

# **IMPACTS**

Presented by Albemarle County Dept. of Social Services and the Advisory Board



## Introduction

## Theme: Impacts

As our department moves to respond to the Strategic Plan, we are looking at how our work impacts our community. Even if our staff put in one little "drop" at a time, the effects can cause ripples that are far reaching. Collectively we can reach farther than divided; collectively we can make an IMPACT.

## A Letter from Kaki Dimock, Chief Officer of Human Services

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#### A Letter from Kaki Dimock

ACDSS is focused on IMPACT. By IMPACT, we mean three things:

- 1) Doing our jobs well & making sure we are helping people stay safe and thrive in our community.
- 2) Translating Albemarle County's strategic goals so that every work unit and every ACDSS staff member knows how they contribute.
- 3) Expanding our work beyond our mandates to meet the community need.

FY2023 brought us hard challenges like figuring out how to 'unwind' Federal benefits; and fun challenges like creating an emergency financial assistance program and launching a co-responder team with our colleagues at Albemarle County Police Department and Albemarle County Fire Rescue. FY2023 was the year we asked all ACDSS staff for anonymous 360 feedback on all supervisors and directors. And then used that feedback to make changes and grow. FY2023 was a year of connecting with our community partners as well. ACDSS worked collaboratively with Region Ten on the evolution of HUMAINS, and the creation of the Crisis Intervention Training Assessment Center (CITAC), and the work of the Community Safety Working Group, a team jointly convened by Albemarle, Charlottesville, and the University of Virginia to respond with recommendations after a significant increase in gun violence.

ACDSS spent a considerable amount of FY2023 understanding the Board of Supervisor's new strategic plan goals and determining exactly how they applied to our work. We worked to create an IMPACT plan that operationalizes each of the 6 goals at the ACDSS work unit level and at the individual staff level so that we all know how our work helps the County achieve its goals. This was hard, conceptual work but our workplans are the better for it! And, as a result, we can intentionally and specifically measure how we impact each of those goals!

ACDSS is grateful for the support and advocacy of the Advisory Board as we tackle these challenges. Thank you.

Be	well,	be	brave,	take	good	care	of	each	oth	er
Ka	ki									

## **Advisory Board Members**



Willie Mae Gray Samuel Miller



Natalie Detert
Jack Jouett District



Vacant Scottsville District



Amy Laufer Rivanna District



Mary McIntyre Rio District



Sarah Harris White Hall District



Kaki Dimock
Chief Human Services Officer



Mary Stebbins Director, ACDSS

The Advisory Board of the Albemarle County Department of Social Services is honored to perform the duties entrusted to it. In Virginia, pursuant to the Code of Virginia, Social Services Advisory Boards are asked to demonstrate an interest in all matters pertaining to the local social services, monitor social services programs, and provide an annual report to the governing body. The Advisory Board for Albemarle County's Department of Social Services meets monthly with the Director to enhance knowledge of local social services matters so that we may conduct business in accordance with our identified roles and responsibilities.

These include but are not limited to: (1) To be an advocate for community issues for The Department with the community, Board of Supervisors, and the State and Federal governments; (2) To be a liaison with the Board of Supervisors and the Community; (3) To seek knowledge about departmental services and the needs of the community; and (4) To set broad policies that would help the Department focus energy on specific opportunities.

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## The Work of the Department

"Just as ripples spread out when a single pebble is dropped into water, the actions of individuals can have far-reaching effects."

-Dalai Lama

## **Key Performance Indicators**

The ACDSS Office of Program Accountability (OPA) monitors, evaluates, and reports progress on all unit and overall agency performance goals. The Leadership Team then assesses the identified critical measures to examine agencywide performance on a quarterly basis. The OPA also supports ACDSS ongoing data needs by providing expertise on survey design and analysis, program evaluation, and workload.

Unit	Outcome	Objective	Q1	Q2	Q3	Q4	FY23 YTD	Target	+/-
Adult	Adults are medically insured	97% of Medicaid applications are processed within 45 days	99.4%	97.9%	99.4%	99.0%	98.6%	97.0%	1.6
Benefits	Adults have sufficient foodstuffs	97% of SNAP applications are processed within 30 days	99.4%	97.9%	99.4%	99.0%	98.6%	97.0%	1.6
	Adults receive timely services	95% of disabled and/or elderly adults receive Nursing Home and/or Community Based Care Assessments w/in 30 d.	71.4%	71.6%	40.7%	98.8%	71%*	95.0%	-24.4
	* Data is intermi	ngled with community partne	er data. A	CDSS AP	S only = 9	5.05% for	YTD FY25		
Adult Services	APS investigations compliant with policy mandates	95% of APS investigations have a timely disposition	19.3%	14.7%	34%	54.1%	31%*	95%	64.5
	* Data is intermingled with community partner data. ACDSS only = 92.11% for YTD FY25.								
	Reports of abuse, neglect & exploitation are addressed timely	95% of APS responses are assessed within 7 days.	68.0%	56.0%	82.3%	88.6%	74%*	95.0%	-21.3
	*Data is intermingled with community partner data. ACDSS only = 84% for YTD FY25.								
Bright Stars	Children are successful in school  Sch		3%	81.7%		86%	80%	6.0	
Business Services	ACDSS is a good financial	95% of invoices are paid within 10 days of receipt	100%	100%	100%	100%	100%	95.0%	5.0

	steward of the	Local Funding expenses							
	County's resources	will remain at least 1% under budgeted amount	-7.2%	-8.6%	-4.5%	-5.2%	-6.4%	-1.0%	-5.4
		Monthly financials completed by the 20th of next month 92% of the time	100%	100%	100%	100%	100%	92.0%	8.0
Child Care	Children and families have stable child care arrangements	95% of families receiving child care assistance do not have any unplanned changes in child care providers	99.8%	100%	99.4%	100%	99.2%	95.0%	4.2
	Children are safe	90% of new referrals are responded to per SDM guidelines	92.4%	92.2%	100%	93.3%	94.5%	90.0%	4.5
CPS	Children are safe	90% of new referrals at "response priority 1 (24 hours) are responded to per SDM guidelines	92.8%	88.2%	100%	78.1%	89.8%	90.0%	-0.2
	Families are medically insured	97% of Medicaid applications are processed within 45 days	99.3%	99.1%	98.3%	100%	99.2%	97.0%	2.2
Family Benefits	Families have sufficient foodstuffs	97% of SNAP applications are processed within 30 days	99.4%	98.9%	99.6%	99.2%	99.3%	97.0%	2.3
	Families are financially stable	98% of TANF applications are processed within 30 days	97.5%	97.3%	97.9%	97.4%	97.5%	98.0%	-0.5
Family Preser- vation	Children are safe	90% of ongoing cases have the required monthly contacts per 2008 state CPS policy	91.9%	93.1%	91.4%	74.7%	87.0%	90.0%	-3.0
	Children have safe and stable home placements	90% of children whose families are engaged with the Family Support Program do not enter foster care.	98.9%	100%	99.6%	98.63%	99.3%	90%	9.3
Family Support	Children have safe and stable home placements	90% of children whose families are engaged with the Family Support Program have no CPS reports of abuse or neglect within a 12-month period.	100%	100%	99.6%	100%	99.9%	98.0%	1.9

	Children have safe and stable home placements	90% of families who are engaged with the Family Support Program will have identified supports.	Annual Data Only				81.4%	90.0%	-8.6
Foster	Children have safe and stable home placements	95% of foster care children receive monthly face to face visits from their social workers	97.7%	97.5%	96.2%	93.5%	96.2%	95%	1.2
Care	Children have safe and stable home placements	75.2% of foster care children are reunified with their families within 12 months	66.7%	42.1%	30.3%	17.0%	39.0%	75.2%	-36.2
Foster Care (IV-E) Medicaid	Families are medically insured	97% of Medicaid applications are processed within 45 days	100%	100%	100%	0.0%	100%	97%	3.0
Long Term Care	Adults/Families are medically insured	97% of Medicaid applications are processed within 45 days	100%	96.9%	100%	100%	99.3%	97%	2.3
UVA Medicaid	Adults/Families are medically insured	97% of non-DSS Medicaid applications are processed within 45 days	100%	100%	100%	100%	100%	97.0%	3.0



# Services and Programs

While it may seem small, the ripple effect of small things is extraordinary.

-Matt Bevin



"Thank you very much! You are a wonderful representation of Social Services. Your director should be very proud...lovely job!"

"I appreciate all that you have done for me. You are one of the best caseworkers in Charlottesville. You take care."

"Thank you for always being there for me and thank you for always helping when I don't know something. You really make my day."

## **Services and Programs**

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#### **Prevention**

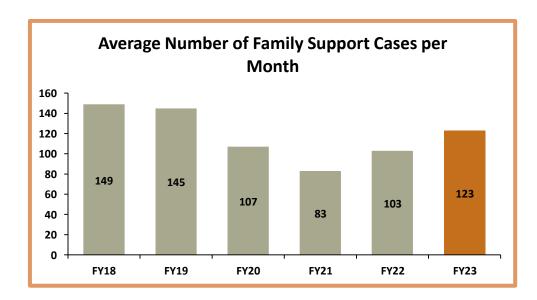
#### **Family Support**

The Family Support Program provides free and voluntary prevention services to Albemarle County students in elementary and middle schools, and their families. Family Support aims to empower children to meet their full potential through home, school, and community collaboration. The mission is to provide services that support children's growth and development, strengthen families, and promote school success.

Families receive case management and direct services in the home, school, and community settings to identify strengths and needs to mutually develop goals and strategies to enhance overall functioning.

Some of the services that Family Support Workers provide include:

- Acting as a bridge between school and home by supporting parents and guardians at important school meetings (IEP meetings, attendance meetings, SBIT meetings, parent teacher conferences)
- Assisting parents and guardians in identifying, obtaining, and maintaining stable housing, employment, childcare, training, and educational opportunities.
- Assisting parents and guardians in developing and maintaining budgeting practices to meet household needs and achieve financial goals.
- Linking families with medical, mental health and other community resources to strengthen the family and support healthy development.
- > Supporting children in the school setting to manage behaviors that may interfere with academic achievement.
- Coordinating regularly with teachers and parents/guardians to address academic, attendance and behavioral needs that may impact a child's ability to access their educational curriculum.
- Assisting families in identifying and accessing extracurricular enrichment activities to promote healthy development. These activities may include afterschool programs, summer camps, sports, dance lessons, and other community-based recreational activities that may be available.





#### Prevention (cont.)

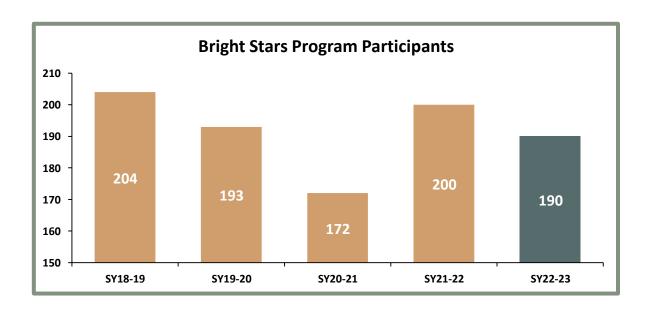
#### **Bright Stars**

The Bright Stars Program is a state, federal and locally funded, early intervention and prevention, comprehensive preschool program provided in collaboration with the Albemarle County Department of Social Services, the Albemarle County Board of Supervisors, and the Albemarle County Public Schools. In addition to a high-quality preschool experience, the children and their families are provided support and case management by a family coordinator through the Department of Social Services. The primary goals of the program are to:

- > Provide age-appropriate education and enrichment opportunities for children
- > Help families access community resources necessary to sustain safe and stable family life
- Facilitate early and active family involvement in their child's education
- > Serve as a model of collaboration among Albemarle County Department of Social Services, the school division and various community agencies.

Bright Stars preschool classrooms are located at the following elementary schools: Agnor-Hurt, Greer, Mountain View, Red Hill, Scottsville, Stone-Robinson, and Woodbrook. Children who are eligible for enrollment are served in their neighborhood school, where they will attend Kindergarten, with few exceptions. Teachers emphasize active learning in the classroom, recognizing that children learn best by doing, touching, feeling, and acting. There is an emphasis on learning through play. The children also participate in field trips throughout the Charlottesville community including places such as The Paramount Theater, orchards, and fire stations.

In School Year (SY) 2022-2023, the Bright Stars program supported 190 families with the program enrollment process, providing students with access to a high-quality preschool opportunity and families with wrap-around family support. The family coordinators maintained caseloads ranging from 18 – 20 families and achieved a 97% monthly home visit/contact completion average. No children in open cases entered foster care/kinship placements.



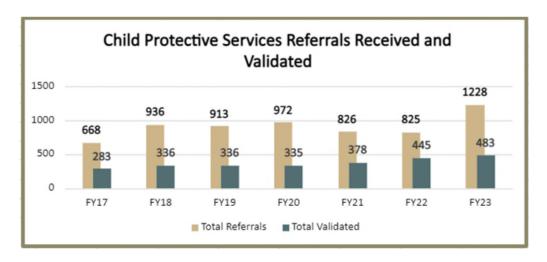
#### **Child Welfare**

#### **Child Protective Services (CPS)**

Child Protective Services (CPS) identifies, assesses, and provides services to children who have been abused or neglected and to their families. It is designed to preserve families whenever possible yet protect children and prevent further maltreatment.

The CPS program responds to validated reports regarding possible child abuse or neglect. CPS is non-punitive in its approach and seeks to enable families to provide adequate care for their children. CPS utilizes a Differential Response System, which often indicates a Family Assessment process is appropriate. This process is strength-based and service-oriented.

The CPS unit also provides foster care prevention services to families referred by the community and by Court Order, and attempts outreach to prevent child abuse or neglect by addressing risk issues before they result in maltreatment of children.



#### **Family Preservation Services**

The purpose of Family Preservation Services (FPS) is to prevent child abuse and neglect and preserve families through engaging practices that build capacity for families to provide safe, stable, and nurturing environments for their children. The FPS team partners with families facing many challenges that place their children at risk of child abuse, neglect, foster care, and/or out of home placement to keep their children safely in the home. Services provided:

- > Partner with families to create family-specific service plans that increase child safety, reduce risk, and build on the family's strengths to address needs. The initial service plan is usually created in a Family Partnership Meeting, a method of Family Engagement.
- Assists families in accessing resources and services that can help reduce risk and build protective capacity.
- > Helps children and families identify and connect with their natural supports such as extended family.
- Provides services and conducts assessments from a strengths-based, trauma-informed, and family-centered perspective.
- Conducts home visits, school visits, and team meetings.
- Offers clinical case management to children and families.
- > Collaborates with community partners such as Albemarle County Public Schools, the Court Services Unit, Region Ten, and local therapeutic providers.

#### **Child Welfare (cont.)**

In FY23, the FPS team served 100 families comprised of 228 children. Of the children FPS served, 95% were able to remain safely with their families while only 8 children who FPS served entered foster care, 6 of whom were placed with kinship foster parents. Additionally, FPS services helped prevent the recurrence of valid reports of abuse/neglect in 74% of the families served in FY23. On average, FPS cases remained open for 310 days and there were 47 FPS cases open each month in FY23. Due to our strong family finding efforts in child welfare, 52 of the children served through FPS were placed in the custody of relatives when our case opened and an additional 14 were placed in the custody of a relative to avoid foster care during our case. FPS also completed 8 Child Protective Services family assessments during FY23.

#### **Family Partnership Meetings**

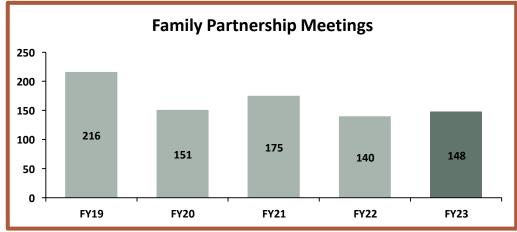
Family Partnership Meetings (FPMs) are strengths-based, structured, and facilitated meetings held at key decision-points during a family's involvement with the child welfare system.

Family Partnership Meetings bring together parents, guardians, and children with their natural support systems, service providers, and agency staff to work together and make plans that address the children's safety, stability, and well-being. Family Partnership Meetings are based on the following values:

- > Families are the experts on themselves
- All families have strengths and can make well-informed decisions about their children when supported
- > Teams often can make better and more creative decisions than individuals
- When families are involved in decision-making and share responsibility with DSS for achieving goals then outcomes improve for their children

In FY23, ACDSS held 148 Family Partnership Meetings (FPMs) that engaged a total of 1,735 participants in the decision-making process, 558 of which were family or other natural supports. Child welfare staff believe that family engagement is central to child welfare practice and that commitment is reflected in the combined 2,022 hours spent in FPM-related activities in FY23. In addition, we also served 12 families and 18 children through our intensive family finding program. In order to locate family, our family finders attempted to reach 828 individuals and engaged 134 natural supports for children who were not previously involved in their child welfare case. Through those efforts, 8 children were diverted from foster care, 3 children who newly entered foster care were placed with kinship families, and 2 children already in foster care at the time of the referral moved to a kinship family.



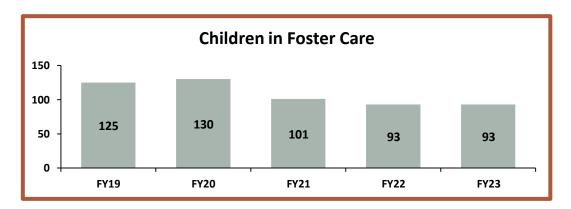


#### **Child Welfare (cont.)**

#### **Foster Care**

Foster Care is a protective service provided to children who have been placed in the custody of the Department of Social Services by the Court.

Children enter foster care due to neglect, abuse, abandonment, and other issues endangering their health and/or safety. When a child enters foster care, effort is always made to place children with suitable relatives or with people who may have had a prior relationship with the child that are not relatives.



All individuals who foster must meet the approval and licensing criteria. If a kinship placement is not available, children are placed with an approved foster family. In some instances, a treatment setting is needed depending on the needs of the child. All foster parents receive support as part of a team of individuals and agencies, working together in the best interests of each child.

The Albemarle County Department of Social Services has a partnership with Community Attention Foster Families (CAFF) to train, license, and approve foster families, including kinship. All foster parents must go through the training and approval process. There are multiple steps in the approval process to include preservice training, completion of a home study, and criminal record checks (fingerprints) to name a few.

#### **Fostering Futures**

Fostering Futures is a foster care program available to teens and young adults who turn eighteen while in foster care. This voluntary program allows the local department of social services to provide financial support, social support, and services to youth until age twenty-one. It can cover things like housing, education and/or job training assistance, and other independent living needs specifically for the youth. Eligibility requires at least one of the following:

- Attend school and/or vocational training
- Work at least eighty hours per month (part-time hours)
- > Attend classes to promote employment or remove barriers to employment
- Unable to meet one of those four criteria due to a documented medical reason

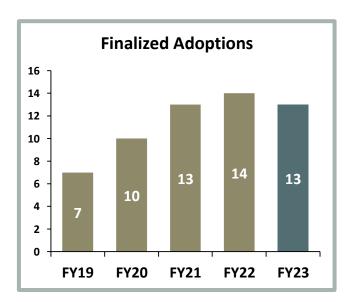
In addition, there needs to be demonstration of a willingness to work with the assigned foster care worker and allow monthly face-to-face visits with the worker. Youth must participate in the development of a transitional living plan, complete the Voluntary Continuing Services and Support Agreement (VCSSA), and attend court hearing(s), administrative review(s), and case planning meetings.

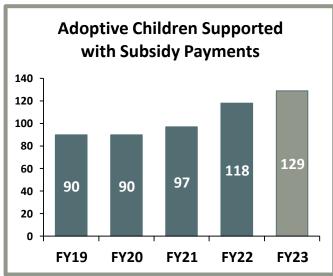
#### **Child Welfare (cont.)**

#### **Adoption Services**

Albemarle County Department of Social Services provides support to children in foster care with a goal of adoption who are navigating the legal process to finalization. This includes working to educate, prepare, and facilitate conversation and collaboration between birth families and adoptive families whenever possible. Extensive work is also done with the children and youth to prepare them for adoption and to help them process the loss, grief, and joy involved in this journey. Adoption allows for children who are unable to return home to parents or relatives to become a part of a permanent, loving, and forever family.

Building a family by adoption is fundamentally different than building a family biologically, with lifelong implications for the adopted individual, the adoptive parents, and the birth parents. The Department supports adoptive families post-adoption through monthly financial support, as well as access to a post-adoption worker. Adoption support is available from the Department from the time the adoptee is adopted until age 18, and potentially up to age 21.





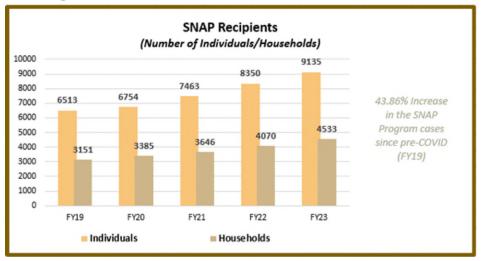


#### **Economic Assistance**

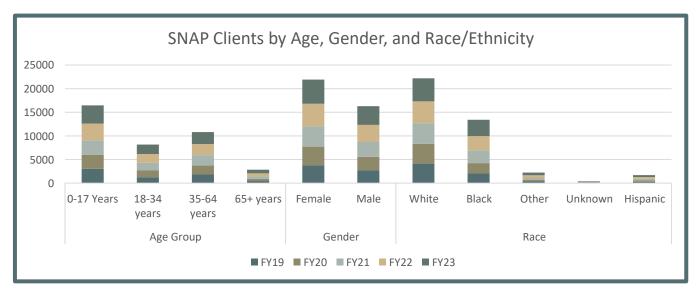
#### Supplemental Nutrition Assistance Program (SNAP)

SNAP supplements the budgets of low-income households to help assure a nutritionally adequate diet. Eligibility is determined by financial and non-financial criteria as well as household size. Benefits are issued electronically through an Electronic Benefits Transfer (EBT) card, which is similar to a debit card.

Just like all benefits programs, the inability to close or reduce benefits has left the SNAP caseloads larger than normal. In addition to the non-



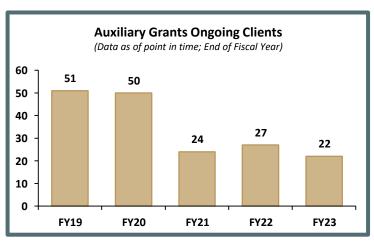
closure of cases that would have otherwise closed, the work requirement and clocks on benefit limits were removed.



#### **Auxiliary Grants (AG)**

An Auxiliary Grant (AG) is an income supplement for individuals who receive Supplemental Security Income (SSI), and certain other aged, blind, or disabled individuals who reside in a licensed Assisted Living Facility (ALF), an approved adult foster care home, or an approved supportive housing setting.

AG payments are issued to an individual monthly, to be used with a designated amount of their monthly income. The AG Program is 80 percent state funded and 20 percent locally funded.

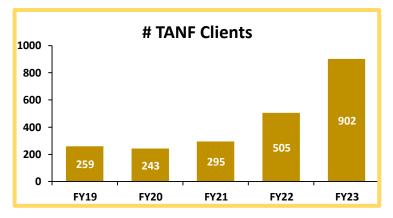


## **Economic Assistance (cont.)**

#### **Temporary Assistance to Needy Families (TANF)**

TANF provides time-limited financial assistance to enable families with children to become self-supporting and promotes economic independence. The TANF Program has consistently helped the most critically needy clients in Albemarle County. Within the position currently there are two senior level workers that process TANF applications and reviews.

At the end of FY2023, there were a total of 274 cases which included 902 children.



#### **Energy Assistance**

Energy Assistance helps low-income households in meeting their immediate home energy needs.

#### **Fuel Assistance**

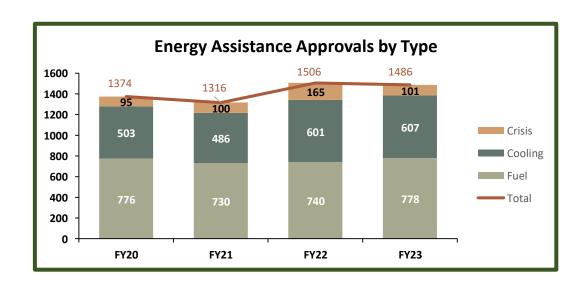
The Fuel Assistance Program helps with home heating fuel and related charges. Benefits are determined and authorizations for deliveries or services are sent to vendors in December.

#### **Cooling Assistance**

The Cooling Assistance Program provides for the purchase of window air conditioners and fans, or for repair of cooling equipment and/or payment for electricity for households.

#### Crisis Assistance

Crisis Assistance is intended to meet a household's emergency heating needs. This assistance offers heating equipment repair or purchase and/or a one-time only heat security deposit. Purchase of home heating fuel or payment of heat utility bill is available beginning January 1st.

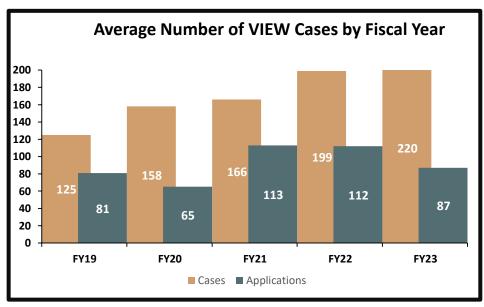


## **Self-Sufficiency**

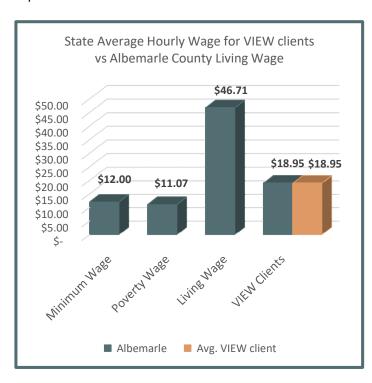
#### Virginia Initiative for Education and Work (VIEW)

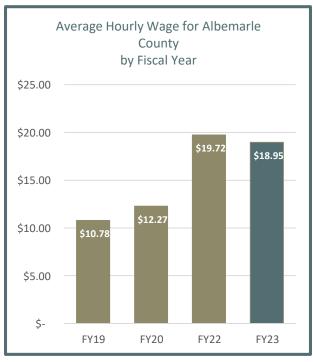
The Virginia's Initiative for Education and Work (VIEW) offers qualified parents the assistance and resources needed to find and keep a job. Adults aged 18 and over who are eligible for Temporary Assistance to Needy Families (TANF), and able-bodied parents are eligible to participate in employment assistance services.

An important aspect of the program is the strong support participants receive from their VIEW case manager, who focuses on each family's individual



situation and works with them to support their goals of employment and independence. VIEW focuses on the participants' strengths and provides services to help them overcome job-related challenges, as well as personal, medical, and family challenges that affect employment. Key features or requirements of the VIEW program include training on the job or at a vocational school, childcare assistance, and volunteering to gain work experience. Albemarle has seen a 76.61% increase in cases since FY19.

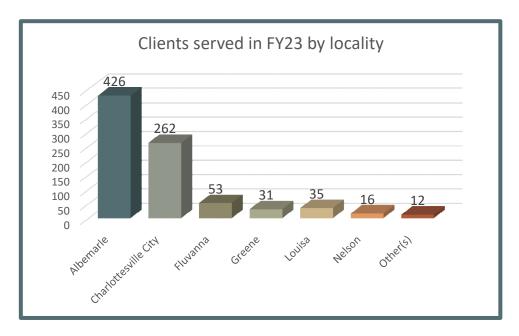




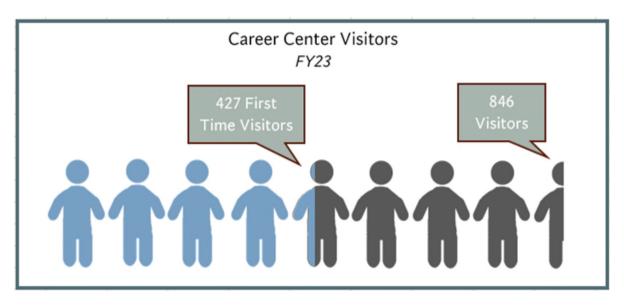
## **Self-Sufficiency (cont.)**

#### **Career Center**

The Albemarle Career Center provides career resources and services to prepare a workforce that is informed, capable and ready for work. Job seeker assistance at the Albemarle Career Center is free and available to the public. It is a partner of the Virginia Career Works – Piedmont Region which also includes the counties of Culpeper, Fauquier, Madison, Orange, Rappahannock, Fluvanna, Greene, Louisa and Nelson and the city of Charlottesville. The Career Center is considered a "one-stop shop" that can assist individuals with conducting successful job searches and provides guidance and support in all areas related to career advancement. Community partners that are also onsite to assist include PVCC (TJACE), Job Corps, and WIOA.



Services at the Albemarle Career Center that are available include: computers with internet accessibility; fax, telephone, and copier; resume software; a resource library including tv/dvd educational videos; local/regional and state employment information; and tools to help apply online and open or access your own e-mail account.

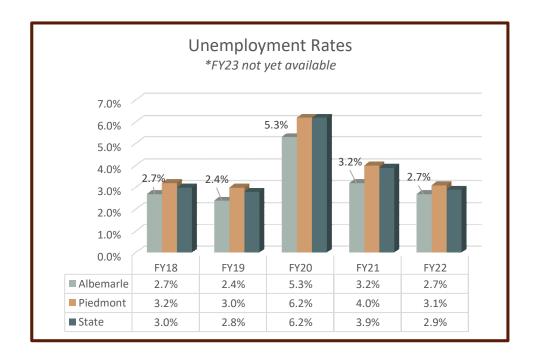


## **Self-Sufficiency (cont.)**

#### **Career Center (cont.)**

#### In FY 2022-2023, our Career Center:

- Held resume writing classes per month (virtually)
  - Average of 4-8 participants each class
  - Scheduled additional Zoom consultations for one-on-one assistance
- Provided job leads through email distribution to job seekers daily
  - Approximately 700 job seekers on distribution list
- Held Zoom meetings monthly with Region 10 clients for job search, job retention, and community connections
- Collaborated with Piedmont VA Community College (PVCC), Virginia Career Works, Network2Work, Downtown Center, and a host of other nonprofits to provide services focused on self-sufficiency services
- Worked with the Youth (high school aged) in the community to help build career pathways to success
- Continued outreach to the reentry population for job seekers who are recently released from incarceration.

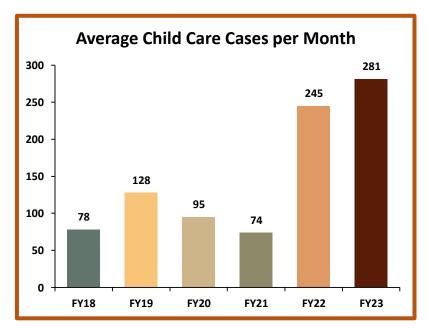


## **Self-Sufficiency (cont.)**

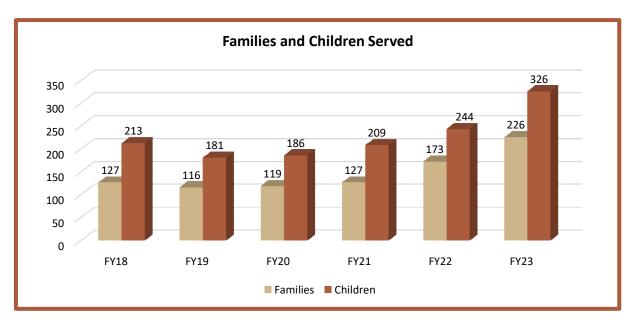
#### **Child Care Subsidy**

The Albemarle County Child Care Program supports families with the goal of self-sufficiency by administering financial assistance for a portion of childcare costs when eligible, while promoting parental choice and responsibility for children up to age thirteen. The Child Care Program also helps individuals looking to become a childcare provider or subsidy vendor. In FY23, there were 301 applications, 1,893 ongoing cases, and 1,180 information requests and referrals.

Parents/guardians gain assistance in finding quality, licensed childcare; learning the benefits of licensed childcare; discovering childcare and early learning options; applying for financial assistance, as well as access to an array of resources. Providers gain assistance with becoming a licensed provider; learning the new provider requirements; becoming a subsidy provider; and also receiving training and professional development.



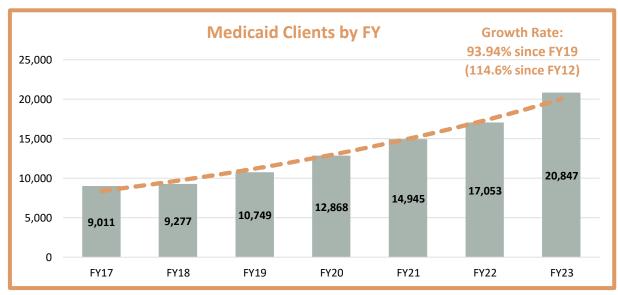
During the first intake interview with clients, Child Care Workers discuss with clients their 6-month, 2 year, and 5-year goals to be totally self-sufficient within five years. We review clients' goals at each renewal checking in to see how they are doing towards their goals. Sometimes clients are still working towards the same goals, but sometimes they pivot and change their goals. When clients reach milestones, we send a celebratory email. But if they finish training programs – i.e., nursing, associate degree, or bachelor's degree, we send a congratulatory card in the mail.

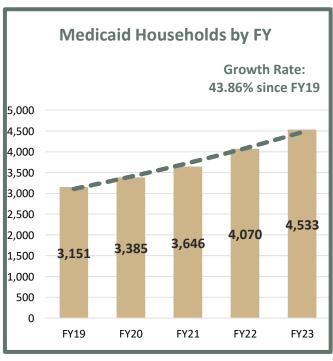


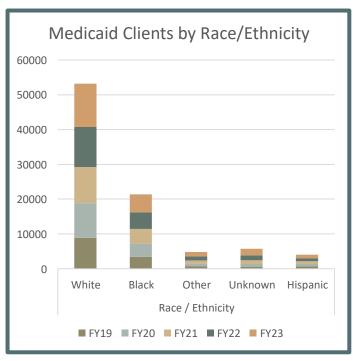
#### **Health Care**

#### Medicaid

Medicaid is a joint Federal and State program designed to provide essential medical and medically related services to the most vulnerable populations in our community. This vital program is the third largest source of health insurance after employer-based coverage and Medicare. It provides medical coverage to eligible low-income families, women, children, the elderly, and individuals with disabilities. Beginning in FY19, Virginia expanded its Medicaid program to provide more low-income adults with access to health care services, resulting in improved health outcomes.



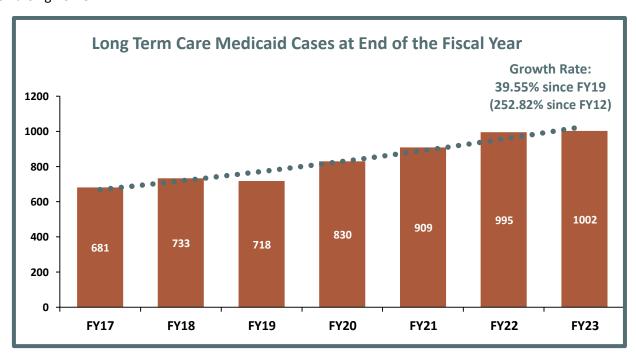




## Health Care (cont.)

#### **Long Term Care**

Long-Term Care is a form of Medicaid for nursing care or community-based care for adult living facility care and is provided through a specialized team of staff at ACDSS who understand the complexities of these services. Social workers at ACDSS complete assessments to decide the level of care needed. After evaluation, financially eligible individuals approved for nursing home level of care can receive that care either in the community or in the nursing home.





## **Health Care (cont.)**

#### University of Virginia (UVA) Medicaid Unit

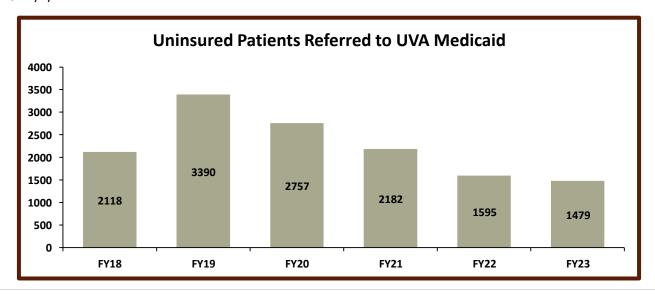
**The UVA Medicaid Unit** assists both inpatients of the hospital and outpatients of UVA's affiliated clinics, in applying for Medicaid.

The Medicaid Unit serves all residents of Virginia and is an intake processing unit only. Applications are taken at bedside for the convenience of the patient and/or their families, processed and then sent to the patient's local department of social services for ongoing case maintenance.

The Medicaid Unit has many partners to make the process as smooth as possible for the patients during their time of need.

- Patient Financial Services (PFS) Conducts preliminary financial screenings for patients, then sends a referral list of potentially eligible patients to the UVA Medicaid Unit so we can help them apply for Medicaid and process the application.
- > UVA Social Workers Refer patients who need to be screened for Medicaid, bridge our communication between the patients and their families, assist the patients in getting the needed verifications.
- ➤ Local Department of Social Services We work closely with the local agencies to ensure timely enrollments if the UVA Medicaid unit cannot complete the enrollment in house.

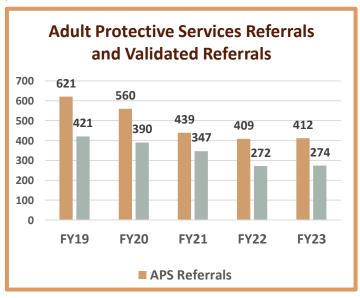
The UVA Medicaid Unit has been collaborating with the UVA Social Work Department, UVA Case Management Team, and the Local Department of Social Services across the State, in helping patients get enrolled in Medicaid Long Term Care coverage. These requests are often urgent discharge placement needs to a facility. Often times the Long-Term Care facilities will not accept a patient unless they have a Long Term Care Insurance in place. These patients are usually not able to apply for themselves, meaning the UVA Medicaid Team works closely with the Social Workers to identify a relative who can apply on the patient's behalf. Our workers will work these cases urgently and pursue getting the application, which in these circumstances can be very challenging. If these patients cannot be discharged timely it will prevent a new patient from being admitted due to a bed not being available. By assisting in this process, it is a win-win for both the existing patient needing placement and a new patient needing inpatient care. The Unit has also begun receiving and processing applications for patients from the Prince William and Hay Market hospitals, which UVA acquired full ownership of on 7/1/22.

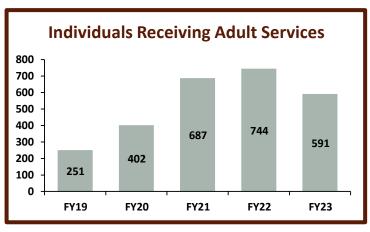


## **Adult/Elder Services**

#### **Adult Services**

Adult Services is a program that enables adults to remain in the least restrictive setting and function independently. This program provides long-term care, prevention services, nursing and adult home screening and placement services, guardianship oversight and adult protective services.





#### **Adult Protective Services (APS)**

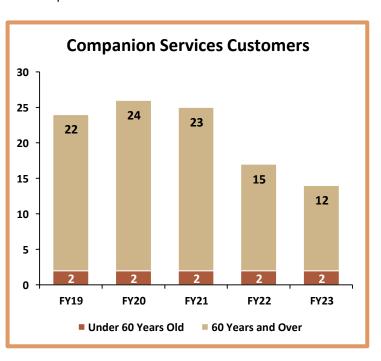
APS investigates reports of abuse, neglect, and exploitation of adults over 60 years of age and incapacitated adults over 18 years of age. The goal of APS is to protect a vulnerable adult's life, health, and property without a loss of independence. When this is not possible, APS attempts to provide assistance with the least disruption of lifestyle and with full due process, protection, and restoration of the person's liberty in the shortest possible period

of time. ACDSS has Memorandums of Understanding (MOU) with both UVA hospital and the Albemarle County Police Department outlining when to make an APS referral, each partner's role in an investigation, and how to work together to handle difficult discharges and guardianship cases.

#### **Companion Services Program**

Companion Services is an option for eligible adults with an impairment who need services or support to enhance self-sufficiency and improve their quality of life. These services are performed by an individual or an agency provider who assists adults who are unable to care for themselves without assistance and where there is no one available to provide the needed services without cost. Individuals must meet both income and functional criteria to qualify.

Companion activities include, but are not limited to bathing, dressing, toileting, meal preparation, eating/feeding, transportation, shopping, supervision, light housekeeping, household/financial management, and companionship.

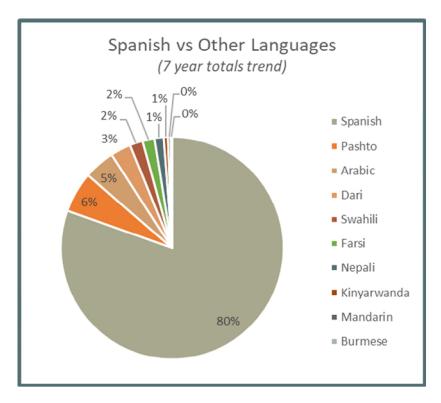


## Language Assistance

ACDSS receives requests for benefits or services from significant numbers of persons originating from other countries, many of whom speak a language other than English as their primary language, and who have limited ability to speak English (Limited English Proficiency - LEP). It is a requirement of Title VI of the Civil Rights Act that LEP persons have meaningful access to our programs. To serve our LEP clients, we provide interpreter services through staff who are competent in a second language and through contracted face-to-face and telephonic interpretation.

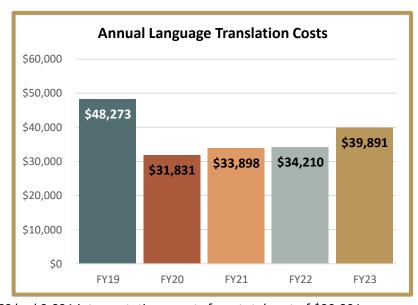
7-Year Trend for Language Usage									
	7-year								
Language	Total	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23
Spanish	12416	883	766	866	3107	1392	1409	2264	2612
Pashto	908	1	0	18	106	75	126	154	429
Arabic	691	29	106	121	72	52	70	102	168
Dari	458	40	17	20	25	6	25	99	266
Swahili	291	1	12	51	60	34	39	55	40
Farsi	269	17	19	21	10	11	7	106	95
Nepali	206	56	43	20	22	39	34	15	33
Kinyarwanda	93	12	0	0	15	34	14	0	30
Mandarin	64	6	15	20	0	17	6	0	6
Burmese	32	35	30	0	0	0	0	0	2



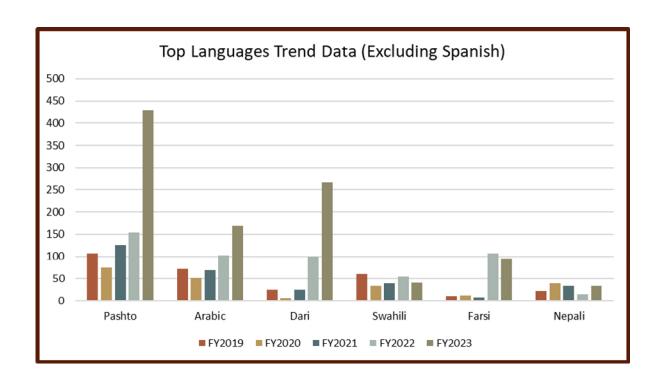


## Language Assistance (cont.)

We are proud to report that ACDSS has increased the capacity for language services supporting LEP clients over the past year by doubling the agencies utilized for translation/interpretation services, from one to two agencies, Voiance and Propio. Additionally, the front office staff were given the option of a handheld device called a "Dodo Duck" which offers on the spot translation utilizing voice recognition technology to translate both the client and the staff member in a mediated conversation between them and the device. The device offers a faster response to lobby customers who only need to let staff know their need, thus cutting time waiting in the lobby for clients and allowing the front office staff to



gain efficiency in their other duties. In FY23, ACDSS had 3,831 interpretation events for a total cost of \$39,891. Spanish has consistently been the most frequently used language, this year counting for 68% of the LEP services provided. The next highest languages utilized are Pashto, Dari, Arabic, Farsi, and Swahili.



## **Business Services**

**Business Services** is a division that serves as a key support resource for all ACDSS operations. This work includes budgeting and financial planning, developing agency strategic and operational initiatives, and complying with all federal, state, and local financial requirements.

Federal and State resources that are brought into the community through ACDSS provide a tremendous economic boost to local businesses and help to sustain local employment. Funds support jobs in the medical and childcare arenas, as well as the housing, grocery, and energy sectors.

#### Federal/State/Other Funds

Supplemental Nutrition Asst. Program	m	\$ 17,553,781
Medicaid		\$ 162,515,986
TANF		\$ 1,123,513
Energy Assistance		\$ 713,444
FAMIS (Total Title XXI)		\$ 5,844,770
Child Care (VACMS)		\$ 1,718,024
Other Federal		\$ 7,313,586
Other State		\$ 2,840,178
Sentara M.J.H. Child Dental Grant		\$ 2,500
UVA Medicaid		\$ 590,884
UVA Medicaid Generated Revenues		\$ 8,789,282
Comprehensive Services Act (CSA)		\$ 7,282,336
Central Service Cost Allocation		\$ 609,364
	TOTAL	\$ 216,897,648
		95.4%

#### Local Funds

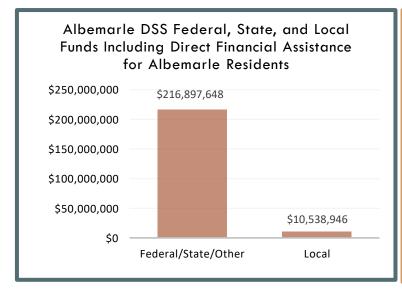
Albemarle County Social Services Funds:	
Local Match - General Fund	\$ 5,966,414
CSA Transfer - General Fund	\$ 2,172,532

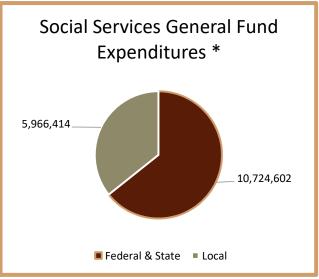
#### **Albemarle County Schools Funds:**

CSA Transfer	\$	2,400,000
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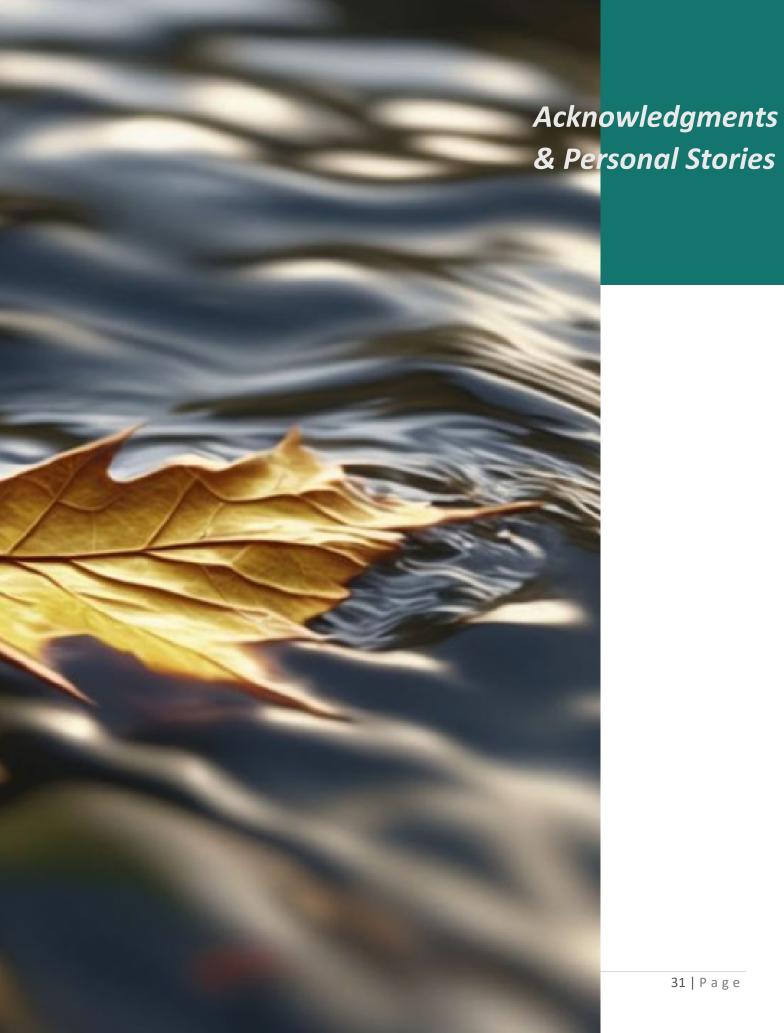
*TOTAL* \$10,538,946 4.6%

Federal/State/Other Funds						
FY2018-19	\$ 142,537,106					
FY2019-20	\$ 144,100,167					
FY2020-21	\$ 176,022,157					
FY2021-22	\$ 188,924,006					
FY2022-23	\$ 216,897,648					





<sup>\*</sup> Does not include CSA transfer



The Albemarle County Department of Social Services continuously strives to provide quality customer service to its citizens through perseverance, dedication, and commitment to service. Below are just a few personal stories and acknowledgements.

A child care subsidy client was able to utilize the child care program and complete her nursing degree. She passed her NCLEX in June 2023 and is now a registered nurse at Sentara Martha Jefferson Hospital. Even with her promotion and increase of wages, the client was able to retain child care thanks to the expanded income limits of the subsidy program. Despite the approval, the client communicated that she no longer required the assistance of the program thus the case was discontinued per her request. The client expressed her desire to continue work towards financial stability and ultimately obtain a job as UVA Emergency Room nurse.

A Bright Stars family whose child was presenting with very low need at school and with no concerns related to safety, permanency and wellbeing was staffed to be closed. However, during a conversation it was discovered that the child had been exhibiting very different behavior at home which seemed to indicate a low self-esteem and low sense of self-worth. FSW provided one on one support for the child and discovered that this student was having very big feelings related to their own gender expression and identity. Due to the positive relationship built over several months with this parent, she was able to selfadvocate for her child's needs and shared that information with her worker to follow up. FSW was then able to advocate for services and supports for this child to address those feelings and improve the negative behaviors being observed at home.

Family Preservation Services became involved with a family in September of 2022 as the court's request to try and locate two children who were in the custody of their grandmother. The grandmother had taken the children out of school, stopped taking them to medical and dental appointments, and isolated them from their community and the outside world. The biological mother had lost custody of these children 10 + years ago, around which time their father was killed. Since the removal, this mother had addressed the concerns that led to the removal and filed frequent custody petitions in attempts to reunite with her children. When Family Preservation Service started their family finding processes in locating the children, this mother helped in these efforts, and was open to any services necessary in the hopes she could reunify with them once they were located. For months, extensive family finding efforts took place and the children were still not located. In December of 2022, the court granted the biological mother temporary custody, and she was able to put out a missing children's report. Later that month, the grandmother returned the children to their mother. To help with the transition, the mother participated in parent mentoring services and worked closely with the department. The children received the medical, dental, and behavioral health services they were previously not receiving. They got enrolled in school, and the oldest son got a job. A final custody order was issued in July of 2023 and the children remain with their mother.

As a family coordinator, I supported a family of 5 with 3 small children under the age of 5, who recently immigrated to the United States. Initially, the family was experiencing unstable housing, residing with various families within Albemarle. I was able to assist the family with securing stable housing, navigating the educational system for the oldest child, and accessing other resources to help them acclimate to a new country which included referrals to Loaves and Fishes, Piedmont Care Closet, and Child Health Partnership. The mother expressed her gratitude for all the support provided to ensure the family's stability.



Kim, a Bright Stars Family Coordinator, has been assisting a guardian, an aunt, who has been raising her nephew through a kinship placement. The child has been in the aunt's care since he was an infant. In partnership with Kim, the aunt is actively engaged with the program and school, has met with her regularly, and been open to receiving resources and support. The child is thriving, cheerful, caring, and so loved and...was recently adopted by the aunt! This success story highlights the commitment and importance of the agency's cross-unit collaboration.

"Thank you for all the support and kindness during the school year and this holiday season. I was in tears when I opened the box (Dad) brought home... he was too. I'm speechless. We are beyond grateful for our SRE community. I know there will come a time when we can pay it forward."

"We appreciate the school community so much. I was getting misty eyes like I was watching a Tom Hanks film earlier from the generosity. It really does take a village."

"Watching my son grow and form friendships has been remarkable. He stayed home with our family for the first 4 years of his life and Bright Stars has given him the opportunity learn social skills and so much more. You've helped us navigate a school system that is different from what we grew up with in Afghanistan."

Through coordination with the Elks Lodge, 150 families in need served by the Family Support & Bright Stars teams were provided a Thanksgiving meal.

I worked a Family Preservation case with a family that included a single mother with three young children. This family faced chronic homelessness and I was able to obtain funding to house them in a hotel for over two years. Early on in the case, I was able to help the mother obtain a Family Unification Program (FUP) voucher which would provide a substantial amount of rent assistance for her family. Despite being brought to the department's attention for concerns of abuse/neglect, this mother really turned things around and was able to hold a full-time job while juggling and meeting the demanding needs of her children, all while living in a small hotel room. Unfortunately, due to the mother's criminal history, no apartments would accept her applications despite having a voucher. I helped her request several voucher extensions to ensure that she didn't lose the voucher entirely, which required the mother to be a strong advocate for herself and the work she was putting in to achieve stability for her family. I was able to obtain funding for the mother to work with a parent mentor who teamed up with me to help advocate to landlords in the community to give the family a chance. The mentor and I wrote advocacy letters on behalf of the mother and personally talked with multiple landlords to explain her situation. After two years, we were able to find an apartment complex that would accept the mother's voucher and allowed the family to move into a 2-bedroom unit. This resulted in a successful case closure and ultimately an awesome success story for the family.

An elderly gentleman, after losing his wife, was vulnerable and preyed upon. A woman dining in a local restaurant where he was dining introduced herself. She shortly became his "caregiver". She provided him false information about his children taking advantage of his finances. She then convinced him to allow her to assume responsibility. The APS investigator learned the "caregiver" was isolating him by making him stay in his bedroom and only coming out at her discretion. He also had audio recordings of her abusing him verbally. The difficulty in this case was the gentleman believed and trusted the woman. He was on her side. The adult children were very concerned; however, knowing their father's unbelief about her initially chose to not push the issue until after a third report of concern was received.

The last report came from a concerned restaurant owner. The caregiver was yelling at the man inside the restaurant that gained much attention from other customers. He had noticeable injuries that she tried to explain; however, did not make sense. She pulled out his credit card to pay for the meal. With red flags flashing her story began to unravel. The client's children were outraged and filed for an immediate temporary guardian order. The APS worker's persistence, patience, and tenacity paid off. The client is fully safe and protected. The caregiver has an upcoming court date. Hopefully she will be convicted setting a precedence for this type of abuse to not be tolerated.

"Out of all the social service agencies, we love working with Albemarle County APS the best!"

"Thank you for letting me tell my story."

"Thank you for letting me vent."

"Thank you for buying my lunch and spending time with me. I am so appreciative and feel like someone cares."

"Thank you so much! This is so helpful. All my questions and concerns have been adequately addressed."

Before the school year even began, my work with this family had hit the ground running. The family met criteria for homelessness since they were living in shared housing with the Bright Stars student's grandparent. Early on, it became apparent that the child's mom was overwhelmed with personal and financial stress, in addition to her child struggling with significant behavioral problems in the classroom. Step-by-step, I began to build a trusting relationship with the mom who was initially closed off and tentative to open up. I began to coach mom how to advocate for herself and her child, set boundaries with family members, and share her concerns and ideas with the school support staff. Together, we came up with strategies that could be used in the classroom and at home to support her child in learning to self-regulate. As our relationship continued to develop, I was able to encourage her to explore the idea of and to start therapy for her child, which she has previously been hesitant about. Every step of the way, we made decisions together, empowering mom to strive for her personal and family goals. While the mom continues working toward achieving the goals she has established, she has secured more financially stable employment, and was approved for and moved into an apartment so that her family is living independently.

The ACDSS Front Desk staff was involved with a Community Partner to have a Coat and Toy drive. The feedback was very positive. ACDSS Social Workers voiced that a mother that received 3 coats was crying and so thankful. The community partners were very happy to get involved and gave more coats than were asked for.

I recently assisted a mom in contacting her local worker who was not responding to her voicemails or emails. I did not have a current referral for the client, but they reached out for assistance. The client was very upset because she wasn't able to schedule her daughter's surgery without her having Medicaid. The client had an open Medicaid case and was trying to submit medical bills to meet the spenddown amount. I emailed and called the worker and within 24 hours a response was received.

ACDSS FPS became involved with a family due to severe substance use and the mother's overdose that the children were present for. After FPS became involved additional concerns were brought up to include the children not having basic needs being met in the home, the water being disconnected, the parent's continued substance use, frequent visitors to the home under the influence of substances, the children not receiving mental health services, and truancy. FPS attempted to provide services and support to the family while the children remained in the mother's home. Unfortunately, the children were removed to ensure safety for the children. FPS continued to try and support the mother to address the safety concerns to support visitation and the family's goal of the children returning home. A maternal cousin was able to obtain custody of the children and provide them with stability for the first time. The children began to thrive in the care of their cousin who provided support, stability, and access to mental health treatment. The oldest child who was affected by depression and thoughts of self-harm was able to build confidence, engage in after school activities, attend therapy and go to school every day. The youngest child was able to get the necessary medical care that he was desperately in need of to address sleeping concerns, mouth pain that affected his ability to eat, was able to attend school daily and catch up to grade level, and successfully be discharged from intensive in-home services. The children began having family game night in their guardian's home and felt comfortable enough to talk about their concerns for what was going on in their mother's home, felt like they could talk about age-appropriate problems, and build their friend and support group. The children went to the beach for the first time ever and were beginning to experience new things. The guardian made the hard decision to begin working part time rather than full-time so that she was able to be present for the children to provide consistency and ensure they had the level of need of services they needed. The caregiver was able to set necessary firm boundaries with the parent and is a permanent placement for the children if their mother is not able to regain custody. At closure, the family was connected to support in the school, community, services and reported feelings of safety and love. This family's FPS case is a good example of how keeping natural supports engaged throughout the life of a family preservation services case can mean that those supports are ready to come to the table and step in during a crisis to keep kids out of foster care, even when it challenges their relationships with adult family members.

Family Preservation joined a case that was open to Foster Care. There were 3 children in the home, with the oldest sibling being removed and entering foster care. When Family Preservation became involved, both the father and mother of the younger two children still living in the home were very closed minded about parenting skills and could not see what they could have done better for the older child who was removed as they felt they had done everything their religion commanded of them. Due to the family's language barrier, parent coaching services took about 3 months to begin and at the time of the initial session the family was not very invested or engaged in services. However, with the continued partnerships, the parent coach was able to engage the parents by teaching them about brain development and trauma. Within the first month of this service, the parents could understand where they had room to improve in their parenting and discipline techniques. The mother also started counseling services and eventually separated from the father while both maintained a very strong parenting relationship. After about 6 months of parenting services, the family was much more stable, and FPS was able to close this case successfully. Since then, no other reports of abuse and neglect have been received. Although parental rights were terminated, the mother has a much stronger relationship with her oldest daughter who continues to be in foster care.

The family coordinators from Greer, Agnor-Hurt and Woodbrook Elementary Schools planned and hosted an event at the Greer library for parents whose children attend school in the northern part of the county to learn about the services available in the community for their children. Some of the resources shared included the Albemarle County Summer Playground program and free passes, the Northside Library Summer activities' program, the Elk's Boys and Girls Camp, Swimming lessons at Frys Spring Beach Club, and the YMCA Free Teen Memberships.

A Medicaid client was terribly upset after receiving notice that he and his wife were set to be closed out of benefits due to income. He contacted the worker and stated his current income is much different than even the month prior. The worker asked him to send his most recent month of pay stubs if he believed this was more reflective of what his income will be ongoing. The client sent the information, the worker re-evaluated the information, and his current income resulted in an ongoing approval. The client was exceptionally grateful and responded with, "I am so calm now. I don't know how to show you appreciation for your kindness."

Child Protective Services worker, Pedro Martinez, has made a positive impact in our community and in the families' lives that he encounters. He is breaking barriers in preconceptions in the Spanish speaking community about CPS by serving as an advocate and instilling trust in the families that he encounters. He is providing culturally sensitive and informed education and guidance to parents and families in the community to help ensure their children are safe and that they are connected to community resources. Pedro advocates for the families that he works with by ensuring an inclusive and diverse approach. Pedro recently engaged a family that has nearly a decade of CPS intervention, in a way that other child welfare workers may not have been as successful and made a meaningful impact in their life in hopes to prevent generational abuse/neglect. Through conversations with the family, Pedro allowed a mother to reflect and make an informed decision about the trajectory of her 17-year-old daughter's life, leading her to decide not to give up on the relationship with her daughter. During Pedro's initial response, it was clear the mother felt defeated; she expressed no intention to repair the relationship with her daughter. After the mother met with Pedro to ensure the imminent safety of her daughter and having a lengthy conversation about the hardships that their family has encountered and motivational interviewing by Pedro, the mother advised Pedro that after giving their conversation further thought, she obtained an apartment separate from her adult children, into which her pregnant daughter planned to move with her, so that she could be there for her daughter to support her through her pregnancy. Previously, this mother and child declined recommendations made to them by child welfare workers, but they were able to connect with Pedro during the current CPS intervention to ensure a positive outcome. Pedro connected the mother and child to a community-based, early intervention, home visiting program to improve outcomes for children, and specifically, for this pregnant, young mother.

A Family Support Worker worked tirelessly to collaborate with All Blessings Flow, UVA, and Journey Middle School for a middle schooler diagnosed with a muscular dystrophy type disease who needed a motorized wheelchair and other accommodations to provide this young lady opportunities for some autonomy.

The Family Support program collected almost 150 new books to promote reading and literacy for low-income children across Albemarle County. Each book has a bookplate sticker inside ("This book belongs to....") for the child to write her name in the promotion of book ownership and love of reading.

#### VISION, MISSION, AND VALUES

VISION: Individuals and families in Albemarle County are able to meet their full

potential and plan for the future.

MISSION: Albemarle County enhances the well-being and quality of life for all citizens

through the provision of the highest level of public service consistent with the prudent use of public funds. ACDSS will achieve that mission by providing and engaging individuals in services that enable self-sufficiency and support

individual and family safety and well-being.

**VALUE PROPOSITION:** We listen to your needs, and we work with you to find solutions.

**CUSTOMERS:** Our primary external customers are individuals and organizations who use our

services and those who are in need of services. Staff are our internal customers.

#### THE ROLE OF OUR ORGANIZATION

**ROLE:** The Department will play several roles in furtherance of our vision and mission:

• We will be an advocate for the people we serve.

- We will endeavor to catalyze change in the community.
- We will be stewards for the safety and security of our customers.
- We will be a community facilitator and convener.

#### **COUNTY OF ALBEMARLE'S CORE VALUES**

The Department's core values support Albemarle County in its commitment to

**COMMUNITY:** We expect diversity, equity, and inclusion to be integrated into how we live our mission.

INTEGRITY: We value our customers and co-workers by always providing honest and fair treatment.

**INNOVATION:** We embrace creativity and positive change.

**STEWARDSHIP:** We honor our role as stewards of the public trust by managing our natural, human and financial resources respectfully and responsibly.

**LEARNING:** We encourage and support lifelong learning and personal and professional growth.