</tr>
<tr>
<td>2017</td>
<td>20,932</td>
</tr>
<tr>
<td>2018</td>
<td>21,157</td>
</tr>
</tbody>
</table>
ADvantage Program Recap

21,157
Older Oklahomans continued to live in their homes

298
Members Received Assisted Living Services

1,050
Days of Nursing Facility Respite Care

64
Members Provided Nursing Facility Respite Care

Just Under 11,000
Respite Hours Provided

97
Members Received Respite Services

306,580
Hours of Adult Day Health Services
* Paid for by ADvantage funds

388
Members Received Adult Day Health Services
* Paid for by ADvantage funds
3,807,631
ADvantage Home Delivered Meals

4,343,453
Hours of Personal Care Service
Helping Real People, Real Families

Since 2009, 25 year old Zachary Henderson has volunteered as an assistant basketball coach at Sapulpa High School, where he graduated. A lover of sports, he hopes to take his situation and help younger kids realize that no matter how hard things are, you can keep going.

“For me, there’s nothing wrong with doing it differently,” said Henderson.

Henderson was born with Duchenne’s muscular dystrophy.

“It makes all of my muscles very weak, and over time it gets worse,” Henderson explained. “So it started out where I could walk, and when I was 12 years old is when I couldn’t walk anymore, started falling, and my muscles just started getting really weak.”

“This disease is a slower progression,” his mom, Shelly Henderson, explained. “He played baseball when he was little and moved into basketball, and when he was about 12 years old he could no longer walk and run, so he’s been in a wheelchair ever since then. But he was in the band, he showed animals in FFA, we just moved from one thing to another with him.”

As the disease progresses, the Hendersons’ lives continue to change.

“So we were doing okay when he graduated high school,” said Mrs. Henderson. “He still had some ability in his arms and his upper body so he could be home for a couple of hours by himself, and he was still able to get out if he needed to. As things progressed, he stopped being able to lift his arms or take care of himself. One day, he was here by himself and someone broke into our house.”

1,445 Oklahomans received the CD-PASS Waiver.
With both parents at work, Henderson called 911.

“That was a very big eye opener and very scary for us because he felt helpless and we felt helpless. That’s when we decided he can’t be here alone anymore,” said Mrs. Henderson. “I ended up on the DHS website and saw the ADvantage program, and although it really was worded more towards seniors and senior living, all of the eligibility is what we were dealing with. I started digging deeper and found the CD-PASS Program and put our application in to see if he would qualify. He did, so it was a huge relief and an answer to what we needed.”

“Me and Zachary, we go way back,” said Ty Lewis. “We were best friends, we grew up as little kids together. All through high school we had a lot of the same classes together.”

Henderson agreed. “We didn’t go to the same middle school, but we caught back up in high school, and just from there, man, he’s pretty much my brother.”

Lewis, now a firefighter and emergency medical technician, is also his best friend’s part-time caregiver through the ADvantage CD-PASS program.

“How I came to work with him,” Lewis explained, “it all fell in place. After high school, I went off to Stillwater for college and I started working on my EMT and my firefighting training and I got hired onto the Tulsa Fire Department. So when I moved back here, everything just kind of fell into place. A lot of firemen, they don’t make a whole lot of money, so we’re always kind of looking for that supplemental income on a part-time deal.”

“It was just perfect timing,” said Mrs. Henderson. “We said ‘hey, we could really use your assistance here with Zac’ and, of course, he jumped on that and loved it. So Ty comes in on his off days and he takes Zac to practice and to the gym, and he helps him with lunch and he does whatever Zac needs him to do.”
“It allows me to get out and about for myself,” Henderson said. “Being able to hire who I want, and I don’t have an old nurse or somebody have to come and help me, so at least I can have a relationship with them. It makes it nice to be able to get out and do what I want to do, away from my parents, and get independent.”

“CD-PASS allows us to hire who we want to hire, have who we want in our home,” said Mrs. Henderson. “My husband and I both have to work, not only for income but insurance. I was driving home at lunch every day to take care of Zac and then going back. Any time he called, I’d have to leave work so it was hurting my office as well. I needed to be at work as much as I could but I also need to be here for him. So it was a struggle, and having this program where we can hire somebody and this program pays them to help us, it has been a lifesaver for us.”

With CD-PASS, Henderson can keep doing the things he loves, including giving back to his community as an assistant basketball coach.

“I love getting to see the kids learn,” said Henderson. “You get these kids playing so hard to try to get to one goal and play as a team.”

“Just to see him being out there on the court and helping coach these kids,” said Lewis, “it really inspires me and makes me want to be here even more.”

“These programs are helping real people, real families who need this,” said Mrs. Henderson. “It has helped our family tremendously. It is helping Zac tremendously to continue to do what he loves to do.”

“I just truly think that this program helps him, helps his family, helps me, and it helps everybody around him,” Lewis agreed. “I believe that we all benefit from it.”
Aging Services administers the federal Older Americans Act (OAA) funds in conjunction with 11 Area Agencies on Aging (AAA). The AAA’s contract with Aging Services to provide a variety of services to person’s age 60 years old and older, regardless of income. Services include: Nutrition Services (Congregate and Home-delivered meals), Respite for Caregivers, Transportation, Legal and Homemaker services. The two largest services accessed are Nutrition Services (Congregate and Home-delivered) and Caregiver Services.

Congregate and Home-delivered Nutrition Services: These critical meals are provided to older adults in one of 189 meal sites statewide or delivered to the participant’s home. Congregate Nutrition Services focus on serving health-promoting meals, but it also presents opportunities for social engagement, health and wellness activities, and meaningful volunteer roles, all of which contribute to overall health and well-being. Home-delivered Nutrition Services provide opportunities for social engagement and, in many cases, an informal ‘safety check.’ For every $25 per year per older adult Oklahoma spends on home-delivered meals, the state reduces its percentage of lower-needs nursing home residents by one percent when compared to the national average. (Thomas, K & Moe, V. The relationship between Older Americans Act Title III State Expenditures & Prevalence of Low-Care Nursing Home Residents. Health Services Research. 12.3.12.)

<table>
<thead>
<tr>
<th>Home-delivered Meals</th>
<th>1,234,269</th>
</tr>
</thead>
<tbody>
<tr>
<td>Congregate Meals</td>
<td>1,214,672</td>
</tr>
</tbody>
</table>

* Older Americans Act Funding

1,185

Individuals that received Caregiver and Grandparents Raising Grandchildren Respite (Older Americans Act Funding)
Protecting the Rights of Seniors

The Long-Term Care Ombudsman program protects the rights of residents in long-term care facilities, including nursing homes, assisted living and similar adult care facilities. An ombudsman helps advance the quality of life and care available to facility residents. In SFY 2018, the program investigated 4,208 complaints from residents and family members. Over 99 percent of those complaints were resolved without the need for referral to another agency for enforcement.

4,208 Complaints Investigated
99% Of Complaints Resolved

SCSEP

Authorized through the OAA and funded by the U.S. Department of Labor, the Senior Community Services Employment Program (SCSEP) provides work-based training in part-time community service assignments and assistance. The program focuses on the development of skills and experiences for adults age 55 and older who have incomes below 125 percent of the federal poverty level, are unemployed residents of Oklahoma, and have poor employment prospects. During SFY 2018, 112,299 work-based training hours were provided to 170 older adults in 34 counties in conjunction with contract partners.

112,299 Hours of Work-Based Training
170 Oklahomaans Participated
Adult Day Services

In SFY 2018, the Adult Day Services program had 26 sites across the state serving 570 persons. The program supported 93,840 service days and 563,040 service hours for the year. More than half (51 percent) of the state program funds provide services to individuals on the waiting list for Developmental Disabilities Services home and community-based waiver program.

570
Oklahomans Served

563,040
Hours of Service

Help with Transportation

Transportation services to non-emergency medical appointments, shopping and other social events and services are provided across the state thanks to accessible vehicles purchased through the Federal Transit Administration’s Section 5310 Transportation program. This program provides ADA accessible vehicles to more than 133 non-profit organizations, tribes and governmental entities to provide transportation for seniors and individuals with disabilities in their areas. In federal fiscal year (FFY) 2018, the program provided 1,436,340 trips for 615,792 riders with approximately 553 vehicles traveling a combined 8,746,152 miles, nearly one million more miles than the 7,839,204 provided in FFY 2017.

615,792
Transportation Program Riders

8,746,152
Miles Travelled
The Lifespan Respite Grant

The Lifespan Respite Grant was awarded to Aging Services for a third, three-year period from the U.S. Department of Health and Human Services Administration for Community Living (ACL) to increase and improve supports for caregivers. This grant includes funding for the “respite vouchers” for caregivers who cannot qualify for other respite voucher programs, and to support development of a new Oklahoma Caregiver Coalition to help sustain caregiver supports, like respite, once grant funds are depleted.
An average of 52 CCS
Child Care Services

Child Care Services (CCS) is statutorily mandated by the Oklahoma Child Care Facilities Licensing Act under Title 10. The CCS mission is to ensure Oklahoma families have access to licensed, affordable, high-quality child care where children have the opportunity to develop to their fullest potential in a safe, healthy and nurturing environment. Child Care Services licenses child care facilities in the state and works in partnership with child care providers, Oklahoma Partnership for School Readiness, community organizations, tribes, state agencies and other stakeholders to develop services for child care in the community and assist child care facilities in achieving maximum licensing standards. CCS is funded through the federal Child Care Development Block Grant (CCDBG) and matching state dollars.

3,248 child care facilities were licensed each month.
Child Care Licensing

A well-trained licensing staff and regular monitoring visits increase the likelihood of positive outcomes in children’s physical, emotional and cognitive development. Child Care Licensing specialists make a minimum of three unannounced visits each year to most child care programs statewide to monitor licensing compliance and quality criteria. Licensing specialists investigate complaints and maintain a database for accountability and parent referrals. In addition, they offer an interconnected combination of consultation and monitoring and assist child care programs with resources and technical assistance available through the CCS website and partner organizations. A database of monitoring visits and complaint investigations is located on the DHS website.

121,063
Monthly average capacity for children

37
Permits issued each month to new child care program applicants

### Monthly Average Facilities for Child Care Homes and Centers

<table>
<thead>
<tr>
<th>Year</th>
<th>Homes</th>
<th>Centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>1,644</td>
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<tr>
<td>2015</td>
<td>1,562</td>
<td>1,996</td>
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<tr>
<td>2016</td>
<td>1,539</td>
<td>1,899</td>
</tr>
<tr>
<td>2017</td>
<td>1,522</td>
<td>1,837</td>
</tr>
<tr>
<td>2018</td>
<td>1,507</td>
<td>1,741</td>
</tr>
</tbody>
</table>

*The number of licensed child care homes and centers continues to decline nationally and in Oklahoma.*
‘Reaching for the Stars’

Oklahoma was the first state in the nation to successfully implement a Quality Rating and Improvement System (QRIS) for licensed child care programs. The program, “Reaching for the Stars,” helps child care providers improve the quality of the care they provide. Licensed programs that meet quality criteria receive a star rating level and higher reimbursement for child care services. There are four levels within the stars program: One Star, One Star Plus, Two Star and Three Star. CCS partnered with the Center for Early Childhood Professional Development at the University of Oklahoma to make QRIS resources available online. The QRIS Standing Subcommittee is comprised of child care providers who serve in an advisory capacity to help improve the “Reaching for the Stars” program. Recommendations from the subcommittee have resulted in updates to agency processes and policies, forms changes, and improvements in clarification documents used by child care programs.

Number of Two and Three Star Child Care Facilities (as of June 30)

<table>
<thead>
<tr>
<th></th>
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<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-Star</td>
<td>1,502</td>
<td>1,389</td>
<td>1,342</td>
<td>1,274</td>
<td>1,279</td>
</tr>
<tr>
<td>3-Star</td>
<td>270</td>
<td>256</td>
<td>258</td>
<td>265</td>
<td>273</td>
</tr>
</tbody>
</table>
Ensuring Quality in CCS Programs

Utilizing Lean Six Sigma principles, DHS Quality Service Standards and the DHS Strategic Plan, Child Care Services streamlined processes, focused on customer service and implemented changes to improve quality. CCS restructured and streamlined processes to improve efficiency and reduced the backlog of child care applications by 59 percent. Three pages of application instructions were converted into plain language guidelines that included step-by-step instructions, checklist and timeline. The goal is to reduce the time needed to process a child care program application from 65 days to 45 days.

In SFY 2018, CCS conducted regional “roadshows” with frontline staff focusing on improving the integrity and quality of the licensing program with an emphasis on customer service. Frontline staff were trained in professionalism and navigating their dual roles as consultant and regulator.

In partnership with the Center for Early Childhood Professional Development, CCS provided avenues for Family Child Care Homes to strengthen their programs. Twenty-four Family Child Care Home administrators may now attend Leadership Academy for Family Child Care Homes which is designed to improve the quality of business practices through program management, legal knowledge, program planning, policies and procedures and staff development. Additional trainings to strengthen provider business practices are available on the searchable Oklahoma Professional Development Registry. The Oklahoma Child Care Resource and Referral is available to provide technical assistance to programs.

Continued improvements to the CCS website provide more information to assist families with choosing quality child care, provide child care options and encourage providers to improve the quality of their services. The website includes links to assistance programs, information on children’s health, growth and development, and resources that support families.
Residential and Child-Placing Agencies

The CCS Residential and Child-Placing Agency Licensing Program helps ensure these facilities and programs are safe and healthier environments for children and youth in any custody status who are in 24-hour, out-of-home care. This unit is also responsible for investigating complaints regarding noncompliance with licensing requirements or violations of the Oklahoma Child Care Facilities Act. Residential Licensing Services monitored 26 children’s shelters and 68 residential child care programs with a combined capacity of 2,413 and monitored 55 child-placing agencies. CCS created and rolled out a Residential Care and Child-Placing Agency Locator for the public to search for programs that provide care to children who are in 24-hour, out-of-home care. A summary of monitoring visits made by licensing specialists over the most recent three-year period is available to the public as well as information about substantiated complaint investigations.

Licensed Residential and Child-Placing Agency programs include:

- Residential child care facilities
- Regimented residential programs
- Emergency children’s shelters
- Residential treatment facilities
- Secure care facilities
- Foster care agencies
- Adoption agencies
- Independent living programs
Professional Development Registry

CCS maintains the Oklahoma Professional Development Registry to provide valuable information about the state’s early childhood workforce including child care professional turnover, number of professionals in the industry, credentials and the process for approving and tracking professional development of child care professionals.

Moving Forward

During SFY 2018, CCS focused on developing programs and measures guided by the Child Care Development Fund (CCDF) State Plan to be implemented over the next two years. To assist with the implementation, states received an increase in discretionary funds through the Federal CCDF program. Funds will be spent on purposes consistent with the Child Care Development Block Grant (CCDBG) Act of 2014. DHS and CCS leadership combined efforts with partners and stakeholders to develop programs and strategies to best support families, children and the child care provider community by investing in quality child care in three specific areas: child care provider rates, infant and toddler network and incentives for professional development for this critical age group, and a revision of the subsidy eligibility and copayments schedule. We are proud of Oklahoma’s commitment to support families and children by investing in quality child care.

- 94,000 Child care provider staff that attended low or no-cost professional development
- 534 Child care provider staff that participated in Scholars for Excellence Scholarship Program
- 206 Child care provider staff that obtained certificates and degrees
CCS Recap

45
Maximum days to process a child care program application. (Down from 65 days)

26
Children shelters monitored

68
Residential child care programs monitored

55
Child-placing agencies monitored

2,413
Child capacity for monitored shelters and programs
TOP 5 PROGRAMS IN THE NATION

Oklahoma’s licensing program among the top five in the nation.

* Ranked by Child Care Aware of America for Oklahoma’s oversight and standards of family child care homes and child care centers.
Child Support Services

Under federal law, Child Support Services (CSS) is responsible for establishing, monitoring and enforcing child support orders and recovering taxpayer funds spent on public assistance services. While anyone needing service may apply regardless of income, Oklahomans receiving TANF (page 24), Child Care Subsidy (page 30) or SoonerCare (Oklahoma Health Care Authority) are automatically referred to Child Support Services. The collection and distribution of reliable child support helps families to be more self-sufficient, decreasing reliance on public assistance.

Child Support Services include:

- Locating parents
- Establishing legal fatherhood (paternity)
- Establishing and enforcing fair child support orders
- Increasing health care coverage for children through medical support orders

Services collected $358 million in child support.
Changes in Child Support

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 saw the beginning nationally of a gradual decline in the number of families who receive public assistance. Similarly, Medicaid online enrollment changes over the last few years resulting from the Affordable Care Act of 2010 have decreased the number of automatic referrals as well. As a result, fewer families have been automatically referred for child support cases most years since 1999, with notable exceptions following the economic downturn of 2009. Nationally, the number of child support cases dropped 16% between 1999 and 2016, the most recent national data available. In Oklahoma, open CSS cases at the end of SFY 2018 were down 4.9% versus SFY 2016.

Paternity Establishment

CSS helps determine the parentage of children born to unmarried couples. When fatherhood is in doubt, CSS follows legally established genetic testing procedures. Through the previous decade, CSS remains among the highest performing states in the country for Statewide Paternity Establishment Performance Measures. However, due to budget reductions and staffing cuts, performance in this area dropped from 112.42 percent in SFY 2016 to 102.90 percent in SFY 2018. Paternity establishment is the first, crucial step in ensuring that the financial responsibility for supporting children starts with the parents, not the taxpayers. Even a single year’s drop can affect families for the lifetime of a child.

Child Support Orders

Child support orders are established through a court process. In the last decade, CSS improved its Support Order Establishment rate from 71 percent in 2007 to 83 percent in Federal Fiscal Year (FFY) 2017, exceeding the national average increase over the same 10-year period by half. CSS established support orders for 9,837 cases in SFY 2018, a decrease of 25.62 percent from just two years prior, while also experiencing a 4.9 percent decrease in open cases over the same two year period.
Arrearages

Children benefit most from regular, reliable support. When support is not paid, an arrearage accumulates. CSS improved the percentage of cases with Arrears Support Collections from 61 percent in FFY 2007 to 62 percent in FFY 2017 which was only about a quarter of the national average improvement. Unfortunately, Arrears Support Collected in SFY 2018 dropped 6 percent from its SFY 2016 level.

Total Collections

In SFY 2018, CSS collected $358 million dollars in child support with 192,584 cases open at the end of the year. This is a drop of $9.4 million (2.57 percent) and 9,900 cases (4.9 percent) compared to SFY 2016. In good news, the percent of custodial parents receiving child support collections has remained steady over the last two years.
A Higher Quality of Life
Marti Crissup – Child Support Recipient

Marti Crissup has had a child support case since 2009. In the beginning, her child support was collected through an income assignment as part of a court order. Child Support Services collected payments from Crissup’s ex-husband’s employer, and sent the payments to Crissup on a debit card.

Crissup says it worked well while her ex was employed, but at some point he made a decision to become self-employed. At that time all child support payments stopped, and that’s when Crissup began contacting DHS Child Support asking for enforcement.

“It was very frustrating at times because I know there’s an order in place,” said Crissup. “I know that there are mechanisms that Child Support Services has for collecting money from parents who are supposed to pay, and it didn’t feel as if anything was necessarily being done. I was calling, I was asking for enforcement, but it was a little challenging. You call into a contact center, and they take a note and then give it to your caseworker, and then your caseworker does something and you don’t really know what the caseworker does until you call back and ask. So there were a lot of phone calls that I was making over the course of several years.”

Behind the scenes, Child Support Services was constantly working to identify whether there was money that could be levied to pay Crissup’s child support. In 2018, CSS identified a sizeable bank account belonging to Crissup’s ex-husband and froze the account.
families in 2018.
There was an amount of $31,000 that was left against a judgement order for my ex from past child support,” said Crissup. “They saw it in his account and they grabbed it and they held it, and so at that point in time a process started where we needed to go to court for the judge to decide if that money was going to be given to me or what would happen.”

This is when Crissup began working with Ann Murray, state’s attorney at the Chickasha Child Support Office.

“It took an entire day,” Crissup explained. “Ann went back and forth between the room I was in and the room that my ex’s attorney was in, and she was able to make something happen that had never happened before, even when I had had an attorney myself that I was paying. Ann made it very clear to me that she was not representing me, which she did not, but she did act in the best interest of my daughter and my family and she negotiated what I thought was an amazing settlement that day. And she did all of that while treating me with a great deal of respect.”

According to Crissup, she was awarded $21,000 in child support that day, and had also recently received another $9,000 in non-wage withholdings. The parents also agreed to a new child support order moving forward.

“Child Support to me is money for myself and my kids to live essentially,” said Crissup. “Assistance with paying for my home, for buying groceries, for paying for extracurricular activities that the kids are doing.”

Prior to this year’s settlement, Crissup often had to find extra work to support her children.

“Child Support has been a big deal for my family in that for so long it wasn’t paid. And when it wasn’t paid, it was me on my own supporting both of my children with no assistance from anyone else which meant that we really had the basics. We were watching my ex-husband take extravagant vacations but not be able to do those kind of things ourselves.”
When asked whether she has any advice for other single parents, Crissup is quick to respond.

“Don’t give up,” Crissup said. “So first of all, just understand that you have a piece in it, right? You have to be willing to make the phone calls, and you have to be willing to stay invested and let Child Support know what’s going on. Keep a record of that, make sure you follow up on it, and trust that something is being done, something very big.”

“Child Support Services first of all renewed my faith in the system,” Crissup added. “It also empowered us. It was really defeating for a long time to think that help is not coming, but help came!”

“A higher quality of life, I would say, is absolutely what Child Support has given us.”
## Child Support Recap

At the end of the State Fiscal Year (ending June 30, 2018)

<table>
<thead>
<tr>
<th>Description</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases open</td>
<td>192,584</td>
</tr>
<tr>
<td>Children under the age of 19 in open cases</td>
<td>209,817</td>
</tr>
<tr>
<td>Cases for children born out of wedlock that now have paternity established or acknowledged</td>
<td>124,262</td>
</tr>
<tr>
<td>Ordered cases that received some type of collection</td>
<td>121,252</td>
</tr>
<tr>
<td>Cases with medical support ordered</td>
<td>117,404</td>
</tr>
<tr>
<td>Cases with arrears that received collection on those arrears</td>
<td>101,070</td>
</tr>
<tr>
<td>Open cases from medicaid referrals</td>
<td>11,360</td>
</tr>
<tr>
<td>Cases involving other states</td>
<td>25,088</td>
</tr>
</tbody>
</table>
Results for SFY 2018

- Paternity Establishment Percentage – 102.90% (comparing one year’s out-of-wedlock births with acknowledged and court-ordered paternities from the next year)
- Support Orders Established – 83.62% of caseload
- Current Support Collected – 55.70% percent of amount due
- Arrears Support Collected – 62.43% percent of ordered cases had collections of past due support
- Medical Support Orders Established – 94.10% percent of all cases with support orders also had medical support orders established
- Cost Effectiveness Ratio – $7.03 was recovered for each dollar expended on the program

161,037 cases have an order for child support, of which:
- 10,974 were people receiving public assistance (TANF or children in foster care)
- 47,051 were former public assistance cases
- 103,012 were never on public assistance

* Note “public assistance” excludes Medicaid

209,817 children under the age of 19 are included in the open cases -
- 148,886 of these children were born out of wedlock
- 124,262 children born out of wedlock now have paternity established or acknowledged

28,423 cases opened in SFY 2018 -
- 11,360 from Medicaid referrals
- 5,921 from private applications
- 4,710 from Foster Care
- 3,308 from TANF
- 1,618 from other states
- 1,506 from Child Care

Of the 25,088 cases that involve other states -
- 11,232 are cases where the custodial person lives in Oklahoma, but the noncustodial parent lives in another state
- 13,856 are cases where the noncustodial parent lives in Oklahoma, but the custodial person lives in another state
Child Welfare Services

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

80,598 reports of alleged child abuse, neglect, or both.
In SFY 2018, DHS received 80,598 reports of alleged child abuse, neglect, or both, in which 138,061 children were alleged victims. Of those reports, 15,951 children were confirmed to be victims. This year, there were 4,955 children who left state custody and were successfully reunited with their biological families, adopted, or placed in a guardianship situation.

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

DHS maintains a 24-hour statewide, centralized child abuse and neglect hotline to take reports regarding children, younger than 18 years old, believed to be a victim of abuse, neglect or both. Ongoing targeted recruitment and hiring at the hotline has maintained staffing levels which allow for calls to be answered timely and with quality information – all of which is crucial to the safety of children. During the entirety of SFY 2018, the answer rate at the hotline has been maintained above 95 percent. Process improvements continue to increase the speed at which referrals are identified and assigned to local offices.

Family-Centered Services

If a child is found unsafe after an assessment of the family situation, CWS intervenes to assist the family and keep the child safe. One option is Family-Centered Services (FCS), which allows the child to remain in the custody of their parents with a safety plan. FCS cases focus on the child’s safety, preserving and strengthening the parent’s or caregiver’s abilities to keep children safe. Most families in an FCS case will receive Comprehensive Home-Based Services (CHBS) and referrals to other community services that best meet their needs. CHBS is only appropriate for families where children are at moderate risk of removal. During June 2018 there were 749 families served in FCS cases statewide.

749
Open Family-Centered Services cases
The primary source of federal funding for children in foster care is Title IV-E. The U.S. Department of Health and Human Services has waived certain requirements and allowed some states, through demonstration projects, to use these funds more flexibly to test new approaches to service delivery and improve outcomes for children and families involved in the child welfare system.

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

The DHS waiver demonstration project, known as Intensive Safety Services (ISS), targets those families where the removal risk is higher and therefore not appropriate for CHBS. ISS provides services in the home three to five times a week, eight to ten hours per week for duration of four to six weeks for families with children from birth -12 years of age. These services are provided by contracted master’s level licensed behavioral health professionals or those under supervision for licensure. At the end of the ISS period, the cases then step down to a CHBS case for continued services up to six months. Each case must also have a Family-Centered Services worker throughout the life of the case. In the first three years of the project in Oklahoma, 767 children received ISS services resulting in 611 (80%) children safely maintained with their families, avoiding removal and placement into DHS custody.
Out-of-Home Care

Children who are in DHS custody, whether they are in foster care, inpatient care, trial adoption, trial reunification, or similar services, are considered to be in out-of-home care. The goal for most of these children is to return to their own home. DHS has seen a seven percent decrease in the number of children in out-of-home care from the last fiscal year, and a 15 percent decrease for the last two fiscal years. Also, the number of children entering out-of-home care has continued to decrease with SFY 2018 having the lowest number of children entering care since SFY 2011.

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

<table>
<thead>
<tr>
<th>Out-of-Home Care</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number in Care - Start of SFY</td>
<td>9,980</td>
<td>11,301</td>
<td>10,917</td>
<td>9,964</td>
<td>9,044</td>
</tr>
<tr>
<td>Entering Out-of-Home Care</td>
<td>6,078</td>
<td>5,328</td>
<td>5,143</td>
<td>5,158</td>
<td>4,660</td>
</tr>
<tr>
<td>Exiting Out-of-Home Care</td>
<td>4,761</td>
<td>5,774</td>
<td>5,971</td>
<td>6,047</td>
<td>5,236</td>
</tr>
<tr>
<td>Number in Care - End of SFY</td>
<td>11,301</td>
<td>10,917</td>
<td>9,964</td>
<td>9,044</td>
<td>8,434</td>
</tr>
</tbody>
</table>
Foster Families

Foster families are a vital part of the child welfare system in protecting children from abuse and neglect. When children cannot safely remain with their parents, a match is made with an appropriate foster family. The foster family may be related to the child, have a previous relationship with the child, or be a non-related foster family. Focused recruitment efforts with multiple community partners, including Governor Mary Fallin supporting the Oklahoma Fosters campaign, assisted DHS and Resource Family Partner agencies to recruit 728 new foster families in SFY 2018. DHS will continue recruitment efforts and supports to foster families until every child has the right foster family.

728
New foster families

Reunifications and Adoptions

In SFY 2018, 2,328 children left state care through reunification. Safe reunification is the ultimate success because it means together the family and DHS were able to correct the conditions that led to removal of the children and restore the family. Reunification also ensures children maintain long-term connections to their kin, culture and community which are the overall goals of child welfare services.

In cases where a child cannot be safely returned to his or her own home, adoption provides permanency for the child. In SFY 2018, DHS staff finalized adoptions for 2,144 children, giving them a permanent home. Occasionally, there are times when the adoption is not successful and is dissolved. In SFY 2018, there were 32 adoption dissolutions. On average, these adoptions lasted 69 months before they dissolved.
‘Positive people do positive things.’
John – Child Welfare Client, CarePortal Recipient and Dad

Attitude is everything. For John, a single father of seven children, a positive attitude, perseverance and the help of people who cared for him made all the difference as he was engaging with child welfare. John’s children were in DHS custody and he was working diligently with the agency to get his family back together.

“John had such a positive attitude from the beginning. No matter what we discussed, no matter what the topic was, it did not matter,” said John’s permanency planning worker, Peketa Hurley. “He was dedicated to getting his family back.”

What is most amazing about John’s story is that he did all the hard work he needed to do - attending multiple classes per week, completing services and making it to court dates, visitations and other appointments – all without a vehicle.

“I rode the bus everywhere. I’m in drug court too, so I was doing three or four classes for them a week, plus doing classes for DHS,” John said. “There were some mornings I would get up at 5 in the morning just to get somewhere at 7. Then, I had to just make my schedule and keep to that schedule. It’s just what I did. I had to be there to see my kids.”

The CarePortal connects local churches and their members with DHS so they can assist families involved with child welfare with real needs in real time.

In SFY 2018, 2,328 children were successfully reunited
with their families.
“When and if and how the church can help, they jump in and help – on a little need, or a big need,” said Chris Campbell, Director of the 111 Project who runs the CarePortal. “But helping that family progress forward on whatever the caseworker has identified as a helpful tool or next step for that family to help.”

For John, help came in a big way in the form of a car to help make his life easier. Not only did the church provide the car, they also put on four new tires, gave him a gas card and even helped transfer the title.

“To hear the success stories and to get messages from different caseworkers to let us know we’re making a difference, it has energized our community, it has energized our church and it has energized me as a pastor,” said Mike Keahbone, Senior Pastor of Cherokee Hills Baptist Church. “This is one of those real markers we can set before us and say, you know what, we’re doing something that’s worth something. Especially when you see families reunited. It’s beautiful.”

John reunified with his children earlier this year. He still maintains relationships with a foster parent who cared for his children and who is now godmother to two of his children. John and his children continue to benefit from his support network, including his family and former caseworker. He hopes his story can help others who are going through a similar situation. Whether their family literally gets back on the road with the help of a new vehicle, or some other service provided by DHS or a community partner, John reminds them to keep their attitude right.

“You gotta live off the motto positive people do positive things. You gotta stay positive. You’ve gotta truly believe it,” John said.
2,328
Children left state care through reunification

2,144
Children received a permanent home through adoption

32
Adoption dissolutions
Adoption Assistance Payments

There are currently 19,337 children and their adoptive families receiving adoption assistance payments.

Children exiting state care to permanency

<table>
<thead>
<tr>
<th>SFY</th>
<th>Reunification</th>
<th>Adoption</th>
<th>Guardianship</th>
<th>TOTAL Exits to Permanency</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>2,625</td>
<td>1,268</td>
<td>499</td>
<td>4,392</td>
</tr>
<tr>
<td>2015</td>
<td>2,700</td>
<td>2,186</td>
<td>535</td>
<td>5,421</td>
</tr>
<tr>
<td>2016</td>
<td>2,816</td>
<td>2,243</td>
<td>539</td>
<td>5,598</td>
</tr>
<tr>
<td>2017</td>
<td>2,594</td>
<td>2,577</td>
<td>530</td>
<td>5,701</td>
</tr>
<tr>
<td>2018</td>
<td>2,328</td>
<td>2,144</td>
<td>483</td>
<td>4,955</td>
</tr>
</tbody>
</table>

Community Partnerships

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

In January 2012, the Oklahoma Department of Human Services settled a class-action lawsuit filed against its foster care system by a child advocacy group. As a result of this settlement DHS created, and in 2013 implemented, the Oklahoma Pinnacle Plan which was a detailed plan to improve the foster care system. Funding for the improvements over the past six fiscal years includes more than $119.4 million earmarked appropriations plus more than $170.3 million DHS has redirected internally to Child Welfare Services. Since 2012, progress and achievements to date include:

- DHS has added more than 840 new case workers and supervisors to the child welfare workforce, with workers being paid, on average, 33 percent more due to funding for raises. This has resulted in lower caseloads and less turnover of frontline workers.

- More than 11,500 children have been adopted from the foster care system and more than 15,000 have been successfully reunited with their families.

- DHS and its contract partners have recruited and approved more than 4,200 new foster families, the highest increase in foster homes of any state in the nation.

- The use of emergency children’s shelters has been significantly reduced statewide by 63 percent since the Pinnacle Plan was implemented, and shelter use completely eliminated for children birth through one year of age since SFY 2016. DHS has closed both of its state-run shelters and partners with locally-run Youth Services shelters, when needed.

- DHS has invested in more home-based services to keep many children safe with their families and avoid removals. These same services help families with children in care to be reunited much faster. These efforts, along with adoptions, have reduced the overall number of children in state custody from a high of 11,298 in October 2014 to 8,434 children at the end of SFY 2018.

- DHS has increased public-private partnerships to fund and support services the agency could not offer on its own or with limited state appropriations.
CWS Recap (since 2012)

More Than $119.4 Million earmarked appropriations for CWS improvements

More Than $170.3 Million internally redirected to CWS

More Than 840 New case workers and supervisors added to workforce

More Than 11,500 Children adopted from the foster care system

More Than 15,000 Children successfully reunited with their families

More Than 4,200 New foster families

95% Answer rate at the Child Abuse and Neglect hotline in the last year

7% Decrease in children in Out-of-home care in the last year
Results for SFY 2018

The experiences of Oklahoma children suffering from abuse or neglect are very different today thanks to the success of these reforms:

• Children are more likely to be able to safely remain in their own homes while their families get the help they need.
• Children first entering foster care are more likely to be placed with a family rather than in an emergency shelter.
• Children entering foster care are more likely to be placed with their own families or with someone they know.
• Children are less likely to experience multiple moves while in care.
• Children are less likely to age out of foster care without legal permanency like adoption or guardianship.
• After reunification with their families, children are less likely to re-enter foster care.

92%

Children in DHS custody placed with families
7,894 Oklahomans
The mission of Developmental Disabilities Services (DDS) is to enable persons with intellectual and developmental disabilities to lead healthy, independent and productive lives to the fullest extent possible; to promote the full exercise of their rights as citizens of their communities, state and country; and to promote the integrity and well-being of their families.

DDS offers a wide array of community services for individuals with developmental disabilities and their families. Services are individualized to meet each person’s needs. The service system is dependent upon contractual relationships with more than 100 community service agencies around the state that provide the direct care and employment services to the individuals served.

Programs administered by DDS are:

- Medicaid Home and Community-based waiver services
- Family Support Assistance Payments
- State-funded group homes, employment, assisted living and guardianship services

with developmental disabilities were helped by DDS.
Waiver Programs

Medicaid Home and Community-based (HCBS) waiver programs represent the majority of the services administered. DDS manages four HCBS waiver programs: In-Home Support waiver (adults and children); the Community waiver; and, the Homeward Bound waiver. HCBS programs allow Oklahoma to capture a high federal dollar match for state dollars appropriated through Federal Medical Assistance Percentages (FMAP). Because HCBS programs are expanded Medicaid services, recipients must also be Medicaid (SoonerCare) eligible.

At the end of SFY 2018, the state legislature appropriated funding to initiate a respite waiver for caregivers of persons with intellectual disabilities who qualify for Medicaid and meet the Intermediate Care Facilities for individuals with Intellectual Disability (ICF/ID) level of care. This respite program will be used to support caregivers who are on the waiting list for HCBS. Funding was also appropriated to create a new HCBS program for children with intellectual disabilities in state custody. In SFY 2019, DDS will apply for both of these new Medicaid waivers with the Centers for Medicaid and Medicare Services (CMS) to maximize funding for these programs.

Individuals receiving HCBS live in their own homes, family homes, shared living homes or group homes. Waiver services were provided by 668 different providers including residential and vocational service agencies, nurses, dentists, occupational therapists, physical therapists, speech therapists, psychologists, durable medical equipment suppliers and pharmacies.

### Persons Receiving HCBS Waiver Services

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>5,560</td>
</tr>
<tr>
<td>2017</td>
<td></td>
</tr>
<tr>
<td>2018</td>
<td></td>
</tr>
</tbody>
</table>
The average individual cost of serving an adult receiving in-home services is 36 percent of the annual cost of private Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/ID).

- 56% of individuals receiving HCBS are in a residential setting.

They may also receive one or more of the following services:

- 3% of individuals receive **Nursing services**
- 35% of individuals receive **Assistive Technology services**
- 56% of individuals receive **Employment Services**
- 74% of individuals receive **Transportation Services**
- 74% of individuals receive **Habilitation Training Specialists Services**

5,239 Received HCBS Waiver Services

56% Individuals live in a residential setting
DDS maintains a waiting list for HCBS. At the end of SFY 2018, $2 million was appropriated for DDS to serve individuals who have been waiting the longest for home and community-based services. This was the largest appropriation DHS had ever received to serve individuals on the list. In SFY 2019, DDS estimates being able to begin serving approximately 200 people who have been waiting for services.

Governor Mary Fallin issued Executive Order 2015-17 which provided guidance to DHS to pursue the viability of prioritizing the DDS waiting list based on need. DDS continues to work with the University of Oklahoma to gather research from other states that have implemented policy changes of this sort. In the fall of SFY 2019, DHS plans to engage with stakeholders, advocates, self-advocates and families in their communities for input on how the agency should design a community-based needs assessment for DDS waiting list members.

### Persons Waiting For HCBS Services

<table>
<thead>
<tr>
<th>Year</th>
<th>Persons Waiting</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>6,980</td>
</tr>
<tr>
<td>2015</td>
<td>7,137</td>
</tr>
<tr>
<td>2016</td>
<td>7,405</td>
</tr>
<tr>
<td>2017</td>
<td>7,560</td>
</tr>
<tr>
<td>2018</td>
<td>7,673</td>
</tr>
</tbody>
</table>
People on the waiting list are eligible for and often receive services from other programs while they are waiting.

What we know about those who are waiting for Home and Community-based Services:

- At least one individual is served in each of the 77 counties, with 3,358 of the individuals residing in Oklahoma and Tulsa Counties.
- The individuals’ ages ranges from a few months to 80 years of age
- 2,732 of the individuals are under 18
- 772 of the individuals are 19 to 21
- 3,615 of the individuals are 22 to 55
- 7,017 of the individuals reside in their own or family home
- 3,683 of the individuals have been on the waiting list for over 8 years
- 4,738 of the individuals are enrolled in SoonerCare
- 2,243 of the individuals receive SNAP Benefits
- 728 participate in the Family Support Assistance Subsidy program
- 599 of the individuals participate in State-funded services
- 143 of the individuals receive State Plan Personal Care
- 142 of the individuals receive Adult Day Services through Aging Services
State-Funded Services

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

Family Support Assistance

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

Enrollment in the FSAP was suspended with the agency-wide budget reductions in January of 2016. DDS was able to open enrollment again in SFY 2018 and began adding qualified families to the program, serving 1,496 children representing 1,204 families.

Provider Rates

The state legislature appropriated funding in late SFY 2018 for DDS to increase provider rates by a total of seven percent. Beginning July 1, 2018, DDS restored a 2016 rate cut of 3.5 percent and increased rates by an additional 3.5 percent, providing a much needed rate increase for contract providers.
Received HCBS waiver services: 5,239
Receiving HCBS living in a residential setting: 56%
Individuals received state-funded services: 1,110
Children under the age of 18, received Family Support Assistance Payments: 1,496
Increase in provider rates due to state Legislature appropriated funding: 7%
Of adults served by DDS were employed in jobs in their communities - one of the highest percentages in the nation: 66.8%
Office of Client Advocacy

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

Oklahomans with disabilities received OCA’s services.
Protecting Vulnerable Children

The Office of Client Advocacy conducts investigations for children residing outside their own homes other than foster care, including children living in group homes and mental and behavioral health treatment facilities.

1,249 Reports of abuse or neglect of children in residential facilities

375 Investigations conducted

50 Cases with a confirmed victim

Protecting Vulnerable Adults

OCA also investigates allegations of abuse, neglect or exploitation of Hissom Class Members as well as vulnerable adults receiving services from Developmental Disabilities Services (DDS). In SFY 2018, OCA received 1,413 reports (referrals) alleging abuse or neglect of vulnerable adults. Of those referrals, 488 were investigated.

Referrals and investigations may include multiple victims as well as more than one allegation type such as abuse, neglect, exploitation, financial exploitation, sexual abuse, indecent exposure, sexual exploitation or verbal abuse.
Children’s Investigations in Residential Facilities

<table>
<thead>
<tr>
<th>SFY</th>
<th>Referrals Received</th>
<th>Referrals Assigned</th>
<th>Substantiated Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>1,199</td>
<td>371</td>
<td>59</td>
</tr>
<tr>
<td>2015</td>
<td>1,510</td>
<td>515</td>
<td>69</td>
</tr>
<tr>
<td>2016</td>
<td>1,588</td>
<td>465</td>
<td>89</td>
</tr>
<tr>
<td>2017</td>
<td>1,343</td>
<td>413</td>
<td>78</td>
</tr>
<tr>
<td>2018</td>
<td>1,249</td>
<td>375</td>
<td>50</td>
</tr>
</tbody>
</table>

Vulnerable Adult Allegations Investigated by OCA in SFY 2018 (by Client Type)

- Hissom Class Members - 232 (14%)
- DDS Facilities - 56 (3%)
- DDS Community - 1,394 (82%)
- DDS Group Homes - 20 (1%)

Allegations Investigated by OCA in SFY 2018 (by Allegation Type)

- Abuse - 162 (52%)
- Abuse with injury - 37 (7%)
- Financial Exploitation - 262 (15%)
- Financial Neglect - 47 (3%)
- Neglect - 881 (11%)
- Neglect with Injury - 112 (2%)
- Verbal Abuse - 190 (9%)
Specialized Investigations Unit

In SFY 2018 a total of 14 cases were referred to the Specialized Investigations Unit. Of these, seven were regarding foster parent retaliation, harassment or discrimination. Five foster parent retaliation cases were completed during the SFY. Five investigations resulted in no confirmed findings, while zero investigations were confirmed. When an investigation results in a confirmed finding against an agency employee, the agency is mandated by statute to promptly initiate a plan of corrective discipline which could include dismissal of the employee.

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

Advocacy Services

OCA advocates act as a member of the client’s interdisciplinary support team and assist with resolving issues relating to services, quality of life and care. In SFY 2018, Advocacy Services were provided to 1,189 clients. We identified 2,163 issues with service delivery, successfully resolving 99 percent through informal problem resolution. Over ninety-five percent of these issues were resolved in 30 days or less or had extenuating circumstances to justify a longer timeframe.

OCA offers special advocacy to assist individuals eligible for or receiving services from DDS with resolving issues related to services they currently have or may need to obtain. OCA provided special advocacy services to 299 individuals in SFY 2018. 238 of these were new referrals.

OCA also received 55 referrals for special advocacy for children in state custody. This is an 80% increase from the previous fiscal year. OCA provides special advocacy services to any child
with special needs who may be eligible for DDS services. We assist with resolving issues related to services and supports and Individual Education Plans.

The OCA financial consulting unit received 33 referrals to audit client personal funds, which resulted in the reimbursement of $18,397 to clients whose funds had been misused, mismanaged or exploited.

335
People receiving services from OCA Advocacy Services and DDS

$18,397
Mismanaged or exploited client funds recovered and returned to clients

Grievance Program

The Grievance Program provides a process for children in DHS custody and DDS service recipients to voice complaints and seek timely resolution of their concerns.

OK Foster Parent Voices is a grievance and complaint process available for foster parents established through legislation in 2014. The program is in partnership with the Oklahoma Commission on Children and Youth, housed in OCA, and overseen by the Foster Care Ombudsman. In SFY 2018, 238 complaints were filed by foster parents with the majority being resolved at the lowest level of informal problem resolution.
The OCA program review serves as a formal appeal and quality assurance (QA) process for investigative findings. On May 1, 2016, OCA implemented a protocol for the review of all substantiated cases regardless of whether the Person Responsible for the Care of the Child of Interest (PRFCI) appealed the findings or not. Prior to this time, only cases in which the PRFCI requested a formal appeal were reviewed. This enhanced practice was implemented to ensure a more robust quality assurance process for the investigative division. In SFY 2018, the program review committee conducted 114 reviews; 55 of which were through the formal appeal process and 59 QA program reviews. The committee upheld 106 cases resulting in a 7 percent overturn rate as 93 percent of the cases were upheld.

OCA continued to ensure the immediate safety of children and vulnerable adults through timely initiation of investigations and immediate protective action plans when warranted. OCA previously reviewed all grievances filed by children in DHS custody living in group treatment facilities to identify potential issues, trends or unreported abuse/neglect. OCA continues to obtain these documents and track statistical data, but has been unable to continue the process of examining individual grievances due to decreased staffing and other duties within the division. The advocacy program is at minimum capacity and now must scrutinize all requests for special advocacy.
13% Of findings for juvenile cases were substantiated

87% Of findings for juvenile cases were unsubstantiated

1,249 Reports of abuse or neglect of children in residential facilities

375 Investigations conducted

43% Of findings for vulnerable adult cases were substantiated

57% Of findings for vulnerable adult cases were unsubstantiated

1,413 Reports of abuse, neglect or exploitation of vulnerable adults

488 Resulting investigations
335
People receiving services from OCA Advocacy Services and DDS

$18,397
Mismanaged or exploited client funds recovered and returned to clients
Office of Inspector General

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

OIG conducted over 68,000 background checks.
Internal Audit Unit

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

$435,401 Saved through internal audits
$145,633 Child care overpayments recouped

Ensuring Accuracy

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

Information Security

The Information Security Unit investigates incidents related to DHS information and technological devices that store information and assists with audits to help DHS comply with state and federal requirements for information security. The unit continues to develop a more comprehensive information security awareness program for DHS and updates information security policy to address changing technology uses.
Investigating Fraud

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

The investigations unit completed 1,535 investigations. more than 600 investigations identified $2,611,024.54 in combined public assistance, SNAP and Medicaid overpayments.

Of the 606 completed investigations resulting in program overpayments, 443 individuals were disqualified from SNAP due to fraud. These disqualifications led to additional SNAP program savings of $1,095,360.

23 individuals were successfully prosecuted in criminal court.

1,535  Investigations conducted

443  People disqualified from SNAP for fraud

$2,611,024.54  Overpayments identified

$1,095,360  SNAP program savings due to fraud disqualification
The Office of Background Investigations (OBI) conducts over 68,000 background checks annually for licensed child care providers, child welfare resources and families and all DHS employees. The unit continues to update policy to reflect new state and federal laws and regulations aimed at enhancing the frequency and thoroughness of background checks.
Continuous Improvement

The Oklahoma Department of Human Services focuses on efficiency and cost-saving measures to deliver the best services possible with the resources available. Since 2005, DHS has used Lean and Six Sigma methodologies to support the initiatives that improve services to Oklahomans. These prior improvement efforts enabled DHS to continue to meet customer needs through the financial challenges of the past few years.

The agency is proud of the improvements and savings, but the cycle of continuous improvement never ends in the commitment to excellence. DHS realizes it must be at the forefront of addressing the constantly changing environment, as Oklahomans desire and deserve the highest level of services. Over the last two years, DHS has been involved in projects and initiatives that have realized hard and soft cost savings.

The DHS Improvement Pipeline received more than 100
submissions from staff.
Among the many improvement projects and initiatives, a few stand out:

A project completed in 2017 reduced the number of hours required to process care and treatment reimbursements from over 40 hours each month to less than 8 hours. Analysis revealed calculation errors for the reimbursements were so common that the unit processing the reimbursements had to double check each one. The team implemented an error-proof calculation methodology to reduce the errors from about ten percent to zero. The reduced processing time resulted in more than 32 redirected work hours each month, helping the unit maintain efficiency despite a reduction in staff.

Through an ongoing project with DHS Financial Services, the agency works to reduce reimbursement spending on personal vehicle mileage. This project is focused on three main goals: increasing staff knowledge, standardizing fleet reservations and increasing accountability. DHS reimbursement of personal vehicle mileage has reduced steadily for the last three state fiscal years. Personal vehicle reimbursement has declined from $8,655,005 in SFY 2015 to $5,767,662 in SFY 2017, a reduction of $2,887,343.

Through a project with Fleet Management related to employee travel reimbursements, DHS identified high mileage drivers of personal vehicles, as well as under-used fleet vehicles. DHS saved $86,239 per year in travel costs by reassigning under-used fleet vehicles to areas of highest personal vehicle use.

The DHS Child Welfare Services Post Adoption Unit reduced a two-year backlog of cases with process improvement and the reallocation of equipment to support the digital archival of finalized adoption cases. The efficiencies from the project created a workflow that is 23 times faster than the original digital archival process, allowing the Post Adoption Unit to focus more time on meeting the needs of adoptive families and children.

A project within DHS Adult and Family Services (AFS) developed a new standardized SNAP application process. Centered on meeting the needs of the customer, it eliminates unnecessary steps to determine eligibility as quickly as possible, preferably during the first contact. To date, AFS has begun implementation in ten counties. Counties that have fully implemented the new process reduced the amount of time to determine benefits by an average of eight days, getting benefits much more quickly into the hands of those who need them.
In DHS Developmental Disabilities Services (DDS), nursing staff experienced increasing caseload sizes that challenged their ability to maintain a high quality of work. After examining the problem using Lean Six Sigma methodology, DDS identified the Health Review Process as the nurses’ most time-consuming task. DDS revised the process to take about 50 percent less time to complete compared to the prior process. DDS also found the new process provides “real time” monitoring of DDS service recipients’ health, allowing DDS nurses to make important recommendations immediately instead of waiting until the end of the plan-of-care year. Using the time saved, DDS nurses are now be able to more readily respond to the immediate needs of service recipients and case managers.

Another project focused on the safety and quality of care while children in custody were placed at Laura Dester Children’s Center. The project achieved a 42 percent decrease in incident reporting errors and a 20 percent decrease in unnecessary steps during the shift change process. Process improvements simultaneously increased quality, timeliness and standardization of information shared to best meet the child’s needs. The lessons learned from this successful effort are expected to find applications throughout Child Welfare Services.

The Improvement Pipeline is an ongoing continuous improvement initiative that allows staff to communicate improvement ideas, issues, pain points and potential solutions to agency leadership. In SFY 2018, DHS received more than 100 submissions from staff. Some of the submissions within the last year have resulted in new continuous improvement projects including:

- Increase the ability of Child Welfare Specialists to support foster families to improve retention and recruitment efforts
- Improve DHS mail handling to reduce mail costs and rework
- Develop processes and tools to help Child Welfare Specialists collect information in a way that decreases repetitive work and time required for postadoptive processes
- Improve the performance review process to use remote meeting technologies, when appropriate, to save travel time and related costs
Holding ourselves accountable

DHS continues to improve operational efficiencies to meet the needs of Oklahomans. There is an increasing number of individuals receiving services with fewer DHS employees. This is accomplished through staff training, automating processes and identifying process improvements. The aim is to improve timely and accurate delivery of services at the lowest cost. State and federal monies fund DHS programs. State funds are used to meet federal matching requirements, maintain programs and services and fund programs that have limited or no federal funding.

<table>
<thead>
<tr>
<th>Division</th>
<th>SFY 2018</th>
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<tbody>
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<td>Adult Protective Services</td>
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<td>Child Care Services</td>
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<td>Developmental Disabilities Services</td>
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<td>Office of Client Advocacy</td>
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<td>Office of Inspector General</td>
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<tr>
<td>Program Support</td>
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Total - 5,808

Total does not include vacancies, part-time or temporary employees.
DHS Budget (Dollars in Billions)

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DHS Expenditures

- Adult and Family Services - $1,172,064,312
- Adult Protective Services - $8,553,583
- Aging Services - $114,441,062
- Child Care Services - $14,830,216
- Child Support Services - $46,087,283
- Child Welfare Services - $459,862,050
- Developmental Disability Services - $194,934,522
- Program Support - $113,638,636
- Other (Commodities and Construction) - $85,378,673

(Numbers have been rounded to whole dollars.)
Design & Layout

Caroline Miller is a master-level photographer who has captured agency-related images for over a decade. Caroline helps visually communicate real-life stories of the Oklahomans we serve. For this report, she provided bright, eye-catching photos that perfectly represent our programs, clients, and a hopeful future.

Tammy Rogers is an artist, graphic designer and supervisor of DHS Design & Photography Services. She has worked for the agency for 15 years and develops smart, creative, high-quality materials that skillfully communicate messages for the agency. For this report, Tammy designed the layout and added elements from other contributors throughout.

Data & Statistics

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

Printing & Production

Monica Rouner oversees DHS Print Services and has been with the agency for 17 years. The Print Shop, which includes Billy Cox, Jeff Dees, Buck Easterly, Ray Robinson and Robert Simmons helps produce high-quality print media, including this annual report.
Writing & Editing

Debra Martin has served as a communications manager for DHS since 2011. For this report, she wrote and edited information for Adult and Family Services, Adult Protective Services, Child Care Services, the Office of Client Advocacy and the Office of Inspector General. She also produced video stories about the SNAP in Schools pilot project and the TANF Employment and Training program.

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

Jeff Wagner has worked as a DHS communications professional for more than a decade, serving as a voice for important agency programs and services. His contribution to this report includes content for Aging Services, Child Support Services, and Continuous Improvement, as well as special video features on the ADvantage waiver program and child support.

Casey White has been with the agency for 16 years, and is a communications manager focusing on Child Welfare Services and social media. Casey is grateful for the opportunity to share stories of both our amazing staff and those we serve. For this report, she worked with Child Welfare Services on their section, as well as the written and video feature about John, a single father of seven whose positive attitude, hard work and support from others helped him reunify with his children earlier this year.
ONE Human Services
HUNDRED PERCENT