



Connecticut Department of Social Services

Annual Report

Fiscal Year 2005-2006

Patricia A. Wilson-Coker, JD, MSW





CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

State Fiscal Year 2006

(July 2005-June 2006)

PATRICIA A. WILSON-COKER, J.D., M.S.W., *Commissioner*

Michael P. Starkowski, *Deputy Commissioner, Administration*

Claudette J. Beaulieu, *Deputy Commissioner, Programs*

Established - 1993

Statutory Authority - Title 17b

Central Office - 25 Sigourney Street, Hartford, CT 06106

Number of Employees – 1,877

Operating Expenses - \$186,310,535

Program Expenses - \$3,995,582,870

Structure - Commissioner's Office, Regional Administration, Administrative Operations, Program Operations

Mission

The Department of Social Services provides a continuum of core services to meet the basic needs of food, shelter, economic support, and health care; to promote and support the choice to live with dignity in one's own home and community; and to promote and support the achievement of economic viability in the workforce. The Department gains strength from a diverse environment to promote equal access to all agency programs and services.

Statutory Responsibility

The Department of Social Services is designated as the state agency for the administration of 1.) the Child Care Development Block Grant, pursuant to the Child Care and Development Block Grant Act of 1990; 2.) the Connecticut Energy Assistance Program, pursuant to the Low Income Home Energy Assistance Act of 1981; 3.) programs for the elderly, pursuant to the Older Americans Act; 4.) the state plan for Vocational Rehabilitation Services; 5.) the Refugee Assistance Program, pursuant to the Refugee Act of 1980; 6.) the Legalization Impact Assistance Grant Program, pursuant to the Immigration Reform and Control Act of 1986; 7.) the Temporary

Assistance for Needy Families program, pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996; 8.) the Medicaid program, pursuant to Title XIX of the Social Security Act; 9.) the Food Stamp program, pursuant to the Food Stamp Act of 1977; 10.) the State Supplement to the Supplemental Security Income Program, pursuant to the Social Security Act; 11.) the state Child Support Enforcement Plan, pursuant to Title IV-D of the Social Security Act; 12.) the state Social Services Plan for the implementation of the Social Services and Community Services Block Grants, pursuant to the Social Security Act; 13.) the Section 8 existing certificate program and the housing voucher program, pursuant to the Housing Act of 1937; 14.) the state plan for Title XXI; and 15.) Disability Determination Services.

Significant Accomplishments/Highlights of SFY 2006:

- As part of an interagency collaboration responsible for implementation of the Pilots Supportive Housing Initiative, the State of Connecticut was selected as one of seven national winners of the 2006 Innovations in Government Awards presented by Harvard University's Ash Institute For Democratic Governance and Innovation.
- On November 1, 2005, the ct.gov/dss Portal was deployed. This streamlined and consistent web content management system has allowed citizens and business partners an easier to use and more accommodating tool for access to information on DSS services. Visits to ct.gov/dss increased 10 percent between July 2005 and July 2006. Over 175 thousand unique visitors visited the website in the last two quarters of SFY 2006, while over 350 thousand visits were recorded and over 1.5 million pages viewed during that same period.
- The bureau's **Disability Determination Unit** processed applications for Social Security Disability Insurance and Supplemental Security Income on behalf of 30,452 clients. As it has for the past ten years, this unit again ranked as one of the top disability determination units in the nation, based on productivity and effectiveness and superior public service. The DDS successfully completed implementation of an electronic disability claims folder, which is resulting in more efficient claims processing for CT residents. The DDS also implemented Social Security's Disability Service Improvement (DSI). The DDS along with five other states in SSA's Boston Region will assist SSA in refining DSI processes and procedures before this service improvement initiative is expanded nationwide over the next five years. In April 2006 this unit received a Social Security Commissioner's Citation for demonstrating superior leadership, initiative, and professionalism and for excellence in performance and service to the disabled citizens of Connecticut.
- Through the Older Americans Act Program for SFY 2006, services were provided to 135,334 elders and their caregivers; including meal service both at-home and in group settings; providing trips for doctors appointments, shopping and recreation; homemaker services and adult day care hours for personal care.

- Total child support collections for SFY 2006 were \$290.9 million, an increase of \$6.8 million over SFY 2005. This figure includes \$194.2 million that was collected and sent to families not receiving public assistance; \$1.9 million of current support that was sent through to families receiving assistance; and \$44.1 million retained by the state for repayment of assistance benefits.
- Recognized by the United States Department of Agriculture for achieving a Food Stamp payment error rate of 6.61% for FFY 2005.
- The Food Stamp Outreach program established pilot programs with faith based organizations in the Waterbury and Manchester areas to provide community information regarding the Food Stamp Program

Public contact points

Websites:

- DSS general: www.ct.gov/dss
- ConnPACE: www.connpace.com
- HUSKY Plan: www.huskyhealth.com
- Fatherhood Initiative of Connecticut: www.fatherhoodinitiative.state.ct.us
- Aging Services: www.ct.gov/agingservices
- Bureau of Rehabilitation Services: www.brs.state.ct.us
- Child Care Services (including Care4Kids): www.ct.gov/dss, keyword “Care4Kids”
- Child Support Enforcement: www.ct.gov/dss and follow the link for “Families with Children”
- Long-Term Care Ombudsman: www.ltcop.state.ct.us
- Human Services Infrastructure Initiative: www.ct.gov/dss, keyword “HSI”

Toll-free information:

- General public information: 1-800-842-1508
- HUSKY healthcare: 1-877-CT-HUSKY
- ConnPACE: 1-800-423-5026
- Child support enforcement: 1-888-233-7223
- Child care services: 2-1-1 or 1-800-811-6141
- Care4Kids child care subsidy program: 1-888-214-5437
- Aging services: 1-866-218-6631
- Connecticut Home Care Program for Elders: 1-800-445-5394
- Bureau of Rehabilitation Services: 1-800-537-2549 (TTY: 860-424-4839)
- Connect-to-Work Center for people with disabilities: 1-800-773-4636 (TTY: 860-424-4839)
- Winter heating assistance: 2-1-1 Infoline or 1-800-842-1132
- Fraud and recoveries (including lien matters): 1-800-842-2155

- Long-Term Care Ombudsman: 1-866-388-1888
- 2-1-1 INFOLINE: dial 2-1-1, 24-hours-a-day, seven-days-a week. Information and referral, crisis intervention services. Operated by United Way of Connecticut with DSS funding.
- CHOICES: 1-800-994-9422

General TDD/TTY for persons with hearing impairment: 1-800-842-4524

DSS Regional Offices:

Northern Region

- **Hartford**—3580 Main Street 06120; 860-723-1000, or 1-800-566-2244. TDD/TTY: 860-566-7913. Silvana M. Flattery, Regional Administrator
- **Manchester**—699 East Middle Turnpike 06040; 860-647-1441, or 1-800-859-6646. TDD/TTY: 860-647-5821. Kenneth Derrick, Social Services Operations Manager
- **New Britain**—270 Lafayette Street 06053; 860-612-3400, or 1-866-723-2591. TDD/TTY: 860-827-7151. Michele Farieri, Social Services Operations Manager
- **Willimantic**—676 Main Street 06226; 860-465-3500, or 1-866-327-7700. Linda Roache, Social Services Operations Manager

Western Region

- **Bridgeport**—925 Housatonic Avenue 06604; 203-551-2700, or 1-877-551-2700. TDD/TTY: 203-579-6821. Frances Freer, Regional Administrator
- **Stamford**—1642 Bedford Street 06905; 203-251-9300, or 1-866-663-9300. TDD/TTY: 203-251-9304. Evelyn Balamaci, Social Services Operations Manager
- **Waterbury**—249 Thomaston Avenue 06702; 203-597-4000, or 1-866-454-1108. TDD/TTY: 203-597-4175. Bonnie Wilkes, Marva Perrin, Social Services Operations Managers
- **Danbury**—342 Main Street 06810; 203-207-8900. TDD/TTY: 203-797-4032. John Souchuns, Social Services Operations Manager
- **Torrington**—62 Commercial Boulevard 06790; 860-496-9600, or 1-800-742-6906. TDD/TTY: 860-482-5719. John Souchuns, Interim Social Services Operations Manager

Southern Region

- **New Haven**—194 Bassett Street 06511; 203-974-8000. TDD/TTY: 203-974-8394. Ronald Roberts, Regional Administrator
- **Middletown**—117 Main Street Extension 06457; 860-704-3100. TDD/TTY: 860-704-3054. Lourdes Hunt, Social Services Operations Manager
- **Norwich**—401 West Thames Street 06360; 860-823-5000. TDD/TTY: 860-892-1429. Cheryl Parsons, Social Services Operations Manager

- **Services provided by DSS Regional Offices** include Temporary Family Assistance; Food Stamps; Medical Assistance (HUSKY Plan for children, eligible parents/caregivers, pregnant women; and Medicaid for elders, people with disabilities); Medicare premium affordability assistance; State-Administered General Assistance; State Supplement Program; Social Work Services; Child Support Enforcement Services; Rehabilitation Services; Housing Assistance.

- **For DSS Bureau of Rehabilitation Offices**, *see page 21*

News media contact point:

- Matthew Barrett, 860-424-5012; matthew.barrett@po.state.ct.us.

Legislative relations contact point:

- Matthew Barrett, 860-424-5012; matthew.barrett@po.state.ct.us.

Freedom of Information Act document request contact point:

- Email to matthew.barrett@po.state.ct.us. Written requests to Freedom of Information Act Officer, Public and Government Relations Office, 25 Sigourney Street, Hartford, CT 06106

Department Chief of Staff and Directors:

Chief of Staff: Astread Ferron-Poole; Public and Government Relations Director: Matthew Barrett; Affirmative Action Director: Irene Mason; Human Resources Director: Rudolph Jones; Legal Affairs, Regulations, Administrative Hearings Director: Brenda Parella; Strategic Planning Manager: Anthony Judkins; Medical Care Administration Director: David Parrella; Certificate-of-Need and Rate-Setting Director: Gary Richter; Medical Administration Operations Director: Marcia Mains; Medical Administration Managed Care Director: Rose Ciarcia; Medical Policy and Behavioral Health Director: Mark Schaefer, PhD; Bureau of Aging, Community and Social Work Services Director: Pamela Giannini; Child Support Director: Diane Fray; Assistance Unit Director: Kevin Loveland; Bureau of Assistance Programs Director: Brenda Moore; Contracts Administration Director: Kathleen Brennan; Information Technology Services Director: Alex Tucciarone; Quality Assurance Director: James Wietrak; Administrative Services Director: Dennis Barry; Fiscal Analysis Director: Lee Voghel; Long-Term Care Ombudsman: Nancy Schaffer; Organizational and Skill Development Director: Darleen Klase

Public Service Information for SFY 2006

Regional Office Highlights

Northern Region

The Northern region is comprised of one regional office with three sub-offices, serving fifty-nine towns with a total of 93,325 unduplicated active assistance units. The Northern region is the largest of the three regions, serving approximately 35% of the statewide active assistance unit caseload.

The regional offices provide direct service to eligible clients in the areas of Food Stamps, Temporary Financial Assistance (TFA), State Supplement, Medical, OMB, SLMB, and SAGA cash and medical assistance. In addition, the regional office provides onsite Child Support Services, Social Work Services, as well as Client Fraud and Resources Services.

Additionally, the Northern region has continued its cooperative relationships with services providers in the areas of employment services, HUSKY services and services to single adults, by developing ways of improving service delivery to better the lives of the citizenry of the Northern Region.

Regional Processing Units (RPU)

This is a centralized unit in the New Britain sub-office that handles all presumptive eligibility for HUSKY as well as, expedited eligibility for pregnant women cases for the entire Northern region. In this manner the Northern region can bring forth and emphasize an expedited service delivery for this critical medical eligibility piece and reduce gaps in client medical coverage.

Hurricane Katrina

During the most critical time of resettlement for Katrina evacuees, the State of Connecticut did its part in preparing to receive and accept our unfortunate neighbors to the south, who endured the danger, stress and strain of losing everything to Hurricane Katrina. The Department of Social Services led the facilitation of services to Hurricane Katrina evacuees. The Northern Region, along with the other regions, ensured that evacuees were treated with respect and quickly serviced to help them re-settle after such devastation.

Medicare Part D

With the onset of Medicare D, the Northern region was fully engaged in helping to provide the most accurate and up to date information to help enroll the thousands of Connecticut residents eligible for this new prescription drug coverage. Numerous strategic meetings were held and many public forums put in place to move this enormous re-programming effort forward in an

effort to enable all those eligible toward understanding the complicated and important details of this enrollment.

Outstationed Workers for Acute Care and Long Term Care Facilities

The Northern region continues its collaboration with area hospitals. In addition, this year we have expanded this service by the development of outstationed workers in long-term care facilities in the Northern region. In this way we are able to deliver the health care services needed both in the acute care and long-term care setting. Bringing health care coverage to our more vulnerable neighbors in a quick, comprehensive manner greatly assists in expeditiously determining eligibility for these critical services.

End Hunger!

Staff continues to assist in outreach to households in the Northern region with respect to participation in the Agency's food stamp program. Working cooperatively with the End Hunger! CT Coalition, outreach activities have centered on benefit processing, service providers, training and public awareness campaigns.

Southern Region

Service Delivery

The Southern Region is currently comprised of one regional office with two sub-offices staffed by three hundred staff. The three Southern Region offices are responsible for providing eligibility determinations and social services benefits to families and individuals in 55 cities and towns in the Southern Region. DSS staff are located in offices in New Haven, Middletown and Norwich and out-stationed at Yale New Haven Hospital, St. Raphael's and Connecticut Valley Hospital in Middletown. Staff process applications and redetermine eligibility for food stamps, Temporary Financial Assistance (TFA), Husky, Medicaid, State Supplement, Long Term Care and SAGA Cash and Medical. In addition, the regional offices provide Child Support Services, Social Work Services, as well as Client Fraud and Resources Services. The Southern region is the smallest of the 3 regions serving approx. 31% of the agency's active caseload. It maintains 81,815 unduplicated assistance units equaling 139,093 active recipients.

DSS Rx-Xpress

The Xpress bus, a mobile resource that helps seniors with Medicare RX, is also the first to be staffed with Southern Region DSS staff to provide access to programs and applications. From November 2005 to May 2006, 18 events were scheduled and 14 towns were visited in the Southern Region.

CT Works Partners

Southern Region DSS staff from the TFA units meet monthly with their CT Works partners to coordinate all employment service activities for 4,862 time-limited TFA clients including referrals to orientations and sanctioning of noncompliant clients.

Housing Authority Income Verification Pilot

HANH seeks information/verification from DSS regarding the amount of benefits it provides to individuals who are applying or receiving housing assistance from the Housing Authority. To expedite the income verification process, DSS and HANH have signed a MOA, which stipulates that HANH will provide to DSS a current electronic list of Section 8 and Public Housing applicants and participants that have been identified as receiving TANF, State Supplement, SAGA cash or food stamp benefits. DSS will use the list to compare to their database and then provide HANH with verification of benefits. This process is being piloted in the New Haven regional offices and will cut down on the number of phone calls and budget letter requests, thus increasing efficiency in overall service to clients.

Regional Processing Unit

To increase access to Husky and improve the timeliness of processing applications for Pregnant Women, The first state-wide operational Regional Processing Unit was established in the Middletown regional office January 2006. After reviewing applications for eligibility, qualified medical entities in the community accept applications and grant temporary Medicaid assistance to children. The applications are faxed to the Regional Processing Unit for continued medical coverage.

Housing Resources Forum

A Housing Resources Forum, designed to educate case managers, social workers and program administrators about housing programs and resources in New Haven, was held on June 16, 2006 at City Hall. The goals of this forum were to increase knowledge of housing services and/or resources, to increase access to these programs and to help staff work more effectively with clients to locate housing. The program included information on DSS and New Haven Housing Authority's Section 8 programs including waiting lists, eligibility and the lease up process. The program also included information on the Transitional Rental Assistance Program, Security Deposit Guarantee Program and Supportive Housing Programs. In addition to presenting information, DSS staff worked with the Housing Authority and other housing providers to plan and organize this Housing Forum. A Housing Resources Guide was updated and distributed to all DSS staff in the New Haven office.

Collaboration with Head Start

DSS works with the local Head Start programs in New Haven to recruit TFA clients with children 0-5 years old. To increase enrollment in Head Start, DSS has done the following:

- Distributed flyers in reception area
- Hosted recruiters from Head Start in reception area
- Sent e-mails to staff informing them of openings
- Mailed flyers to all TFA families with children 0-5
- Sponsored a training on the McKinney-Vento Homeless Assistance Act

In an effort to get more homeless children into Head Start, DSS staff are working with staff from Head Start, the emergency shelters, the City of New Haven, the School Readiness Council and the New Haven Diaper Bank to identify and enroll children.

Food Stamp Outreach

The Southern Region of DSS supports food stamp outreach activities in the Southern Region through collaborative efforts with Connecticut Association for Human Services (CAHS) and End Hunger Connecticut inclusive of out-stationing of the organizations Outreach staff in the reception areas of Southern Region offices for a couple of hours per week. These outreach staff assist DSS by answering Food Stamp-related questions and providing nutrition information to applicants. In an effort to increase and improve access to the Food Stamp program, DSS regional staff actively participate in quarterly Food Stamp Advisory committees and answer questions about the program.

Farmers Markets and Food Stamps Outreach

DSS, working with the Connecticut Department of Agriculture and the USDA Food & Nutrition Services has increased the number of markets accepting Food Stamps more than threefold. These 16 markets are working hard to get Food Stamps clients to purchase locally grown food.

In an attempt to increase traffic at the markets DSS is sending its mobile office, the Rx-Xpress, to some of the markets. While the primary outreach of the Rx-Xpress Medicare Part D, Food Stamps outreach workers are also available.

Medical Services

The Division of Medical Care Administration and Regional Offices ensure that eligible children, youth, adults, and seniors are able to access needed medical and/or prescription medication coverage through Medicaid, the State Children's Health Insurance Program, the State-Administered General Assistance medical program, ConnPACE, and other programs. Connecticut's HUSKY Plan (Healthcare for Uninsured Youth) combines services under Medicaid and the State Children's Health Insurance Program for eligible children, teenagers, pregnant women, and parents/caregivers. Medicaid fee-for-service coverage is provided to

eligible elders and people with disabilities, while State-Administered General Assistance offers medical coverage to eligible adults.

HUSKY (Healthcare for Uninsured Kids and Youth; www.huskyhealth.com) offers health coverage to Connecticut children and families. The program has two parts, HUSKY A and HUSKY B.

HUSKY A is available to those children up to age 19 and pregnant women with income below 185% of the federal poverty level and children who are adjudicated to the custody of the Department of Children and Families. Parents or relative caregivers are also eligible for HUSKY A if their income is below 150% of the federal poverty level. Families receiving Temporary Family Assistance (cash benefits) are also enrolled in HUSKY A. HUSKY A is a combination of Medicaid and managed care and is free with no cost-sharing requirement from the enrollee.

HUSKY B (or State Children's Health Insurance Program) is available to those children up to age 19 who are uninsured with family income above 185% of the federal poverty level. The state and federal governments subsidize the coverage for children in families with income up to and including 300% of the federal poverty level. Uninsured children in families with higher incomes can access HUSKY B coverage at an unsubsidized group rate. HUSKY B coverage is provided through a managed care delivery system. It requires small co-payments and may also require a monthly premium depending on family size and income.

Both HUSKY A and HUSKY B offer a comprehensive benefits package that includes preventive care, outpatient physician visits, prescription medicines, in-patient hospital and physician services, outpatient surgical facility services, mental health and substance abuse services, short-term rehabilitation, home health care, hospice care, diagnostic x-ray and laboratory services, emergency care, durable medical equipment, eye care, hearing exams, and dental care. HUSKY A also offers additional services such as non-emergency medical transportation and Early and Periodic Screening, Diagnosis and Treatment services for children. Supplemental services are available for eligible children with special physical health care needs who are enrolled in the subsidized portion of HUSKY B (HUSKY Plus).

Once enrolled in HUSKY, families choose a Managed Care Organization (MCO) to coordinate the benefits package. Each MCO offers a network of participating doctors, dentists, hospitals, pharmacies, and other specialty providers that families must use. Mental health and substance abuse services are provided through the CT Behavioral Health Partnership.

The Department has 'carved out' HUSKY behavioral health specialty services during 2006. This carve-out is part of a broader collaboration with the Department of Children and Families under the Connecticut Community KidCare initiative. Under Connecticut Community KidCare, the Departments will jointly contract with an administrative service organization to manage the behavioral health services available under the HUSKY A, HUSKY B and DCF Voluntary Services Programs. The development of this integrated administrative model should markedly improve the state's ability to involve families in policy and planning, serve children in their

homes and communities, reduce unnecessary hospital stays, and manage the program to higher outcome and performance standards.

Connecticut continues to operate one of the largest pre-paid Medicaid managed care programs in the nation, proportionate to the population. There are approximately 286,438 individuals enrolled in HUSKY A. Likewise, there are approximately 16,055 enrollees in HUSKY B. Furthermore, HUSKY has been rated by the Children's Defense Fund as one of the three best programs nationally for eligibility and benefit levels. The HUSKY program has been very successful getting children immunized by age two. Eighty one percent of children in HUSKY A and eighty percent of children in HUSKY B, who turned two in 2004, were up-to-date on their immunizations. The HUSKY A rate is substantially higher than most Medicaid programs in other states.

HUSKY has a toll-free customer hotline (1-877-CT-HUSKY), apply-by-phone option, and informative website (www.huskyhealth.com), augmented by community outreach.

ConnPACE (Connecticut Pharmaceutical Assistance Contract to the Elderly and Disabled; www.connpace.com) helps eligible senior citizens and people with disabilities afford the cost of most prescription medicines. Work began on coordination of ConnPACE benefits with the start of the Medicare Part D prescription drug coverage in January 2006.

The Connecticut AIDS Drug Assistance Program pays for drugs determined by the U.S. Food and Drug Administration to prolong the life of people with AIDS, or HIV infection. To be eligible for the program in Connecticut, an individual must have a physician certification that the individual has HIV infection, HIV disease or AIDS, must not be a recipient of Medicaid, and must have net countable income within 400% of the Federal Poverty Level. In addition, the individual must apply for Medicaid within two weeks of approval for this program.

The Connecticut Insurance Assistance Program for AIDS Patients ct.gov/dss, DSS Search "ciapap" helps persons who are diagnosed with HIV or AIDS to take advantage of a federal law that allows for an extension of employer-provided group health insurance to people who become unemployed. The maximum adjusted income limit for a single person is \$1,552 per month.

Medicaid for the Employed Disabled: ct.gov/dss, DSS Search "medemp" allows people with disabilities to engage in employment without risking eligibility for needed medical services. Approximately 4,200 residents with disabilities receive medical coverage through this program. Individuals may have incomes up to \$75,000 per year. Some participants are charged a premium (10% of their income in excess of 200 percent of the FPL). Liquid assets may not exceed \$10,000 for a single person or \$15,000 for a couple.

State-Administered General Assistance (SAGA) covers most of the services available under Medicaid for single adults who do not qualify for that coverage. Behavioral health services are managed by the Department of Mental Health and Addiction Services. Through the SAGA program, the Department provides cash and/or medical assistance to individuals who are unable

to work for medical or other prescribed reasons, and to families that do not meet the blood-relationship requirements of the Temporary Family Assistance (TFA) program.

Approximately 31,800 clients receive SAGA medical assistance, and approximately 4,200 individuals receive SAGA cash assistance.

Employable individuals are not eligible for SAGA cash assistance. However, employable individuals who abuse substances (drugs and/or alcohol) may be eligible to receive treatment and some financial support through the Department of Mental Health and Addiction Services' (DMHAS) Basic Needs Program.

The Connecticut Home Care Program for Elders (CHCPE; www.ct.gov/dss, click on "Elders" under Programs and Services) is a comprehensive home care program designed to enable older persons at risk of institutionalization to receive the support services they need to remain living at their home.

The CHCPE provides a wide range of home health and non-medical services to persons age 65 and older who are institutionalized or at risk of institutionalization. Available services include adult day health, homemaker, companion, chore, home delivered meals, emergency response systems, care management, home health, assisted living and minor home modification services. The individual must meet the income and asset limits to be eligible for the program.

The program has a three-tiered structure through which individuals can receive home care services in amounts corresponding to their financial eligibility and functional dependence. Two categories within the program are funded primarily with state funds; the third category is funded under a Medicaid waiver.

Prospective clients are referred by community home-health agencies, hospitals and nursing facilities. Interested people can call the program directly at 1-800-445-5394. Individuals who meet both the financial and functional criteria are referred for an independent, comprehensive assessment. This assessment determines the prospective client's needs and whether a plan of care can be developed which will safely and cost-effectively meet those needs in the community.

Medicare Premium Affordability Assistance is available to help eligible residents pay for Medicare coverage. Application is made at DSS regional offices.

ConnTRANS (Connecticut Organ Transplant Fund; www.ct.gov/dss, follow the link for Publications, and scroll down to the Publications list), supported by donations from taxpayers who earmark a part of their state tax refund, helps those who need or have received an organ transplant when their expenses are not covered by another source.

Supporting Regional Offices and the Division of Medical Care Assistance in the delivery of medical services to DSS clients are the Bureau of Assistance Programs, the Bureau of Aging, Community and Social Work Services, and Office of Public and Government Relations.

Services for Families and Children

Jobs First (Temporary Family Assistance)

DSS operates *Jobs First*, Connecticut's welfare reform program, providing **Temporary Family Assistance** (TFA) to families in need of cash assistance. Jobs First has been successful in helping thousands of parents move into the workforce and off welfare rolls. In June 2006, the Department's TFA caseload was 20,160. Jobs First is a time-limited program that emphasizes early case-management intervention and participation in the labor market.

Jobs First establishes a time limit of 21 months for families that contain an adult who is able to work. Extensions beyond 21 months are available if the adult cannot find a job that makes the family financially independent. Able-bodied adults are referred to Jobs First Employment Services (JFES) administered by the Department of Labor (DOL) and regional Workforce Investment Boards for help in finding work. During the 21 months, and during extensions, recipients must cooperate with JFES and make a good-faith effort to find a job and keep working. At the end of the time limit, a family may be eligible for an extension of benefits if they have income less than the payment standard; have made a good-faith effort to find work; or have experienced circumstances beyond their control that kept them from finding work or keeping a job.

In most parts of Connecticut, a single parent with two children and no other income, who does not get a housing subsidy, receives \$543 in monthly TFA cash benefits (also called the payment standard). This amount may vary slightly as the state has three regions that pay different benefit rates based on housing costs. Recipients can also receive special-need benefits, such as emergency housing, or moving and storage expenses. Additionally, the family may receive HUSKY A (Medicaid) and Food Stamps, help in paying for child care, and assistance in obtaining child support payments.

Safety Net services are provided to those families who have exhausted their 21 months of benefits, have an income still below the payment standard, and do not qualify for an extension because of their failure to comply with work requirements. Help with meeting basic needs is available, along with case management and service coordination. The Safety Net program served approximately 158 families as of June 2005.

The **Employment Success Program** provides early intervention, in-depth assessment and intensive case management services to recipients of TFA who are mandatory participants in Employment Services. This program seeks to address client barriers that prevent successful participation in the TFA program.

The **Temporary Rent Subsidy Program (TRSP)** assists low-income families in paying their housing costs. Two groups are targeted: 1.) Recipients of TFA for whom lack of housing stability is a barrier to employment; and 2.) Families who have exhausted their TFA benefits or are no longer eligible for TFA because they have been sanctioned off the program, with the

result that the family is homeless or at risk of homelessness. TRSP helps those in the two target groups afford decent, safe, and sanitary housing in the private market by providing a rent subsidy for up to 12 months, through June 2005. In June 2005, 78 families were approved to participate and received an average subsidy of \$654 per month. Participants find their own housing and are free to choose any private housing that meets the requirements of the program. This program was not funded and ended on June 30, 2006.

The Department of Social Services provides grant funding for the administration of **Transportation To Work (TTW)** programs for TANF/TANF eligible clients. The intent of the funding is to assist TANF/TANF eligible clients to overcome their transportation barrier to employment. Currently, there are 5 DSS contractors administering the TTW program statewide. The Department of Transportation (ConnDOT) is a partner in the TTW program, offering their insight and complementary funding through their Jobs Access Reverse Commute (JARC) program and through funding from the Federal Transportation Administration (FTA).

The **Good News Garage** is a vehicle donation program operated through a contract with Lutheran Social Services of New England. This initiative, supported with TANF high-performance bonus funds and in-kind assistance from the Department of Labor, donates automobiles to Jobs First recipients whose transportation-to-work needs cannot be met by public or other means. This program will provide approximately 200 vehicles to welfare recipients during the term of the contract.

Transitional Rental Assistance (T-RAP) is available for some families if an adult member is employed at the time the family leaves the Temporary Family Assistance Program (TFA) and either (1) has income which exceeds the TFA payment standard or (2) is employed for a minimum of twelve hours per week. There is an income limit of 50% of the state median income level. Rental assistance is available for up to 12 months. Due to limited funding, a lottery system is used to select eligible recipients.

The Food Stamp Program provides monthly benefits to help eligible families and individuals afford food purchases. Benefits are provided electronically, enabling clients to use a debit-type swipe card at food markets. Income- and asset-eligibility guidelines apply. The general income limit is 130% of the federal poverty level. Maximum monthly food benefit examples are \$152 for a single person and \$506 for a four-person household. By 2006 approximately 103,900 Connecticut households (including 78,785 children) were receiving Food Stamp benefits. Application to the Food Stamp Program is made at local DSS offices.

Child Care Services

During SFY 2006, approximately 16,000 income-eligible children participated each month in the **Child Care Assistance Program (Care4Kids)**, while contracts to state-supported child day care centers and school-age programs served another 8,300 children monthly. DSS continued to support the Child Care Facilities Loan Fund, which creates new spaces for children at child care facilities.

Quality Enhancement Grants, at a funding level of \$1.14 million, helped 19 priority school districts develop local quality initiatives that support the communities' family and caregiver needs. Local School Readiness Councils in the designated communities used the funds to serve approximately 2,300 child care providers, including kith and kin, caring for more than 4,000 children in various ways: direct services to children and families, consultation services to child care centers and family providers, training and staff development, mini-grants for minor renovations, instructional materials and equipment, and public education campaigns. DSS continued to fund childcare licensing and inspection staff at the Department of Public Health. DSS also provided funds to the Department of Children and Families and the Department of Public Safety to support child-abuse and criminal-background checks for certain child care providers in the Care 4 Kids Program.

211-Child Care INFOLINE, supported by agency funds and United Way of Connecticut, received over 35,000 telephone calls from parents seeking child care information and referrals to child care centers and homes in their area. The Training Program in Child Development helped nearly 500 caregivers receive training in the Connecticut Charts-A-Course curriculum. Of them 142 achieved the nationally recognized Child Development Associate (CDA) credential. The statewide Accreditation Facilitation Project provided support and technical assistance to almost 200 childcare centers. The Connecticut Charts-a-Course Scholarship Fund provided almost 300 individuals with financial assistance to support their attendance at training seminars for college credits.

The Child Care Apprenticeship program collaboration continued with the Department of Labor, as did the Connecticut Early Childhood DataConnections project. DSS also participates in the State Child Day Care Council, Early Head Start Professional Development Project, Head Start Advisory Council, Head Start Statewide Collaboration Project, Commission on Children, Early Childhood Partners, Early Childhood Alliance, Universal Preschool Advisory Committee and Forums, and the HUSKY Plan.

Summary highlights for childcare services during SFY 2006:

- Close to 85,000 children received subsidized childcare services in Connecticut.
- Approximately 16,000 children and their families received monthly financial assistance from the **Care4Kids** program.
- 7,507 preschool children participated monthly in the **School Readiness Program**.

- 4,321 children, ages 6 weeks to 12 years, participated monthly in the **State-supported Child Care Center Program**.
- 7,359 early caregivers have participated in the statewide training offered through the **Training Program in Child Development**.
- The University of CT Cooperative Extension System, under a contract with the Department, distributed the quarterly newsletter “All Children Considered” to 16,000 readers.

You can learn more about these and other child care activities in the state in the Child Care Annual Report. The report may now be viewed or printed from the DSS website at (www.ct.gov/dss, follow the link for Publications and scroll down to Annual Reports).

Connecticut Head Start Collaboration Office

Established in Connecticut in 1996 through a grant from the US DHHS Head Start Bureau, the purpose of the Head Start State Collaboration Office (HSSCO; Head Start Act of 1998, 42 USC 9801 *et seq.*) is to facilitate coordination of Head Start services in eight priority areas: health care, welfare, child care, education, community services activities, family literacy services, activities related to children with disabilities and services for homeless children. The HSSCO works toward enhancing the capacity of Head Start and other early childhood programs to improve outcomes and opportunities for young children and their families through activities that:

- Assist in building early childhood systems and access to comprehensive services and supports for all low-income children;
- Promote widespread collaboration and partnerships between Head Start and other appropriate programs, services, and initiatives, including child care and state preschool; and
- Facilitate the involvement of Head Start in the development of State policies, plans, processes and decisions affecting the Head Start population and other low-income families.

Significant accomplishments during SFY 2006 include:

- HSSCO and the Child Health and Development Institute of CT co-sponsored the first statewide symposium in the country on multidisciplinary consultation in early care settings that brought national experts together with over 40 state leaders. This completed a multi-year US DHHS supplemental grant to the HSSCO to support the development of early childhood consultation in the state. Proceedings were published in

Developing a Multi-Disciplinary Consultation System for Early Care and Education in Connecticut: A Symposium.

- Through a separate US DHHS supplemental grant for professional development, the CT Head Start Association and the CT Association for Community Action assessed the educational needs of staff in early childhood programs and provided over 200 scholarships for coursework toward completion of degree programs.
- Due to past success in collaborative training with state partners, Connecticut was selected as one of six pilot states for domestic violence training. A state team attended the training-of-trainers in Oklahoma City and returned to provide a 5-day domestic violence training to Head Start family service staff from across the state.
- In collaboration with Healthy Child Care New England, webcast technology was utilized to convene over 100 participants, including state regulators, policy makers, and state nursing boards to discuss the administration of medications in early care settings.
- Concluded efforts under the eight-year federal grant initiative, Healthy Child Care Connecticut, which included completing the review process of the CT Child Day Care Council for revising state child care regulations to better align with *Caring for Our Children National Health and Safety Standards*.
- Efforts continued with national partners to develop awareness of the needs of young children who are experiencing homelessness through data reports and a number of public presentations.

Child Support Enforcement Services

Child support enforcement services are available to all families in Connecticut. Deprivation of a parent's support is the only criterion for eligibility, regardless of a family's income. DSS is the lead agency for child support enforcement activity, working closely with the Judicial Department's Support Enforcement Services Division and the Office of the Attorney General to establish and enforce paternity, financial, and medical orders.

Total child support collections for SFY 2006 were \$290.9 million, an increase of \$6.8 million over SFY 2005. This figure includes \$194.2million that was collected and sent to families not receiving public assistance; \$1.9 million of current support that was sent through to families receiving assistance; and \$44.1 million retained by the state for repayment of assistance benefits. Another \$33.9 million was collected for families not requesting child support services from the state, but whose court-ordered support goes through the state disbursement system; and \$18.7 million was collected and sent to families in other states.

Child support efforts that involve other state and local agencies include: the Paternity Registry and Voluntary Paternity Establishment Outreach program, which works with the Department of

Health and hospitals; employer reporting of all newly-hired employees; the arrears adjustment program which works with the fatherhood sites, and the Partners Executive Council, which includes representatives from all the child support cooperating agencies and works to improve the child support program.

While core functions remain a major focus for the Department's Bureau of Child Support Enforcement (BCSE), a number of initiatives were implemented to improve the quality of customer service, program performance, and service delivery. BCSE continued participation in longstanding collaborative efforts such as Access and Visitation, providing services to never-married couples in Hartford and New Haven; and the Voluntary Paternity Establishment Program, providing services in 29 area hospitals and Madonna Place of Norwich, a Fatherhood Initiative program site.

Legislative, regulatory and procedural changes have encouraged non-custodial parents to become more involved with their children, with a special emphasis on more effective arrears management. Some of the efforts were the following:

- New Child Support Guidelines Regulations focusing especially on low-income obligor issues were implemented effective August 1, 2005.
- Implementation of the arrearage adjustment program with agreements signed with all five fatherhood sites and the signing of the first voluntary agreement.
- Connecticut provided guidance and best practices regarding arrears management to other states through a presentation at a national peer-to-peer conference that focused on best and upcoming practices.
- Connecticut was authorized access to records of cellular mobile telephone and other wireless telecommunication service providers for location information. The Bureau of Child Support Enforcement will be working during the year with several major providers to implement an automated match.
- The ability to serve capias executions on noncustodial parents who fail to appear in court was enhanced by increasing the statutory cap of two DSS capias officers to four.

Debit Card Alternative

Negotiations throughout most of 2005 culminated in February 2006 with an agreement between the Connecticut child support state disbursement unit (SDU) contractor and JPMorgan/Chase Bank to offer child support recipients another payment alternative; a **VISA**® branded debit card. Legislation was signed in June 2006 requiring recipients to receive child support through either direct deposit or the new debit card. The new **VISA**® branded card will provide Connecticut child support recipients access to a broader network of ATM's and retail establishments from which to access child support funds. The rollout on the new card began during July 2006 and

will be cascaded in increments across the state during the fall, winter and spring through directed mailings to custodial parents that advise of the options available and the advantages of each. As of the end of June 2006 the number of custodial parents receiving child support through direct deposit increased to over 26,300. In addition 35 states now electronically exchange child payments with Connecticut via EFT, instead of through checks.

Parents can access the DSS child support website at www.ct.gov/dss, follow the link for Families with Children for more information. This site also has links to the federal child support website, other child support partners in Connecticut, the state's Fatherhood Initiative website, and the State Disbursement Unit (www.ctchildsupport.com).

Both websites have direct links to applications for services, payment information, employer information packets, and other state and federal child support websites. These tools assist Connecticut in sending more of the child support collected to parents, and keeping the number of undistributed payments at a level that is one of the lowest in the nation.

John S. Martinez Fatherhood Initiative of Connecticut

The Department's Fatherhood Initiative, in consultation with the National Practitioners Network For Fathers and Families (NPNFF), developed a certification process for fatherhood programs in the state of Connecticut. It is the first of its kind in the nation; the certification process provides uniform standards and rigid guidelines of practice for fatherhood programs located in the state. This strategy ensures consistent and quality service delivery to low-income, non-custodial fathers and their families, while also recognizing exemplary fatherhood programs.

Cash Assistance for Adults

State-Administered General Assistance

Through the **State-Administered General Assistance (SAGA)** program, the Department provides cash and/or medical assistance to eligible individuals who are unable to work for medical or other prescribed reasons, and to families that do not meet the blood-relationship requirements of the Temporary Family Assistance (TFA) program. Approximately 4,200 individuals were receiving SAGA cash assistance at the end of SFY 2006.

Employable individuals are not eligible for SAGA cash assistance. However, employable individuals with drug and/or alcohol abuse problems may be eligible to receive treatment and some financial support through the Department of Mental Health and Addiction Services' (DMHAS) Basic Needs Program.

General application for SAGA services is made at local DSS offices. Further information: www.ct.gov/dss, keyword "financial", and scroll down.

State Supplement Program

The **State Supplement** Program provides cash assistance to the elders, people with disabilities, and people who are blind, to supplement their income and help maintain them at a standard of living established by the General Assembly. To receive benefits, individuals must have another source of income such as Social Security, Supplemental Security Income, or Veteran's benefits.

To qualify as aged, an individual must be 65 years of age or older; to qualify as disabled, an individual must be between the ages of 18 and 65 and meet the disability criteria of the federal Social Security Disability Insurance program; and to qualify as blind, an individual must meet the criteria of the Social Security Disability program, or the state Board of Education and Services for the Blind. The program is funded entirely by state funds, but operates under both state and federal law and regulation. Incentives are available to encourage recipients to become as self-supporting as their ages or abilities will allow. State Supplement Program payments also promote a higher degree of self-sufficiency by enabling recipients to remain in non-institutional living arrangements.

People eligible for State Supplement are automatically eligible for Medicaid. Approximately, 15,316 people (4,689 aged, 90 blind, and 10,537 disabled) were receiving State Supplement benefits at the end of SFY 2006. Further information: www.ct.gov/dss, keyword "financial", and scroll down.

The Food Stamp Program

The **Food Stamp Program** provides monthly benefits to help eligible families and individuals afford food purchases. Benefits are provided electronically, enabling clients to use a debit-type swipe card at food markets. Income- and asset-eligibility guidelines apply. The general income limit is 130% of the federal poverty level. Maximum monthly food benefit examples are \$152 for a single person and \$506 for a four-person household. At the end of SFY 2006, approximately 103,900 Connecticut households (including 78,785 children) were receiving Food Stamp benefits. Application to the Food Stamp program is made at local DSS offices. We were recently recognized by the United States Department of Agriculture for achieving a payment error rate of 6.61% for FFY 2005.

Through the **Food Stamp Program Nutrition Education Plan** we provide nutrition education intervention to Food Stamp Program recipients and applicants. For FFY 2006 we received \$2,074,099 in federal matching funds to partner with the University of Connecticut and the Department of Public Health to provide these nutrition education activities.

We received \$579,375 in federal matching funds for **Food Stamp Outreach** for FFY 2005. We partnered with the Connecticut Association for Human Services (CAHS), End Hunger Connecticut! Inc., and The Hispanic Health Council to provide outreach services and activities

for potential Food Stamp recipients. This year we received additional monies for 2 faith-based outreach initiatives.

The Emergency Food Assistance Program distributes available food from the U.S. Department of Agriculture to soup kitchens, food pantries, and shelters that serve people in need. The program distributed approximately 5.1 million pounds of food valued at \$3.6 million. The **Supplemental Nutrition Program** purchases high-protein foods for distribution to food pantries, soup kitchens, and shelters through a statewide network of 350 agencies. Approximately 743,000 pounds of food, with a value of \$711,468 were distributed.

Repatriation Services are provided for U.S. citizens who are or were residents of Connecticut and who need emergency evacuation from another country for medical treatment, to escape from a dangerous or hostile environment, or are being deported from another country. DSS works with International Social Services, a subcontractor for the Department of State, to assist Connecticut repatriates to find housing and access medical treatment.

Services for the Elderly, People with Disabilities & Social Work Services_____

(See also: Medical Services and Cash Assistance for Adults)

As part of the DSS Bureau of Aging, Community and Social Work Services, the DSS Aging Services Division (State Unit on Aging) administered approximately \$24 million from the federal Older Americans Act and other federal and state funds to provide a multitude of services to an estimated 135,334 seniors During SFY 2006.

Older Americans Act-funded services include home care, transportation, housekeeping, respite for caregivers, nutritional services (meals served in a group environment and meals-on-wheels), health promotion and disease prevention, legal assistance, adult day care, senior center operation, employment, and education and counseling.

Highlights of Older Americans Act Program for FFY 2006

- 1,485,430 home-delivered meals were served statewide;
- 980,866 meals were served in group settings to elders;
- 214,462 trips were provided for elders to doctor appointments, shopping and recreational activities;
- 81,844 hours of homemaker services were provided; and
- 168,616 adult day care hours for personal care were funded.

The Department's **federally funded Senior Community Service Employment Program (SCSEP)** offered employment and training opportunities to 200 seniors in 2006. An additional 100 seniors were provided referrals to non-subsidized employment and referral services. **Elderly Health Screening** programs provided a multiphase health screening to elders, with the primary

goal of early detection of disease. During SFY 2006 a total of 4,253 elders received health-screening services.

The information and education program of the **Connecticut Partnership for Long-Term Care** recruited and trained volunteer counselors to help consumers plan for the costs of future long-term care. During SFY 2006 this alliance with private industry responded to 702 requests for information and publications about long-term care insurance, counseled more than 246 prospective consumers, and conducted six forums to educate the public about “The Missing Link in Retirement Planning: Why and When to Consider Long-term Care Insurance,” reaching more than 347 people.

Through Aging Services Volunteer Programs such as the Retired and Senior Volunteer Program, and Seniors Helping Seniors, volunteers provided community services at schools, hospitals, libraries, local and state social services agencies, and community events; visited homebound individuals; transported people to medical appointments; and assisted in preventive health care clinics and disaster preparedness education. There are over 4,700 volunteers who provide support to elders in their community.

The Department’s **CHOICES** (Connecticut’s Health insurance assistance, Outreach, Information and referral, Counseling and Eligibility Screening) Program (1-800-994-9422) served tens of thousands of seniors, people with disabilities and their caregivers through individual counseling and community outreach and education events. The addition of the new Medicare Rx (Part D) program made this past year the busiest yet. The program counseled 62,121 individuals on health insurance issues such as Medicare, Medigap insurance and Medicaid coverage. CHOICES counselors also assisted 8,009 individuals with non-insurance issues such as housing, transportation and legal services. Over 21,000 individuals were assisted with ConnPACE issues and enrollment. Over 548,450 individuals were reached through educational and outreach activities, such as health fairs, presentations, and enrollment events in the community. The success of the program is due in part to the network of 400 volunteers statewide.

Connecticut’s National Family Caregiver Support Program provides services to family caregivers in several different areas, including information and assistance, counseling, support groups, and respite. One-on-one assistance was provided to 7,974 individuals; 2,620 were served through counseling, support groups and training; 1,456 received respite services; and 1,248 were served with supplemental services. The program also provided information through presentations, newsletters, and broadcast media.

The program also serves grandparents or older relatives caring for children up to age 18 through support groups, trainings, legal assistance and respite. In addition, DSS Aging Services is actively involved in the **GAPS (Grandparents As Parents Support) Network**, which includes over 125 agencies dedicated to helping grandparent caregivers and their grandchildren and 36 support groups.

The Connecticut Statewide Respite Care Program is designed to offer short-term respite to caregivers of individuals with Alzheimer’s disease and related dementias. In SFY 2006, 556

individuals received direct services such as adult day care, home health services, skilled nursing, and overnight respite. In addition, over 1,500 individuals benefited from counseling, case management or education provided by the five Connecticut Area Agencies on Aging and the Alzheimer's Association, Connecticut Chapter.

The Mulberry Gardens Project and the New England Cognitive Center's Brain G.Y.M.M. Program were funded in SFY'06 through the receipt of drug settlement dollars.

The Mulberry Gardens Project utilized a multifaceted approach to caring for the individual with Alzheimer's by offering adult day care with flexible hours, short term respite, a senior fitness program, a geriatric assessment and resource center, and educational programming and support groups for individuals with Alzheimer's disease and their families. In SFY'06, 126 individuals received direct services, 118 assessments were made, 87 educational sessions were held, and 535 calls were received by the CT Center for Healthy Aging.

The New England Cognitive Center's Brain G.Y.M.M. Program utilized a two-tiered non-pharmaceutical approach to addressing the needs of the individual with Alzheimer's disease. Two primary interventions- exercises in the computer that target specific areas of cognition, and hands-on cognitive training in a small group or workshop environment were measured and evaluated to determine whether the Program could maintain cognitive functioning levels in individuals with Alzheimer's disease. In SFY'06, 1,046 individuals participated in one-on-one cognitive workout sessions, and 144 group training sessions were held. Of the individuals participating in the Program in SFY'06 with moderate to severe Alzheimer's disease who would normally experience cognitive decline, not only did these individuals not experience a decline in cognitive functioning, 22.67% exhibited an increase in overall cognitive functioning after participating in this Program.

Aging Services has an extensive website at www.ctelderlyservices.state.ct.us . During this fiscal year, there were over 430,000 'hits'.

The **Long-Term Care Ombudsman Program (LTCOP)** is committed to promoting and maintaining the highest quality of life and care for residents of nursing homes, residential care homes and assisted living communities in Connecticut. The Program's mission is to protect the health, safety, welfare and rights of these long term care consumers.

Accordingly, the Program responds to, and investigates concerns and complaints made by, or on behalf of, residents. Information, education, and consultation are also provided in order to promote and support self-advocacy. Through a combination of direct services to long term care consumers; partnerships with the state's elderly services and persons with disabilities networks; as well as rigorous systemic and legislative advocacy; the Ombudsman Program presses for ongoing improvements to the state's long term care system.

Beyond paid staff, a team of dedicated Volunteer Resident Advocates also works to further enhance Program support of residents, both individually as well as collectively, through Resident Councils. These Volunteers make thousands of visits with residents on a weekly basis.

In the 2006 State Fiscal Year, the Long Term Care Ombudsman Program handled 1,675 complaints and spent 9,789 hours in providing 5,985 units activities/services and 3,677 visits. During this same timeframe, a total of 27,600 individuals were served.

For further information: www.ltcop.state.ct.us or 1-866-388-1888.

Protective Services for the Elderly assists persons age 60 and older who have been identified as needing protection from abuse, neglect and/or exploitation. During SFY 2006 agency social workers provided services to 3,790 persons living in the community and 859 residents of long-term care facilities. The **Conservator of Person** program, for indigent individuals 60-and-over who require life management oversight, helped 537 individuals; and the **Conservator of Estate** program provided financial management services to 113 people in the same age group.

During the fiscal year, the **Community Based/ Essential Services Program** provided services designed to prevent institutionalization to 2,110 persons with disabilities. Six hundred and thirty-one (631) persons received help through the **Personal Care Assistance Program** (people with disabilities between age 18 and 64); and 320 individuals were provided assistance under the **Acquired Brain Injury (ABI) Program**. Both programs operate under Medicaid waivers.

The **Acquired Brain Injury Barriers Fund** of \$ 13,875 [estimate pending EMS report] helped remove or limit barriers that prevented participation in the ABI program. The **Family Support Grant Program** helped 28 families with children with developmental disabilities other than mental retardation in meeting extraordinary expenses of respite care, health care, special equipment, medical transportation and special clothing.

Regional and Central Office social work staff provided brief interventions for 1,656 families and individuals including counseling, case management, advocacy, information and referral, housing and homelessness assistance and consultation, through the **Family and Individual Social Work Services**.

The federal Supplemental Security Income Program serves people who are elderly, disabled, or blind. In Connecticut, State Supplement Program augments the federal program. As the state fiscal year ended, the State Supplement Program was serving 17,882 persons (5,447 aged, 104 blind, 12,331 disabled).

The **Connecticut Home Care Program for Elders** is a comprehensive and cost-effective way for older persons at risk of institutionalization to receive the support they need to remain in their homes (further information under Medical Services toward the beginning of this report).

The **Teenage Pregnancy Prevention Initiative**, designed to prevent first-time pregnancies in at-risk teenagers, continued to target 12 urban areas: Hartford, Bridgeport, New Haven, New Britain, New London, Waterbury, Norwalk, Stamford, East Hartford, Norwich, West Haven and Willimantic, as well as rural northeastern Connecticut. The programs served 799 individuals.

The **Family Planning Program** provided comprehensive reproductive health care services to 13,440 low-income residents. The **Family Counseling Program** served more than 2,551 persons. **Social Work Services** staff provided more than 100 educational and training sessions to community members, professional associations, agency and institutional staff on DSS social work programs and services. Staff continued to develop practice standards for the agency social work programs; program databases to track client services and outcomes; and revised regulations to comply with recent statutory changes.

Through the **Bureau of Rehabilitation Services (BRS)**, DSS provided vocational rehabilitation services to 8,288 job seekers with disabilities with the goal of promoting success in employment. Of this number, 1,229 clients entered the competitive workforce during SFY 2006.

The bureau's **Connect-to-Work Center** provides a single access point for information about the impact of wages on federal and state benefits (800-773-4636; TTY: 860-424-4839; email: connecttowork.dss@po.state.ct.us). This program provided comprehensive work incentives planning, assistance, and outreach to 731 individuals in the past year. The Center also provided systems analysis and research.

In January, BRS was awarded a \$1.5 million grant (with the potential of up to \$5million by 2011 – Ed.) to help find solutions to the workforce quandary. The CT Employment utilized populations of the elderly and persons with disabilities.

As a major partner in the implementation of the Workforce Investment Act, bureau staff serves on each of the state's Regional Workforce Development Boards, and bureau offices in Norwich and New London are co-located in Department of Labor One-Stop Centers. In addition, more than 1,029 individuals with disabilities participated in independent living programs through the agency's network of five **Centers for Independent Living**: the Center for Disability Rights, West Haven; Disabilities Network of Eastern Connecticut, Norwich; Disability Resource Center of Fairfield County, Stratford; Independence Northwest, Naugatuck; and Independence Unlimited, Hartford (see www.brs.state.ct.us/programs_pg4.htm).

The **Connecticut Tech Act Project** continued its partnership with People's Bank to provide low-interest loans to help people with disabilities buy assistive technology devices and equipment. As of June 30, 2006, there were 101 *active* loans being serviced. The original value of these loans was over \$1,534,000 with a current balance remaining of \$659,800. Money in the bank currently available for new loans is \$1,268,238.00. The CT Tech Act Project is also implementing several new programs, including the Tech Mentor Program, a peer mentoring service for individuals with disabilities who need assistive technology, and the AT Exchange, an online classifieds where new and used assistive technology devices can be found for sale or donation.

The bureau's **Disability Determination Unit** processed applications for Social Security Disability Insurance and Supplemental Security Income on behalf of 35,370 clients. As it has for the past ten years, this unit again ranked as one of the top disability determination units in the nation, based on productivity and effectiveness and superior public service. The DDS was

among the first group of states nationwide to revamp their business process and successfully implement an electronic disability claims folder, which is resulting in more efficient claims processing for CT residents. In April 2005 this unit received the Associate Commissioner's Citation for Excellence in leadership, performance and professionalism in guiding the Connecticut Disability Determination Services through the electronic disability process.

In collaboration with the Department of Mental Health and Addiction Services, the bureau completed the fifth year of a systems change project to improve employment outcomes for individuals with psychiatric and/or addiction disorders. Staff facilitates joint employment planning through interagency teams and strategies to provide more comprehensive and integrated services to this population.

DSS Bureau of Rehabilitation Offices:

Central administrative office

25 Sigourney Street, 11th Floor, Hartford 06106; 860-424-4844 or 800-537-2549 (toll-free in Connecticut). TDD/TYY: 860-424-4839.

Northern Region – Michael Marino, District Director

- **+*Hartford**—3580 Main Street 06120; 860-723-1400 (TDD/TTY: 860-723-1430/860-723-1395)
- **Dayville/Killingly**—Bell Park Square, Suite 202, 559 Hartford Pike, 06241; 860-779-2204 (voice and TDD/TYY).
- **East Hartford**—CT Works, 1137 Main Street 06108; 860-289-2904 (voice and TDD/TYY).
- **Enfield**—Smyth's Corner, 77 Hazard Avenue 06082; 860-741-2852 (voice and TDD/TYY).
- ***Manchester**—699 East Middle Turnpike 06040; 860-647-5960 (voice and TDD/TYY).
- ***New Britain**—270 Lafayette Street 06053; 860-612-3569 (voice and TDD/TYY).

Southern Region – Iris Mello-Barnes, District Director

- **+New Haven**—Suite 301, 414 Chapel Street 06511; 203-974-3000 (TDD/TYY: 203-974-3013/203-974-3009).
- **Ansonia**—c/o Birmingham Group, 435 East Main Street 06401; 203-735-9444 (voice and TDD/TYY).
- ***Middletown**—117 Main Street Extension 06457; 860-704-3070 (voice and TDD/TYY).
- **New London**—Shaws Cove Six 06320; 860-439-7686 (voice and TDD/TYY).
- **Norwich**—c/o Future Works, Suite 200, North Building, 113 Salem Turnpike 06360; 860-859-5720 (voice and TDD/TYY).

Western Region – Kathleen Marchione, District Director

- **+Bridgeport**—1057 Broad Street 06604; 203-551-5550 (voice and TDD/TYY).
- ***Danbury**—342 Main Street 06810; 203-207-8990 (voice and TDD/YTY).
- ***Stamford**—1642 Bedford Street 06905; 203-251-9430 (voice and TDD/TYY).

- ***Torrington**—62 Commercial Boulevard, Suite One 06790; 860-496-6990 (voice and TDD/TYY).
- ***Waterbury**—249 Thomaston Avenue 06702; 203-578-4550 (voice and TDD/TYY).
 - *Co-located with DSS Regional Office
 - + Regional Administrative Office

Housing Assistance

Through various **homeless assistance programs**, DSS supported 45 emergency shelters with a total of 1,777 beds, serving more than 14,630 adults and children, plus six programs that provide advocacy, housing, and health services.

The **Transitional Living Program** helped families and adults move from shelters into independent living. The **AIDS Residence Program** provided housing and support services to 935 people. The **Security Deposit Assistance Program** provided help to more than 2,500 families in obtaining permanent housing.

The **Security Deposit Assistance Program** provided help to more than 2,500 families in obtaining permanent housing.

Under the **Rental Assistance Program**, DSS provided rental subsidies to 1,400 families and adults living in privately owned housing. One-year rental subsidies were provided under the Transitional Rental Assistance Program to approximately 150 former Temporary Family Assistance-recipient families per month. Under the federal **Section 8** program, DSS provided rental assistance so that 5,600 families and adults could move into and afford safe and sanitary housing. Special program categories under Section 8 include the Family Unification, Non-Elderly Disabled, and Mainstream Housing Opportunities for Persons with Disabilities programs.

DSS also works closely with the Department of Children and Families in administering the Section 8 Family Unification program, promoting family unity by providing housing assistance to families for whom the lack of adequate housing is a primary factor in the separation, or the threat of imminent separation, of children from their families.

DSS has a memorandum of understanding (MOU) with the Department of Mental Health and Addiction Services, the Office of Policy and Management, the Department of Economic and Community Development, and the Connecticut Housing Finance Authority in support of the **Supportive Housing Pilots Initiative**. This is designed to create service-supported, affordable housing opportunities for people affected by mental illness or chemical dependency who are facing homelessness. The Department has devoted 200 Section 8 vouchers to project-based programs developed as part of this initiative. During the past year, the next phase of Connecticut's plan to create 1,000 units of service supported permanent housing began with the "Next Step" Supportive Housing Initiative. A new MOU was signed by DSS, the Department of Mental Health and Addiction Services, the Office of Policy and Management, the Department of Economic and Community Development, the Department of Children and Families, and the

Connecticut Housing Finance Authority. The purpose of Next Step is to enable both homeless individuals and families who are homeless or at risk of becoming homeless to stabilize their lives and regain a stake in the community. The Department of Social Services has devoted 350 Rental Assistance certificates as part of this initiative.

The **Eviction and Foreclosure Prevention Program** reduced homelessness by preventing more than 1,500 families from being evicted from rental properties or their own homes, through the provision of mediation services and rent bank subsidies. The statewide network of **Domestic Violence Shelters** provided a safe haven for more than 2,300 victims of family violence and fielded more than 18,000 Crisis Intervention hotline calls.

Energy and Food Assistance, Community Programs

The **Connecticut Energy Assistance Program (CEAP)** is administered by the Department of Social Services and coordinated by regional Community Action Agencies, in cooperation with municipal and other non-profit human service agencies. Connecticut residents who need help paying their primary heating bills apply for energy assistance at about 160 community sites. CEAP is available to households with incomes up to 150% of the federal poverty guidelines. Households with even higher incomes, up to 200% of the federal poverty guidelines, are eligible for CEAP if they include a person who is at least 60 years of age or a person with disabilities. Efforts are made to accommodate homebound applicants. **Due to passage of PA 05-02 of the Special Session held in October 2005, DSS was able to re-instate the Contingency Heating Assistance Program (CHAP), which assisted households with incomes up to 60% of the state median income.**

Families or individuals may obtain help with their winter heating bills, whether the primary heating source is a utility (natural gas or electricity) or a deliverable heating fuel (oil, kerosene, wood, and propane). CEAP-eligible households with incomes up to 150% of federal poverty guidelines, whose rent includes heat, and who pay more than 30% of their gross income toward their rent, are eligible for renter benefits. DSS assisted 76,316 CEAP/CHAP-eligible households during the 2005-06 heating season.

A feature of the CEAP is the inclusion of funds from 'Assurance 16,' which are designated for the purpose of providing services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance. These services include case management, needs assessments, counseling, energy education and assistance with energy vendors.

DSS also administered federal funds for a Weatherization Assistance program providing energy-efficient measures to approximately 717 households with incomes up to 200% of the federal poverty level. Further information: 1-800-842-1132.

The Department provides federal funding to agencies that assist in the **resettlement of refugees**, including Catholic Charities, Episcopal Social Services, International Institute of Connecticut, Jewish Federation Association of Connecticut, and Lutheran Community Services. Besides

funding for employment assistance to refugees, DSS directly assists refugees through cash, medical and Food Stamp assistance.

DSS administers a significant portion of the federal **Social Services Block Grant (SSBG)** program; some goes to other state agencies. For federal fiscal year 2006 Connecticut received \$20,249,276, which was allocated to 12 of the 29 allowable service categories. In general, funds are used to provide services to state residents who are at or below 150% of the federal poverty level. Some services, such as protective services for adults, protective services for children, and information and referral are provided without regard to income.

The SSBG also supports direct service programs, grant programs, and programs and services provided by other state agencies. Programs supported with SSBG funds include: community-based services, protective services for the elderly, emergency shelters for the homeless, child day care services, and services for SAGA clients.

Funding to state agencies includes: Department of Mental Retardation for supported employment; Office of Protection and Advocacy for advocacy services for people with disabilities; Commission on Deaf and Hearing Impaired for protective services; Board of Education and Services for the Blind for community integration and support; and Department of Mental Health and Addiction Services for substance abuse treatment, supportive housing, outpatient counseling, independent and transitional living, and information and referral.

In addition, DSS provides SSBG funds for more than 121 programs through private non-profit and municipal service providers. Services include: substance abuse counseling, home-delivered meals, protective services for children, information and referral, case management, family planning, legal services, services for persons with disabilities and employment. In the last year, 84,582 adults and 14,974 children received services from programs supported by SSBG funds.

Through the **Neighborhood Facilities Program**, DSS provides grants for planning, site preparation, construction, renovation, and acquisition of facilities for child care centers, elderly centers, multi-purpose human resource centers, domestic violence programs, emergency shelters, shelters for the homeless, food distribution facilities, and accommodations for people with HIV and AIDS. In the past year, DSS received approval from the State Bonding Commission for fourteen projects with a combined value of \$ 8.6 million.

Connecticut Human Services Infrastructure Initiative and Strategic Planning

In FY 2006, the Department and its Division of Strategic Planning oversaw further efforts in the implementation of the Connecticut Human Services Infrastructure (HSI) initiative, in its continuing collaboration with 2-1-1 Infoline and the state's 12 Community Action Agencies (CAAs). The initiative, which seeks to streamline customer access to services within CAAs and between CAAs, DSS and other human service partners by: better use of existing resources, connecting clients to community resources before, during and after DSS intervention, getting clients to DSS better prepared to use services efficiently, coordinating all "helping" services within the human service infrastructure and identifying client barriers early in the process, is changing the way of doing business on behalf of the state's most vulnerable individuals and

families. During this year, the CAAs have focused on the review and restructuring of program and service delivery, addressing staffing issues as needed. They are discovering and implementing, often with great creativity, more ways to help their customers with fewer separate appointments necessary. Further emphasis has been placed on the implementation of an MIS system that is able to collect extensive customer information, including basic demographics, identified needs, plans for service, interventions provided and outcomes achieved which is then available to staffs across several programs. Recognizing that there are several data systems employed within the CAA network, the Connecticut Association For Community Action (CAFCA) secured a grant for development of a “data bridge”—software that will allow participating agencies to integrate individual customer information gleaned from multiple data systems across a broad network of provider agencies. Further information is online at www.ct.gov/dss, keyword “HSI” and at the Connecticut Association for Community Action website at www.cafca.org. In addition to the DSS staff support and technical assistance provided to the planning and implementation of HSI, the Division of Strategic Planning also served as staff coordinator for the John Martinez Fatherhood Initiative of Connecticut.

Public and Government Relations

The Office of Public and Government Relations assisted over 20,000 elders, people with disabilities, families seeking medical coverage and the general public with inquiries in all areas of the Agency’s mission during SFY 2006.

The Public and Government Relations (PGR) Office provides legislative program management; legislative constituent referral and problem-solving facilitation; customer relations and advocacy services; news media relations; public communications about DSS services; outreach and education services for the HUSKY Plan and related services; Freedom of Information Act compliance; website development and maintenance; intergovernmental research and communication with federal and state agencies, including client information inquiries by out-of-state human service agencies; and other support services.

During SFY 2006, PGR completed nearly one hundred Freedom of Information Act requests. The department also supported a large outreach for the new Medicare part D, also known as Medicare Rx, to assist Connecticut’s eligible Senior and disabled population in enrolling for a prescription plan. The outreach included presentations, press conferences, web updates, and promotion of the DSS Rx-Xpress, a mobile assistance center operated by the Connecticut Department of Social Services and CHOICES (Connecticut’s program for Health assistance, Outreach, Information and referral, Counseling and Eligibility Screening).

The Department’s general public information line is 800-842-1508; written inquiries can be directed to Public and Government Relations, DSS, 25 Sigourney Street, Hartford, CT 06106; or (pgr.dss@po.state.ct.us). Legislative and Media Relations contact: Matthew Barrett at 860-424-5012 (matthew.barrett@po.state.ct.us). HUSKY outreach and education: Glendine Henry @ 860-424-5543 (glendine.henry@po.state.ct.us).

Legal Services

The Office of Legal Counsel, Regulations and Administrative Hearings provides the opportunity for applicants and recipients of Department of Social Services programs to contest actions taken by the Department, including, but not limited to, the:

- Denial of applications for Food Stamps, cash benefits, medical benefits, Child Care Assistance program benefits;
- Discontinuance of Food Stamps, cash benefits, medical benefits, Child Care Assistance program benefits;
- Reduction or amount of Food Stamps, cash benefits, Child Care Assistance program benefits;
- Administrative Disqualification Hearings for the Temporary Family Assistance and Food Stamp programs.
- Recoupment of benefits, including liens placed by the Department of Social Services;
- Child support hearings pertaining to administrative offset, state and federal income tax offset, and property liens;
- Nursing Home discharge hearings.

Quality Assurance

Through tracking, monitoring, and investigating over-billing, the Division of Quality Assurance recovered over \$14.5 million from vendors and providers who had over-billed the Department for services rendered to clients. DSS recovered and saved more than \$213 million from third parties (including insurance companies and Medicare) who were responsible for paying for services for clients. By investigating approximately 4,100 cases of fraud, the agency estimates that it recovered, sought recovery, saved, or referred for prosecution over \$2.9 million.

DSS also recovered almost \$9.6 million through liens and mortgages on real estate. The Department prevented approximately \$5.3 million in Medicaid, Food Stamps and TFA fraud through the use of its pre-eligibility Fraud Early Detection Program. Working with DAS Financial Services Center, almost \$40.2 million was recovered in additional funds through estates, lawsuits and other collections.

Affirmative Action

The Department of Social Services is strongly committed to the concepts, principles, and goals of affirmative action and equal employment opportunity. These objectives are commensurate with the state's policy of compliance with all federal and state constitutional provisions, laws, regulations, guidelines, and executive orders that prohibit discrimination. The **Affirmative Action Plan**, submitted on March 30, 2006, was approved and granted continued annual filing status by the Connecticut Commission on Human Right and Opportunities. DSS administers its programs, services, and contracts in a fair and impartial manner.

During 2006, Affirmative Action continued to monitor and improve its practices in employment and contracting, giving special consideration to affirmative action goal attainment, diversity training for all employees, and contract compliance. At the close of the November 30, 2005, affirmative action reporting period, 34.2 percent of DSS employees were minorities, 66.8 percent were women, and 5.3 percent was self-proclaimed as having a disability. During the plan year, DSS hired 96 new employees: 34(35.4 percent) were minorities and 60(62.5 percent) were women.

As part of this ongoing commitment, the department's affirmative action posture is reflected in the established, and Department of Administrative Services approved, goals for Small-, Women-, and Minority-owned business enterprises. The agency actively solicits participation from these categories in its selection of contractors.

Division of Financial Management and Analysis

The Division of Financial Management and Analysis (DFMA) supports the department through the provision of a full range of operational and budgetary financial functions. These financial management activities are provided through four key service centers outlined below.

Budget Group

The Budget Group is responsible for budgeting and reporting for over \$4 billion in state and federal funds. Ongoing functions of this group include developing periodic estimates of agency spending, facilitating the development of agency budget options, and providing updates on the status of the budget process for the agency. In the past year, this group has been involved in providing fiscal analyses on several major Department initiatives, including: Medicare Part D, the restructured SAGA program, and the Behavioral Health Partnership.

Client Services Accounting Group

The functions of Benefit Accounting, Accounts Receivable and the Convalescent Accounting units combined to form the Client Services Accounting Services group. The Benefit Accounting unit is responsible for the management of funds associated with our benefit/entitlement programs, the primary of which is Medicaid. The Convalescent Accounting unit is also responsible for accounting activities related to the long-term care portion of the Medicaid program. As the vast majority of our receivables are related to our Medicaid program and closely related to the actions of our Benefit Accounting unit, the Accounts Receivable unit is located within this service center.

During the past year, the group successfully accounted for the \$4.15 billion benefit payment checkbook account, collected over \$39.3 million in receivable balances.

Funds Management & Reporting Group

The Fund Management and Reporting service center is charged with meeting both the internal DFMA and external program area fund management and reporting needs. Among the activities

coordinated through this service center are fund postings to the State accounting system and related internal systems, the development of reporting mechanisms to support operational and external agency needs, the maintenance of the chart of accounts, GAAP reporting, and shared oversight of the spending plan process.

During the past year this group has process over \$4 billion in allotments for the agency, monitored comparable CORE-CT accounting balances for the Department and made strides in the development of new, user-friendly financial reporting, as well as forums and tools to facilitate information sharing within the agency.

Payroll & Accounting Support Group

The Payroll and Accounting group consists of payroll and several accounting functions. By bringing together various support functions, accounting policies and procedures to support the agency are better coordinated and build upon a shared accounting expertise and overall direction. The functions combined under this area include Accounts Payable, Cash Management, Child Support Accounting, Federal Funds and Payroll.

During the past year, this group has been responsible for processing approximately 21,500 vouchers for payments to our vendors, the disbursement of over \$250 million in Child Support collections, the processing of multiple federal reports for over 45 federal grants, and the ongoing modification of procedures in the Cash Management and Accounts Payable areas.

Administrative Services

This Division provides support to the entire Department. This includes support for all of the "physical" parts of the agency; 37 offices, a fleet of more than 150 cars, print shop, mail to all 37 locations as well as more than one million notices to clients etc.

The Division also performs major centralized client processing activities. These include checking client earnings against Dept. of Labor records and compiling more than 8000 statements of assistance that are used to recoup millions of dollars annually.

The Division also screens benefit recipients against lists of fleeing felons, incarcerated individuals and those living in other states. These activities ensure that DSS benefits go only to eligible clients.

One of the units adds approximately 1000 newborns to the roles each month. This speedy processing helps reimburse hospitals for medical costs when the newborns' families are eligible for assistance. The Federal government then shares such costs.

The Division is responsible for distribution of over \$30 million of Food Stamp and cash benefits monthly. This year, five markets accepted Electronic Food Stamps for the first time. The department plans to build on this success.

Information Technology Services

In the June of 2006 the Management Information Systems (MIS) Division changed its name to the Information Technology Services (ITS) Division. The Information Technology Services (ITS) Division of the Department of Social Services has two distinct sections, Information Technology Technical Services and Support Services. These sections have provided extensive technical support to both the program and administrative areas of the agency in support of their previously described initiatives and accomplishments for SFY2006.

The Technical Services section is responsible for the technical computer systems changes, maintenance and administration. This includes Operations (batch and on-line processing), Help Desk Support and Communications, LAN/WAN Administration, Microsystems, Applications Development (including programming and systems analysis) and Data Base Administration units.

Operations, Helpdesk, LAN/WAN and Communications Support Units

With a staff of 21, 17 in the Operations, Helpdesk area and 4 supporting the LAN/WAN areas, overall support is provided in the following areas:

OPERATIONS:

- Computer operations / maintenance

- PC/Mainframe networking
- Batch schedules / processing
- Library functions
- Data transmission / receipt
- Data control functions
- Report distribution
- Disaster recovery
- Equipment installation
- Field Relocation

LAN SUPPORT:

- LAN/WAN Technical support
- Active Directory Administration
- Citriz Terminal Servers and Applications
- Email Administration
- Data Backup / recovery
- Virus protection / Operating System Patch Management
- Capacity Planning and Performance
- Security
- Internet Access
- Technical Standards
- New product evaluation

Coordination of effort amongst the staff of these two areas is critical and is essential to the successful maintenance of the mainframe and LAN/WAN environments. The functioning of the data center is a 24 x 5 process with 2 staff assigned to both the second and third shift primarily for the processing of both the production and test Eligibility Management System (EMS) cycles along with generation of daily notices, checks, and the communicating of various data files to various entities via FTP or various other types of media.

Supporting over 3000 PC's and 70 Servers utilizing the DSS infrastructure, the staff maintains all the hardware and is responsible for troubleshooting and problem resolution for the agency in an effort to support the agency in performing their daily activities and ability to provide the necessary services to the customers.

PC Microsystems – Applications Unit

The Microsystems unit provides a variety of computer based system and application support services in order to ensure the efficient operation of the Department's program and support divisions. The unit develops/documents software for office automation applications, evaluates new hardware/software to improve program effectiveness, procurement of hardware and software systems, and manages/maintains data management systems.

The Microsystems unit, in addition to providing Client/Server application support and development services to the Department, is also responsible for designing, maintaining and determining the technical path of Internet and Intranet-based web sites associated to the Department. The unit provides a structured approach for maintaining content on these sites as well as following State design guidelines, accessibility mandates and interoperability practices.

The Microsystems unit maintains nine (9) primary agency websites and two Intranet sites. Maintenance of these sites includes content management, change management and design modifications. New web sites are added at a rate of approximately two per year.

Applications Development and Data Base Administration Unit

The Application Development and Data Base Administration unit provides the core IT support for the agency including Application requirements, analysis, development, implementation and maintenance to the mainframe environment. The main application this unit provides the application support for is the Eligibility Management System (EMS). This mainframe system provides fully integrated data processing support for the determination of client eligibility, benefit calculation and issuance, financial accounting, and management reporting. EMS supports many of the agency's major programs such as Temporary Family Assistance (TFA), Medical Assistance (Medicaid and State Medical Assistance), Food Stamp, State Supplement to the Aged, Blind, and Disabled, and the State Administered General Assistance (SAGA) and Refugee Assistance Cash and Medical assistance programs. EMS also supports the Managed Care Program and the TFA Diversion Program.

Support Services section provides support to the Technical Services section as well as supplying other services to the Department, the Legislature, other State Agencies, and the general public. *Support Services* encompasses the broad range of responsibilities and duties staff provide to the Department, other State Agencies and the general public. Within ITS Support Services are the following three units: the User Support Unit (EMS and CCSES), the Systems Planning Unit, and the Information Services Unit.

User Support Unit (EMS and CCSES)

Eight professional staff and one manager work in the ITS User Support Unit. Six staff perform EMS User Acceptance Testing, Help Desk functions, EMS Project Management, EMS Systems Functional Requirements Definition, and EMS Security. Two staff perform CCSES Help Desk and CCSES User Acceptance Testing and assist in CCSES Project Management and CCSES Business and Systems Functional Requirements Definition.

EMS User Support Unit

User acceptance testing of changes to EMS is the process of testing new computer software from a user's perspective before the changes are moved into the production region of the system.

Help Desk for EMS users is available from 8:00 AM to 4:30 PM, Monday through Friday. The Help Desk responds to questions ranging from password resets to system functionality problems. The EMS help desk requires inquiries to come via authorized EMS users. The Help Desk also issues emails documenting systems changes as well as alerting staff to systems problems and any necessary “workarounds”. Help Desk staff assists users in developing work requests.

Project Management of EMS systems changes handles the requested or required changes in an orderly manner, including acting on priority items first. Project management also includes working with business contacts (users) to obtain needed information in order to meet targeted project implementation dates.

Business and systems functional requirements definition for changes to EMS is a process where the user is asked to define the business rules for changes or enhancements to the EMS system. Using the business requirements documentation, ITS prepares a detailed systems specification document that incorporates the business rules with the system functionality changes, i.e., database changes, eligibility changes, changes to screens or new edit messages, etc.

CCSES User Support Unit

User acceptance testing of changes to the Child Support/CCSES computer systems is the process of testing new computer software from a user’s perspective before the changes are moved into the production region of the system.

Help Desk for CCSES users is available from 8:00 AM to 4:30 PM, Monday through Friday. The Help Desk responds to questions ranging from password resets to system functionality problems. CCSES users have the ability to contact the CCSES Help Desk directly. The Help Desk also issues emails documenting systems changes as well as alerting staff to systems problems and any necessary “workarounds”. Help Desk staff assists users in developing Problem Discovery Notices or PDN’s. CCSES support staff also identify and make some changes to the system, including updating code tables.

Project Management of CCSES systems changes handles the required changes in an orderly manner, including acting on priority items first. Project management also includes working with business contacts (users) to obtain needed information in order to meet targeted project implementation dates.

Business and systems functional requirements definition for changes to CCSES is a process where CCSES staff assists the project owners with identifying business requirements and with work request development. In the final definition stages, CCSES staff review and provide comments on change specifications.

Systems Planning Unit & Information Services Unit

Eight staff and one manager work in the Information Services and Systems Planning units of ITS. Four professional staff provide information services, including TANF participation and high performance bonus reporting, management reporting and quality control data analysis. Three professional staff perform systems planning, budget preparation, forms creation and records retention management. One staff person provides clerical support services.

Systems Planning is responsible for providing overall ITS project management and planning activities for EMS, CCSES, and PC projects. In addition, it is responsible for ITS budget and spending plan completion; Departmental forms and forms transmittal development (hard copy and intranet), dissemination, and ordering; records (including DSS client case record information) retention and management. Systems Planning also acts as a liaison for DOIT/DSS interactions and is responsible for the Information Technology Agency Review and Planning (ITARP) group.

Information Services is responsible for creating and modifying EMS management reports; performing analysis and documenting and defining the methodology for quality control selection criteria and outcomes and reporting the results to federal and state entities; compiling data and reporting on the TANF high performance bonus and TANF participation rates; creating and modifying regional “download” files; analyzing and writing requirements for adhoc reports as well as validating the report results; responding to outside queries for information; and performing general data analysis.

The Office of Organizational & Skill Development (OSD)

The Office of Organizational & Skill Development (OSD) unit is a collaborative group of skilled professionals who work from a social justice foundation to support DSS staff and the organization in providing services that are client centered. We are committed to the philosophy that people are the organization. We support the organization through services that contribute to the development of a learning community that builds the competency of staff and the organization to meet the DSS mission.

Our core services include - Training and Staff Development, Organizational Development (OD), Media, Systems and Graphic support

The goal of OSD is to provide timely, relevant and effective organizational and staff development activities to: improve the quality and competency of service delivered to DSS customers; insure a culturally responsive delivery of services that recognizes and affirms diversity; improve job performance through the institution of measures of accountability to inspire public confidence; provide employees with opportunities to develop their potential within the context of the organization and overall career development; assist DSS’ customers and staff to develop skills, understand and access DSS services, comply with DSS policy and support the DSS Vision, Mission, Values, and Goals.

We accomplish this by developing staff skills to perform the tasks and activities of their current jobs; educating employees to assume greater responsibilities; participating in the Department's short and long range efforts to improve the effectiveness of the organization and its partnerships; educating and preparing individuals/families receiving DSS services; educating/training DSS' external partners to perform tasks and activities that support the DSS Vision, Mission, Values and Goals; accessing resources that expand DSS' capacity to provide training, providing organizational and staff development activities; and instituting systemic interventions that support organizational operations in the area of communication, project management, access, and service.

OSD has six major service areas: DSS Program Knowledge and Skills Training; Computer Systems Software Training, Development, and Support; Human Resource Development Activities In The Areas of Leadership, Management, Supervisory, Professional, and Individual Growth and Development; Organizational Development/Internal Consulting Activities; Media and Graphics Production; Social Work Education.

OSD accomplishments include the design and development of community forums with our HUSKY Community Partners to improve knowledge, communication and process; partnering with CT Works to deliver comprehensive skills and to build knowledge of agency programs; the De-linking Cash & Medical training for staff; SAGA training and program overview for partner agencies; the development of community partnerships in the City of Willimantic; training and development partner with Program Division and Rushmore Training Group to implement corrective action to the Food Stamp program as a result of the reinvestment funds; the facilitation and support for the development of standards of cooperation to eliminate errors in paternity establishment; Non-Citizen training and updates; HSI Training Academy partner; Client Fraud training for staff; facilitation of creation of standards of operations for Social Work Supervisors; ADA; HIPAA; Core-CT training for DSS; Core-CT Project support; the provision of GIS (Geographical Information System) services for DSS staff to utilize in planning of service areas and program design; the design and delivery of new and innovative courses in the areas of professional and individual growth and development like Transforming Workplace Conflict, Pumping Neurons, Boost Your Spirits and Job Performance; and the design and development of videos, Photo Novella, annual reports and brochures for HSI, VOICES, Connecticut Kids, Ombudsman, The Commission on Aging and others.

OSD is established through a collaborative agreement with The University of Connecticut School of Social Work and The Connecticut Department of Social Services. We are committed to the provision of ongoing and innovative educational and organizational services for DSS, its employees, its partners and clientele.

Human Resources Division

The Human Resource Division is responsible for providing technical guidance and support to the employees of the central and regional offices. Staff are involved in addressing issues which impact Human Resource management for the agency as a whole, through coordination of policy issues, involvement in labor relations activity and, in general, with the objective of ensuring that the quality of Human Resource service throughout the Department remains consistent.

Functions of the Human Resource Division include: provision of general personnel services to all staff; coordination and administration of information related to personnel data collection, decentralized examination and the development and dissemination of agency policies and procedures; participation in labor relations activities with respect to contract administration and negotiation, staff training and the grievance process; administration of medical and other benefits; and implementation of Health and Safety programs, including employee wellness education and Workers' Compensation.