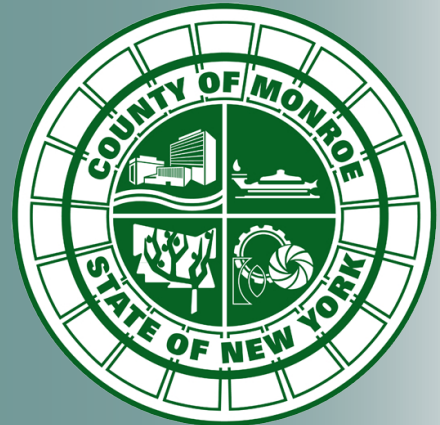


2019

ANNUAL REPORT



Adam J. Bello
County Executive



Corinda Crossdale
DHS Commissioner

**Monroe County
Department of
Human Services**

Table of Contents.....1-2

Message from the County Executive3

Message from the Commissioner4

2018 Monroe County Legislature5

Monroe County6-7

Mission and Vision8

Human Services Highlights9-10

DHS Organizational Chart11

2018 Budget Overview12

FINANCIAL ASSISTANCE DIVISION13

 Temporary Assistance14-17

 Temporary Housing Assistance and Homelessness Prevention17

 Income Eligible Day Care18-19

 Supplemental Nutrition Assistance20-22

 Medicaid22

 Home Energy Assistance23

 Child Support Enforcement23-24

 Fair Hearings25

 Centralized Document Management and Front-End Support25

 Special Initiatives26-27

CHILD AND FAMILY SERVICES DIVISION28

 Child Protective Services28-29

 Foster Care30

 Preventive Services31

 Adoption and Permanency31-32

 Adult Protective Services32

 Juvenile Justice33

Monroe County Department of Human Services – Annual Report 2019

Family Access and Connections Team34

OPERATIONS35

FINANCE DIVISION35

STAFF DEVELOPMENT35-37

YOUTH BUREAU38-39

OFFICE FOR THE AGING40-41

OFFICE OF MENTAL HEALTH42

 Services in the Community42-45

 Priority Services –Youth and Adult46-47

 Forensic Mental Health Services48

OFFICE OF FAITH BASED AND COMMUNITY INITIATIVES49

CHILDREN’S DETENTION CENTER50-51

Conclusion52



Message from the County Executive

The first few months of my inaugural year have shown the enduring strength of our community. Despite our challenges I hold on to the faith that we will pay tribute to those things that binds our community together. As County Executive, I will continue to fight for equity and inclusion, so our futures are not determined based on the colors of our skin, the doctrines of our faith, where we

live, or who we love. This country made a commitment to its people over two centuries ago:

“We hold these truths to be self-evident, that all men are created equal; that they are endowed by their Creator with certain unalienable rights; that among these are life, liberty, and the pursuit of happiness.”

Our entire country and our community continue the long journey to breathe life and meaning into those words that remain critically important today. We have long known that we must change with the times. The faith that you’ve placed in me as your County Executive is an indication that our community is hungry for that change. We have introduced the change that our community seeks in just a few short months. Doing this takes the energy, faith, and collective action of a community with an eye toward preserving the rights and freedoms of all Monroe County residents.

Together we have diversified Monroe County’s workforce by bringing in different voices and perspectives that represent who we are as a community. An executive order was signed to ensure the women in our community receive equal pay for equal work. Legislation was approved to create Monroe County’s first Department of Diversity, Equity, and Inclusion, to root out the inequities in our own system and to create sustainable mechanisms to maintain our good work. We have stood up the RASE Commission to seek long-standing change through laws, policies and practice. We are only as strong as our linkages together and that is why we’ve onboarded the first ever Monroe County Addiction Services Director to ensure our services in chemical dependency treatment are delivered in a communitywide coordinated effort. Our commitment to supporting our community’s most vulnerable has never been stronger and serves as our driving force to maintain a solid workforce. We have not furloughed any County staff and are on track to introduce a balanced budget despite a national pandemic.

When the calendar turned over to 2020, none of us could have envisioned the reality in which we are now living. Personally, and professionally, the past few months has brought heartache and challenges, but mostly opportunity for growth and new perspective.

The demands we are facing cannot be overcome by acting alone. As we write our narrative for the future, let our story be that when our community faced its greatest test, we stood fast and did not falter. Instead, we set our sights on delivering a brighter tomorrow for future generations by working together as one community.



Message from the Commissioner

Coming into 2020 our community has faced unprecedented challenges, in the form of a national pandemic layered with civil unrest. Despite what seems like impossible tests I hold on to the faith that our community will remain true to those things we know are right; we have seen that, when we continue to push and fight for that right the world gets a little better each time.

We have heard the cries of our community and the frustration that has led to the fight for equity and like those who have fought this fight before them we understand the sacrifice and we don't take for granted. The Department of Human Services remains committed to bringing in the community voice in all that we do.

This can only be achieved by working hand in hand with civic leaders, residents, and our community partners, they are the driving force behind how services are delivered.

In maintaining that commitment, in 2019, DHS reinvigorate the Citizens' Advisory Council. This dynamic group of dedicated community members are working together with DHS to enhance and reinvent the human services delivery experience for our most vulnerable residents.

The strong economy in 2019 was reflected in the high employment rate and low usage of cash assistance, helping our community members realize independence and financial stability. Both the Safety Net (SN) and Temporary Assistance to Needy Families (TANF) caseloads continue the steady decline that has taken place over the past ten years. **Since 2010**, the **average** monthly **caseload** has **decreased by over 41%**. SNAP caseloads also continued to decrease, to 64,832 in 2019. SNAP benefits continue to provide critical support and nutrition services to members of our community.

Calls to the State Central Registry from our **community members** continue to be the **highest reporting source** to our Child and Family Services area, accounting for about a third of the **9,764 reports** of child abuse or maltreatment in 2019. Caseloads have continued to decrease, and practices continue to be strengthened, the average **caseload sizes** in 2019 are **30% lower** in than 2018.

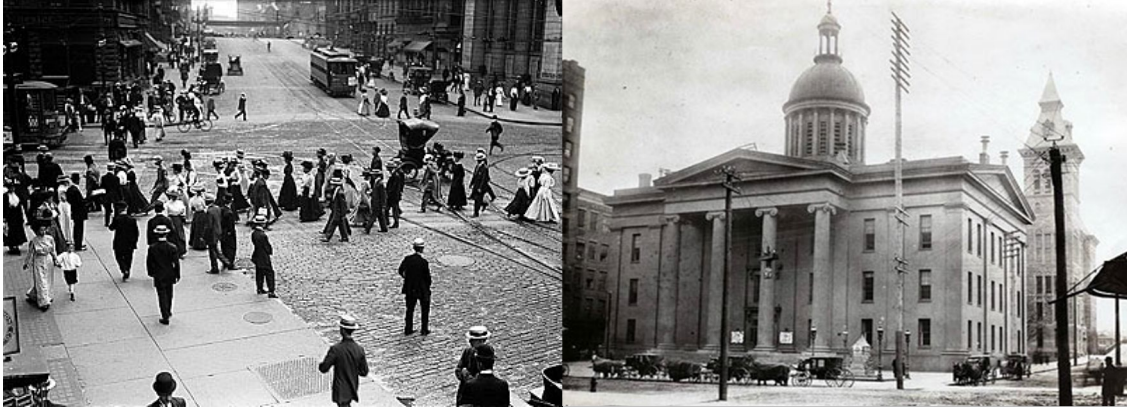
The change in administration in 2019 presented new opportunities and new faces. I am excited to leave you in capable hands of incoming Commissioner Thalia Wright while I continue to work alongside this amazing department in my capacity as Deputy County Executive of Health and Human Services. "Sometimes we can only find our true direction when we let the wind of change carry us." (Mimi Novic) This has never been truer than in our current environment. We never could have anticipated all that awaited us at the conclusion of 2019, but we have demonstrated courage, vulnerability, dedication, and ingenuity that will forever change us as an organization and a community. "Challenges are gifts that force us to search for a new center of gravity. Don't fight them. Just find a new way to stand." (Oprah Winfrey)

Now is the time for our community to seize the moment to rise because it is only when everyone is presented with opportunity that we become a stronger people and County.

2019 Monroe County Legislature

District	Legislator	Party-Representing
1	Edwin Wilt	R – Greece, Parma
2	Mike Rockow	R – Clarkson, Hamlin, Sweden
3	Tracy DiFlorio	R – Chili
4	Frank X. Allkofer	R – Gates, Ogden
5	Karla F. Boyce	R – Henrietta, Mendon, Pittsford, Rush
6	Fred Ancello	R – Greece
7	Brian E. Marianetti	R – Greece, Rochester
8	Matthew Terp	R – Webster
9	Debbie Drawe	R – Penfield
10	Howard S. Maffucci	D – Brighton, East Rochester, Pittsford
11	Sean M. Delehanty	R – Fairport, Perinton
12	Steve Brew	R – Chili, Henrietta, Riga, Wheatland
13	John J. Howland	R – Henrietta, Pittsford
14	Justin Wilcox	D – Brighton, Henrietta
15	George J. Hebert	R – Penfield, Webster
16	Dr. Joe Carbone - President	R – Irondequoit
17	Joseph D. Morelle Jr.	D – Irondequoit
18	Kara Halstead	R – East Rochester, Perinton
19	Kathleen A. Taylor	R – Greece, Parma
20	Mike Zale	R – Greece, Ogden, Sweden
21	Mark S. Muoio	D – Rochester
22	Vincent R. Felder	D – Rochester
23	James M. Sheppard	D – Rochester
24	Joshua Bauroth	D – Rochester, Brighton
25	John Lightfoot	D – Rochester
26	Tony Micciche	R – Gates, Greece, Rochester
27	Sabrina LaMar	D – Rochester
28	Cynthia W. Kaleh	D – Rochester
29	Ernest S. Flagler-Mitchell	D – Rochester

Monroe County



Monroe County, New York, named for President James Monroe, was created from portions of Ontario and Genesee Counties on February 23, 1821. Today, Monroe County is comprised of 19 towns, 10 villages and the City of Rochester, the third largest city in the state, with a land area of 663.21 square miles. Based on the US Census Bureau information, Monroe County is currently home to 742,474 people, with 206,284 of them living within the Rochester city limits. The County's population has remained relatively stable since 2010, as has the population of the City. (Source: census.gov, US Census Bureau)

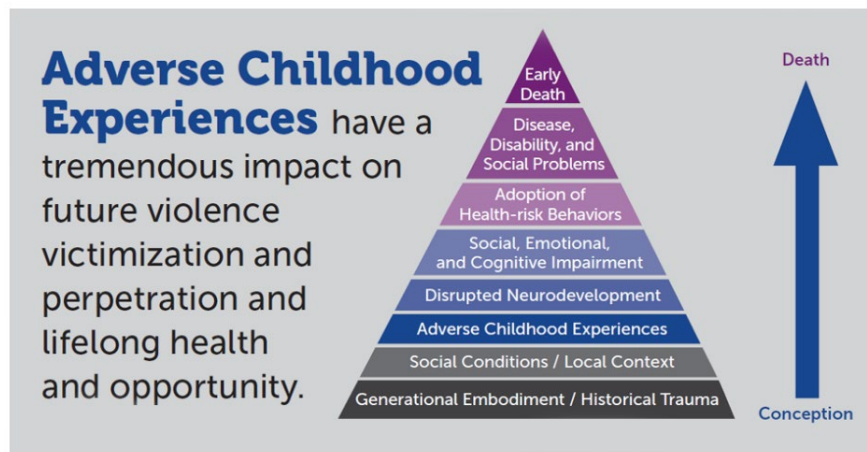
The most recent information available from 2017 indicates 8.56% of County residents were born outside of the country (approximately 64,000 people). This is more than double that of our neighboring counties, but lower than the national average of 13.7%. The most common foreign languages spoken locally are Spanish, Italian, and Chinese. The ethnic composition of the population is composed of 70.2 Caucasian, 14.3% African American residents 9.03% Hispanic or Latino residents, 3.72% Asian residents, 0.179% American Indian & Alaska Native residents 0.0179% Native Hawaiian and/or other Pacific Islander residents, 0.309% residents who identified themselves as "other" and 2.25% of residents who identified as being of two or more ethnicities. (Source: datausa.io)

In 2017, the average age of a Monroe County resident was 39. (Source: datausa.io) The income per capita in Rochester is \$19,830, which is 42% lower than the New York average and 34% lower than the national average. The median household income is \$31,684, which is 48% lower than the New York average and 43% lower than the national average. (Source: areavibes.com) Rochester has long struggled with entrenched and concentrated poverty; the poverty rate in the region currently stands at 14.3%, in stark contrast to the city of Rochester in which 56.4% of children live in poverty. This is the third highest rate in the nation when compared to cities of similar size (Source: census.gov, U.S. Census Bureau). Rochester encompasses seventeen zip codes that are fully or partially included in Federally Designated Qualified Opportunity Zones. Five of the highest poverty zip codes are in Rochester (14621, 14611, 14609, 14608 and 14613).

These neighborhoods are additionally afflicted with high rates of unemployment, single parent families, teen pregnancy, and infant mortality, as well as poor graduation rates, and poor housing options. Youth in these high poverty areas tend to have experienced more trauma, family fragmentation and toxic stress than their peers because of where they live. This exposure is compounded by the lack of access to supports and pro-social opportunities in these neighborhoods. Studies have shown these experiences can be classified as Adverse Childhood Experiences (ACEs). (Source: CDC.gov)

ACEs are potentially traumatic childhood events that can increase the risks of injury, maternal and child health problems, teen pregnancy, involvement in sex trafficking, and a wide range of chronic diseases, and can also negatively impact education and job opportunities. ACEs can have lasting, negative effects on health, well-being, and opportunity.

ACEs are common across all populations and many people would report at least one ACE. Some populations are more vulnerable because of the social and economic conditions in which they live, learn, work and play. The ACE “score” is the total sum of the different categories of ACEs reported. Research has demonstrated a relationship between ACE scores and negative health and well-being outcomes. As the ACE score increases, so does the risk and likelihood for negative and potentially long lasting outcomes. (Source: CDC.gov)



<https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/about.html>

Monroe County Mission and Vision

Mission

Through the dedicated and productive efforts of its workforce, Monroe County will provide high quality service to its residents in a cost-effective manner. By engaging the community and working together with people from all walks of life, Monroe County will create a government structure that lives within its means and promotes fiscal stability. By fostering a spirit of teamwork and collaboration with community partners, Monroe County government will return to its core values, ensuring a safe and healthy community, with a quality of life second to none.

Vision

Monroe County is a community of choice that is economically prosperous with a diverse business base, outstanding educational opportunities, sound infrastructure, access to a wide range of recreational and cultural assets as well as quality affordable housing for its residents. Ours is a community that will encourage future generations to live, work and raise their families here. Through stable property taxes, more efficient government and more effective partnerships and collaborations, Monroe County government will create an environment that promotes aggressive economic development and job creation.



Department of Human Services Mission and Vision

Mission: The Department of Human Services empowers residents to achieve their highest level of self-sufficiency and independence, and promotes safety, and physical and emotional well-being.

Vision: DHS delivers strengths-based comprehensive, responsive and coordinated services guided by measurable results.

Human Services Highlights

The Department of Human Services encompasses the traditional “social services” district with state mandates to provide child protective, adult protective, foster care, adoption and preventive services as well as an array of income based state and federal programs including Temporary Assistance to Needy Families, Safety Net Assistance, Supplemental Nutrition Assistance Program, Home Energy Assistance, child care, child support, emergency sheltering, and Medicaid. The Department also encompasses the Juvenile Detention Center, the Office of Mental Health, Rochester-Monroe County Youth Bureau, Office for the Aging, the Office of Faith Based and Community Initiatives, and Administrative Services, supporting all activities.

Blending these offices into a single Department affords many opportunities for collaboration and shared infrastructure, resources, and service delivery. We are proud to present this 2019 Annual Report. Our goal is to give you a better understanding of the many faces of the Monroe County Department of Human Services - the over 1,000 employees who deliver services to residents of Monroe County. Over 550,000 customers visited our waiting rooms in 2019 and received services.

In 2019, the monthly average Temporary Assistance caseload continued its downward trend, dropping from 9,579 in 2018 to 8,179 in 2019 (-14.62%). Since 2010, the average monthly caseload decreased by over 41%. The increase in Supplemental Nutrition Assistance Program (SNAP) benefits over the last decade has leveled off. While SNAP benefits increased from 35,581 cases in 2008 to over 68,996 cases in 2016, due to a strong economy, caseloads continued to decrease each year since, to 64,832 in 2019. SNAP benefits continue to provide critical support and nutrition services to members of our community.

Child and Family Services investigated 9,764 reports of child abuse or maltreatment in 2019, with the vast majority of reports coming from members of the community, followed by schools. Seventy-six percent of the reports investigated were not indicated for abuse or maltreatment.

In 2019, DHS welcomed many new faces. Three new Caseworker training classes were completed, preparing 69 new hires to join Child and Family Services (CFS) as well as 22 CFS Casework Aides. The Financial Assistance Division incorporated 63 new Examiners, and by year’s end, nearly two dozen Caseworkers and Examiners retired after many years of service.

Deputy Commissioner Anne Eichas completed her first year in CFS. With hard work and dedication from CFS staff and administration, and additional staffing, technology, and creative application of staff resources, caseloads have continued to decline. Mentorship and training opportunities have continued to expand, offering our CFS staff more support and education on the topics that impact the critical and sensitive work they do every day.

Following the 2019 election, Adam Bello envisioned many priorities for DHS prior to beginning his term as the new County Executive. As part of that vision, he appointed Commissioner Crossdale to work with his administration in the position of Deputy County Executive for Health

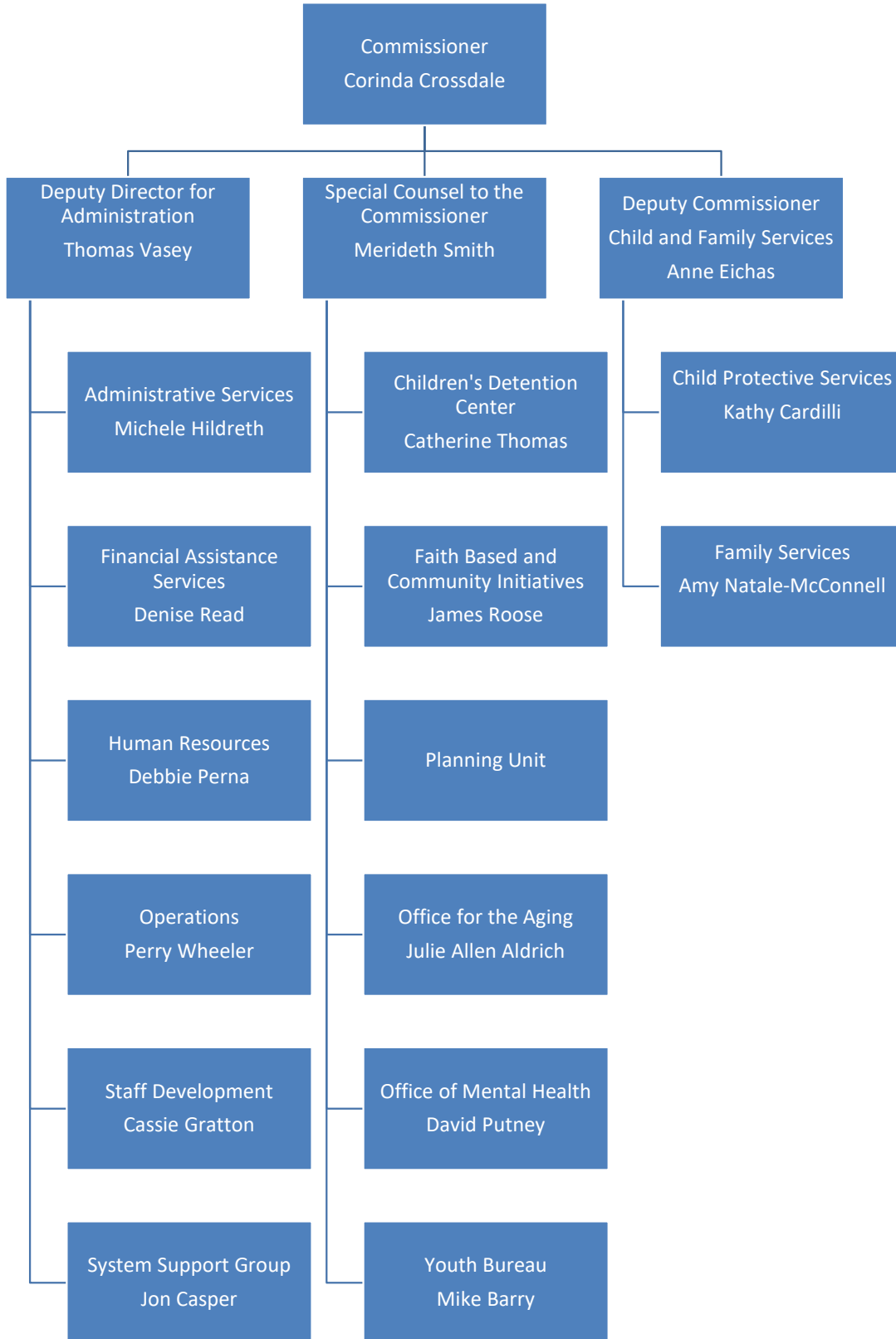
and Human Services. Leadership structure was updated accordingly to prepare for the intended objectives and will continue to be defined into 2020. Priorities for Human Services included proactive, coordinated leadership to address the opioid crisis, a Focus on Child Protective Services (CPS) caseload ratio, increased support for children with special needs, racial-equity impact assessment of policies, programs and practices, and focus on the availability of shelter beds and services.

Two advisory groups were operationalized in 2019. The **Citizens’ Advisory Council (CAC)** is comprised of community recipients of public benefits, community providers of social services, and members of the general public. The CAC’s purpose is to advise the Monroe County Department of Social Services in policy development, program planning, and program evaluation with respect to public assistance, medical assistance and services. The **Commissioner’s Advisory Board (CAB)** convened its first session in December. This group is comprised of DHS staff, chosen by colleagues to represent each DHS Division to address priority areas as well as to examine those that could be replicated to expand successes across functional areas. The purpose of the CAB is increased communication and collaborative planning for DHS, and a conduit for staff voice and increased workplace support and satisfaction.

Both groups meet on a quarterly basis and are enthusiastic about the work and the unique and important opportunity to inform and inspire ingenuity and resourcefulness at DHS and in the larger community. To authentically inform the work of these advisory groups, DHS planned a “Listening Session” to recruit individuals with personal experience engaging in our systems to openly share their journeys and perspectives. The Listening Session will be informative to the missions of the CAC and CAB, and we are excited to learn from our customers and utilize the feedback into future planning for DHS.



2019 DHS Organizational Chart



2019 Budget Overview

The Department of Human Services (DHS) is one of the largest Monroe County departments. In 2019 the Department’s adopted budget across all program areas and divisions totaled **\$541,497,403**. The County’s overall grant and operating budget for 2019 was \$1,227,769,217. The DHS budget accounts for approximately 44% of the County’s annual spending. This tremendous responsibility is inherent in being both excellent stewards of tax-payer dollars and excellent service providers for the community’s most vulnerable citizens. The 2019 Annual Report is a demonstration of the successful management of these two objectives.

Monroe County DHS			
2018-2019 Gross Budget Comparison			
	2018 Amended Budget	2019 Adopted Budget	% Change
Safety Net	\$ 50,972,049	\$ 45,262,268	-11.2%
TANF	\$ 46,390,778	\$ 44,489,374	-4.10%
Medicaid	\$ 176,564,129	\$ 173,588,528	-1.69%
Daycare	\$ 45,720,035	\$ 47,835,231	4.63%
Adolescent Care	\$ 13,042,645	\$ 13,816,774	5.94%
Child Welfare	\$ 29,259,474	\$ 39,848,314	36.19%
Preventive/Protective	\$ 19,823,462	\$ 20,579,213	3.81%
Administration	\$ 97,918,207	\$ 101,351,763	3.51%
Office for the Aging	\$ 8,908,017	\$ 8,646,817	-2.93%
Youth Bureau	\$ 1,392,546	\$ 1,402,158	0.69%
Office of Mental Health	\$ 47,774,942	\$ 44,676,963	-6.48%
Totals	\$ 538,541,718	\$541,497,403	0.55%

The Commissioner is supported by a Deputy Commissioner, Deputy Director of Administration, Special Counsel to the Commissioner, and nine division level Directors in the development, management, delivery and oversight of the programs and services outlined in this report.

FINANCIAL ASSISTANCE SERVICES DIVISION

Denise Read – Director

The Monroe County Department of Human Services Financial Assistance Division is committed to efficiently and effectively serving eligible Monroe County residents who access Public Benefit programs. Programs administered from within this division include: Temporary Assistance (TA), Supplemental Nutrition Assistance (SNAP), Medical Assistance (MA), Income Eligible Day Care Subsidies (IEDC), Home Energy Assistance (HEAP), Temporary Housing Assistance (Emergency Housing or THA), and Child Support Enforcement Services (CSEU). Programs are administered in accordance with regulations determined by New York State Social Service Laws with oversight from the New York State Office of Temporary and Disability Assistance (OTDA) and the New York State Department of Health (DOH). Financial assistance benefits are provided in the form of cash, rent, utilities, transportation, food/nutrition, housing, health insurance, daycare subsidies, paternity and support establishment, job search support, and job skills training to those who meet eligibility requirements.

The Financial Assistance Division continued Work First efforts with employable applicants and recipients of Temporary Assistance. A partnership with employers promotes hiring of TA recipients, highlighting available programs such as On-The-Job (OJT) training dollars and Transitional Employment Assistance Program benefits (TEAP). Direct support is available to assist recipients in the transition to employment, such as daycare and transportation.

Temporary Assistance caseloads decreased throughout 2019 to the lowest levels in over a decade with a continued focus on employment, diversion, and accountability. **41,255** applications were received for TA and another **37,862** for SNAP in 2019. At both primary sites, as well as the Child Support Enforcement Unit offices at City Place and Family Court, **over 500,000** walk-ins were registered into our waiting rooms. The sheer volume of people, calls, and requires constant adjustments to meet the demand. We appreciate the collaborative relationships we have with Community-Based Organizations (CBOs) and other advocacy organizations as we work to provide public benefits to Monroe County residents efficiently, effectively, and in accordance with all applicable rules and regulations.



A Ten-Year Lookback at Temporary Assistance Caseload and Application Activity

Year	Average Safety Net Caseload	Average TANF Caseload	Monthly Average Caseload	Monthly Average TA Applications Rec'd
2010	7350	6526	13876	4203
2011	7807	6907	14714	4202
2012	7905	6790	14695	4313
2013	8164	6905	15069	4528
2014	8041	6666	14707	4280
2015	7337	6070	13407	4143
2016	6698	5384	12082	3999
2017	6082	4852	10934	3804
2018	5240	4338	9579	3514
2019	4453	3725	8179	3438

Temporary Assistance (TA)

Intake

The Division’s Intake Workgroup manages Emergency Assistance, Family Assistance, and Safety Net Program cash assistance applications as well as all walk-ins for the Supplemental Nutrition Assistance Program (SNAP/Food Stamps). These programs provide vital temporary cash and food assistance to the most vulnerable residents living within our community.

Using the Work First model, the Division encourages self-sufficiency and personal responsibility while treating each individual requesting assistance with compassion and respect. The Division strives to deliver services in a professional manner that emphasizes excellent customer service. We understand that individuals come to us with a need and we operate within state social service regulations to provide eligible assistance to fulfill those needs. The demands on the Intake Workgroup are significant.

In 2019, The Intake Workgroup received **41,255** Temporary Assistance applications and conducted **15,792** in person interviews. The workgroup saw **14,768** individuals for emergency assistance, with many of these being one-time only emergency or diversion requests intended to stabilize the family and allow them to remain in or return to the workforce.

Care Management

The Care Management Workgroup is responsible for case maintenance of all Temporary Assistance cases in Monroe County. While the Self-Sufficiency Workgroup focuses on the employability of public assistance recipients, Care Management maintains the cases for all other aspects, including processing moves, recertifications, add-ons, removals, and all customer service related issues.

Temporary Assistance (TA) cases are comprised of both single individuals and families. Single individuals, childless couples, and families who have already received 60 months of federal Temporary Assistance to Need Families (TANF) assistance receive New York State Safety Net Assistance (SN). As of 12/31/19, the TA caseload for TANF cases included 3,543 cases with a total of 8,195 individuals. Additionally, there were 4,076 Safety Net cases encompassing a total of 6,979 individuals without minor children or families who have exhausted their 60 months of federal TANF assistance or who are experiencing substance use as a barrier to employment participation.

Monroe County DHS - FA Division is a leader in the utilization of technology to process and manage public benefit cases. We manage by a concept known as universal caseload and task-based management. The caseload is managed internally through a locally developed application known as ANNEX. The ANNEX system allows for all incoming documents to be imaged and saved to the client's electronic case file and to identify each document as a "task" that is assigned to an examiner for review and action as needed. ANNEX helps supervisors see all pending work "at-a-glance" and allows for consistent and equitable distribution of work across all available staff members. All information related to any individual case is available to all staff throughout the Care Management Workgroup such that any staff member can assist with processing of the work or answering phone calls as needed.

The Care Management Workgroup completed **78,590 tasks in 2019** with an average processing time of 6.6 business days. Those tasks included 4,351 landlord statements, 3,354 utility issues in addition to processing HEAP benefits, and 1,760 daycare statements. Staff is committed to assisting customers obtain, maintain, and increase employment. Childcare requests are prioritized in order to support self-sufficiency.

As a part of a Division wide focus on eviction prevention, the Care Management Workgroup administers the Division's TANF Shelter Supplement program. For eligible clients, a shelter supplement, along with their public assistance grant, can be utilized when applicable to assist in obtaining or maintaining housing.

In 2019, the Care Management Workgroup worked with **over 4,549 walk-in customers** visiting the 691 St. Paul St. office needing direct assistance. Most often, staff addressed issues concerning housing and utility emergencies. Customers visiting the office for these reasons **were assisted within 28 minutes** of signing in with the reception staff.

Self-Sufficiency (S/S)

The Self Sufficiency Workgroup helps public assistance recipients obtain employment, job counseling, and employment related training. Self-Sufficiency provides a direct service to local employers by conducting pre-employment activities such as assessments and employee screening. Employers who hire individuals in receipt of public benefits may be eligible for tax credits.

Self-Sufficiency works with all individuals over the age of 18 in receipt of Temporary Assistance. In 2019, the TA caseload averaged 8,179 monthly and S/S engaged with every client on those cases, processing **approximately 75,000** tasks related to employability.

In alignment with the Work First philosophy, S/S partners with several community agencies for employment related programming for TA recipients. Individuals deemed employable but not currently employed are engaged in various programming to solicit a return to employment and ultimately self-sufficiency. Adult Basic Education, English for Speakers of Other Languages (ESOL), Job Search, Job Skills Training, Job Readiness Training, Vocational Education, High School Equivalency programs, and Work Experience internships are programming opportunities provided by community partners to assist individuals in this effort. The Division makes every effort to support a return to employment and emphasize the benefits – monetary, physical, and emotional – of work.

Participation and engagement rates for employment activities in Monroe County are reported by New York State Office of Temporary and Disability Assistance (OTDA). The Division's work to prepare individuals for employment is evidenced by the Safety Net employment participation rate. In November 2019, we reached our highest rate – 45.2%, which was also the highest in the entire state among the large Social Service Districts. Our TANF and SN-Family employment participation rate is 15.1%. Continued decreases in participation rates for employable individuals on assistance remain a challenge and demonstrate a need to improve education about employment programming and remove barriers that may be preventing additional TANF recipients from engaging in employment programs to prepare them to re-enter the work force. Our engagement rate for TANF/SN families continues to increase in light of these challenges. In 2019 our average engagement rate 47.5% is the highest Monroe County has seen since we've been recording.

In 2019, the FA Division expanded efforts to host on site job fairs and interviewing events for qualified public assistance recipients. We participated in multiple community hiring events with Workforce Development. Other efforts to connect TA recipients with employment include hundreds of referrals to community job fairs, where Self-Sufficiency staff assist clients with application completion and other job search skills. Self-Sufficiency also coordinates with our contracted vendor, and the Young Adult Manufacturing Training and Employment Program – YAMTEP, to support TA recipients interested in manufacturing and machining careers through the low skills, warehouse, and CNC training programs, assisting with on-site support to minimize barriers to attendance and completion. In 2019, 54 DHS clients completed YAMTEP programs and

66.7% obtained employment upon completion. We strive to empower individuals every day to reach their highest level of self-sufficiency and independence.

The Self-Sufficiency Workgroup provides additional supports for individuals who report barriers to employment. As a part of our **Restoration to Self-Sufficiency Program (RSSP)**, contracted vendors and internal staff work with TA recipients who are unable to work but have recommendations from a qualified healthcare professional (QHP) that, when followed, can restore them to employability. The primary goal of RSSP is to engage recipients in recovery. Using the medical documentation provided, a plan is developed with the individual and monitored monthly. Examples of QHP recommendations often include physical therapy or weekly counseling and the RSSP follows up to ensure compliance and eventually, recovery. In 2019, of the 1383 individuals engaged with RSSP through our contracted vendor, 258 or 18.7%, were able to return to an employable status. Sometimes, even when recommendations are followed, individuals are not able to return to an employable status. In those cases, Self-Sufficiency staff assist individuals diagnosed with a permanent disability to apply for SSI. The Disability Assessment and Review Team (DART) works with individuals in this capacity. In 2019, DART assisted 215 individuals with applying for Social Security Benefits. 618 Public Assistance recipients were awarded SSI in 2019, transitioning them from Temporary Assistance to the higher and more permanent benefit levels provided by Social Security.

Temporary Housing Assistance and Homelessness Prevention

Housing instability can be a significant concern for low income residents of Monroe County. To meet the regulatory requirements to provide temporary housing for eligible individuals, the Division contracts with various community agencies for approximately 417 year-round emergency beds for homeless individuals. During the winter months when the temperature with wind chill reaches 32 degrees, the Homelessness During Inclement Weather regulations allow for the Division to contract for additional beds as needed. When shelters are unable to accommodate placements, the Division utilizes hotels and motels across Monroe County. In 2019, the Division made **12,351** Temporary Housing Assistance (THA) placements for individuals and families. The primary cause of homelessness in 2019 was eviction by primary tenant. Individuals and families residing in the homes of relatives or friends are often asked to leave due to overcrowding, substance use, domestic disputes, family breakups, and strained relationships.

The second leading cause of homelessness in 2019 was as a result of release from an institution without a plan for permanent housing. Institutions include hospitals, substance use treatment programs, jails, and prisons.

The goal of the Division is to assist homeless individuals in securing appropriate permanent housing as quickly as possible. In 2019, the average length of stay for a DHS paid THA placement across all emergency housing settings was 13 days.

The Division utilizes Temporary Housing Agreements and Independent Living Plans for individuals placed in THA to ensure shared understanding of the expectations for placement eligibility. These plans also document household circumstances and address barriers to securing permanent housing. Compliance with Temporary Assistance eligibility, including providing requested paperwork and attending required appointments is expected to maintain THA eligibility. THA recipients are also required to regularly search for permanent housing and document their efforts. The Division continues to work with community partners, including shelter providers, rapid rehousing programs, Case Managers, private landlords, apartment complexes, Rochester Housing Authority, and Partners Ending Homelessness, to ensure that individuals facing housing insecurity can secure safe, affordable housing.

Income Eligible Day Care

Daycare is a vital resource used by families to maintain employment that leads to self-sufficiency. Block grant allowances from the federal and state government determine the availability of subsidies issued to Monroe County residents.

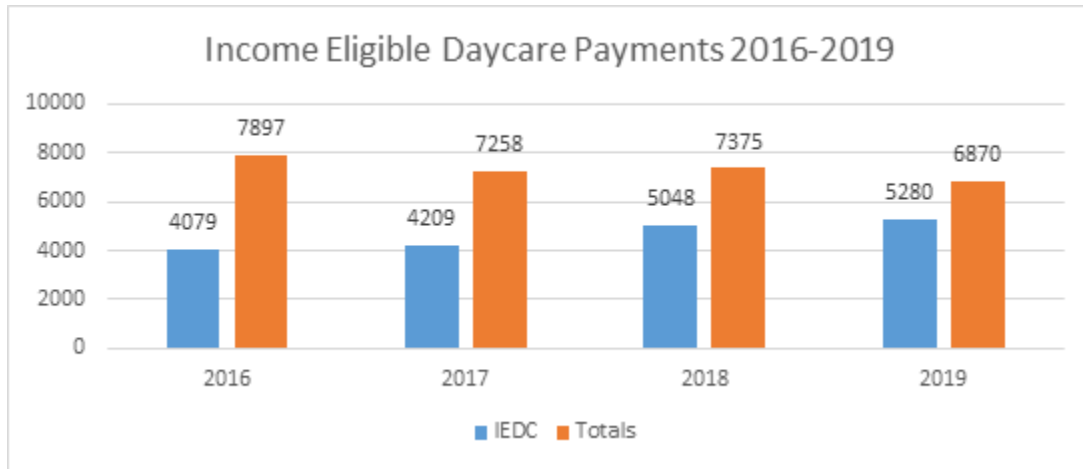
New York State allocates Child Care Block Grant (CCBG) amounts to local districts each year. This block grant funding supports both Temporary Assistance daycare subsidies as well as Income Eligible (IEDC) subsidies. TA daycare is paid 75% from CCBG and 25% from local funding. The State block grant funding for Monroe County for the 2018-2019 Federal Fiscal Year was \$35,995,542. Monroe County provides an additional \$4.2 million in local dollars as a “maintenance of effort” requirement. In addition to the State CCBG funding, Monroe County utilizes a portion of Title XX funding from New York State for child protective and preventive day care cases. Also, the Workforce Development Institute receives a New York State Legislative award of \$2.2 million to assist working families with income up to 275% of the Federal Poverty Level.

TA daycare is a state required, mandated service; by regulation local departments of social services are required to make every effort to place all employable adults with children into employment programming designed to help them re-enter the work force and reach self-sufficiency. It is required that daycare be provided so the parent can participate.

Though Income Eligible Day Care is not mandated, it is allowable for the local DSS to utilize the CCBG funding to working families after paying for all the mandated TA daycare. CCBG funding is available for working families up to the amount of the full allocation. In Monroe County, the income threshold for IEDC is 200% of Federal Poverty Level.

In 2019, we received 3,272 applications for Income Eligible Day Care. Across all day care programs, an average of 6,975 children were in receipt of a day care subsidy payment from all sources each month during 2019, a slight decrease of the 7,375 children served monthly in 2018*. Notably, as shown below, the percentage of children served through the Income Eligible Program as a total of the subsidy program has increased over the past few years as the Division has

experienced success in TANF caseload reduction. **Note: due to a payment processing error, several hundred payments for November 2019 were not issued in December. These payments were issued in January 2020. This error wholly accounts for the decrease in payments issued in 2019.*



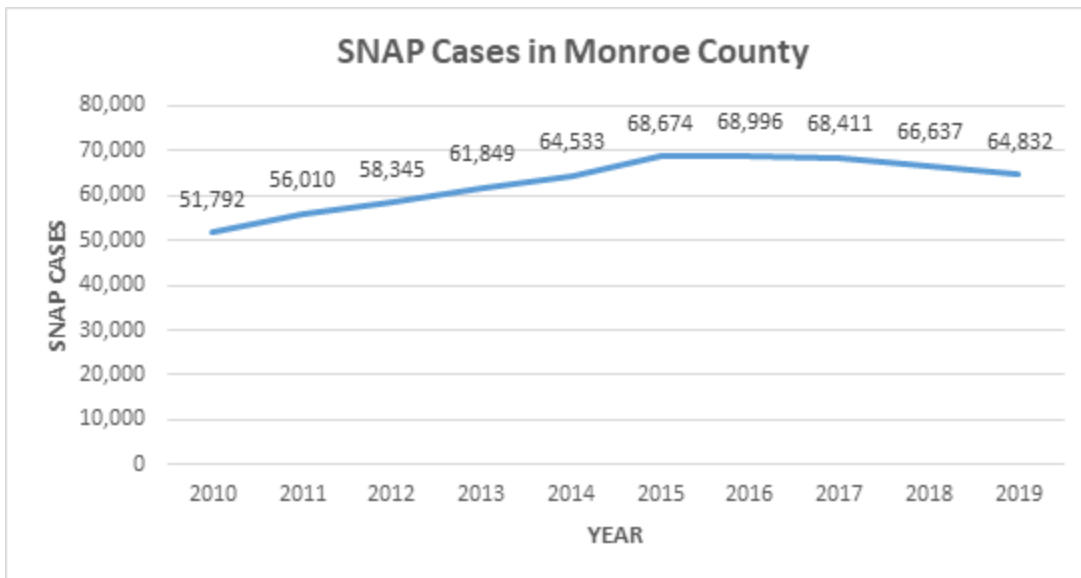
The Income Eligible Day Care Workgroup works to process eligible cases efficiently and accurately to maximize the benefit in our community. Process improvements have resulted in significant improvements in case processing time for IEDC Recertifications, Transitional Child Care updates, and provider changes. These changes not only improve the experience for families utilizing the subsidy program, but also assist the Division in monitoring block grant spending and efforts to maximize the limited funding, serving as many eligible households as possible.

Subsidy recipients are assessed a weekly parent fee (paid directly to their day care provider) for services rendered based on a percentage of their household income over the State Income Standard for their household size. In Monroe, this percentage had been 35% for many years. In July of 2019, the percentage was reduced to 25%. This reduction, on average, saved families \$200 per year in out of pocket childcare costs.

In September of 2019, DHS FA Division partnered with the Center for Youth and their Crisis Nursery program, which provides free temporary emergency childcare to families, to engage in a pilot program for On-Demand Child Care. This partnership allows for collection of data to identify the childcare emergency needs of families in the community. This data will be used to examine the use of an on-demand model and look for trends in need for this type of care. We hope to share our findings with the Office of Children and Family Services, to inform them on issues localities face in administering the Child Care Block Grant which does not always allow for flexibility in addressing the specific needs of a community. Our facilitated application process with this pilot also allows for families seeking traditional ongoing childcare solutions to have a seamless transition from the emergency care received from the Crisis Nursery to an open subsidy case with IEDC.

Supplemental Nutrition Assistance Program (SNAP)

In 2019, the Division received **37,862 SNAP** applications, an average of 3,239 applications each month. The SNAP Workgroup continues to combat food insecurity for 1 in every 7 Monroe County residents. The workgroup manages over 66,000 SNAP cases, offering important income and nutritional support to members of our community. Many SNAP recipients are older adults or families who are employed, yet still rely on SNAP to supplement their food purchases. In 2019, the SNAP caseload leveled off, but over the past 10 years, the caseload has seen exponential growth due to expanded eligibility criteria and other measures meant to reduce barriers to access in the program.



SNAP issues electronic benefits once a month via a debit card that can be used by the recipient to purchase food items. SNAP benefits cannot be converted to cash. In 2019, on average, \$14.5 million in SNAP benefits were issued to Monroe County residents **each month** and spent throughout our community.

In 2020, the agency is preparing for several changes being made to the SNAP program at the Federal level, including:

Able-Bodied Adult Without Dependents (ABAWD) Work Requirement and Time Limit for SNAP

In December 2019, the USDA Food and Nutrition Service (FNS) finalized regulations that tighten the criteria necessary for a state to obtain ABAWD waivers. The new waiver requirements become effective April 1, 2020.

Who is an ABAWD?

An ABAWD is an able-bodied individual between the ages of 18 – 49 who does not live with children under age 18.

ABAWD Rule and 3 Months of SNAP

ABAWD individuals may only receive SNAP Benefits for 3 months in a 36-month period without meeting work requirements unless the individual is exempt.

To maintain eligibility for SNAP benefits for more than 3 months in the 36-month period that started January 1, 2019 through December 31, 2021, each ABAWD must engage in an ABAWD qualifying work or training program for at least 20 hours weekly or 80 hours monthly for each month the ABAWD receives a full month of SNAP benefits

What is an ABAWD required to do?

An ABAWD individual ***must complete and document*** one of the following each month the ABAWD receives a full month of SNAP benefits:

- Work (including “in-kind” work and volunteer work) for at least 80 hours per month;
- Participate in a qualifying work/training program approved by the social services district for at least 80 hours per month;
- Comply with a Work Experience Program (WEP) assignment for the number of hours per month equal to your household’s SNAP benefit divided by the higher of the federal or State minimum wage;
- Participate in an employment and training program for veterans operated by the Department of Labor or the Department of Veteran’s Affairs for at least 80 hours per month;
- Participate in a program under the Workforce Innovation and Opportunity Act or Trade Act which may include job search, job readiness, occupational skills training and education activities for at least 80 hours per month; or
- Participate in a combination of work or qualifying work programs for at least 80 hours per month.

Non-ABAWD designation requirements

In order to continue SNAP Benefits and **BE EXEMPT** from ABAWD rules, MCDHS would need documentation of one or more of a variety of conditions or circumstances that meet exemption standards. These are explored with applicants during the eligibility process.

Proposed Revision of SNAP Categorical Eligibility Changes

- Closing the “Nominal Benefit” Loophole --- perform strong eligibility tests which include verification of income and assets
- Linking SNAP Flexibility to Substantial, Ongoing, Work-Supporting Benefits
- Improving Consistency and Equity Between States

Proposed Revision in how States Calculate a Standard Utility Allowance (SUA)

- A household’s utility cost affects the amount of SNAP benefits a household receives

We look forward to partnering with community organizations such as FoodLink, United Way, and others, to work together and minimize the effects of these changes on Monroe County SNAP recipients.

Medicaid

With the advent of the Affordable Care Act, New York State established the New York State Health Benefit Exchange (NYSHBE) which serves individuals who are under 65 years old, not receiving Medicare and residing in the community. Any Medical Assistance applications for these individuals received by the Division’s Medicaid Workgroup are forwarded to the Health Exchange for an eligibility determination and subsequent case maintenance.

For persons over 65 years old, disabled, receiving Medicare, or residing in an institution, the Medicaid Workgroup receives and processes applications for Medical Assistance. In 2019, we received **21,474** Medical Assistance applications. The workgroup also processes applications for the Medicare Savings Program, the Aged, Blind, Disabled program, as well as the Immediate Needs Program for home care services.

There is a daily flow of Medicaid cases between the Health Exchange and the Division’s Medicaid Workgroup as clients’ circumstances change. Often it is necessary for cases to be referred from the Health Exchange to the Medicaid Workgroup for individuals who are turning 65, starting to receive Medicare, or who need services which are not available in the Health Exchange such as managed long-term services, nursing home placement, or fee for service personal care services.

Likewise, active Medicaid cases for non-disabled, non-institutionalized persons under 65 years old are transitioned from the Medicaid Workgroup to the Health Exchange each month.

Currently the Medicaid Workgroup maintains **57,000** Medicaid cases which include clients residing in the community, congregate care facilities, and nursing homes. In addition to annual recertification, some cases require monthly spend-down processing or require an upgrade in Medicaid coverage as needs change such as permanent placement in a nursing home or requiring home care services to remain safely at home in the community.

The Medicaid Workgroup interfaces closely with the health care providers, attorneys, representatives, as well as community agencies. The Workgroup also holds educational forums to share Medicaid information with long term care providers and community partners.

Home Energy Assistance Program (HEAP)

During the 2018-2019 HEAP Season, the Division’s HEAP Workgroup issued a HEAP Basic grant to approximately 71,000 income eligible households in Monroe County, to assist with the cost of heating their homes. The 2019-2020 HEAP Season opened on November 13, 2019 and is scheduled to close in April 2020.

Additional Components of the HEAP Program:

- ✓ The **Heating Equipment Clean and Tune Program** provides for equipment inspections and cleanings prior to the start of the heating season for eligible households. In the 2018-2019 season, 59 low income households received this benefit.

- ✓ The **Heating Equipment Repair or Replacement Benefit** can help eligible homeowners repair or replace their furnace, boiler, and other direct heating equipment necessary to keep their primary heating source working. In the 2018-2019 season, **\$509,000** was issued to repair or replace equipment for low income homeowners in Monroe County.

- ✓ Eligible applicant households may receive one **Cooling Assistance Benefit** per applicant household for the purchase and installation of an air conditioner or a fan to help the home stay cool. In Summer of 2019, **385** eligible households received this cooling benefit, providing much needed relief to individuals with medical conditions exasperated by heat.

All HEAP eligible homeowners are referred to the Weatherization Assistance Program, through the U.S. Departments of Energy and Health and Human Services, for a free “energy audit” that identifies measures to increase energy efficiency and specific weatherization services such as insulation of attics and sealing of cracks to prevent air infiltration to reduce heating and cooling costs for the house.

Child Support Services Unit

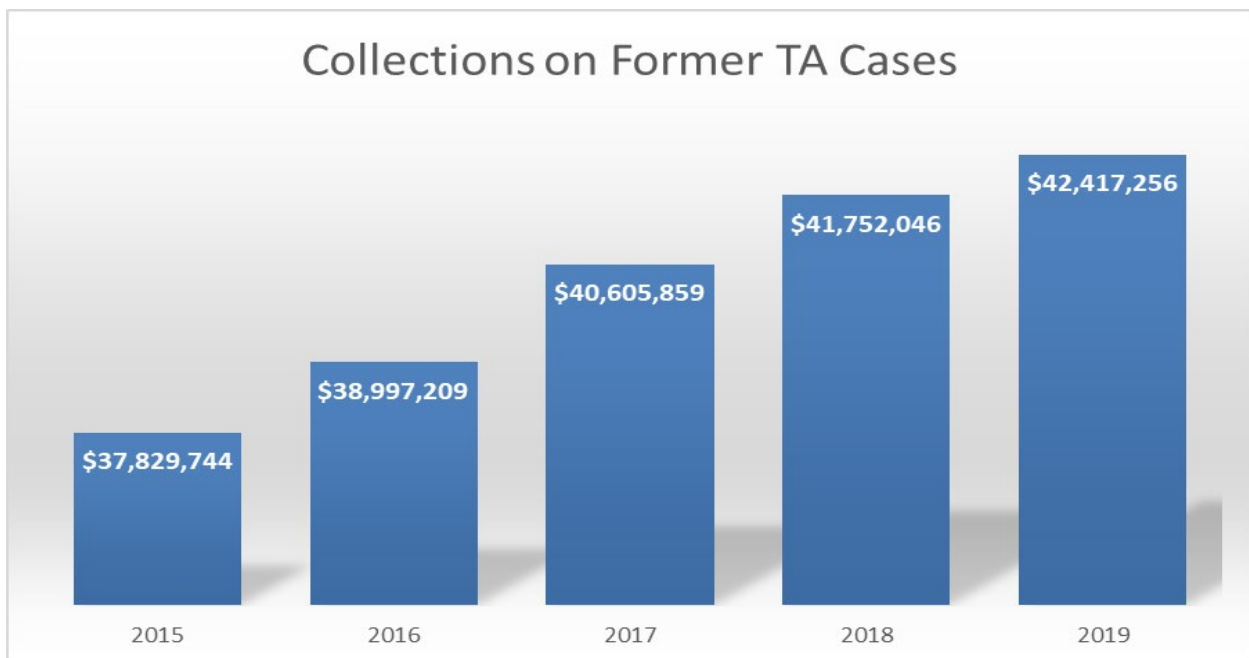
The Child Support Services Unit is responsible for:

- The establishment of paternity and support for children,
- Collection of court-ordered child support payments, and
- Enforcement of health insurance ordered by court for children in the households that we serve.

Child Support Services are provided for children in households with *at least* one parent living outside of their household. Temporary Assistance recipients are *required* to apply for and cooperate with Child Support and must continue to do so until the “absent” parent returns to the household or the TA case closes. Non-TA individuals who wish to utilize Child Support Services are referred to as “Private” applicants. Both Private and TA customers can take advantage of the local Support Unit filing petitions for paternity, support, and modifications, overseeing violations, managing health insurance options, and collection of payments.

Child Support also assists the local economy by pursuing and collecting support to reimburse County funding provided for those receiving TA benefits. Child Support continues to collect support arrears on behalf of both TA and Private customers until all arrears are satisfied.

In 2019, the Child Support Services Unit has endeavored to continue the great job it has done to manage child support for Monroe County families where both parents do not reside in the same household. Child Support collects payments for DSS and, in turn, helps keep property taxes down. The total active TA Child Support cases have decreased while former TA cases have increased. In fact, collections on closed TA cases have steadily increased since 2015 (see chart below) while other categories have decreased. In 2019, total collections were **\$68,538,153**, of which **\$42,417,256 (61.9%) went to former TA clients**.



At end of 2019, there were 42,999 active cases of which 95.58% have paternity established and 93.0% have a child support order in place. These rates are well above the federal standards.

Benefits of Child Support Services

- Paternity is established for child. Access to absent parent’s medical history, Social Security benefits, inheritance rights and child support.
- Establishment of monetary child support order for child. Financial support for child.
- Establishment of medical support order for child. Private health insurance.
- Active TA Clients are eligible to receive pass-through payments in addition to their cash grant of up to \$100 or \$200 based on the number of children on their grant.
- When public assistance case closes, the order becomes the former public assistance client’s order by operation of law. Current child support collected is then sent directly to custodial parent.

Fair Hearings

A Fair Hearing (FH) is a formal procedure provided through the OTDA’s Office of Administrative Hearings (OAH) office for applicants and recipients of public benefits to contest the Department’s handling of their application or case. For each FH requested, there is an investment of time and training associated with the process as a Senior Examiner staff member from the Division must review each request, prepare a justification, and represent the Division at the hearing.

In 2019 a total of 8,656 FH requests were made, a decrease from the 10,189 requests in 2018 and a 37% reduction from the 13,757 requests in 2015. In 2019, Monroe County DHS FA Division continued its program with OAH – Pre-Hearing Dispositions (PHDs). This program allows the agency to rescind a notice and cancel a Fair Hearing if resolution of the issue is achieved with the applicant/recipient or if the Division determines the action taken was incorrect. In 2019, we **resolved 883** (10%) of the requested hearings through the PHD process before going to the hearing. Of the remaining Fair Hearings heard by OAH with a determination rendered in 2019, the Division had an average affirmation rate of **91.2%** (up from 87% in 2018).

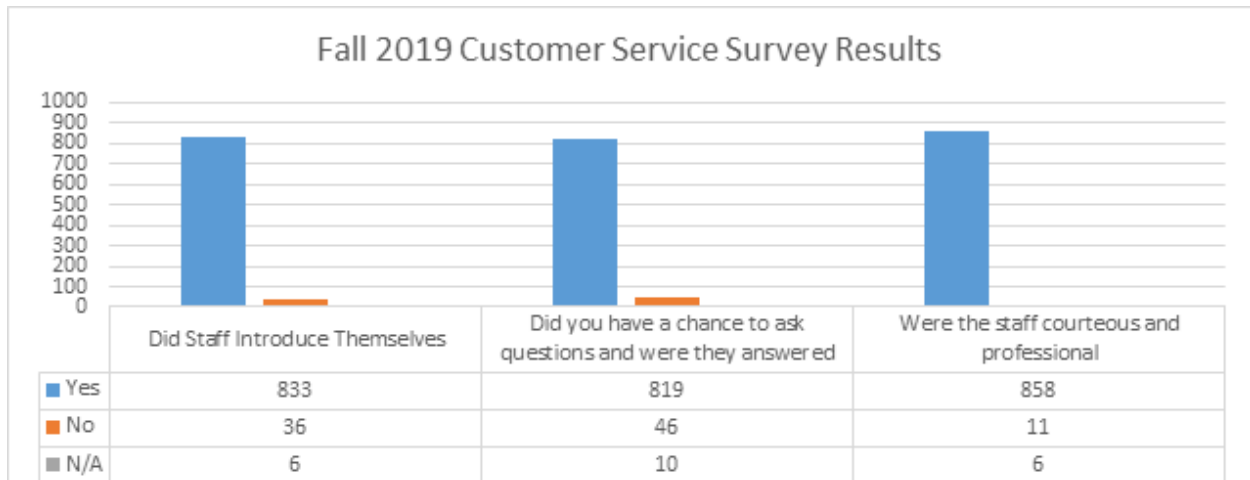
Centralized Document Management and Front-End Support

The Centralized Document Management (CDM) Workgroup is the single point of entry for all applications and drop-off documents, incoming postal mail and faxes for public benefit programs of the FA Division. CDM staff scan and send documents electronically to the appropriate team or workgroup. Within 48 hours of receipt, CDM will scan and assign the information and a staff member in any area of the Division will be able to confirm receipt of the documentation. This streamlined process results in fewer transitions and lessens the likelihood of lost paperwork.

In 2019, CDM staff scanned a total of **1,865,840** documents. CDM also scheduled **54,110** interviews based on applications received.

CDM personnel also staff the Waiting Rooms at our 111 Westfall Road and 691 St. Paul St. offices. **Over 550,000** individuals entered these buildings throughout 2019, either logging in or dropping off information inside at the windows or utilizing the quick drop-off area in the St. Paul St. lobby. CDM Waiting Room staff efficiently served these individuals. While we are unable to control the volume of individuals who enter our sites each day often resulting in long lines, we strive to provide excellent customer service that does not negatively add to the impact of the wait. CDM waiting room staff are often the first face-to-face contact for public benefit applicants and recipients and they diligently listen to concerns and answer questions in order to resolve the reason for the visit.

Customer Service surveys are conducted twice per year to gauge the Division’s interaction with visitors. The results of these simple, 3 question surveys are used to inform and train staff on areas in need of improvement.



Special Initiatives

Trauma Informed Care Grant (TIC)

In 2019, DHS continued its Trauma Informed work through a grant from the Wilson Foundation. FA Division staff received training in vicarious trauma as well as development of self-care plans. The Division continues to participate in a community-wide Learning Collaborative with other Human Services agencies who received TIC grants. The Learning Collaborative allows the Division to level-set on trauma informed practices based on other agencies’ activities and progress.

Young Adult Manufacturing Training and Employment Program (YAMTEP)

In 2015, the FA Division participated in the planning and development of a unique work experience pilot, the Young Adult Manufacturing, Training, and Employment Program (YAMTEP).

DHS, in partnership with our Work Experience Program contracted vendor, supports YAMTEP by referring qualified work experience participants interested in manufacturing and machining careers to the low skills training program. DHS also assists with on-site support to minimize barriers to attendance and completion. In 2019, the YAMTEP model for training low skills workers expanded to include a CNC machining program. We are excited to participate in this effort as it empowers individuals to reach their highest level of self-sufficiency and independence.

DHS Cares

DHS Cares is an informal volunteer group comprised of dedicated DHS workers. It was established in 2012 after a group of staff volunteered on Make A Difference Day and wanted to continue to nurture their volunteer spirit. During quarterly meetings, participants suggest volunteer opportunities. The opportunities are determined by the group and the proposer becomes the lead for that project.

In the past few years, DHS Cares members have led or participated in dozens of projects including; RCSD truancy blitzes, toiletry collections for the REACH Homeless Shelter, Meals on Wheels, Father's Heart Mobile Soup Kitchen Ministry, RIA Field Days, Annual Day of Caring, Make a Difference Day, Clean Sweep, the Pillars of Hope program at School 17, Gary the Happy Pirate Toy Giveaway and the annual holiday card signing for residents of Monroe Community Hospital. FA Division staff who participate in DHS Cares enjoy giving back to the community alongside co-workers and look forward to continuing this important work.

Behavioral Interventions to Advance Self-Sufficiency (BIAS)

In 2017, Monroe County Department of Human Services – Financial Assistance Division was selected as one of three Social Service Districts nationally to participate in a federal research project. Behavioral Interventions to Advance Self-Sufficiency (BIAS) is sponsored by the Administration for Children and Families in the US Department of Health and Human Services. Planned in 2018 and implemented throughout 2019, this project tested the impact of small interventions (revamped letters, text message reminders and updated presentations) on compliance with eligibility rules. The test concluded in November of 2019. While we wait for the final report from the researchers, preliminary analysis indicates an increase in compliance from clients who were part of the test. Compliance with rehabilitation, training, educational, and other work experience programs help prepare individuals for employment and lead to self-sufficiency. We continue to look for additional opportunities to include behavioral interventions, producing better outcomes and empowering individuals every day to reach their highest level of self-sufficiency and independence.

CHILD AND FAMILY SERVICES DIVISION

Anne Eichas – Deputy Commissioner

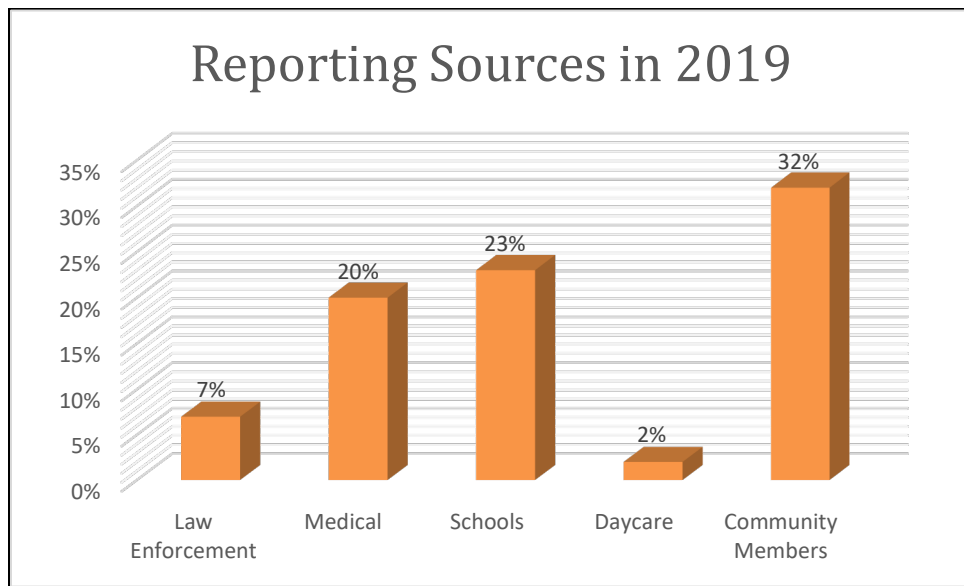
The Child and Family Services (CFS) Division provides a range of preventive, protective, supportive, and rehabilitative services for adults, children, and families to maintain and enhance their quality of life. The Child and Family Services Division is comprised of two main areas, Child Protective Services and Family Services.

CHILD PROTECTIVE SERVICES (CPS)

Kathy Cardilli – Director

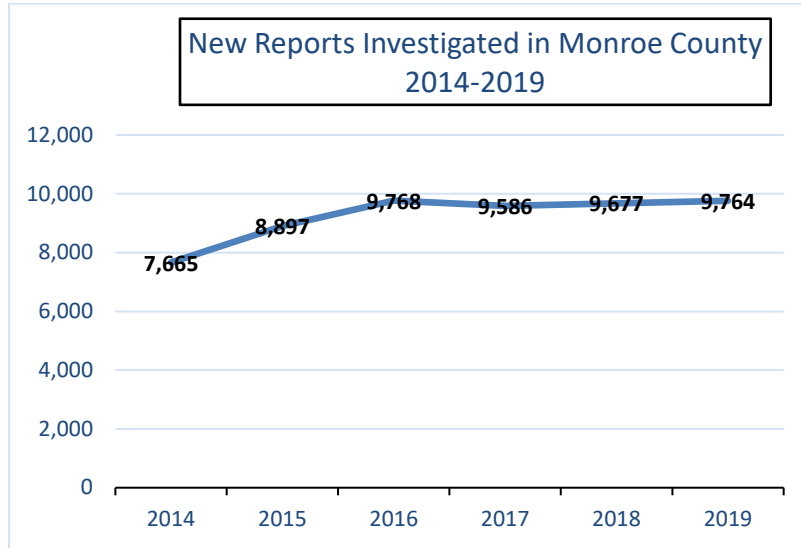
Child Protective Services receives and investigates all reports of suspected abuse and neglect of children. During the investigation, safety and risk is assessed for each family that we serve. An assessment is made whether ongoing services are needed for the family and if so, referrals are made to our contracted Preventive Services agencies or to Community Based Service Providers.

In 2019, Monroe County investigated 9764 reports of child abuse or maltreatment. This represents a less than 1% increase from 2018. Of these reports, 93% alleged maltreatment and 7% alleged abuse. Reports are received from mandated and non-mandated reporters in our community.



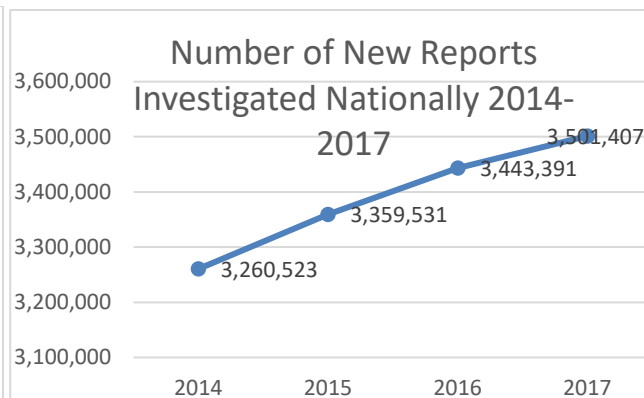
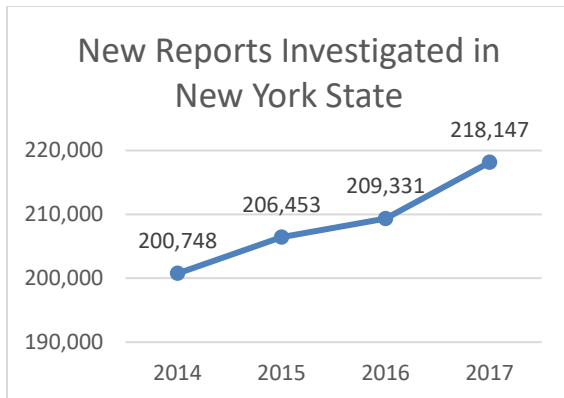
We received the majority (32%) of our reports from the community followed by school staff at 23%. Of the reports investigated, 76% were unsubstantiated, meaning there was no credible evidence to support abuse/neglect.

Monroe County continues to promote the child abuse reporting information website, www.dorightbykids.org, which provides answers to a variety of frequently asked questions for reports of child abuse both mandated. The county subscribed 1,538 people to a monthly newsletter focused on child abuse which include both mandated and non-mandated reporters. To date, we have met with 13 Monroe County school districts to promote this website and provide them with information on how to subscribe. By the end of 2020, we will have met with all Monroe County school districts regarding this. We continue to subscribe all new internal staff in order to provide them with ongoing monthly education regarding the work that they do.



According to the 2017 U.S. Department of Health and Human Services Administration for Children and Family Services’ report*, increases in investigations were experienced across the state of New York (4%) and the Nation (2%) were higher than in Monroe County.

*<https://www.acf.hhs.gov/sites/default/files/cb/cm2017.pdf#page=30>

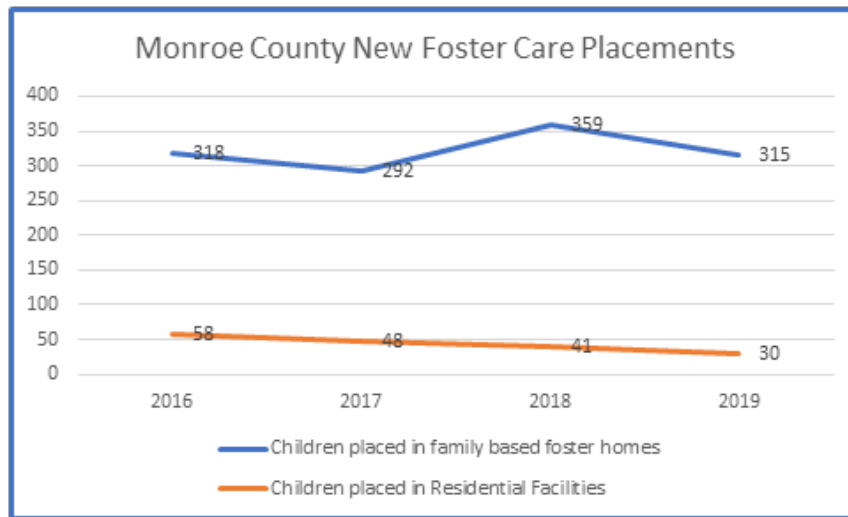


FAMILY SERVICES

Amy Natale-McConnell - Director

Foster Care

In 2019, Monroe County averaged 492 children in foster care, from birth to age 21, including approximately 315 new placements. When removal from the home is necessary for safety, the Department strives to minimize the impact by placing children in the most natural environment possible. In addition to traditional foster care and residential (congregate care) placements, Therapeutic Foster Care (TFC) is an alternative setting designed to meet a variety of child service needs, including services targeted towards children with significant mental or behavioral health needs or Autism Spectrum Disorders. In 2019, Monroe County contracted with a second provider for TFC and now receive services from both Hillside Family of Agencies and Pathways Inc. This level of care, along with a greater focus on in-home and community-based services and supports, has aided Monroe County in decreasing the number of youth in high cost residential settings, in favor of highly supported, therapeutic, and family level foster care placements, when safe to do so. By comparison, in 2010, there were 147 new placements into residential care settings, but in 2019, there were only 30, 11 fewer than even 2018. This is an impressive 27% reduction just this year. More importantly, we successfully maintain two thirds of the children active under Family Court order at home or with kinship caregivers, rather than placement in foster care.



Becoming a foster parent provides a personal opportunity to make a positive impact in the lives of children. If you have room in your heart and a desire to make a difference, find out more and see if foster parenting is right for you. The first step is to call the Monroe County Homefinding Unit at (585) 753-6522 or the Foster Care Information Line at (585) 334-9096. For more information, FAQs, and testimonials from current foster parents, go to <https://www.monroefostercare.org/>

Preventive Services

Preventive Services were expanded during 2018 to serve more children and families as one of the strategies outlined in the 5-year Child and Family Services Consolidated Plan, developed and approved in 2018, to decrease the recurrence of maltreatment in our community. Increased service availability resulted in 226 more families and 332 more children receiving services than in 2017. This represents a 14% increase in the number of families served and an 11% increase in the number of children served.

Residents Receiving Preventive Services in 2018:
Families: 1835
Children: 3344

In 2018, 97% of families who engaged in preventive services were successful at avoiding foster care placement. Additionally, 98% of these engaged families avoided new CPS reports. For 2019, Monroe County increased the preventive budget to further support families' ability to keep children safe and at home, adding 66 new preventive slots. This is in addition to the 130 added slots in 2018. Updated 2019 Preventive data is not yet available.

Adoption and Permanency

The primary goal of the Adoption team is to find permanent families for children freed for adoption in Monroe County. Permanency and stability for children continues to be a priority in Child & Family Services. Monroe County celebrated a successful 2019 National Adoption Day with six adoptions from foster care finalized during the special event. 2019 saw 43 children in total achieve permanency through adoption, two more through KinGAP, and another 106 through relative custody or guardianship (Article 6 of the Family Court Act). Monroe County is proud of our success in the engagement and utilization of kinship care and permanency for our youth.



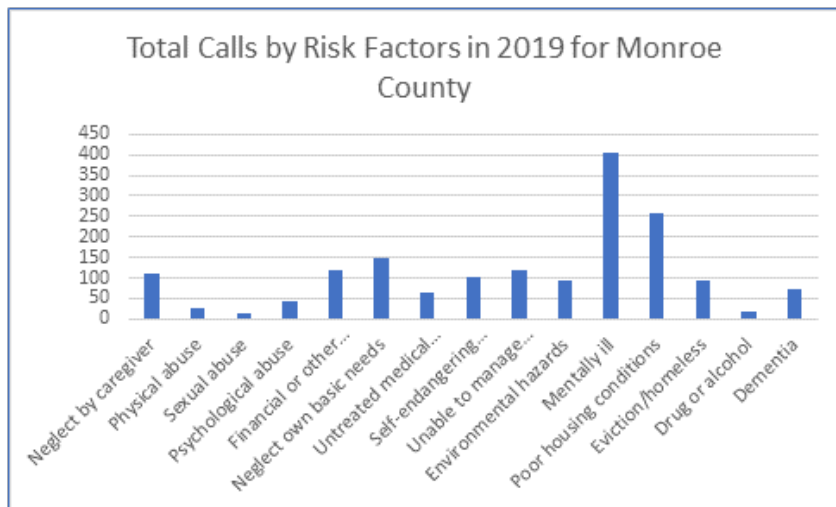
Adoptions Finalized 2015 to 2019													
Year	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	total
2015	1	1	2	4	4	4	5	4	4	2	13	2	46
2016	0	5	2	0	8	4	2	2	1	2	9	8	43
2017	0	0	2	1	0	3	3	2	3	1	6	5	26
2018	2	1	1	6	4	0	0	0	2	9	8	0	33
2019	3	3	4	2	3	2	7	8	0	1	8	2	43

Permanency Through Custody With Relatives				
2015	2016	2017	2018	2019
61	84	95	127	106

Adult Protective Services

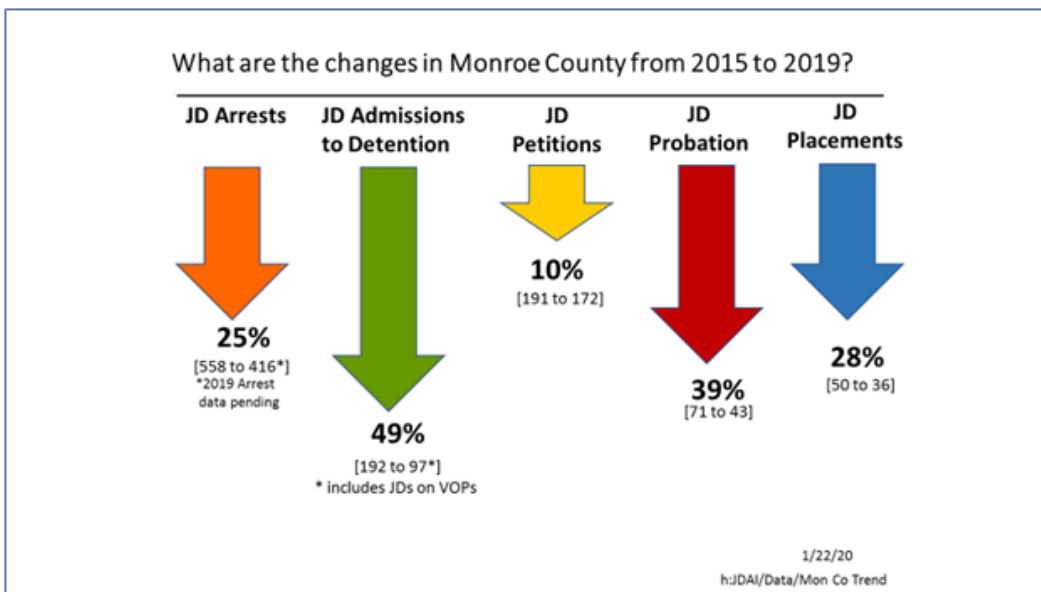
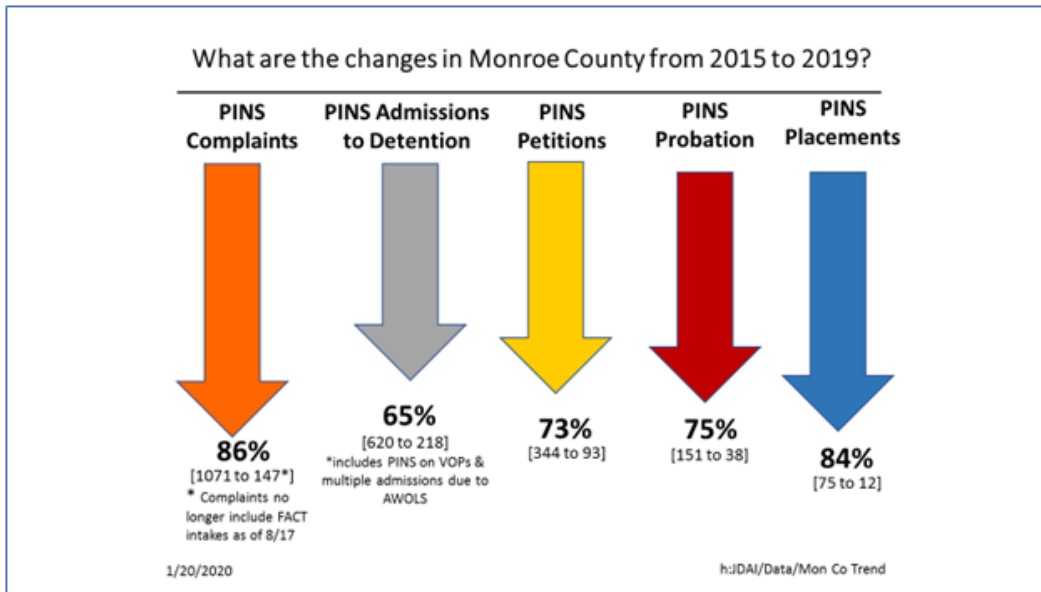
Adult Protective Services (APS) is a state mandated program to assist vulnerable adults in our community. Services are aimed at maintaining individuals in the community whenever possible.

Those served through APS are among the most vulnerable in our community, including frail older adults, persons with mental illness or developmental challenges, and those suffering acute and chronic physical illness or disabilities, dementia, and conditions associated with aging. APS received 1430 new referrals in 2019. Additionally, the APS team provided services to 141 Guardianship cases; 26 of those were new to APS in 2019. Monroe County or Catholic Family Center are only assigned Guardianship for an individual when absolutely necessary, when a person has been deemed by the court to lack the ability or capacity to make decisions for themselves and there are no other willing or suitable family members or individuals to do so. It is APS philosophy to preserve an individual’s autonomy to the fullest degree when possible. The following chart represents the risk factors reported to APS upon intake of a report.



Juvenile Justice

Monroe County was one of six JDAI (Juvenile Detention Alternatives Initiative) Counties in NY State. A project of the Annie E. Casey Foundation, JDAI demonstrated that jurisdictions could safely reduce reliance on secure confinement and generally strengthen the juvenile justice systems through a series of interrelated reform strategies. Monroe County expanded the focus to include avoidance of non-secure detention for PINS (Person in Need of Supervision) youth. In 2019, the JDAI was discontinued by the State, but Monroe County chose to integrate the work and the focus on collaboration and community services within our existing Juvenile Justice Committee. This supports continued focus on in home supports and avoidance of institutional care whenever possible.



Family Access and Connections Team (FACT)

FACT is a collaborative comprised of Probation, the Office of Mental Health, and Child and Family Services. It has historically been a strength-based assessment and referral program designed to support families experiencing difficulties with children under the age of 18, exhibiting a pattern of the following PINS behaviors:

1. Behaving in a way that is dangerous or out of control; violence in the home/destruction of property, verbal and/or physical aggression, including injury to others or pets/animals, or self-harming behavior
2. Stealing, theft from family/residence
3. Drug/alcohol abuse
4. Leaving home without permission, curfew violations
5. Truancy - missing full days of school/illegal absences

FACT has been the front door through which families and school districts seek help for youth exhibiting PINS behaviors. Over the last 3 years, New York state enacted Raise the Age legislation, while the federal government established the Family First Prevention Services Act. Both directives addressed impending changes in serving PINS and foster care youth whose extreme behavior frequently leads to congregate care. Recognizing the need for strategic planning, Monroe County researched relevant programs across the nation. Our vision took shape in a redesigned FACT program, utilizing a multidisciplinary team to serve traditional PINS and other youth sooner, to avoid costly congregate care. The outcome of early strategic planning was the reduction in Monroe County PINS petitions by 75% from 2016-2019, and decreased PINS placement by 35%. PINS Truancy petitions were additionally eliminated through effective partnerships with families and school districts. Moving into 2020, FACT is continuing to develop its service array and braiding a variety of funding sources to better meet community service needs. Additional Behavioral Health Specialists will be incorporated to support youth, families, and foster families, in effectively managing challenging behaviors at home. Family Partners are new mentor positions to guide parents through the various systems and better support families. The work will continue to supplement an established System of Care Team that incorporates a Family and Community Engagement Specialist, a Community Trainer, an Education Liaison and a Fatherhood Specialist into the overall FACT structure.



OPERATIONS

Perry Wheeler – Director

The Special Investigations Unit (SIU) conducts investigations that involve Public Benefits fraud. This may include, but is not limited to, fraud or misuse of public funds, claims of lost or stolen checks, and claims of loss due to fire or other catastrophes. The Special Investigations Unit works directly with the White-Collar Crime Unit of the Monroe County District Attorney’s Office and the Monroe County Sheriff’s Office on fraud related issues. SIU is also represented on a Supplemental Nutrition Assistance Program (SNAP) retailer task force that involves Local, Federal, and State agencies.

In 2019, investigators completed approximately 7,861 investigations, including five criminal investigations that resulted in convictions. The total cost avoidance resulting from SIU Investigations totaled over \$15 million in 2019.

FINANCE DIVISION

Michele Hildreth – Director

The Finance Division is responsible for all fiscal related functions for the Department of Human Services, including payments to and receipts from vendors and clients, claiming for state and federal reimbursement, budget development and monitoring, purchasing, and all employee reimbursements.

On average, approximately 5,500 payments were processed each month, including average payments of \$3.9 million for daycare, \$3.5 million for shelter, \$765,000 in preventive contracts, \$639,000 toward adoption subsidies, and \$1.5 million toward foster care (private home or congregate care).

STAFF DEVELOPMENT

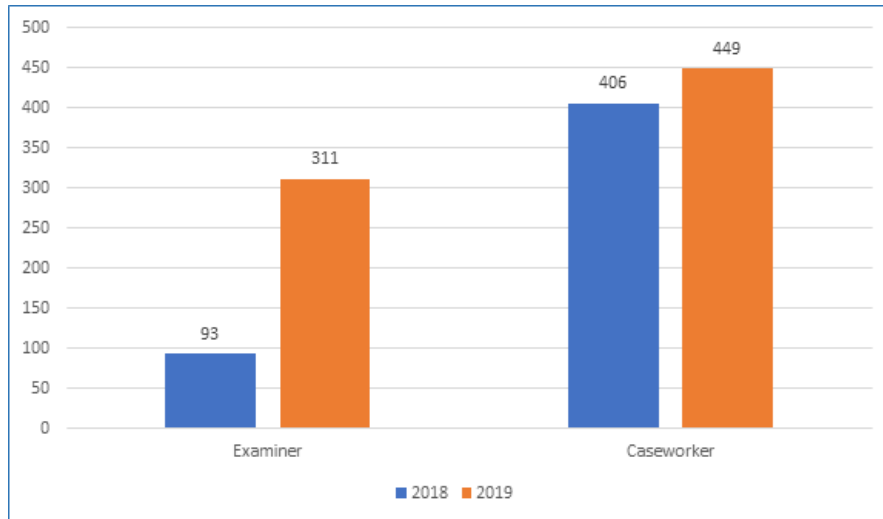
Cassie Gratton - Coordinator

The Office of Staff Development is responsible for the recruitment, retention strategies, onboarding, and training of all staff at the Department of Human Services. The office plays an important role in the success of our staff and the Department.

Compared to 2018, 2019 demonstrated a significant increase in the number of applicants for both the Examiner and Caseworker exams. The Office of Staff Development continues to expand a multifaceted approach toward potential qualified candidates. The qualifications for the Examiner position were broadened and a second offering of the civil service exam for this title

was added in 2019. For the second consecutive year, the civil service exam for Caseworker continued to be offered four times a year.

2018 and 2019 Civil Service Test Applicants



The Caseworker.org resource has been incorporated into our varied recruitment materials and candidates can view videos that depict aspects of the Caseworker position at this site. Community partner and educational institution outlets have also expanded as part of the ongoing recruitment efforts.

In the latter part of 2019, additional position titles were incorporated into recruitment efforts: Youth Detention Worker, Energy Program Evaluator, and Eligibility Evaluator.

In 2019, three new Examiner training classes, comprising 63 new hires, completed the redesigned onboarding and training. This standardized series utilizes subject matter experts, self-guided online modules, interactive lessons, on-the-job learning, and continuous skill and knowledge building trainings. Three new Caseworker training classes were also completed, preparing 69 new hires to join the ranks of the Child and Family Services (CFS) teams. In an ongoing effort to provide support to teams, 22 CFS Casework Aides were also hired and deployed to active teams.

Training is an essential component to staff effectiveness and retention. In 2019, training completion rates were as follows:

- 93% of Child and Family Services staff completed the mandatory CPS in-service hours.
- 98% of Financial Assistance Staff completed the mandatory annual training components.

Two new trainings were offered that focused on specific skill development to better prepare staff to effectively and compassionately serve our diverse community.

- Poverty and Trauma-Informed Assistance training was delivered to Financial Assistance Division staff. It provided insight into the experience and trauma associated with poverty, and the effect on the brain and subsequent impact on decision making and compliance with program requirements, setting long-term goals, and work toward economic independence.
- Trillium Health delivered a LGBTQ+ workshop to Child and Family Services staff to foster active learning and skill enhancement. Attendees reviewed terminology, language, health/wellness disparities, and barriers to care, as well as information about resources for LGBTQ+ in the greater Rochester community.

These trainings will be incorporated on an ongoing basis into the talent development path for new hire staff.

In 2019, the pilot group of caseworkers assigned to the Mentorship Program celebrated the completion of the eight (8) session series. This initiative includes monthly topic specific meetings geared toward new casework staff, facilitated by leaders from the training team, Staff Development, and volunteer supervisors from CFS teams. There was overwhelming support of the Mentorship program amongst the participants and subsequent classes will continue in this successful endeavor.

During the three-year quest towards trauma responsive services (TRS), in 2019 we created the TRS Champions team, comprised of staff from the Child and Family Services and Financial Assistance Services Divisions. These Champions will strengthen and empower teams by guiding them with the practical application of the implementation of trauma responsive tools and techniques.



Rochester-Monroe County Youth Bureau

Anne Eichas- Acting Director

Since 1960, the Rochester-Monroe County Youth Bureau (RMCYB) has been a planning, funding, and coordinating agency dedicated to developing, implementing, and evaluating a comprehensive system of services for youth in the Rochester and Monroe County community. RMCYB is committed to the mission of creating a community that supports a comprehensive range of opportunities for positive youth development.

RMCYB assesses the needs of Monroe County youth to determine funding priorities and works in partnership with a diverse number of youth serving organizations with a common mission to create a community that supports a comprehensive range of opportunities for positive youth development, promoting a positive future for all youth.

Appointed by the County Legislature, the RMCYB Advisory Board promotes partnerships and networking, providing input regarding youth needs, monitoring outcome progress and supporting funding priorities. RMCYB creates mentoring opportunities for youth to interact with professionals, community leaders, and older adults (60+) in Monroe County.

RMCYB coordinates runaway and homeless youth services and has oversight of the Monroe County Safe Harbour program, created to combat child sexual exploitation. In partnership with the Center for Youth Services, Safe Harbour provides short-term, safe housing, 24-hour crisis intervention, medical care, advocacy, and other services to youth victims of human trafficking. Monroe County was one of five pilot counties for Safe Harbour and has now been deemed a Safe Harbour Graduate Community with continued partial funding to help support this incredibly successful program. 2019 was the eighth year Monroe County has delivered services under the Safe Harbour program.

The Youth As Resources (YAR) program empowers and engages youth as partners with adults in creating positive community change and development. Youth members govern the YAR board, providing mini grants (made possible by the support of Rochester Area Community Foundation) to local youth to develop and carry out service projects that address a community need. YAR awarded 12 groups a total of \$12,000 in the 2018-2019 budget cycle.

In 2019, the WXXI-PBS Nature Fest event partnered with RMCYB to create a family festival at Seneca Park with youth educators, scavenger hunts, nature walks, and activities, to inspire children to be outside and be active. The Annual Monroe County Intergenerational Holiday Ball brought our community's older adults and high school seniors together for a fun night of good food, music, dancing, and learning about each other. An intergenerational Fall Clean Up day was held and supported by nearly 300 volunteers with 65 yards completed. Other 2019 activities included Coats for Kids, Zoo pass distribution with nearly 5,000 free passes distributed, and the Annual Monroe County Toy Giveaway Project in partnership with the Pirate Toy Fund. Close to 3,000 attended this festive event.

Lastly, in 2019 RMCYB built upon relationships first established in 2018 and successfully rolled out programs with three new organizations: Champions Academy, Consumer Credit Counseling Services of Rochester, and the Villa of Hope. Champions Academy is a trauma-responsive mentoring program for urban teens, Consumer Credit Counseling provides services to increase youth personal financial literacy and certifies peer financial educators, and Villa of Hope provides work-based learning opportunities to youth ages 16-20. Provided through funding from New York State Office of Child and Family Services Youth Development Program, these programs provide career path guidance, community service opportunities, and potential employment over the next three years.

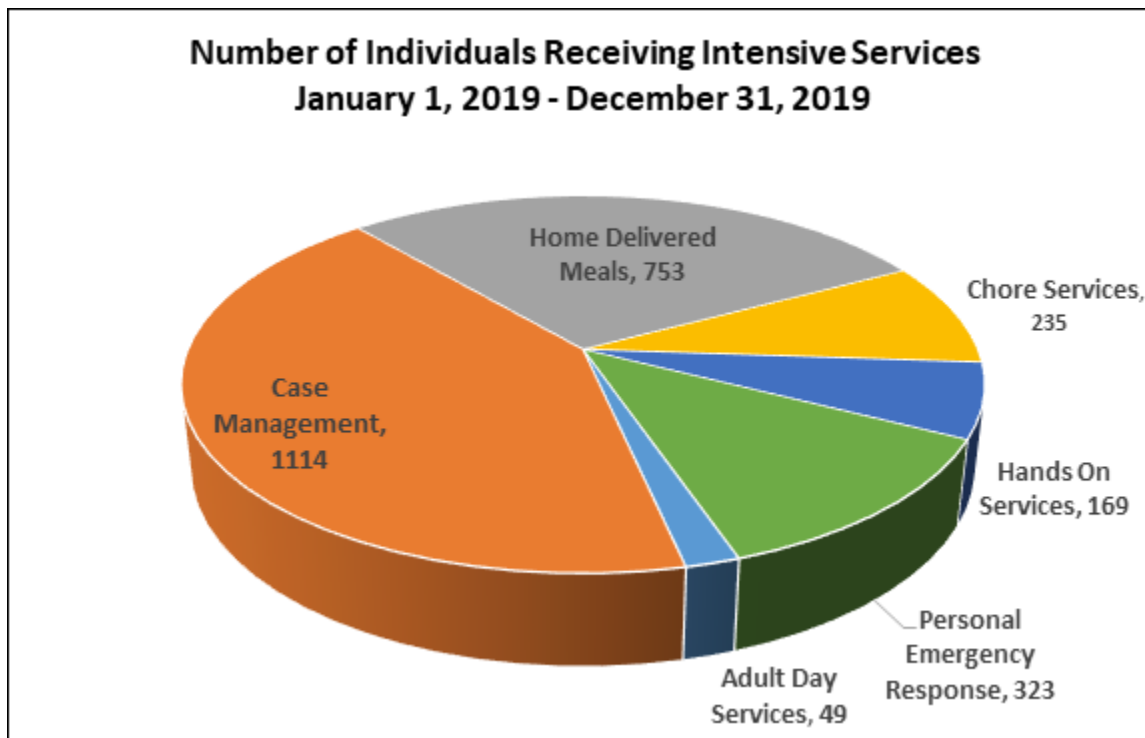


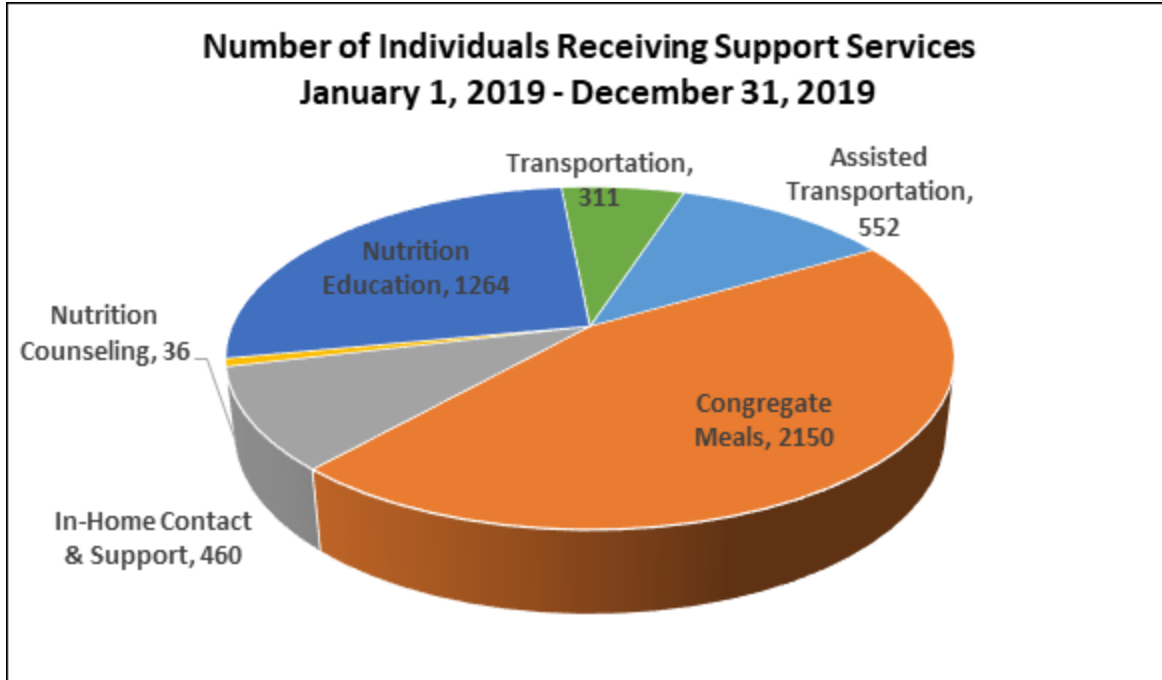
OFFICE FOR THE AGING
Steve Newcomb – Acting Director

The Office for the Aging is dedicated to serving older adults 60 years or older, caregivers of any age, and individuals with disabilities.

The Office for the Aging oversees the local service system and provides fiscal oversight and technical assistance to community-based agencies. Services are targeted to the following groups: individuals with the highest social and economic need with particular attention to low-income minority individuals, older individuals at risk for institutional placement, older individuals with limited English proficiency, and older individuals residing in rural areas.

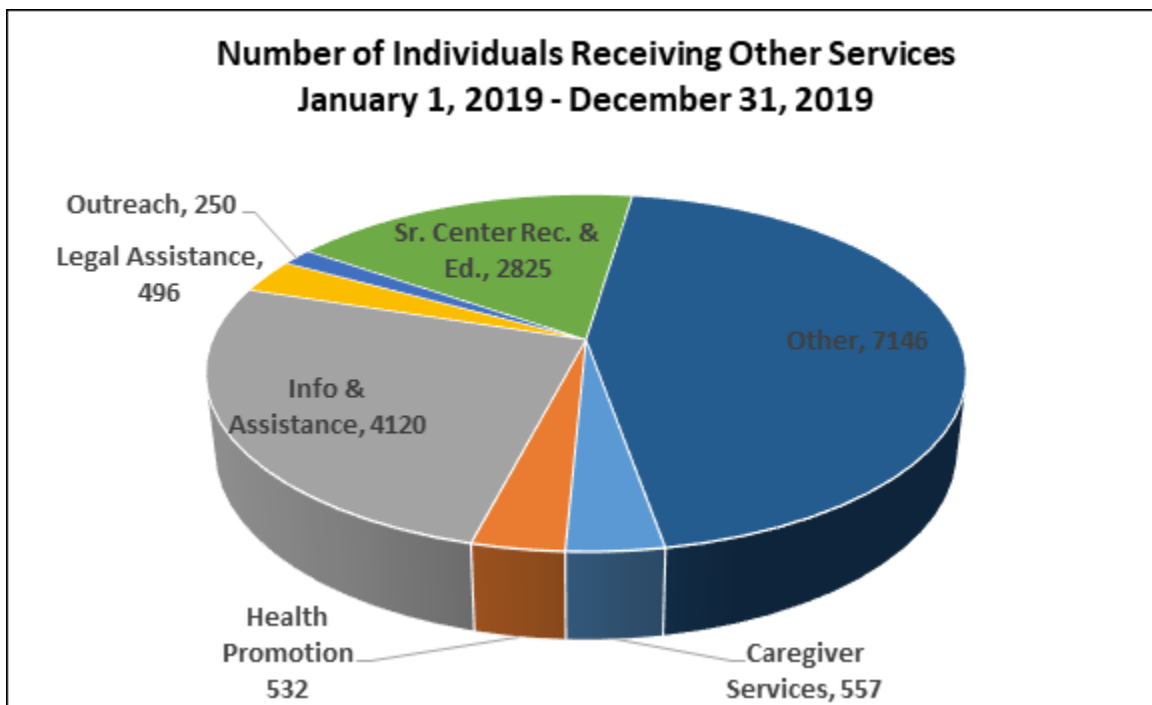
In 2019, 2,698 older adults received intensive direct care services, with the highest number receiving case management and home delivered meals.





In addition, 4,743 older adults and their caregivers received support services in 2019; the largest portion of those services were congregate meals.

Other services, including information and referrals, touched an additional 16,462 community members.



OFFICE OF MENTAL HEALTH

Corinda Crossdale, Acting Director

Kelly Wilmot, Associate Director

Mission

The Monroe County Office of Mental Health is committed to improving the health and quality of life of County residents who are affected by mental illness, developmental disabilities, alcohol and other drugs.

The Monroe County Office of Mental Health (MCOMH) oversees a community behavioral health system that is comprised of more than 70 providers who offer over 300 services. The overarching goal for 2019 was ensuring that the needs for Monroe County’s most vulnerable citizens were met through essential services and enhancing the quality of life for individuals with mental health, substance use, and developmental disability needs.

MCOMH supports Monroe County citizens in two ways:

- Ensuring services are available in the community to meet mental health, substance use, and intellectual/developmental disability needs as the Local Governmental Unit (LGU)
- Providing direct support to people who need the most help for their mental health challenges through Priority and Forensic Services

Services in the Community

Every county in New York State (NYS) is required under NYS Mental Hygiene Law to have a Local Governmental Unit (LGU) that oversees services for those with mental health, addiction, and intellectual/developmental disability needs. MCOMH is the LGU for Monroe County. Working together with state partners and community providers, MCOMH ensures that services are high quality and delivered in a cost-effective manner. In addition, MCOMH staff provides training, information, and support to non-profits, schools, churches, and the public on numerous topics ranging from opioid overdose prevention, managing grief, mental health awareness, suicide prevention, and trauma-informed care.

The work of the LGU also includes improving system issues and removing barriers to care for community members in need of services. MCOMH continues to lead with innovation and collaboration with community partners, the NYS Office of Mental Health (OMH), the Office of Addiction Services and Supports (OASAS), and the Office for People with Developmental Disabilities (OPWDD), to ensure that Monroe County residents are able to access high quality behavioral health services.

Community Collaboration

MCOMH continues to convene and/or attend regular meetings that include community members, people receiving services, non-profit organizations, hospital systems, doctors, schools, and law enforcement agencies, to improve communication, educate, and support quality care across all three disability areas. Related collaborations and accomplishments in the community in 2019 included:

- * Collaborated with the Rochester Regional Health System to implement a Jail Diversion service at The Behavioral Health Access and Crisis Center (BHACC) in June 2019. Similar to an urgent care setting, BHACC is available for immediate help with mental health and/or substance use issues and can be used as an alternative to the psychiatric emergency room. By adding the Jail Diversion program to the BHACC, law enforcement can transport people experiencing mental health/substance use challenges, who are also accused of minor non-violent crimes, to the BHACC for further assessment and connection to treatment, and potential avoidance of further legal involvement.
- * Teamed up with Villa of Hope to prepare for the launch of Hope Place, a new psychiatric emergency department diversion program, opening in early 2020. Hope Place will use the “Living Room” model, offering a comfortable environment for people experiencing a mental health crisis to get assistance from Certified Peer workers, who have backgrounds in receiving mental health and/or substance use treatment.
- * Convened a monthly multi-system stakeholder group beginning in May 2019 to explore options to ensure older adults with mental health challenges are in the most appropriate level of care. Each meeting consists of a learning opportunity and a case discussion brainstorming session to assist in finding individual specific placements, but also illuminate system-level challenges. A total of 8 cases were reviewed in 2019.
- * Served on the Executive Committee for the Partners for Suicide Prevention, which is a collaborative, county-wide coalition that promotes awareness and use of resources for all people of Monroe County to build hope and resilience. See the group’s website for more information: <http://suicidepreventioncoalition.org/>
- * Provided opioid overdose prevention training using Narcan to over 500 individuals, including employees from community non-profits, schools, government, transportation providers. After a short training, Narcan can be used easily to reverse an opioid overdose. All trainings included a free Narcan kit.
- * Trained over 300 additional community members in the following models: Mental Health First Aid (for law enforcement)/Youth Mental Health First Aid, Safe Talk, and Suicide Safety for Schools. Additionally, two staff members were trained in Partnering for Safety in late 2019 and will provide the training in 2020.
- * Established the Workforce Champions group, which meets monthly to discuss and take actions to address workforce shortages across the three disability areas. Two events were held as a direct result of this effort: a hiring event/career fair in collaboration with County Planning and Development, and a Workforce Culture event with the CEO of the training company.

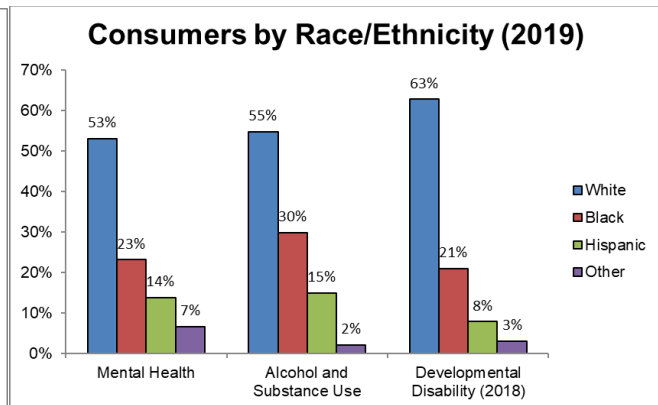
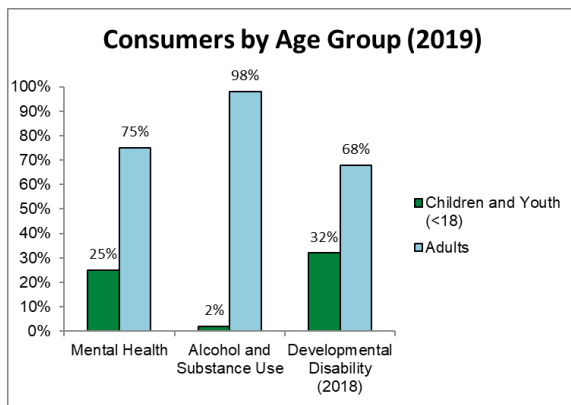
- * Coordinated the Consortium on Trauma, Illness and Grief in Schools (TIG), which prepares school personnel to effectively and efficiently respond to internal and external crises in their school communities. TIG is now in all Monroe County public school systems and continues to work on expanding into private and charter schools.
- * Collaborated with the Department of Public Health and local school districts to modify the Youth Risk Behavior Survey (YRBS), to include questions about Adverse Childhood Experiences (ACEs). The MCOMH Data Team provided participating school districts and community stakeholders with a detailed analysis of the YRBS.
- * Participated on every active opioid task force in Monroe County. For more information and to be linked to services, visit this website: <https://www.monroecounty.gov/opioids/index.php>.
- * Joined the DHS Commissioners Advisory Board, which convened for the first time in late 2019, with the goal of finding more collaborative opportunities across DHS to better serve Monroe County Residents.

2019 Service Use

Service Areas	People Served
Mental Health	42,103
Alcohol and Substance Abuse	13,153 *
Developmental Disability	** 6,128 in 2018

* Data represents admissions to multiple programs not individual consumers
 **2019 data from OPWDD not yet available

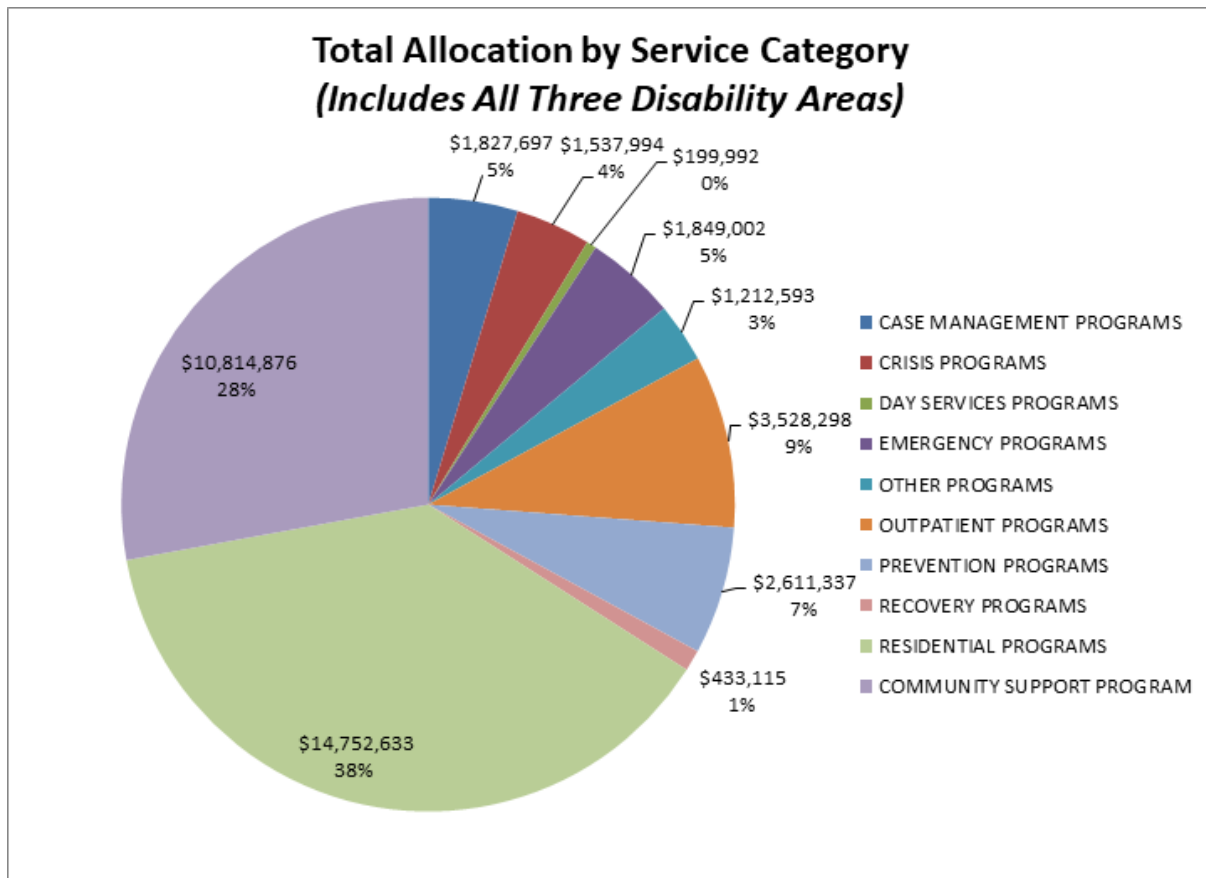
Sources:
 - Monroe County Behavioral Health Community Database
 - NYS OASAS Client Data System
 - NYS OPWDD



2019 Funding

In addition to overseeing services in the community, MCOMH provides quality oversight and financial support to local service providers, as directed by OMH, OASAS, and OPWDD. In 2019, MCOMH managed over \$38,000,000 of services provided to County residents.

Service Area	Funds Allocated
Mental Health	\$26,592,324
Alcohol and Substance Use	\$11,055,200
Developmental Disability	\$1,120,013



Direct-Support Services

MCOMH administers services for high need individuals who require significant supports in the community. The Priority and Forensic Services teams at MCOMH can help individuals navigate a complex behavioral health system in times of crisis through education, consultation, and conflict resolution. These teams do this efficiently through collaborative relationships with providers and systems.

Priority Services

The Youth and Adult Priority Services Teams are responsible for ensuring that those most in need are receiving appropriate services. Priority Services work with individuals, their families, and community providers to resolve crisis situations and systems issues. When gaps in the system are identified, Priority Services staff work to develop innovative supports and services to meet the needs of the community.

Services include:

- Single Point of Access (SPOA) – These teams connect adults and youth struggling with mental health challenges with care management and residential services. The youth team connects youth with other services to help them successfully remain in the community. In 2019, the Adult and Youth SPOA teams received 1687 referrals for people in need of mental health supports. In addition, the Youth SPOA team helped local providers, community stakeholders, families, and state partners prepare for changes in the Medicaid service system by providing training and technical assistance. The adult and youth teams work side-by-side, improving the ability to concentrate on transition-age youth, assisting them as they move from the youth-serving to the adult-serving systems. Both Priority Services teams frequently meet with providers to problem-solve about complex needs.
- Spreading Wellness Around Town (SWAT) Youth Council – this is comprised of a group of youth with personal experience in one or more of the child-serving systems (i.e., Mental Health, Juvenile Justice, Child Welfare). They seek to improve the services and supports these systems provide youth and their families and reduce the stigma that surrounds youth who have mental health and/or behavioral challenges. The Youth Engagement Specialist has welcomed 35 youth to Wellness Retreats in 2019, over 100 have attended Open Mic Nights, 24 have participated in SWAT Youth Council meetings, 45 have been served at Industry and the Juvenile Detention Center, and 88 youth and their families participated in the Got Dreams event. For more information about SWAT, see: <https://www2.monroecounty.gov/mh-swat-youth-council>.
- Rapid Engagement Delivery (RED) – In this service of the MCOMH and the Monroe County Department of Social Services (DSS), RED serves individuals with mental health and/or substance use disorder who have experienced frequent unsuccessful DSS application attempts and/or use of Emergency Housing services. In 2019 RED successfully assisted 39

of these high need individuals through the DHS application process resulting in funding and housing. The total number of clients assisted by RED in 2019 was 88.

- Homeless Partnership in Monroe County – this enterprise is funded by a 2018 SAMHSA (Substance Abuse and Mental Health Services Administration) grant awarded to Coordinated Care Services, Inc. (CCSI) that is being managed by the Adult Priority Services team. This is a five-year grant with the goal to house those who are homeless and diagnosed with a mental illness. A small case load size allows for increased time to dedicate to some of the community’s highest need individuals. 2019 was the first year of operation for the grant and the team enrolled 51 individuals, 42 of which have been housed.



Forensic Services

Forensic Services through MCOMH ensure Monroe County's most high risk and high need individuals, with cross-system legal complications, receive services. Services include:

- Forensic Intervention Team (FIT) – Facilitates engagement in services for individuals who come into contact with law enforcement due to unmet mental health needs. FIT partners MCOMH clinicians with law enforcement across the County. The goal is to increase the connectedness and utilization of outpatient services, decreasing the need for emergency or crisis response. In 2019, FIT expanded to include evening hours and received referrals for 1,240 individuals which resulted in 6,320 contacts.
- Court-Ordered Mental Health Evaluations – After arrest, contracted clinicians complete court-ordered competency and mental health evaluations, as well as diagnostic eligibility evaluations for mental health court participation. In 2019, totals were: 195 competency evaluations, 43 mental health evaluations, and 131 mental health court evaluations.
- Transition Management (TM) – Provides specialized case management services to assist persons with serious mental illness after release from the Monroe County Jail to successfully connect with treatment and supportive services. TM staff also function as court liaisons for individuals in mental health court and report on their compliance with treatment. In 2019, TM served 190 people.
- Assisted Outpatient Treatment (AOT) – AOT is a means for the County to petition the court for an order for outpatient treatment for individuals meeting certain criteria defined within Mental Hygiene Law 9.60 (Kendra's Law/ Assisted Outpatient Treatment.) This process allows County oversight for significantly mentally ill individuals, ensuring the system provides the recommended treatment, as well as the individual's compliance with that treatment. In addition to a court order, individuals may voluntarily opt-in to receive AOT services. At the end of 2019 there were 312 active AOT orders, with 489 total AOT orders active during 2019. For more information about AOT visit: <https://www2.monroecounty.gov/mh-kendraslaw.php>
- FBI Joint Terrorism Taskforce (JTTF) Partnership – This partnership was established to assess identified persons for mental health considerations. An MCOMH staff member was the first in the nation to gain a security clearance and function as a JTTF Taskforce Officer (TFO.) This effort is now considered best practice within the federal system and is being replicated throughout NYS as well as in other states. In 2019, the MCOMH staff member was involved in 101 FBI cases, with 194 since the partnership started.

Please see the MCOMH website for provider listings and more details on how we can help you or your loved ones who may be affected by mental illness, substance use disorder, or developmental disabilities:
<https://www2.monroecounty.gov/mh-index.php>

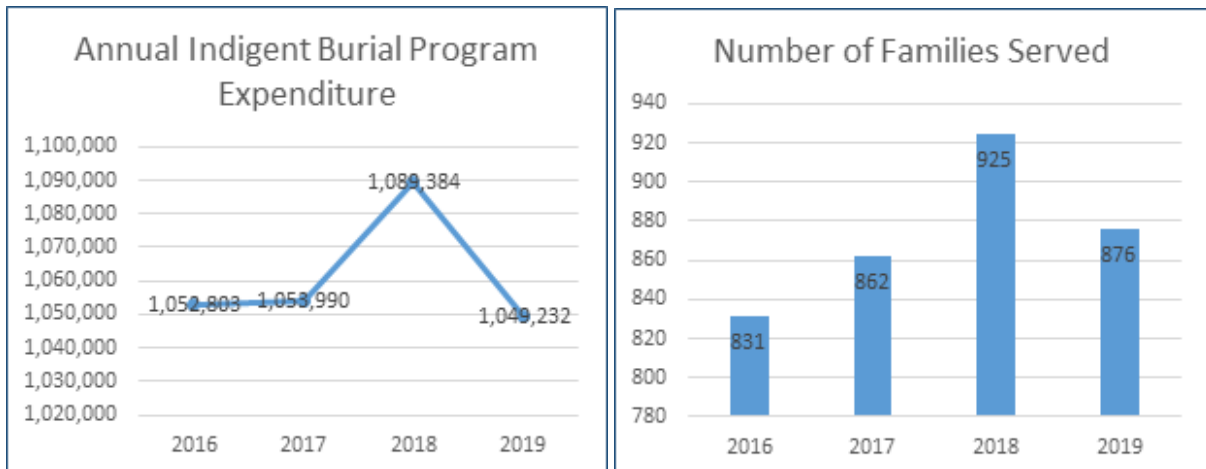
MONROE COUNTY OFFICE OF FAITH BASED AND COMMUNITY INITIATIVES

Director – James Roose

The Office of Faith Based and Community Initiatives (FBCI) manages Monroe County’s Funeral Assistance program and represents the county in interaction with the faith community and nonprofit community. FBCI is routinely involved in several initiatives, and in 2019 the focus was on assisting with outreach and information sharing to the faith community regarding the needs of the homeless, early childhood initiatives, the senior community, and refugee services.

The Funeral Assistance Program assists individuals and families who do not have the means to afford the cost of burial or cremation. Applicants who are eligible for Temporary Assistance may be eligible for a funeral assistance grant up to \$1,250. In 2019, 876 families were served through this program, which is an average 73 families each month. Our services include a monetary grant, and collaboration with local and regional funeral homes and cemeteries. The average amount utilized per family was \$1,198, for a total expenditure of \$1,049,232 for the year.

The largest initiative and achievement of 2019 was the implementation of the CarePortal. CarePortal is a technology platform that is the connection point between the needs of children and families in the community and area churches. Caseworkers determine the needs and CarePortal makes local churches aware, giving them a real-time opportunity to respond. During its implementation, the FBCI office collaborated with other Human Services departments as well as the local faith community. The goal of the CarePortal is to meet the physical needs of our most vulnerable families in Monroe County by connecting people of faith with families that need extra help.



MONROE COUNTY JUVENILE DETENTION CENTER

Director – Catherine Thomas

In 2019, the Monroe County Juvenile Detention Center opened an additional 10 bed facility to comply with the Raise the Age Initiative, making this facility one of seven Specialized/Secure Co-Ed Detention Facilities in New York State, now serving up to 31 youth at a time.

The Center houses court remanded children as well as those apprehended by police while awaiting a court appearance. Children are housed until a determination has been made by the court handling the child’s case. While the center primarily serves Monroe County, in 2019 we extended ourselves to place youth from 29 surrounding counties.

The Children’s Center served 212 youth in 2019, a substantial increase from 158 in 2018. The final phase of the Raise the Age legislation became effective October 1, 2019, so a significant spike in admissions was noted once 17-year-old youth were added to the population. In this period, there were 16 Adolescent Offender admissions, 14 of which were 17 years old at the time of admission, and 14 of those youth were from other counties.

Youth admitted can be as young as ten and up to twenty-one years of age, though most served are fourteen to fifteen years of age. Youth who are accused of committing crimes fall into three categories: Juvenile Delinquent, Juvenile Offender, and Adolescent Offender. A Juvenile Delinquent (JD) is a child under 18 years of age, who commits an act that would be a crime if it had been committed by an adult. A child who is 13, 14, or 15-years-old and is charged with committing a serious or violent felony offense, is considered a Juvenile Offender (JO). A 16 or 17-year-old who commits a felony is an Adolescent Offender (AO) and is housed in a Juvenile Detention Facility rather than being incarcerated with adults.

Status	YOUTH SERVED IN 2019	Average length of stay in days
Juvenile Delinquent	125	18.5
Juvenile Offender	24	45.3
Adolescent Offender	64	32.42
AVERAGE DAILY POPULATION: 13 Youth		
OUT OF COUNTY: 67 Youth		

While residing in the Juvenile Detention Center, youth are offered support and guidance, medical and mental health services, academics, and therapeutic activities. The Center recognizes that each youth admitted will eventually return to the community and appreciates and supports community partnerships that contribute to successful re-integration. To meet the needs of our youth, in 2019 we hired a new Coordinator of Recreation and Vocation, a Clinical Coordinator, and 12 Youth Detention Workers.

It is recognized that growth in academic skills, particularly in the area of literacy, can profoundly impact a youth's chances for success. The Center operates a full instructional program year around in collaboration with the Rochester City School District, and the Juvenile Detention Center is now a certified TASC site.

Activities in 2019 included a modified field day with a virtual reality gaming truck and Thanksgiving Family Dessert Day, celebrated with our youth and seven families. In December, Monroe County Family Court provided holiday bags filled with goodies for all detained youth.

Youth enjoy positive and therapeutic interaction through our pet therapy program. Volunteers bring animals to the center twice a month for youth to enjoy some quiet time with a companion animal. Several residents have enjoyed building and maintaining raised planting beds on the campus, and the Center was recently awarded a small grant to purchase a greenhouse to continue to offer opportunities to youth to be creative and learn new skills. We look forward to opportunities to cultivate teamwork and personal growth.



Conclusion

Monroe County Department of Human Services envisions a community where every resident is empowered to achieve his or her highest level of self-sufficiency.

We work toward this goal with an understanding that we are not bystanders of this community or of the process for change, but we are the community and we are the change agents for a better tomorrow.

Thank you for taking the time to learn more about human service delivery in Monroe County and reading the 2019 Annual Report.



Cover Photo Credit: Heather Lynch – National Adoption Day

